

**MANDATORY
PHYSICAL
EDUCATION
IMPLEMENTATION
TASK FORCE**

Final Report

December 2005

MANDATORY PHYSICAL EDUCATION
IMPLEMENTATION TASK FORCE
FINAL REPORT

BACKGROUND

The 15-member Mandatory Physical Education Implementation Task Force was established as part of Laws 2005, Chapter 67, also known as HB 2111. The Task Force met five times during the interim and adopted final recommendations as listed below.

COMMITTEE MEMBERS

1. Two members of the House of Representatives who are appointed by the Speaker of the House of Representatives and who are members of different political parties.

Representative Mark Anderson, Chairman
Representative David Lujan

2. Two members of the Senate who are appointed by the President of the Senate and who are members of different political parties.

Senator Barbara Leff, Chairman
Senator Harry Mitchell

3. Four members from the health community with expertise in childhood development and health issues. One of these members shall be appointed by the Speaker of the House of Representatives, one of these members shall be appointed by the President of the Senate and two of these members shall be appointed by the Governor.

Ms. Pamela Kulinna
Dr. Harold Magalnick
Mr. Robert Pangrazi
Ms. Margaret Tate

4. Four members from the public education system that serves pupils in any combination of kindergarten programs and grades one through eight. One of these members shall be an administrator who is appointed by the Speaker of the House of Representatives, one of these members shall be a business official who is appointed by the President of the Senate, one of these members shall be a principal of a school that serves pupils in kindergarten programs and grades one through eight who is appointed by the Governor and one of these members shall be a physical education teacher who is appointed by the Governor.

Ms. Kimberly Babeu
Dr. Ken Cameron
Mr. John Koury
Ms. Sylvia Mejia

5. Two parents with children enrolled in the public education system that serves pupils in kindergarten programs and grades one through eight appointed by the Superintendent of Public Instruction.

Ms. Liane Bowles
Ms. Jennal Johnson

6. A representative of the Department of Education appointed by the Superintendent of Public Instruction.

Mr. Don Hiemstra

PURPOSE

The Task Force is charged with developing an implementation plan that will result in a uniform physical education program in kindergarten programs and grades one through eight. In developing the plan, the Task Force shall consider:

1. Time constraints, including current statutorily established hours in a school day and days in a school year, contractual considerations including allowance for staff preparation time, professional development and the requirements for the current academic curricula.

2. Program content that is consistent with national standards that define what students should know and be able to do to emphasize knowledge and skills for a lifetime of regular physical activity and that is age appropriate, provides alternatives for children with disabilities and includes accountability measures that reflect both individual student progress and program-wide progress.

3. Staffing requirements, which include teacher-student ratios, minimum certification requirements and recruitment and retention issues, particularly in regard to urban and rural factors.

4. Facilities and resource requirements that are unique to the physical education program design.

5. Fiscal considerations in regard to current school district funding and the ability to meet program demands upon full implementation.

6. Exemptions from a mandatory program both at the individual student level and at the school level where small isolated schools may not be able to comply with all of the elements of the mandatory program.

After consideration of all of the elements prescribed above, the Task Force must draft an implementation plan that addresses the elements prescribed above, including an appropriate timeline for achieving full implementation by a date certain and that includes the development proposal for draft legislation that the Task Force believes is necessary to successfully implement the proposed program.

Additionally, the Task Force shall be staffed by the Arizona Department of Education, Arizona Department of Health Services and appropriate legislative staff

REPORTING REQUIREMENTS

The Task Force is required to submit a final report including the implementation plan and accompanying developed proposal for draft legislation to the Governor, the President of the Senate, the Speaker of the House of Representatives and the State Board of Education by December 15, 2005. The Task Force shall provide a copy of the final report to the Secretary of State and the Director of the Arizona State Library, Archives and Public Records.

REPEAL

The Task Force is repealed from and after December 31, 2005.

FINAL RECOMMENDATIONS

The Task Force adopted final recommendations at the final meeting on December 14, 2005 as follows:

Physical Education Draft Recommendations
Final Recommendations
December 14, 2005

- 1) How should the program be implemented? Statewide.
- 2) What program model should be required? Physical Education/Pangrazi blend.
- 3) What is the timeline for requiring physical education time requirements? Two years

**The two year model is illustrated below:

	First Year	Second Year
Time	60 minutes per week physical education with additional physical activity program	90 minutes per week physical education with additional physical activity program

- 4) How should the program be funded? Per pupil amount/formula includes staffing and equipment.
- 5) Should the recommendations include the following staffing requirements?
 - State Level Director of Physical Activity and Education.
 - Qualified Physical Education Leader at each participating school.
 - i. Qualified is defined as certified teacher with physical education endorsement.
 - ii. All large districts are required.
 - iii. Small schools districts (between 100 – 600 pupils) have five years.
 - iv. Small schools district less than 100 students are exempt.
 - v. Charters are exempt.
- 6) Should the program requirements include assessments and performance measures? Require DHS/ADE to collaborate on an academic study of the effectiveness of the programs.

- 7) Should the program establish minimum standards for facilities and assistive resources?
No recommendations.
- 8) Should there be exemptions? Yes – For reasonable exceptions supported through a health care professional's note.
- 9) Recommend that schools should use similar regard in determining the student/teacher ratio for physical education courses as they do for regular classroom.
- 10) Special education students also would also be included in the physical activity programs.

Attachments

Attachment 1	Agenda for September 7, 2005 Meeting
Attachment 2	Minutes for September 7, 2005 Meeting
Attachment 3	Laws 2005, Chapter 67 (HB 2111)
Attachment 4	<u>Comprehensive Health Surveillance System Survey</u> , Arizona Department of Education
Attachment 5	<u>2003 Youth Risk Behavior Survey Results</u> , Centers for Disease Control and Prevention
Attachment 6	House Engrossed SB 1186 (2001) and Fact Sheet
Attachment 7	<u>Promoting Lifetime Activity for Youth (P.L.A.Y.)</u> , Arizona Department of Health Services
Attachment 8	<u>F as in Fat: How Obesity Policies Are Failing in America, 2005</u> , Trust for America's Health
Attachment 9	<u>Preventing Obesity in Youth Through School-Based Efforts</u> , NGA Center for Best Practices
Attachment 10	Definition of Physical Education versus Physical Activity, National Association for Sport and Physical Education
Attachment 11	<u>Move More: North Carolina's Recommended Standards for Physical Activity in School</u> , North Carolina Division of Public Health
Attachment 12	<u>A Nation at Risk: Obesity in the United States</u> , American Heart Association—For review of this attachment, please see the Office of the Chief Clerk, Arizona House of Representatives
Attachment 13	Agenda for September 22, 2005 Meeting
Attachment 14	Minutes for September 22, 2005 Meeting
Attachment 15	<u>What Constitutes a Quality Physical Education Program?</u> , National Association for Sport and Physical Education
Attachment 16	<u>Healthy and Ready to Learn</u> , David Satcher
Attachment 17	<u>Quality Physical Education Taught by Qualified Physical Education Teachers</u> , Dr. Pamela Hodges Kulinna
Attachment 18	<u>The Obesity Epidemic and Arizona Students</u> , Centers for Disease Control and Prevention
Attachment 19	Issue 92, NCPPA News
Attachment 20	<u>Recent State Policies/Activities: Physical Education</u> , Education Commission of the States
Attachment 21	<u>Physical Education Report and Recommendations, March 2005</u> , Florida Department of Education
Attachment 22	<u>Obesity in Florida: Report of the Florida Governor's Task Force on the Obesity Epidemic, February 2004</u> , Governor's Task Force on the Obesity Epidemic
Attachment 23	<u>Physical Activity Programs for Children and Teens</u> , Florida Department of Health
Attachment 24	<u>Childhood Obesity – 2005 Update and Overview of Policy Options</u> , National Conference of State Legislatures

Attachment 25	<u><i>Conclusion: Obesity in Florida: Report of the Florida Governor's Task Force on the Obesity Epidemic, February 2004</i></u> , Governor's Task Force on the Obesity Epidemic
Attachment 26	<u><i>Analysis of "F as in Fat"</i></u> , Author Unknown
Attachment 27	Agenda for October 19, 2005 Meeting
Attachment 28	Minutes for October 19, 2005 Meeting
Attachment 29	P.L.A.Y. Program Materials, Arizona Department of Health Services— For review of this attachment, please see the Office of the Chief Clerk, Arizona House of Representatives
Attachment 30	<u><i>Physical Education Survey in Arizona</i></u> , Arizona Department of Education
Attachment 31	Kentucky Bill Requiring Certain Physical Education Time
Attachment 32	Comparison of National Association for Sports and Physical Education against American Heart Association, American Cancer Society and American Diabetes Association—For review of this attachment, please see the Office of the Chief Clerk, Arizona House of Representatives
Attachment 33	<u><i>Comparison Matrix for Arizona Physical Education Implementation Task Force</i></u> , Shannon Harper
Attachment 34	<u><i>PE Implementation Plan for K-8 Grade</i></u> , Jennal Johnson
Attachment 35	Agenda for November 28, 2005 Meeting
Attachment 36	Minutes for November 28, 2005 Meeting
Attachment 37	State Physical Education Requirements by Grade Level, Legislative Research Staff
Attachment 38	<u><i>A Proposal to the Physical Education Task Force</i></u> , Dr. Robert Pangrazi
Attachment 39	<u><i>What Recommendation Questions Need to be Addressed from the Physical Education Task Force</i></u> , Shannon Harper
Attachment 40	<u><i>Mandatory Physical Education Implementation Timeline</i></u> , Liane Bowles
Attachment 41	Agenda for December 14, 2005 Meeting
Attachment 42	Minutes for December 14, 2005 Meeting
Attachment 43	<u><i>Physical Education Recommendations from the Task Force: Rough Draft</i></u> , Shannon Harper
Attachment 44	<u><i>Physical Education Recommendations from the Task Force Vote</i></u> , Shannon Harper
Attachment 45	<u><i>Physical Education Draft Recommendations, Options for Task Force Consideration and Vote</i></u> , Shannon Harper

ARIZONA STATE LEGISLATURE

INTERIM MEETING NOTICE OPEN TO THE PUBLIC

MANDATORY PHYSICAL EDUCATION IMPLEMENTATION TASK FORCE

Date: Wednesday, September 7, 2005

Time: 2:00 p.m.

Place: House Hearing Room 5

AGENDA

1. Welcome and Introductions
2. Overview by Staff
 - Review Committee Charge
 - Timeline
 - Goals
3. Selection of Chairman and Vice-Chairman
4. Current State of Arizona Physical Education by the Arizona Department of Education
5. Best Practices from Other States by Shannon Harper, American Heart Association
6. Public Testimony
7. Discussion
8. Discuss Availability for Future Meetings
9. Adjourn

Members:

Senator Barbara Leff
Senator Harry Mitchell
Kimberly Babeu
Dr. Ken Cameron
Don Hiemstra
Jennal Johnson
John Koury

Representative Mark Anderson
Representative David Lujan
Pamela Kulinna
Dr. Harold Magalnick
Sylvia Mejia
Robert P. Pangrazi
Margaret Tate

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ARIZONA STATE LEGISLATURE
Forty-seventh Legislature – First Regular Session

MANDATORY PHYSICAL EDUCATION IMPLEMENTATION TASK FORCE

Minutes of Meeting
Wednesday, September 7, 2005
House Hearing Room 5 -- 2:00 p.m.

Representative Anderson called the meeting to order at 2:05 p.m. and attendance was noted by the secretary.

