



**Specialized Instructional Support**  
**&**  
**North Carolina Healthy Schools**

# **Whole School, Whole Community, Whole Child: Data Drives the Work**

October 6, 2020



# WHOLE SCHOOL, **WHOLE COMMUNITY**, WHOLE CHILD

Healthy Children  
Learn Better





# Our Team



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Section Chief



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State School  
Health Nurse  
Consultant

Administrative  
Assistant



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Health & Physical  
Education/Athletics



*Burt Jenkins*

Healthy Schools



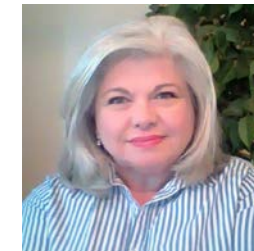
*Susanne Schmal*

Data & Policy



*Les Spell*

School  
Counseling



*Cynthia Floyd*

School Social  
Work



*Pachovia Lovette*



# Health Data Collection

**Healthy Active Children  
Progress Report**

**School Health Profiles**

**Youth Risk Behavior Survey**





# What is the YRBS?

- NC conducted at **middle** and **high school** levels
  - Administered in odd years in NC since 1993
- All schools and classes are **randomly selected**
- Participation is **voluntary** at each level
- Parental consent is **required**
- Designed to be completed in **one class period**
- Completely **anonymous**

YRBS



# Priority Health-Risk Behaviors and Health Outcomes Monitored by YRBS

- Behaviors that contribute to the leading causes of mortality and morbidity
  - Unintentional injuries and violence
  - Sexual behaviors
  - Alcohol and other drug use
  - Tobacco use
  - Unhealthy dietary behaviors
  - Inadequate physical activity
- Obesity
- Other priority health issues

**“Student voice is  
the road to  
change.”**

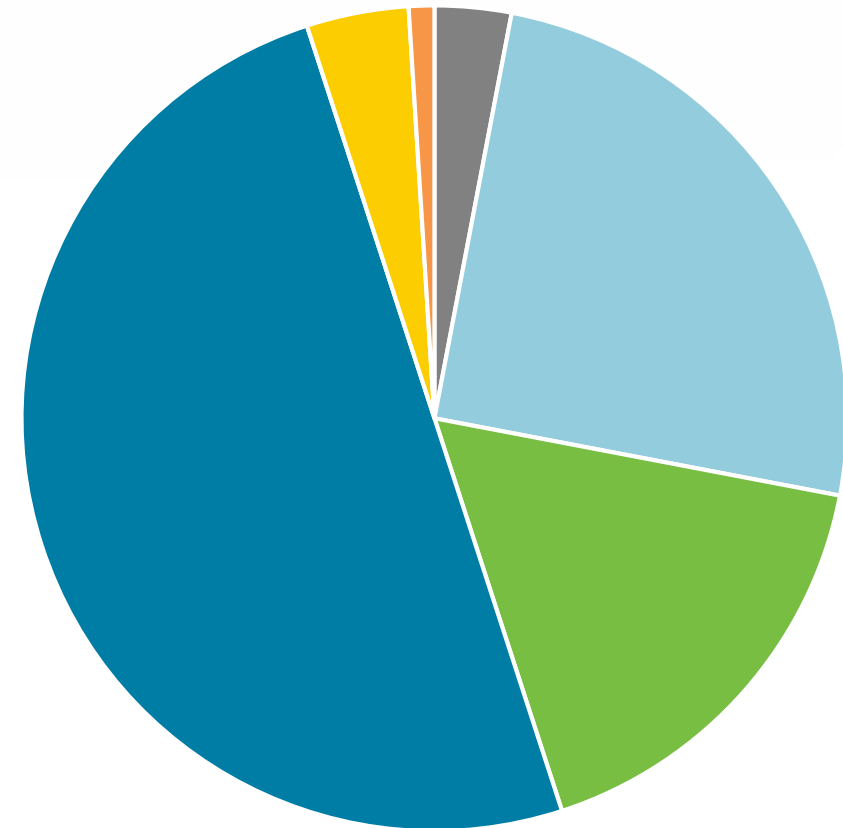
**- Dr. Russell J. Quaglia**



# Who took the survey?

- 3,056 high school students
  - Male 1,401
  - Female 1,613
    - Asian 3%
    - Black 25%
    - Hispanic 17%
    - White 50%
    - Multiple Races 4%
    - All other races 1%

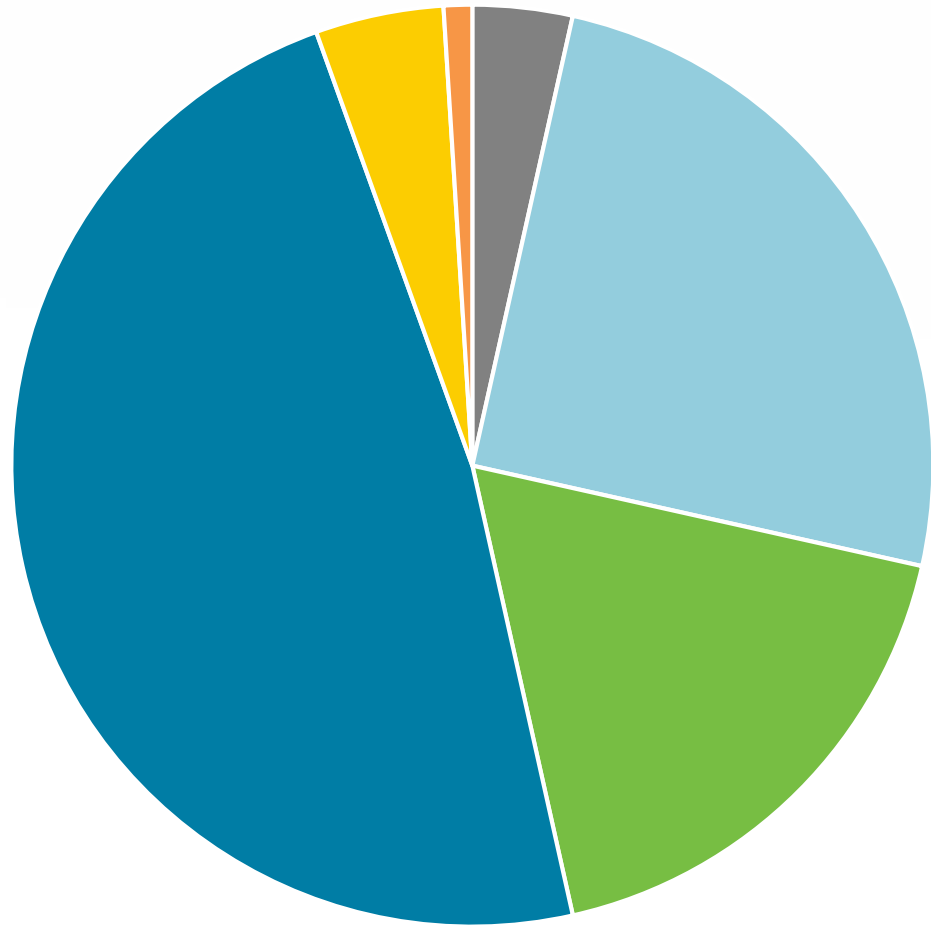
2019 NC High School YRBS Participants



■ Asian ■ Black ■ Hispanic ■ White ■ Multiple Races ■ All Other Races

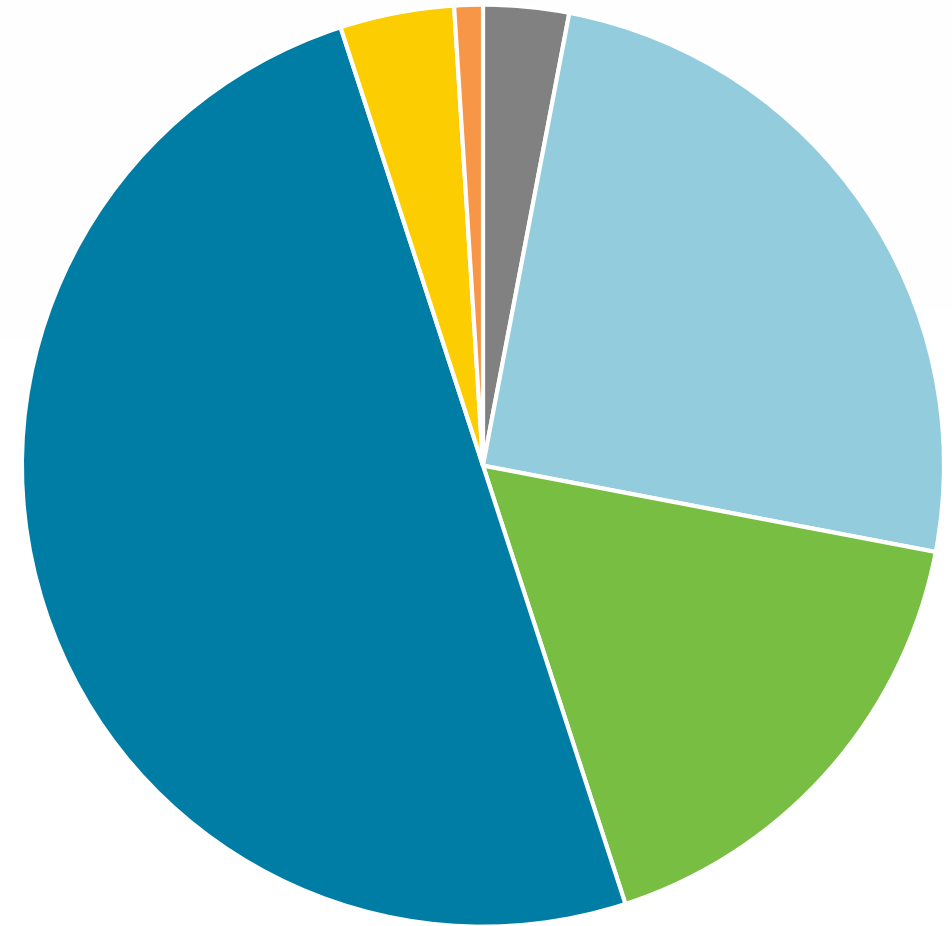


### 2019 NC Public Schools Students



- Asian
- Black
- Hispanic
- White
- Multiple Races
- All Other Races

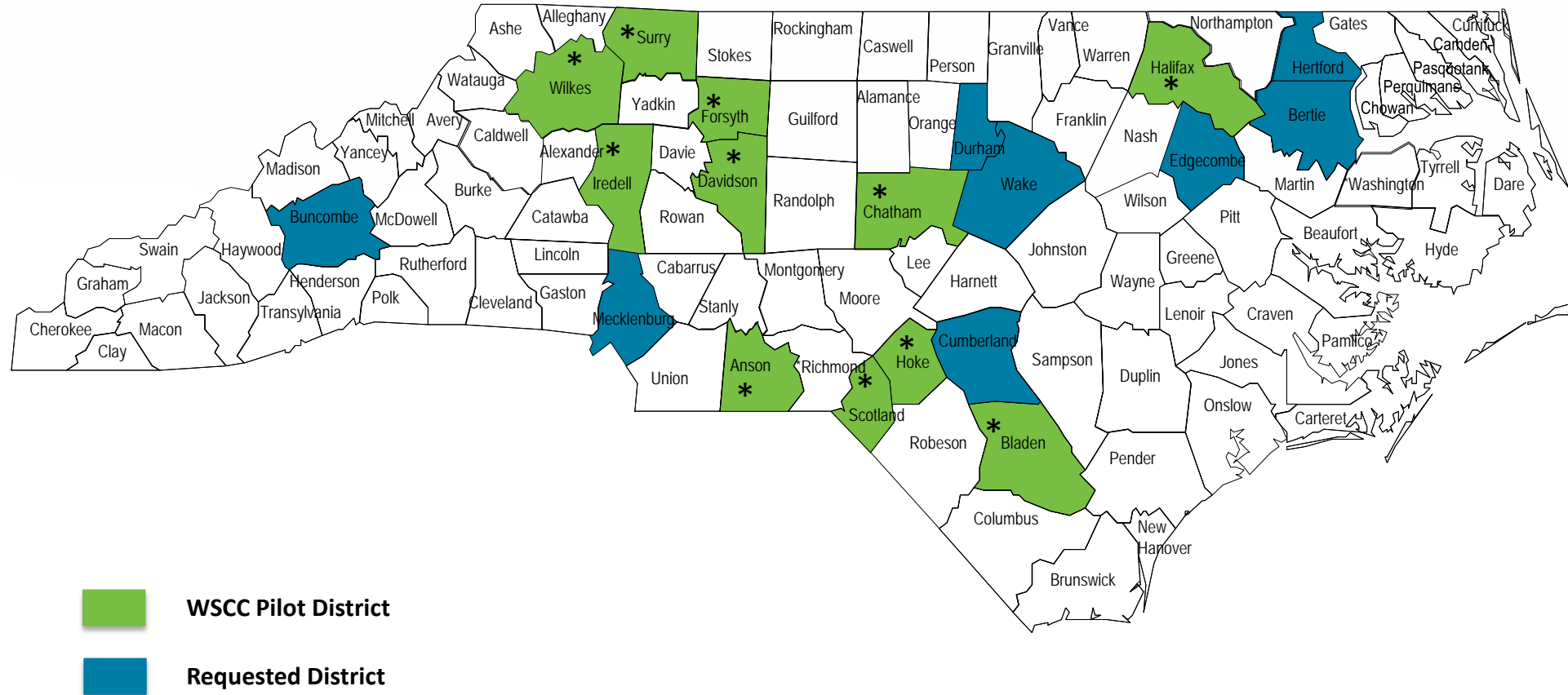
### 2019 NC High School YRBS Participants



