



HEPS Advocacy Guide

Arguments and strategies towards a school health policy

■ COLOPHON

Title

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■ FOREWORD

HEPS, PROMOTING HEALTHY EATING AND PHYSICAL ACTIVITY IN SCHOOLS

We all care about our children; they are the future of Europe. Currently, though, about one in four children in Europe are overweight. To help deal with this issue, the HEPS project has been developed to support countries in Europe to promote healthy eating and physical activity in schools in a positive and sustainable way. HEPS as a European project is linked with the Schools for Health in Europe (SHE) network and has two general aims:

1. To develop, implement and evaluate effective national policy and sustainable practices on healthy eating and physical activity in schools in all EU member states.
2. To support the development and implementation of comprehensive, sustainable and evidence-based school programmes in the member states on promoting healthy eating and physical activity based on the health promoting school approach.

Across the member states there are many initiatives on reducing the number of children who are overweight with a practical focus towards developing activities, programmes and teaching methods. However, currently no EU member state has an effective national school policy in place. HEPS aims to bridge this gap as a policy development project on a national level in each country in Europe. It is also anticipated that HEPS will assist the implementation of these programmes at school level in a sustainable way.

THE HEPS SCHOOLKIT

The HEPS advocacy guide forms part of the HEPS schoolkit that has been developed by the HEPS project. The schoolkit consists of the following six components:

1. HEPS guidelines: a set of principles on promoting healthy eating and physical activity in schools for organisations working on the national level in Europe.
2. HEPS advocacy guide: a tool assisting those advocating for the development of a national school policy towards promoting healthy eating and physical activity.



3. HEPS inventory tool: a set of quality criteria for school programmes on promoting healthy eating and physical activity.
4. HEPS tool for schools: a manual that can help schools in the member states to introduce and implement a school programme on promoting healthy eating and physical activity.
5. HEPS teacher training resource: a programme that can be used to train teachers to act as advocates for healthy eating and physical activity in schools.
6. HEPS monitoring tool: a tool for monitoring how effectively the HEPS schoolkit is being implemented in each member state.

The HEPS guidelines and the HEPS advocacy guide are tools that compliment each other. The HEPS Advocacy guide can help campaigners and advocates in the member states build a case for the adoption of a national school health policy for the promotion of healthy eating and physical activity in schools that is based on the health promoting school approach. ■

■ CHAPTER 1

INTRODUCTION



There is growing concern regarding the health and health behaviour of children and young people across Europe. Among the main concerns are unhealthy eating and the lack of physical exercise which contribute to the continuously rising levels of obesity. Promoting healthy lifestyles in schools is becoming one of the main strategies for dealing with this major public health issue.

Health and education are two significant factors determining the health and quality of life of children and young people. In a similar way, the health and education level of a country's population affects the development, economy, culture, environment and well being of that country. This is why health and education figure amongst the top priority issues on national and European political agendas.

The HEPS project supports the development of school health policies with regards to promoting healthy eating and physical activity. HEPS supports the health promoting school agenda by being a policy development project on a national level across Europe for the

promotion of healthy eating and physical activity in schools. The European health promoting school approach focuses on ways in which schools can become healthy learning and working environments for pupils and teachers. HEPS argues that the prevention of health risk factors, such as childhood obesity and overweight, through the health promoting school approach can effectively and efficiently change and improve children's lives.

1.1 WHAT IS ADVOCACY?

Advocacy is a set of targeted strategies, actions and arguments directed at decision-makers and other key stakeholders in support of a specific policy issue. Advocacy is used when policy reform or change is conceived as a necessary step towards promoting certain interests and goals. It is the process that aims to bring real change in people's lives through a shift in policy.

In the case of HEPS, advocacy refers to strategies and arguments for health promotion in schools with a spe-

cific objective to encourage and build support for the adoption of a policy for healthy eating and physical activity in schools.

Policy refers to a deliberate plan of action to guide decisions and achieve positive, rational outcomes with regard to health promoting schools. The plan of action may involve the allocation of resources, commitment to certain areas of interest and a set of rules and regulations that dictate the implementation framework. A policy can be developed either on a national or international level, involving governments and international organisations, or on a local/regional level, involving municipalities, regional authorities, school boards, schools, local health and educational organisations.

1.2 MAKING A CASE FOR HEALTH PROMOTING SCHOOLS

The framework of a health promoting school enables the development of effective and comprehensive programmes for health promotion. The term “health promotion” includes both prevention and education. This means that when a school becomes a setting for health promotion, it does not only target health risk prevention issues, such as childhood obesity and overweight, but it also aims to become an empowering healthy setting for living, learning and working for both students and teachers. A health promoting school endeavours to empower students and teachers with knowledge and to encourage participation and positive action for a healthier life.