Members Present

Senator Leff
Senator Mitchell
Kimberly Babeu
Liane Bowles
Dr. Ken Cameron
Don Hiemstra

Representative Anderson
Representative Lujan
Jennal Johnson
John Koury
Pamela Kulinna
Sylvia Mejia

Members Absent

Dr. Harold Magalnick
Margaret Tate

Robert P. Pangrazi

Speakers Present

Brian Lockery, Majority Research Analyst
Art Harding, Legislative Liaison, Arizona Department of Education
Lynn Ladd, School Health Nutrition Specialist, Arizona Department of Education
Shannon Harper, American Heart Association
Bill Stuart, Executive Director, Arizona Rural Schools Association

Welcome and Introductions

Representative Anderson welcomed everyone, and at his request, the Members introduced themselves.

Overview by Staff

Brian Lockery, Majority Research Analyst, gave an overview of the charge of the Committee (H.B. 2111, physical education implementation task force [Chapter 67, Laws of 2005], Attachment 1).

Selection of Chairman and Vice-Chairman

Ms. Johnson nominated Mr. Anderson for Chairman and Senator Leff for Vice-Chairman.

Ms. Kulinna nominated Mr. Pangrazi for Chairman.

A hand vote was taken on the nominations and Mr. Anderson was selected as Chairman by a majority vote. Senator Leff was selected as Vice-Chairman by a unanimous vote.

Current State of Arizona Physical Education by the Arizona Department of Education

Chairman Anderson remarked that the Arizona Department of Education (ADE) does not routinely collect data on physical education programs, so a special effort was made to begin.

Art Harding, Legislative Liaison, Arizona Department of Education, thanked everyone for attending, especially Mr. Hiemstra, Ms. Bowles, and Mrs. Johnson who were appointed by the Superintendent of Public Instruction Tom Horne. He indicated that he and ADE staff are available to assist the Committee and introduced Lynn Ladd.

Lynn Ladd, School Health Nutrition Specialist, Arizona Department of Education, clarified that nine subject areas are required for Grades 1-9 according to Title 7 of the Arizona Administrative Code. Of those, health/physical education (PE) combined is one subject area, so a school could offer a sedentary health class and meet the requirement since a separate physical activity component to the subject area is not specified. In order for a student to advance from the eighth grade, competency in each of the nine areas must be demonstrated. That competency is defined by the local school board, and therefore, each school district's approach to meeting the requirement is likely to be different. The requirement for high school graduation is a minimum of 20 credit hours, of which 8.5 are discretionary by the local school board, and within those 8.5 credits, a school district could elect to offer a PE class. Health/PE is not a required subject area in high school.

Ms. Ladd noted that ADE's data is limited because funding is not received for monitoring or surveillance of PE. The data she will provide only applies to Grades 6-12 (Comprehensive Health Surveillance System [CHSS] survey filled out by principals and teachers [Attachment 2]) and Grades 9-12 (Centers for Disease Control & Prevention [CDC] Youth Risk Behavior Survey [YRBS] filled out by students [Attachment 3]). No data is available on Kindergarten through Grade 5. She highlighted the following points:

- For Grades 6-12, 71 percent of principals surveyed indicated that they required PE sometime during the school year. PE is different than physical activity, so the requirement could have been met in a classroom setting where students learned about PE, but did not have physical activity.
- In Grades 6-12, of the principals surveyed, only 46 percent required students to retake a PE class if the students failed, and 20 percent of the students could actually be exempt

from taking PE classes to participate in other school activities, not including school sports, other community sports, and enrollment in other courses, so the percentage would actually be higher.

- Of the students who filled out the questionnaire, 36.5 percent in Grades 9-12 attend a PE class one or more days per week, and only 22.2 percent attend PE class daily. Current national PE standards recommend this age group receive at least a minimum of 45 minutes of physical activity each day.

Senator Leff recalled that the Committee is charged with addressing Grades K-8. Chairman Anderson commented that he is not sure the Committee is limited to K-8 and probably has the flexibility to at least talk about high school, and perhaps, make recommendations.

Ms. Ladd noted that the CDC YRBS survey is conducted in odd-numbered years, but the data for 2005 is not yet available.

Ms. Johnson asked if it is known whether PE is offered in every K-12 school district in Arizona. Mr. Harding advised that Shannon Harper, American Heart Association, provided some questions to develop a survey tool to poll school districts and probably charter schools. He hopes to get the surveys to the site level as opposed to district offices.

Dr. Cameron remarked that the questions under physical activity in the School Health Index, a study instrument developed by the CDC to evaluate and coordinate school health programs in eight dimension areas, would be a good place to start in developing physical activity questions about PE programs.

Mr. Harding indicated to Mr. Lujan that an on-line survey with multiple choice questions would be preferable to an e-mail with text questions, and the numbers can be easily aggregated. When responses are received, there should be adequate staff at ADE to compile the results. The Members asked if the following questions could be included in the survey:

- If the school district offers PE as an elective or mandatory course in certain grade levels.
- How often PE classes are offered.
- How many PE teachers administering the program are certified/highly qualified.
- Student-teacher ratio.

Dr. Cameron commented that many of the questions are addressed in the School Health Index, but a few may need to be tweaked.

Mr. Hiemstra suggested one question, i.e., are the state standards for health and PE being followed, and if so, how. Chairman Anderson responded that he is skeptical about asking that question because he does not believe the school districts would say no, so more specificity is needed. Mr. Hiemstra reminded the Members that the schools are just as busy as ADE.

Senator Leff noted that schools could be complying with a health class and not a PE class, which appears to be the root of the problem. She questioned the reason for combining the two under

administrative rule. Mr. Harding said he does not know. He clarified that PE is an endorsement for a teacher and reiterated that multiple choice, quantifiable questions would be preferable.

Senator Leff said she read last year that many schools decided to eliminate recess, which is distressing, and wondered if recommendations can be made on the issue. Chairman Anderson surmised that it would since the focus is on K-8.

Ms. Kulinna indicated that it would be nice to have information about recess opportunities, such as how often and how long.

Senator Leff speculated that if a school district is short on time, perhaps recess could be counted toward PE, as long as the children are active.

Best Practices from Other States

Shannon Harper, American Heart Association, conveyed that the six questions for the survey tool were originally written by Active Arizona, which is a group of members from ADE, the Arizona Department of Health Services (DHS), and Action for Healthy Kids. The School Health Index was used. Some of the questions asked are not contained in the survey tool, specifically the one about recess, but the majority of questions the Members asked are included. She explained that the bill only pertains to K-8 as politics would not allow for addressing high schools. She added that Ms. Ladd only reported on data from Grades 6-12 because that is all ADE has available, and the CDC data only focuses on Grades 9-12. Unfortunately, there is no information at the state level for Grades 5 and below. She reviewed handouts presented to the Members:

- S.B. 1186, appropriations, children's physical activity programs (Chapter 320, Laws of 2001) (Attachment 4) established a school-based grant program to promote children's physical activities called Promoting Lifetime Activity for Youth (P.L.A.Y.), which is funded by DHS (Attachment 5). The staff position is currently vacant so she is not entirely sure what is going on with the program.
- Data provided by Ms. Ladd (Attachments 2 and 3).
- Portions of a report called *F as in Fat: How Obesity Policies are Failing in America* prepared by a nonpartisan, nonprofit organization showing what other states are doing (Attachment 6). There are a few discrepancies, so it might be necessary to check the statutes for specific states. Illinois is the only state that requires daily PE, but there are many exemptions. South Carolina implements some at a time each school year instead of imposing another mandate on the schools.
- Issue Brief regarding *Preventing Obesity in Youth through School-Based Efforts* (Attachment 7).
- Definition of physical education versus physical activity (Attachment 8).
- *Move More: North Carolina's Recommended Standards for Physical Activity In School* (Attachment 9).
- A Statistical Sourcebook, *A Nation at Risk: Obesity in the United States* produced by The Robert Wood Johnson Foundation and the American Heart Association (Attachment 10).

Senator Leff asked if other states mix and match physical activity and PE or use the standard definitions. Ms. Harper responded that she is not sure. It would probably be necessary to call and ask. She would like to assume the standard definitions are used because those are generally understood by anyone who is an expert in the field.

Chairman Anderson requested more detail on states that seem to be the most progressive, such as Florida, Kentucky, and West Virginia. Ms. Harper said more detail can also be provided about South Carolina. Mr. Hiemstra asked for the length of the school day and the number of days in the year. Ms. Johnson asked for more detail on the State of Illinois.

Public Testimony

Bill Stuart, Executive Director, Arizona Rural Schools Association, noted that there are several people in the room who competed in athletics during his early days as a young teacher, and he believes their success is the result of that physical activity. He represents a group of rural school districts some of which are pretty good sized, such as Kingman and Flagstaff, but also many tiny school districts, which represent about 20 percent of the students in the state. He is in favor of what the Committee is about, but asked the following:

- Do not mandate a program that is unrealistic for rural school districts to implement because of lack of facilities or personnel.
- Give schools the authority to carry out the program that is mandated.
- Fund the program.
- Do not forget the distances students in outlying areas must travel. When he was school superintendent for eight years in Yuma County, students were bused 60 miles one way every day, and other districts in the state do the same or more.

Senator Leff speculated that since schools must have health or PE every day as part of the state standard, the slot would already be there instead of adding additional hours to the day. Mr. Stuart responded that the standard and reality are entirely different. Many rural school districts find it difficult to have the programs on a daily basis, although some are doing an excellent job. Schools need some “teeth” to make sure students get physical activity because in many instances, a health class becomes the path of least resistance.

Ms. Johnson asked if the rural school districts could be distinguished in the survey by ADE.

Mr. Lujan asked if implementation of Arizona’s Instrument to Measure Standards (AIMS) as a graduation requirement has impacted schools as far as providing PE. Mr. Stuart replied that there is no question it has impacted everything, except math and reading, because other subjects are pushed aside to accommodate the testing.

Mr. Lujan asked what would prevent schools from carrying out whatever is implemented. Mr. Stuart stated that many comparable things happened over the years, but he was a Building Administrator in Leavenworth, Kansas for five years at a large high school with 1,500 students of high-ranking military officers. A senior girl who was beautiful, extremely bright, and the nicest person had a 4.0 grade average, except for a B in PE at a school in Pennsylvania, so she

was not named valedictorian. The girl's father took the issue to court, raised cain with the local school people, and got the newspaper on his side. Eventually, PE was eliminated as a requirement for those kinds of things, which weakened the entire PE program. A way is needed to put some "teeth" into the program so it is what it is. The student should get the grade she earned even though, unfortunately, she was not named valedictorian.

When Dr. Cameron asked for a model recommendation, Mr. Stuart answered that is a difficult question, but offered the following recommendations:

- Do not make the teaching requirement so stringent that a Ph.D. in PE is required to teach a student to play dodge ball on the playground.
- Ensure that the program developed can take place on a playground as opposed to an air-conditioned gym, which some of the school districts do not have available.
- PE should be on a daily basis, but if that is to happen, the rest of the curriculum and other requirements in place should be reviewed to see what can possibly be eliminated.

Mr. Stuart agreed to talk to his constituents and bring back further information.

Chairman Anderson requested that ADE provide a list of required mandated courses, such as character education, etc.

Senator Leff remarked that the skin cancer bill she sponsored last session did not create a separate course, but was designed to fit into the regular classroom. She asked if the goal of the Committee is to develop an academic program about how well a child plays basketball, noting that she still has nightmares about climbing the ropes in PE, or to make sure children are physically active and understand that physical activity is lifelong. Mr. Stuart responded that it is important not to design a program where a student fails PE because he could not climb a rope. He saw good marines that could not do that, but could do many other things. He would prefer some kind of participation program with plenty of physical activity rather than teaching a student the rules to play softball.

Senator Leff said she would not like to see a student dislike physical activity because the student received a B and was kept from being the valedictorian. The goal is to make sure children are eating properly and getting exercise. Mr. Stuart agreed, adding that there is a middle ground.

Discussion

Ms. Bowles advised Ms. Babeu that PE was left out of *No Child Left Behind (NCLB)*, so PE teachers do not have to be highly qualified; however, efforts are going on at the national level to get that implemented next time the bill is heard.

