Working with Community and Inspiring Change
APPLE Schools 2021 Report
The authors of this report respectfully acknowledge the histories, languages, and cultures of First Nations, Metis, Inuit, and all First Peoples of Canada where this work took place, and whose presence continues to enrich our vibrant communities.
<table>
<thead>
<tr>
<th></th>
<th>TABLE OF CONTENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Summary</td>
</tr>
<tr>
<td>2-8</td>
<td>Section I</td>
</tr>
<tr>
<td></td>
<td>Beyond school walls: The impact of APPLE Schools on the whole school community</td>
</tr>
<tr>
<td>9-14</td>
<td>Section II</td>
</tr>
<tr>
<td></td>
<td>COVID-19 impact: Prioritizing health and wellbeing in the context of a global pandemic</td>
</tr>
<tr>
<td>15-19</td>
<td>Appendices</td>
</tr>
</tbody>
</table>
Since 2007, APPLE Schools has been growing to include school communities in rural and remote areas of central and northern Alberta, Manitoba, British Columbia, and the Northwest Territories. APPLE Schools now reaches 74 school communities. To understand the impact of APPLE Schools in rural and remote communities, it is necessary to evaluate what implementing a comprehensive school health (CSH) approach looks like in these unique contexts. As such, a process evaluation was conducted.

More specifically, this report provides a summary of perspectives from school staff* and community partners regarding the impact of APPLE Schools in the broader community. Additionally, how school communities adapted to changes in the context of COVID-19 was explored. The evaluation results are compiled from five data sources listed in Appendix 1, and involved partners from the 21 school communities listed below. The key findings are presented in two sections:

**SECTION I:**
Beyond school walls: The impact of APPLE Schools on the whole school community

APPLE Schools and community partners fostered close relationships to create and support healthy school communities. In this section, the school-community connection and resulting community-level impacts are summarized.

**SECTION II:**
COVID-19 impact: Prioritizing health and wellbeing in the context of a global pandemic

COVID-19 provided a new set of circumstances that required adaptation by schools. School closures and restrictions meant new ways of creating healthy school communities were necessary. In this section, unique ways in which schools adapted, despite ongoing pandemic-related challenges, are described.

This report includes data generated from the following 2016, 2018, and 2019 expansion schools:

**Alberta**
- Anzac Community School, Anzac
- Bill Woodward School, Anzac
- Athabasca Delta Community School, Fort Chipewyan
- Chief Napeweaw Comprehensive School, Frog Lake First Nation
- Aurora Middle School, Lac La Biche
- Vera M Welsh Elementary School, Lac La Biche
- Amisk Community School, Beaver Lake Cree Nation
- Cold Lake Middle School, Cold Lake
- North Star Elementary School, Cold Lake
- Conklin Community School, Conklin
- Father R. Perin School, Janvier
- Glendon School, Glendon
- Fort McKay School, Fort McKay
- JF Dion School, Fishing Lake Metis Settlement
- Elizabeth School, Elizabeth Metis Settlement

**British Columbia**
- Duncan Cran Elementary School, Fort St. John
- Upper Pine School, Rose Prairie

**Manitoba**
- École Swan River South, Swan River
- Minitonas School, Minitonas

**Northwest Territories**
- Chief Jimmy Bruneau School, Edzo
- Chief T’selehye School, Fort Good Hope

Note: School staff were diverse and included many individuals in different roles (e.g., teachers, principals, School Health Facilitators, and School Health Champions). School Health Facilitators are a part-time funded role within APPLE Schools and School Health Champions are a volunteer role often held by school staff.
Beyond school walls: The impact of APPLE Schools on the whole school community
APPLE Schools and communities are deeply connected and work together to raise awareness and support the creation of healthy school communities. Relationships between schools and communities created a foundation of support, communication, and trust for communities to promote healthy school initiatives. School staff in APPLE schools referenced the surrounding community as helpful to support their school’s vision and were key to facilitate change. Community partners included local business owners, community organizations, community leagues, and interested citizens who were open to supporting healthy children and healthy schools in whatever way they could.