The health promoting school works towards creating a safe school environment that is friendly to the child, young people and school staff. It encourages them to actively participate in all school activities and processes, including problem solving, and to cooperate in the promotion of healthy behaviours. The health promoting school helps develop social skills, self-confidence and self-esteem, while it also helps pupils to improve student achievement and action competence. It promotes democracy, equity and social inclusion as it encourages all pupils to participate in the class and in the school learning process. Pupils learn how to care about themselves, their peers and their environment in a practical way by getting involved in action research focusing on daily issues such as healthy eating and physical activity, emotional health and health risk factors.

The health promoting school approach helps to link health and education in effective and sustainable ways, as it supports and empowers children and young people to become healthy and competent.

Furthermore, there is evidence that programmes on specific health topics can be more effective if introduced through the health promoting school approach. But this alone may not be sufficient. Policy makers need a range of good reasons to support health promoting school approaches. Decision-makers need to be convinced that investing in the development of health promoting schools is worthwhile and that it parallely contributes to policy objectives in related sectors. However, this development should be sustainable so as to withstand political, economic and social change. Advocacy is necessary to support this.

Stakeholders from health, education and other sectors involved either in supporting or delivering health promoting school programmes need to be involved in advocacy, as they are instrumental for advocating for investment in health promoting school programmes. ■

■ CHAPTER 2

ABOUT THE HEPS ADVOCACY GUIDE

2.1 AIMS AND TARGET GROUP

The HEPS advocacy guide aims to influence the direction of policy regarding the promotion of healthy eating and physical activity through the health promoting school approach. It also seeks to support those working for health promotion in schools at a policy level. When policy changes and reforms are required, then advocacy can indicate the process of change and the manner in which this can be made effective. Regardless of whether actual change takes place or not, in the short or long term, advocating for school health promotion means actively participating in the development of better schools for our children and young people.

- • The HEPS advocacy guide supports those involved in campaigning for policy change in school health promotion, and specifically for healthy eating and physical activity in schools across Europe.
- The HEPS advocacy guide offers solid arguments, actions and strategies that can be used as tools for making a case for policy change in the broader area of school health promotion.
- The HEPS advocacy guide explains the “why”, “how”, “with whom” and “when” advocacy steps that are linked to the HEPS project.

The primary target group of the guide are the national coordinators and stakeholders of the Schools of Health in Europe (SHE) network. The SHE network focuses on making school health promotion a more integral part of policy development, recognizing the importance of both the education and the health sector in Europe. The guide can also be used by stakeholders acting within the health promoting school agenda, such as school boards, school managers, politicians, non-governmental educational and health organizations, research institutes and the media.



2.2 HOW TO USE THE ADVOCACY GUIDE

The HEPS advocacy guide helps stakeholders involved in health promotion in schools with the process of advocacy. It suggests advocacy strategies and methods for initiating an effective process that can bring about policy change. In addition, it offers specific examples of advocacy approaches and arguments in order to assist in the development of a country appropriate advocacy strategy. The guide can be used as a resource that offers:

- An overall understanding of the advocacy process;
- Specific arguments and actions with the objective to guide and inspire the development of an individual advocacy approach.

Although the guide provides specific proposals and ideas, it is ultimately up to each individual actor to make the appropriate choices. The best way to use the guide, therefore, is as a map that can help you navigate through the advocacy process for health promotion in schools. ■

■ CHAPTER 3

THE ADVOCACY PROCESS FOR HEPS

3.1 IDENTIFYING AREAS FOR ADVOCACY ACTION

Advocacy works on many different levels and involves diverse actions in a number of different areas. For example, when advocating for a national school health policy for the promotion of healthy eating and physical activity in schools you will need to inform policy-makers and stakeholders and also build public support for your cause, amongst other actions. However, in order to achieve each of these goals you will again need to take a number of different actions. Therefore, the achievement of each goal will require a set of coordinated activities, which may overlap or complement each other.

See, for example, the table below:

| → | Goal | Area of activity |
|---|--|--|
| | Influence policy-makers | Resources Training Communication |
| | Get your issue on the agenda | Media Campaigning Funding |
| | Change policies Inform policy-makers and stakeholders | Allies & networks |
| | Build public support for your cause | |
| | Overcome obstacles | |

The advocacy process may be multi-dimensional but follows a specific structure. A clear understanding of this process enables a better organization of the necessary steps to be taken and improves priority setting.

The advocacy process is circular rather than linear and begins with the preparation steps. The process involves:

- Observing the current policy environment and policy-making mechanisms;
- Setting aims and developing a plan of action, strategies and arguments;
- Step-by-step implementation of the plan, including practical moves towards influencing policy-makers and promoting the actual policy change;
- Evaluating the advocacy strategy and approach while looking for evidence of progress;
- Making adjustments and improving the advocacy approach in order to continue with the next advocacy cycle.

This circular approach means that your actions and strategies follow a cyclical time span. The end of each phase marks the beginning of the next one, spiraling upwards into sustainable positive change. Remember that advocacy means continuously planting seeds for policy change and improvement over a period of time so that positive change in school health promotion is achieved in a sustainable manner.



