
A Joint Statement

On the Urgency of Including the Positive Outcomes of US School-based Practices that Support Whole Child and Adolescent Wellbeing in National and State Education and Child Health Policies

From Members of Practitioner, Education and Research Communities
June 23, 2026

In 2024, the National Academies of Science, Engineering and Mathematics (NASEM) produced a consensus statement (*“Launching Lifelong Health by Improving Health Care for Children, Youth, and Families”* FN-1) that summarized 20+ years of its work, with a worrisome assessment of the declining health and wellbeing of the nation’s children.

“Despite calls to improve the child and adolescent health care system that have been made for more than 20 years, 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.”

As WholeHealthED we shared our concern about this grim projection with senior leadership at NIH’s National Center for Complementary and Integrative Health (NCCIH), which leads the Institute’s development of whole person health. At a presentation at the end of 2025 for its Acting and Deputy Directors we presented much of the argument we make in this statement, notably the need to expand the research. In early 2026 the Acting Director presented to the independent Coalition for Whole Person Health Research during which he referred to their plans for 2026 to focus on the challenges to children’s health set out by NASEM, and noted WholeHealthED’s participation in these efforts. [FN-2]

The undersigned are innovators, developers, implementers, and research specialists of school-based practices that have been in place in thousands of US schools for many years, largely as ancillary programs. Since 2000 they have also shown increasingly beneficial outcomes for students’ cognitive, physical, emotional and behavioral health, and recently accrued economic benefits. But this history has rarely been included in state and national education and child health policy initiatives intended to address the deteriorating state of children’s wellbeing.

This statement is directed toward research and policy leaders and funders who support children’s health and education within government (such as the National Institutes of Health), professional organizations (such as the American Academy of Pediatrics), as well as private foundations. Our purpose in this and a following document is to present a representative, accurate portrait of these practices – including their mature research and current-day availability – to advocate for their full consideration in policy, program development and funding decisions aimed at mitigating the persistent factors still challenging children’s healthy development: The nation’s schools represent a partially engaged, not well understood, but potentially transformational, national infrastructure that can be leveraged to mitigate these trends.

- The practices we focus on are referred to as “whole health learning”
 - **Garden Education • Teaching Kitchens • Mindfulness • Nature-based Learning • Physical activities**

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- Plus initiatives that strengthen building and grounds, services, and the school's place in the community:

- **The School Garden • Cafeteria Scratch Cooking ("Food as Medicine") • Prescribing Nature • Green Schoolyards**

(The student-centered, collaborative, hands-on and creative qualities inherent in participation in these activities has also shown positive impact for the objectives of Social and Emotional Learning [SEL] and Mental Health Literacy, important priorities for educators, and for community development initiatives.)

Research on each activity in isolation has consistently demonstrated positive impact on students' health and wellbeing, whether implemented for therapeutic care or for learning in upstream prevention and health promoting subjects. The outcomes embodied in the work and research that define the achievements of the undersigned represent a potent, respected but barely-tapped set of effective measures which among other things have been shown to: 1) strengthen students' academic achievement and their personal, social, emotional, and behavioral capacity, and 2) expand learning in subjects that engage multiple aptitudes and offer additional paths beyond high school.

Despite the longstanding evidence and the growing availability of these practices across the US, these outcomes are not fully nor coherently included in major prescriptions for mitigating the serious decline in American children's health. Post-COVID anxieties persist and are compounded by the pervasive presence of technology and AI, making children more susceptible to anxiety and uncertainty about their current school experience and their future prospects. Mental duress continues at high levels despite important population-based improvements.

These represent readily definable research gaps that we propose need immediate attention through research and associated funding if we are to confront – at scale – the urgency expressed in the National Academies' unequivocal assessment, and to support educator and family commitment to students' wellbeing. A rigorous and comprehensive research program will also build on observed outcomes of these practices related to brain health and function, cognition, nutrition, relational health, behavior, and the shaping of Positive Childhood Experiences (PCEs) as expressed during school years. It will also define the synergistic effects of combining multiple practices in a single school, sustaining the learning across grades, and informing districts how best to manage the implementation.

The American public school system has been in a period of thoroughgoing re-examination since well before COVID. It has been a time of constant societal change. Our strong belief is that irrespective of the educational modifications to come as a result of this re-examination, schools and the public must commit to strengthening student wellbeing and health as a matter of first duty.