- Asian
- Black
- Hispanic
- White
- Multiple Races
- All Other Races



# Oversampled Districts



**Note:** Thomasville City Schools is LEA for WSCC Pilots, not all of Davidson.



# Who uses NC YRBS data?



## Child Fatality Task Force



*Our Children, Our Future,  
Our RESPONSIBILITY*



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

Division of Mental Health,  
Developmental Disabilities, and  
Substance Abuse Services

**Chronic Disease and  
Injury Section**

**Injury and Violence Prevention Branch**





# NC Students by the Numbers



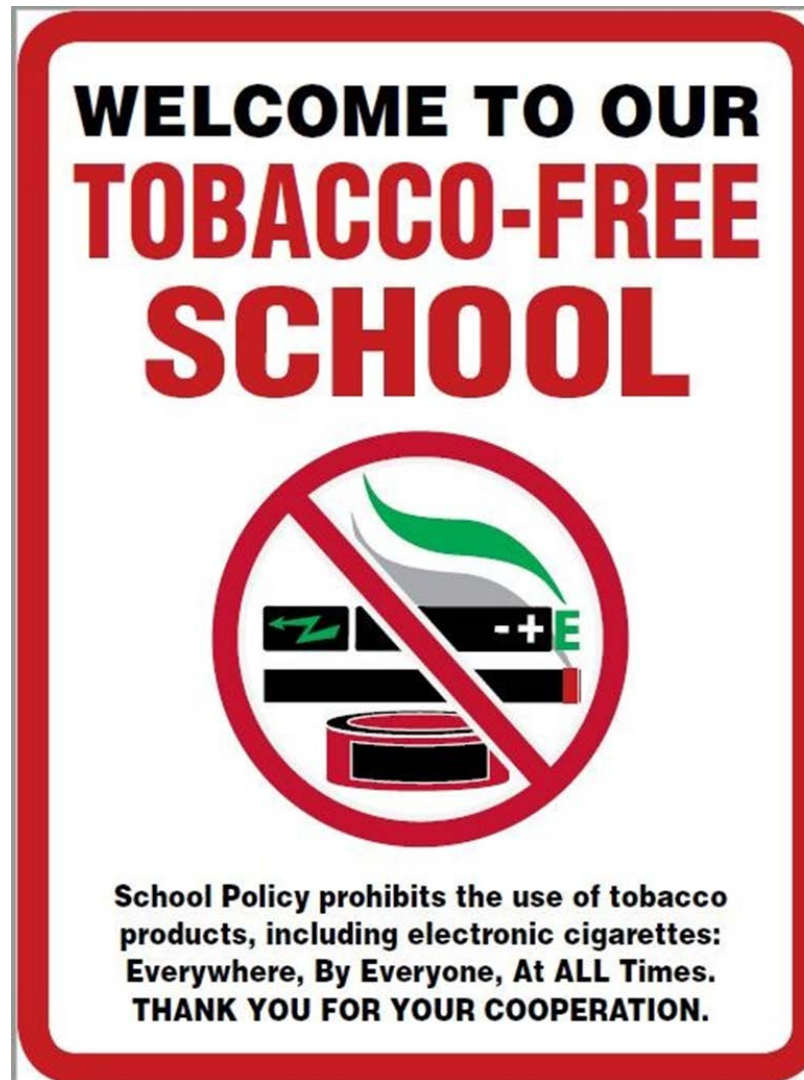


# What We Know



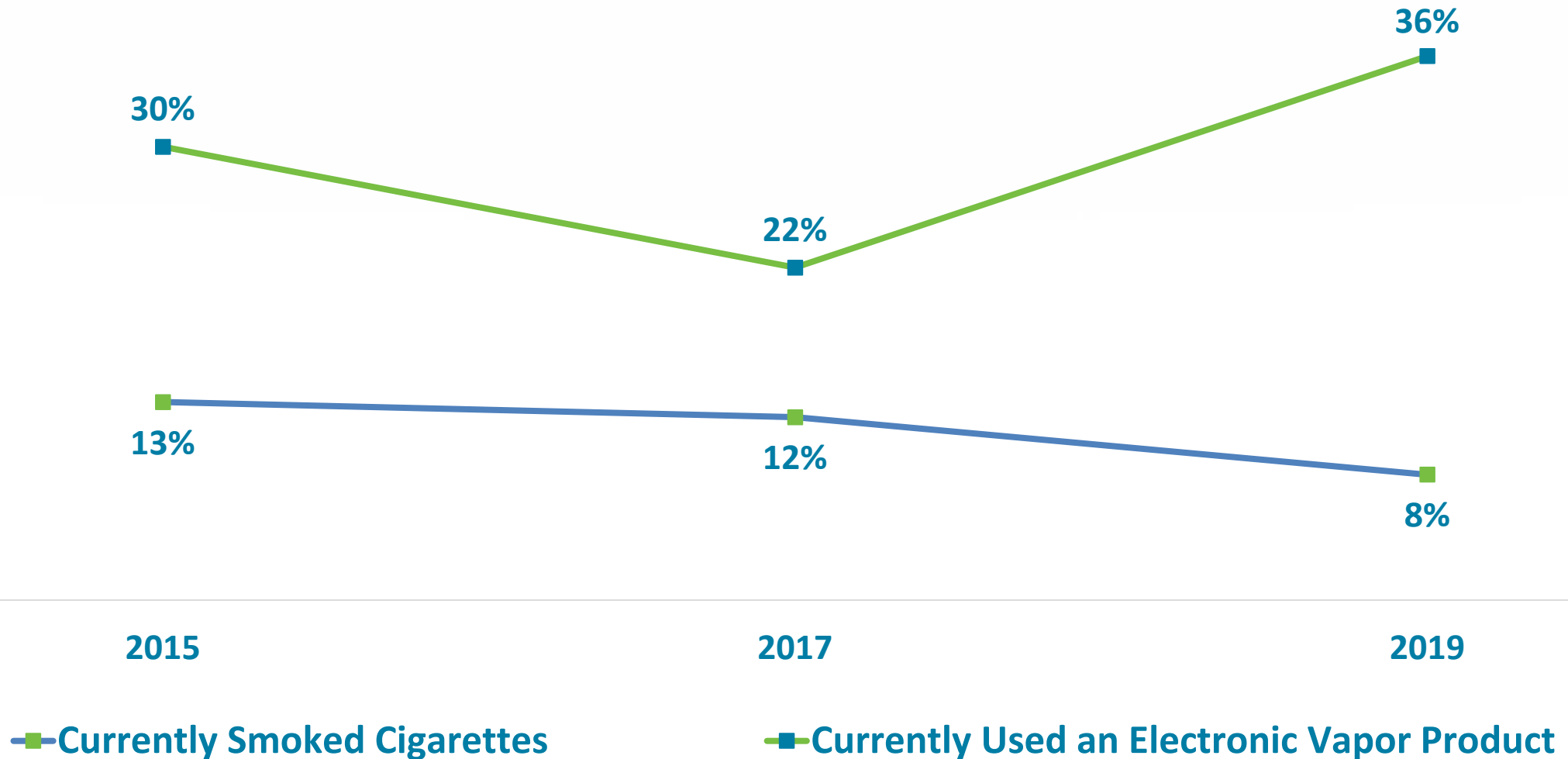


# Vaping vs Cigarettes





# Current Cigarette Smoking vs. Current Vaping 2015-2019 NC High School Students





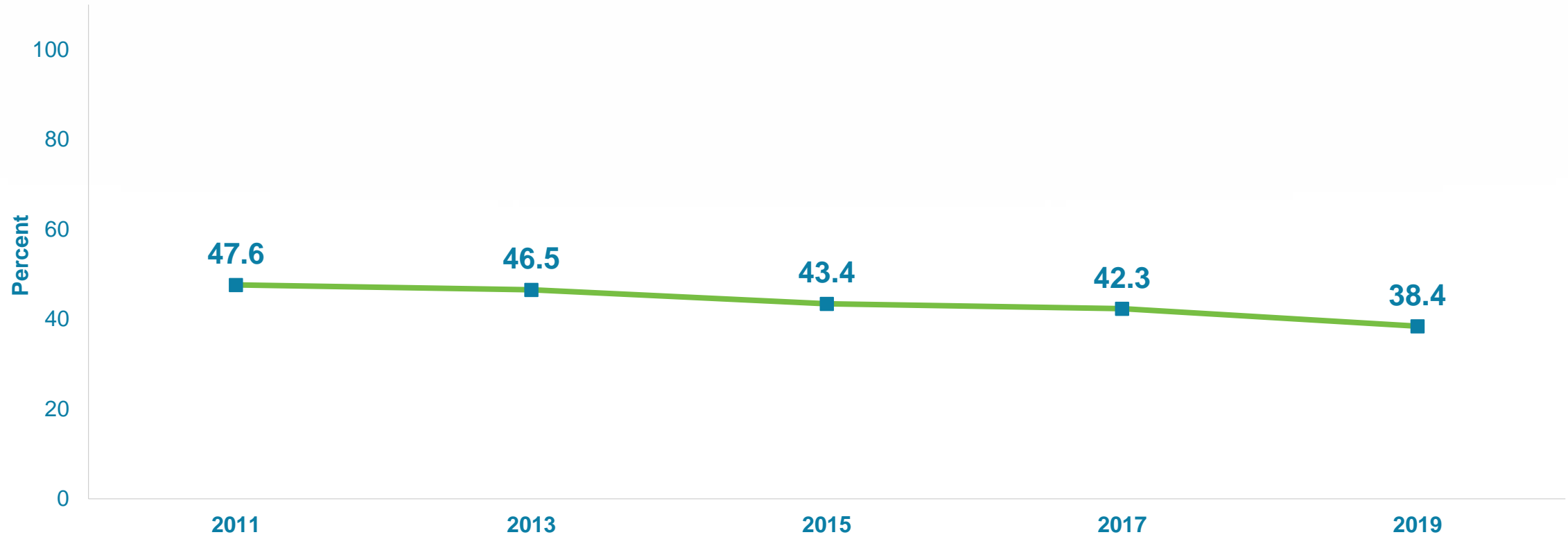


# Physical Activity





# Percentage of High School Students Who Were Physically Active at Least 60 Minutes Per Day on 5 or More Days



\*In any kind of physical activity that increased their heart rate and made them breathe hard some of the time during the 7 days before the survey

†Decreased 2011-2019 [Based on linear trend analyses using logistic regression models controlling for sex, race/ethnicity, and grade ( $p < 0.05$ ).]

This graph contains weighted results.

