

GHGH Report Recommendations

HEALTH EDUCATION		
1	school	Mandate health curriculum that is developmentally appropriate from elementary through high school and includes: healthy eating (incorporating menu planning and cooking); healthy weight gain/loss; life long exercise skills; healthy sexuality; healthy relationships (include modeling of healthy behavior); emotional side of dating and sex; sexual development of young people; diseases (including how to prevent); personal safety skills; effects and consequences of drug and alcohol use and abuse (include speakers who are close to their age); personal development, purpose exploration, and goal setting opportunities; emotional development; mental health issues
2	school	Provide girls with a wide range of speakers with whom they can relate with life changing health experiences in schools.
3	school	Integrate opportunities for vocational training and career path development into school curriculum and coordinate with the business community.
4	school	Offer single-gender health classes when discussing gender specific sexuality for a portion of the time. (Please note - We believe it is important for both genders to understand the sexual development of the other gender as well.)
5	school	Support middle and high school teachers in learning how to teach in a way that is both responsive and relevant to girls' needs. Support empowering girls to codevelop the learning goals and encourage dialogue in classrooms.
PROGRAMS ~ INITIATIVES		
6	outside	Provide non-school based programs including: healthy menu planning, cooking, and eating; understanding their bodies and emerging sexuality; healthy relationship behavior - especially family, friends, and dating; conflict resolution and personal safety skills;
7	school	Support continuation or addition of school sports and intramurals in middle and high schools. Allow community based providers to offer exercise opportunities at school after school, especially in high schools for teens that are not playing school sports.
8	school	Insure that all public buildings including schools have recycling and green programs.
9	school/outside	Fund ongoing school based health support groups (during lunchtime) and peer education/counseling programs (school campuses/community)
10	outside	Create opportunities for meaningful involvement in the public policy process and encourage girls' access to policy makers and leaders.
11	school	Provide finding your purpose/goal setting and socio-emotional development workshops/opportunities (like Challenge Day) annually at every school throughout a girl's educational career.

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12	school	Every school should offer classes in child development and in caring for babies and young children. We would like every school to have a baby "robotic doll" program, where students are responsible for caring for the baby for a week.
13	outside	Create and nurture free community health forums created and led by girls. These would provide girls with the opportunity to network with other girls, to talk about their emotional issues, and receive support and information from each other and health educators. Provide opportunities like community girls health forums for girls to ask questions of health experts and dialogue amongst themselves about being healthy
14	outside	Support an interactive website for girls that is girl directed and mentor advised for girls to anonymously discuss health issues.
15	school	Train a cadre of health peer educators/counselors in every school on an ongoing basis.
16	outside	Provide opportunities in communities for girls to have something to do after school - work, club, support groups, sports, ROTC, dance, theater, art, etc. Where possible, communities should have athletic centers for youth and their families that are accessible and affordable. The Monterey Sports Center is a model.
17	outside	Provide ongoing education and support for parents to help them appropriately support the healthy development of their daughters; Web-based videos or television programs may be the most effective way to reach parents; Program content should include: healthy eating; exercise; open communication, appropriate discipline, and positive relationships in a family; personal safety; reduction of alcohol and drug use - the issues that are being covered in Health Classes
18	outside	Offer convenient and culturally appropriate health education opportunities for parents in order to: Increase their general health knowledge and dispel myths; Build their capacity to talk with their daughters; Provide support for their own health issues; Model healthy behaviors
POLICY		
19	state	Maintain and expand upon current levels of health education funding.
20	state/district	Support funding for school nurses.
21	state/district	Support funding for counselors in schools to provide emotional support (not only academic guidance). Or allow counselors from community based organizations on campus to provide support.
22	district	Support school policy in serving healthy foods. (One idea is to charge more for unhealthy foods to cover the cost of lower priced healthy foods.)
23	state	Support continuation or addition of Physical Education in schools as a daily and mandatory activity in middle and high schools.
24	county?	Increase set back distance of pesticide use around schools and homes to levels that are completely safe for girls. Optimally, we believe no pesticides should be used around homes or schools.

