

UNESCO

United Nations Educational, Scientific and Cultural organization

- The United Nations Educational, Scientific and Cultural Organization (UNESCO) and the Government of Sudan agreed on the establishment of UNESCO Sudan as of December 2006.
- UNESCO addresses sharing vision programs for Sudan as a road map for achieving the prosperity of Sudanese people hopes, and to assist Sudan in post-conflict and disaster situations, concentrating its efforts to help avoid the recurrence of conflicts by addressing their root causes and to insure recovery and development to prepare the new generation for the challenges of the 21st century.
- UNESCO Sudan initiative will perform three major roles:
 - Assist Sudan Government to achieve national strategic goals.
 - Provide special focus on related aspects that poses particular problems.
 - Strengthen partnerships among stakeholders

Our vision

- Political and economic arrangements of governments are not enough to secure the lasting and sincere support of the peoples. Peace must be founded upon dialogue and mutual understanding. Peace must be built upon the intellectual and moral solidarity of humanity.
- In this spirit, UNESCO develops educational tools to help people live as global citizens free of hate and intolerance. UNESCO works so that each child and citizen has access to quality education. By promoting cultural heritage and the equal dignity of all cultures, UNESCO strengthens bonds among nations. UNESCO fosters scientific programmes and policies as platforms for development and cooperation. UNESCO stands up for freedom of expression, as a fundamental right and a key condition for democracy and development. Serving as a laboratory of ideas, UNESCO helps countries adopt international standards and manages programmes that foster the free flow of ideas and knowledge sharing.
- The **UNESCO Chairs** program was established in 1992 following the relevant decision of the [General Conference](#) of [United Nations Educational, Scientific and Cultural Organization](#) (UNESCO) taken at its 26th session.
- The program was conceived as a way to advance research, training and programme development in [higher education](#) by building university networks and encouraging inter-university cooperation through transfer of knowledge across borders. As of end of 2013, the Programme involves over 854 institutions in 134 countries.

- **Guidelines and procedures for the UNITWIN/UNESCO Chairs Programme**

- UNITWIN is the abbreviation for the university twinning and networking scheme. The UNITWIN/UNESCO Chairs Programme covers training, research and exchange of academics and offers a platform for information sharing in all fields within the competence of UNESCO.
- The majority of the projects are interdisciplinary and intersectoral and involve all the programme sectors of UNESCO, with the active cooperation of its field Offices, Institutes and Centres. National Commissions play an important role by helping to promote the programme nationally, facilitating its execution and evaluating its impact. Because it is totally multidisciplinary in nature, the UNITWIN/UNESCO Chairs Programme is one of the Organization's most intersectoral programmes.
- Relevance, anticipation and effectiveness are among the prime goals of the UNITWIN Programme. So far UNESCO Chair and UNITWIN Network projects have proven useful in establishing new teaching programmes, generating new ideas through research and reflection, and facilitating enrichment of existing university programmes while respecting cultural diversity.

Health Education In Schools

What is school health education?

- Health education builds students knowledge, skills, and positive attitudes about health.

Why is health education important in schools?

- Health education teaches about physical, mental, emotional and social health. It motivates students to improve and maintain their health, prevent disease, and learn skills they will use to make healthy choices throughout their lifetime.

What is the main purpose of health education?

- to positively influence the health behaviours of individuals and communities. As well as the living and working conditions that influence their health.

The concepts of health education and health promotion in relation to schools

Health promotion in a school setting could be defined as any activity undertaken to improve and/or protect the health of everyone in the school community.

Health education in a school is a communication activity and involves learning and teaching pertaining to knowledge, beliefs, attitudes, values, skills and competencies. It is often focused on particular topics, such as tobacco, alcohol, nutrition; or it may involve reflecting on health in a more holistic way.

Both health promotion and modern concepts of education share a participative approach. **Health promotion** in a school community may include activities relating to the following six components:

1/ Healthy School Policies

These are clearly defined in documents or in accepted practices that promote health and wellbeing. Many policies promote health and well-being e.g., policies that enable healthy food practices to occur at school; policies which discourage violence and/or bullying.

2/ The School's Physical Environment

The physical environment refers to the buildings, grounds and equipment in and surrounding the school such as: the building design and location; the provision of natural light and adequate shade; the creation of space for physical activity and facilities for learning and healthy eating.

3/ The School's Social Environment

The social environment of the school is a combination of the quality of the relationships among and between staff and students. It is influenced by the relationships with parents and the wider community.

4/ Individual Health Skills and Action Competencies

This refers to both the formal and informal curriculum and associated activities, where students gain age-related knowledge, understandings, skills and experiences, which enable them to build competencies in taking action to improve the health and well-being of themselves and others in their community and that enhances their learning outcomes.

5/ Community links

Are the connections between the school and the students' families, plus the connection between the school and key local groups and individuals. Appropriate consultation and participation enhances the health promoting school and provides students and staff with a context and support for their actions.

6/ Health Services

These are the local and regional school-based or school-linked services, which have a responsibility for child and adolescent health care and promotion through the provision of direct services to students including those with special needs.

Effective Schools, Learning and Teaching Approaches

- Evidence has existed for over 30 years about the effects of health on the educational outcomes of children and adolescents.
- The core business of schools is to maximise learning outcomes, Healthy students learn better. It is therefore important to recognise that schools can enhance their learning opportunities and goals for all students by creating a school community that uses the evidence of effectiveness. To provide students with opportunities to build their educational and health assets.
- Effective schools should:
 1. Use learning and teaching methods that are evidence-based;
 2. Actively involve students in creating learning experiences;
 3. Facilitate cooperation between students;

4. Provide prompt feedback to students;
5. invest in capacity-building experiences for all staff;
6. Establish and promote high expectations;
7. Respect diverse talents and ways of learning;
8. Permit adequate time for learning tasks;
9. Ensure there is consultation between parents, students and teachers in establishing the school's direction;
10. Establish programmes and facilities for students with special needs;
11. Provide clear leadership from the Principal/Director in establishing a school climate of trust, respect, collaboration and openness.