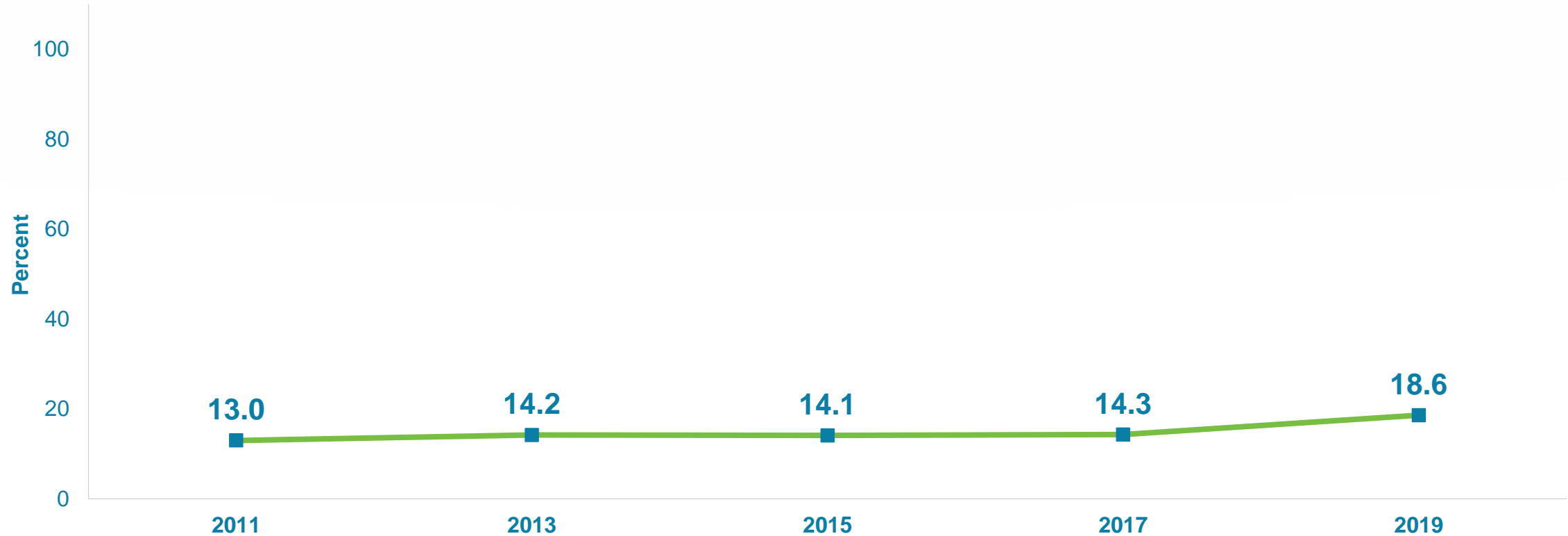


# Breakfast





## Percentage of High School Students Who Did Not Eat Breakfast



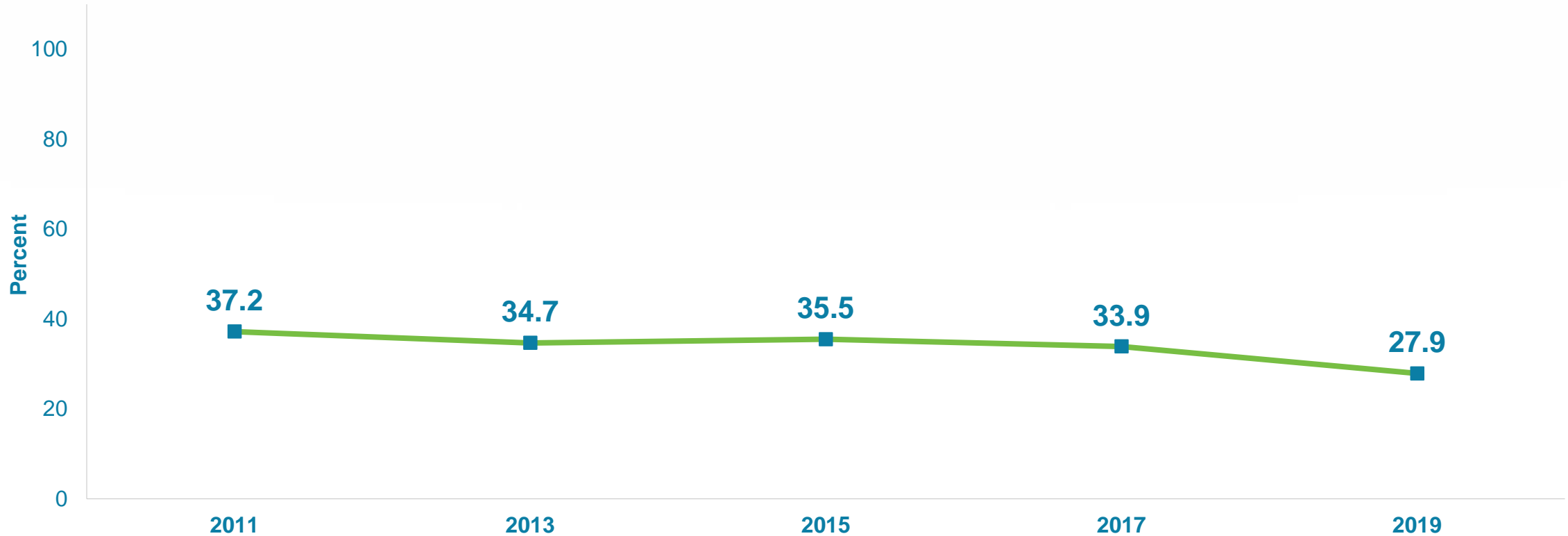
\*During the 7 days before the survey

†Decreased, 2005-2011, increased, 2011-2019 [Based on linear and quadratic trend analyses using logistic regression models controlling for sex, race/ethnicity, and grade ( $p < 0.05$ ). Significant linear trends (if present) across all available years are described first followed by linear changes in each segment of significant quadratic trends (if present).]

This graph contains weighted results.



## Percentage of High School Students Who Ate Breakfast on All 7 Days



\*During the 7 days before the survey

†Increased, 2005-2015, decreased, 2015-2019 [Based on linear and quadratic trend analyses using logistic regression models controlling for sex, race/ethnicity, and grade ( $p < 0.05$ ). Significant linear trends (if present) across all available years are described first followed by linear changes in each segment of significant quadratic trends (if present).]

This graph contains weighted results.