Diagram 1: The advocacy cycle

3.2 PREPARATION STEPS

Each country is unique. European countries have different policy environments and over the years have developed their own systems of policy-making that relate to health and education. The first step, therefore,

is to achieve an understanding of how the policy-making process regarding health promotion in schools works in your country.

After analyzing the policy process, you should identify the specific needs of your country in this area and then accordingly you will be able to determine your short- and long-term goals. The remaining steps of the preparation stage include selecting your audience and preparing your communication material. The preparation steps should result in the development of a clear action plan to be implemented in the next action-oriented stage.

3.2.1 Analyzing the policy process

Analyze the policy process and identify the actors involved in decision-making in your country. A good method for getting a clear view of how plans of action, regulations and decisions are adopted in your country is by differentiating between national, regional and local policies. Observe the current processes of policy formation and think about how these decisions are made and by whom.

Here are some questions you might want to ask yourself about your own country:

- What are the national, regional and local policy procedures?
- Who are the key decision- and policy-makers and stakeholders?
- Are there any existing policies that can support or influence your goal?

→ Read the following examples and think about which case applies most to your country:

Some European countries have a centralized national policy operating through government institutions, for example, the Ministry of Education and the Ministry of Health, which develop policies and specific health promotion programmes for schools. *In this case, advocating at a national level and influencing government officials is crucial.*

Other European countries, in the absence of an overall national strategy, implement health promoting school activities through local and regional networks and other structures. In this case, the policy-making process involves school boards and school directors as much as the relevant government Ministries. *Advocating at a local level is very significant in this case.*

In many European countries there is no overarching national policy for school health programmes but work is being done on all levels in a mixed approach. There are local/regional health promotion activities for a number of schools and national policies and mandates for all schools across the country. *In this case, advocacy is necessary on all three levels: local, regional and national.*

3.2.2 Identifying the real needs

To a certain degree many countries have integrated health promotion in schools. However, there are wide variations between countries regarding the effectiveness of existing school health promotion policies. The issues of healthy eating, physical activity and their role in wellbeing reach schools in different ways across European countries.

Assess the situation in your own country and ask yourself how can HEPS support further progress in this area.

→ Read the following examples and think about which case applies most to your country:

Some countries have developed national policies for promoting healthy eating and physical activity in schools. This may mean that the government funds and encourages related projects or that the relevant Ministries have developed specific programmes, which may be implemented nationally, regionally or locally. *To increase effectiveness, these programmes and other school health related activities should be embedded within a health promoting school framework.*

- Some countries already have an effective system in place for implementing school health promotion in relation to healthy eating and physical exercise. *In this case, it is important to ensure local level support for implementation and to guarantee project evaluations and adjustments.*

- In many European countries, there is little evidence of successful policy implementation with regards to healthy eating and physical exercise in schools. This is due to many factors such as insufficient resources, lack of training, conflicting priorities, lack of collaboration between stakeholders. *In this case, there is need to increase pressure for policy implementation, including monitoring and evaluation mechanisms, and to provide incentives for successful implementation.*

3.2.3 Determining short-term and long-term goals

It is important to make a list of the broader goals to be achieved through advocacy. Once clarified, you will be able to determine the short-term and long-term objectives that will be part of a realistic advocacy strategy. Separate the goals from each other and prioritize them according to the real situation.

Here are some examples of short- and long-term goals along with proposed key actions.

Example of a short-term goal:

“To inform the policy-makers that work in the area of healthy eating and physical activity about HEPS and the SHE network”.

Key action:

A key action here would be to ensure that policy-makers are provided with regular updates through the SHE and HEPS newsletters and/or through workshops, press releases and inputs at relevant meetings.

Example of long-term goals:

- “The government should adopt a written policy to promote healthy eating and physical activity in all primary and secondary schools by the end of 2012”.
- “To introduce the HEPS agenda and get it onto the governmental agenda by the end of 2012”.

Key action:

In both cases a key action would be to establish a coalition or strong working relationship with the Ministry of Education and the Ministry of Health; and possibly other Ministries, such as the Ministry of Youth, Ministry of Agriculture. Then agree on common priorities and objectives and set a timeframe within which these can be realistically achieved. If school policies are formed regionally or locally in your country then follow similar steps but at a regional and local level.

3.2.4 Selecting audiences

Identify the key stakeholders in the policy-making process and other influential bodies and organizations. Analyze the audience to whom the core message will be communicated and choose the appropriate approach for each one. Start with those who already support you.

The appropriate approach will depend upon the characteristics of your audience, such as:

- Level of knowledge, e.g. well informed or uninformed;
- Role or position, e.g. Minister of Education, school board member;
- Interest, e.g. personal, professional;
- Standpoint, e.g. supportive or reluctant to engage.

3.2.5 Communicating your message

Once you have selected your target audiences, the next step is to prepare the message you want to communicate to each audience. Prepare a case for each situation and use information and data to build your case. The HEPS project and the SHE network provide direct support and access to resources.