Senator Mitchell advised that there is a recall currently going on at the Kyrene School District because music and art were cut back 5 or 10 minutes per day to allow more time for reading, writing, and AIMS.

Mr. Koury related that *NCLB*, the AIMS tests, mandates, and labels have turned schools upside down. A huge number of schools are underperforming, nearly underperforming or failing, or scared to death about becoming underperforming. The majority of his students are non-English speaking who take math and AIMS math, reading and AIMS reading, writing and AIMS writing. This is going on at the high school and other places because the students need to pass the AIMS test to graduate. It has thrown out business education, all the fine arts, and destroyed PE. He submitted that if there is a mandate for a highly qualified PE teacher and one period per day of PE, it will not happen even if it is the law because of the other things that have to be done. ADE would not even be able to follow up because it is not possible to monitor Title 1 and *NCLB* on time.

Ms. Mejia stated that being from a rural community, she is lucky to have a highly qualified PE teacher who does an excellent job of teaching with a focus on lifelong learning. With the current obesity rate in the country, she teaches students why it is so important to include exercise in their daily life, but at the same time, with the high stakes testing, she incorporates math facts, reading, and writing. Ms. Mejia added that there are extreme weather conditions in Arizona, such as snow in the north, while other areas like Yuma and Casa Grande have about four months out of the year with over 100-degree weather. Her school is lucky to have a multipurpose room, but not every school does, which needs to be considered for some of the rural areas.

Ms. Babeu stated that while teaching PE she incorporates math standards in homework, which the math teacher grades. In the Fit for Life class, students are encouraged to sit on exercise balls. Those with hyperactive disorder bounce up and down for a short while to expend energy and then she works on core stabilization in the classroom, so their pulse rate is up during seat work. She encouraged history, social studies, and language arts instructors to get students up and moving so their pulse rate is higher than the teacher's. Many creative things can be done with physical activity.

Ms. Johnson said she began a volunteer fitness program at the charter school. She is not a PE teacher nor is there one at the school, but after school and on a voluntary basis, she and the students used the lunchroom or classroom, went outside, up and down the stairs, or whatever could be done. The school rents a church and does not have a multipurpose room or much equipment, but it can be done.

Ms. Babeu revealed that students love pedometers. Governor Napolitano visited her class and the students challenged her to 15,000 steps per day. The Governor upped the ante to 16,000 steps per day. Ms. Babeu is asked by students how many steps she has taken to see if they beat her. She also has a walking club before school at 6:30 a.m., so 4,000 or 5,000 steps are taken before school even begins.

Mr. Hiemstra submitted that the intensity and responsibility classroom teachers have for students for the 2004-2005 school year is incredible. Testing in reading, writing, arithmetic, and soon to be science and social studies is the next hurdle, without increasing the day or paying teachers more to teach longer.

Senator Leff surmised that fewer children would be on Ritalin if they could expend some energy rather than sitting all day, which would benefit teachers. When she attended school, although life was different and there were no children who did not speak English, she had math, reading, English, science, and social studies. Exams were taken in New York, so students had to be proficient in order to earn a diploma, but they also had PE.

Mr. Hiemstra stated that the children in his district have a minimum of PE once per week, sometimes twice a week, and if they are not in PE twice a week, the next week they have art twice a week, the next week music twice a week, or the next week computer skills in order to hit special areas, so the schedule is tight already. It would be okay to have a physical education class with a highly qualified teacher, but there would be no art because there would not be any more time.

Ms. Bowles opined that PE is a way to work smarter instead of harder by incorporating other subjects. If students are up and moving their brains are oxygenated and they learn faster. A good PE teacher is very creative. Even if the state mandate is math and reading, it is part of the nature of children to be moving. It is also part of the nature of adults who suppress it because they think they have no time, but end up with health problems later. It would be a great disservice to children not to provide the physical activity that is desperately needed, not so much by adding, but restructuring the day so there is physical activity in PE and other parts of the day.

Mr. Harding clarified that Title 7 says the student shall demonstrate competency as defined by the standards at the grade level specified in language arts, literature, mathematics, science, social studies, music, visual arts, and health/PE. It does not have to be every single day, so however the school district decides the students meet those standards is how it works out.

Ms. Kulinna conveyed that she teaches and studies PE, and in particular, the role of physical activity and PE in school settings and beyond. The current national standard is for all children to have 60 minutes of physical activity per day, and PE should be a big part of that, but does not have to be all of it. She believes some guidelines can be developed for physical education and additional physical activity opportunities in the school setting. She opined that it is very important that PE is taught by certified individuals so it is developmentally appropriate, best practices are utilized, and students gain the skills, attitudes, behavior, and knowledge needed to be physically active for a lifetime. Studies have shown that high school athletes are not more active than other people later in life, so just participating in sports does not give someone the skills to be a lifelong active person. She added that the Three River Study showed that time taken away from academics for physical education did not reduce academic performance for students.

Dr. Cameron recommended talking about a philosophical change in PE, which should constitute getting students excited about being active and learning how to continue to be active. At the end of the day, a student should be able to participate in an activity without needing 10 other people, and students should be taught activities that can be tailored to their time and interests. Teachers could include physical activity while addressing the standards in the content areas, but many have no interest even though successful models are available.

Ms. Babeu stated that new words are being coined in the medical community, such as diobesity, for a child that is morbidly obese and developing Type II diabetes. She has students that are seven years old and over 300 pounds. No matter what high stakes test there is, if that is not addressed through PE and physical activity and students start having heart problems at age 12, the pendulum will swing the other way. She has been teaching for 25 years and has students that cannot run around the track, so she puts them in the pool and talks about buoyancy while they are exercising. It is necessary to be creative, and teachers can incorporate activity into academic subjects.

Dr. Cameron stated that there is no funding for PE, but it would be better to pay now for an ounce of prevention than later for people's Type II diabetes medications and ongoing strain on the health care system.

Chairman Anderson speculated that schools may be reaching the point where most students will pass the AIMS test. Several principals indicated to him that 90 percent of the students already passed all three AIMS tests, which was before the last version came out that was more aligned with the standards.

Mr. Koury noted that two more sections of AIMS tests are anticipated. The day is seven hours counting lunch, recess, and walking to the bathroom, and now five classes per day will be tested on AIMS. *NCLB* also nails schools that do not improve every year. Passing AIMS does not mean that the school will not be making adequate yearly progress (AYP) at the federal level. St. John's Unified School District did not make AYP, although test scores were higher than every school in Yuma County, so there is always the need to keep excelling. Everybody is for what the Committee wants to accomplish, but his focus will be on science now, then social studies. Even though the students do not speak English, the federal government says they have to pass AIMS or the school will be underperforming.

Mr. Koury said he was a college athlete, he loves PE, and his children are fanatic sports nuts and active people, but it is important to make sure that physical activity is incorporated into the curriculum. At his school, there are two recesses and a lunch recess per day, which he perceives as physical activity, and students cannot sit in the library unless there is a medical problem. The five areas of the AIMS plus the federal AYP are ruling their lives to the point that teachers are reluctant to incorporate physical activity.

Ms. Johnson asked if anything can be learned from other states that integrated PE into the curriculum that may not have the AIMS test but something equivalent. Chairman Anderson indicated that some states are suing the federal government. Ms. Harper agreed that two states are suing the federal government over *NCLB*, which she will check into. She added that other states have tests, but she does not know if those are as active as AIMS.

Dr. Cameron stated that funding is an issue. He noted that New York as mentioned by Senator Leff has PE, but funding per student per year is about \$9,600, which has a huge impact on what can be done under the *NCLB* requirements. The federal AYP is daunting. There are so many levels where schools must be successful and it only takes one not to pass. Funding implications for schools that receive title funds are very significant so that is a pressure that should be kept in

mind. At the high school level, there are Arizona Learns requirements, which differ from AYP requirements, but are similar. There is also the graduation requirement, although recent legislation may relieve some of the pressure.

Mr. Lujan remarked that at a future meeting he would like to review the additional funding and resources schools would need to implement stricter physical activity requirements and whether the state would provide funding. He endorsed being creative with PE. He asked if stricter physical activity requirements would be implemented on a staggered basis to enable schools to train teachers, or if PE teachers already have the skills to teach like Ms. Babeu.

Chairman Anderson suggested lengthening the school day by one hour to allow PE to be taught properly, with exceptions for rural areas where students travel long distances. He noted that his children returned from school at 3:00 p.m., and one study reported that problems occur during that time because many parents do not arrive home until 5:00 p.m. Also, he noticed that at least one of his children never has homework, so perhaps students could be taught about walking, running, etc., in PE class, but the physical activity could be done in the evening as homework.

Senator Leff mentioned that lengthening the school day does not appeal to her because 2:30 to 3:00 p.m. is a long enough day, especially for young children, and many children have after-school activities. She suggested focusing on the definition of physical education. From the comments made, it appears problematic to utilize a full academic period, but incorporating physical activity into the day so children can expend some energy and learn how it is important seems doable.

Ms. Mejia remarked that lengthening the school day would be a problem with transportation in her district where 10 school buses stagger transportation of elementary and middle school students to and from school, as well as after-school activities.

Ms. Kulinna suggested that everyone read the document on physical education versus physical activity (Attachment 8). She worked with inner city children and now works with Native American students who do not have physical activity or skill opportunities outside the PE class. There is no safe place to go after school to be physically active, and their parents cannot afford additional programs.

Ms. Johnson suggested that the Committee make recommendations about being physically active and fit for life rather than the old system of PE where activities such as softball or basketball were engaged in that students do not participate in later.

Discuss Availability for Future Meetings

Chairman Anderson encouraged the Members to review the handouts and asked anyone with an agenda topic to contact him. He clarified that the bill requires the Committee to look at the possibility of increasing PE and activity in schools. There is not already a mandate, but the Members need to determine if it is a good idea to mandate on some level.

Mr. Koury stated that the children at his house and relatives' homes are slim and active. He cannot worry if someone who is 42 still plays basketball because he has too much to worry about during school. Hopefully, physical activity will be carried on, but obese students are the result of attitudes of other family members, which should be discussed. Parents have to be educated. Schools are eliminating soda pop, but if a student goes home and drinks a coke and has a Snickers candy bar, he is not sure anything has been solved. Senator Leff contended that the student would have maybe one soda rather than two, three, or four, and the school is setting an example that it is not healthy. She asked Ms. Harper to find out what is done in Kentucky and other states with PE programs.

Dr. Cameron stated that California requires a fitness assessment in most grade levels, which might be something to look into so data is available in the future. Relatively inexpensive facilities are required for the assessments, which are standards-based.

Ms. Kulinna said in doing research about children's knowledge, even many middle school students may know that aerobic exercise is running, but do not understand how it relates to their health. She is curious about what knowledge is given to the students.

Ms. Bowles asked if a list of the Members' e-mail addresses can be provided. Mr. Lockery said it is necessary to be careful about the open meeting laws. Chairman Anderson said to the extent that it is possible, the list will be given out.

Mr. Koury recommended that since there are non-educators on the Committee, every Member should have a copy of the standards in Title 7 for PE.

The Members agreed to meet again on Wednesday at 2:00 p.m. with the date to be decided.

Ms. Harper stated that the six survey questions were sent to the Members via e-mail, which Mr. Harding ran through ADE, so the survey can potentially be distributed to superintendents or administrators within the next week. Calls can probably be made to other states by Wednesday, September 21, 2005.

Dr. Cameron pointed out that the standards are available on the ADE web page, so Ms. Harper indicated that she could send the Members a link.

Without objection, the meeting adjourned at 4:05 p.m.

Linda Taylor, Committee Secretary
September 13, 2005

(Original minutes, attachments and tape are on file in the Office of the Chief Clerk).

