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ABSTRACT

During the years 1991-1995, through planning efforts in local communities, a successful model has been created for the implementation of the Colorado Comprehensive Health Education Act (1990). Three key components of the Colorado model are: (1) the establishment of local health advisory committees; (2) the administration of local needs assessments; and (3) the design of local strategies and resources. The role of state agencies and organization is to support the local use of programs in policy, advocacy, awareness, training, and evaluation needs. Twenty-six local school communities involved in these initiatives were funded as pilot programs to plan or enhance their comprehensive health education efforts. The focus was to link them with the other components of their comprehensive school health programs. Project results demonstrated that this community-based "comprehensive" approach, connecting all components of the program and all grades, with students and staff within the school, and with parents and community resources made a difference not only in health related issues but also school performance and attendance. The Colorado model is described, along with programs in 20 schools. (ND)

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CONNECTIONS

THE COLORADO COMPREHENSIVE HEALTH EDUCATION ACT OF 1990

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1994-95 END OF YEAR REPORT

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STATE OF COLORADO

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William T. Randall
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January 1996

1994-95 was an exciting year of connections in the implementation of the *Colorado Comprehensive Health Education Act of 1990*. Interest and support in linking health and education for school-age children and youth spread throughout Colorado. People connected to people, programs connected to services, parents connected to schools, schools connected to community resources, and communities connected to communities across Colorado to join efforts to promote healthy lifestyles and prevent risk behavior for our children and youth. The strengthening of linkages at both the state and local levels was the focus of the 1994-95 Comprehensive Health Education initiative.

A healthy child is ready to learn. Together, through combined efforts and commitment to health and education for our children throughout Colorado, we are building a strong foundation for student success.

William T. Randall
Commissioner of Education
State of Colorado

WTR/KC:bas

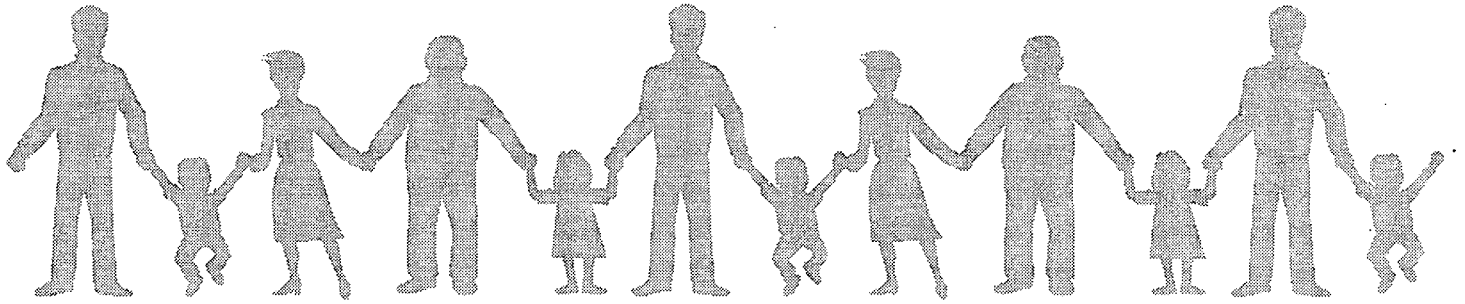
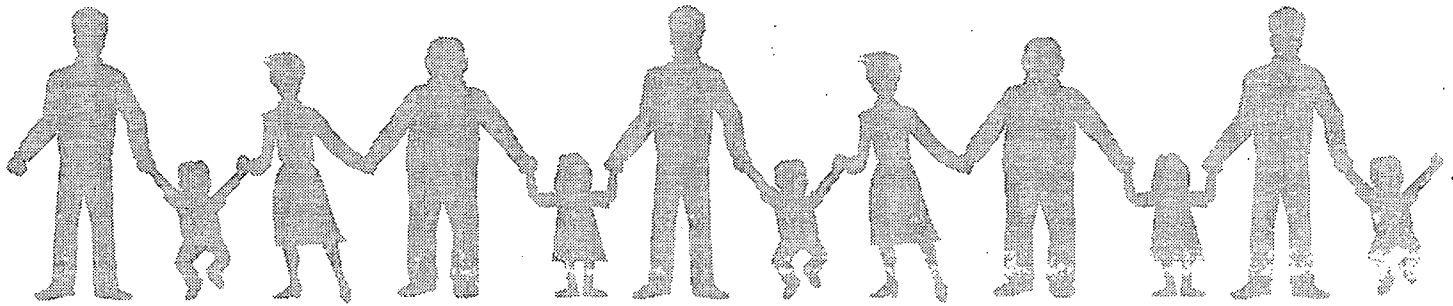


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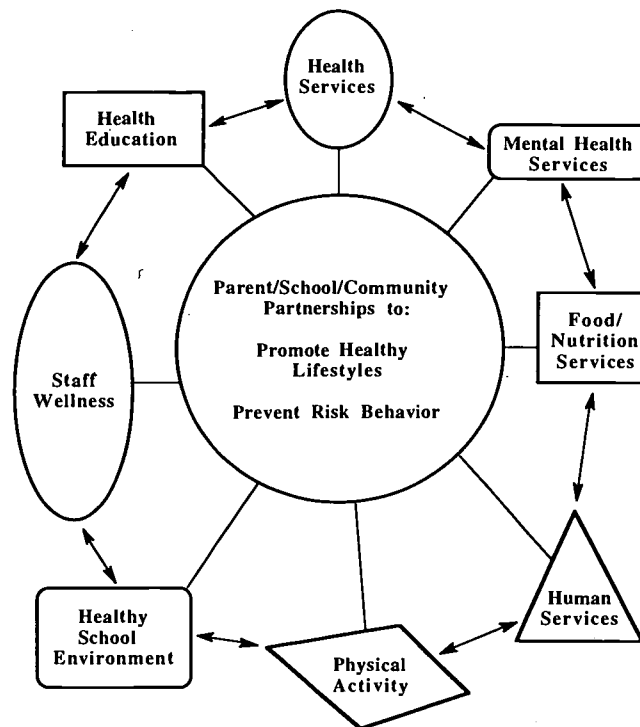


SUMMARY - CONNECTIONS

Working alone, we provide a categorical approach to the prevention of risk behavior. Together, we provide a powerful message which acknowledges that risk behaviors are linked, and require a comprehensive, community-based approach for prevention. Three health and education related state initiatives were connected under the umbrella of Comprehensive School Health Programs during 1994-95: the state Comprehensive Health Education initiative, the Carnegie Middle Grade Reform initiative, and the Robert Wood Johnson School-Based Health Center initiative. All three began to work together at both the state and local levels to provide the most comprehensive, integrated approach for the health and wellness of their students.

Twenty-six local school communities involved in these initiatives were funded as pilot programs to plan or enhance their comprehensive health education efforts. The focus was to link them with the other components of their comprehensive school health programs. Their results demonstrate that this community-based "comprehensive" approach, connecting all components of the program, all grades, with students and staff within the school, and with parents and community resources makes a difference not only in health related issues but also school performance and attendance.

CONNECTIONS COMPREHENSIVE SCHOOL HEALTH PROGRAMS



BACKGROUND - BUILDING ON THE PAST

The Colorado Comprehensive Health Education Act of 1990

A broad-based coalition of supporters drafted the legislation, including Junior League of Denver, Colorado Medical Society, Colorado School Health Council, Colorado PTA, Colorado School Board Association, Colorado Department of Public Health and Environment, and numerous local school districts and health professionals.

1990-91 "Creating The Model"

A State Advisory Board was formed as a broad-based coalition representative of all areas of a comprehensive program, and the diversity and geography of the state.

- ◆ Rules and Guidelines were developed and adopted by the State Board of Education
- ◆ Requests for Proposals for planning grants were sent to every school district

- | | |
|------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FIRST
YEAR
OF
FUNDING | 1991-92 "Creating The Model" <ul style="list-style-type: none">◆ \$255,000 funded 23 projects in 20 school districts◆ Collaborative Team Training was held for all projects◆ Student State Advisory Board was formed/met twice◆ State Advisory Board and Student State Advisory Board defined criteria for continuation◆ Request for Proposal was sent to funded projects for continuation grants |
|------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

- | | |
|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SECOND
YEAR
OF
FUNDING | 1992-93 "Modeling The Creation" <ul style="list-style-type: none">◆ \$167,487 funded 19 school districts to continue their work◆ Two state meetings were held to provide professional development and report progress◆ Student State Advisory Board met twice to provide recommendations for student involvement◆ On-site visits were made to each program |
|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

- | | |
|------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| THIRD
YEAR
OF
FUNDING | 1993-94 "Modeling The Creation" <ul style="list-style-type: none">◆ \$4,000 available to support professional development in local districts◆ One state meeting was held for professional development of local program directors◆ One Student State Advisory Board meeting was held |
|------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

- | | |
|-------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FOURTH
YEAR
OF
FUNDING | 1994-95 "Connections" <ul style="list-style-type: none">◆ \$150,000 available for continuation and new pilots◆ State Advisory Board met and recommended continuation and expansion to collaborate with the Robert Wood Johnson Initiative and Carnegie Middle Grade Reform Initiative school districts<ul style="list-style-type: none">— Thirteen continuation grants— Eight grants to Carnegie Middle Grade Reform schools— Six grants to RWJ Planning districts◆ One state meeting was held to orient teams from new programs◆ Two Facilitation Trainings were provided for leadership of local Health Advisory Councils◆ Student State Advisory Board met once |
|-------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|



THE COLORADO MODEL

During the past four years, through the planning efforts in local communities, a successful model has been created for the implementation of the Colorado Comprehensive Health Education Act. Three key components of the Colorado model are 1) the establishment of local health advisory committees, 2) the administration of local needs assessments, and 3) the design of local strategies and resources. The role of state agencies and organizations is to support the local use of programs in policy, advocacy, awareness, training and evaluation needs.

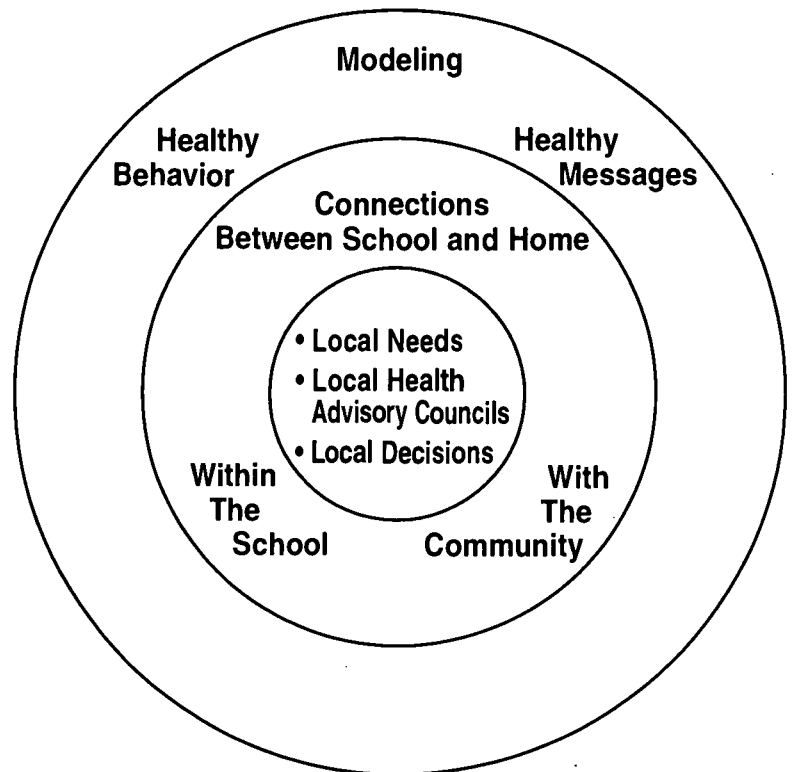
Three themes have emerged as the Comprehensive Health Education initiative has evolved.

“Creating The Model” was coined during the first year of local planning grants. Upon recommendation from the State Advisory Committee, a state commitment was made to provide one year of planning for every new pilot program in order to establish a local health advisory committee and assess local needs. The successful results of the first year demonstrated the critical need for a strong grassroots program design.

During the second and third years, “Modeling The Creation” was suggested by the local school districts as they moved from planning into the implementation phase of the program. Local leadership also recognized that the program staff and policies must model healthy behavior as well as teach about it.

During the fourth year, “Connections” have strengthened programs as more and more supporters of Comprehensive School Health Programs have stepped forward to work together.

Comprehensive Health Education Act THE COLORADO MODEL



CONNECTIONS . . .1994-95

Important connections were made at both the local and state levels to further the Comprehensive Health Education initiative.

1994-95 LOCAL CONNECTIONS

Twenty-seven pilot programs were funded to plan or enhance their comprehensive health efforts.