In order to advocate the issue, identify the problem and the resources available, inform policy-makers and highlight solutions and potential benefits.

The resources you will need vary in kind and might involve the following:

- Research findings and data on the issue;
- Human resources;
- Technical and material resources;
- Financial support;
- Influence.



First collect reliable information that helps present the problem to be tackled with the suggested policy change. Make sure you make use of the necessary resources in order to build your argument for policy change.

→ For example, if you are advocating for a policy that will ensure and protect healthy eating and physical activity in schools, you can argue that such a policy not only deals with the issue of preventing obesity but also has advantages in terms of student attainment and achievement. Research data can be found to support such arguments. [see www.schoolsforhealth.eu].

- Stick to your message.
- Test it with your target audience.
- Reframe the debate/question to make your message the answer.
- Give a unique perspective to the issue that no one else is reporting.
- Listen well to your target audience and have a positive attitude.

The following fact sheet may be useful. This kind of information may have an influence on national policy-makers and even more so on those operating at a school level. Remember to adjust your information and communication to fit your audience.

Some national policy-makers may be more interested in listening to their specific national situation rather than a European perspective. The WHO/HBSC information can be used to support this (www.hbsc.org).

Make sure you present your information in a clear, simple and concise way that will sustain your audience's attention.

→ Tips for effective communication

- What are you trying to say? i.e. be clear.
- Keep it short and simple, i.e. learn to say your message in 2 min.
- Adjust your message to each target group.

→ FACT SHEET FOR HEPS ADVOCACY

- One out of four children in Europe are overweight.
- According to the European Commission Green Paper (2005), the number of EU children affected by overweight and obesity is estimated to be rising by more than 400.000 a year, adding to the 3 million of obese children across Europe (part of an estimated 14 million-plus overweight EU population).
- Overweight and obesity numbers rise significantly from childhood to adolescence. Therefore it is important to tackle the problem in its initial stages and through prevention.
- Childhood overweight is related to eating habits, physical exercise and mental health. Unhealthy diets and a lack of physical activity lead to a range of problems and diseases.
- Key factors that contribute to these rising numbers are socioeconomic, environmental and media-related. Some of the underlying factors include: sedentary lifestyles, heavy marketing of energy dense foods, high intake of added sugar and sugar sweetened drinks, social inequalities, lack of information and lack of access to healthy food and fitness. In Western Europe, most overweight children seem to come from poorer socio-economic environments.
- Investing in health promoting schools provides a systematic sustainable and structured approach for school health related activity.
- A whole school approach has been shown to be most effective in dealing with health promotion in the school environment.
- Children learn better and teachers work better in a health promoting school.

3.2.6 Developing an advocacy plan

Now that you have specified your advocacy goals, chosen your audience and selected information to support your core message, it is time to put it all together and

make a clear advocacy plan. Your plan should be realistic and should have a deadline setting a time when you expect to witness the fruits of your advocacy activities.

Consider the following example, which outlines an objective, the audience, the message to be used and the deadline. It then goes on to suggest specific activities to be implemented so as to achieve the above.

Objective: Getting health promoting school programmes into the government agenda for healthy eating and physical activity by the end of 2012.

Audience: Ministry of Health and Ministry of Education, health promoting school organizations, other stakeholders who can become allies in putting pressure on policy-makers, journalists, school boards.

Message: We need to promote healthy eating and physical activity in our schools following the health promoting school approach because this approach supports the implementation of a school health policy in an effective, democratic and sustainable manner.

Deadline: In two years from now the Ministries should be aware of and actively support the HEPS project; the national and regional health promoting school network; the SHE network and schools that wish to work towards implementing health promoting school programs on healthy eating and physical activity.

Activities:

- Translate the core message of HEPS and SHE (see www.hepseurope.eu) into your own language and inform Ministers, politicians and government policy-makers about these initiatives. Present your cause in a way that makes them feel it is also their cause and ask them to support it.
- Write a short article about HEPS/SHE and healthy eating and physical activity in relation to health promoting schools and send it to potentially interested journalists (find out who reports on issues of public health and education in the press or radio), educational-health related journals and magazines, internet forums on health promoting schools or school network websites. Contact stakeholders by phone, mail or meet them in person. Select the communication method that best fits your target group and your culture.
- Build influence and allies by making yourself available in public discourse.
- Organize an open one-day workshop on health promoting schools, healthy eating and physical activity with the support of your organization (and possibly

other relevant collaborating organizations) and invite those you need to influence and those who could help you form an advocacy coalition. This can be done on a low budget; find a place that can host the workshop through an organization or the municipality or book a university lecture theatre. Invite colleagues and stakeholders who also advocate for the same cause to participate as speakers.

- Give talks on health promoting school advocacy, HEPS and the SHE network by using the HEPS advocacy guide, the HEPS guidelines and the HEPS factsheets.

Brainstorm and think of other activities to add to the list. Prepare a network of allies who may already be colleagues or acquaintances to help in the implementation of your advocacy strategy. You may decide to also get them involved in the planning process. This can work in positive and empowering ways as it can also help overcome future challenges.