Partners promote awareness and advocate for healthy schools

Close connections between community partners and schools allowed for a common understanding of what APPLE Schools is and created a means to share APPLE Schools values (e.g., through people, newsletters). In one school, a school leadership team attended community meetings to promote APPLE Schools and encourage school visits, donations, or volunteering. This allowed the community to see the need to support the creation of healthy school communities and community partners became a voice to support this vision.

In APPLE Schools, partnerships with the community were formed by ensuring community voice was valued and heard: “It’s listening to their needs, listening to what they have to provide and I have a really good relationship with a local elder here in town now, so you know listening to her, what she has to say, and also following their protocol and making sure that I’m doing the right thing.”

As a result of APPLE Schools being talked about in the community, community members became advocates for schools within their communities. An example of this was the Director of a local Friendship Center who started sharing the school’s Facebook posts. The principal shared “they are doing it because they’re starting to see the benefits in what we’re doing for their children inside our school.”

Another School Health Facilitator echoed similar support from the community and found: “once you put yourself out there, then you start making connections and one community member brings your name up to another community member and it just kind of starts spreading from there. So it’s been really great. I really haven’t found any barriers or, our community has been very welcoming and supportive.”
In one area, the school and community connected and developed a close relationship which brought to life a vision of a large growing dome built in the community through grant funding. The growing dome promotes awareness of APPLE Schools values (empowering school communities to be healthy through healthy eating, physical activity, and mental wellbeing habits) because of the physical space it takes up in the community - keeping this a priority and at the communities’ front of mind. The growing dome offers a green space for school classes, preschool programming, and meeting spaces for community members. Promoting awareness of healthy living through the growing dome happened naturally in the community.

"So I think people like people are more understanding that APPLE Schools is the thing and it doesn’t just go away. And I think the growing dome having that big presence and you drive by and you see it - I think people are a little more aware of what it is and what APPLE Schools does”

- Community partner

APPLE SCHOOLS AND COMMUNITIES WORK TOGETHER TO FOSTER HEALTHY SCHOOLS

The close relationship between APPLE schools and the broader community brought opportunities to support the creation of healthy school communities. Key champions included families and volunteers who were also supported through generous donations by community organizations.

Families make connections in community

The reach of APPLE Schools into the community was facilitated through existing connections and relationships with community partners previously established by families of children in APPLE schools. Bringing families into the school was essential to foster these connections. A School Health Facilitator mentioned how important families were as community connectors:

“that’s always helpful when you’re trying to build partnerships if you can make that connection with the parents as well, or grandparents.”

A similar sentiment was shared by a principal: "We were lucky because we have a manager of the Extra Foods [who] has grandchildren in our school. He can relay the support quite quickly and talk a good story to Loblaws and give the support that’s needed.”
Recognizing the importance of these relationships, one school held a ‘Welcome Back to School’ celebration where they had an APPLE Schools station. The station was used to promote activities being done in the school and explain why these activities were being done. This provided an opportunity to ask families to volunteer, and create a supportive network that could be drawn upon over the school year. These types of events also generated excitement for families “we did a ‘wishing well’, like saying kind of what I [School Health Facilitator] need.” Another school added the importance of connecting the school, home, and community through word-of-mouth: “I think that more people know about it because [of] the kids in the school, [and] because the parents they hear about it”

Community volunteers support healthy school activities

Community members came into the schools to help with healthy school initiatives (e.g., breakfast programs, teaching lessons). One School Health Champion shared “during our teen nights on Friday we would do healthy cooking with the teens and sometimes the other Nations would donate to the teen nights, or the RCMP would come and they would help by cooking with the kids or they would help with just a physical activity. Also we did have the RCMP come and volunteer for breakfast club in the morning.”

Another example included a local farmer who came to the school to teach hands-on lessons on seed saving to students which provided a deeper understanding and relationship with the healthy foods they were eating. As described by the farmer “I come into the grade 1 classes and I save beans and peas and lettuce seeds so they can see it as a plant. And then they extract the seeds out, which is pretty cool too because then they’re creating that extra connection to food and the seeds.”