1994-95 Continuation Grant Awards Comprehensive Health Education Act of 1990

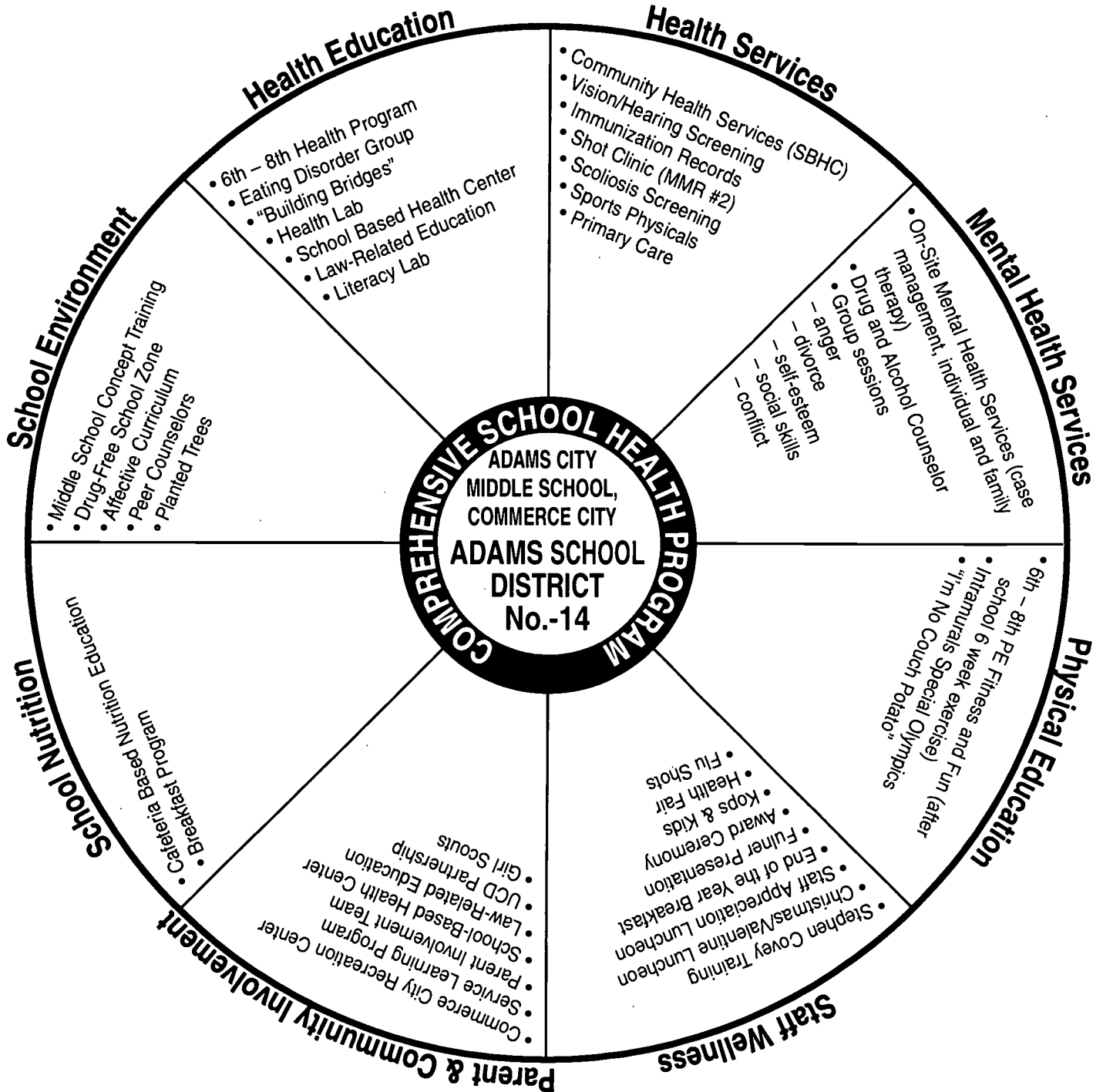
County	School District	CHE	Robert Wood Johnson	Carnegie
Adams	Mapleton School District 1 Adams School District 14 Brighton School District 27J	Mapleton 1		<i>John Dewey Jr. High York Jr. High Adams City Middle Overland Trail Middle</i>
Arapahoe	Aurora School District 28J Cherry Creek School District 5	Cherry Creek 5		<i>West Middle</i>
Alamosa	Alamosa School District RE-11J	San Luis BOCS	Alamosa RE-11J -Valleywide	
Denver	Denver School District 1		<i>Slavens School</i>	<i>Gove Middle</i>
Douglas	Douglas School District RE 1	Douglas RE-1		
El Paso	El Paso School District 11	Irving Jr. High		
Garfield	Roaring Fork School District RE-1	Roaring Fork RE-1	Roaring Fork RE-1	
Jefferson	Jefferson School District R-1		<i>Jefferson R-1</i>	<i>Wheat Ridge Middle</i>
La Plata	Durango School District 9-R	Durango 9-R		
Larimer	Poudre School District R-1		Poudre R-1	
Pueblo	Pueblo School District 60		<i>Pueblo 60</i>	<i>Risley Middle</i>
Routt	Hayden School District RE-1	Hayden RE-1		
Rio Grande	Monte Vista School District C-8	<i>Monte Vista C-8</i>		
Summit	Summit School District RE-1	Summit Youth Svcs		
Weld	Weld School District RE-1	Weld RE-1		
	Weld School District RE-3J	Weld RE-3J		
	Weld School District RE-7	Platte Valley RE-7		

Pilot Programs are in Italics



Adams County - Adams City Middle School

Focus: Health Labs for Students and Staff Wellness



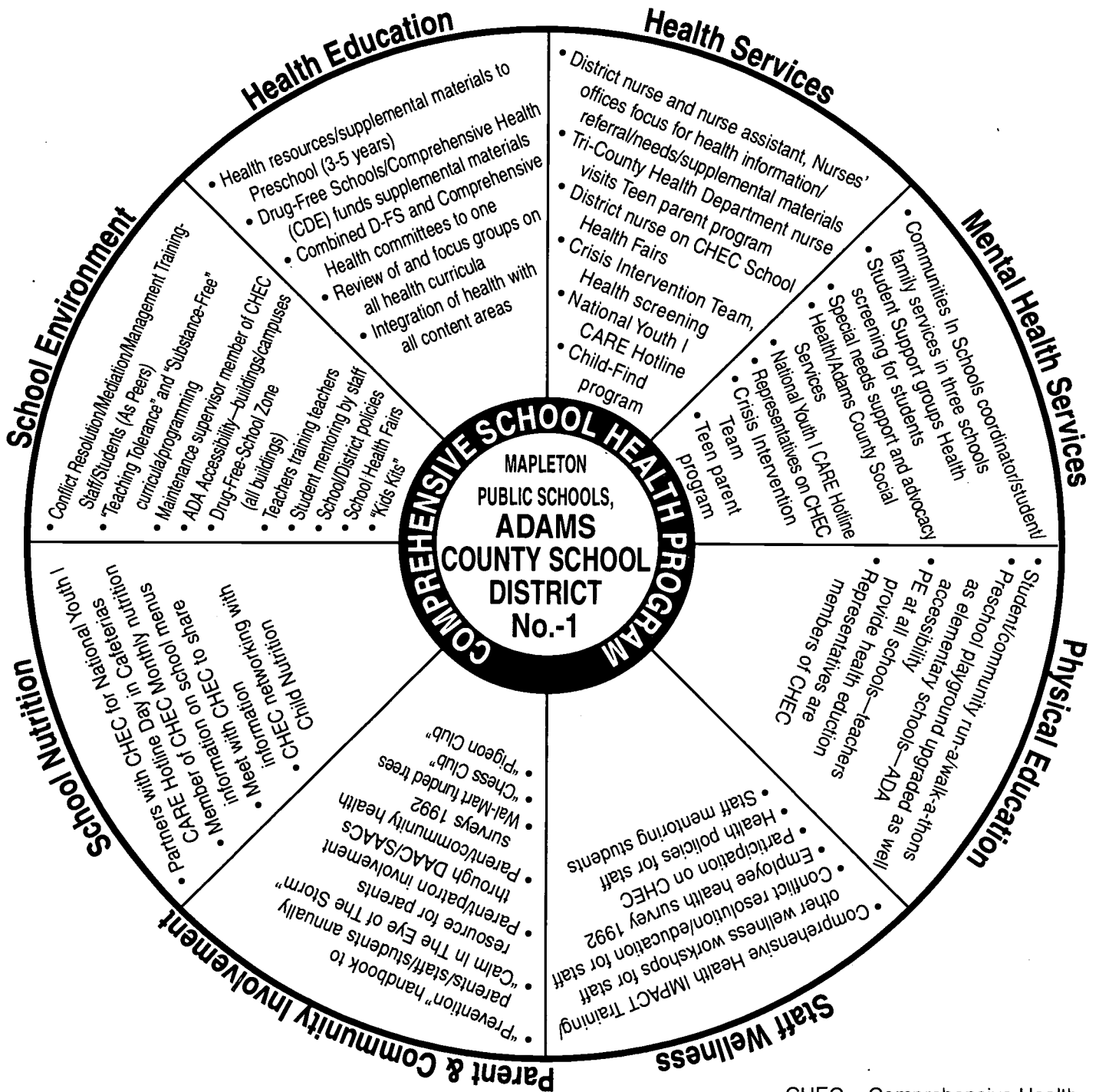
Highlights:

- ◆ Health Fair and flu shots for students and staff
- ◆ Connected community resources to the computer labs; Bon Fils Blood Bank offered mentoring to correlate with the unit on blood in the lab



Adams - Mapleton School District 1

Focus: Professional Development



Highlights:

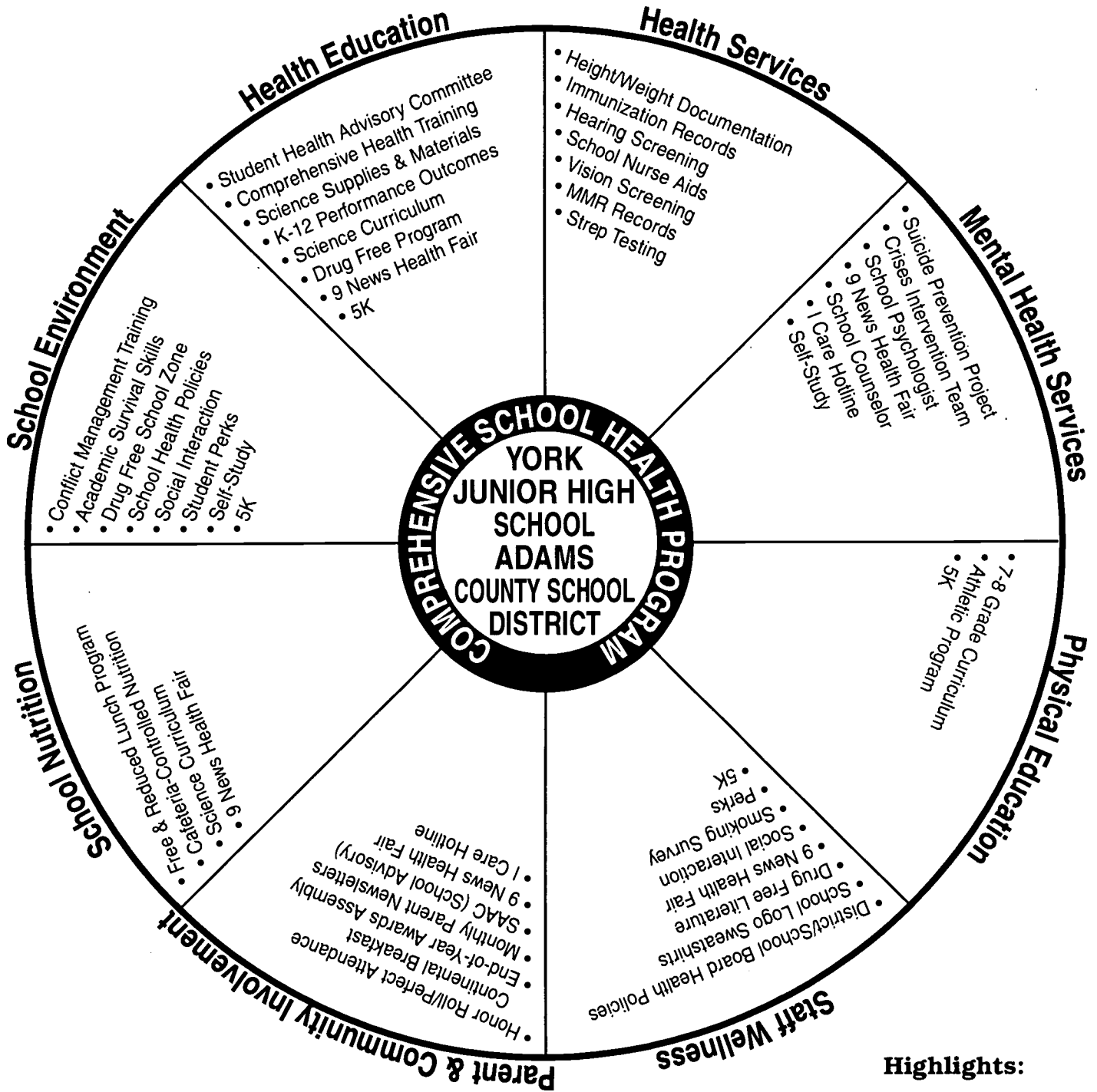
- ◆ Provided staff development for 28 faculty
- ◆ Strengthened student assistance programs

CHEC = Comprehensive Health Education Committee
 D-FS = Drug-Free Schools/Communities
 DAAC = District Advisory Accountability Committee