Senate Engrossed House Bill

FILED

**JANICE K. BREWER
SECRETARY OF STATE**

State of Arizona
House of Representatives
Forty-seventh Legislature
First Regular Session
2005

CHAPTER 67

HOUSE BILL 2111

AN ACT

ESTABLISHING A MANDATORY PHYSICAL EDUCATION IMPLEMENTATION TASK FORCE.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 3. Staffing requirements, which include teacher-student ratios,
2 minimum certification requirements and recruitment and retention issues,
3 particularly in regard to urban and rural factors.

4 4. Facilities and resource requirements that are unique to the
5 physical education program design.

6 5. Fiscal considerations in regard to current school district funding
7 and the ability to meet program demands upon full implementation.

8 6. Exemptions from a mandatory program both at the individual student
9 level and at the school level where small isolated schools may not be able to
10 comply with all of the elements of the mandatory program.

11 D. The task force shall be staffed by the department of education,
12 department of health services and appropriate legislative staff.

13 E. After consideration of all of the elements prescribed in subsection
14 C, the task force shall draft an implementation plan that addresses the
15 elements prescribed in subsection C, including an appropriate timeline for
16 achieving full implementation by a date certain and that includes the
17 development proposal for draft legislation that the task force believes is
18 necessary to successfully implement the proposed program.

19 F. The task force shall submit a final report including the
20 implementation plan and accompanying developed proposal for draft legislation
21 to the governor, the president of the senate, the speaker of the house of
22 representatives and the state board of education by December 15, 2005. The
23 task force shall provide a copy of the final report to the secretary of state
24 and the director of the Arizona state library, archives and public records.

25 Sec. 2. Delayed repeal

26 This act is repealed from and after December 31, 2005.

APPROVED BY THE GOVERNOR APRIL 13, 2005.

FILED IN THE OFFICE OF THE SECRETARY OF STATE APRIL 13, 2005.

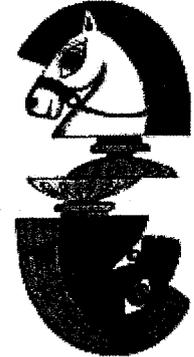
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- A-Z Services

School Effectiveness School Safety and Prevention

Comprehensive Health Surveillance System (CHSS)



The Comprehensive Health Surveillance System (CHSS) provides coordinated system of data collection about the role of prevention, health and safety in learning and academic achievement. The intent is to reduce the amount of reports required from every school every year, while increasing the use of sample-based and confidential research design.

Click on the links in the following table for a description of each report, survey or study.

C.H.S.S. Data Collection Plan for Prevention, Health and Safety Needs Assessment, Required Reporting and Evaluation			
Sample Type	SY 2002 Data Collection	SY 2003 Data Collection	SY 2004 Data Collection
Census - All Schools with any K-12 students	Safe and Drug-Free Schools Form (Formerly CHAPPS)	Safe and Drug-Free Schools Form	Safe and Drug-Free Schools Report
Sample School (school personnel)	School Health Education Profiles (AZ SHEP)	<i>Possible Study for ESEA</i>	School Health Education Profiles (AZ SHEP)
Sample School (student)	AZ Youth Survey (ACJC/ADHS Survey - NON ADE)	Youth Risk Behavior Survey Arizona Youth Tobacco Survey (ADHS)	AZ Youth Survey (ACJC/ADHS Survey - NON ADE)
Sample School (staff, parents)	School Safety Study	School Safety Study	School Safety Study

Comprehensive Health Surveillance System LINKS

2003 ARIZONA STUDENT HEALTH SURVEY

Contact Information

School Safety and Prevention
Arizona Department of Education
1535 West Jefferson Street, Bin 7
Phoenix, Arizona 85007
Tel: (602) 364-0103
Fax: (602) 542-3818

Evaluation Consultant: Catherine Osborn

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Find a School

Top Arizona Schools

School/Dist/AZ Report Cards

Programs

Teacher Certification

Standards

Accountability

Superintendent Tom Horne

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A-Z Services

School Effectiveness School Safety and Prevention

Comprehensive Health Surveillance System (CHSS)

School Health Education Profiles (AZ SHEP)

- 2004 Summary of teachers survey
- 2004 Summary of teachers survey graph
- 2004 Summary of principals survey
- 2004 Summary of principals survey graph

Contact Information

School Safety and Prevention
 Arizona Department of Education
 1535 West Jefferson Street, Bin 7
 Phoenix, Arizona 85007
 Tel: (602) 542-8700
 Fax: (602) 542-3818

Evaluation Research Consultant: Vacant
Admin Assistant: Davidson Riggs (602) 542-8730

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**Arizona Department of Education
2004 School Health Profiles Report
Teacher Results**

3. Teachers tried to increase student knowledge on each of the following topics in a required health education course in any of grades 6 through 12.*

	Number	Response	Percent	95% Confidence
First Aid				
High School	56	40	72	63 - 81
Middle School	62	43	70	60 - 79
Junior/Senior Combined	21	13	59	43 - 75
Overall	139	96	69	63 - 75
Growth and development				
High School	56	53	95	89 - 100
Middle School	60	52	87	80 - 94
Junior/Senior Combined	21	19	90	78 - 100
Overall	137	124	91	87 - 95
HIV (human immunodeficiency virus) prevention				
High School	54	51	94	89 - 100
Middle School	54	44	81	72 - 90
Junior/Senior Combined	20	16	79	63 - 95
Overall	128	111	86	81 - 92
Human sexuality				
High School	56	47	85	76 - 93
Middle School	61	38	63	52 - 73
Junior/Senior Combined	21	15	71	53 - 89
Overall	138	100	73	66 - 79
Immunization and vaccinations				
High School	55	37	68	57 - 78
Middle School	60	29	48	38 - 59
Junior/Senior Combined	20	14	69	49 - 89
Overall	135	80	59	52 - 66
Nutrition and dietary behavior				
High School	56	56	100	100 - 100
Middle School	60	58	97	93 - 100
Junior/Senior Combined	21	21	100	100 - 100
Overall	137	135	99	97 - 100
Personal hygiene				
High School	56	50	89	82 - 96
Middle School	60	52	87	80 - 94
Junior/Senior Combined	21	20	94	85 - 100
Overall	137	122	89	84 - 93
Physical activity and fitness				
High School	54	53	98	95 - 100
Middle School	62	62	100	100 - 100
Junior/Senior Combined	21	21	100	100 - 100
Overall	137	136	99	98 - 100

*Among those schools that required a health education course for students in any of grades 6 through 12.

**Arizona Department of Education
2004 School Health Profiles Report
Principal Results**

11. Physical education is required for students in any of grades 6 through 12.

	Number	Response	Percent	95% Confidence
Yes				
High School	117	66	55	49 - 61
Middle School	161	132	82	77 - 87
Junior/Senior Combined	36	26	72	61 - 84
Overall	314	224	71	68 - 75

**Arizona Department of Education
2004 School Health Profiles Report
Principal Results**

12. Number of required physical education courses students take in grades 6 through 12.*

	Number	Response	Percent	95% Confidence
0 courses				
High School	65	0	0	0 - 0
Middle School	127	1	1	0 - 3
Junior/Senior Combined	26	0	0	0 - 0
Overall	218	1	1	0 - 2
1 course				
High School	65	47	72	62 - 82
Middle School	127	37	29	23 - 34
Junior/Senior Combined	26	9	35	19 - 50
Overall	218	93	41	37 - 46
2-3 courses				
High School	65	17	27	17 - 36
Middle School	127	79	63	57 - 69
Junior/Senior Combined	26	9	35	19 - 51
Overall	218	105	49	44 - 55
4-5 courses				
High School	65	1	2	0 - 4
Middle School	127	4	3	1 - 5
Junior/Senior Combined	26	7	26	12 - 40
Overall	218	12	5	3 - 8
6-7 courses				
High School	65	0	0	0 - 0
Middle School	127	4	3	1 - 5
Junior/Senior Combined	26	1	4	0 - 10
Overall	218	5	2	1 - 4
8 or more courses				
High School	65	0	0	0 - 0
Middle School	127	2	2	0 - 3
Junior/Senior Combined	26	0	0	0 - 0
Overall	218	2	1	0 - 2

*Among those schools that required physical education for students in any of grades 6 through 12.

**Arizona Department of Education
2004 School Health Profiles Report
Principal Results**

13. A required physical education course is taught in each of the following grades.*

	Number	Response	Percent	95% Confidence
Sixth grade				
High School				...
Middle School	102	100	98	96 - 100
Junior/Senior Combined	22	15	68	50 - 86
Overall	125	116	93	89 - 97
Seventh grade				
High School				...
Middle School	125	118	94	92 - 97
Junior/Senior Combined	26	20	77	62 - 92
Overall	152	139	92	88 - 95
Eighth grade				
High School				...
Middle School	125	112	90	86 - 94
Junior/Senior Combined	26	21	81	67 - 94
Overall	152	134	88	84 - 93
Ninth grade				
High School	61	58	95	91 - 100
Middle School				...
Junior/Senior Combined	25	21	84	72 - 95
Overall	95	82	86	81 - 92
Tenth grade				
High School	60	34	57	48 - 67
Middle School				...
Junior/Senior Combined	25	18	72	58 - 86
Overall	86	52	61	54 - 69
Eleventh grade				
High School	56	29	53	44 - 61
Middle School				...
Junior/Senior Combined	23	14	62	45 - 78
Overall	80	43	55	47 - 62
Twelfth grade				
High School	54	27	51	42 - 60
Middle School				...
Junior/Senior Combined	21	15	72	56 - 88
Overall	76	42	57	49 - 64

*Among those schools that required physical education for students and where students take one or more required physical education courses in any of grades 6 through 12.

**Arizona Department of Education
2004 School Health Profiles Report
Principal Results**

14. Students can be exempted from taking a required physical education course for any of the following reasons.*

	Number	Response	Percent	95% Confidence
Enrollment in other courses				
High School	64	4	6	1 - 11
Middle School	124	25	19	13 - 25
Junior/Senior Combined	26	5	20	8 - 32
Overall	214	34	16	12 - 20
Participation in school sports				
High School	64	8	13	6 - 19
Middle School	120	5	4	1 - 7
Junior/Senior Combined	26	6	23	10 - 37
Overall	210	19	9	6 - 12
Participation in other school activities				
High School	65	19	29	21 - 37
Middle School	120	21	17	12 - 22
Junior/Senior Combined	26	3	12	2 - 22
Overall	211	43	20	16 - 24
Participation in community sports				
High School	63	1	2	0 - 4
Middle School	120	3	2	0 - 4
Junior/Senior Combined	26	1	4	0 - 10
Overall	209	5	2	1 - 4

*Among those schools that required physical education for students and where students take one or more required physical education courses in any of grades 6 through 12.

**Arizona Department of Education
2004 School Health Profiles Report
Principal Results**

15. Students who fail a required physical education course are required to repeat it.*

	Number	Response	Percent	95% Confidence
Yes				
High School	63	61	97	93 - 100
Middle School	122	18	14	9 - 19
Junior/Senior Combined	25	21	84	71 - 97
Overall	210	100	46	42 - 50

*Among those schools that required physical education for students and where students take one or more required physical education courses in any of grades 6 through 12.

**Arizona Department of Education
2004 School Health Profiles Report
Principal Results**

16. A newly hired physical education teacher or specialist is required to be certified, licensed, or endorsed by the state in physical education.

	Number	Response	Percent	95% Confidence
Yes				
High School	116	85	72	65 - 79
Middle School	160	122	74	69 - 79
Junior/Senior Combined	36	18	50	36 - 64
Overall	312	225	70	67 - 74

**Arizona Department of Education
2004 School Health Profiles Report
Principal Results**

17. Students are offered opportunities to participate in before- or after-school intramural activities or physical activity clubs.