3.3 IMPLEMENTING STRATEGIC ACTION

Social actors involved in advocacy and policy change for health promotion in schools should be aware of the following four levels of strategic action. For maximum impact, advocacy activities should be implemented on all four levels. These are:

- 1) **Local level:** Begin with a “grassroots” approach moving from the school and community level upwards to the regional and national level.
- 2) **Regional level:** Work with municipalities, local and regional authorities to support local and regional school policy.
- 3) **National level:** Affect national policy. This involves persuading politicians, civil servants and government officials about the importance of healthy eating and physical exercise policies and getting them involved in HEPS.
- 3) **Networking level:** Create horizontal networks that can act for policy change and implementation or create links with already existing national and regional networks.

Take into consideration the particular situation in your country and begin with the environment close by. Your

priorities should be set out in accordance with your advocacy goals. Also pay attention and consider these parameters: when is the best time to act; with whom; who is the target; what is the goal in each instance.

→ Consider the following examples of actions for each level:

Actions at a local level

- Work together with existing local structures (school boards, community, local networks, associations, etc).
- Disseminate information through local agents (community, NGOs, schools, local organizations).
- Empower schools to become active local agents of change in the community and to ask for support from national and regional institutions.
- Encourage and support pupils and parents to participate and engage with the issues.
- Involve other relevant actors, e.g. school caterers.

Actions at a regional level

- Encourage and organize campaigns for healthy eating and physical activity.
- Promote co-operation with municipalities, local and regional authorities.
- Work together with local networks and create links.

Actions at a national level

- Agree upon a set of priorities with other key stakeholders and partners.
- Ask stakeholders to support you with the necessary resources.
- Ensure that national institutions support health promoting schools at a regional and local level.
- Provide information about HEPS and ensure future accessibility to the HEPS schoolkit.
- Contact policy-makers and stakeholders and discuss the benefits of investment in this area.

- Engage the media (radio, TV, press, internet) in the issue of health promoting schools and HEPS.

Networking actions

- Set up a communication and action platform for information exchange and joint activities with various stakeholders, NGOs, schools, local authorities, parents etc.
- Create a website, make use of existing websites or national and local information points.
- Use the internet to create links between stakeholders and support groups.
- Create links with the relevant organizations that can support your advocacy (e.g. organizations promoting physical exercise).
- Link existing policies and structures (e.g. sustainable schools, health promoting schools and physical activity, school fruit schemes, EPODE etc.)

3.4 EVALUATING YOUR ADVOCACY APPROACH

The evaluation stage of the advocacy process is very important; it helps to identify signs of progress and determine whether or not the policy goal and objectives have been successfully achieved.

Evaluation is about systematically and objectively analyzing your advocacy performance and assessing your approach. It can be an empowering tool for maintaining motivation for further advocacy and if used wisely it can improve the effectiveness of current and future advocacy plans and activities.

→ When developing an evaluation plan you may want to consider the following:

- Identify and agree what needs to be monitored and evaluated.
- Decide upon how, where and when the information will be collected.

- Agree upon who will be responsible for collecting and analyzing the necessary information/data.
- Identify and agree measurable indicators of success.
- Decide to whom the evaluation findings will be presented and how.
- Based on the outcomes of the evaluation, review and appraise the situation and undertake actions to improve the advocacy approach.

3.5 IMPROVING THE ADVOCACY STRATEGY

The evaluation process should lead to adjustments and improvements of the advocacy plan. It can also point towards new goals and objectives to be reached during a new advocacy phase or cycle. For example, the evaluation process might point to the need for an improved communication strategy, more targeted actions, new goals or just better timing. Make sure you take all outcomes into consideration and that you remain creative with the process. Improve your strategy and continue to plant new seeds for further change. ■

→ Preparation steps for advocacy

- Analyzing the policy process
- Identifying the real needs
- Determining short-term and long-term goals
- Selecting audiences
- Communicating your message
- Developing an advocacy plan

■ **CHAPTER 4**

TOOLS FOR HEPS ADVOCACY

4.1 DEVELOPING ADVOCACY ARGUMENTS

In order for your advocacy to be successful you will need to develop strong arguments. Advocacy arguments should always include within them persuasive responses to possible questions. In addition, where possible these responses should be evidence or practice informed so as to prove validity.

A question, for example, that you might have to answer at some point is: “Why should we invest in policies that actively promote healthy eating and physical activity in schools?”

Your arguments need to be thoroughly built to incorporate all the important points of the issue at stake.

In order to persuade stakeholders to provide support for a cause, a good advocate needs to introduce the case for policy change and action by presenting the benefits and by limiting, although acknowledging, any disadvantages. Reference to any disadvantages or limitations conveys credibility and concern for the opponent’s point of view.

