

Whole Health Learning in K-12



OUR KIDS ARE
***Whole Health
Learners***



**In the Teaching Kitchen • In Nature • Working Out
In Mindful Moments • In the Garden**

Strengthening their Wellbeing and Resilience in Hands-on, Engaged,
Collaborative Study of Subjects of Lifelong Consequence that Balance and
Support Academic Studies.

A Competency in Wellbeing Paths to Flourishing

Getting Started



Whole Health Learning



School Garden



Teaching Kitchen



Mindfulness



Cognition-bolstering PE



Nature-based Learning

The study of specific, purposefully interwoven subjects whose unified qualities – as with STEM – develop for students a singular form of expertise, derived from collaboration and hands-on agency that supports and balances academic attainment, engenders mutual respect and social harmony, offsets current-day mental duress, and empowers students to enrich their own health and wellbeing.

In their seminal 2021 book, *“Wellbeing in Schools: Three Forces That Will Uplift Your Students in a Volatile World,”* authors Andy Hargreaves and Dennis Shirley addressed schools’ latent potential for imparting to students the skills and aptitudes they’ll need beyond the schoolyard and years of formal education:

“How do schools help young people develop a sense of purpose in life, treat others with dignity, form friendships, build positive identities, become responsible citizens, live healthy and fulfilling lives, experience enjoyment, exercise leadership, feel senses of awe in spirituality or nature, stand up to injustice, and so on?”

“They move well-being to the very center of them.”¹

This Guide covers why a Whole Health Learning (WHL) approach and commitment to Wellbeing are so timely, practical, and affordable expansions for K-12 life, and how to begin the process of evaluation and planning for your school or district.

¹ - D. Shirley, A. Hargreaves, *“Well-being in schools: three forces that will uplift your students in a volatile world,”* ASCD, United States (2021)

You Already Know This Space

As a unified suite of widely available, well-known school-based practices the *Whole Health Learning* framework offers educators the means to strengthen the value of K-12 education in order to meet the unprecedented challenges of the 21st Century: by bolstering foundational Math and Language Arts with a now essential competency in *Wellbeing*.

The WHL framework is based on the established, potent outcomes that specific, historically ancillary school-based practices have achieved since the turn of the century. Thousands of US schools have implemented one or two WHL practices, often with the support of state or federal programs, like the USDA's Farm-to-School.

Of course, this era has also been characterized by steady decline in children's health, mental health, and wellbeing, with the corresponding disruptions in academic achievement and mental and social resilience. These discouraging trends emerged from the obesity epidemic, predate the emergence of smartphones and the impact of COVID, and continue to fester as the uncertainty of AI rapidly unfolds.

The U.S. National Academies for Science, Engineering and Mathematics (NASEM) in its Dec. 2024 report: ***"Launching Lifelong Health by Improving Health Care for Children, Youth, and Families,"*** deeply researched over many years, provides this unambiguous projection:

*"The nation today faces a crisis with serious consequences for the coming decade. Without change, the next 10 years will see larger numbers of young people enter adulthood with chronic illness and disability and worse mental health, leaving fewer adults capable of productive work."*²

While *Whole Health Learning* is certainly aimed at reversing the dismal trends of ill-health that NASEM describes it is not a "healthcare" intervention. It is however an intervention of practical personal empowerment in the same way educators will recognize:

- Math as an intervention against innumeracy
- Reading and writing as interventions against illiteracy
- Whole Health Learning is an intervention against ill health and the antecedents of chronic illness.

The Whole Health Learning response to NASEM's plea for change is based on cohering the longstanding positive outcomes that educators have observed from student experiences in school gardens and related WHL programs. Despite their historic potent outcomes, these practices have rarely if ever been seen as pieces of a whole that strengthens a child's health and wellbeing and therefore his and her prospects for success in school. They've not been part of the education formula.

How does "good health" become a learned outcome like long-division or grammar? Andy Hargreaves' studies over years describes how the epic historic chasm between health(care) and education can be rationally bridged:

"One of the ways we create wellness, and a feeling of fulfillment is not aside from learning, not as a support for learning, but actually, through the nature of the learning itself."

