



The purpose of the School Health Interagency/Community Workgroup (SHIW) is to expand access to school health resources and coordinated efforts of a larger community interested in improving the health of students. This group collaborates with other state programs and community organizations who are engaged in ongoing activities relevant to the health and academic achievement of young people. The SHIW also served as the workgroup to review data and provide feedback about data collection for the Youth Risk Behavior Survey (YRBS) and School Health Profiles (Profiles). These results are reviewed within the SHIW workgroup and input is provided for the dissemination and publication of results. Members of the SHIW utilize the results in program planning and implementation in their agencies and programs. The SHIW met in September 2010 to determine priorities for the upcoming year.

SHIW Priorities

The following SHIW small groups identified specific priority recommendations, based on data gathered and including the following:

1. Healthy Schools Program: recommended development of a Healthy Schools Program in each quadrant of the state, delivered through the Regional Education Association (REA) system.
2. Physical Education and Health Education: recommended an increase in high school graduation requirements related to physical education and health education. In addition, there was a priority recommendation for requiring appropriate recess time for K-5 students daily.
3. School Nursing: recommended to provide school nursing services, through the REA delivery system and through partnerships with local agencies. Participation in this program would be voluntary and funding would be calculated on a base fee plus a per pupil payment.
4. Healthy and Safe Schools: recommended the establishment of a Graduated Drivers License (GDL) system that would include a year-long "permit" phase and a six-month "intermediate" phase, including more parental involvement. ND remains the only state without such a requirement. In addition, the loss of Title IV federal funds for safe and drug free schools will have implications related to the issues of drugs and alcohol, bullying, and violence prevention.
5. Children's Special Health Needs: recommended that children with special health needs should no longer be seen as a separate and distinct category from other children. Increases in screening for vision, hearing, mental health and other preventative/diagnostic activity would benefit all children and families.

School-age children face developmental and social challenges that have an impact on existing chronic conditions, such as asthma and diabetes, and lead to other serious problems such as pregnancy, sexually transmitted diseases, motor vehicle accidents, and suicide. Factors like poverty, lack of parental involvement, and a need for better access to high-quality health care exacerbate these problems. Educating and supporting students, particularly those at high risk, to develop health promoting behaviors and effective coping strategies can improve health and contribute to patterns of healthy behavior that will extend into adulthood. Coordinated school health programs that have a strong emphasis on health education and health promotion are an important strategy to foster student health.

Healthy Children Learn Better!

For more information about North Dakota Coordinated School Health visit:



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