- **For example, take the following statement:**
- *“Health promoting schools is just another project that takes away from the real business of schools”.*
- **An argument/response to this statement that addresses this particular concern could be:**
- *“Health promoting schools is a framework and approach, which when implemented through a whole school approach can benefit both health and education, therefore, helping improve school business. It may take time to implement but it has been done elsewhere, and has proven very worthwhile”.*

An advocate needs to prepare potential questions and answers in order to support the core message and influence stakeholders. It is an advantage to think in a

solution-focused way, always finding and proposing a range of solutions.

- **For example:**
- **Question:** “What are the benefits of supporting HEPS?”
- **Answer:** *“HEPS offers an evidence informed approach to health promoting schools in Europe, which is reliable and effective. It offers your country and other European countries tools for promoting and implementing healthy eating and physical activity programmes with little additional cost. Each country can be provided with the necessary resources and support to implement a national/regional policy. Participating countries can also become members of an information exchange network so as to share and exchange experience and knowledge with other European countries.”*

The above answer presents the benefits of supporting HEPS in a concise manner while incorporating a number of different arguments in favour of the project.

The next section provides some useful examples of arguments that can be used when advocating for the adoption of a national policy and for the use of the health promoting approach.

- **Arguments why national policy is the best way ahead**
- If implemented, monitored and evaluated national policy can:
- promote healthy lifestyles through collaboration among ministries, health and educational organizations and the media.
- direct, inform and influence local authorities/regional governments to ensure that healthy eating and physical activity are key areas of development at a local and regional level.

- influence other related organizations and agents to contribute to this approach.
- deliver a coordinated and coherent development programme.
- implement the health promoting schools programme in systematic and sustainable way.
- impact on all young people attending school and can, therefore, help reduce social inequalities.
- identify and allocate funding and resources.
- identify the need for training, research and evaluation.
- have a greater impact on parents' behaviour regarding healthy eating and physical exercise.
- better guarantee the sustainable development and implementation of school health promotion.

At a national level, a government that takes the health and wellbeing of its future generation seriously should:

- *integrate school health promotion into the educational system.*
- *acknowledge the contribution of health to school improvement.*
- *provide conditions for the development, realisation and integration of health promoting schools.*
- *recognize that the health promoting school approach is the most sustainable way to introduce and implement healthy eating and physical activity and other health issues in schools.*

→ Why use the health promoting school approach?

The health promoting school approach:

- promotes the health and wellbeing of students.
- enhances the learning outcomes of students.
- upholds social justice and equity.
- provides a safe and supportive environment.

- encourages student participation and empowerment.
- links health and education issues and systems.
- improves care for pupils with a focus on prevention.
- creates an improved atmosphere in school.
- engages pupils and parents in decision-making processes.
- addresses the health and wellbeing of all school staff.
- enhances collaboration with parents and the local community.
- integrates health into the school's ongoing activities, curriculum and assessment standards as part of the school plan.
- sets realistic goals built on accurate data and sound scientific evidence.
- seeks continuous improvement through ongoing monitoring and evaluation.
- improves collaboration among local/regional school-supporting agencies.

→ What are the benefits of a national policy on healthy eating and physical activity in schools that is based on the health promoting school approach?

- **Short term:** healthier, more active children; improved learning outcomes.
- **Medium term:** reduction in overweight among children and young people; improved lifestyle behaviour.
- **Long-term:** reduction in illnesses such as coronary heart disease and less burden on national health and social services.

4.2 LEARNING FROM OTHER EUROPEAN COUNTRIES

Learning from the experiences of other countries can be inspiring and helpful. The following three cases from Wales, Scotland and Austria illustrate if and how advocacy for health promoting schools has helped make progress in this area. It is hoped that these examples

will provide some useful information for your own advocacy work and that they will encourage you to ask yourself similar questions and find possible solutions for your country.

4.2.1 The example of Wales

Policy background and key developments

A pilot health promoting school project was implemented in Wales between 1995 and 1997 as part of the European Network of Health-Promoting Schools (the former Schools for Health in Europe network). The programme involved the participation of twelve schools and was implemented with local support.

Following the completion of this project and a 1998 conference, a task group (1998 – 1999) was put together so as to consider the way forward. The task group recommended the establishment of the Welsh Network of Healthy School Schemes, which was launched in 1999 with the objective to encourage the development of local healthy school schemes within a national framework and to promote initiatives to improve nutrition and promote physical activity in schools.

Following the establishment of the Welsh Network of Healthy School Schemes, several local areas also decided to set up their own healthy schools schemes on the basis of their previous involvement in similar projects. Local support and practice was, therefore, in place and when funding became available following devolution it was possible to capitalise on the work already done. Funding was offered to health and education partnerships in each local authority in Wales, with a requirement that the majority of the funding be used to appoint local health school co-ordinators to work with schools.

The Food and Fitness policy

As a result of previous initiatives, including the above, on 29th June 2006 the Welsh Assembly Government launched the Food and Fitness Implementation Plan for children and young people; a five-year implementation plan that builds on existing national strategies, initiatives and local programmes and provides a framework for new actions.

