

Centre for Community
Child Health



Building it back different

Schools as multi-opportunity communities

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Building it back different: Schools as multi-opportunity communities

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Building it back different: Schools as multi-opportunity communities

Students who are healthier are better learners. And in turn, better learners are often healthier, with greater overall wellbeing into their adult years.¹⁻³

Most of us agree that health is the most important thing in life. If so, then health should be an essential 21st century skill that is a core outcome of Australian schooling. Students should leave school healthy, happy and engaged life-long learners.

COVID-19 highlighted the well-established links between health and learning. But even before COVID-19, key indicators showed inadequate and declining outcomes in education, wellbeing and health for many Australian children, particularly for the most vulnerable.^{4,5}

Although well intended, health and wellbeing provision in schools often comes as a one-off program, project, or course; or as a reaction to an already existing health and wellbeing issue.⁶ In most schools, and in many families, children learn early on that intellectual and academic achievement is valued and rewarded before anything else.

Yet health is the most important thing in life. Education succeeds when health is taken care of. We need a whole new vision of what school could be if we wish to provide every child with the education they deserve.

We now have the chance to reimagine schools, focusing on the whole child's health, wellbeing and learning. We can all be involved in this conversation. How can schools be multi-opportunity platforms to ensure equitable life outcomes for all? How can schools best help children thrive? We hope this paper inspires you to think and talk about this with us.





Five challenges to meet in the post-COVID world

This is what is up against us at the moment.

Mental health and wellbeing issues

Teachers claim one of the biggest challenges that schools are facing is the poor mental health of children.⁷ Pre-pandemic, one in seven 4-17 year-olds was found to have a mental disorder.⁷ Anxiety, depression and conduct disorders are leading mental health concerns.⁸ Students with mental ill-health fall progressively more behind their peers,⁹ with likely ongoing difficulties later in life.¹⁰ Bullying is often both cause and effect of ill-being in Australian schools and is a widespread issue.^{11, 12} By the end of Year 8, only half of girls and less than half of boys report feeling 'very safe at school'.¹³ Additionally, one in six 12-17 year-olds report problematic levels of loneliness.¹⁴ Student ill-being negatively affects engagement with school and academic achievement.¹⁵ Significantly, a student's level of wellbeing at school also impacts later health, relationships and potential learning capacity.¹⁶ COVID-19 has had a large negative impact on the mental health of children, particularly those from states which experienced long lockdowns.¹⁷

Lack of healthy food

Two thirds of Australian teachers report having children come to school hungry or not having eaten breakfast, with negative consequences for their ability to positively engage with learning.¹⁸ Additionally, one in four teachers report that the problem is getting worse and only 4% have noticed an improvement.¹⁸ A recent survey found over 1.2 million children in Australia went hungry in 2020.¹⁹ But it's not just about lack of food. Nutrition is another key concern. For example, over one-quarter of children aged 10-11 are not eating any fruit or vegetables in a day.²⁰ In fact, almost 95% of children do not meet the daily recommended intake of vegetables and the percentage of children obese or overweight is increasing, with disproportionate impacts on children whose parents have lower levels of educational attainment.^{21, 22}

Declining physical activity

Children are spending more time on digital media and technologies with less opportunities for outdoor play. Together with various other factors of modern life, this has created an increasingly sedentary childhood for many in Australia children. Recently, Australia scored a D- in overall physical activity according to the *2022 Physical Activity Report Card*, which showed less than 25% of Australian children are physically active enough for "optimal health and wellbeing."^{23(p3)} In addition, this most recent report card signalled minimal improvement since reporting began in 2014. Results from *Growing Up Digital Australia* found that about 84% of parents and teachers think their child and students are negatively distracted by digital technologies at home and in school.²⁴



Systemic inequities in health and education

Children from more disadvantaged socioeconomic backgrounds have lower education outcomes and poorer health outcomes than their more affluent peers.^{25,26} This has remained unchanged during the past two decades. Children with health and developmental related issues at school entry are more likely to have poorer literacy and numeracy skills at Grade 3, an effect amplified further by socioeconomic disadvantage.²⁷ This demonstrates systemic inequities in health and education. When ranked by the level of educational equality from early childhood to high school education, Australia is in the bottom third of wealthy countries.²⁸ In particular, systemic inequities continue to contribute to disproportionately lower student and health outcomes for many Australian children in regional, remote and rural areas and for Aboriginal and Torres Strait Islander children.²⁹ Universal delivery of culturally safe and responsive education and care remains a key challenge.

