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# **Promoting Well-Being through School Policies**

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#### **ABSTRACT**

Student well-being, encompassing physical, emotional, and social dimensions, has become a critical benchmark for educational quality. As schools worldwide increasingly recognize their role in fostering well-being, the development and implementation of effective policies have come into focus. This paper examines how school policies can support holistic well-being among students by assessing current frameworks, identifying key components of successful implementation, and acknowledging barriers that hinder progress. Drawing on international practices and empirical findings, the study emphasizes the importance of a comprehensive, evidence-based, and context-sensitive policy approach. Stakeholder engagement, evaluation mechanisms, and safe environments are outlined as essential components, while sociopolitical, financial, and institutional barriers are also examined. Case studies highlight both effective practices and ongoing challenges in diverse educational settings. Finally, the paper proposes future directions aligned with the Sustainable Development Goals (SDGs), emphasizing co-ownership and community-based decision-making as means of enhancing policy effectiveness and inclusivity in advancing student well-being.

**Keywords:** Student well-being, school policies, educational health promotion, stakeholder engagement, policy implementation, school safety, holistic education.

## INTRODUCTION

Well-being includes physical, social, and mental well-being. In variance with traditional models, the OECD's concept of well-being is process-oriented, dynamic, and based on people's ability to pursue the goals they want to achieve. Through educational policies, schools are expected to improve students' wellbeing, but how it is done and what is done is hugely variable. Health-related and social-relationshiprelated pillars of well-being have received much attention through a variety of measures. However, these variables often overlap with each other and are not assigned to particularly helpful policies and practices. In terms of student-school engagement and students' expectations about school and future perspectives, there are culturally conditioned differences among countries. In society, well-being in schools, the school community, and the classroom is heavily dependent on the personality and health of each participant. Students come to school with their personal well-being situations, from very poor to excellent. Different personalities, different cultural and relational backgrounds, types of family, etc., all contribute to how schools are generalized in student perspectives. Teachers have their well-being situations. Teaching and learning in teaching programs are created with students having poorer well-being, which contributes to students' school experiences being distorted. The acuteness of the pandemic situation and modern political contexts amplify the poor well-being indicators. Well-being in schools policies written in fancy policy papers are mostly viewed as 'nice-to-have' policies, with many not implemented in practice [1, 2].

# The Importance of School Policies

During recent decades, all around the world, a significant increase in interest has been witnessed in promoting quality of life and well-being. The importance of the subjective perception of well-being has been recognized, and the need for additional research on quality of life and well-being in educational

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settings has been acknowledged. Sociological and social-psychological conceptualizations and measurement models for evaluating aspects of quality of life have been developed, although most of these have been only partially implemented in educational settings. Schools are expected to have a pivotal role in shaping the well-being and quality of life of adolescents. Schools provide supportive environmental conditions for the holistic development of adolescents, as they get adjusted and adapt during a critical phase of life. In recent decades, the rising challenge of low levels of well-being in educational systems has been discussed. It has been found that students with low levels of subjective well-being are more likely to have a negative experience of school, to underachieve in their studies, to suffer from anxiety, to have depressive symptoms, or to be involved in substance abuse. National policies have been implemented to promote and regulate evidence-based health and well-being promotion interventions in schools. However, an effective enforcement of these policies has not always been found, as political will, regulation, financing, professional capacity, linked to the national information or monitoring system, and collaboration between stakeholders form complex challenges to achieving an effective enforcement. Nevertheless, school policies can be considered important tools in structuring consistent guidelines and mechanisms for regulating and promoting healthy behaviors and well-being amongst student populations in different countries. Building a school policy requires a structured planning process that leads to a written document. Existing models for developing and implementing a school policy based on healthpromoting schools principles are mostly based on the experience and best practices of specific countries. However, such standards that provide a clear guideline for the development and implementation of school policy in different cultural contexts are lacking. The need for such standards is urgent due to the accelerating globalization of education and health systems. To promote effective development and implementation of school policies across cultural contexts, a new model of a comprehensive, multi-level framework has been proposed. This model involves a systematic approach regarding the following seven core components: assessing, prioritizing, formulating, consulting, adopting, implementing, and evaluating. Each core component comprises context-based and school-specific evidence-based principles that provide a guideline to follow for effective development and implementation of a school policy, and thus to promote student well-being [3, 4].