Health Education within the Context of a School Wellness Program

- A coordinated approach to school health improves students' health and their capacity to learn through the support of families, schools and communities working together.
- At its very core, Coordinated School Health is about keeping students healthy over time, reinforcing positive healthy behaviors throughout the school day, and making it clear that good health and learning go hand in hand.
- Coordinated School Health Programs (CSHP) offer students the information and skills they need to make good choices in life.

The CDC's Eight components of Coordinated School Health Programs (CSHP)

1. Health services and education
2. Health education.
3. Physical education.
4. Nutrition services.
5. Counselling, physiological and social services.
6. Healthy and safe school environment.
7. Health promotion for staff.
8. Family/community involvement.



1. Health Education

A planned, sequential, K–12 program that addresses the physical, mental, emotional and social dimensions of health. The program is designed to motivate and assist students to maintain and improve their health, prevent disease and reduce health related risk behaviors. It allows students to develop and demonstrate health-related knowledge, skills and practices. Qualified, trained teachers provide health education.

National Health Education Standards

The National Health Education Standards, which focus on the health skills to be assessed, are critical to the healthy development of children and youth.

The implementation of the National Health Education Standards has driven the improvement of student learning across the nation by providing a foundation for curriculum, instruction and assessment of student performance.

The standards also provide a guide for enhancing teacher preparation and continuing education. The goal of the National Health Standards is to improve educational achievement for students and to improve health.

There are seven National Health Education Standards:

- Health Education Standard 1 (Concepts–CC): Students will comprehend concepts related to health promotion and disease prevention. This standard is linked to all content areas. Student work should demonstrate functional knowledge of the most important and enduring ideas, issues and concepts related to achieving good health.
- Health Education Standard 2 (Accessing Information–AI): Students will demonstrate the ability to access valid health information and health promoting products and services.
- Health Education Standard 3 (Self Management–SM): Students will demonstrate the ability to practice health-enhancing behaviors and reduce health risks.
- Health Education Standard 4 (Analyzing Internal and External Influences–INF): Students will analyze the influence of culture, media, technology and other factors on health.

- Health Education Standard 5 (Interpersonal Communications–IC): Students will demonstrate the ability to use interpersonal communication skills to enhance health.
- Health Education Standard 6 (Decision Making–DM): Students will demonstrate the ability to use goal-setting and decision-making skills to enhance health.
- Health Education Standard 6 (Goal Setting–GS): Students will demonstrate the ability to use goal-setting and decision-making skills to enhance health.
- Health Education Standard 7 (Advocacy–AV): Students will demonstrate the ability to advocate for personal, family and community health

2. Physical Education

A planned, sequential K–12 program that provides cognitive content and learning experiences in a variety of activity areas. Quality physical education should promote, through a variety of planned physical activities, each student's optimum physical, mental, emotional and social development, and should provide activities and sports that all students enjoy and can pursue throughout their lives. Qualified, trained teachers teach physical education.

3. Health Services and education

Services provided for students to appraise, protect and promote health. These services are designed to ensure access or referral to primary health care services; prevent and control communicable disease and other health problems; provide emergency care for illness or injury; promote and provide educational and counseling opportunities for promoting and maintaining individual, family and community health. Qualified professionals such as physicians, school nurses, nurse practitioners, health educators and other allied health personnel provide these services.

4. School Nutrition Services

Access to a variety of nutritious and appealing meals that accommodate the health and nutrition needs of all students. School nutrition programs reflect the U.S. Dietary Guidelines for Americans and other criteria to achieve nutrition integrity. The school nutrition services offer students a learning laboratory for classroom nutrition and health education and serve as a resource for linkages with nutrition-related community services. Qualified child nutrition professionals provide these services.

5. Health Promotion for Staff—Opportunities for school staff to improve their health status through activities such as health assessments, health education and health-related fitness activities. These opportunities encourage school staff to pursue healthy lifestyles that contribute to their improved health status, improved morale and greater personal commitment to the school’s overall coordinated health program. This personal commitment often transfers into greater commitment to the health of students and creates positive role modeling. Health promotion activities help improve productivity, decrease absenteeism and reduce health insurance costs.

6. Counseling, Psychological and Mental Health Services—Services provided to improve students’ mental, emotional and social health. These services include individual and group assessments, interventions and referrals. Organizational assessments and consultation skills of counselors and psychologists contribute not only to the health of students, but also to the health of the school environment. Professionals such as certified school counselors, psychologists and social workers provide these services.

7. Healthy School Environment—The physical and aesthetic surroundings and the psychosocial climate and the culture of the school. Factors that influence the physical environment include the school building and the area surrounding it, any biological and chemical agents that are detrimental to health, and physical conditions such as temperature, noise and lighting. The psychological environment includes the physical, emotional and social conditions that affect the well-being of students and staff.

8. Parent/Community Involvement—An integrated school, parent and community approach for enhancing the health and well-being of students. School health advisory councils, coalitions and broadly based constituencies for school health can build support for school health program efforts. Schools actively solicit parent involvement and engage community resources and services to respond more effectively to the health-related needs of students.