# HEALTHY CHICAGO POLICY BRIEF

### A FOCUS ON SCHOOL HEALTH: MEET THE NEW CHIEF HEALTH OFFICER AT THE CHICAGO PUBLIC SCHOOLS

April 2012

The health of Chicago's children is a key component of the Chicago Department of Public Health's (CDPH) Healthy Chicago Agenda, which is one of the reasons CDPH works with the Chicago Public Schools (CPS) to operate numerous programs to improve student health. To better coordinate and augment this work, a CPS Chief Health Officer position, a joint position of CDPH and CPS funded by Otho S. A. Sprague Memorial Institute, was created. With the full support of CDPH and CPS leadership, in February, 2012, the Chicago Board of Education voted to appoint Dr. Stephanie A. Whyte, a pediatric physician, as the City's CPS Chief Health Officer.

CDPH recently sat down with Dr. Whyte to learn more about her vision for a Healthy CPS.

### CDPH: As the number one priority of CPS is education, can you explain why CPS needs a Chief Health Officer?

**Dr. Whyte:** Education and health are uniquely linked. Health education provides young people with the knowledge and skills they need to become successful learners and healthy and productive adults. CPS is the third-largest school district in the nation; it seems intuitive that any measures necessary to improve student success would be undertaken. As such, as Chief Health Officer, my charge is to remove the health-related barriers to learning via policy, health promotion and health services.

### CDPH: How will your work foster these changes?

**Dr. Whyte:** I view my department as the crossroads of empowering students and engaging families around issues of health and wellness. My strategic template for success includes a platform that parallels the Healthy Chicago public health agenda. CDPH: CPS has many different units that relate to health, including sports, nutrition, and safety and security. What specific areas within CPS are you charged with overseeing?

**Dr. Whyte:** I am charged with the "Physical Health" department. Our areas of focus are: Family Life and Comprehensive Sexual Health Education, Oral Health, Vision Services, School-Based Health Centers, Chronic Illness (such as diabetes, food allergies and asthma) and the implementation of newly approved CPS health policies regarding asthma medications, food allergy and Epi-pen, and dedicated care aides for students with diabetes.

CDPH: What do you see as the biggest health challenges facing CPS students, and what are your thoughts on how they might be addressed?



Dr. Stephanie A. Whyte, CPS Chief Health Officer





Facebook.com/ChicagoPublicHealth



http://gplus.to/ChiPublicHealth



@ChiPublicHealth

HealthyChicago@cityofchicago.org

### CHICAGO DEPARTMENT OF PUBLIC HEALTH

**Dr. Whyte:** There are many challenges ... I will highlight just three examples, starting with obesity. Obesity rates for children have more than tripled in the last 30 years. Diet/nutrition and physical activity are cornerstones of a healthy lifestyle. As such, it should be the role of the schools to educate our children and their families about nutrition to empower them to make healthy choices. Additionally, we need to promote physical activity – and be creative with addressing structural limitations of the school.

Let's look also at sexual health education. Cook County ranks numbers one and two for gonorrhea and chlamydia sexually transmitted infections, respectively, in the 13-24 age group. Our youth need to be empowered to make appropriate decisions regarding their sexual health. We must educate on family life, comprehensive sexual education and HIV/ AIDS. There are about 40,000 new HIV infections occurring annually and half occur in people younger than age 25. We have to inform our youth to protect them.

My final example is vision. The old adage goes "If Johnny can't see the board, then he can't learn to read." In 2011, over 12,000 CPS students were seen at our Princeton eye clinic; nearly 80% required glasses. Health promotion for vision and educating parents on the importance of eye health is critical to improving student performance.

### CDPH: In your brief tenure to date, have you been able to identify the greatest challenges to improving and promoting the health of CPS students?

**Dr. Whyte:** As much as schools are the place to learn about health, the priority must be education. So, the need is to frame everything health-related through the lens of student performance in school, and to leverage our opportunities with the new curriculum and full school day to make health a priority. I stated earlier that my charge is to remove health-related barriers to learning and it has become my mantra. In this large education machine, I have to be the squeaky wheel that screams out the importance of health in every facet of the curriculum.