# Total Number of Breakfasts Served

77,354,964



2016-17



4,054,076

73,300,888



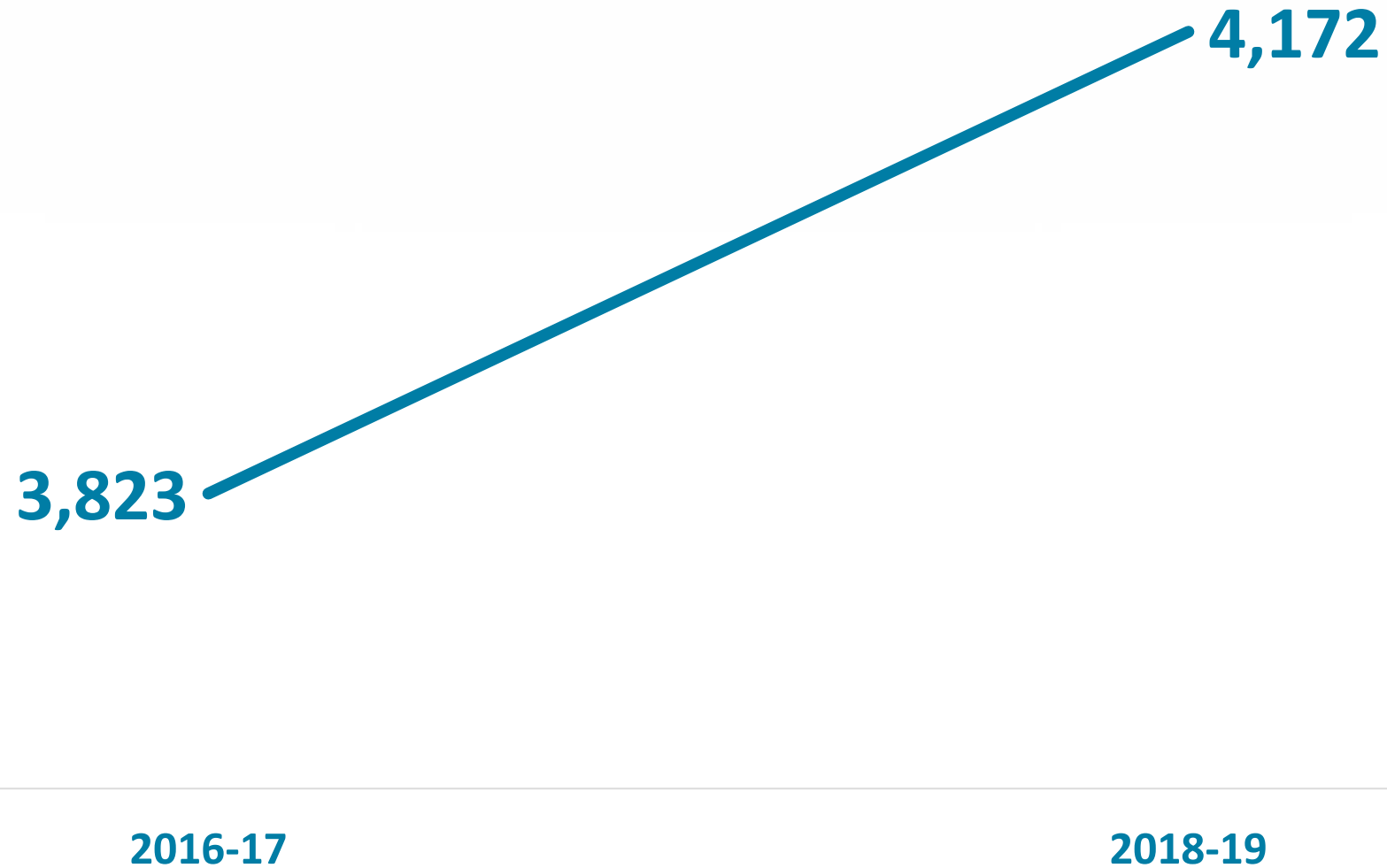
2018-19

School Year



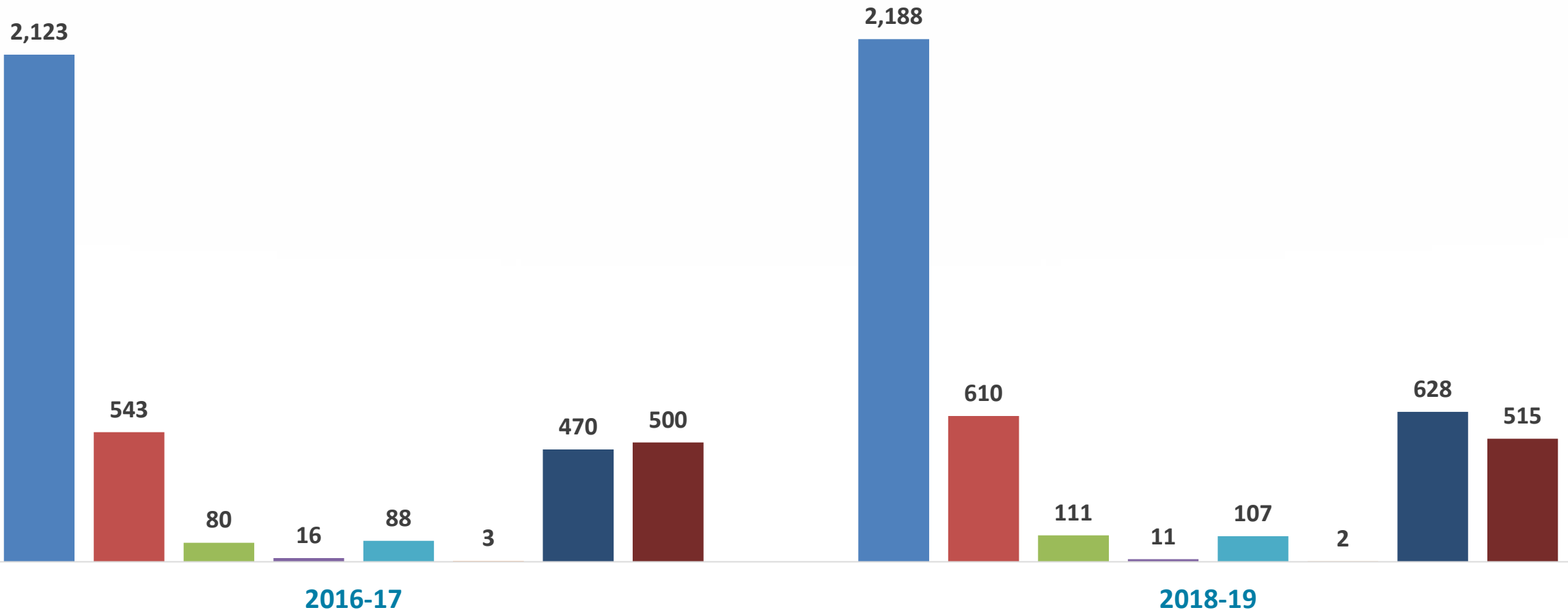


# Total Breakfast Programs

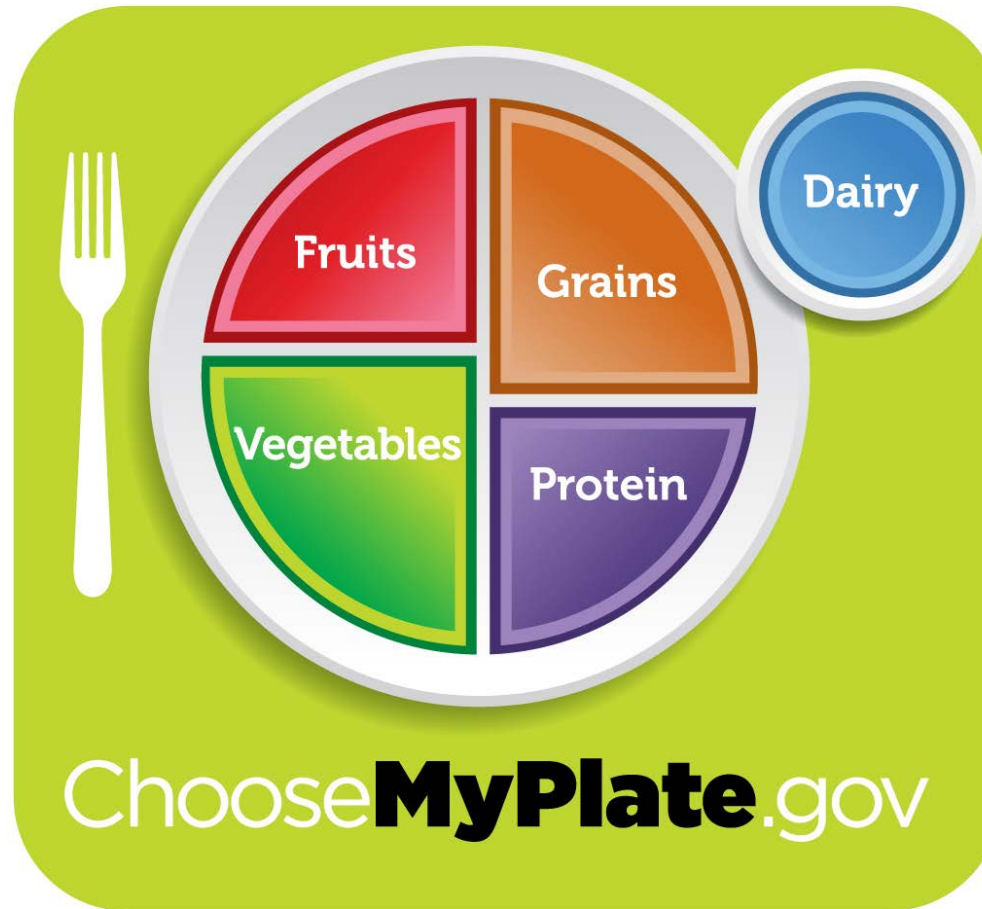




# Types of Breakfast Programs



- Traditional
- Breakfast in the Classroom
- Second Chance
- Breakfast Break
- Satellite Breakfast/Breakfast Kiosk
- Breakfast on the Bus
- Grab-n-Go
- Universal Breakfast



### Clarifying Objectives

K.NPA.2.2

Summarize the importance of a healthy breakfast and lunch.

3.NPA.1.1

Use MyPlate to eat a nutritious breakfast each morning.

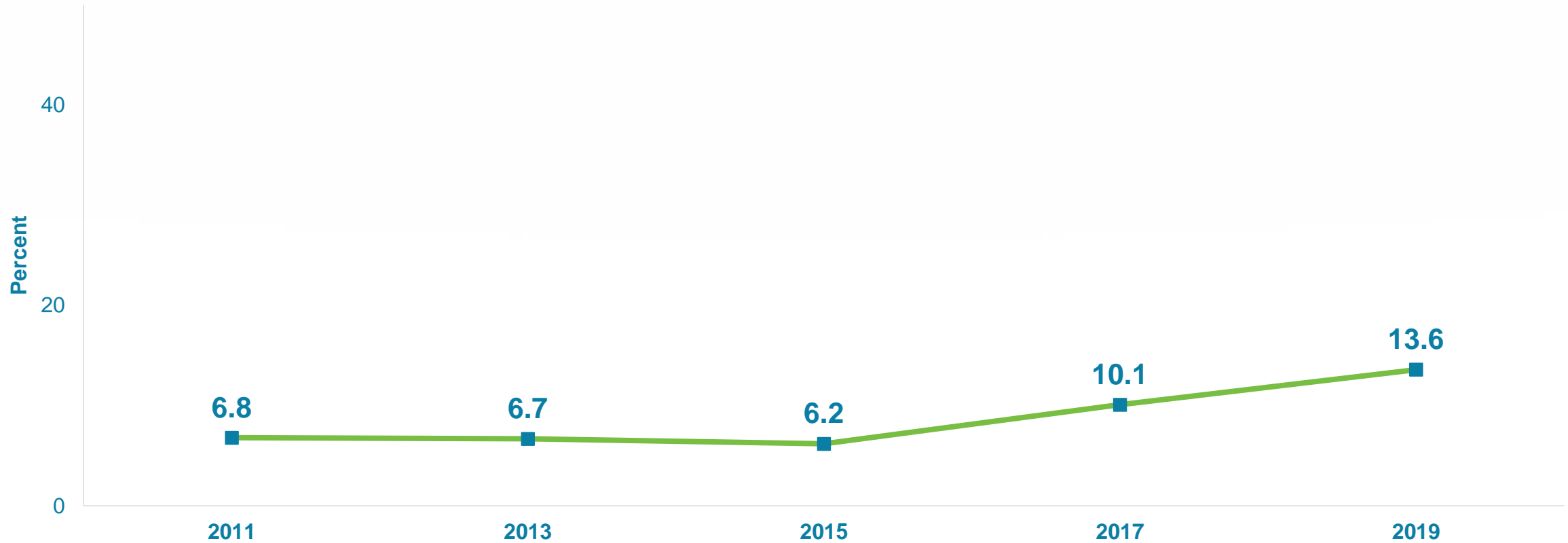


# School Safety





# Percentage of High School Students Who Did Not Go to School Because They Felt Unsafe at School or on Their Way to or from School



\*On at least 1 day during the 30 days before the survey

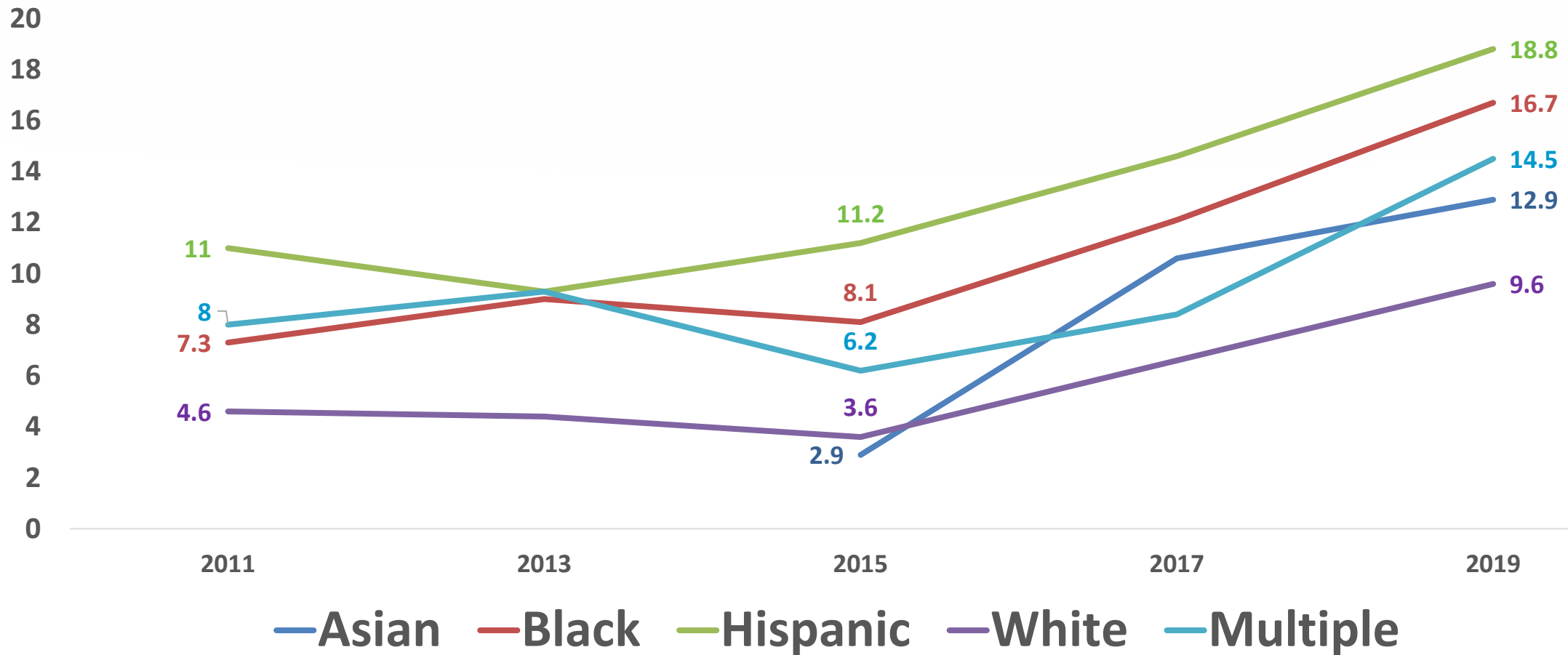
†Increased 1993-2019, no change 1993-2015, increased 2015-2019 [Based on linear and quadratic trend analyses using logistic regression models controlling for sex, race/ethnicity, and grade ( $p < 0.05$ ). Significant linear trends (if present) across all available years are described first followed by linear changes in each segment of significant quadratic trends (if present).]

Data not available for 1997, 1999.

This graph contains weighted results.

