GOT HEALTH? ACTION RESEARCHING A STUDENT-LED HEALTH PROMOTION PROGRAM

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ABSTRACT
In British Columbia (BC), Canada, a school district effort was launched to focus on mental wellbeing in middle and senior secondary schools. The initiative “Got Health?” was intended to help students take the lead, through action research, in program development and delivery of information. The purpose of this action research project was to evaluate, assess, and report student and staff perceptions of “Got Health?” Particular focus lay with student and staff thoughts concerning the inspiration, benefits, and challenges of the student-led mental health initiative across multiple and diverse schools. Focus group interviews were conducted involving student and teacher members of “Got Health?” teams. Results revealed that the majority of participants believed a positive change occurred in their school environments, which included a favourable impact on the mental wellbeing messages shared throughout their school communities. This suggests that a student-led inquiry approach can be an effective means of promoting mental wellbeing in school settings.

KEYWORDS: Healthy schools, student wellbeing, student engagement, school connectedness, mental health

INTRODUCTION
Arguably, students are the primary stakeholders in the education system. Policy, teaching practices, and several educational programs are developed, improved upon, and assessed to capitalize on student potential for producing healthy, educated, capable, and ethical
citizens. Hence, the relationship between student empowerment and school engagement is essential (Millings, Buck, Montgomery, Spears, & Stallard, 2012). However, several education systems have been almost exclusively dependent on adult leadership with minimal student input, relying upon a clear ‘top-down’ approach (Dempster & Lizzio, 2007). Similarly, Feuer and Mayer (2009) have contended that few school boards and other decision-making councils include student representation. Not only does this limit student input and involvement in important decisions required for program offerings which will directly impact them, but this top-down approach may hold young learners back from being fully engaged and genuinely invested in their learning environments.

That said, student and teacher opinions may differ on important issues within the learning environment. For example, school teachers and staff have been found to perceive bullying to be a less severe issue than did their students (Thapa, Cohen, Guffey, & Higgins-D’Alessandro, 2013). This difference in perception on such a significant topic concerning student development may influence what programs are offered, implemented, assessed, and continued in school communities. In other words, if teachers and staff are not informed of the severity or importance of certain issues that arise, it is highly unlikely that relevant programs will be implemented to support student development. Although there is a lack of research in the area, it is certainly logical to include the main beneficiaries (i.e., students) in certain decision-making ventures (Berg, Willi-Stewart, & Kendall, 2016; Pan Canadian Joint Consortium for School Health, 2010). Promoting student decision-making has the potential to help enhance the acceptability of programs offered, afford students a greater sense of investment in their education, and establish a positive school climate.

A positive school climate can be referred to as a caring environment where students are provided with a range of opportunities to meaningfully participate in activities and decision-making. Schools have been found to be a natural setting for students to practice decision-making skills and students who believe they are connected to their school environment experience fewer risk behaviours (Mitra, 2004). According to Mitra (2004), “efforts to increase student voice can create meaningful experiences that help to meet the developmental needs of youth – and particularly for those students who otherwise would not find meaning in their school experiences” (p. 681). Unfortunately, it has been found that a majority of grade school students are chronically disengaged (Bryan, Moore-Thomas, Gaenzle, Kim, Lin & Na, 2012; Corso, Bundick, Quaglia, & Haywood, 2013), which is an overwhelming proportion and a distinct issue to contend with for school systems worldwide (Willms, 2003).

Although the literature concerning teacher strategies for leading students is extensive, promoting leadership qualities in youth has not been investigated as deeply. However, the limited information focusing on student leadership programs within school environments has found that it can positively influence both school climate and individual development (Berg et al., 2016; Hine, 2012; McConnell, Frazer, Berg, Labrie, Zebedee & Naylor, 2014). These programs typically develop valuable leadership skills that can be employed for years to come while also contributing to the creation of collaborative communities where students experience the effects of making meaningful impacts. Students who believe they
are consequential to the decision-making process at school feel a sense of positive connection with school; they also appreciate civic engagement more as young adults (Eccles & Gootman, 2002). Hence, student decision-making opportunities genuinely impact school environments, not only for the individuals but also for the community.