Adams County - York Jr. High School

Focus: Student Wellness



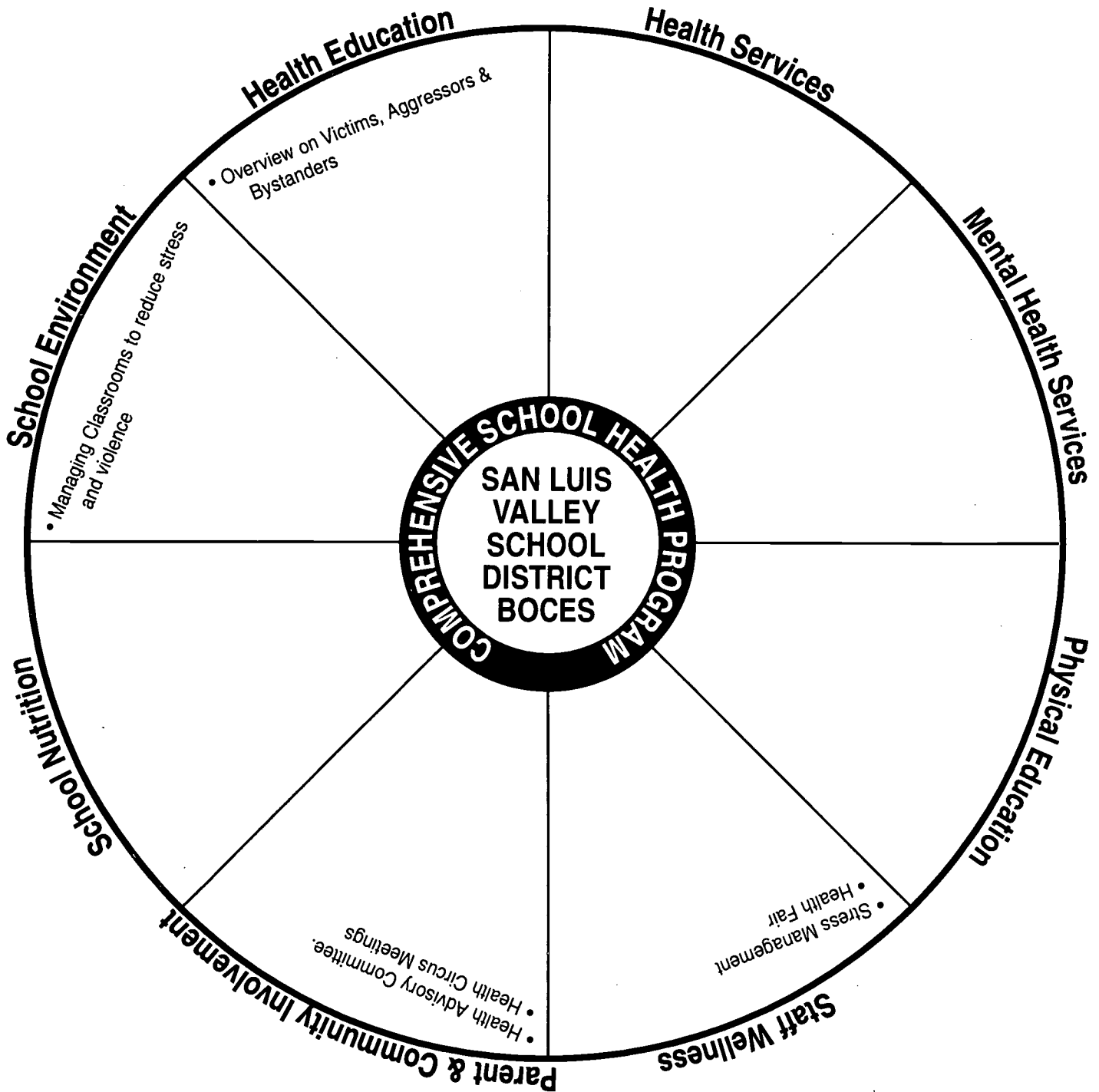
Highlights:

- ◆ I Care Hotline
- ◆ Attitude prevention project
- ◆ 5K run for students and families
- ◆ Health Fair in collaboration with 9 NEWS
- ◆ Student awards for achievement and attendance



Alamosa County - San Luis Valley BOCES

Focus: Parent and Community Involvement



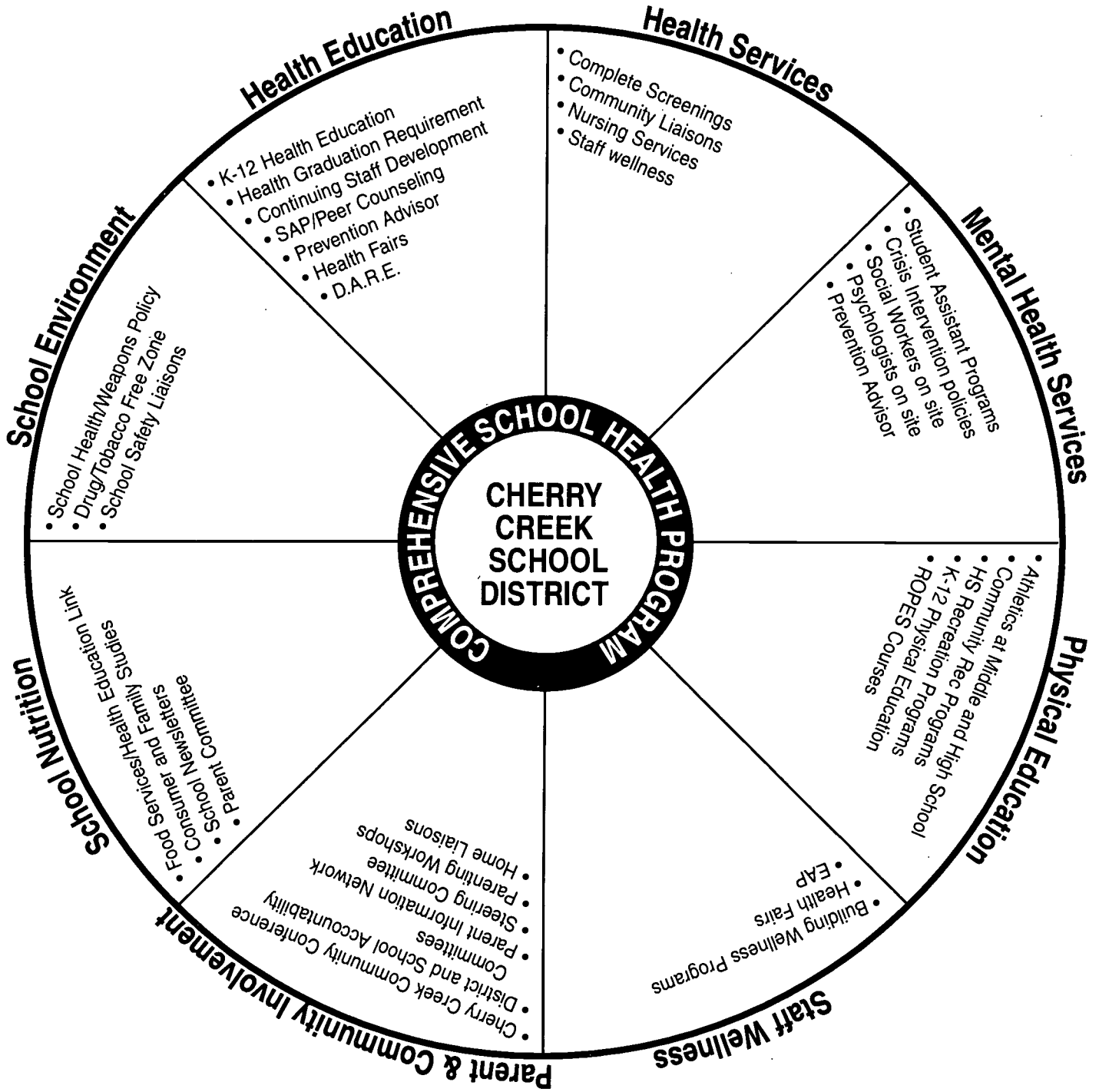
Highlights:

- ◆ Provided three school/community Health Circles meetings for 62 participants
- ◆ Designed plans to implement K-12 programs in 4 school districts



Arapahoe County - Cherry Creek School District 5

Focus: Health Education Assessments



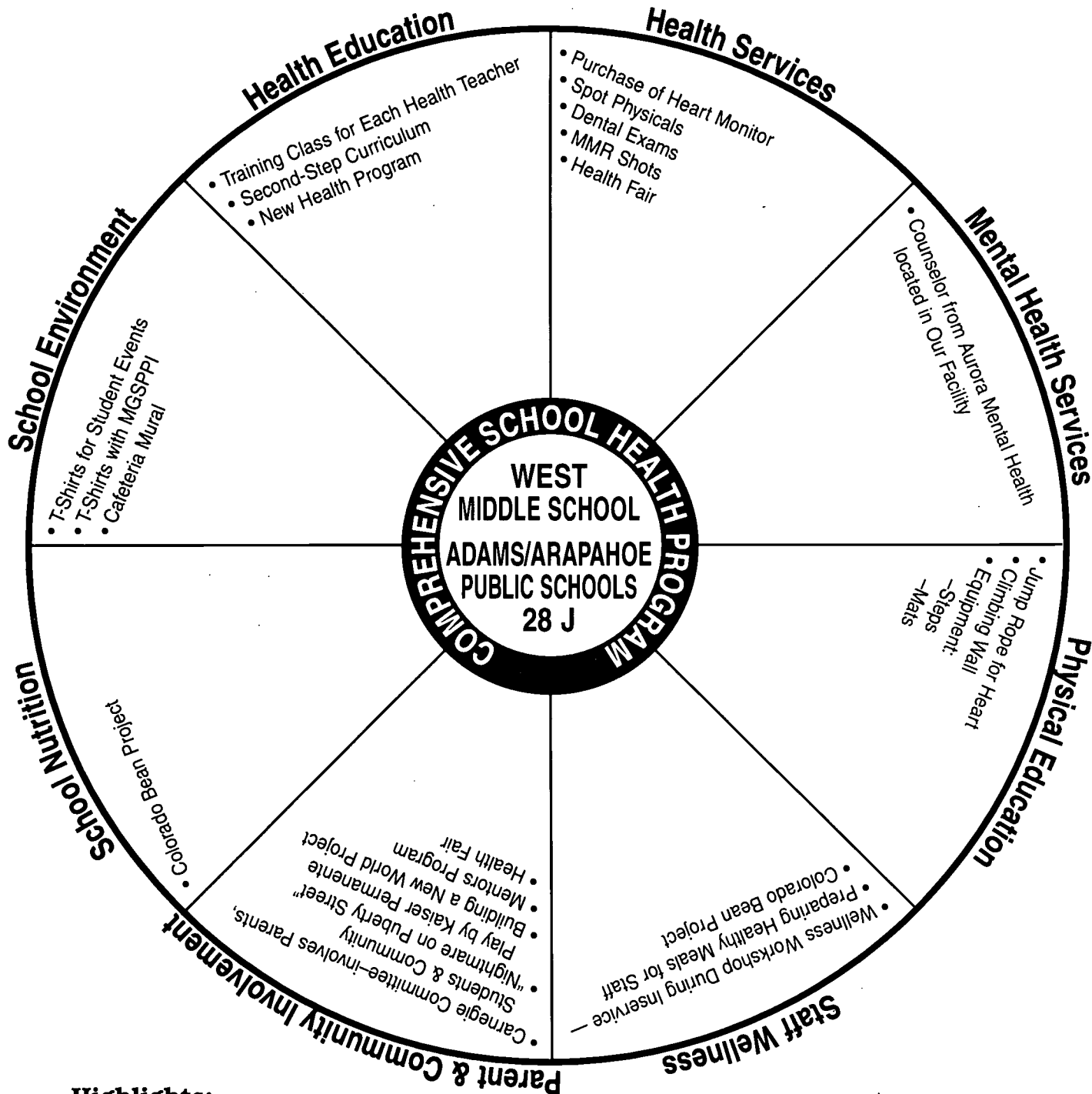
Highlights:

- ◆ Participated on national task force to develop health education assessments
- ◆ Piloted health education assessments on tobacco-prevention education