“The kids love it and the teachers love it. The kids are learning and they’re engaged and it’s hands-on so they’re learning even more skills... It is a rewarding thing.” - Community partner

Community members also volunteered in ways to support the mental wellbeing of students. A community-based mental health organization worked closely with an APPLE school in their community because the school served as their office location. Because of this, the organization’s staff members took on the volunteer roles of School Health Champions within the school because they had similar goals to promote health. Their organization’s initiatives combined with APPLE Schools and one of the staff members commented “It just fit all together so it worked really well.”

Example of positive affirmations that were a combined approach to mental wellbeing and healthy eating in the school.
Donations and Partnerships

Communities donated food, equipment, and money to schools to support initiatives. Community businesses and organizations worked with schools to create partnerships that provided opportunities to access healthy food and recreation activities. Of note, based on feedback from School Health Facilitators in the Essential Conditions survey, partnerships reported by schools grew by 20% with Community Groups and 40% with Businesses in the 2019-2020 year. For more information see Appendix 2.

Donations from the community were instrumental. Access to healthy food can be challenging in rural and remote communities but the schools were met with businesses that were adaptable to supporting school needs. Multiple schools made connections and partnerships with local grocery stores to receive food. One School Health Facilitator shared, "we have a partnership with Save On Foods and they send us food that is just about to expire and we use it for our breakfast program." In another school, a Food Recovery Program was an example of a partnership between school, grocery stores, and the Food Bank that helped provide food for the whole school based on the school’s needs. The program arose out of a community meeting with a goal to recover food and help kids and has been successfully implemented for several years. The success of the Food Recovery Program cannot be understated as four other schools in the community have begun doing the same program.

A local farmer connected regularly with one school to supply fresh produce, “I just kind of drop the vegetables off and like I said, we grow a lot of vegetables like – so for me to bring in 50 pounds of carrots isn’t really a big deal.” APPLE School’s presence in the community highlighted what schools needed, and meant the community could help schools in specific ways. Having knowledge of how the schools could use donations, a community member shared “so when I have a vegetable that the kids can taste test, I contact them and I’m like ‘I have this, I’m going to bring it in.’” Another school partnered with Booster Juice in a neighbouring community to deliver smoothies to their school so that students who may not have the opportunities to try it could access these healthy options.

In one school, an oil company operating in the area reached out to donate leftover meals to the school that had been prepared for camp workers. Another school shared that they “had an oil company come into our school presenting our students with mittens” and to further the support the school, School Health Facilitator explained “they told us that they would make a donation of $10,000.00 to our APPLE School fund. And so we were so excited and he said that they would present that to us yearly.”
One school partnered with the local recreation centre to provide access to fitness opportunities to families. The Recreation Supervisor shared, “we did library rec passes so a ten pass, a family ten pass, that they could sign out of the library and anyone could use it... We partnered with the rec centre so kids [who] couldn’t afford or whatnot to go to the rec center could sign out those passes from the library.”

As well, recognition of community support was essential to maintain and foster partnerships. Recognition included thank you letters, celebrations, social media, and newsletters features. One school acknowledged local businesses that provided funding to their school within their school newsletter, including pictures and quotes from the students, to show how the donation was spent and how important it was to the school as a whole. A principal in another school shared the importance of ongoing shows of appreciation:

“I think there has to be a face for the school to have that connection with the community. And you know initially there’s always a lot of work that gets put into it, but once that relationship is built, you just have to keep maintaining it and...We’ve been doing it for three years now - volunteer and community sponsor recognition.”

Changes in practices ripple out to promote health in the broader community

Grocery stores and community businesses changed their own practices to align with the values of APPLE Schools. This allowed them to not only work with APPLE Schools but also to support the well-being of community members.

Restaurants and grocery stores

In one school, the administrator sat down with local restaurant owners to modify their menu items to offer healthy school lunches, “I’m getting healthy nutrition for the students, and we also have now several partners that understand that we have healthy school initiative, that they are continuing to support.”