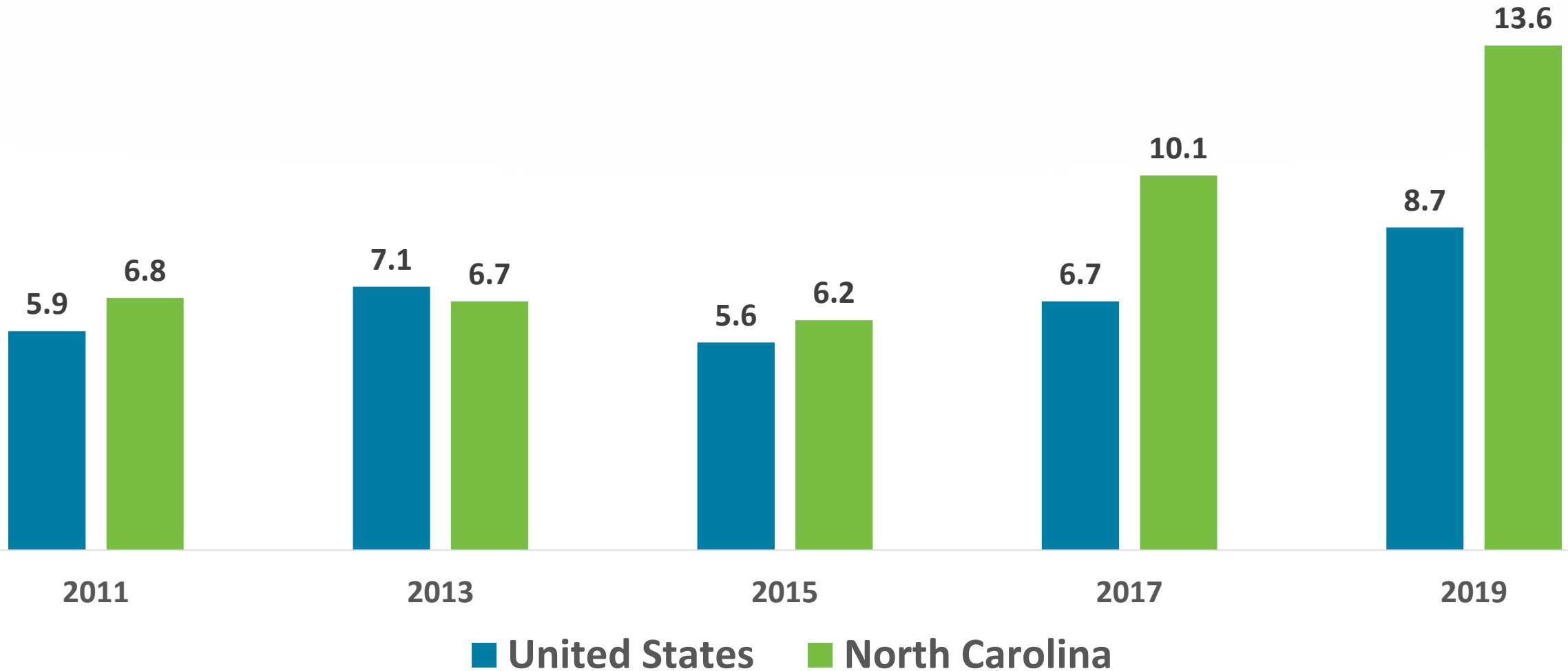


## Percentage of NC High School Students Who Did Not Go to School Because They Felt Unsafe at School or on Their Way to or from School





# Percentage of High School Students Who Did Not Go to School Because They Felt Unsafe at School or on Their Way to or from School, US vs. NC 2011-2019



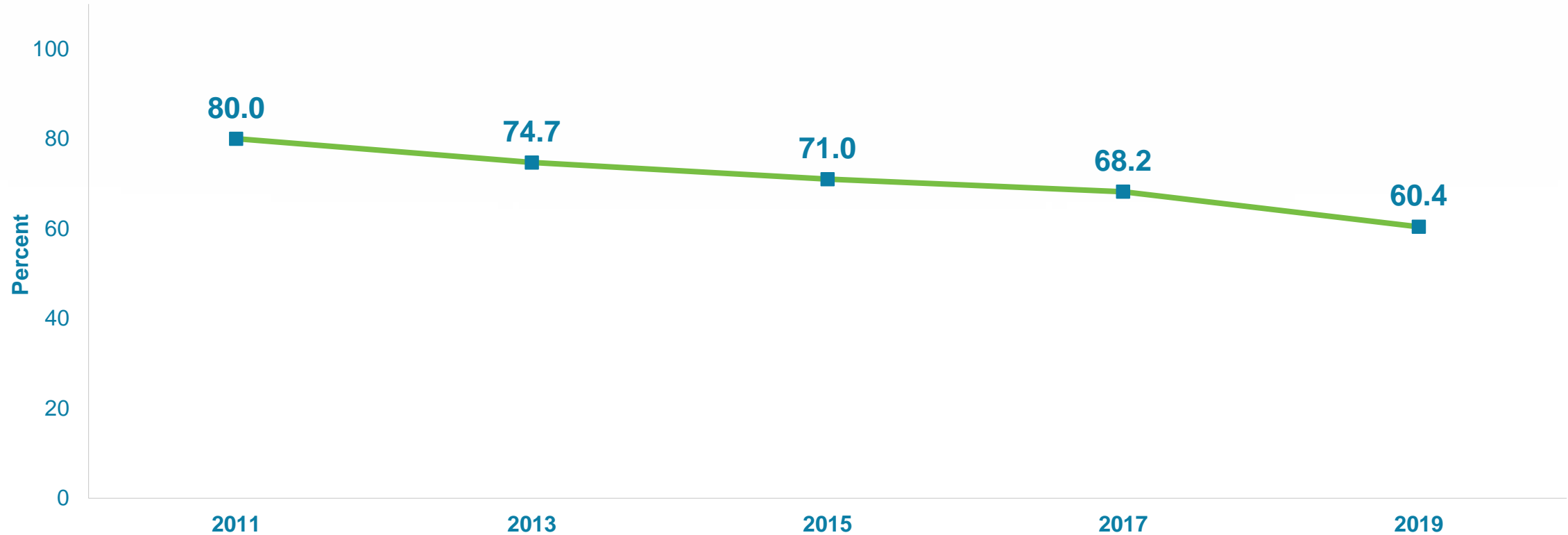


# Mental Health





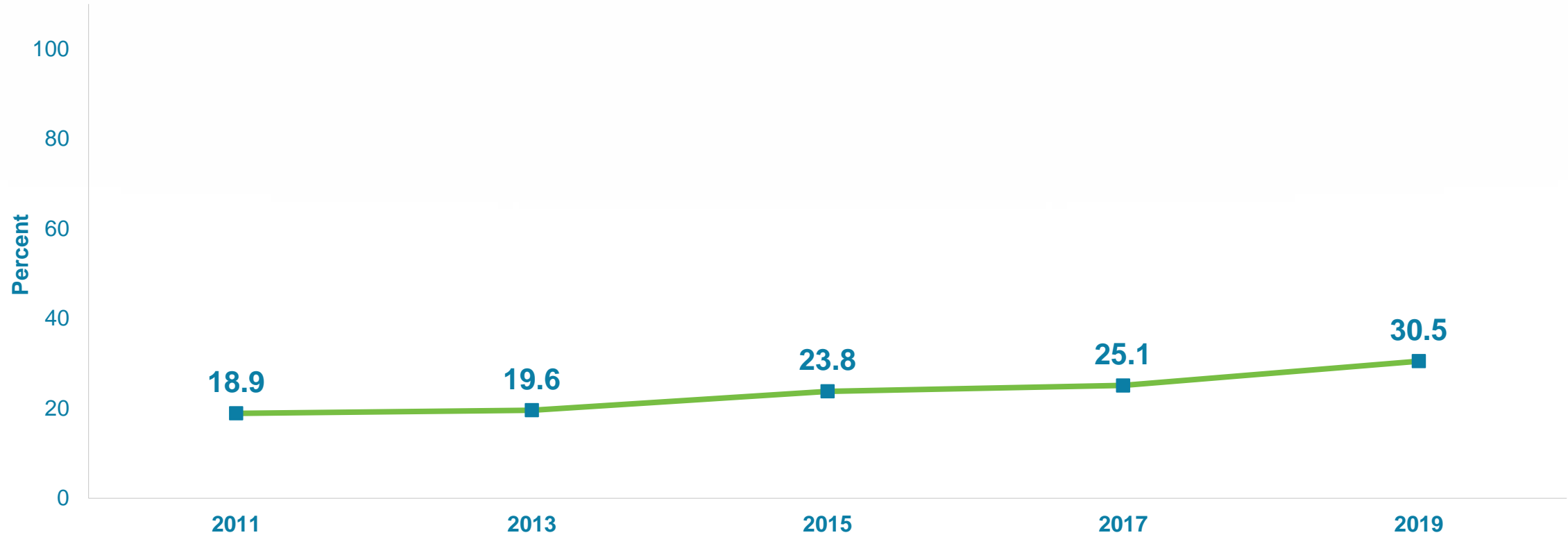
# Percentage of High School Students Who Strongly Agree or Agree That They Feel Good About Themselves



\*Decreased 2007-2019, increased 2007-2011, decreased 2011-2019 [Based on linear and quadratic trend analyses using logistic regression models controlling for sex, race/ethnicity, and grade ( $p < 0.05$ ). Significant linear trends (if present) across all available years are described first followed by linear changes in each segment of significant quadratic trends (if present).] This graph contains weighted results.



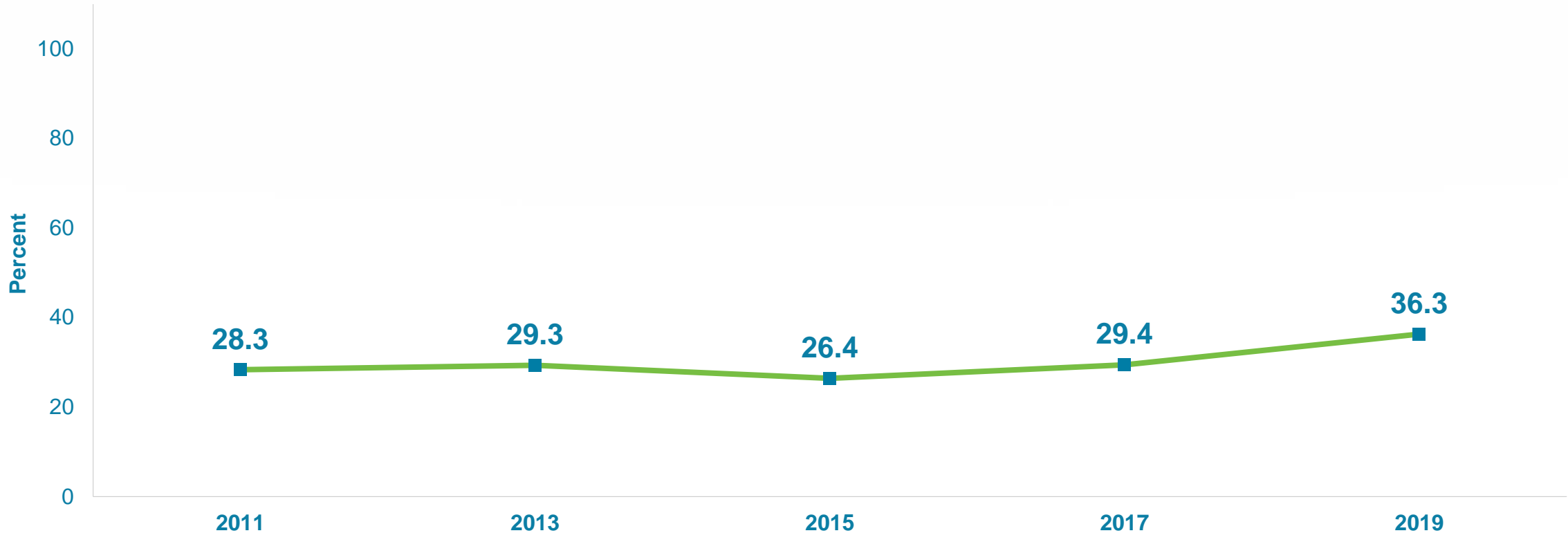
## Percentage of High School Students Who Agree or Strongly Agree That They Feel Alone in Their Life



\*Decreased 2007-2019, increased 2007-2011, decreased 2011-2019 [Based on linear and quadratic trend analyses using logistic regression models controlling for sex, race/ethnicity, and grade ( $p < 0.05$ ). Significant linear trends (if present) across all available years are described first followed by linear changes in each segment of significant quadratic trends (if present).] This graph contains weighted results.