# Understanding Student Well-Being

Well-being in the educational context and the experiences in the school seem to be important to understand the situation and ease the way for future improvements. Student well-being is an objective that the school must set as a priority. This notion is increasingly considered an indicator of the quality of the teaching-learning process. The well-being concept englobes elements such as physical and mental health, happiness, satisfaction, socialization, and interaction with peers and teachers. Its strategic role in educational systems has been acknowledged in many countries. The present research aims to assess how these elements are related to each other and which of them plays a central role in school-related quality of life. Findings show that emotions - aggregate measure of sadness and anger, perceptions of peer relationships, and class atmosphere are the most influential aspects on student well-being. School-related conditions such as strictness and support have substantial predictive power on emotional and behavioral states, happiness, and satisfaction. In addition, aspects of teacher relationships are important for tracking personal perceptions of well-being. Taking action that increases youth's happiness has prominent implications for promoting resilience, supporting positive youth behaviors and development, and protecting against negative health outcomes. After reviewing literature related to social support in schools, this chapter cautions that although the effects of social support have been established beyond a doubt, most of the concerns are about how to promote it in ways that will encourage more positive relationships. The chapter provides a rationale for the promotion of well-being (the positive side of mental health), demonstrates the importance of the promotion of emotional well-being, demonstrates the connection of well-being with engagement and academic performance in schools, discusses school factors that support various outcomes, and considers implications for schools and future research [5, 6].

#### **Key Components of Effective Policies**

School support for well-being should exist from the formal policies and plans to the informal ways that schools manage their practice. Several components are crucial in developing effective policies and frameworks, including a well-defined vision and governance; a comprehensive and planned approach; access to resources to support implementation; consideration of local context and engagement; commitment from the whole community; a coordinated and integrated approach for all groups; a systematic approach to planning, implementation, monitoring, and review; and a school that is joint-capability. Policies and frameworks that have these key components are well-defined, and schools therefore understand the outcomes, activities, and support available. These are most useful when they are

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government or publicly available, allowing the whole community to hold schools accountable against them. It is important that schools do not develop their own, separate policies, as it generally leads to fragmentation that is counterproductive for implementation. Policies should express clear goals that all groups within the community can understand. Ideally, they would provide comprehensive and integrated approaches to training, resources, review, and accountability that directly relate to these goals, and should also engage the whole community in a concerted approach. It is essential for schools that are considering policy to be aware of the existing policies at the state, national, and international levels, and sectors. Additionally, it is also important to note the necessity for schools to 'think big' and 'act small' when implementing policy. A big-picture understanding of health and well-being that integrates broader educational frameworks is important, but the approach to school context should be tailored, coordinated, and community-focused [7, 8].

# Creating a Safe School Environment

On May 2, 1997, the Jefferson Elementary School, located just 15 minutes away from the School District Office, was visited to gather data on safety programs and the enforcement of California's zero tolerance policy. Observations of 4 dating violence prevention kindergarten classes were conducted. The rationale for conducting this review was to gather. Research on violence prevention strategies and students' perceptions of school safety was reviewed. The findings uncovered several zero-tolerance programs intended to prevent school violence and considered how well California and the School District were implementing these programs. The authors also found articles on anger management, peer mediation, child-staff relations, and the importance of a Good Faith Effort contract. Safety within schools is an issue that many children face daily and can affect relationships with peers and the learning process within classrooms. However, poll results indicated that children would want their government to take fiscal responsibility and accountability (to parents) over accountability in implementing a zero tolerance policy, where students reproducing anti-social behavior would be transferred to another school. Research indicates that violence on school campuses is an increasing problem, as evidenced by statistical data on violence, gangs, and drugs at school. School violence is influenced by other factors affecting violence against students, such as poor academic performance, school dropouts, and out-of-school youth. Some children may feel safe due to mandatory safety policies and programs; however, a study found that 84% of the middle school students surveyed felt safe physically within the school's confines compared to other settings. The climate approach model, such as a safe school model, seems to be more appropriately suited for elementary-age children [9, 10].

# **Engaging Stakeholders in Policy Development**

Stakeholder engagement and collaboration are vital for developing and sustaining healthy school policies and programs. Effective engagement requires discussing methods tailored to various stakeholders, particularly in rural versus urban settings, which face unique challenges and potential conflicts. Engaging stakeholders in leadership roles can foster motivation and supportive cultures for change. Moreover, awareness of healthy initiatives significantly impacts implementation success. Engaging diverse stakeholders, including non-traditional partners, can enhance collaboration; however, leadership turnover can complicate these efforts. Strategies for engagement should be adapted to different levels, stages of change, and sectors. Some stakeholders might require more information or motivation to participate. Schools may need to improve collaboration training since traditional decision-making engagement strategies are infrequently employed. Additionally, the depth of engagement is crucial; stakeholders may wonder if their input is meaningful, questioning their recognition within decision-making frameworks. Engagement strategies must consider stakeholders' resources and availability to ensure effective contributions. Addressing these issues will optimize engagement efforts, fostering relationships and collaboration beyond mere information sharing, thus recognizing each other's expertise and finding compromises that serve everyone's interests [11, 12].