One School Health Facilitator, who was located in a smaller, more remote community, noted that their local grocery store was taking special orders for groceries to support the school’s healthy breakfast program and for activities like taste-testing. These grocery orders were not foods typically ordered or stocked. This change, which was initiated to benefit students in the school, had a promising, rippled impact by creating additional healthy food options for community members. As described by the School Health Facilitator:

“I would go every week and do my order for my snacks and groceries that I needed for the breakfast program. And I tried to, we have the chance of having enough money to have a snack every day with the kids, and I did try to make the kids - get them to know more different fruits that they would not have here. So like tropical fruit, for example...when the grocery store did order those fruits for us, he ordered more of course so it gave a chance to the other people in the community to buy it as well.”
Community Businesses

As a result of APPLE Schools presence in the community, local businesses changed their practices for their own meetings. When hosting community meetings, members promoted walking meetings or ensured healthy food options were available. For example:

"What I did notice is that they had, you know how you have donuts or cake, or whatever brought to a meeting, well here they had brought fresh fruit and vegetables, so to me that was kind of like a changeover from what it used to be... when they organized that meeting they, they brought in their healthy snacks opposed to having their donuts and just sweet, their sweets."

APPLE Schools’ approach to promote healthy environments were observed at local community events such as taste testing or movement-based holiday celebrations at the recreation centre.

At Halloween, a connection between the school and recreation centre formed a unique alternative to trick or treating. This health promoting alternative involved “trick or play passes...10 passes in one booklet for $1 each for child and youth to come [to the rec centre]. You could use it between November 1 and December 31 of this year, and it was for people to give out at Halloween instead of candy and [one school] I know they bought one for every student.”

Section I Summary

APPLE Schools formed supportive relationships with broader communities by leveraging existing connections in the school community. Community partners could further leverage resources for the school by promoting awareness and advocacy. This receptiveness resulted in health promoting impacts to the the broader community.
COVID-19 impact: Prioritizing health and wellbeing in the context of a global pandemic
Although the teaching and learning environment changed during school closures, health promoting efforts were sustained and APPLE School’s culture remained strong. Overall, school staff demonstrated resilience and continued efforts to promote health and wellbeing. However, it should be acknowledged that there was added work and new barriers. Given the restrictions, it required extra work to plan school activities. School Health Facilitators remained confident and demonstrated growth to overcome challenges.

School Health Facilitators and School Health Champions continued to lead efforts inside and outside of the school to support mental, physical, social, emotional, spiritual wellbeing of the school community during the pandemic. Annual surveys captured School Health Facilitator knowledge and self-efficacy during this time. Eighty-four percent of School Health Facilitators reported that they were confident they could promote CSH over the school year and 87% of reported they intended to do so.¹

“I think being part of an APPLE school prior to COVID was a benefit because I think if we were a new school entering into some of the things that we’ve done in the past, I don’t think that they would have transferred over, but I think because we have already built that culture within our school, it was easier for our staff and our students to make a shift and understand that with the cohorts, we can still do some of the same things that we’ve done before. It’s just going to look a little different.” - School Health Facilitator

Confidence levels to implement healthy school initiatives were reported by School Health Facilitators in their responses to the School Health Facilitator Knowledge & Self-Efficacy Survey (See Appendix 3). These responses were further contextualized with staff who participated in a focus group. School Health Facilitators rated their confidence levels lowest to implement CSH when the following were present:

- **Low levels of student engagement**
  - 43% of SHFs were confident to implement physical activity
  - 48% were confident to implement mental wellbeing activities

- **Administration disagrees with its importance**
  - 47% of SHFs were confident to implement healthy eating, physical activity and mental wellbeing activities

- **Supportive policies are not in place**
  - 52% of SHFs were confident to implement healthy eating, physical activity and mental wellbeing activities

School Health Facilitators described that less student involvement was in part due to the reality that students could not be as engaged due to cohorting. The importance of school leadership for CSH implementation as well as supportive policies, especially in times of upheaval and widespread change was seen during the pandemic.