# Percentage of High School Students Who Felt Sad or Hopeless



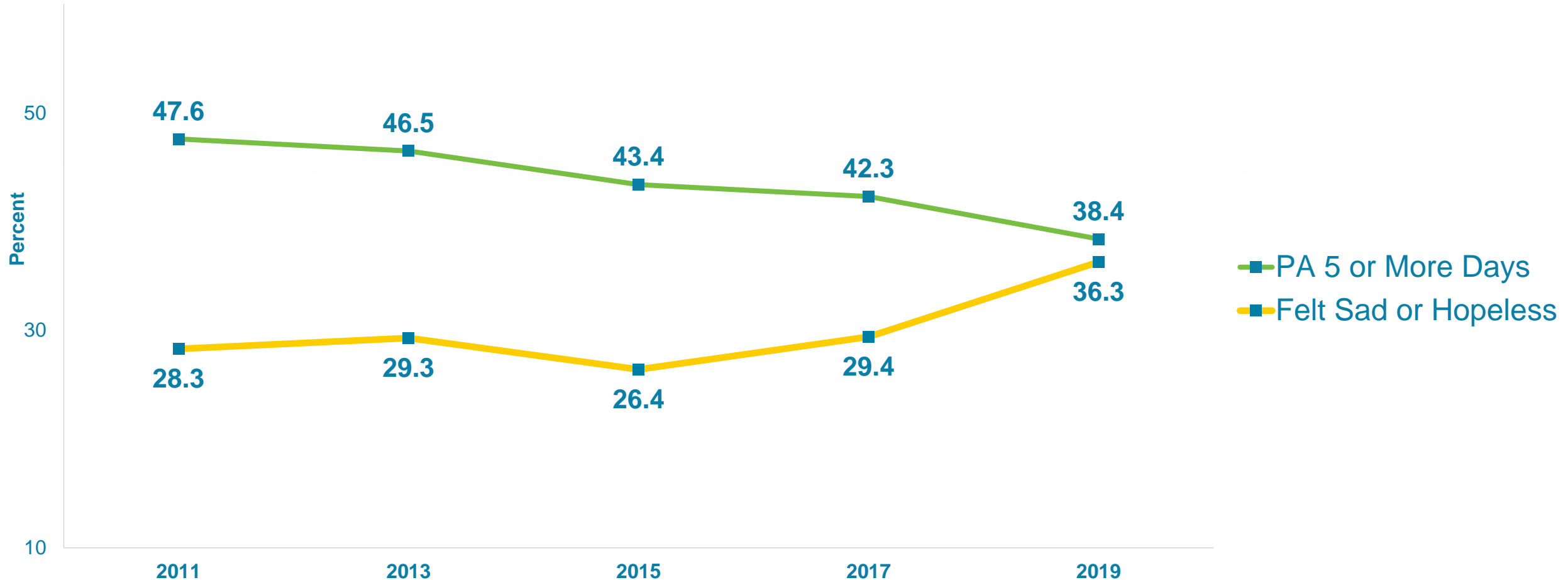
\*Almost every day for  $\geq 2$  weeks in a row so that they stopped doing some usual activities, ever during the 12 months before the survey

†Increased 2001-2019, no change 2001-2015, increased 2015-2019 [Based on linear and quadratic trend analyses using logistic regression models controlling for sex, race/ethnicity, and grade ( $p < 0.05$ ). Significant linear trends (if present) across all available years are described first followed by linear changes in each segment of significant quadratic trends (if present).]

This graph contains weighted results.



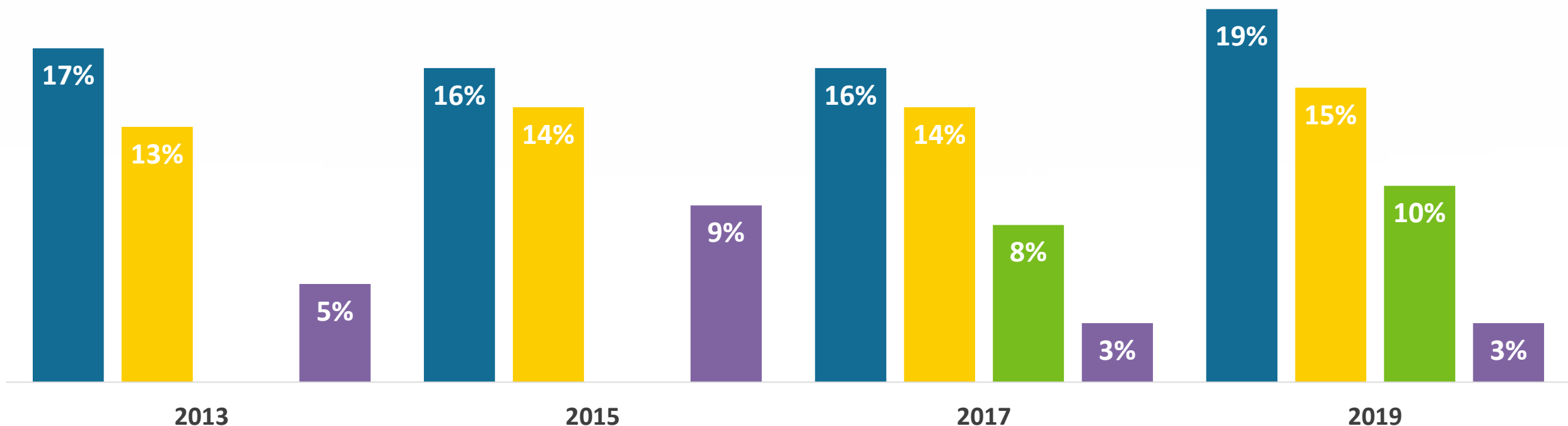
## Percentage of High School Students Who Were Physically Active at Least 60 Minutes Per Day on 5 or More Days vs. Feeling Sad or Hopeless





# Suicidal Behaviors

## 2013-2019 NC High School Students



■ Seriously Considered Attempting Suicide During Past 12 Months

■ Made a Plan for Suicide Attempt During Past 12 Months

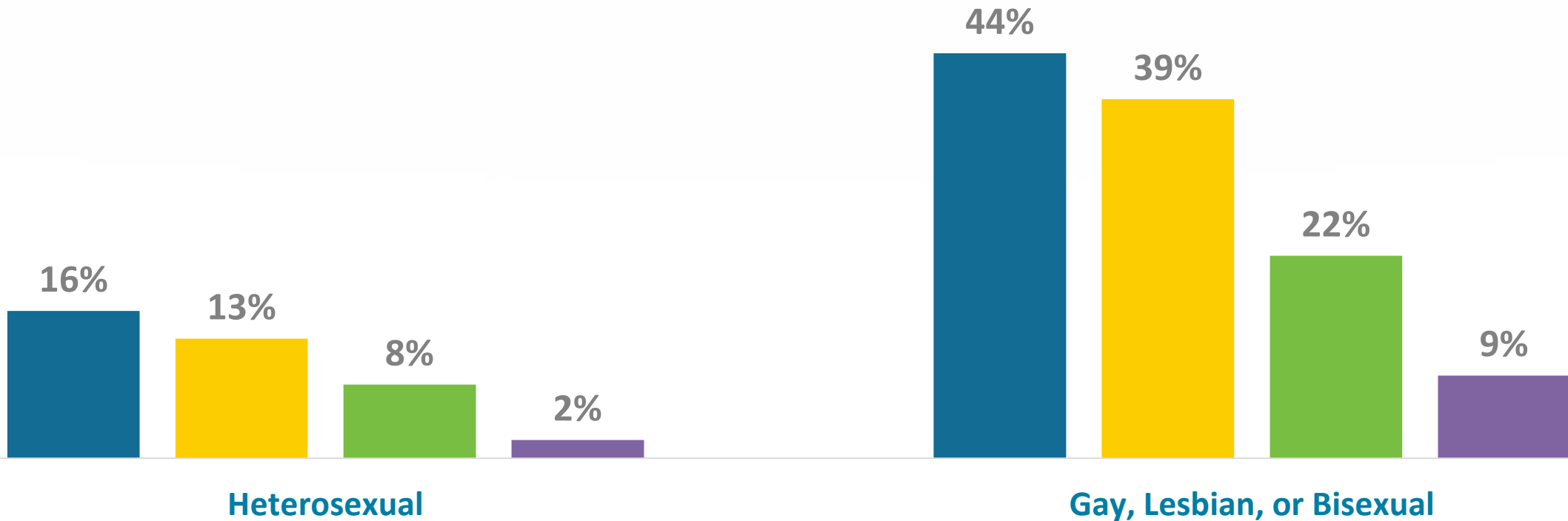
■ Attempted Suicide (Question not asked in 2013 or 2015)

■ Made a Suicide Attempt During the Past 12 Months That Resulted in an Injury Needing Treatment by a Medical Professional



# Suicidal Behaviors

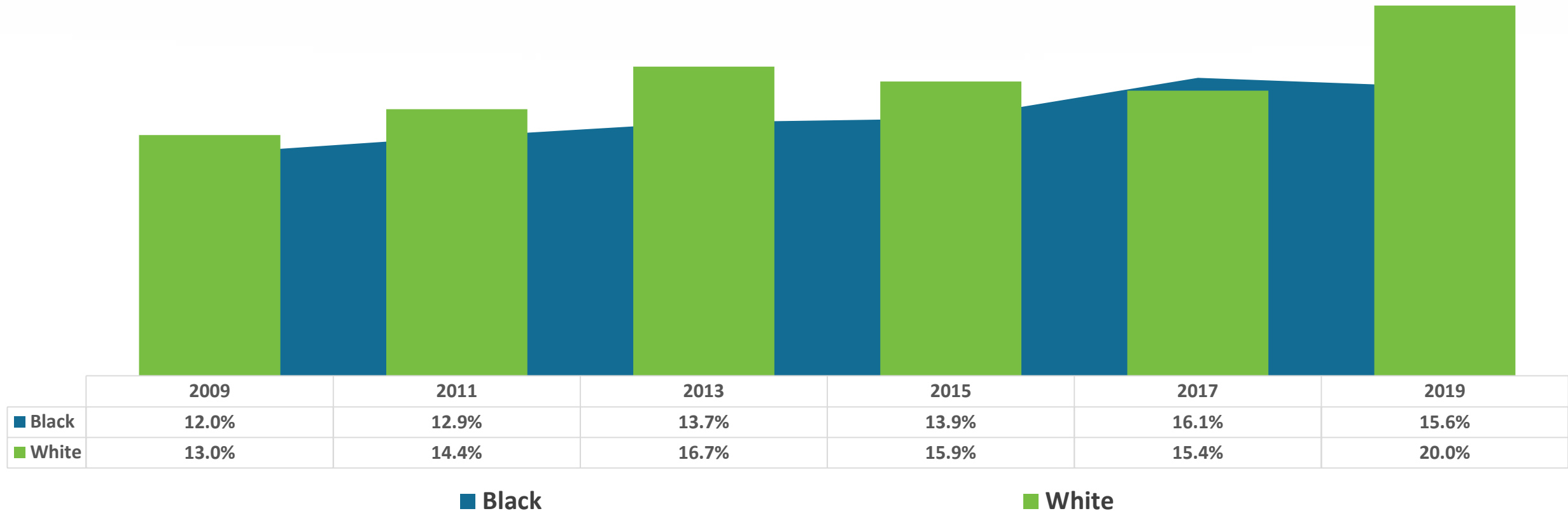
## 2019 NC High School Students



- Seriously Considered Attempting Suicide During Past 12 Months
- Made a Plan for Suicide Attempt During Past 12 Months
- Attempted Suicide During the Past 12 Months
- Made a Suicide Attempt During the Past 12 Months That Resulted in an Injury Needing Treatment by a Medical Professional