Yes	Number	Response	Percent	95% Confidence
High School	117	74	62	56 - 69
Middle School	161	125	76	71 - 81
Junior/Senior Combined	36	22	61	47 - 75
Overall	314	221	69	65 - 73

**Arizona Department of Education
2004 School Health Profiles Report
Principal Results**

18. Transportation home is provided for students who participate in after-school intramural activities or physical activity clubs.*

	Number	Response	Percent	95% Confidence
Yes				
High School	73	34	46	37 - 55
Middle School	124	71	57	50 - 65
Junior/Senior Combined	22	7	32	15 - 49
Overall	219	112	51	46 - 57

*Among those schools that offered students opportunities to participate in before- or after-school intramural activities or physical activity clubs.

**Arizona Department of Education
2004 School Health Profiles Report
Principal Results**

19. Outside of school hours or when school is not in session, children or adolescents use the school's activity or athletic facilities for community-sponsored sports teams or physical activity programs.

Yes	Number	Response	Percent	95% Confidence
High School	116	71	60	53 - 66
Middle School	158	121	75	70 - 80
Junior/Senior Combined	35	11	30	18 - 43
Overall	309	203	64	60 - 68

Fact Sheet

Physical Education and Activity

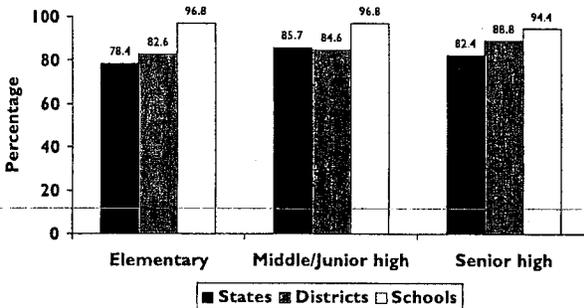
From CDC's School Health Policies and Programs Study (SHPPS) 2000

About SHPPS

SHPPS is a national survey periodically conducted to assess school health policies and programs at the state, district, school, and classroom levels. Results from SHPPS 2000 are published in the *Journal of School Health*, Volume 71, Number 7, September 2001.

Physical Education Requirements

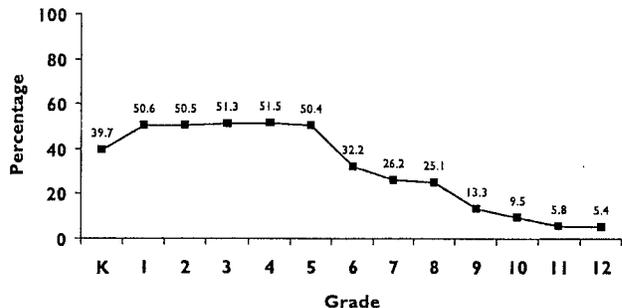
Percentage of States and Districts Requiring Schools to Teach Physical Education and Percentage of Schools Requiring Students to Take Physical Education, by School Level



- 8.0% of elementary schools (excluding kindergarten, which has requirements that are consistently lower than those for grades 1 through 5), 6.4% of middle/junior high schools, and 5.8% of senior high schools provide daily physical education or its equivalent (150 minutes per week for elementary schools; 225 minutes per week for middle/junior and senior high schools) for the entire school year for students in all grades in the school.
- 16.7% of elementary schools exempt students from required physical education courses for one or more of the following reasons: high physical competency test scores, participation in other school activities, participation in community sports activities, and participation in community service activities.

- 25.3% of middle/junior high schools and 40.0% of senior high schools exempt students from required physical education courses for one or more of the following reasons: high physical competency test scores, participation in other school activities, participation in community sports activities, participation in community service activities, enrollment in other school courses, participation in school sports, and participation in vocational training.
- Among schools that require physical education, 41.9% have a maximum allowable student-to-teacher ratio for required physical education. The average maximum allowable ratio is 28:1 for elementary schools, 31:1 for middle/junior high schools, and 33:1 for senior high schools.
- 84.0% of elementary, 77.4% of middle/junior high, and 79.5% of senior high schools follow national or state physical education standards or guidelines.

Percentage of Schools that Require Physical Education, by Grade



Course Characteristics

- Among schools that require physical education, 98.2% teach group or team activities, 97.4% teach individual or paired activities, 69.3% teach dance activities, and 12.5% teach aquatic activities.
- Among schools that teach group or team activities in required physical education, the most commonly taught activities are basketball (95.6%); baseball, softball, or whiffleball (93.4%); volleyball (92.6%); soccer (90.7%); and in elementary schools, tag (91.2%).
- Among schools that teach individual or paired activities in required physical education, the most commonly taught activities are walking, jogging, or running (96.3%); jumping rope (90.3%); and track and field (74.3%).
- Required physical education is taught only by physical education teachers in 69.8% of elementary schools that require physical education, in 64.2% of middle/junior high schools that require physical education, and in 61.2% of senior high schools that require physical education.

Coordination, Professional Requirements, and Staff Development

During the two years preceding the study:

- 68.6% of states, 62.2% of districts, and 85.5% of schools have someone who oversees or coordinates physical education.
- 80.6% of schools require newly hired physical education teachers to have undergraduate or graduate training in physical education or a related field, and 73.2% of schools require newly hired physical education teachers to be state-certified, licensed, or endorsed in physical education.
- 66.0% of states and 80.7% of districts provided funding for or offered staff development on physical education topics to those who teach physical education.
- 89.3% of schools had physical education teachers who received staff development on at least one physical education topic.

Student Assessment and Grading

- In 76.8% of schools, teachers had students take skills performance tests in at least one required physical education course; in 76.5% of schools, teachers had students take physical fitness tests; and in 43.9% of schools, teachers had students take written tests of knowledge related to physical education.
- Grades in required physical education courses are counted the same as other subjects for academic recognition in 51.0% of elementary schools, 74.8% of middle/junior high schools, and 77.7% of senior high schools.
- 9.0% of elementary, 20.5% of middle/junior high, and 91.3% of senior high schools that give grades for physical education require students to repeat required physical education courses if they receive a failing grade.

Recess and Extracurricular Physical Activity

- 71.4% of elementary schools provide regularly scheduled recess for students in all grades kindergarten through 5.
- 49.0% of all schools offer intramural activities or physical activity clubs for students. At least one-half of these schools offer baseball, softball, or whiffleball; basketball; football; and soccer to boys; and baseball, softball, or whiffleball; basketball; and volleyball to girls. Among schools offering intramural activities, 14.7% provide transportation home for students who participate.
- 99.2% of co-ed middle/junior and senior high schools offer interscholastic sports. More than one-half of these schools offer basketball, cross country, and track and field to both boys and girls; and fast- or slow-pitch softball and volleyball to girls only. Among schools offering interscholastic sports, 21.5% provide transportation home for students who participate.
- Physical activity facilities are used for community-sponsored sports teams, classes, "open gym," or unsupervised programs for children in 71.6% of schools and for adults in 56.6% of schools during one or more of the following times: before school, after school, evenings, weekends, or during school vacations.

For additional information on SHPPS, contact the Centers for Disease Control and Prevention (CDC), National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health, 4770 Buford Highway, NE, Mailstop K-33, Atlanta, GA 30341-3717, telephone 888-231-6405, <http://www.cdc.gov/shpps>.

Fact Sheet

Physical Education for Students with Disabilities

From CDC's School Health Policies and Programs Study (SHPPS) 2000

About SHPPS

SHPPS is a national survey periodically conducted to assess school health policies and programs at the state, district, school, and classroom levels. Results from SHPPS 2000 are published in the *Journal of School Health*, Volume 71, Number 7, September 2001.

Among the schools that have students with permanent physical or cognitive disabilities:

- 94.5% have students with permanent physical or cognitive disabilities who participate in required physical education.
- 85.6% include physical education in Individualized Education Plans (IEPs) for these students.

Percentage of States, Districts, and Schools that Allow Students at Each School Level to be Exempted from Physical Education Requirements for One Grading Period or Longer, By Reason for Exemption

States	Cognitive disability	Permanent physical disability
Elementary schools	3.3	34.5
Middle/junior high schools	3.1	32.3
Senior high schools	5.6	41.2
Districts		
Elementary schools	24.5	49.8
Middle/junior high schools	23.9	56.9
Senior high schools	29.3	60.6
Schools		
Elementary schools	27.8	61.6
Middle/junior high schools	32.3	68.3
Senior high schools	34.4	63.2

Percentage of States and Districts with Policies Requiring Schools to Implement Measures to Meet the Physical Education Needs of Students with Disabilities

Policy	States	Districts
Mainstreaming students into regular physical education as appropriate	80.0	82.3
Providing adapted physical education as appropriate	82.2	74.6
Using modified equipment in regular physical education	59.1	63.5
Using modified facilities in regular physical education	56.8	57.2
Using teaching assistants in regular physical education	55.8	57.2
Including physical education in individualized education plans	81.8	76.1

Among schools that have students with disabilities who participate in required physical education:

- 84.5% have some students who participate only in regular physical education.
- 37.7% have some students who participate in both adapted and regular physical education.
- 27.5% have some students who participate only in adapted physical education.
- Students with disabilities are taught by a regular physical education teacher in 83.4% of schools, an adapted physical education specialist in 23.3% of schools, a special education teacher in 17.2% of schools, a physical or occupational therapist in 16.0% of schools, and a special education teacher's aide in 15.6% of schools.

- 31.2% of required physical education courses contained students with permanent physical or cognitive disabilities.
 - Teachers in 87.1% of these courses used simplified instructional content or variations in the amount of difficulty of the material taught.
 - Teachers in 82.5% of these courses used more skill modeling, practice, or repetition.
 - Teachers in 62.8% of these courses used modified physical skills tests.
 - Teachers in 54.9% of these courses used modified equipment or facilities.

For additional information on SHPPS, contact the Centers for Disease Control and Prevention (CDC), National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health, 4770 Buford Highway, NE, Mailstop K-33, Atlanta, GA 30341-3717, telephone 888-231-6405, <http://www.cdc.gov/shpps>.

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State by State Action / Arizona



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Here's What's Happening in Arizona

The Arizona State Team has developed the "Arizona Healthy School Environment Model Policy" that serves as a guide to establishing standards for a healthy school environment. The Department of Education, a vital partner in combating poor nutrition and physical inactivity in schools, has endorsed the model policy. The model policy recommends 30 minutes of physical education, recess before lunch in elementary schools and 45 minutes of physical education per day in middle and high schools. The model policy encourages schools to offer breakfast and lunch options consistent with USDA Dietary guidelines as well as provide adequate space and time for school meals. Eight pilot schools, including four elementary schools and four middle/high schools, have been selected to implement the Healthy School Environment Model Policy as part of USDA Team Nutrition mini-grants. Schools primarily use the mini-grant funds to help integrate nutrition education into the general curriculum, increase physical activity opportunities, and to establish healthy guidelines in the cafeteria. In order to assess the mini-grant program, the State Team developed and administered a survey to collect baseline data from each school before their project began. Pilot schools will submit monthly data collection forms with which the Department of Education will provide technical assistance. And, finally, post implementation data, including the results of nutrition and physical activity surveys, will be collected to evaluate the effectiveness of the model policy's implementation.

Learn How You Can Help

You can help improve children's nutrition and physical activity by joining your Action for Healthy Kids State Team or by making a contribution. [learn more »](#)



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State Team Action Plan Goals

The Arizona State Team is working to achieve the following goals in our state. These goals are drawn from the Healthy Schools Summit **Commitment to Change**.

Goal 1

Provide age-appropriate and culturally sensitive instruction in health education and physical education that help students develop the knowledge, attitudes, skills and behaviors to adopt, maintain and enjoy healthy eating habits and a physically active lifestyle.