When involved in the decision-making process in schools, student benefits have been found to cover a wide range of critical areas. School connectedness is one of the leading predictors of positive youth wellbeing (Koehn & Cassels, 2012; Millings et al., 2012), and engaged students are more likely to become and remain invested in their education (Bryan et al., 2012; Thapa et al., 2013). Likewise, student engagement is perceived to be a protective factor against many risks that confront youth such as substance abuse, school absenteeism, early sexual experiences, violence and risk of accidental injury, and emotional distress (Bryan et al., 2012; Centers for Disease Control and Prevention [CDC], 2010; Corso et al., 2013; Koehn & Cassels, 2012; Thapa et al., 2013). Other such benefits include improved self-esteem, psychological wellbeing, and academic achievement (Bryan et al., 2012; Thapa et al., 2013). Moreover, student leaders have been found to develop school pride, become in-school role models, and perceive their school climate to be more caring and connected (CDC, 2010; Hine, 2012). Likewise, students who spend time in youth programs have been associated with several ‘thriving’ behaviours such as leadership, cooperation, and overcoming adversity. That said, Dawes and Larson (2011) have contended that youth must not only attend but become engaged participants, psychologically, for benefits to be met.

There are a number of evolving strategies for engaging students and developing leadership skills is one that is now receiving greater attention (Dempster & Lizzio, 2007; Ferland, Chu, Gleddie, Storey, & Veugelers, 2014; Huber, Frommeyer, Weisenbach, & Sazama, 2003; Zimmerman, Stewart, Morrel-Samuels, Franzen & Reischl, 2003). Research on teaching student leadership skills shows its promise for creating more resilient, engaged, and capable citizens, as well as developing a positive school climate (Dempster & Lizzio, 2007). This is leading to more encouragement towards including students in decision-making, which is especially suitable given that students are the primary stakeholders in policy and program implementation (Feuer & Mayer, 2009).

That said, future research on student engagement and leadership should focus on the issues and initiatives students believe are most important (Berg et al., 2016; McConnell et al., 2014). Although adult leadership in the school and community is vital, a solely adult vision may limit the potential of programs aimed at improving students’ education and quality of life. Exploring the impact of student empowerment and helping students become meaningful decision-makers will be beneficial to entire school communities. After all, student empowerment and improving the school climate are essential elements in education, especially with respect to establishing positive mental wellbeing.
**Got Health**

One such program is the inquiry-based *Got Health?* project in the province of British Columbia (BC), Canada. The aim of *Got Health?* is to empower students, through action research, to ask questions, create initiatives, examine and re-examine the impact of their activities on the factors that contribute to a more positive school climate. Recently completed studies (Berg et al., 2016; McConnell et al., 2014) found that *Got Health?* fostered both student engagement and leadership through student-led inquiry in elementary, junior, and senior high school settings. Current research focusing on student engagement and positive school climate indicates that students who feel connected to their school and are invested in their education may gain psychosocial benefits (Cargo, Grams, Ottoson, Ward, & Green, 2003). Among many other benefits, *Got Health?* helped establish relationships throughout the school community, which complemented the literature in that participation in such student-led projects can enrich peer and student-adult relationships (Griebler, Rojatz, Simovska, & Forster, 2014).

Although *Got Health?* has been successful in all levels of the Kindergarten to Grade 12 (K-12) school system, the current study focused solely on middle (grades 7-9) and senior secondary (grades 10-12) schools and the promotion of mental wellbeing. This focus stemmed from the consultation with school district personnel (Health Promoting School Coordinators), administration, teachers, and students. Mental wellbeing was being touted as a pressing issue as bullying, anti-social behaviours, and student suicide rates were on the rise. Hence, the purpose of the *Got Health?* study was to investigate participant perceptions toward the development and implementation of the student-led health inquiry initiative, and to extend social and emotional learning opportunities that foster resiliency. Further, the worthiness of the *Got Health?* initiative was explored as a means for empowering middle and senior secondary school students, affording them a voice and enhancing their sense of school connectedness and belonging.