² - NASEM's programs on [Fostering Healthy Mental, Emotional, and Behavioral Development among Children and Youth](#) contributed to the 2024 *"Launching Lifelong Health"* initiative.

This is a fair rendering of what we hope you will begin to observe as you incorporate WHL practices into the life of your school or schools.

From a *learning* perspective: Teachers and practitioners report the practices -- long since integrated into academics -- engage multiple aptitudes and skills that present students added ways to be, and to feel, successful at school. The collaborative, hands-on nature of these activities provides agency for individuals and for teams and can also create an important balance with the rigors of academic work.

From a whole child *health* perspective: Whole Health Learning builds on qualities that school-based practitioners and teachers refer to as “upstream prevention:” that is, offsetting or preventing unfavorable impacts from adverse circumstances, lifestyle choices, social behaviors, and the antecedents of chronic illnesses that originate outside of school.

For confronting *digital* afflictions: Participation in WHL or any individual or team-based learning activities that are routine and sustained may reinforce balance in time and attention that gives students a natural separation from digital devices and now problematic AI-companion experiences.³

In April of 2024, the Director of the CDC’s Division of Adolescent School Health (which houses the *Whole School, Whole Community, Whole Child* program: WSCC), keynoted a symposium that WholeHealthED co-produced with the host Harkin Institute, entitled “*Wellbeing in the Schools.*” In describing her division’s considerable efforts to support schools and families through the child mental health crisis, Director Kathleen Ethier remarked: “We’re not going to ‘mental health professional’ our way out of this.”

By re-purposing already well proven and effective measures, schools may, with guidance and broadened purpose, help students “learn their way out of this.” And come through these years of crisis with the knowledge and skills for a resilient and productive adulthood.



The Center for Whole Health Learning in K-12, Inc. (WholeHealthED.org) is a 501(c)3 non-profit acting as a primary catalyst for re-imagining U.S. schools’ capacity to impart to students a competency in Wellbeing and to ensure that all proven and effective measures are readily available to confront mental duress and to empower the positive, collaborative learning that will prepare young people for the 21st century.

³ - These are critical influences on learning that will continue to require thorough and ongoing research.

Getting Started

WholeHealthED can help you craft the approach, organization and fit of WHL practices into your school and/or district.

1. Integrate core stakeholders: leadership, teachers, students; with parents and community members
2. Work with educators to align programming with curriculum; identify available resources and talents, plus those needed; design WHL as an equitable, balanced, holistic companion to academics.
3. Engage staff including food service, facility, and grounds to reflect the schoolwide commitment to a wellbeing-centered culture and environment. Provide a “reset space” for faculty. Display the language of whole health learning on the campus (as you see here).
4. Engage community stakeholders as partners to ensure commitment and sustainability. They can be valuable resources in programming, and in making the benefits of WHL known beyond the schools. For instance:
 - a. Pediatricians and hospital systems
 - b. Local parks and community gardens
 - c. Farmers markets and food kitchens
 - d. Local clubs and organizations
 - e. Libraries
 - f. Faith-based community leaders
 - g. Police and public safety



Mindful settings at Lakeside MS in south New Jersey. First WHL pilot school.

5. Plan to measure efficacy and how an evidence base will be developed to inform best practices.

There will be more aspects for your team to consider of course: for design, preparation, resources, implementation, and evaluation.

WholeHealthED maintains very close connections with the leading exponents of each Whole Health Learning practice area around the U.S. and with important related professions and organizations who are also devoted to children’s’ health and wellbeing. We continue to work with pediatricians on new approaches based on food and nutrition, brain health, time in nature, stress management, mental duress, social engagement, and the impact of digital technologies. We serve on an NIH-initiated *Coalition for Whole Person Health Research*.

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Resources

“WholeHealth Learning in the Era of COVID”

WholeHealthED.org: 2021

Reflections by Spike Cook, EdD, principal of Lakeside Middle School in Millville, NJ, on Lakeside’s experience implementing a series of WHL workshops over a spring semester: the first Whole Health Learning pilot. (Article follows this page.)