# **Evaluating Policy Effectiveness**

Schools are an ideal venue for promoting well-being through policy as they serve a large population of children, with school districts often providing services or resources to children's families, many of whom also spend significant time on campus. Schools provide cafeterias or vending machines, may use school grounds to provide recreation facilities or conduct organized activities, and provide support services including school nurses, family support, social services, counselors, mental health services, and services for children with special needs. Whole-of-school approaches to well-being target complementary local policy/decision-making and action across schools and the wider community. Decision making in schools often occurs at a high local level, which is ideally placed to tailor responses to the local context including the well-being of their local population, the perceived priority of addressing well-being at the local level,

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whether local resources can be allocated to promote well-being, and what policy is needed to initiate action. With a focus on locally developed policy, how policies can best be developed and what evidence is available to assist their development should be explored. Low-resource areas are less likely to have received services targeting well-being, and how these schools can better translate their well-being vision into actionable policy, particularly in low-resource schools where experience in the area of well-being may be limited, is needed to explore. Conducting a needs analysis via interviews with key decision-makers from schools with ideal and less-ideal well-being provision should be explored, and then discussions held with key decision-makers at less-ideal provision schools. The need to translate the vision for improving well-being to specific action should be highlighted, and the feasibility of introduction at schools and consensus on which policies to advocate should be investigated too. Then, with clear policies identified, their delivery and evaluation success should be documented and disseminated to other local schools, and any methods used during this process and how they can be used to further advocate, develop, or enhance similar policies elsewhere should be examined [13, 14].

#### **Case Studies of Successful Policies**

In a large urban school district serving a largely low-income and racially diverse student body, an existing comprehensive wellness policy was expanded to first clarify the role of the school district in providing sexual health education (SHE) and sexually-thought-out prevention strategies if SHE is afforded. The first case study focuses on the steps taken to create consensus about the importance of SHE and to redraft the district's wellness policy. The case study also summarizes the efforts taken to begin implementing the model, finding wide variability across the district. The urban boundary is roughly 45 square miles and is bordered by water on three sides. It is considered a first-ring suburb, with high diversity; older sections of the city are experiencing disinvestment. The student population is predominantly of color and economically disadvantaged compared to the state average. Despite a lowerthan-average number of students classified with disabilities, the special education budget is regularly exceeded. Due to a lack of knowledge about cultural norms and school practices, English as New Language students experience higher suspension and drop-out rates than their English-speaking peers. Indeed, the district has recently taken steps to build trust with the community and ensure equitable access to highly regarded schools in the suburbs. This revamped wellness policy does not address a large part of student well-being, which is understanding, negotiating, and acting to avoid the behavioral challenges of teen health, namely high rates of unwanted teen pregnancies and sexually-transmitted infections, and low rates of condom use. School personnel were knowledgeable about the educational challenges, yet school wellness committees (WCs) chose to focus mostly on the available physical health education resources. Funds were made available for staff to attend training and conferences on anti-bullying, and training sessions were held to disseminate information about available health and pre-health resources in the community. School nurses were touched that WCs were beginning to listen to their ideas. Major efforts were made to reach the religion-based school groups that felt excluded from these efforts to make school districts well [15, 16].

# **Barriers to Implementation**

In addition to the elements necessary for implementation discussed previously, school-based ways to promote well-being may be influenced by contextual, individual, and school factors. Understanding these barriers from an early stage is essential for schools to achieve greater success when implementing strategies to promote the well-being of both students and staff. Barriers to implementation can be found across many dimensions and may involve contexts outside of or upstream from schools, the school or district level, and within implementation itself. Contextual factors operate at the socio-political and policy levels as well as at the community, school, and individual levels. Individual and school factors are primarily involved with the broader context of the school, including issues such as financial support, staff turnover, levels of training, or community engagement. Factors related to implementation itself, including capacity, fidelity, coverage, and sustainability, are internal to the implementation process itself. Barriers outside of schools, at a sociopolitical level, may relate to the broader frameworks for education in a national context that differentially privilege experience. Tensions between communities may lead advocacy groups to compete with each other for funding, leading to limited support for initiatives considered less legitimate. Policies that filter down into local guidance often communicate conflicting messages, complicated by differing requirements across various policy operating spaces. This is followed by some contextual constraints experienced exclusively by schools, relating to the geographic area in which they are located, the financial support available to them, or community engagement levels. Finances are thus often reported as structural barriers given limited budgets in some areas, particularly the more socially disadvantaged ones [17, 18].