**Methods**

The action research study was what Herr and Anderson (2005) have labelled *outsider in collaboration with insider action research*. This type of action research is based on the notion that both the researcher and the participants involved collaborate to find answers to the question(s) posed or problem(s) to be solved. The notion of the researcher as *expert* is diminished, as identifying this would undervalue the participants’ knowledge (Herr & Anderson, 2005). This type of action research is not to be confused with participatory action research. Participatory action research is based on the notion that a group of people in the community (e.g., teachers in a school) identify a problem and then contact others to help with this problem (Mardiros, 2006). The study involved the outsiders (researchers) identifying the problem or question and then obtaining the collaboration of the insiders (teachers, students) in a school setting to find and identify potential answers.

**Ethical Considerations**

This study adhered to the researchers’ university and school district research ethics board guidelines. The participants were informed about the study’s purpose and procedures in the most clear and complete manner so they were prepared to make a conscious decision
of whether or not to volunteer in the study. The participants were protected from harm (Bogdan & Biklen, 2007), and their identities have remained anonymous in all descriptions of research findings.

Participants and Procedures

*Got Health?* took place in a large urban school district in BC, Canada between October 2015 and May 2016. Along with the researchers, two school district staff members (Health Promoting School Coordinators) supported *Got Health?* Applications for submission went out to teachers and students in September 2015 through the school district portal. School teams from 12 schools submitted an application and all 12 were accepted. Of the 12 schools, four participated in the research study and included:

- School A: senior secondary school with grades 9-12; student population of 1,513
- School B: senior secondary school with grades 10-12; student population of 1,247
- School C: middle school with grades 7-9; student population of 740
- School D: middle school with grades 7-9; student population of 868

Each participating school had a *Got Health?* team. Teams were diverse and included students (2-8 student leaders), at least one lead teacher (whose purpose was to guide and support the students through the inquiry process), administrators, and community partners (e.g., parents/guardians, public health nurses).

Research Cycles

As described by Koshy (2010) and Creswell (2015), an action research framework was employed through the following stages: planning, acting/observing, and reflecting (see Figure 1). Because “action research rejects the notion of an objective, value-free approach to knowledge generation in favor of an explicitly political, socially engaged, and democratic practice” (Brydon-Miller, Greenwood, & Maguire, 2003, p. 11), it was essential for participants to offer valued input within each stage. With action research being largely about encouraging individuals, such as teachers, to be continuous learners in their classrooms and of their practice (Gay, Mills, & Airasian, 2009), this study met its intended purpose.

**Planning.** There were two initial half-day training sessions provided, one in late October, the other in mid-November. The first half-day session was designed for the lead teachers only and provided them with education on the four pillars of Comprehensive School Health, the inquiry process, and supports that would be available to them throughout the year. The second half-day training session occurred two weeks later and included the full teams of students, teachers, and partners. During this session, students were also educated on the four pillars of Comprehensive School Health and were provided with opportunities to share issues students face within each pillar, as well as areas they believed were going well in their school settings. To ensure an action research-oriented experience occurred, students were then provided with the opportunity to help shape their inquiry question, map out a

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1 School D was a dual-track French immersion school.
plan of action, and start thinking about ways to collect and analyze data that could be utilized later for reflection (Gay et al., 2009). The inquiry questions were the driving forces behind the projects the students implemented and are listed below.

- How will we improve our learning and awareness around positive mental health?
- How will creating mental health awareness in a presentation improve mental health in our school?
- How can facilitating community presentations on mental health issues/topics support youth and family members in their overall wellbeing?
- How will increasing the sense of belonging improve our school culture?

Each health team was provided with targeted support in the form of a $500 grant, teacher release time (i.e., 1.5 days of release time outside of the training sessions, and 1.5 days of release time for the training sessions and final celebration), as well as training and support from the Health Promoting Schools Coordinator.