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25	county	Provide increased continuity of policy regarding health education throughout Monterey County incorporating developmentally appropriate health education in elementary school, as well as a full year course in middle school and twice in high school. Also we believe that developmentally appropriate health education should be incorporated into elementary education and early childhood experiences.
26	city	The Monterey Sports Center should change the policy about requiring a parent's presence for an older teenager to become a member. This is a barrier for some. Change policy to allow parents of teenager to just sign forms rather than requiring physical presence.
ACCESS TO CARE/SERVICES		
27	health	Support ease of access to birth control and reproductive health care.
28	health	Insure affordable access to health care for all girls.
29	health	Offer affordable and accessible counseling for families (especially to help families cope with stress).
30	school	Allow community based providers of healthy behaviors to come into schools to teach about sexual development and healthy sexuality.
31	school	Allow for distribution of birth control on or accessible to school property.
32	school	Change policies to allow community-based providers of health programs to provide programs in schools.
OTHER		
33		The names of girl serving organizations should be affirmative (asset based rather than deficit based). Names of organizations and stigma-based reputations can be barriers to access. Girls want to identify themselves with their potential - not their problems.
34		Fund after school and weekend activities for girls.
35		In actions, treat emotional health and health in general as importantly as academic success.
36		Increase girls' understanding of what it is to be emotionally healthy and to have skills that help them cope with difficulties. Provide access to support when they are having difficulties.
37		Support girls in feeling empowered to make decisions about their lives and to realize the consequences of those choices in their futures.
38		Provide girls with leadership opportunities to support peers and younger youth in positive emotional and social development.
39		Increase girls' knowledge about and ongoing support for a lifestyle including healthy eating and regular exercise.
40		Support girls in acquiring and applying the knowledge they learn in making conscious decisions in and about relationships.
41		Make health education a priority in schools.

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42		Model healthy relationships in classroom and in all community based youth programs. Adults engaged with youth should model respect for and inclusion of youth.
43	school	Many aspects of girls health are overlooked or not taught in a way that is relevant to girls.
44	school	Mandate and support classes/programs regarding emotional health throughout a student's academic career in both health classes and integrated across the entire academic curriculum. Incorporate peer support programs into efforts.
45	school	Provide ongoing staff development opportunities for middle and high school teachers in learning how to better support the socio-emotional development of youth and integrate into their own curriculum, practices, and programs (i.e. "Socio-Emotional Development Across the Curriculum" - similar to "Writing Across the Curriculum").

GHGH Report Outcomes

WHAT WE WANT FOR GIRLS (OUTCOMES)	
1	Girls are emotionally healthy, have positive self-esteem, and have the resiliency to cope with life's difficulties.
2	Girls believe their lives have meaning and purpose. They have developed goals, know how to work toward them, and receive ongoing support.
3	Girls have access to ongoing and free support outside of their homes for their emotional health, including school based and community workshops, peer support systems, peer counseling, support groups, and counseling.
4	Schools support healthy emotional development as core to academic and life success and as an essential part of their mission.
5	Girls have relevant knowledge about healthy nutrition (not just the USDA pyramid) and exercise and know how to apply both in their lives.
6	Girls have access to eating healthy foods on a regular basis (at home, school, and in the community).
7	Girls have access to affordable and fun exercise opportunities.
8	Girls have access to ongoing support for healthy eating and exercise.
9	Girls have healthy body images and opportunities to discuss the topic throughout their youth. This dialogue should include media and society's influences on body image.
10	Girls understand and have accurate information about their sexual development, sex, and health care.
11	Girls have convenient and affordable access to health care.
12	Adults and girls treat our emerging sexual development as part of our normal, healthy development, not as something that we need to be afraid or ashamed.
13	Girls have healthy relationships with family, friends, and the individuals they date.
14	Girls understand the elements of and have practiced skills for healthy relationships.
15	Girls have healthy relationships modeled for them in their lives.
16	Girls consciously choose to be in relationships (both friendships and dating).
17	All girls are safe in their homes, at school, and in their community.
18	All girls to have the skills and ability to protect themselves in a crisis.
19	Girls live free of pesticides in their home, around their homes, and in their schools.
20	Girls live in communities that support the environment.
21	Girls have factual information about diseases (such as diabetes, cancer, STD's, and heart disease) and understand how they can prevent the diseases.
22	Girls with diseases have access to appropriate and affordable care. They also have the skills and knowledge necessary to support their health.
23	Girls understand the effects of specific drugs and alcohol on their bodies.
24	All girls have positive and healthy activities and opportunities after school and on weekends, i.e. work, clubs, support groups, sports, ROTC, dance, theater, and art.
25	Girls have the support system they need to help them live a healthy life.

GHGH Report Outcomes

WHAT WE WANT FOR GIRLS (OUTCOMES)
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26	More emphasis and money is placed on healthy living and wellness (prevention) vs. treatment or intervention.
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