Arapahoe County - West Middle School

Focus: Improved learning through better health and fitness



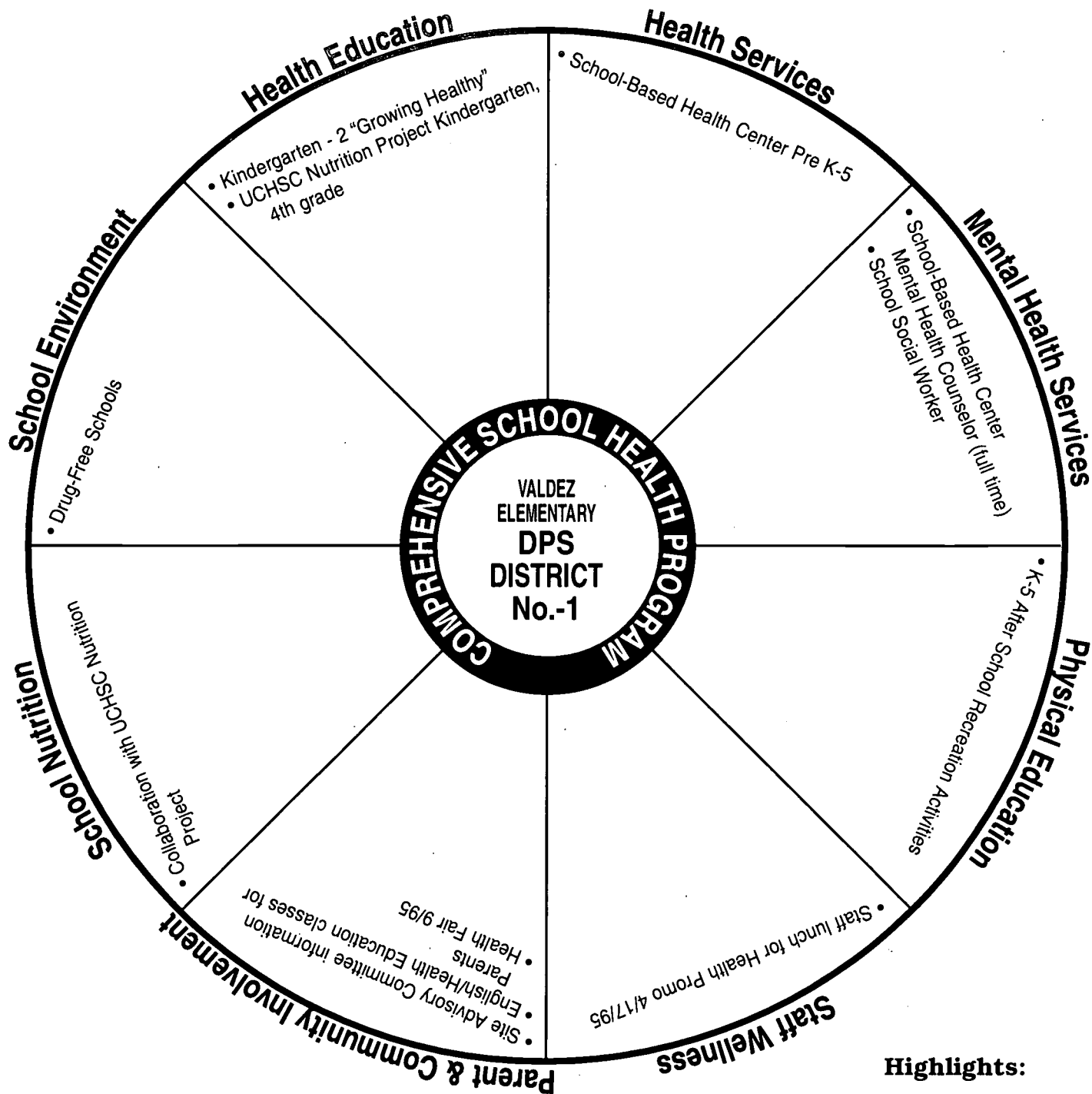
Highlights:

- ◆ Second
- ◆ Climbing Wall
- ◆ Jump Rope for Heart
- ◆ A successful Health Fair
- ◆ Community Mentoring Program



Denver County - Denver School District 1/Valdez Elementary

Focus: Parent Involvement and Staff Development



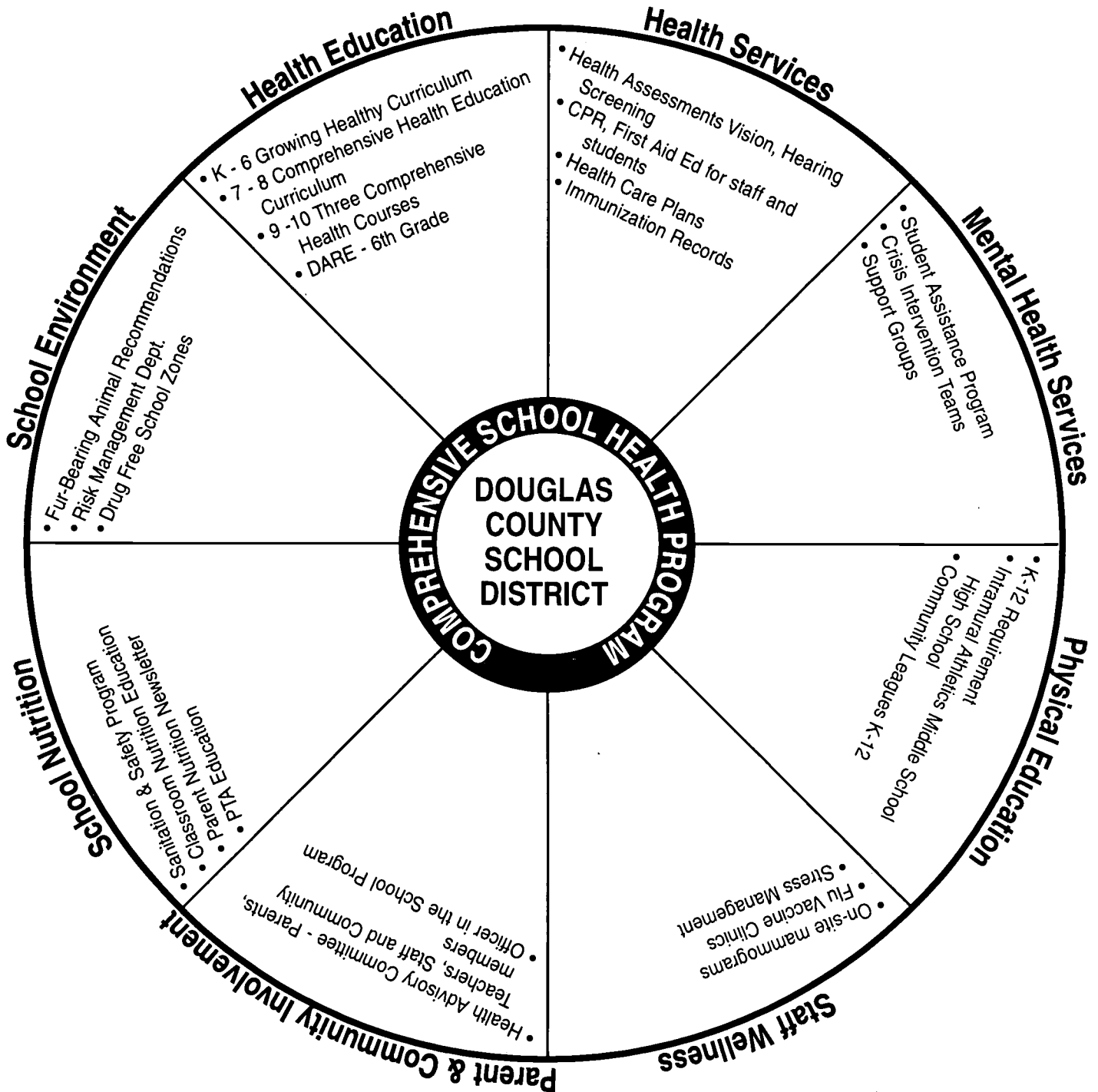
Highlights:

- ◆ Bilingual newsletter created for families
- ◆ Health education classes offered to parents through English as a second language program
- ◆ Staff training and health promotion activities through a health promotion luncheon



Douglas County - Douglas School District RE 1

Focus: Middle School Health Education Materials and Professional Development



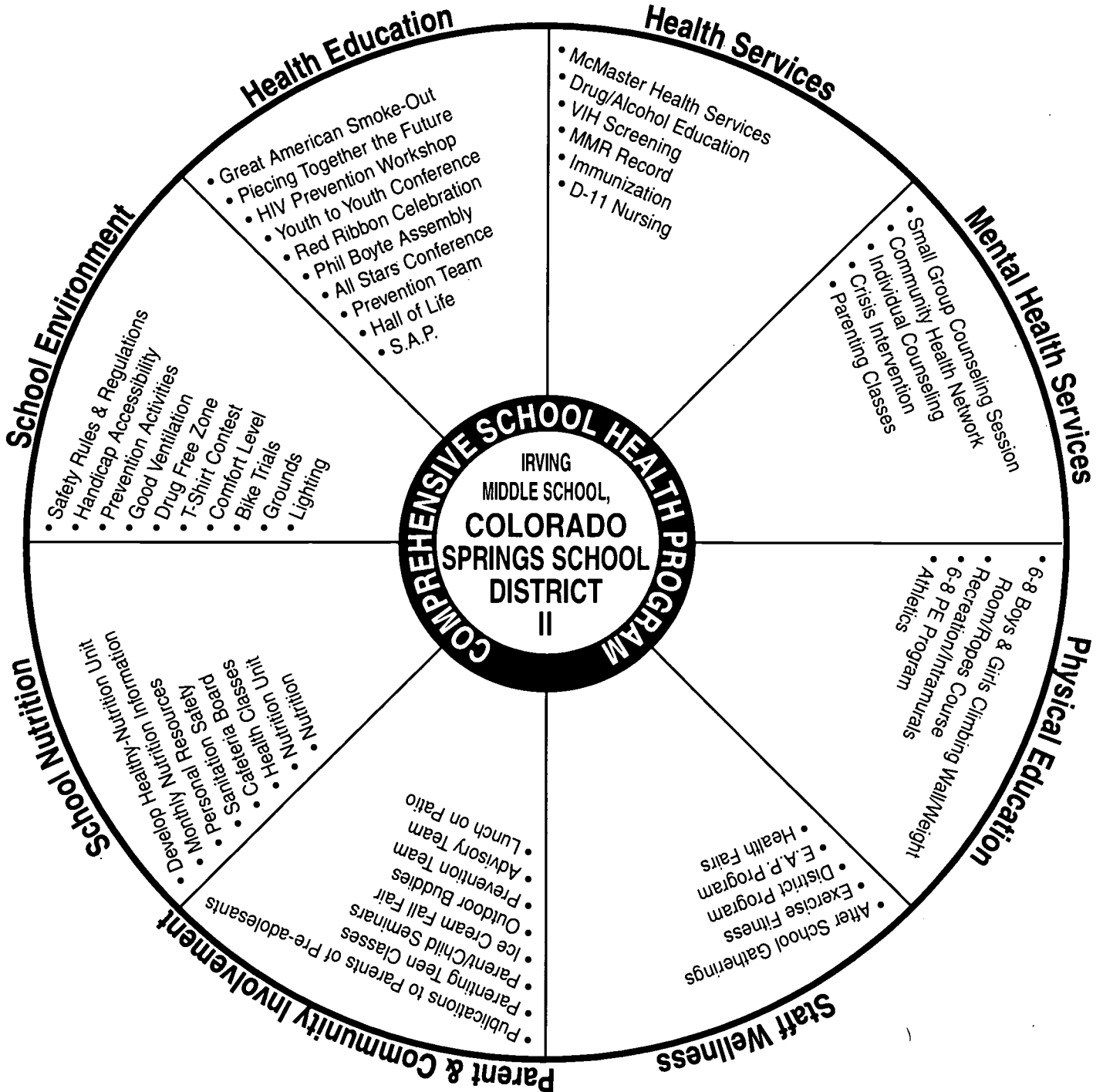
Highlights:

- ◆ Improved coordination of teaching and curriculum in middle grade health education
- ◆ Progress made toward a high school recommendation for health education



El Paso County - Washington Irving Middle School

Focus: Prevention of Risk Behavior



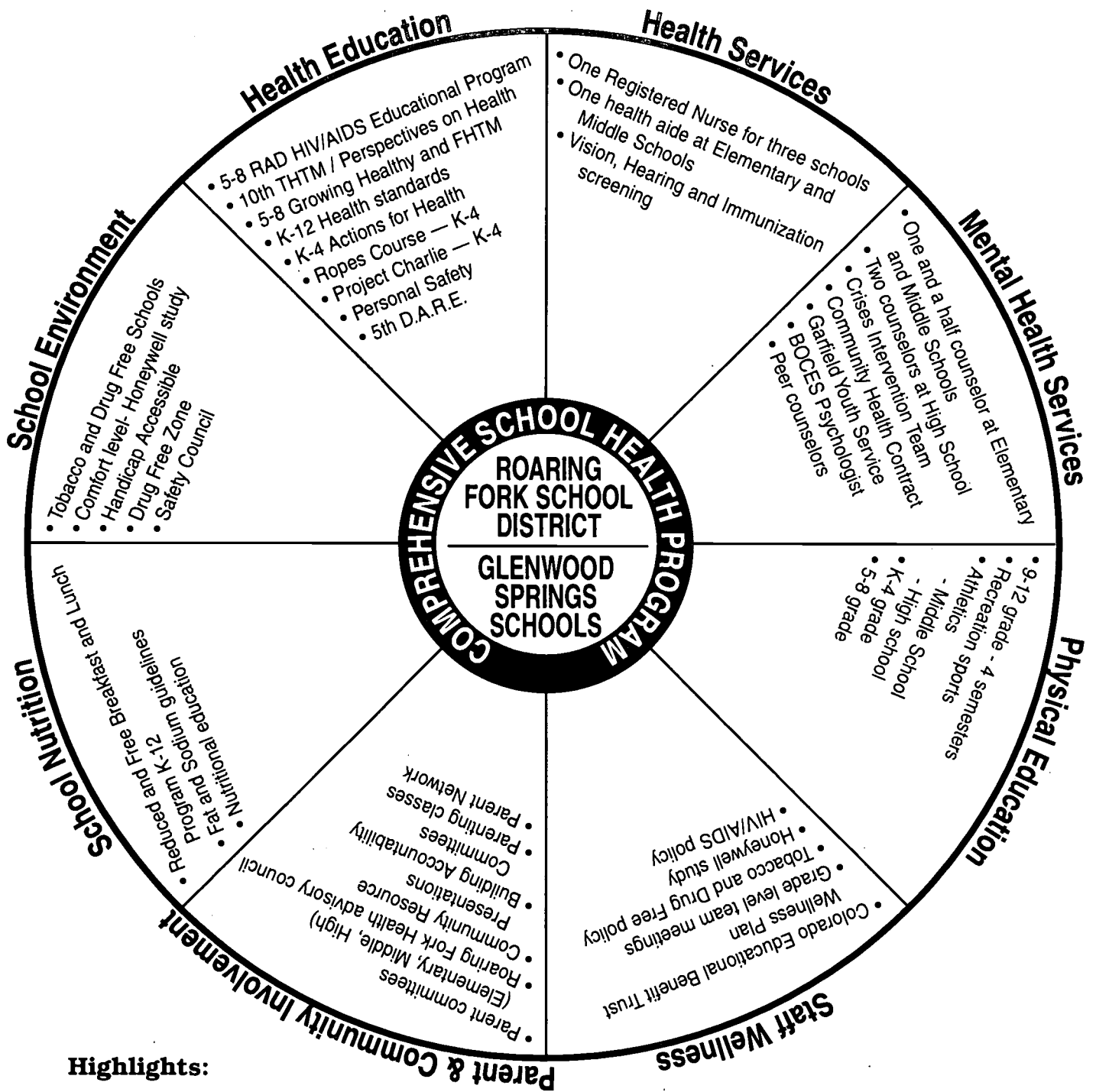
Highlights:

- ◆ Materials to promote drug-free life styles
- ◆ Students wrote and performed a skit entitled "Rumors"
- ◆ "Point of View" media presentation on peer outeractions
- ◆ Keynote speaker Phil Boyte addressed students on self-responsibility



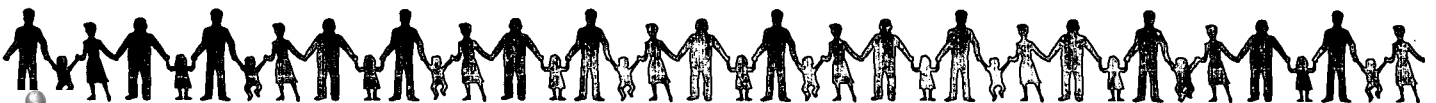
Garfield County - Roaring Fork School District RE-1

Focus: Enhancing the Existing Program



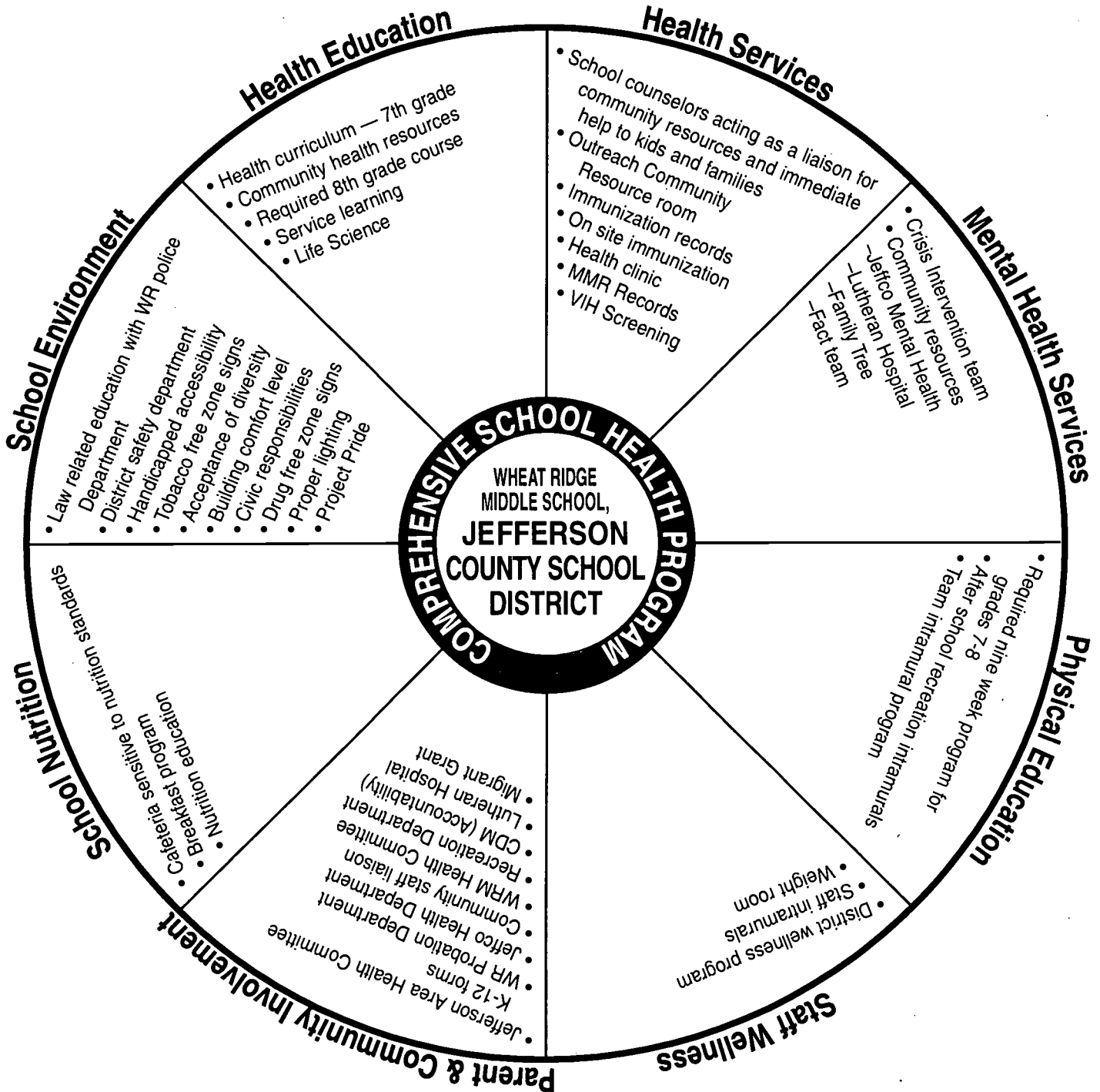
Highlights:

- ◆ Implemented K-12 health standards district-wide
- ◆ High school students designed school-wide projects
- ◆ Increase in support and efficiency in teaching required health education in grades K-10th
- ◆ Collaboration with school building accountability committees, Basalt Family Resource Center, Garfield Youth Services, Healthy Mountain Communities, Coalition for Families, the Parent Network, Family Visitor Program, Colorado Preschool Project, Lasso Tobacco Colorado and the Valley Partnership for Drug Prevention



Jefferson County - Wheat Ridge Middle School

Focus: Community Collaboration



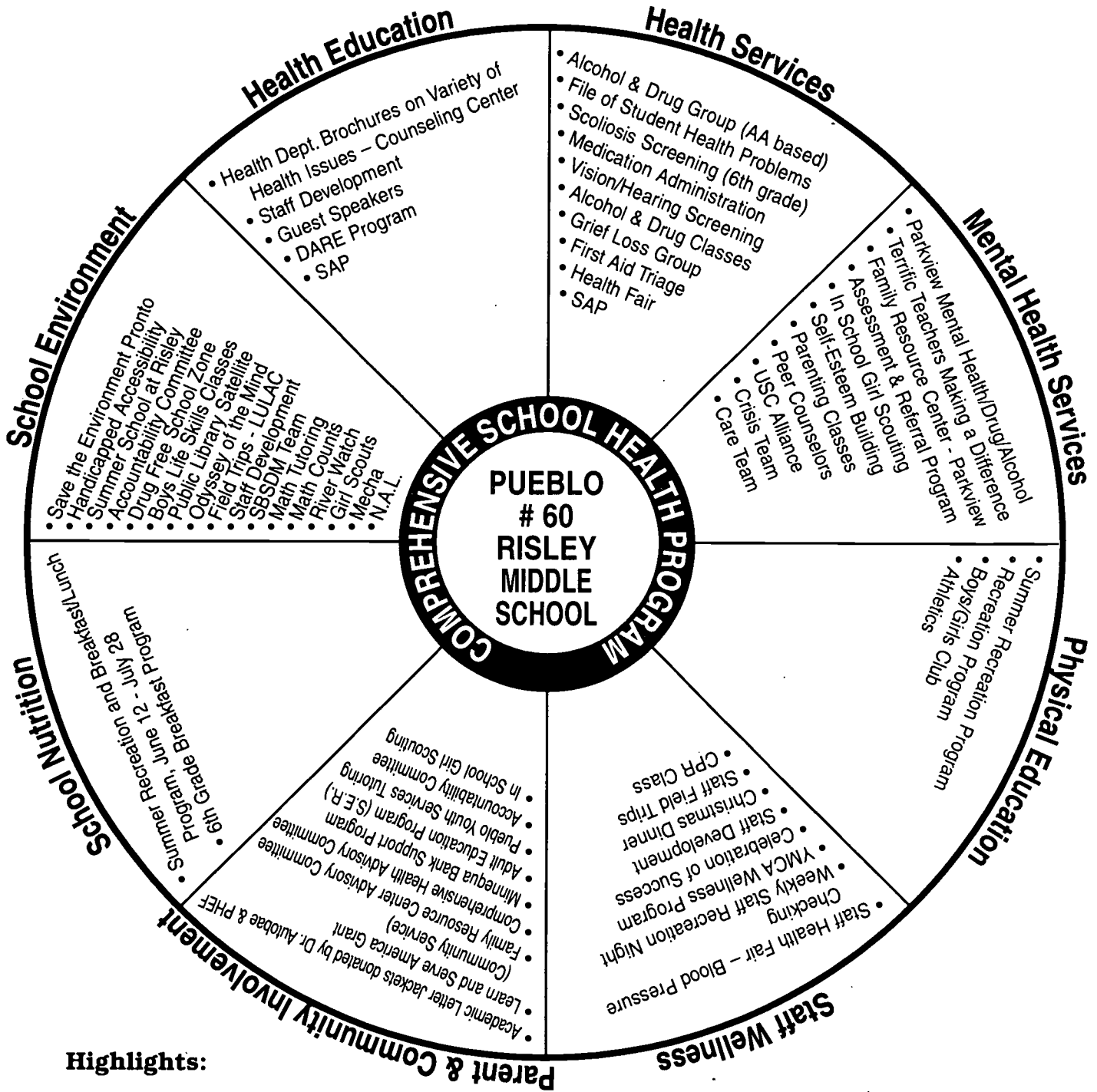
Highlights:

- ◆ Local health advisory committee addressed gangs, tagging, graffiti, after school programs
- ◆ Community liaison hired and organized community involvement



Pueblo County - James H. Risley Middle School

Focus: Promotion of healthy lifestyles



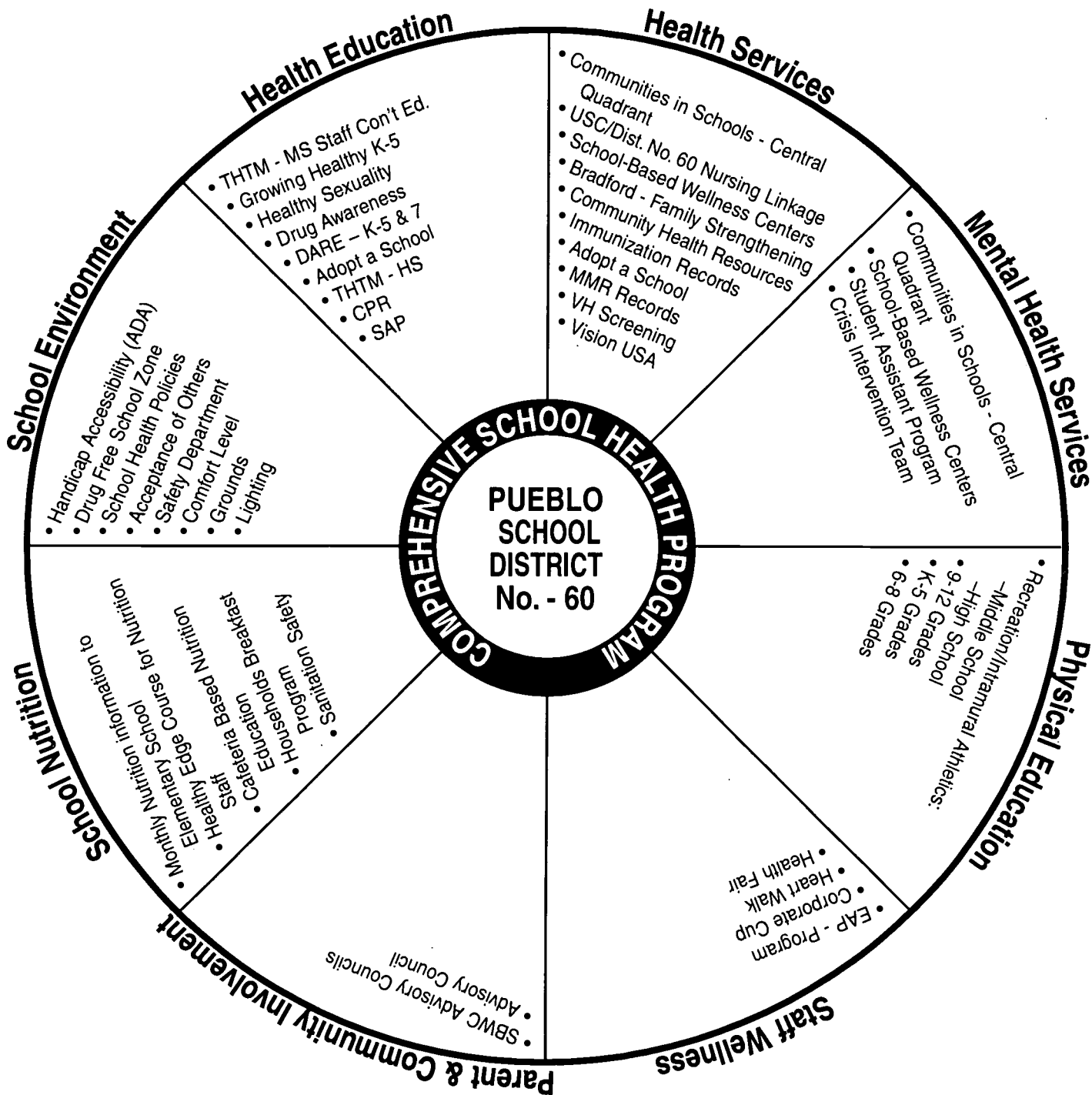
Highlights:

- ◆ A middle school Girl Scouts program for 6th & 7th grade girls focused on self-esteem and decision-making skills
- ◆ Collaboration with the YMCA provided one day recreation passes for students
- ◆ Collaboration with Parkview Hospital for student “shadowing” experiences for careers, and agreements to provide mental health assessments, parenting classes and a half-time school nurse for the school
- ◆ A successful Health Fair was held for students



Pueblo County - Pueblo School District 60

Focus: Student Wellness



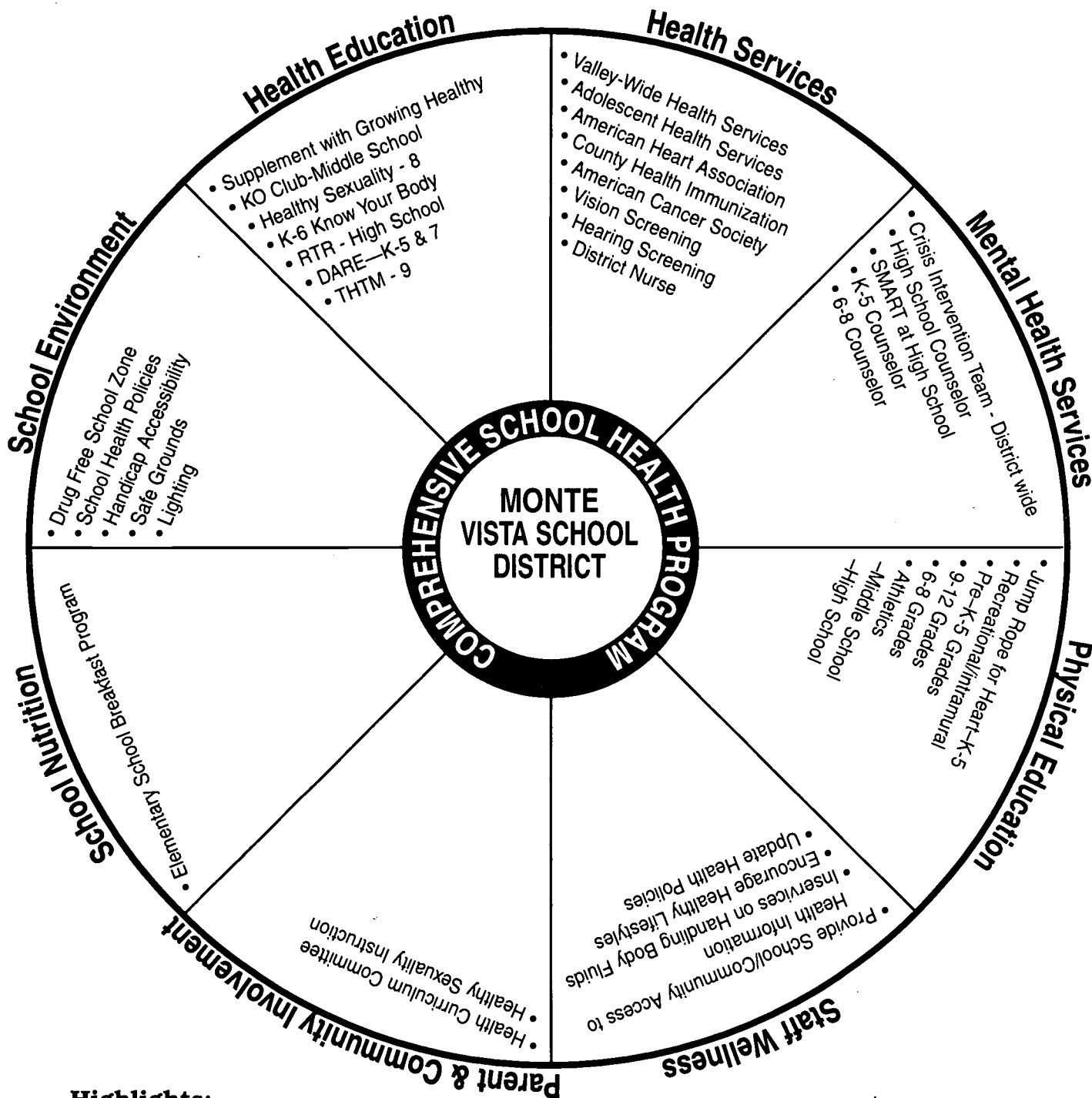
Highlights:

- ◆ Enrolled 67% of the student population in the Center
- ◆ Provided a staff position in the Wellness center at Central High School



Rio Grande County - Monte Vista School District C-8

Focus: Health Education



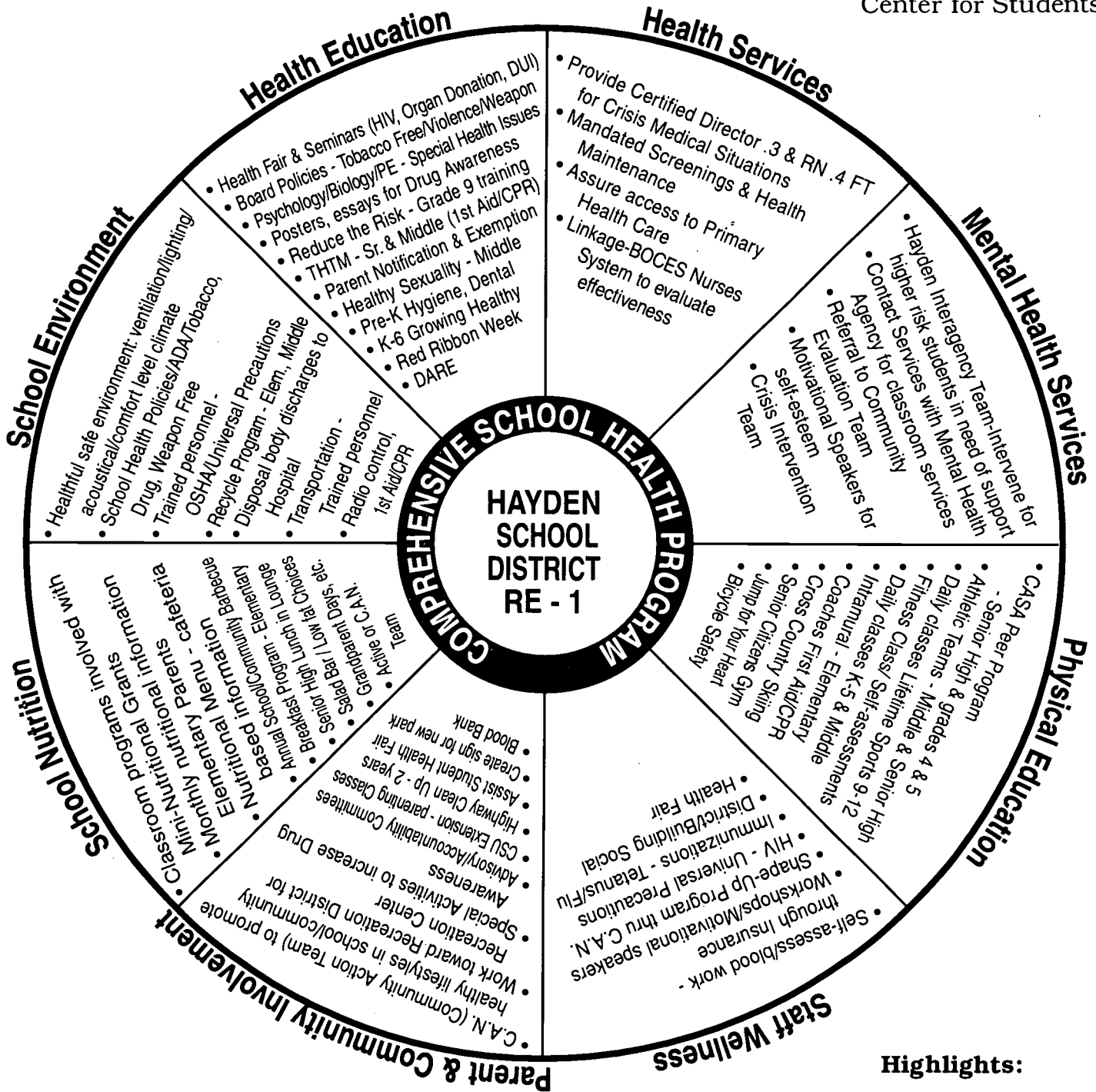
Highlights:

- ◆ Focus on health education
- ◆ Provided a part-time health education facilitator
- ◆ Reviewed and adopted “Know Your Body” curriculum for grades K-6



Routt County - Hayden School District RE-1

Focus: Counseling and Support Services and Community Goal of a Recreation Center for Students



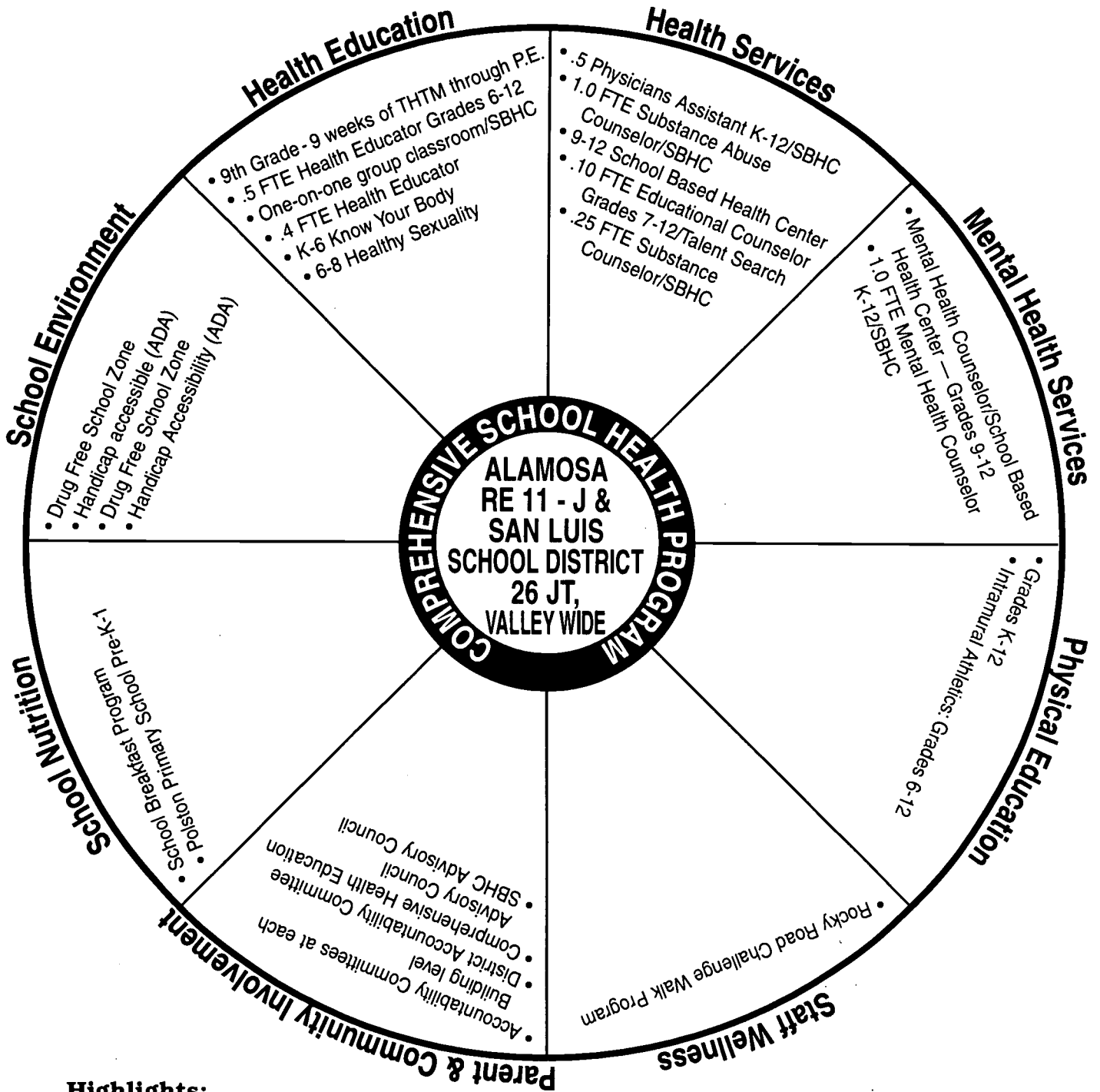
Highlights:

- ◆ Channel 9 Student Health Fair
- ◆ New senior high lounge and noontime lunch programs
- ◆ Sessions on self esteem, HIV/AIDS, parenting, drinking and driving and organ donation