**Acting/Observing.** In January and February of the same school year, the researchers and Health Promoting Schools Coordinator met with all teams and assisted them in implementing the next steps for their inquiry project and with connecting them with other schools and community partners to support their endeavours. The Coordinator met with the groups again in March and April to conduct focus group sessions to reflect on the progress of the projects and to help the students re-plan and take action on their projects as required for this action research. Here, the focus was principally placed an intention of solving a local issue (Johnson & Christensen, 2012).
Reflecting. All school teams were provided with the opportunity to share their projects and findings at a final celebration morning in May, 2016. This celebration also provided the chance for teams to provide feedback to one another so that effective subsequent planning could occur for the following school year. This feedback and reciprocal communication played an instrumental role in this cyclical action research project.

Data Collection and Analysis
To collect participant perceptions’ of Got Health?, a focus group interview protocol was prepared to provoke discussion concerning experiences in the program. Participants were asked the following questions:

1. What did you hope to accomplish by being involved in the Got Health? program?
2. Was this learning opportunity important to you? Why or why not?
3. Was there anything that would improve your Got Health? experience?
4. In what ways, if any, did Got Health? change your school environment for mental wellbeing?
5. What were the good things, if any, about Got Health? in your school?
6. What challenges, if any, did you have during the Got Health? program?
7. Do you think it is important that students lead the change in health initiatives in schools? Why or why not?
8. Do you think being involved in Got Health? promoted positive mental wellbeing messages in your school? If so, how? If not, why?

The focus group interviews were recorded and transcribed verbatim in preparation for content analysis. Because developing a familiarity with the data along with a deep sense of the general ideas and meaning is important during the analysis process (Creswell, 2015), writing research notes and reflecting on each focus group interview, in addition to transcribing the interviews, assisted in developing a deeper sense of the data along with the identification of potential emerging themes. The coding categorization process (i.e., open coding) was conducted independently by a research team member and reviewed by the principal investigator in order to establish trustworthiness (Lincoln & Guba, 1985). Direct citations from the focus group interviews were used; this enabled future readers to decide on the accuracy of the qualitative data interpretations.

RESULTS
Three major themes emerged: inspiration; trials and tribulations; and gains. Further explanation of these three themes follow:

Theme 1: Inspiration
Commenting on their level of being inspired to participate in Got Health? participants offered a range of responses. Most notably, participants mentioned “raising mental health awareness” as an inspirational tool, while other common responses included a “desire to help people...to help improve the school [environment] for students and teachers” and to “promote community by bringing people together.” Other responses included a hope for more “leadership opportunities” and to “teach students specific strategies and solutions for
dealing with mental health issues." One student mentioned a desire to establish a specific program for mental health, which could involve introducing "a therapy dog to the school at various times."

Additionally, some participants alluded to the importance of participating in a school health initiative such as Got Health? adding that it should be to help "destigmatize mental health throughout the school community." Similarly, shared responses included the need to enable or provoke discussion about mental health and to "protect students from being bullied and marginalized" and the importance of "spreading happiness and wellbeing." The inspiration to participate in Got Health? varied. However, it is clear that most participants perceived the initiative to be one that can help enhance student, staff, and school communities' overall health and wellbeing.

**Theme 2: Trials and Tribulations**

Individuals in the student-led teams identified ways to improve their experience in the program. For example, some students mentioned a need for a more diverse team (e.g., students from younger age groups to gain a broader perspective), as well as a need to build momentum for future years in the program. Others contended that there was a need to advertise their team more effectively. That is, students mentioned, "we needed to get the word out better about our program." Likewise, two participants believed that "additional time" would have allowed better results. Other students indicated that they "need to gather more input" and "organize time better." Some students mentioned that they were challenged to put on initiatives due to "lack of funds" and it was difficult to "find more opportunities for school activities." A number of students contended there was a "lack of student interest" and a "lack of time and organization within their group." Likewise, respondents suggested a challenge was overcoming stigma surrounding mental health, and meeting the challenge of doing something new together as a group.