- | | |
|------------------------------------|---|
| Lee Renda,
Chairperson | Arizona Dept. of Health Services, Team Leader for MCH/WIC Nutritionists |
| MATHEW MCCARTY,
Co-chair | AZ DEPT. OF EDUCATION, School Health & Nutrition Programs Specialist |
| Andy Weiler,
Co-chair | American Heart Association |
| Terri Verason,
Liaison | Dairy Council of AZ, Director of Nutrition Services |

State and National Profiles

Read the 2005 **Arizona State Profile**. The State Profiles contain critical baseline information regarding the state's status in key nutrition and physical activity areas. Profiles were researched and compiled by the Council of Chief State School Officers (an Action for Healthy Kids **Partner Steering Committee** member) to aid AFHK State Teams in developing and implementing state-level action plans.

The following **National Profile** was created to highlight data on nutrition and fitness in a broader scope and to help place the State Profiles in a national context.

More Information

If you would like more information about Action for Healthy Kids State Teams, please **e-mail us**. Or you can **join a state team**.



ARIZONA PROFILE

At the heart of the Action for Healthy Kids Initiative are State Teams composed of individuals who are committed to improving the nutrition and fitness of our nation's children. To help State Teams understand the challenges they face, the State Profiles provide important background information and data on nutrition and fitness. The State Profiles have been developed for every state, the District of Columbia, and the nation.

While there are numerous activities happening in local school districts and cities, the Profiles were limited to national and state-level data.

Each State Profile contains the following:

1. **School Demographics:** Numbers of students, ethnic breakdown of the students, number of school buildings, teachers, districts, and building and district staff
2. **Charter Schools:** Number of students, charter schools, and legislation
3. **Health Behaviors and Risks:** If available for the state, this section will contain overweight/obesity rates, nutrition/dietary and physical activity behaviors and risks
4. **BMI:** National rates for 9-18 year olds
5. **School Food Programs & Hunger:** Percentages of food insecurity and participation levels in the school breakfast and lunch programs
6. **Income Demographics:** Per capita income and unemployment and poverty rates
7. **Legislation:** Links and information about statutes pertaining to nutrition and fitness
8. **Policy:** Information about policies on food and physical education/activity in the schools
9. **Standards and Assessment:** National/state-specific standards and graduation requirements. This section also describes types of assessment projects with which states are currently involved
10. **Important State Links:** State education agency, state health agency, state agriculture agency contact information, and after school programs available at your state
11. **References:** Contains all data sources and notes for information shared in profiles

National and State Profiles are available for public view and use at www.ActionForHealthyKids.org.

1) ARIZONA SCHOOL DEMOGRAPHICS^{1,2,3}

National Center for Education Statistics (NCES) is the primary federal entity for collecting and analyzing U.S. education data. All NCES data and reports are publicly available and easily accessible. The most recent public school data available are for the school year 2001-2002, and the most recent private school data that provide state level data are for the school year 1999-2000.

PUBLIC			
DATA CATEGORY	ELEMENTARY[†]	SECONDARY[∅]	UNGRADED^μ
Total Students ¹	510,741	391,866	8,311
American Indian/Alaskan Native ¹	27,211 (5.3%)	27,547 (7.0%)	626 (7.5%)
Asian/Pacific Islander ¹	10,623 (2.1%)	8,533 (2.2%)	85 (1.0%)
Black, Non-Hispanic ¹	24,756 (4.8%)	17,890 (4.6%)	654 (7.9%)
Hispanic ¹	195,763 (38.3%)	124,295 (31.7%)	3,224 (38.8%)
White, Non-Hispanic ¹	252,388 (49.4%)	213,601 (54.5%)	3,722 (44.8%)
Teachers ¹	32,814	13,033	0

Total Number of Students in Public Schools¹: 910,918

Number of Public School Districts²: 323

Number of Public School Building Staff¹ : 46,721

Number of Public School District Staff^{1, B}: 1,240

[†] "Elementary" numbers were calculated by adding grades kindergarten to 6th data sets.

[∅] "Secondary" numbers were calculated by adding grades 7th to 12th data sets.

^μ "Ungraded" are students who are assigned to programs or classes without a standard grade designation. States are requested to report teachers of "ungraded" classes even if all students are assigned a grade level.

¹ "Building staff" are instructional aids, instructional coordinators and supervisors, elementary and secondary guidance counselors/directors, librarians, library staff, school administrative support staff, student support services, and all support services related jobs.

^B "District staff" are LEA administrators and administrative support staff.

PRIVATE			
DATA CATEGORY	ELEMENTARY[†]	SECONDARY[∅]	COMBINED^μ
Total Students ³	25,186	8,424	10,449
<i>American Indian/Alaskan</i> ³	1,366 (5.4%)	269 (3.2%)	721 (6.9%)
<i>Asian/Pacific Islander</i> ³	828 (3.3%)	301 (3.6%)	337 (3.2%)
<i>Black, Non-Hispanic</i> ³	836 (3.3%)	203 (2.4%)	441 (4.2%)
<i>Hispanic</i> ³	5,269 (20.9%)	1,587 (18.8%)	2,375 (22.7%)
<i>White, Non-Hispanic</i> ³	16,887 (67.0%)	6,064 (72.0%)	6,575 (63.0%)
Teachers ³	1,733	633	953

Total Number of Students in Private Schools³: 44,059

[†] "Elementary" numbers were calculated by adding grades kindergarten to 6th data sets.

[∅] "Secondary" numbers were calculated by adding grades 7th to 12th data sets.

^μ "Combined" is a school that may include kindergarten to 6th grade and one or more grades from 9th to 12th.

2) ARIZONA CHARTER SCHOOLS⁴

Charter schools are nonsectarian public schools of choice that operate with freedom from many of the regulations that apply to traditional public schools. The "charter" establishing each such school is a performance contract detailing the school's mission, program, goals, students served, methods of assessment, and ways to measure success. Since 1991, 41 states and the District of Columbia have signed charter school legislation into law.

CHARTER	
DATA CATEGORY	ARIZONA
<i>Number of students enrolled</i> ⁴	73,542
<i>Number of charter schools</i> ⁴	495
<i>Charter school legislation</i> ⁴	http://www.asbcs.state.az.us/asbcs/SchoolResARS.asp

3) ARIZONA HEALTH BEHAVIORS AND RISKS⁵

The Youth Risk Behavior Surveillance (YRBS) was developed in 1990 to monitor priority health risk behaviors that contribute markedly to the leading causes of death, disability, and social problems among youth and adults (9th to 12th grade) in the U.S. The survey is administered every two years with the most current results published for 2003. Thirty-two states including the District of Columbia participated in the 2003 YRBS.

OBESITY		
DATA CATEGORY	ARIZONA	NATIONAL
<i>Percentage of students described themselves as slightly or very overweight⁵</i>	31.6%	29.6%
<i>Percentage of students who at risk for being overweight⁵</i>	13.6%	14.8%
<i>Percentage of students who are overweight⁵</i>	10.8%	12.1%
<i>Percentage of students who are trying to lose weight⁵</i>	47.7%	43.8%

PHYSICAL EDUCATION		
DATA CATEGORY	ARIZONA	NATIONAL
<i>Percentage of students who attended physical education class daily⁵</i>	23.2%	28.4%
<i>Percentage of students who attended physical education class one or more days during an average school week⁵</i>	37.9%	55.7%
<i>Percentage of students who participated in no vigorous or moderate physical activity during the past seven days⁵</i>	7.7%	11.5%
<i>Percentage of students who did not participate in at least 20 minutes of vigorous physical activity on three or more of the past seven days and did not do at least 30 minutes of moderate physical activity on five or more of the past seven days⁵</i>	27.8%	62.6%
<i>Percentage of students who watched three or more hours of TV per day on an average school day⁵</i>	36.6%	38.2%

4) BMI⁶

The body mass index is a number that shows body weight adjusted for height. BMI can be calculated with simple math using inches and pounds, or meters and kilograms. Currently, only national level data is available for school-aged youth from the 1999-2002 National Health and Nutrition Survey (NHANES).

Age	Female	Male
9	18.7	19.1
10	19.3	19.6
11	20.7	20.7
12	21.2	20.7
13	22.6	22.3

Age	Female	Male
14	22.9	22.5
15	23.2	24.1
16	24.0	24.5
17	23.1	24.2
18	24.4	24.9

5) ARIZONA SCHOOL FOOD PROGRAMS & HUNGER^{7,8}

Federal nutrition programs help students succeed in school. Congress enacted the 1946 National School Lunch Act as a "measure of national security, to safeguard the health and well-being of the Nation's children." School Breakfast Program (SBP) was established by Congress, first as a pilot program in 1966 in areas where children had long bus rides to school and then as a permanent entitlement program in 1975 to assist schools in providing nutritious morning meals to the nation's children.

DATA CATEGORY	BREAKFAST		LUNCH	
	ARIZONA	NATIONAL	ARIZONA	NATIONAL
<i>Students participating daily in the free and reduced-price program⁷</i>	148,382	7,118,313	365,271	16,508,440
<i>Students participating in the paid program⁷</i>	28,519	1,561,865	175,182	11,918,471
<i>Total number of students participating (free and reduced + paid)⁷</i>	176,901	8,680,178	540,452	28,426,911
<i>Of the students participating in the meal program, what is the percentage enrolled in the free and reduced-price program?⁷</i>	83.9%	82.0%	----	----
<i>Number of schools participating⁷</i>	1,337	78,118	1,512	98,375
<i>Percent of total schools participating⁷</i>	88.4%	79.4%	----	----

FOOD INSECURITY	
DATA CATEGORY	ARIZONA
<i>Ratio of students receiving free or reduced-price breakfast per 100 who receive free or reduced-price lunch during the 2003-2004 school year⁷</i>	40.6
<i>Percent of all households that are food insecure^{A,7}</i>	12.3%
<i>Percent of all households with hunger⁷</i>	3.8%

LEGISLATION PROMOTING SCHOOL BREAKFAST⁸

FRAC has collected state legislation (2003-2004) related to school breakfast. FRAC specifically collected on these school breakfast program (SBP) legislation topics: state mandates, state funding, universal breakfast funding, reporting requirement for either state/district for SBP, scheduling requirement for SBP, or outreach related to SBP.

Schools that have 35 percent or more free or reduced price (F&RP) eligible students and that do not participate in the School Breakfast Program (SBP) must report the reasons for nonparticipation. HR 2211, 45th Leg., 1st Reg. Sess. (Az. 2001). In effect since September 2001, this act was repealed effective January 1, 2004.

6) ARIZONA INCOME DEMOGRAPHICS^{9,10,11}

The U.S. Census Bureau collects basic demographic information such as income, poverty, and health insurance on a yearly basis. The U.S. Department of Labor, Bureau of Labor Statistics collects data such as unemployment rates, inflation, and consumer spending. The most recent data from the U.S. Census Bureau and Department of Labor are for 2003.

INCOME DEMOGRAPHICS		
DATA	ARIZONA	NATIONAL
<i>What is the per capita income?⁹</i>	\$42,062	\$43,527
<i>Unemployment Rate¹⁰ (Number of persons who are unemployed)</i>	5.6%	6.0%
<i>Poverty Rate¹¹ (Number of persons living in poverty)</i>	13.5%	12.5%
<i>Poverty Rate for children under 18¹¹ (Number of children under 18 living in poverty)</i>	19.1%	17.6%

7) ARIZONA LEGISLATION^{12,13}

National Conference of State Legislatures has collected recent legislative activity and/or recent statutes regarding nutrition, physical activity, and physical education.

National Conference of State Legislatures (NCSL)¹²

NCSL has collected childhood obesity legislation proposed or enacted in 2003 and 2004.

No legislation.