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#### **Future Directions for School Policies**

The 2030 SDG Agenda outlines obligations for states and the international community to implement social, economic, environmental, and political measures to uphold human rights while achieving SDG goals related to NDIS. It promotes policies focusing on "leaving no one behind" and advocates for coresponsibility and co-ownership in decision-making. The information here is vital for shaping policy documents and frameworks around pedagogical co-ownership and co-curricular activities related to NDIS. Key areas include pedagogies that foster co-ownership, comprehensive ownership understanding, quality indicators, and co-ownership mechanisms in academia. Workshops for co-design and coevaluation of learning guidelines and templates for co-ownership are recommended, alongside narratives of past co-ownership experiences and future mechanisms for stakeholders. Effective curricular designs aligned with training purposes necessitate investigation of pedagogical content and theoretical foundations. Future research could delve into theories supporting co-curricular activities. It is crucial to nurture awareness of "becoming as students" beyond traditional ownership roles, meriting longitudinal studies. Without a sense of NDIS-connected responsibility, task-induced ownership risks increasing student work expectations without sufficient power-holding countermeasures. Co-owned tasks lacking shared initiation and coordinated efforts may lead to pressure and challenging assignments. Despite perceived benefits in developing research ownership for PhD students guided by faculty knowledge, conducting exclusively self-directed research became difficult. The absence of developmental coownership left power and responsibility imbalances unchanged [19, 20].

#### **Policy Recommendations**

Promoting child and adolescent health has gained attention from government agencies, medical organizations, and advocacy groups. Efforts mostly focus on education and awareness, but recent interventions aim to change the context of health perception. Effective behavior alteration may be achieved by modifying environmental, social, or economic signals to offer healthier choices. Schools, where children spend considerable time, can substantially influence health behaviors. They can promote a healthy diet, physical activity, reduce tobacco use, foster positive sexual behavior, and ease psychological distress by combating hunger and aiding concentration. Schools can encourage healthy behavior through education, skill-building, and social influences, including improving the food environment and physical education, while avoiding hiring smokers. The U.S. Congress recognized schools' roles in health promotion by passing the Child Nutrition and WIC Reauthorization Act of 2004, mandating school districts with federally regulated meal programs to adopt local wellness policies (LSWPs). This led to increased focus and resources for student health in schools, including policy restrictions on unhealthy foods and promotion of physical activity, especially due to the childhood obesity epidemic. However, the prevalence and implementation of these policies, particularly in small and rural schools with limited resources, remain under-researched. This study evaluates nutrition and wellness policies in California's small and rural school districts through surveys and interviews, offering recommendations for better policy dissemination and evaluation while highlighting the challenges faced by these schools in promoting health. These insights will inform future efforts to enhance student health initiatives [21, 22].

# The Role of Educators in Promoting Well-Being

Schools are a wonderful opportunity for intervention in the lives of young people. Despite ever-increasing pressures, most Australians believe schools, like parents and families, are the most trusted organizations to engage and support the well-being and development of young people. However, many schools are yet to strategically address and develop wellbeing policies that are comprehensive, systematic, or based on research. Wellbeing is a shared responsibility of all members of the school community and must be treated in this way. Wellbeing will be spent automatically, reactively, or developmentally rather than strategically. Centres, schools, teachers, and other educational settings, teaching schools, school systems, and their leaders, as the communities involved in educating young people, have an unprecedented opportunity to influence the well-being and development of children and adolescents. The challenge is for them to structure this influence in a preventive and programmatic manner. Educators must understand the role of their educational contexts in the lives of young people. They must develop educational contexts that focus on being safe, welcoming, and inclusive, centering on in-depth knowledge of individual students and their lives, correcting pervasive pressures, and creating high expectations for all children and life-enhancing educational experiences. They must understand that the influence of educational contexts is holistic and systemic; it is the whole educational context, not isolated strategies or other solutions, that matters. Any policy that fails to reflect and address this context will disallow or limit effectiveness. In moving forward, educators need to develop a comprehensive understanding of wellbeing,

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the inputs and processes or contexts required to create environments and opportunities for wellbeing enhancement. Educators need to build sustained commitment and capacity within their educational contexts to drive long-term culture change. They should understand that cultural change is possible at the individual, group, and systemic levels, and full culture change is necessary for such significant practices as wellbeing enhancement to remain embedded. Wellbeing is not powerful, nor does it have agency. Educational contexts, through their policies, structures, frameworks, practices, materials, sustenance, actions, and responses, create their wellbeing or lack of it [23, 24].