**Theme 3: Gains**

In response to our assessment, all participants stated that their efforts in Got Health? changed their school culture concerning mental wellbeing. For example, one student shared that "we really noticed that people were a lot nicer and happier when we did stuff like with Fabulous February," while another participant stated, "it changed the perspective of everyone, so everyone knows more about it now." This same respondent elaborated by stating, "everyone's learning new ways to know if they have [mental health issues], and if they know if they have it, they know ways to help manage it." Likewise, another student replied that, "it changed a lot. We have noticed that people are in better moods when at school and are more open to talk about things to the counsellor," while another stated that "Got Health? allowed us to make mental health a positive focus."

Although the student respondents added much to the perceived gains of Got Health? teachers, too, expressed their thoughts about the benefits. For example, one teacher noted that, "we got 90% of the students to realize what’s going on around them and stop any bullying or negative thoughts toward other students," while another commented that, "It didn’t just affect our students, it also affected lots of our staff."
When asked what good things came from being involved in Got Health? one common response was that student-led groups were able to raise awareness in their schools about mental health issues and ways of finding support. Two students mentioned an increased sense of connection and belonging in their school and two others stated the staff and students were happier because of their efforts. One student stated, “I’m just so happy that now that we’re in high school, there are more programs and you can do all kinds of things.” When discussing the increased awareness of mental health, a teacher indicated, “amazing posters and website that included numerous resources for students struggling with mental wellness, wellness team bonding, and great academic support during the stress exam times in high school,” while another teacher offered that, “there have been more hits on our website as students access the resources there. Also the resource posters around our school are prominent.” Students noticed more awareness as well:

...we have the Support Profiles [introducing Counsellors and Peer Counsellors with a photo and written blurb], and we have new students coming in who are automatically "forced" to be aware of what’s happening. We do the "Depression Lessons,"...they have also opened the eyes of our students to peer counsellors, what they can do if they’re feeling down. Also the Mental Health Week we’re about to do, when you walked in I’m sure you saw the decorations. When you decorate the school, people notice and then they have to ask and find out.

All respondents agreed that Got Health? promoted positive mental wellbeing messages in their schools. For example, a student respondent stated, “I remember doing presentations for [a health issue] and those kids got really involved, they started asking real questions about what they should do in certain situations. I think they actually listened and took that to heart,” while another student respondent contended,  

...I think it gave a lot of support for students not [yet] in our school who are younger who are going to be in our school. We had leadership and big sister clubs that were helping grade 8 and 9 girls during the transition to high school. We also had Beyond the Heart [for] grade 8s’ anti-bullying. We’re leading the transition for the future generations in our school.

Likewise, another student stated, “[help when I was in grade 8 and saw [a health issue] presentation, it made me look and see where I can go to get],” while another indicated that, “I think it has increased knowledge. With nutrition, I think it’s helping people see that balance [with mental health]...you can’t have one without the other.” One student added, “a lot of kids now are more happy and excited to be in school and have made healthy habits such as if they are upset or stressed they will go and talk to a friend or a counsellor,” while a teacher thought that, “it brought more awareness around this issue. Some of our team members presented at a staff meeting around mental wellness, our club, and test anxiety which expands awareness even further.”
When asked if they thought *Got Health?* helped change student perceptions of mental wellbeing, the majority of responding students agreed that it had. However, a few respondents had different thoughts. For example, one student stated,

> I feel like the general student body probably isn't too aware, just because they're not interested in looking for it. We can only do so much to present it to them, like we do a big assembly, or a series, but there has to be some initiative on other people's part to want to learn about it and find out. We can give you the information; we can't make you read it.

Overall, when considering the perceived gains of *Got Health?*, it was clear that the participants believed their schools were safer places in terms of mental health issues because of the high level of attention. As one student indicated, “people are more aware of what’s going on,” while another stated “it feels like we’re leaving a legacy.”