The successful nationwide school implementations of whole health learning practices and related improvements on which this statement is based have in effect set the stage for schools and districts to confidently embrace this commitment to student wellbeing. The collaborative, hands-on, creative nature of these historically "nice-to-have" activities present three primary positive outcomes:

1. Schools' ongoing efforts to counteract the persistent ill-effects of mental duress, stress, and adverse experiences are greatly strengthened, and may reduce the need for professional medical intervention;
2. Students develop skills and knowledge in subjects of lifelong consequence and in ways that support a sense of belonging and being (and feeling) successful at school;

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3. Over time, and when delivered with intention, students can develop attitudes and mindsets that support their own self care (agency), just as instruction facilitates their competencies in math and language arts.

We encourage leaders of national and state K-12 education and pediatric healthcare policy and funding bodies to ensure that this extensive body of research and observational knowledge becomes routinely included in policy and funding decisions, in particular to build on and strengthen the established and substantial research base. This will also help sustain support for proven programs (like USDA's Farm-to-School and the CDC's Whole School, Whole Community, Whole Child (WSCC) program.

Finally, it should also be noted that multiple whole health school-based practices align with the interconnected, patient-empowered, self-care vision embedded within healthcare's transformational movement toward Whole Person Health. The NIH – through the deep and comprehensive foundational work of NCCIH since before COVID – has identified Whole Person Health as key to addressing chronic illness and to improving the health of the Nation, notably including the wellbeing of the Whole Child.

[FN-3]

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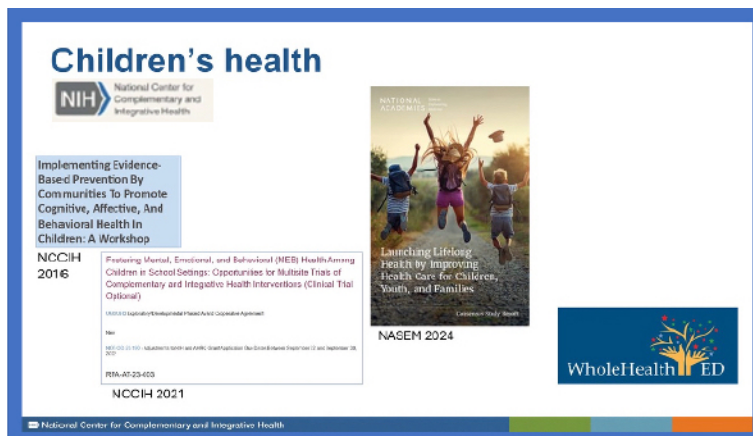
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FN-1: National Academies of Sciences, Engineering, and Medicine. 2024. "Launching Lifelong Health by Improving Health Care for Children, Youth, and Families." Washington, DC: The National Academies Press. <https://doi.org/10.17226/27835>.

FN-2: At the January 2026 NCCIH presentation to the Coalition for Whole Person Health Research, Acting Director David Shurtleff included this slide discussing plans to address children's health in 2026. WholeHealthED serves on the Steering Committee for the Coalition.



FN-3: "Make Our Children Healthy Again: Assessment," from the MAHA Report, The White House <https://www.whitehouse.gov/wp-content/uploads/2025/05/WH-The-MAHA-Report-Assessment.pdf>

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Building on Research, Deep Experience, and Collaborations

This Joint Statement is an introduction to the proposition that schools and the tradition of learning life's essential skills should now be applied to wellbeing and self care as surely as it is to math and language arts.

It will be appended later this summer with descriptions of student experiences and outcomes, plus the research that has supported the adoption of practices in recent years that offer educators and families a broader set of options to push back on persistent adversities, mental duress, and social determinants that have compromised children's performance and prospects so badly that the National Academies have made plain a dire forecast for the years ahead.

We are grateful to colleagues who have joined together to make the case that a truly holistic view of all proven and effective measures that have come into the purview of schools in the last 20+ years -- from gardens and mindfulness, to green schoolyards, tree canopies, and scratch cooking, to the importance of relational health -- need much greater attention and to be given equal weight among the many modifications being considered for American primary and secondary education.

I especially want to thank Cathy Jordan, research director for the Children & Nature Network, and Pam Koch, whose research encompasses the inventive nutrition and teaching kitchen programs at Wellness in the Schools; both organizations supporting WholeHealthED since our inaugural symposium, in June of 2018 at Georgetown, brought together a not-dissimilar group of deeply knowledgeable practice and whole health specialists, physicians, and researchers all of whom remain dedicated to improving the lives of children, for a first convening among the innovators in these domains.

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