NCSL has created a New Healthy Community Design database¹³ that provides state-specific information (if the bill has been passed in your state) on such topics as: bike/pedestrian, farm-to-school, nutrition, obesity, and physical activity.

http://www.ncsl.org/programs/environ/envHealth/healthycommunity_bills.cfm

To find existing state law(s) on nutrition/dietary behavior and physical activity/education please go to your state's legislative website

<http://www.azleg.state.az.us/>

8) ARIZONA POLICY^{14,15,16,17}

This section contains data that comes from information reported by state education agencies in 2000 as a part of the Centers for Disease Control state-level School Health Policies and Programs Study (SHPPS)^B. Policies can change rapidly. SHPPS will be conducted again in 2006.

For the most current information, please follow the website link to your state's Agriculture Department: <http://www.agriculture.state.az.us/>

POLICIES ON FOOD			
	Vending machines	After-school programs	A la carte during breakfast or lunch periods
<i>Does your state education agency require or recommend that schools include fruits or vegetables among foods offered in...¹⁴</i>	Neither requires nor recommends	Requires	Neither requires nor recommends
<i>Does your state education agency require or recommend that schools be prohibited from offering junk foods in...¹⁴</i>	Neither requires nor recommends	Neither requires nor recommends	Neither requires nor recommends

POLICIES ON FOOD IN SCHOOLS	
POLICY	ARIZONA POLICY
<i>Has your state adopted a policy stating that districts will have someone to oversee or coordinate food service in the district (e.g., a district food service coordinator)?¹⁴</i>	No policy
<i>Has your state adopted a policy requiring district food service coordinators to earn continuing education credits on nutrition or school food service to maintain state certification, licensure, or endorsement?¹⁴</i>	State does not offer certification, licensure, or endorsement to district food service coordinators
<i>Does your state offer certification, licensure, or endorsement for district food service coordinators?¹⁴</i>	No
<i>Has your state adopted a policy prohibiting schools from using food or food coupons as a reward for good behavior or academic performance?¹⁴</i>	No policy

POLICIES ON NUTRITION AND DIETARY BEHAVIOR			
	Elementary schools	Middle/junior high schools	Senior high schools
<i>Has your state adopted a policy stating that schools will teach nutrition and dietary behavior in...¹⁴</i>	No policy	No policy	No policy

POLICIES ON PHYSICAL EDUCATION & ACTIVITY IN SCHOOLS			
POLICY	Elementary Schools	Middle/junior high schools	Senior high schools
<i>Has your state adopted a policy stating newly-hired staff that teach physical education be certified, licensed, or endorsed by the state to teach physical education?¹⁴</i>	N/A	N/A	N/A
<i>Has your state adopted a policy stating that schools will teach physical education?¹⁴</i>	No policy	No policy	No policy
<i>Based on policies adopted by your state, what is the required student-to-teacher ratio for physical education?¹⁴</i>	No policy	No policy	No policy
<i>Has your state adopted a policy stating that physical activity and fitness will be taught as a part of classroom instruction?¹⁴</i>	No policy	No policy	No policy

POLICIES ON PHYSICAL EDUCATION & ACTIVITY IN SCHOOLS	
POLICY	ARIZONA POLICY
<i>Does someone in your state oversee or coordinate physical education?</i> ¹⁴	No
<i>Has your state adopted a policy stating that teachers will earn continuing education credits on physical education topics to maintain certification, licensure, or endorsement to teach physical education?</i> ¹⁴	N/A
<i>Does your state education agency require or recommend that elementary schools provide students with regularly scheduled recess?</i> ¹⁴	Neither requires nor recommends
<i>Has your state adopted a policy that prohibits schools from using physical activity (e.g., laps or push-ups) to punish students for bad behavior in physical education?</i> ¹⁴	No policy
<i>Has your state adopted a policy that prohibits schools from excluding students from all or part of physical education as punishment for bad behavior in another class?</i> ¹⁴	No policy

In 2002, the USDA piloted the Fruit and Vegetable Program. The program provides students with free fresh and dried fruits and fresh vegetables. In 2002, the USDA compiled state policies on competitive foods.

USDA FRUIT & VEGETABLE PROGRAM	
DATA CATEGORY	ARIZONA
<i>Participates in USDA Fruit and Vegetable Program</i> ¹⁵	Does not participate
<i>Competitive food policy (2002)</i> ¹⁶	USDA regulations

National Association of State Boards of Education (NASBE)[®] compiles state school health policies in their database. For additional information:
http://www.nasbe.org/HealthySchools/States/State_Policy.html

SCHOOL HEALTH ADVISORY COUNCIL	
DATA CATEGORY	ARIZONA
<i>State's coordinating or advisory council policy</i> ¹⁷	No policy

9) ARIZONA STATE STANDARDS AND ASSESSMENT^{14,18,19}

In 2001, NASPE compiled information on each state's health education and physical education standards. Many states base their health education and physical education standards on national standards. Nutrition education is a component of health education and most states do not have separate nutrition education standards. This section also contains information from the 2000 SPHHS.

PHYSICAL EDUCATION STANDARDS	
DATA CATEGORY	ARIZONA
<i>Physical Education Standards</i> ¹⁸	Physical education standards exist and are somewhat based on the National Standards for Physical Education. No statewide assessment of the standards is conducted.
<i>Are these health standards or guidelines based on the National Standards for Physical Education?</i> ¹⁴	Yes
<i>What are your state's physical education student requirements?</i> ¹⁸	Yes

POLICIES ON PHYSICAL EDUCATION	
DATA CATEGORY	ARIZONA
<i>Has your state adopted a policy encouraging (e.g., in memoranda or guidelines) districts or schools to follow any national or state physical education standards or guidelines?</i> ¹⁴	Follows national or state standards/guidelines
<i>Has your state adopted a policy stating that districts or schools will follow any national or state physical education standards or guidelines?</i> ¹⁴	Yes

HEALTH EDUCATION STANDARDS	
DATA CATEGORY	ARIZONA
<i>Are these health standards or guidelines based on the National Health Education Standards?</i> ¹⁴	Yes
<i>Are these health standards or guidelines based on the National Standards for Physical Education?</i> ¹⁴	Yes
<i>Is your state involved in the CCSSO-SCASS Health Education Assessment Project?</i> ¹⁹	No

POLICIES ON HEALTH EDUCATION			
POLICY	Elementary Schools	Middle/junior high schools	Senior high schools
<i>Has your state adopted a policy stating that students will be tested on health education topics...¹⁴</i>	No policy	No policy	No policy

10) IMPORTANT STATE LINKS

For additional information for your state, contact these individuals at the State education agency, and state health agency. For each state's Department of Agriculture a website address has been provided. State specific information for after care is provided by Afterschool Alliance.

SEA

www.ade.az.gov

Kathy Rice

Comprehensive Health Education Standards

602-542-8713

krice@ade.az.gov

SHA

www.azdhs.gov

Jeanette Shea-Ramirez

Women and Children's Health

602-364-1400

shearaj@hs.sate.az.us

Department of Agriculture

<http://www.agriculture.state.az.us/>

After School Care

http://www.afterschoolalliance.org/states/states_facts.cfm?state_abbr=AZ

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NOTES

- A. Food insecure is defined as: USDA measures food insecurity and hunger only related to financial constraints. Food secure households have access at all times to enough food for an active, healthy life. Food insecure households do not have access to enough food to fully meet basic needs at all time. Among food insecure households, some reach a level of severity grave enough that one or more household members are hungry. Hunger is defined as the uneasy or painful sensation caused by lack of food.
- B. Both the Centers for Disease Control and Prevention (CDC), through its School Health Policies and Programs Study (SHPPS), and the National Association of State Boards of Education (NASBE), through its State-Level School Health Policy Database, collect information on state policies. Information from these two systems and other similar sources of data do not always match. For example, CDC's SHPPS 2000 reports that 35 states allowed students to use their own asthma inhalers, while NASBE's Database reports that 30 states allowed student self-medication as of April 2004. These and other differences may be attributed to differences of methodology, timeframe, interpretation, or the ambiguities inherent to any discussion of policy and practice.

The SHPPS 2000 state-level data were collected by self-administered mail questionnaires completed by designated respondents in state education agencies. In those questionnaires, "policy" was defined as "any mandate issued by the state school board, state legislature, or other state agency". NASBE collects written policies directly from states and then summarizes the information contained in those policies. Subjective interpretation is unavoidable both when persons are responding to questions about the policies under which they work and when others are analyzing written policies that vary in content, depth, and completeness. Across states, awareness, dissemination, interpretation, and enforcement of policies also vary tremendously. As a result, policy measurement and policy analysis — like policy making — remain both an art and a science.

Arizona

2003 Youth Risk Behavior Survey (YRBS) Results

These risk behaviors¹ . . .

Unintentional Injuries and Violence

- 13% Rarely or never wore safety belts
- 35% Rode with a drinking driver during the past month
- 17% Carried a weapon during the past month
- 31% Were in a physical fight during the past year
- 8% Attempted suicide during the past year

Alcohol and Other Drug Use

- 51% Drank alcohol during the past month
- 34% Reported episodic heavy drinking during the past month
- 24% Used marijuana during the past month
- 13% Ever used cocaine
- 13% Ever used inhalants

Sexual Behaviors

- 43% Ever had sexual intercourse
- 11% Ever had four or more sex partners
- 31% Had sexual intercourse during the past three months
- 42% Did not use a condom during last sexual intercourse²
- 82% Did not use birth control pills during last sexual intercourse²

Tobacco Use

- 59% Ever tried cigarette smoking
- 21% Smoked cigarettes during the past month
- 7% Smoked cigarettes on ≥ 20 days during the past month
- 5% Used smokeless tobacco during the past month
- 14% Smoked cigars during the past month

Dietary Behaviors

- 80% Ate < 5 servings of fruits and vegetables per day during the past 7 days
- 85% Drank < 3 glasses of milk per day during the past 7 days

Physical Activity

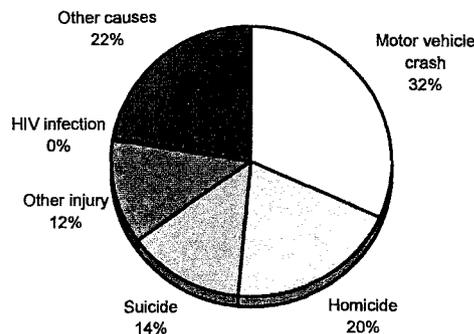
- 33% Participated in insufficient vigorous physical activity³
- 71% Participated in insufficient moderate physical activity⁴
- 62% Were not enrolled in physical education class
- 77% Did not attend physical education class daily
- 8% Did not participate in any vigorous or moderate physical activity

Overweight

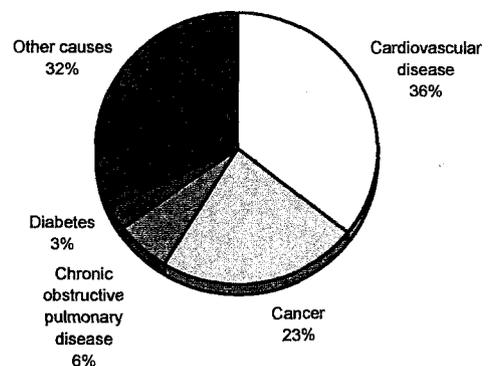
- 14% At risk for becoming overweight⁵
- 11% Overweight⁶

. . . contribute to these leading causes of death.⁷

Youth Aged 10-24 Years



Adults Aged 25 Years and Older



¹ Among high school students only, weighted data.

² Among students who had sexual intercourse during the past 3 months.

³ Did not participate in vigorous physical activity for ≥ 20 minutes on ≥ 3 of the past 7 days.

⁴ Did not participate in moderate physical activity for ≥ 30 minutes on ≥ 5 of the past 7 days.

⁵ Students who were at or above the 85th percentile but below the 95th percentile for body mass index by age and sex, National Center for Health Statistics, 2000.

⁶ Students who were at or above the 95th percentile for body mass index by age and sex, National Center for Health Statistics, 2000.

⁷ 2001 mortality data, National Center for Health Statistics.