Early intervention needed for equitable childhood health and education

Research suggests the earlier children's developmental and learning needs are addressed, the better their chances are for healthier development and successful learning outcomes, with accruing positive lifelong affects for both the individual and society.³⁰⁻³³ However, one in five Australian children start school developmentally vulnerable on the Australian Early Development Census across five developmental domains including physical health, emotional wellbeing, language and cognitive skills, communication skills and social competence.³⁴ Prevention and early intervention must therefore be a cornerstone of schools if we are to have more positive health, development and education outcomes for Australian children.³⁵⁻³⁷

Directions for the future

Our education system is ripe for bold renewal. For healthy childhood development and deeper learning for all, renewal will require a big change from a narrow view of learning for academic intelligence only, to **equally focusing on learning, wellbeing, and health for whole child development.**

Some schools are already making great changes to equally prioritise whole child learning, health, and wellbeing (e.g. *Our Place*: <https://ourplace.org.au>). Still, the radical transformation needed for all will require changes at the system level. Nordic countries, Canadian provinces, Wales, Scotland, and New Zealand are prioritising health and wellbeing more in education and moving beyond words into real action. Australia could do the same.



A new vision

We provide the following principles as a place to start.

Principles for building schools as multi-opportunity communities: a new vision for Australia

Focus on the whole student

Recognise and consider students' physical, emotional, and social conditions; and how these relate to their learning. This requires fostering high levels of trust and positive relationships between students and teachers, and between parents and schools. Continuous professional collaboration between schools, student's families, health and social services together with the local community optimises this approach. There should be corresponding holistic ways of assessing student progress.

Health as a 21st century skill

Health and wellbeing are learning outcomes in their own right; of equal importance to skills such as literacy and numeracy. This includes digital, mental, socio-emotional and physical health and wellbeing for all students as early as possible. Promisingly, the recent interim review of the National School Reform Agreement recommended that improved student wellbeing should be elevated as an outcome of a successful school education.³⁸

Personalised learning and wellbeing

All students have an individualised learning and wellbeing plan in school. Having a unique individualised school path would also mean inviting students to co-design their plan, which would mean all students are working on things in school that matter to them in ways that work for them; keeping them engaged and motivated to live, learn and be well.

Building a culture of education and health

Find opportunities to embed and integrate health and wellbeing consistently for all students as part of the curriculum and regular routine of school; for example, by offering healthy school meals or having health services available on-site.



Mission possible

Our idea is *not* that these principles should be added on top of everything schools are already doing. We know that there is already much being asked of schools and teachers. Rather, we think they should form a new starting place for schools to re-build around. This will require bold and brave thinking; and then, changes in actions to support that new thinking.

Any ways of doing things that do not support these principles should be re-thought, and perhaps removed. This would free up space in schools to re-organise around the new vision of what school should be – a place that equally supports the holistic learning, health, and wellbeing of all students.

This wouldn't require any additional money. Australian governments already spend over \$115 billion on education. Parents contribute another \$25 billion. What is needed, however, is for that money to be re-distributed and re-purposed to better support the principles. Schools and systems could change their purpose within their existing resources.

Call to action

We invite everyone along on the journey from where Australian education is now to where we hope to see it, with all schools equally prioritising whole-child learning, health, and wellbeing. Of course, this needs to be a co-designed process.

What are we doing?

- Releasing a detailed White Paper expanding the principles and evidence in this paper.
- Bringing together experts and stakeholders in the health, education, and social service sectors to discuss a post COVID-19 vision of Australian schools.

What can you do?

- Start to think about how schools might support student health and wellbeing, and not just academic learning.
- Talk with others about how child health, learning and wellbeing are connected and of equal importance.
- Share well-sourced information about these topics on social media.
- Lead by example. Be a continuous learner in these areas.
- Talk to children you know about skills and strategies for positive health and wellbeing.

We can make changes for the better, together. If you have any related thoughts or ideas to share, please contact: caitlin.senior@scu.edu.au or cecilia.sinclair@mcri.edu.au



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