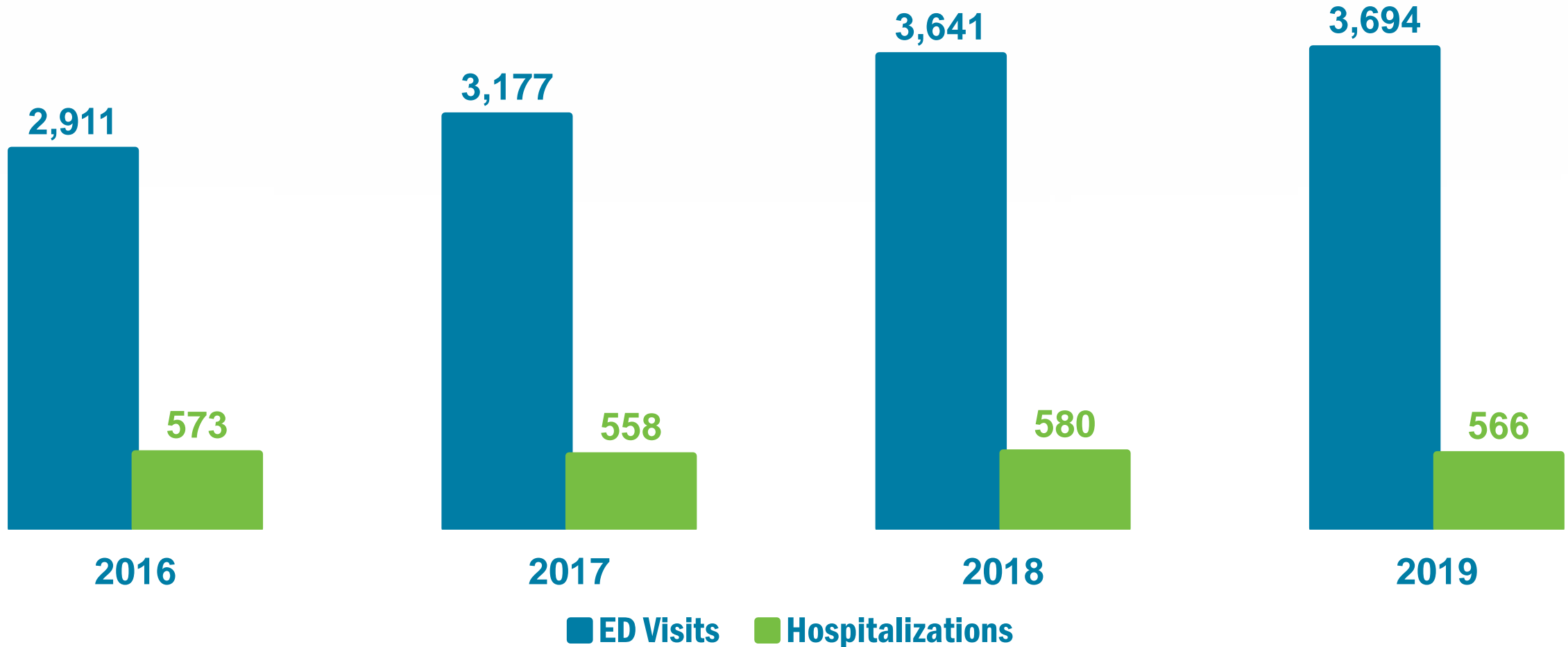


# Seriously Considered Suicide 2009-2019 NC High School Students





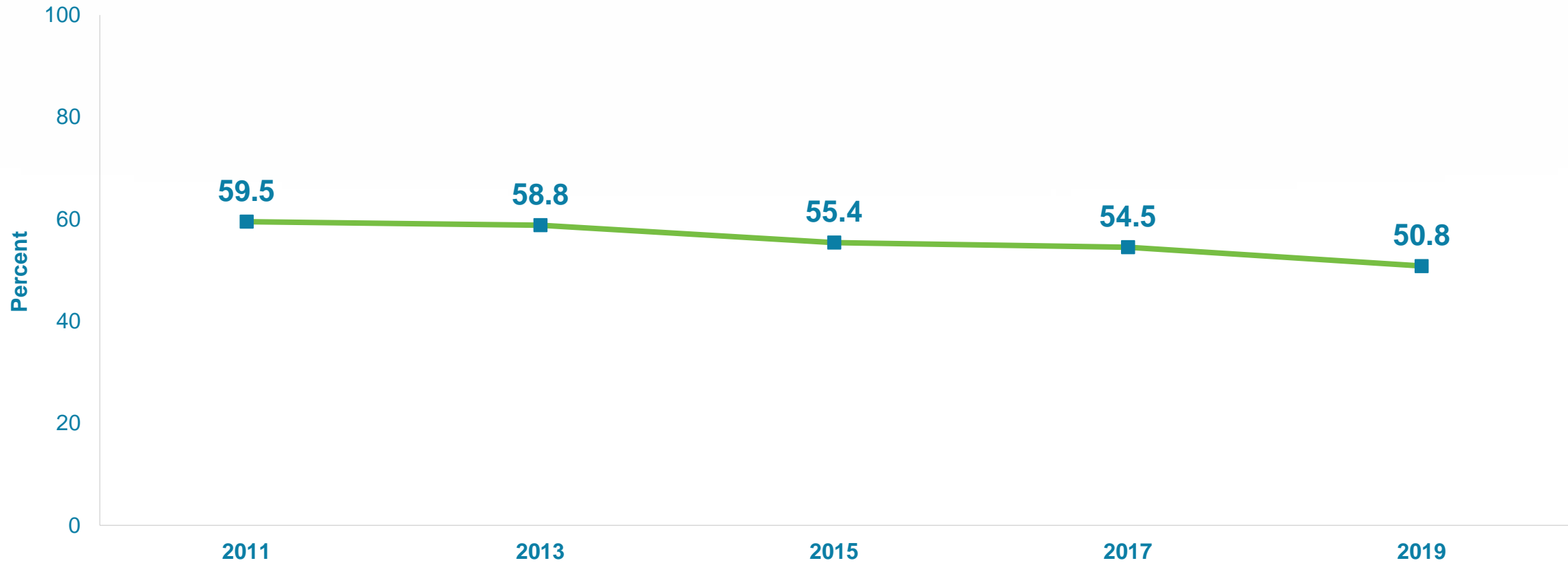
# Self-Harm/Self-Inflicted Injury Related Hospitalizations and Emergency Department Visits, NC Residents Ages 10-18



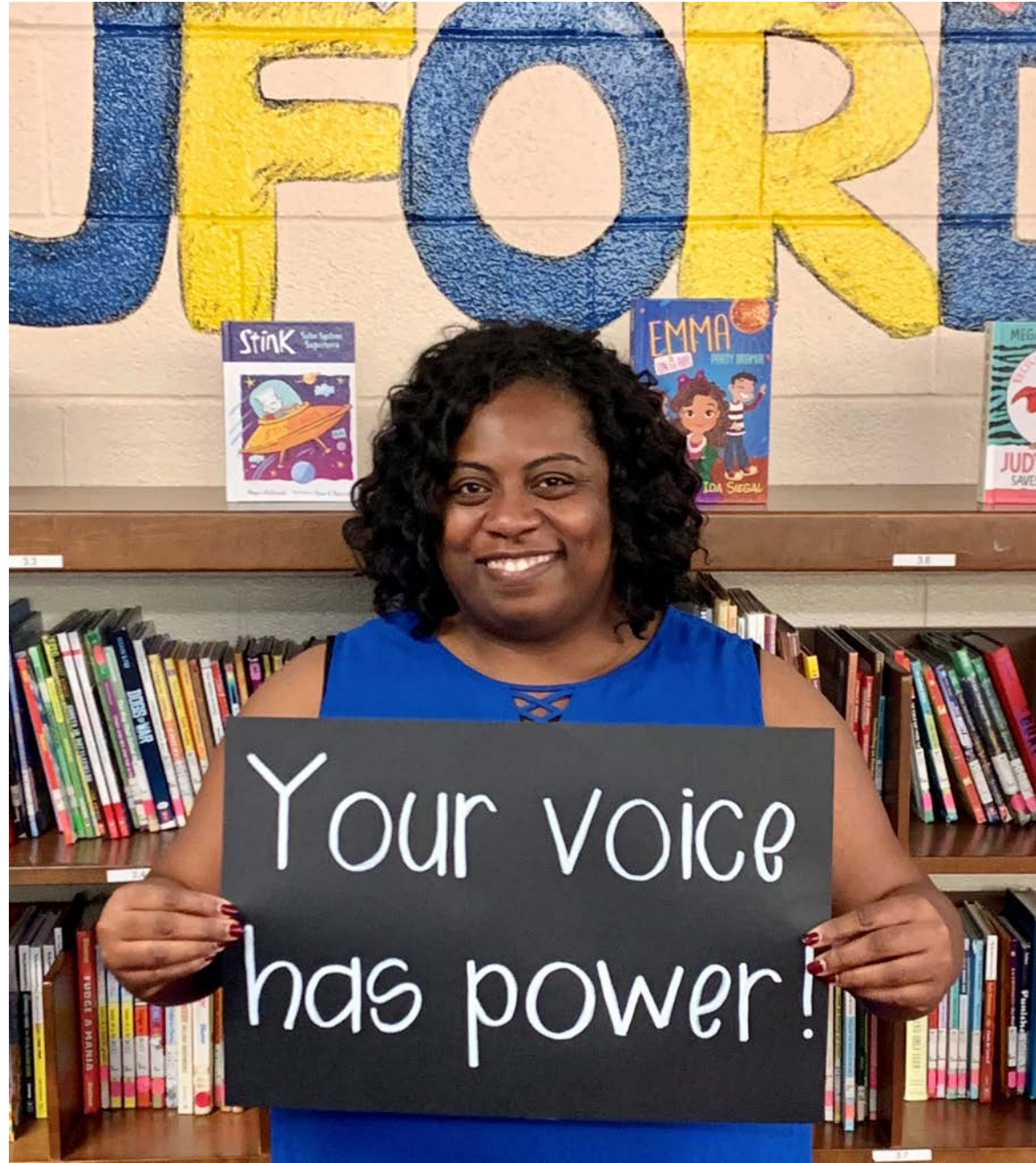
Source: NC DETECT Emergency Department Visit and State Center of Health Statistics Hospital Discharge Data, 2016-2019  
Analysis by the Injury Epidemiology, Surveillance and Informatics Unit



## Percentage of High School Students Who Strongly Agree or Agree That Their Teachers Really Care About Them and Give Them a Lot of Encouragement



\*Decreased 2009-2019, no change 2009-2013, decreased 2013-2019 [Based on linear and quadratic trend analyses using logistic regression models controlling for sex, race/ethnicity, and grade ( $p < 0.05$ ). Significant linear trends (if present) across all available years are described first followed by linear changes in each segment of significant quadratic trends (if present).]  
This graph contains weighted results.





# NC State Board Goal I: Eliminate opportunity gaps by 2025



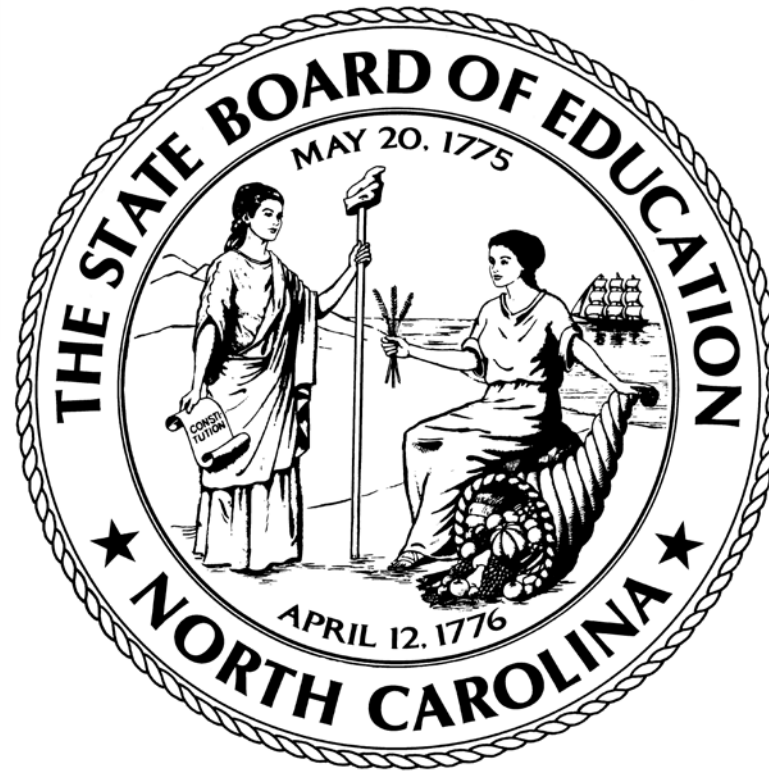
*Healthy Responsible Students*

**North Carolina State Board of Education**



**Resolution Establishing A  
Whole School, Whole  
Community, Whole Child  
Framework for the  
State Board of Education**