¹School Health Facilitator Knowledge & Self-Efficacy Survey
Innovative activities

New ways to promote APPLE School messages through school-wide activities were created. Whole school events and cultural teachings shifted to virtual events to keep the school community connected. Schools relied on APPLE resources and continued promoting APPLE values throughout the pandemic “learning curve.”

One School Health Facilitator shared the importance of communication: “I think we’re doing a good job. I think it was a big learning curve. And of course I really appreciated all the resources that APPLE sent, and when we have our get togethers and we share ideas, then you can learn from each other.”

Spaces within and outside the schools were used creatively to maximize the use of existing resources (e.g., opening up the gym at lunch). One school referenced “using things like the lunch room that would never ever be used for activities. We’ve had to resort to stuff like that. Like the hallway tiles, we have them now in more places than we’ve ever had in our school just to try and engage kids in a different way because we can’t do those large groupings.” As much as possible, physical activity was shifted to take place outside and many schools noted they used and purchased equipment for snowshoeing, skating, and cross country skiing. Whole school events and celebrations took place in different ways and on a smaller scale (e.g., individual classrooms). School events transitioned to become ‘APPLE Zoom’ time where the focus was a topic in wellbeing:

“I think it’s really helped us grow and be creative and step outside our box, and as a school I’m really proud of all the different things that we’ve been able to accomplish to help support the students and the staff.”

- School Health Facilitator

Arctic Winter Games were held in one school that shared how they pivoted to include a whole school approach and student leadership: “Each day a cohort competed, so it was still a school wide event and we tied in the student leadership which has been hard because the student leadership can’t be with the other students because they’re not in the same cohort. So what the student leaderships did is they, we got them to do videos of each other, demonstrating what the events would look like, like, each challenge, and then those were sent out to the classes ahead of time”
Shifting more focus to mental wellbeing

Across all schools, mental wellbeing was brought to the forefront due to the isolating impacts of the pandemic. Student and staff mental wellbeing became a key focus for CSH. Concerns regarding mental wellbeing of the school community were referenced by School Health Facilitators, with one describing, “I think that’s probably the biggest struggle with our school right now.”

Throughout the pandemic, School Health Facilitators reported lower confidence to promote mental wellbeing than healthy eating and physical activity (See Appendix 3). Promoting mental wellbeing was mentioned by many as a struggle because of an overarching feeling of isolation and lack of connection “I’d have to say the biggest thing that truly our school probably is suffering from is the mental health part of it. And I think it’s because we’re so disconnected. Unlike we were before.”

However, this struggle did not diminish efforts to promote mental wellbeing, and school staff maintained weekly wellbeing periods, teaching regulation strategies and mindfulness skills, and brought in community organizations to relay expertise (e.g., sharing knowledge of local resources and classroom activities). A staff member said, “we wanted to offer the grade 5/6 class mindfulness so we contacted an organization who could provide this activity via zoom.”

Along with student wellbeing, staff wellbeing moved to the forefront of school priorities. The amount of time and added responsibilities placed on staff and teachers was recognized and proactive approaches were taken in school to actively promote staff wellbeing. School Health Facilitators acknowledged the efforts being made by all staff members in the school to create healthy and safe environments for children during the pandemic and recognized the added burden:

“They are under so much pressure, and these teachers are trying their best and it’s just been a real struggle so we’re not using our library so we’ve actually set up our library as a mini gym for – well it’s for staff and students but staff are using it a lot before and after school even on their preps, so we have a treadmill in there, we have an elliptical, and we also have a stationary bike. And it’s just a spot for them to go and relax, you know, to relieve some stress.”

Schools found unique ways to stay connected to Elders and knowledge keepers in their communities. A school made a goal of “connecting virtually with Elders and doing a virtual family games night.” Schools also maintained priorities of teaching and celebrating culture within schools. An example shared was a virtual round dance facilitated by school staff in each classroom. The staff member also shared: “Now we’re doing a virtual school powwow coming up in April. And we’ll probably just invite our sister nations to our powwow, and it’s all going to be through Google meet.”
SUPPORTING A STRONG CONNECTION BETWEEN THE HOME AND SCHOOL

School closures and student cohorts isolating for weeks at a time meant at-home learning which relied heavily on the connection between the home and the school. An additional challenge faced during COVID-19 was the closing of communities on reserve, which made it difficult to support students through at-home learning as it was very difficult to keep in regular contact. When in-person learning resumed at schools, school staff noticed the impact of limited social interactions amongst community members. Children were keen to return to school to see peers and socialize.