## CDPH: What are the greatest opportunities for improving and promoting the health of CPS students?



The first opportunity is timing. CPS is undergoing a colossal change at this point. The curriculum and length of the school day are both changing. I have the opportunity to impact curriculum at this point to get health and enhanced physical education as a fixed component of the school day. I also see the opportunity to provide best practices for the integration of health education and physical activity and to provide options for the teachers in addressing it. And another opportunity pertains to visibility. Having this position at CPS by itself lends credibility to the intent of CPS to consider the health of its students. I am positioned and now able to build relationships with internal and external stakeholders to improve student health.

### CDPH: Any low-hanging fruit?

**Dr. Whyte:** Yes! I was pleased to get Board of Education approval for a change in CPS policy that will allow passive consent on health-related youth surveys. It is so important that we hear from students directly regarding their health risk and health promoting behaviors, and this change will facilitate that understanding. We've also been able to contribute Health & Wellness as a subject in the longer school day resource guide to be provided to all teachers, which will further spread our message.

#### CDPH: These are great achievements. Can you tell us more about recent health policies adopted by the Board?

**Dr. Whyte:** In January, the Board approved policies to stock injectable epinephrine (known as Epipens) in every school and allow students to carry and self-administer Epi-pens, asthma inhalers, and

### **POLICY BRIEF**

### CHICAGO DEPARTMENT OF PUBLIC HEALTH

diabetes testing equipment with written approval of a parent or guardian. These policies will help save lives of students having severe allergic reactions and will improve asthma and diabetes self-management.

#### CDPH: Teen pregnancy, sexually transmitted infections (STI) and dating violence are all priorities for adolescent health in our Healthy Chicago public health agenda. Can you share some of your strategies to address these concerns?

**Dr. Whyte:** Currently, through the partnership with CDPH on the STI project, students are receiving sexual health education and the opportunity to test for gonorrhea and chlamydia at their schools. We're delighted to expand that effort to 30 schools this year. Additionally, the SexEd Loop is a social media campaign that will use text messaging to send empowering and/or educational messages about sex and relationships. CPS also has youth development programs that address teen pregnancy and dating violence, which include partnerships with CDPH and community agencies.

#### CDPH: With regards to sexual health education, in what grade do you believe students should be provided with this information?

**Dr. Whyte:** I believe that it should be taught throughout the grades K-12 in an age appropriate manner. Comprehensive sexual health education should begin by middle school.

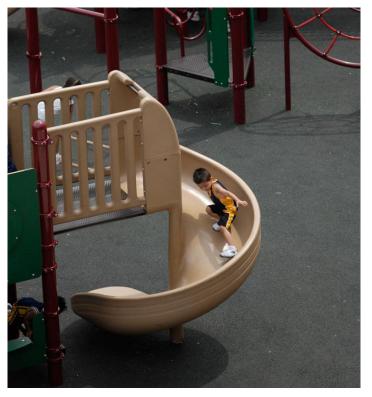
### CDPH: We are delighted to be working with CPS on a Healthy CPS Healthy Chicago public health agenda supplemental action plan. Can you share some of the policies in the agenda?

**Dr. Whyte:** CPS staff reviewed the 12 priorities in Healthy Chicago and asked the question, "What can we do to address these priorities within the schools." As a result, we will be calling for policies to continue to improve nutrition and immunization rates; promote HPV vaccinations; prevent/reduce teen pregnancy, STI's, and dating violence; among many others. We will be looking to create environments that support healthy behaviors and reduce exposure to health risks.

## CDPH: Just one final question. What role do parents have in supporting the health of their children?

**Dr. Whyte:** Parents are the most important link in the student health continuum. Parents promote, enforce, reiterate and support healthy ways to their children. Enabling parents to identify better choices or opportunities is critical to the success of any wellness program.

### CDPH: Thank you. We are excited to work with you to create a Healthy CPS.



Prior to joining CPS, Dr. Whyte served as the Medical Director of the Mobile C.A.R.E. Foundation, where she spent over a decade caring for children with asthma in the Chicago Public School system via a mobile medical platform.

She also served as the spokesperson for the Respiratory Health Association (RHA) of Metropolitan Chicago's Asthma Education Campaign targeting African-American Communities. (It should be noted that RHA has been a long-time advocate for medical leadership within CPS.)

Dr. Whyte has been an outspoken key thought and opinion leader; a medical expert; a strategic planner, mentor and advocate for more than 15 years.

## **POLICY BRIEF**