San Luis 26 JT & Alamosa School District RE-11J/Valleywide

Focus: Connecting health and education services



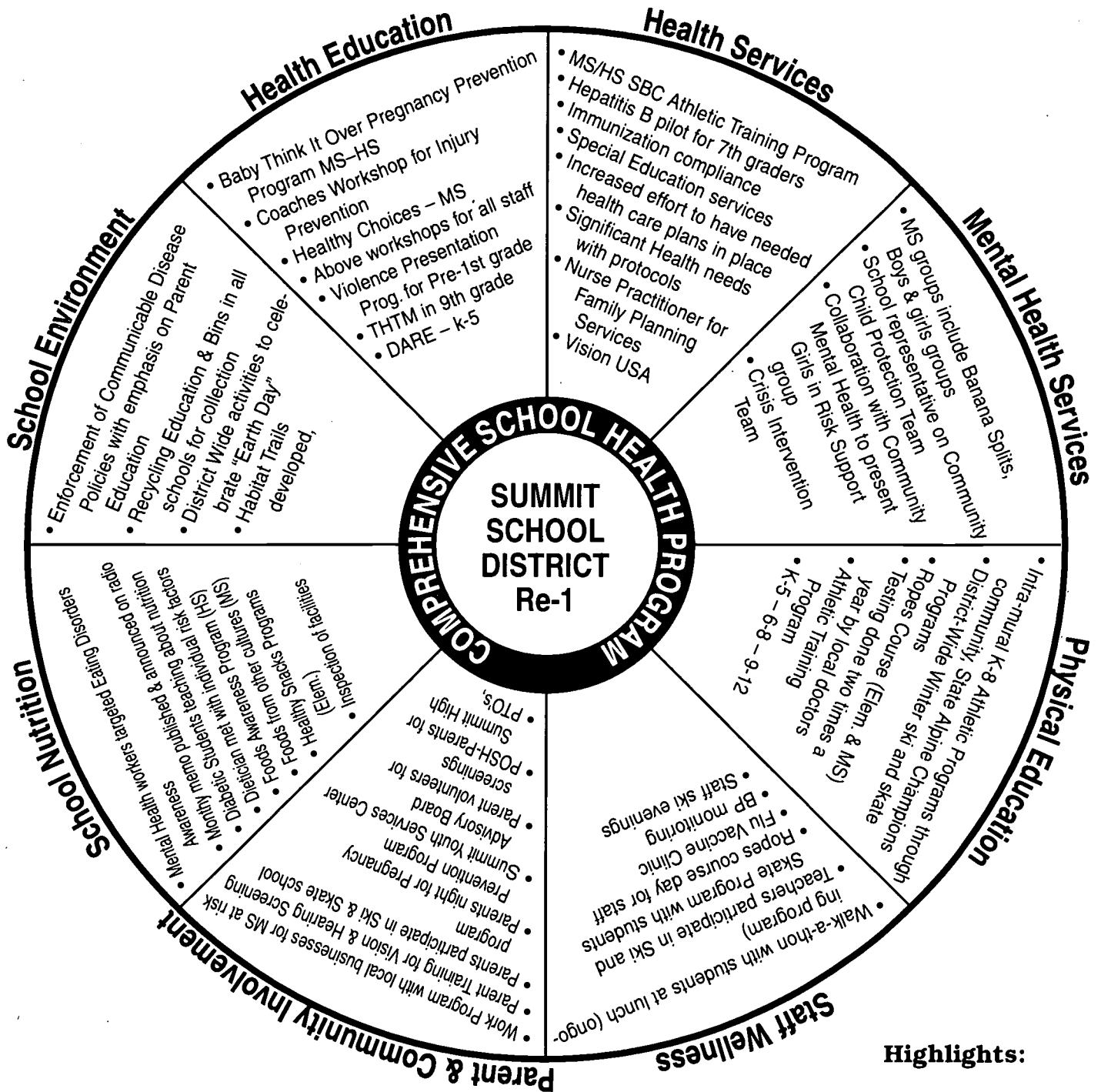
Highlights:

- ◆ Community forums
- ◆ Valleywide collaboration
- ◆ Parent education meeting



Summit County - Summit Youth Services Center

Focus: Prevention Programs for At-Risk Students



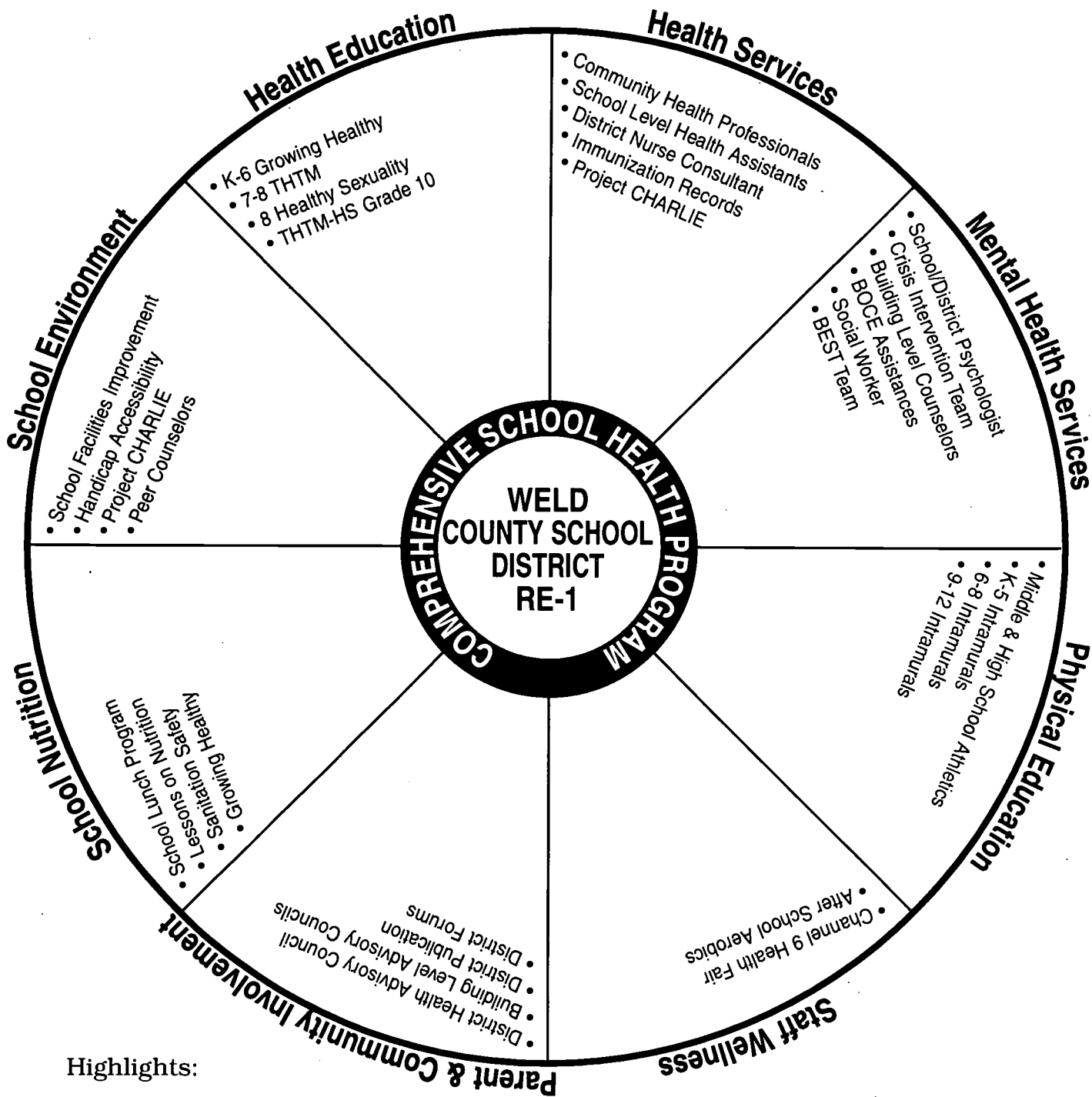
Highlights:

- ◆ Violence Prevention program
- ◆ Career exploration for at-risk students
- ◆ Community mental health support groups for high risk students
- ◆ Teen Pregnancy Prevention project for parents, students, and staff by Dr. Tim Theis



Weld County - Weld School District RE-1

Focus: Professional development for staff



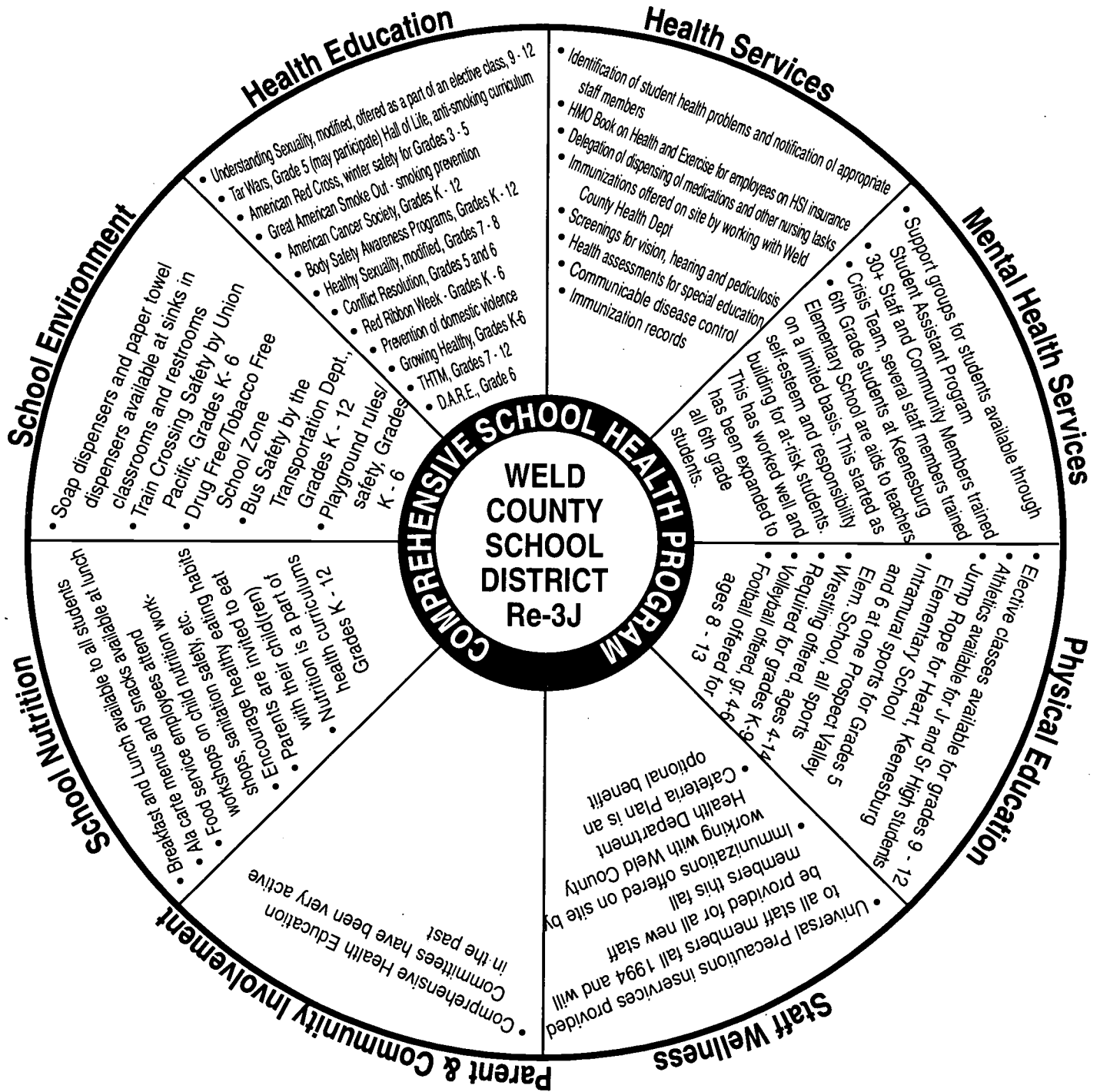
Highlights:

- ◆ Physical education teachers were released from classtime to write standards
- ◆ The District Accountability Committee served as the Health Advisory Committee
- ◆ Health education standards are incorporated into district standards for science, physical education and language arts
- ◆ Classroom teachers in grades 2, 3 and 10 and all new elementary teachers were trained in the district curriculum
- ◆ Gang awareness was provided for the entire district and a task force was created to be proactive in dealing with gangs and related issues