The example of Wales highlights the importance of good timing combined with the use of existing resources. When the issue of Food and Fitness for children and young people reached government level and was to be promoted, the health promoting school network

in Wales was sufficiently established. Its further development, with a strengthened focus on food and fitness, was, therefore, an action that government officials were happy to propose and endorse.

Some other key aspects of the Wales case that have been considered as playing a positive role are:

- Relevant individuals were involved in all stages of planning and development.
- Key findings were disseminated preparing the way for further work.
- A clear plan was prepared in advance, which was ready to capitalise on opportunities for support and funding.
- Staff were trained on a regional level and were put in place to work with schools.

In its recent review of the implementation plan (2008), the Welsh Network of Healthy School Schemes reported on the positive outcome of the plan but pointed out the need for improved advocacy actions and specifically for:

- Further support from individuals and agencies, including leadership.
- Practical administrative and management support.
- Training.
- A realistic timeframe, including the time required for change to be assimilated.

Leadership

Administrative leadership at national level has been consistent. A steady commitment to the healthy schools concept and a clear vision of what healthy schools can achieve has characterised the development of healthy school schemes in Wales.

At local level, the status of the healthy school co-ordinators has been an important parameter affecting their ability to advocate the scheme to senior managers and councillors. The head teachers' professional commitment to their pupils has also acted as an important driver of health promotion in schools, and has predated the schools' membership in their local schemes. Situations, however, differ; for example, leaders in secondary schools appear to have to work harder than those in primary schools to advocate the scheme.

Another encouraging development is that pupils have also been emerging in some schools as important leaders of change.

Administrative and management support

The support of the Welsh Assembly Government for



local schemes provides the latter with authority and credibility and facilitates processes and developments on the local level. However, there is need for a stronger policy framework at the national level and increased management support.

Strong management systems at the local authority level are important for supporting the development of local schemes, which are viewed by the local authorities as important frameworks within which to deliver a broad range of health improvement interventions in schools. Local schemes are also valued by the participating schools as they offer a specific framework to work with and also offer staff the opportunity to participate in trainings and exchange experiences with other school staff.

Training

It is recommended that the initial national teacher training course incorporates the issue of healthy schools. In addition, greater consistency is required regarding the levels of training offered by local schemes and the involvement of non-teaching staff.

Realistic timeframe

There is some evidence that a 'critical mass' has been reached and, therefore, the target of having all schools actively involved in the plan by March 2010 appears realistic. However, one must take into consideration the fact that schools require time to embed actions, and to review and consolidate early actions as they move through the scheme.

4.2.2 The example of Scotland

Health background

Poor diet is a significant contributor to Scotland's poor health record. Improving children's diet can make a major impact on the health of children with beneficial outcomes for educational attainment and improved health in later life. Scotland's children also suffer one of the worst records of dental decay in the western world with only 45% of 5 year olds free from dental caries (in 1999-2000). Levels of tooth decay are strongly linked to deprivation.

Policy context and other key developments

In November 2001, the Ministry of Education, the Ministry of Health and Community Care and the Ministry for Social Justice announced plans to improve school meals for all Scotland's children as part of the Scottish Executive's drive to improve the health and social wellbeing of children in Scotland.

The Scottish Executive then made a commitment to eradicate child poverty in a generation and recognised the association between poverty and ill health. Action was to be focused on closing the opportunity gap by targeting additional support where it is most needed and giving all children the best start in life.

The background to the decision to improve school meals lay in the Food in Schools Conference held in May 2001, which was supported jointly by relevant institutions. A significant outcome of the conference was agreement on the need for an overarching national strategy for school meals to include nutrient standards and dining facilities – Hungry for Success.

The Hungry for Success policy: building onto existing mechanisms

In developing Hungry for Success the importance of setting the work on school meals in the wider context of other national initiatives has been fully recognised. Such national initiatives include the Standards in Scotland's Schools etc Act 2000; the National Priorities for Education; the establishment of the Scottish Health Promoting Schools Unit; the developing Schools Estates Strategy and the European Directive on Drinking Water in Public Buildings. The recommendations of the Hungry for Success policy were set in a wider context, while also taking into consideration those other measures already in place and aimed at improving the health of children, namely:

- The existing school meals service improvements

- across Scotland;
- The whole-school and whole-child approach to improving health;
- The Scottish Healthy Choices Award Scheme promoting healthy food choices and including school catering services;
- The Scottish Community Diet Project Breakfast Club toolkit;
- The European Network of Health Promoting Schools projects.

The vision behind the Hungry for Success initiative was one of a partnership between children/young people, school, family and the community in offering access to attractively presented food of an appropriate nutrient composition within schools and in developing a wider understanding of food, nutrition and healthy lifestyles, which can inform children's choices and eating habits within and out with school and throughout life.

A panel was formed bringing together experts from all relevant areas, their remit being to provide Ministers with recommendations, and a fully developed implementation and monitoring strategy to:

- Establish standards for the nutritional content of school meals;
- Improve the presentation of school meals to improve general take-up;
- Eliminate any stigma attached to taking free school meals.