Online learning

Teachers engaged with students through virtual platforms and social media. Resources were also provided to support home learning and healthy living at home. Community support was leveraged to assist learning at home (e.g., materials, books, chrome books).

Virtual platforms and social media became an extension of the school to reach students at home and engage with them. Virtual platforms, such as Facebook, were a way to connect and share resources and fun activities.

“[we] created a Facebook page for the kids, the parents, and the people of the community to go check and we put on it some resources, and fun activities regarding meditation, and physical activity, so it’s a really nice way as well too get in touch with the kids.” One school shared positive feedback they received “some of the students are, you know, getting up early enough and they are participating, so you know we are in contact with them on Facebook, almost every day.”

- School Health Facilitator

Creative efforts were made to engage students by providing homework packages, continuing monthly campaigns, creating fun home lessons, and setting challenges for both students and staff. Themed days of the week like ‘Mindfulness Monday’ and ‘Wellness Wednesday’ continued with resources provided to use at home. Many schools reported using the money for school snack programs to send snacks home with students through their homework packages.

Teachers invited Physical Education and Music teachers to their virtual classes to add fun movement. Some teachers also added movement through home scavenger hunts. In several schools, fitness challenges were created where participants would post pictures of themselves completing the daily challenge. Further, it was encouraged to include siblings and parents to join in on activities done at home.

During the COVID-19 pandemic, organizations stepped up and made generous contributions to schools. As noted by one school, “one connection provided money for Milk Monday, one organization provided birthday books, one organization gave $500 to each class for books, another gave each grade level money for materials.” To support home learning in another school, an organization in the community had Chrome books and Smart Hubs installed in the homes of students free of charge.
Addressing food insecurity

Food insecurity was more present at home and at school due to the pandemic. Schools created more food programs within the school to support students coming to school hungry and sent food packages home throughout school closures.

"We just put in a pantry this fall... in the past it had been just like every now and then somebody would come down. Well, I find that I’m filling this pantry more and more and going shopping for it more and more than we ever have." - School Health Facilitator

Many schools that provided food to students at school found new ways to reach students and families: “Since COVID happened we’re sending out packages to parents that have healthy food, like this week that’s going to be coming up is cereal, apples and milk, and in the past we had gift cards, and another time our educational assistants made pizzas – healthy pizzas for the families. And hopefully the money we’ll be sending out some vegetables next time around.” Another school community found a different approach that worked in their community: “We bought some cereals and milk and we left it at the cashier in our Northern Store so the parents can go and get some for the kids.”

The schools found the community as a source of support, and continued to work closely with community partners to ensure that promoting healthy children in schools was still a priority. One school’s Food Recovery Program has been successfully run over several years and even continued throughout COVID-19. Food was still collected and bags of groceries were sent to families on a weekly basis.

Section II Summary

APPLE Schools strived to continue leading school-based health promotion throughout the pandemic. Schools maintained strong connections between the home and school during remote learning through virtual platforms and social media. Upon returning to in-person learning, schools adapted spaces to be used in new ways and created new classroom and whole school activities. Many of these efforts were shifted to promote mental wellbeing among the school community and ensure food security of the students.
School Health Facilitator Knowledge and Self-Efficacy Survey:
The Knowledge and Self-Efficacy Survey assessed SHFs confidence in implementing a CSH approach. It asked questions about their specific knowledge as well as their ability to implement activities in a variety of conditions. SHFs were asked to rate both their knowledge and confidence at two time points using a 5-point Likert scale for knowledge (1=no knowledge, 2=very little knowledge, 3=some knowledge, 4=quite a bit of knowledge, 5=a lot of knowledge) and confidence (1=not at all confident, 2=not very confident, 3=somewhat confident, 4=confident, 5=very confident). SHFs were also asked how confident they were in their ability to facilitate the implementation of physical activity, healthy eating, and mental wellbeing in their school under a number of conditions:

...when colleagues are not involved.
...when administration disagrees with its importance.
...when parents/guardians disagree with its importance.
...when students are not engaged.
...when parents/guardians are not involved.
...when community stakeholders are not involved.
...when lacking supportive materials.
...when supportive policies are not in place.
...when students find the concepts difficult.
...when I find the concepts difficult.
...when the overall workload is high.