Journal article

Kids in crisis: the whole health learning solution

EXPLORE: The Journal of Science and Healing, 2023

<https://doi.org/10.1016/j.explore.2023.06.005>

A summary of WholeHealthED’s evaluation of the need and recommendations for new approaches to confront and reverse the demoralizing trends affecting children’s health and wellbeing, and schools’ untapped roles for advancing the improvements.

Live conference

The Wellbeing Imperative in K-12 Schools

WholeHealthED.org: 2024

A report of the 2024 *Harkin on Wellness* annual symposium, co-produced by WholeHealthED for the Harkin Institute. Entitled “*Wellbeing in Schools:*” featured keynotes by U.S. Surgeon General Vivek Murthy and Director of the CDC Division of Adolescent School Health Kathleen Ethier; inter-professional panel discussions, and presentations to schools from around the US.

Webinar

First Line of Defense: Confronting the Adolescent Mental Health Crisis through Whole Child Actions in K-12:

WholeHealthED.org: June 2023

A webinar precursor to the 2024 Harkin symposium. Leaders of Whole Health Learning practices areas discussed the beneficial health and behavioral impact of student time in their programs: for academics, social behavior, brain health, faculty engagement.

Webinar

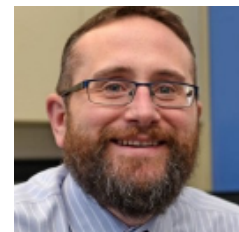
Balancing academics and wellness during Covid-19 and beyond

WholeHealthED.org: July 13, 2020

In the summer after COVID’s emergence, colleagues discussed how whole health learning practices offered educators close-at-hand WHL resources to offset the trauma students and faculty had faced during the pandemic; and their alignment with recommendations from the American Academy of Pediatrics (AAP) to offset “likely continued distress...with physical education and other learning experiences...rather than an exclusive emphasis on core subject areas.”



In January 2019 **Lakeside Middle School** (6-8) of Millville in Cumberland County, NJ launched a first-of-its-kind series of wellness workshops around activities usually presented separately or in piecemeal fashion: mindfulness, nutrition and kitchen skills, fitness, and environmental learning. Uniquely, the activities were unified at Lakeside into a single program delivered during the semester. They were also added to after-school services at Lakeside and at three other Cumberland County middle schools through the **21st Century Community Learning Center** (21st CCLC) program of the US Dept. of Education.



SPIKE COOK, EDD
PRINCIPAL, LAKESIDE
MIDDLE SCHOOL

The 21st CCLC commissioned a pre- and post-survey assessment of student attitudes, which summarized:

"Overall, across every domain, students reported more knowledge, increased positive behavior, and more self-awareness, from pre- to post- surveys. The 21st CCLC Health and Wellness Program appears to have made a significant difference for the participants of this project."

Why did a Title 1 middle school in one of New Jersey's most challenging communities agree to implement this approach? And then to sustain its development during COVID? In our online conversation in the summer of 2020 with then-Lakeside Principal Spike Cook he observed:

"This was an opportunity to provide something for the school community that would address the mind, body, and spirit of wellness in order to transform our school culture. During the past few years, Lakeside Middle School has coordinated and participated in various mindfulness activities, so it made sense for us to take the next step in this initiative."

The idea of unifying school-based wellness activities into a coherent program was the focus of WholeHealthED's inaugural symposium in 2018 at Georgetown University. Senior Advisor Kate Tumelty Felice, a psychology and education faculty member at Rowan College of South Jersey

in Vineland (adjacent to Millville), led several discussions. On returning to Vineland, she worked with county and school contacts to create by the end of 2018 a first “holistic wellness” program.

Implementation of what is now the *Whole Health Learning* program at Lakeside was one of the earliest examples of combining multiple school-based wellness activities into a single, coherent learning experience sustained across a semester. It was also an entirely new way to think about the influence that students’ time in these programs might have on learning, on behavior, and on mental and physical health.

The Multiplier Effect

Dr. Cook recounted:

“As students began to participate in the events, it was clear that these were new experiences. At first, they were timid, and some were even unwilling to participate. As time progressed, so did their comfort level with the various activities. Teachers and students both reported that the impact of the activities had specific benefits such as increased awareness of mindfulness, healthy eating, and respect for the environment.”