A number of activities were undertaken to ensure stakeholder involvement, which was essential in ensuring the progress and success of any future changes. These included:

- An audit of current practice;
- Informal consultations;
- Visits to local authority/council regions/government;
- Workshops;
- Written consultation exercises;
- In depth discussions;
- Pupil consultation.

The Hungry for Success Report produced 23 recommendations and requested a fully developed implementation plan based on the following seven key principles:

- Partnership working;
- Creating a positive ethos;
- Pupil consultation;
- Managing the process;
- Incentives to improve uptake;
- Influencing choice;
- Eliminating stigma.

From 2002 both primary schools and secondary schools in Scotland have worked to ensure the recommendations of Hungry for Success have been realised. Funding was released from the government to help realise the goals of Hungry for Success, and as such local Hungry for Success Steering Groups have been established, and coordinators appointed. The developments have been monitored by Her Majesties Inspectorate of Education building this into ongoing inspections and reported on through established mechanisms such as the published reports. Examples of local good practice have also been highlighted through conferences and publications, such as Hungry for Success: Food for Thought (www.hmie.gov.uk/documents/publication/hmiemihs.html).

The Schools (Health Promotion and Nutrition) Scotland Act 2007 has built on Hungry for Success by enshrining the health promoting school and nutritional standards in legislation.

4.2.3 The example of Austria

The example of Austria illustrates how an understanding of the policy environment and process in a country is crucial for the development of an appropriate advocacy strategy.

National and regional policy background

Austria has a federalist political system, which means that the governing of schools is divided between the state and the federal provinces. The highest inspectorate for schools is the Ministry of Education. The state is in charge of legislation, while the execution of laws is divided between the state and the provinces. According to the Constitution, the state is in charge of secondary education, while the provinces are in charge of primary education. This means that projects and initiatives for school health promotion are developed on two different levels and are of two kinds: national projects and regional projects.

Policy change by a national strategy project

In 2007, the “Healthy School” initiative was launched as a joint programme of the Austrian Federal Ministry of Education, Arts and Culture; the Austrian Federal Ministry for Health and the Main Organisation for Social Security Institutions with scientific support from the Ludwig Boltzmann Institute Health Promotion Research. It is the first national initiative for school health promotion in Austria that the educational and the health department as well as the social security institutions have jointly been working on. This cooperation was the result of a broad political concern regarding the health of young people in Austria.

The main goal of this project is to develop a strategy for health promotion in schools. Quality standards as well as recommendations for action have been developed covering seven areas: health management; teaching and learning; nutrition, physical activity; psychosocial health; addiction; physical environment and safety. Two of the main recommended interventions have been trainings for teachers and the establishment of health management in schools.

From November 2008 to February 2009 a pilot training course on health promotion was held for teachers and school directors. The participants of 21 Austrian schools received theoretical information and were also supported in their first steps of implementation. Furthermore, a database for external service providers for school health promotion was launched to help schools find adequate support. All the included interventions were assessed in accordance with quality standards for health promotion offers and were rated by the schools through the database. The project was completed in March 2009 and its evaluation outcomes are expected to determine future initiatives.

Due to the Federalist system in Austria, the national strategy is to be implemented on regional/provincial levels by linking it to existing health promotion initiatives and networks, which differ from province to province.

In order to illustrate the differences in dealing with school health promotion between the nine provinces in Austria, the situation in three provinces is described below:

- In Lower Austria, the Board of Education has a project coordinator that is devoted to health promotion in schools. He is the contact person for schools, the provincial government, as well as the state. The province of Lower Austria is currently discussing the possibility of financing additional working hours for teachers that work as health coordinators at schools.
- The province of Tyrol also has a school health promotion coordinator. Additionally, in the Tyrolean University of Education a coordinator is in charge of organising health promotion related training for teachers. These two coordinators work together and can provide a broad range of courses for teachers.
- In the province of Vienna, over 50 schools are members of and implement health promotion programmes in their respective schools. The Viennese Network of Health Promoting Schools is part of the health promotion programme of the City of Vienna and is commissioned by the Health Department of Vienna. The Vienna School Board is also a cooperation partner.

Things to learn from the Austrian example

- In federalist states, such as Austria, it is very important to focus on the provinces/federal states and the regional government and to primarily advocate on a regional and local level.
- Coordinators on the regional level can be important stakeholders and should be involved in the advocacy process regarding implementation.
- Training in school health promotion for teachers and school directors is an essential step for the successful implementation of health promotion in schools. Teachers then become an additional resource for the advocacy process to promote policy change.
- On a national level, advocating for the establishment of health management in schools is more broadly connected to quality management and development in schools. For example, in Austria one of the advocacy objectives has been to integrate the health promoting schools approach into current developments and initiatives that aim at improving school quality as such, rather than promote school health promotion as an “add-on”. ■

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