**November 3, 2016**



**A Resolution to Support  
Equity and Excellence in  
North Carolina  
Public Education**

**September 3, 2020**





# Sound Basic Education for All

An Action Plan for  
North Carolina

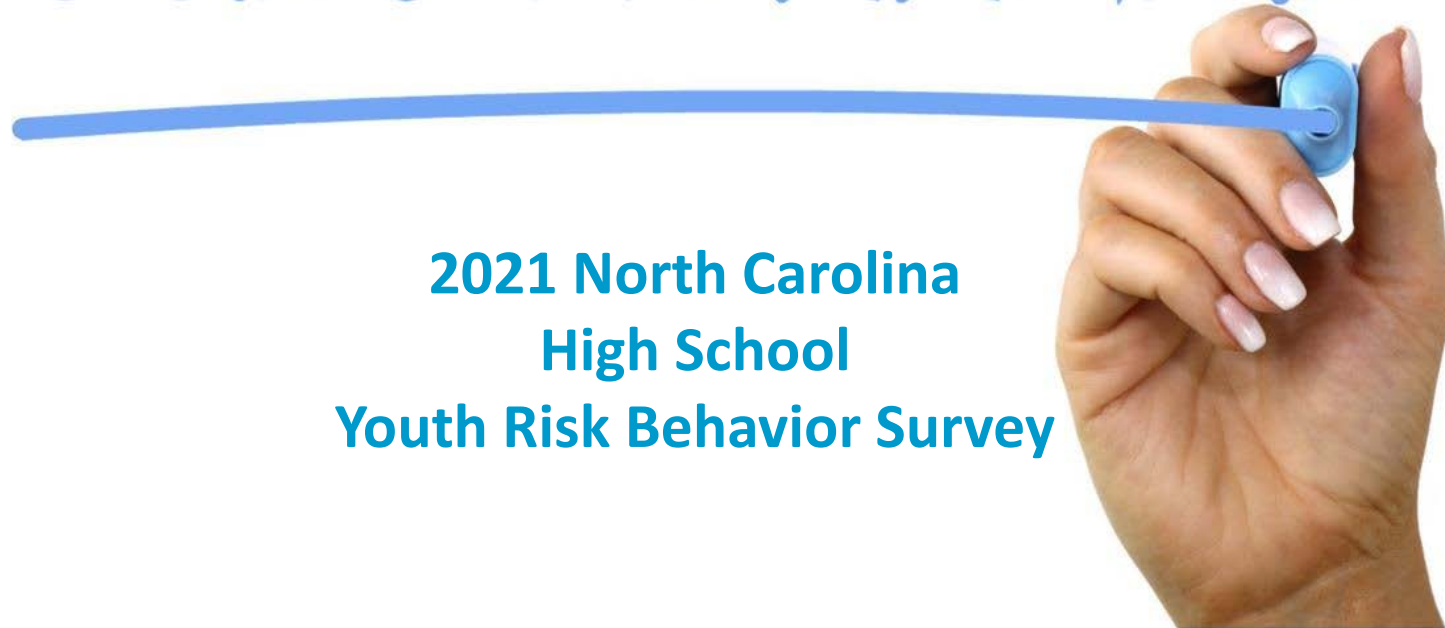
WestEd 

In collaboration with Learning Policy Institute and  
The William & Ida Friday Institute for Educational Innovation



# Measures Added

# QUESTIONNAIRE



**2021 North Carolina  
High School  
Youth Risk Behavior Survey**



# Impacts to Student Health Going Forward





# ADVERSE CHILDHOOD EXPERIENCES - ACES

ACEs are potentially traumatic events that occur in a child's life.



Physical  
Abuse



Emotional  
Abuse



Sexual  
Abuse



Domestic  
Violence



Parental  
Substance  
Abuse



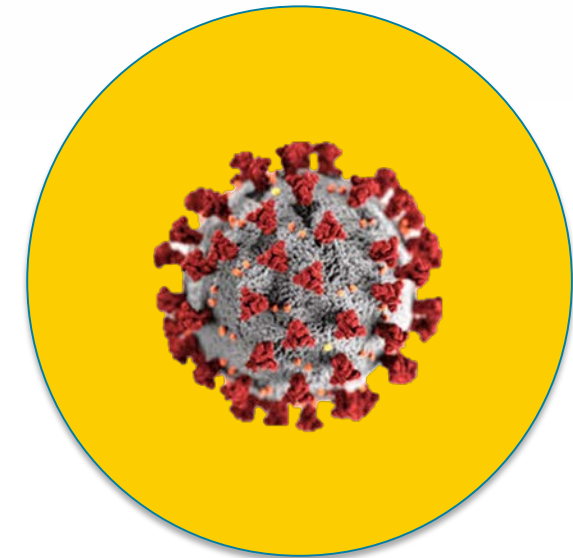
Mental  
Illness



Suicide  
or Death



Crime or  
Imprisoned  
Family



COVID-19



# Mental Health Support





# School Counselors

School counselors serve all students through

- academic, career and social emotional skill development
- prevention and early intervention group guidance and group and individual counseling
- crisis intervention and referral for students with more intensive needs
- Recommended ratio for school counselors is 1:250 students
- NC ratio is approximately 1:353





# School Social Workers

- Connect family, school, and community resources
- Provide crisis intervention and intervention strategies
- Alleviate family stress, including barriers to school attendance and addressing economic hardships
- Provide mental health services
- Recommended ratio for school social workers is 1:250 students
- NC ratio is approximately 1:1,289





# School Psychologists

- Screen for academic, behavioral & emotional barriers to learning
- Development and monitoring of individual student behavior intervention plans
- Psychological assessment of social, emotional, and behavioral problems
- Referral to community therapists or agency school-based mental health service providers
- Recommended ratio for school psychologists is 1:500 students
- NC ratio is approximately 1:1,798





# School Nurses

- Manager of clinical health services at school level
- Screening & assessment for health issues
- Counsels/instructs students/staff on positive mental/physical health behaviors & skills
- Development, implementation and revision of plans of care
- Goal directed care coordination for complex student health problems
- Communicable disease response & management
- Recommended ratio for school nurses is 1:750 students or 1 per school
- NC ratio is approximately 1:1,007
- [School Health Services Report](#)





# Healthful Living

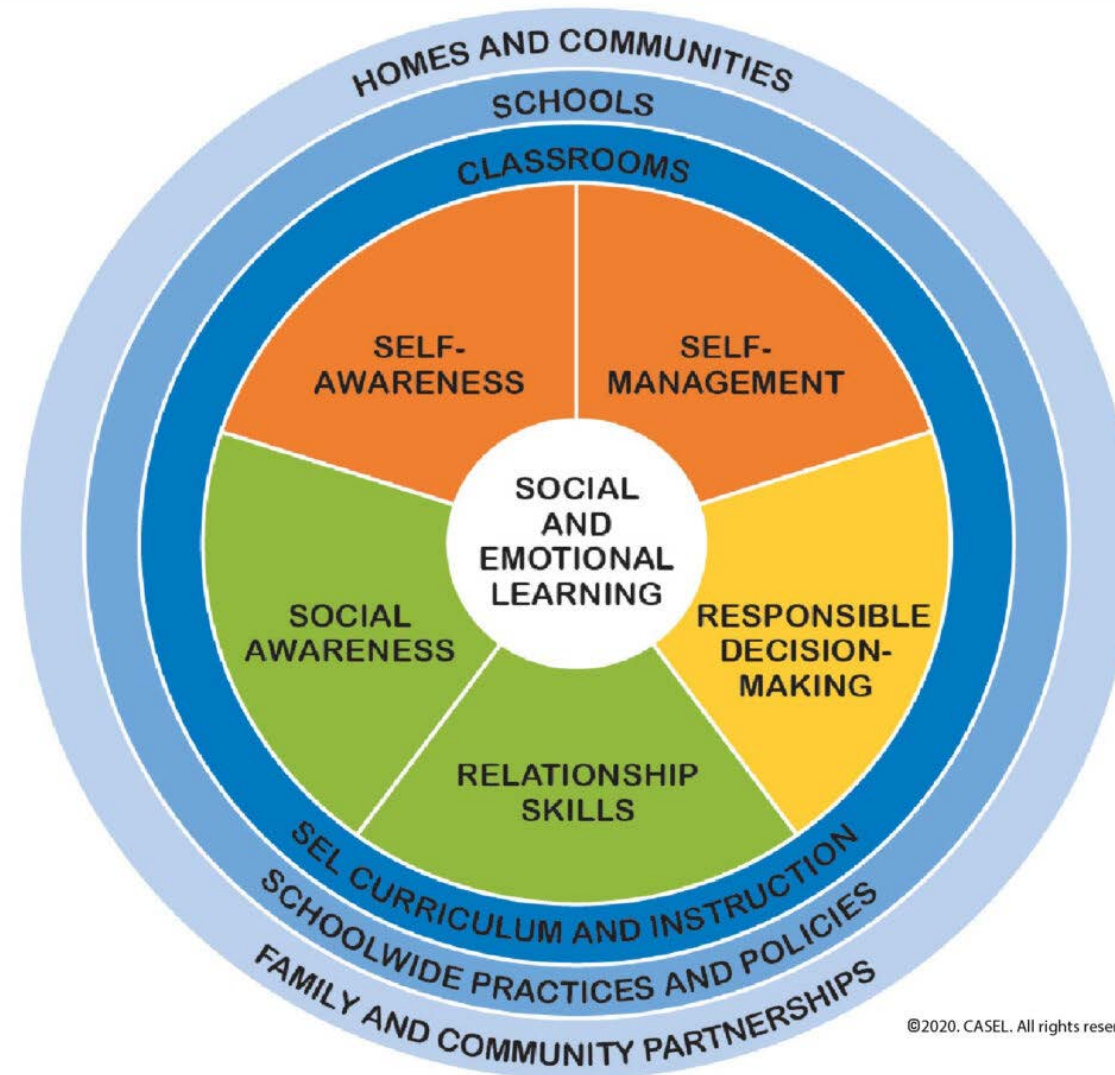


**GLOBAL HANDWASHING DAY**

**OCTOBER 15<sup>th</sup>**



# SEL Integration





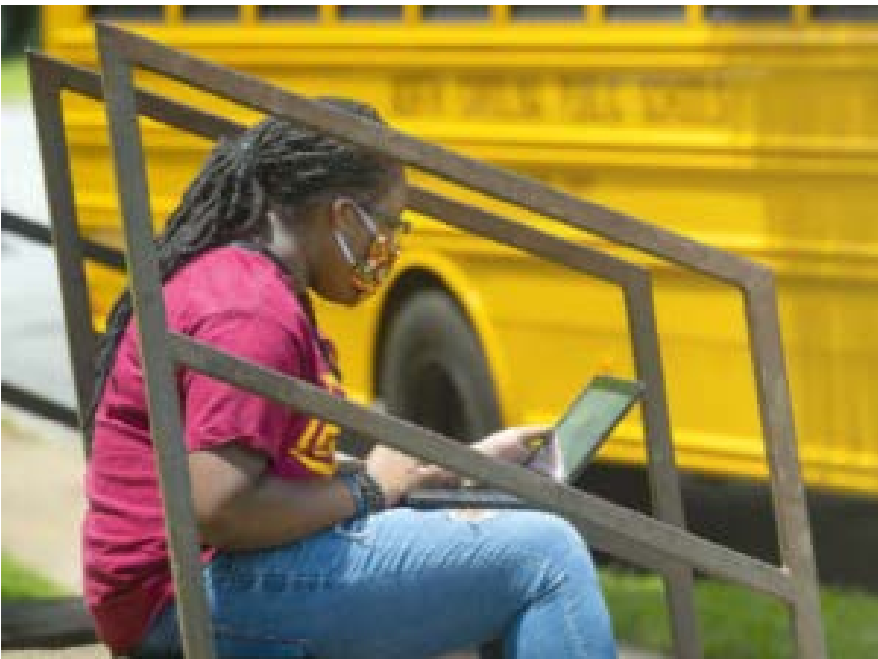
# Be It Resolved In Action

- Implement statewide oversampling of districts for the YRBS
- Support the hiring of mental health professional teams to provide coordinated services for students
- Hire a Chief Health Officer, a state-level Whole School, Whole Community, Whole Child consultant and regional consultants
- Increase the graduation requirement for Healthful Living
- Expand the HAC policy to high schools





# Now more than ever we need healthy children that are able to learn better!





## Contact Information

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**&**  
**North Carolina Healthy Schools**