## Impact of Well-Being on Academic Performance

School well-being is a complex concept involving cognitive, social, emotional, and physical dimensions. PISA countries showcase a multi-faceted approach to understanding well-being, which varies by cultural, gender, and educational contexts. It extends beyond merely defining quality of life; studies in educational contexts provide alternative assessments of well-being. Research has focused on emotional, social, and cognitive engagement through interviews and surveys, while school climate reports have emphasized safety, relationships, and support. Traditionally, measures of school well-being have addressed mental health issues. Gender disparities in academic performance are significantly linked to differences in student well-being, with educational background playing a crucial role in these gaps. Longitudinal studies from multiple countries have identified socioeconomic status (SES) and religious background as predictors of gender-related school performance differences in adulthood. Adjusting for education or occupation can reduce these gender differences. A deeper analysis of how educational level, parenting, and SES interact regarding academic performance might clarify this subject further. Educational background itself is a predictor of gender well-being differences. For effective educational reform, policymakers could consider changes in school tracking systems. Notably, the negative effects of reading and study styles on wellbeing are apparent, while those of achievement and exams appear mostly negative or neutral. In Scandinavian countries, these impacts on well-being differ across school environments, suggesting that performance-based education correlates with lower mental well-being and increased academic stress [25, 26].

# **Cultural Considerations in Policy Making**

Local educational authorities must assess whether their policies support health and well-being in all schools, particularly for historically marginalized students. To facilitate school and community transformation, a coherent model is needed for evaluating school improvement. Local education agencies can use questions to enhance health promotion policies, such as: What guidance exists for effective prevention policies in schools? Do leaders consider these resources sufficient? Are all schools applying these policies? Do health agencies require training to create similar youth-focused policies? Both informal and formal assessments for positive prevention policies should inform consultations and support for areas needing help. Are all elementary schools included in assessments? The effectiveness of school policies utilizing scheduling models should be examined, ensuring age-appropriate application is tracked. It is essential to gather evidence on best practice interventions to promote health and safety, alongside developing school health capacities. What resources are available? How can findings inform practical applications in schools? Supporting marginalized communities in adopting research-based interventions is crucial. What resources exist for this purpose? What methods developed these resources, and how effective are they? Additionally, how can continuous involvement from research providers ensure systematic needs assessment? What strategies can benchmark and evaluate quality? [27, 28].

# **Legislative Framework for School Policies**

In striving to enhance well-being in schools, various Acts and policies have been introduced. This legislation supports and guides school decisions for promoting well-being, providing a framework for each school's vision. The Education Act 2020 mandates schools to prioritize well-being by adopting a wellbeing policy as part of their curriculum. "Wellbeing" covers diverse areas such as SPHE, PE, community engagement, digital involvement, healthy eating, student support, and partnerships with local agencies, ensuring a broad vision. It also includes the school's ethos and community interaction, which influence overall well-being. The Principles of State Policy affirm the State's responsibility to promote student well-being, ensuring schools have national support for these efforts. The State funds initiatives like school meals, mental health awareness programs, teacher training, and social skills programs for students with Autism. The Department of Education and Skills (DES) develops education policies under the Education Act, with action plans promoting health and well-being in schools since 2006, including ongoing plans for 2021. Numerous national documents support schools in creating a vision that enhances children and adolescents' health and well-being from various perspectives, focusing on physical, social, and emotional competence [29, 30, 31].

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#### **CONCLUSION**

Promoting student well-being through school policies requires more than aspirational frameworks—it demands systemic, collaborative, and sustained action. Effective policies are those grounded in local realities yet aligned with global standards and human rights commitments, such as the SDGs. They integrate emotional, physical, and social health dimensions while ensuring inclusive participation from educators, students, families, and the wider community. Barriers like inadequate funding, policy fragmentation, and lack of stakeholder engagement must be addressed through targeted interventions and governance reforms. Moving forward, policies must emphasize not only implementation fidelity but also co-ownership and empowerment of students as active agents in shaping their educational experiences. By anchoring well-being at the heart of educational policy, schools can become nurturing environments that enhance learning, resilience, and lifelong development for all students.

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