“Students who participated in the activities were willing to trust the process that this would in fact help them, throughout the various activities. Each student took something special away and was able to better articulate feelings.”

Educators and specialists experienced in discrete wellness fields will recognize this kind of unfolding acceptance. Combining the activities together as was done at Lakeside also highlighted an interesting multiplier effect. Chef Rebecca Johnson of *Wellness in the School (WITS)* noted this continuity when she described WITS’ highly regarded “Cook for Kids” program she led at Lakeside. During our later July 2020 webinar “*Balancing Academics and Wellbeing*,” she observed: “The students had just come from a mindfulness track. Because of their heightened awareness they were unusually receptive. They were ready for what we had to teach.” (See: [Chef Rebecca’s presentation on YouTube](#).)

2020: Into COVID

With the favorable results from 2019, Dr. Cook re-upped Lakeside for 2019-2020, which of course COVID shut down in early 2020. But he remained open to program enhancements while everyone wrestled with remote learning and started to consider outdoor classrooms. We continued to support his vision for transforming the school’s culture with our partners.

Foremost among these collaborations was with the **Whole Health Institute (WHI)**, a groundbreaking clinical and therapeutic non-profit introduced by the Walton Family Foundation in January 2020. WHI was created to bring to healthcare an approach to healing and treatment that *empowers patients to manage their own wellbeing*. Whole health principals animate this approach to personalized care; just as they do whole health learning.

But like WholeHealthED and schools everywhere in early 2020 WHI was unable to start its work in clinics and workplaces. Together we came up with a collaboration to bring whole health principles into remote learning. This was the unique **Whole Health 4 You** collection of 60 short videos (3 to 4 minutes), in which kids creatively expressed themselves through music, art, exercise and yoga, gardening, making meals, and other surprising ways.

Created and produced in collaboration with WHI, the videos were designed to engage kids, families, and teachers during the many months of remote learning. They were accompanied by specially designed lesson plans for teachers. (Not surprisingly, a Lakeside faculty AVID teacher was the first to integrate the videos in her lessons plan in the spring of 2021.)

Improving the Green Space

WHI also made possible significant improvements at the Lakeside campus itself: energizing an unused school garden plot, developing green spaces, including outdoor learning resources and mobile outdoor classroom carts (shown here with 6th grade teacher Cheyenne Langlois) and a repurposed “Teacher Reset Room.”

Dr. Cook, active on Lakeside social media, noted that after posting about these schoolyard improvements had several inquiries: “In fact, people want more spaces to be created and redesigned.”



He also noted the role of the Teacher Reset Room. “Parents are very supportive of the program and the impact on the climate and culture of Lakeside. Especially during the pandemic, parents wanted to ensure that the staff were being taken care of because they know that is important.”

In addition, the regional **Inspira Health Network** of Vineland made possible the creation and installation of a “Mindfulness Walk,” literally a visual path in and around the school designed by Dr. Felice to encourage students and faculty to pause and reflect as they move through their days. (Inspira’s *Fitness Connection* director led the physical activity workshop during the spring of 2019.)

These resources were developed during the challenging 2020-2021 year. Dr. Cook’s interest in improving the school’s wellness capabilities even as COVID caused such distress,



illustrates the potential for such development. He recalled the progress since late 2018:

“Honestly, when we first began this work, we were unable to see how the seeds of change would take root at Lakeside. Over the past two years, we have seen an acceleration with the work and the impact on the school community. This has truly been a labor of love.”

Takeaways

Lakeside’s whole health learning experience represents a small sample size to be sure. It also illustrates how talent, tools, and methods – often readily available – can be organized to offset the negative impacts of the COVID experience, and at the same time start to build a wellbeing mindset for students, and as Dr. Cook intends, for the school community itself.

As the Nation considers massive investment in its K-12 school infrastructure, it is essential that educators make the case that school-based wellness activities like school gardens that complement SEL are seen as *wellbeing hubs* in that infrastructure (which they are); no longer just “nice-to-have” ancillary programs, but essential-to-provide components of whole health learning for every Whole Child.