Due to the unique pandemic context during which this data was collected, and low response from the previous year, no comparisons were made for this data. Data analyzed and included in this report was collected in November 2020 (n=9).

Interviews and Focus Groups:
Both interviews and focus groups were conducted with School Health Facilitators, School Health Champions, and engaged school staff acting as health champions (e.g., school principals, teachers). The first purpose of the interviews and focus groups were to understand the impact of a CSH approach on the broader community. Interviews with school staff were followed with interviews conducted with community members who were identified as partners of the schools in three communities. Photos were shared virtually during interviews by community partners and used in the report. The second purpose of the interviews and focus groups with school staff were to understand the impact of COVID-19 pandemic on health promotion efforts in schools and to describe the adaptation of schools during this time.

School Health Facilitator Focus Group May 2020 (n=5)
School Health Facilitator Focus Group March 2021 (n=5)
School staff interviews (Spring 2020 n=5; Spring 2021 n=1)
School staff who completed google forms (n=2)
Community partners from 3 northern communities (n=5)
School Action Plans:
Every APPLE School creates an action plan that is developed by a School Health Facilitator and core committee (e.g., school principal, staff, students, and community members). The purpose of the action plan was to outline school-specific goals for creating a healthy school culture for the school year (September to June).

Action Plans from the 2019-2020 school year (n=21) were included in this report.

Essential Conditions Survey:
The essential conditions survey is a tool for both the school and school authority level to help their school community reflect, plan, and celebrate how wellness is integrated in their school culture. The survey asks questions about each of the 8 essential conditions: students as change makers, school-specific autonomy, demonstrated administrative leadership, higher-level support, dedicated champion(s) to engage school staff, community support, quality and use of evidence, and professional development.

Data from the following two years was included for data analysis in the report:
November 2019, (n =8)
November 2020 (n=11)

In November 2020, this survey was sent to 17 individuals, of which 11 responded but only 10 respondents provided complete data. One participant only answered questions on two of the essential conditions. Therefore for two of the essential conditions, there were 11 completed responses and for the remaining six essential conditions there were 10 completed responses.
APPENDIX 2: ESSENTIAL CONDITIONS
SURVEY RESULTS

**Partnerships**

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<thead>
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<td>Businesses</td>
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**Resources provided by partnerships**

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<td>Expertise</td>
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APPENDIX 3: SCHOOL HEALTH FACILITATOR
SELF-EFFICACY SURVEY RESULTS

SHF confidence in ability to implement
HEALTHY EATING ACTIVITIES

SHF confidence in ability to implement
PHYSICAL ACTIVITY ACTIVITIES
SHF confidence in ability to implement
MENTAL WELLBEING

- ...when parents/guardians disagree with its importance.
- ...when community stakeholders are not involved.
- ...when parents/guardians are not involved.
- ...when colleagues disagree with its importance.
- ...when students disagree with its importance.
- ...when students find the concepts difficult.
- ...when staff turnover is high.
- ...when the overall workload is high.
- ...when I find the concepts difficult.
- ...when lacking supporting materials.
- ...when students are not engaged.
- ...when supportive policies are not in place.
- ...when administration disagrees with its importance.

Percentage

0.0 10.0 20.0 30.0 40.0 50.0 60.0 70.0 80.0
The data generation, analysis, and report was conducted by Dr. Kate Storey’s Research Lab, SIRCLE (Settings-based Intervention Research through Changes in Lifestyles and Environments) within the School of Public Health at the University of Alberta.

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