Weld County - Weld School District RE-3J

Focus: Teacher training



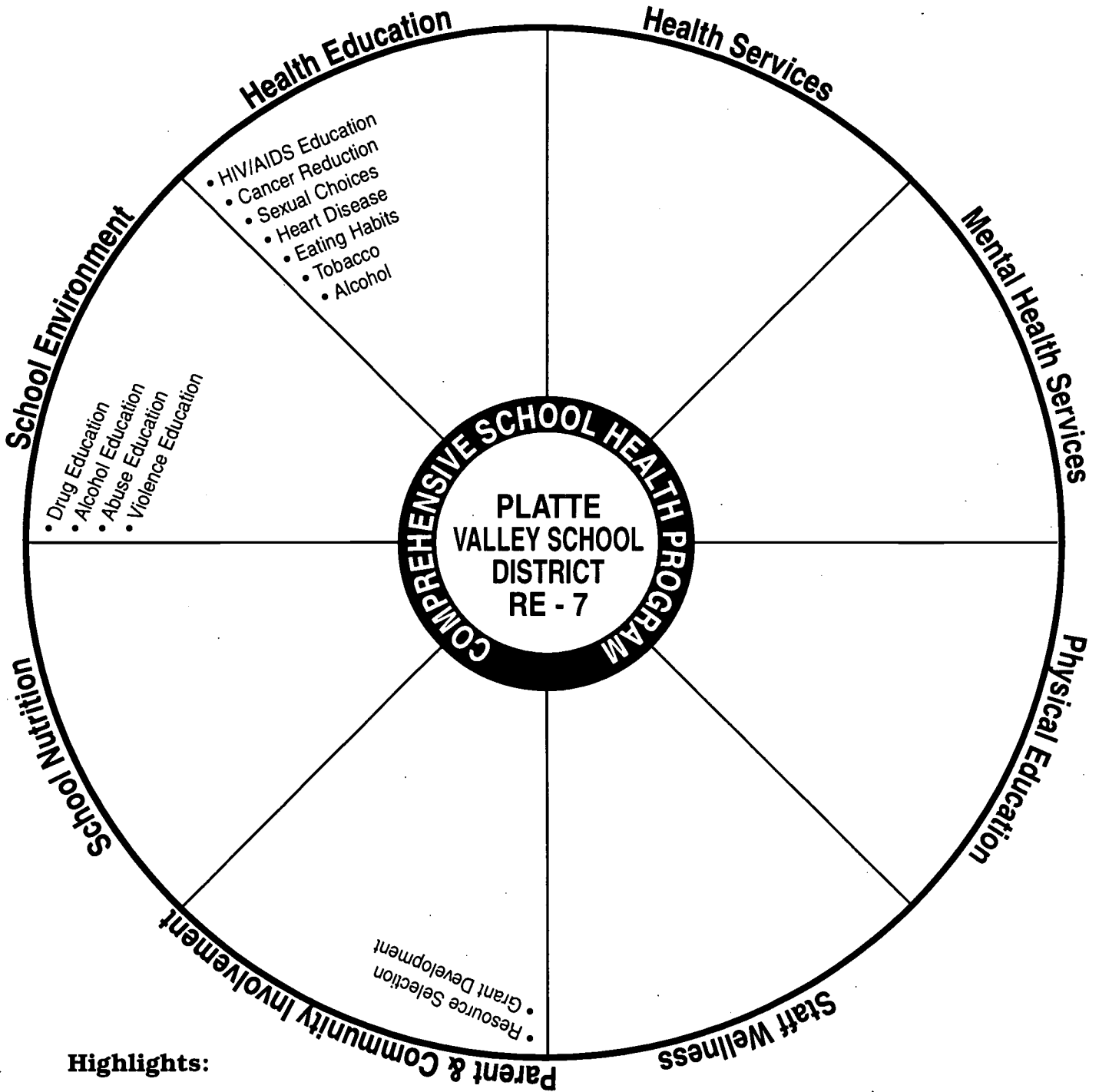
Highlights:

- ◆ Updated elementary "Growing Healthy" kits
- ◆ Updated teacher training on violence prevention



Weld County - Platte Valley School District RE-7

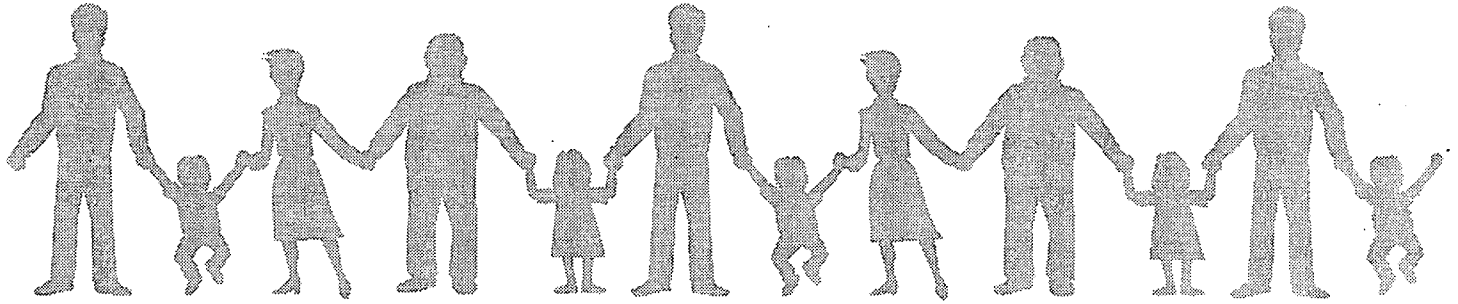
Focus: Health Education and Prevention of Risk Behavior



Highlights:

- ◆ Collaboration between K-12 health educators with community advisory groups for Safe and Drug-Free Schools and “Say Yes First”
- ◆ Health curriculum was evaluated for needed resources in violence and abuse prevention, nutrition education, NIV/AIDS education and tobacco, alcohol and other drug prevention

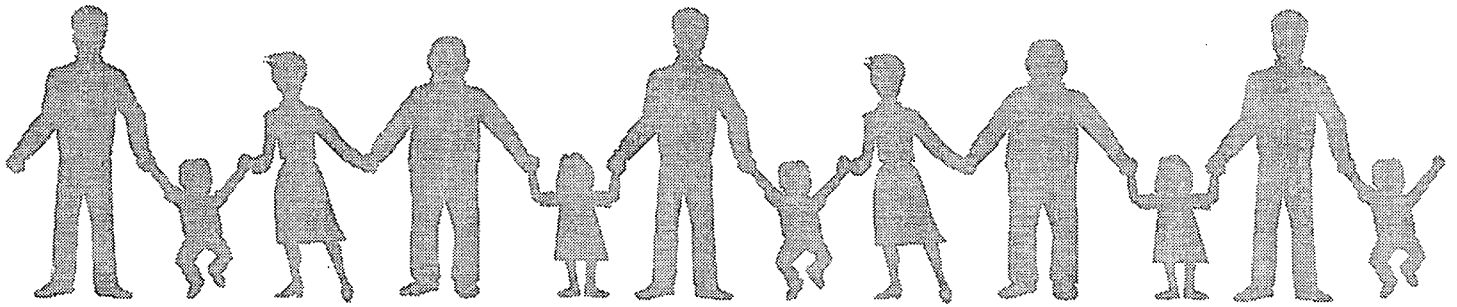




1994-95 STATE CONNECTIONS

- ◆ Provided an orientation to Comprehensive Health Education and the legislation to representatives of 20 school districts
- ◆ Department of Education handled over 1200 phone calls for technical assistance
- ◆ Provided training for over 100 Consumer and Family Studies teachers in the “Never Shake a Baby” program
- ◆ Provided professional development for 60 local health advisory council members in “Facilitating Team Development” strategies
- ◆ Collaborated with the Department of Public Health and Environment and the American Cancer Society to conduct a statewide Summit for 100 persons to design a framework for Comprehensive School Health Programs
- ◆ Began to design a state plan to further parent involvement with parents from pilot programs
- ◆ Initiated planning to identify successful models addressing the needs of teen fathers

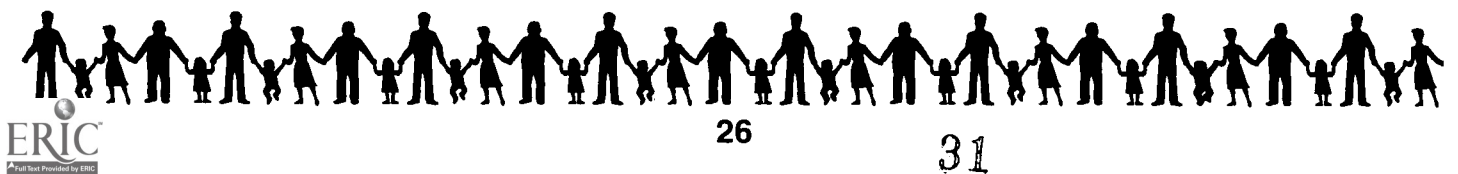


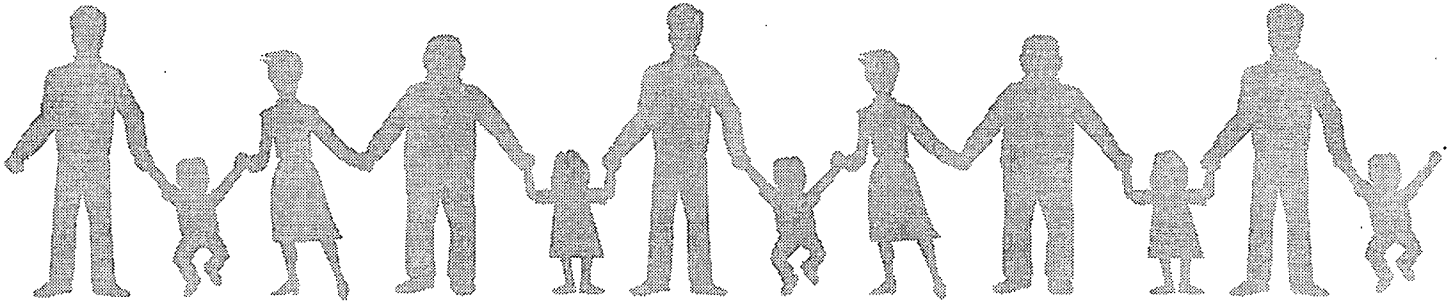


BARRIERS: MISSING LINKS

The programs identified four limitations to the successful implementation of their goals:

- ◆ lack of instruction time for health topics
- ◆ lack of teacher training in current health issues
- ◆ meaningful roles for parent and community involvement
- ◆ funding for staff positions and program cost





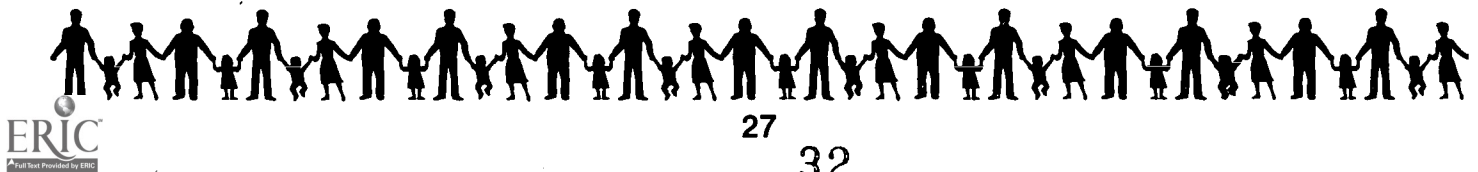
RESULTS: SOLID CONNECTIONS

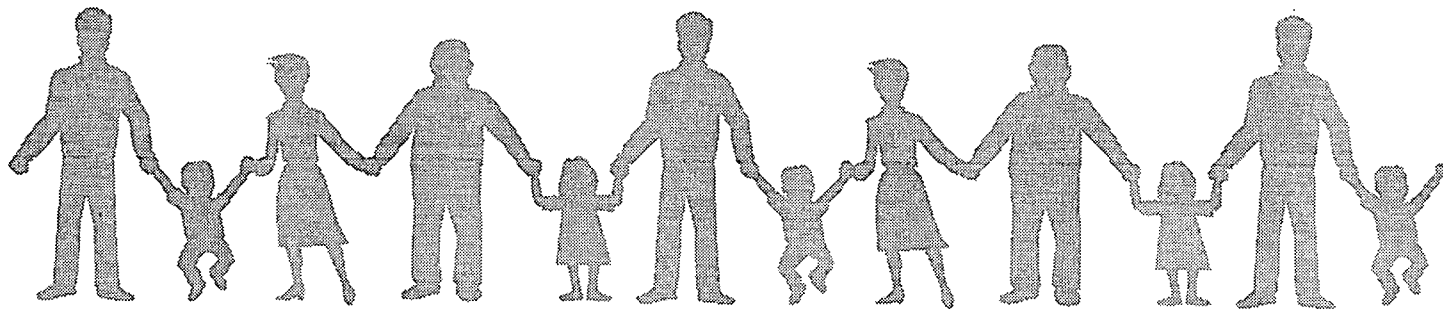
The funded programs report SUCCESS:

- ◆ every program has a local advisory committee
- ◆ health education is present in all programs
- ◆ health programs increase health knowledge but also show positive effects in:
 - increased attendance
 - lower suspension rates
 - lower violence reports

Programs report:

- ◆ better student attendance
- ◆ fewer discipline referrals
- ◆ less violence
- ◆ more student awareness of the importance of health
- ◆ tobacco-free campuses
- ◆ more teachers prepared to teach health topics
- ◆ more parents and community involvement
- ◆ more health services





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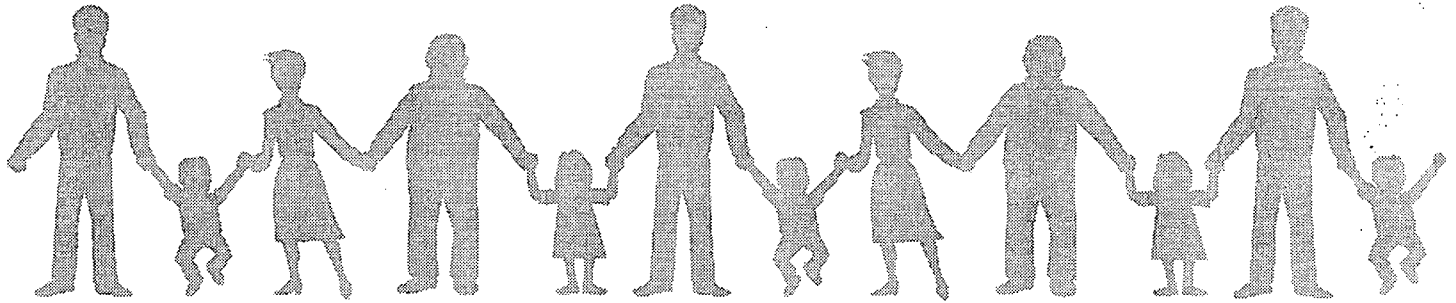
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R10 GRANDE COUNTY

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