**Why A Student-Led Inquiry Approach?**

Participant agreement was unanimous when considering the importance of their teams being led by students. The fact that *Got Health?* promotes a student-led initiative was perceived to be positively impactful. Evidence shows that student-led health initiatives have positive results and lead to such things as enhanced leadership skills and improved personal health, and inspiration (Gutuskey, Centeio, Shen, McCaughtry, & Murphy, 2014). This was evident in participant responses. For example, one student stated, “I think people listen to their peers more than their teachers because the teachers are forcing on them, but we're trying to just get the knowledge out. And I think that is what we’re doing, they listen to us more.” Another student indicated that,

> …it’s a big part because mostly people only listen more to what their friends tell them than what other people tell them. If a teacher tells someone to do something, there’s always going to be people that never do it. But if a friend is doing it, that invites you to want to do something with them.

Likewise, a student respondent stated,

> …adults are adults, and they're cool and helpful. Real cool dudes. But the thing is, there’s a disconnect, when they become a teacher, you think about them teaching you math and stuff, you don’t think about them talking about this kind of stuff with you.

Another student contended,

> Having someone who is your age group, who you see all the time around your school, and you don't think anything of it. And suddenly they come to you and say, ‘I’ve been struggling with this. This is what you can do.’ It’s almost like a kind slap in the face. An awakening.
Not only had the students perceived the strengths of student-led approaches. When asked if students can be trusted to lead their own health program, teachers were quick to respond positively. One teacher summed it up by stating “absolutely, as they know what students need!"

**Concluding Comments**
This study advances the understanding of in-school health programming, student-led initiatives, and the possibilities for students to develop, implement, and assess their own school-based initiatives regarding mental wellbeing. With this understanding, findings were practical and constructive for educational stakeholders. The findings, for example, were advantageous for middle and senior secondary school teachers by informing them that students do have the capacity to develop, deliver, and assess learning initiatives. Moreover, newly acquired perceptions and opinions from middle and senior secondary school students and teachers may promote more suitable health education programming (e.g., as they relate to mental health issues).

The United Nations has set in law the rights of young people to be consulted about matters that affect their lives (UNICEF, 2014). When young people are involved in producing knowledge that impacts policy and action in their communities, it can increase their sense of responsibility to others, fulfilling developmental needs in a healthful way while also enhancing the applicability of research, policy, and practice to reflect the experiences of the students involved (Wong, Zimmerman, & Parker, 2010). As such, we believe that developing effective student-led inquiry health initiatives based on empowerment and engagement, like *Got Health?* is important for the health of future generations.

We studied the impact of *Got Health?* through feedback from students and teachers participating in the project at their schools. Based on literature that demonstrated the benefits of engaging youth (Berg et al., 2016), students led inquiry projects aimed at mental health promotion. Findings revealed that students involved in *Got Health?* projects were motivated and inspired to promote positive mental health tasks and initiatives within school environments. Despite the challenges faced by students around the complexity of their projects and issues around leading peers, enthusiasm remained strong and students chose to persevere. Students and mentor teachers felt that student-led initiatives had a positive impact in the school environment and on mental wellbeing. Students also felt inspired from having the opportunity to be involved in this type of inquiry, and indicated that skills had been gained from the experience. This benefit was felt at a broader school level: In creating healthier school settings, students described greater social and emotional wellbeing and were motivated to provide positive mental health initiatives.

We acknowledge that the study was not without limitations. First, participants were from one school district and volunteered to be part of each *Got Health?* school team. This lack of randomization (i.e., sampling procedure) prohibits generalization of the findings beyond the study participants. Further, our inability to acknowledge and/or measure all potential demographic variables and relationships that may have impacted the study is another limitation. Additionally, there was the lack of representativeness from all participating
schools and some students may not have contributed as much as others. Despite these limitations, the study advances the understanding of in-school health programming, student-led initiatives, and the possibilities for students to develop, implement, and assess their own school-wide projects. With this understanding, findings were practical and constructive for educational stakeholders. The findings were also advantageous for middle and senior secondary school teachers by informing them that students do have the capacity to develop, deliver, and assess learning initiatives. The study also supports the existing body of knowledge concerning student-led programming for mental health promotion.

REFERENCES


**Biographical Note:**

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Mr. Mark Wells is a teacher in School District #23 Central Okanagan where he specializes in music education. Mark is a passionate educator who instils a love of movement and the arts in his students.