State of Arizona
Senate
Forty-fifth Legislature
First Regular Session
2001

SENATE BILL 1186

AN ACT

MAKING APPROPRIATIONS TO THE DEPARTMENT OF HEALTH SERVICES FOR A CHILDREN'S
PHYSICAL ACTIVITY GRANT PROGRAM.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Appropriations; purpose; assessments; report;
3 exemption

4 A. The sum of \$75,000 is appropriated from the state general fund in
5 each of fiscal years 2001-2002 and 2002-2003 to the department of health
6 services to establish and administer a grant program for school-based
7 programs that promote children's physical activities. The department shall
8 transfer up to four per cent of the appropriation in this subsection to the
9 office of the auditor general to conduct an evaluation and report of these
10 programs pursuant to subsection C of this section.

11 B. The department shall award the grants to county health departments
12 that shall administer the monies. The department shall give preference to
13 grant proposals that promote physical activity at least three days a week,
14 allow all children to participate and are for children enrolled in
15 kindergarten programs and grades one through eight. Monies appropriated
16 under this section are intended to supplement and not supplant current
17 physical education program funding levels. Monies appropriated shall not be
18 used to hire physical education teachers or administrators or be used to fund
19 administrative expenses at the county or school district level.

20 C. County health departments that receive grants shall submit an
21 assessment of the results of the programs in a format prescribed by the
22 office of the auditor general. By December 1, 2003 the office of the auditor
23 general shall evaluate the assessments and grant program and submit a report
24 on the assessments submitted by the county health departments pursuant to
25 subsection B to the governor, the president of the senate and the speaker of
26 the house of representatives.

27 D. The appropriations made in subsection A of this section are exempt
28 from the provisions of section 35-190, Arizona Revised Statutes, relating to
29 lapsing of appropriations, except that monies remaining unexpended and
30 unencumbered on June 30, 2004 revert to the state general fund.

Assigned to HEA & APPROP
ENACTED

AS

ARIZONA STATE SENATE
Phoenix, Arizona

FINAL REVISED
FACT SHEET FOR S.B. 1186

appropriations, children's physical activity programs

Purpose

Appropriates \$75,000 in each of FY 2001-2002 and FY 2002-2003 from the state general fund to the Department of Health Services (DHS) to establish a school-based grant program that promotes children's physical activities.

Background

In February 2000, the Centers for Disease Control and Prevention (CDC) issued a report promoting lifelong physical activity. This report suggests that moderate physical activity on most, if not all, days of the week can improve strength and endurance, build healthier bones and muscles, help control weight, reduce anxiety and stress and improve blood pressure and cholesterol levels. Furthermore, when performed by young people, this same amount of exercise can also contribute to intellectual progress and improved attention span, as well as aid the development of a lifestyle that will involve daily physical activity and, subsequently, better health.

In 1996, a team of educators, policy makers and medical professionals in Arizona began working with legislators to develop recommendations for a school-based physical activity program, in part due to a concern regarding decreased levels of physical activity from around third grade into adulthood. As a result of this collaborative effort, a program called *Promoting Lifetime Activity for Youth* (PLAY) was developed and implemented in 12 counties in 1997. Between 125 and 175 schools and approximately 25,000 children have participated every year since. Future goals of the group include increased availability of programs like PLAY and studies to determine effectiveness and promote improvement.

PLAY is funded by block grants from the CDC that are administered by DHS. Currently, statutes do not require physical activity programs in schools. S.B.1186 facilitates the implementation of school-based physical activity programs by appropriating 75,000 in each of FY 2001-2002 and FY 2002-2003 from the state general fund to DHS for such programs.

Provisions

1. Appropriates \$75,000 in each of FY 2001-2002 and FY 2002-2003 from the state general fund to the DHS to establish a school-based grant program that promotes children's physical activities.
2. Exempts the appropriation from lapsing, except monies that are unexpended and unencumbered by

June 30, 2004.

3. Requires DHS to transfer up to four percent of the appropriation to the office of the Auditor General (OAG) to conduct an evaluation and report of these programs.
4. Prohibits the use of the appropriation to hire physical education teachers or administrators, or to fund administrative expenses.
5. Requires DHS to award grants to county health departments to administer the monies.
6. Requires DHS to give preference to proposals that promote physical activity at least three days a week and allow all children in grades kindergarten through eighth to participate.
7. Stipulates monies awarded are intended to supplement and not supplant current physical education funding.
8. Requires county health departments to submit an assessment of the results of the programs in a format prescribed by the OAG.
9. Requires the OAG to submit a report to the Legislature and Governor based on these assessments by December 1, 2003.
10. Provides for a general effective date.

Amendments Adopted by Health Committee

1. Replaces the requirement of DHS with the OAG to evaluate programs and submit a report based on county health department assessments.

Amendments Adopted by the Appropriations Committee

1. Adopted health committee amendments.
2. Reduces the appropriation from \$1,000,000 to \$500,000 in each fiscal year.
3. Reverts monies that are unexpended and unencumbered by June 30, 2004.

Amendments Adopted by Committee of the Whole

1. Adds authority for DHS to hire 0.5 FTE position.

Amendments Adopted by the House of Representatives

1. Reduces the appropriation from \$500,000 to \$75,000 in each year.
2. Eliminates the authority of DHS to hire a 0.5 FTE position.
3. Prohibits the appropriation from being used to hire physical education teachers or administrators, or to fund administrative expenses at the county or school district level.

Senate Action

HEALTH	1/30/01	DPA	6-1-1
APPROP	2/2/01	DPA	12-0-0-0
3 rd Read	3/12/01	DPA	17-11-2-0
Final Read	5/1/01		21-8-1

House Action

HEA	3/26/01	DP	9-0-0-1
APPROP	4/18/01	DPA	12-2-1-1
3 rd Read	4/25/01		40-18-2

Signed by the Governor 5/1/01
Chapter 320

Prepared by Senate Staff
May 16, 2001

PROMOTING LIFETIME ACTIVITY FOR YOUTH (P.L.A.Y.)

A program of the Arizona Department of Health Services

Funded by the Preventive Health and Health Services Block Grant (PHHSBG)

PROBLEM:

Physical inactivity is among the top preventable causes of death because of its role as a primary risk factor for obesity and chronic disease. Despite progress towards reducing other major chronic disease risk factors, there has been little improvement in increasing physical activity levels. Research indicates that adults do not get enough physical activity to meet the current recommendations from the Surgeon General's Report on Physical Activity and Health, which states that every American should accumulate 60 minutes or more of moderate to vigorous physical activity on most, preferably all, days of the week. According to the Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance Survey (BRFSS), the reported percentage of Arizonans that did not engage in any leisure time physical activity over the past five years averages 38%. This is significantly worse than the first half of the decade, 23.8%. Encouraging physical activity in adults is important since physically inactive people are almost twice as likely to develop CVD as a person who engages in regular physical activity.

In the fall of 2000, the CDC issued a report, Promoting Better Health for Young People Through Physical Activity and Sports. This report states that our nation's children are inactive, unfit, and increasingly overweight. Physical inactivity threatens to reverse the decade's hard work to reduce death from CVD and other chronic diseases as well as to devastate our health care budget.

BACKGROUND:

The Preventive Health and Health Services Block Grant (PHHSBG) is a federal grant given to states through the CDC. The grant's intended use is to enable states to make progress toward achieving the objectives of *Healthy People 2010*. Nationwide, including Arizona, most states use the funds for programs that do not have any other source of funding. In 1996, the Arizona's PHHSBG coronary heart disease prevention program began to focus exclusively on increasing physical activity. The PHHSBG allocates funds to the county health departments for implementation of school, home and community-based programs to increase physical activity. **All local program activities; including school-based programs are coordinated by county health department staff.**

PROGRAM GOAL:

Is to reduce the prevalence of obesity and chronic disease (such as cardiovascular disease, diabetes, osteoporosis, and some types of cancer) by increasing the number of Arizonan youth who get at least 60 minutes of moderate to vigorous intensity physical activity on most days of the week.

PROGRAM OBJECTIVES:

- To increase the number of 4th-8th grade youth in participating schools who accumulate at least 60 minutes of daily, moderate to vigorous intensity physical activity.

- To teach skills that promote self-directed lifetime activity to youth in participating schools.
- To increase the number of 4th-8th grade youth in participating schools that earn the PALA (President's Active Lifestyle Award).
- To foster the value and creation opportunities to be physically active for school faculty, staff and students in participating schools.
- To increase the number of parents, whose children participate in PLA, as well as adults living in communities around targeted schools, who get the recommended amount of physical activity.
- To increase public awareness of community opportunities for physical activity.
- To build the capacity of local health departments to promote physical activity in their communities.

TARGET GROUP:

The P.L.A.Y. program focuses on youth in fourth through eighth grades. Research indicates most children are very active until about grade three, when activity levels begin to decline. This decline continues until the early 20s with a marked change in early adolescence. The targeting of grades four through eight is designed to prevent the decline of physical activity levels by intervening during the ages when the decline first begins.

P.L.A.Y. DESCRIPTION:

Project PLAY is a program that is offered to schools statewide and free of charge. It is a three step, teacher-directed program designed to promote 60 minutes of daily, independent physical activity in youth. The program duration is at least 12 weeks.

Step 1: Classroom teachers teach the P.L.A.Y. philosophy by discussing the importance of physical activity and demonstrate that activity can be simple, fun and require little athletic ability. The emphasis in this first step is to get youngsters moving with something as simple as "walking and talking with a friend" or playground games.

Step 2: Teachers introduce new activities that students might enjoy. They direct a daily 15-minute activity break for the students for a minimum of three weeks.

Step 3: Teachers implement step 3 throughout the remainder of the twelve weeks and in many cases for the duration of the school year. This step teaches and encourages self-direction in a variety of physical activities. The goal is to encourage student independence in achieving 60 minutes of daily activity at school and at home. The school activity break is now used to teach activities that can be done during school free time and at home, with family, friends, or alone, and in the community. All participating students receive a log sheet.

At the end of the twelve weeks students who have earned the PALA awards receive their awards and the school is encouraged to give public recognition to those students. Teachers receive program materials, activity logs for students, activity card sets, a wall chart to record students' progress, and classroom equipment such as balls and jump ropes.

TIMELINE:

Implementation of the P.L.A.Y. program began in 1996 in twelve counties. Since then, PLAY has been implemented in approximately 160 schools, reaching 24,000 students and 900 teachers each year. The program will be entered the eighth year of implementation in the fall of 2003.

EVALUATION:

The first five years, participants and parents were asked to complete a self-reported evaluation. The results have shown that overall, the students' attitudes about physical activity became more positive and the number of students reporting that they are not physically active has decreased as a result of the P.L.A.Y. program.

In January 2002, a research study was conducted to determine the effectiveness of the P.L.A.Y. program. Thirty-five schools participated in the study. Participants were 606 4th grade students (315 girls, 291 boys) and their teachers. The mean age for boys and for girls was 9.8 years. The study was limited to fourth graders to ensure that each child had no previous exposure to the P.L.A.Y. program.

Data was collected using three measures; pedometer step counts, body mass index (BMI) and an attitude inventory, the Children's Attraction to Physical Activity (CAPA). Prior to the study all Arizona elementary schools were placed into one of four groups (P.L.A.Y. and PE, PE only, P.L.A.Y. only, and No treatment). The groups were based on the school's participation in the P.L.A.Y. program and the existence of a PE program (defined as a program taught by a PE teacher). Because it is an intervention designed to promote physical activity, PE was used as an independent variable. PE was also used as an independent variable because the impact of PE on physical activity levels, BMI, and attraction to physical activity could not be ignored. Schools were randomly selected for each group.

Results of the evaluation indicate that the implementation of the P.L.A.Y. program is effective in increasing the physical activity level of children, especially girls. The findings have interesting implications, particularly with the recent emphasis on increasing the physical activity levels of girls.

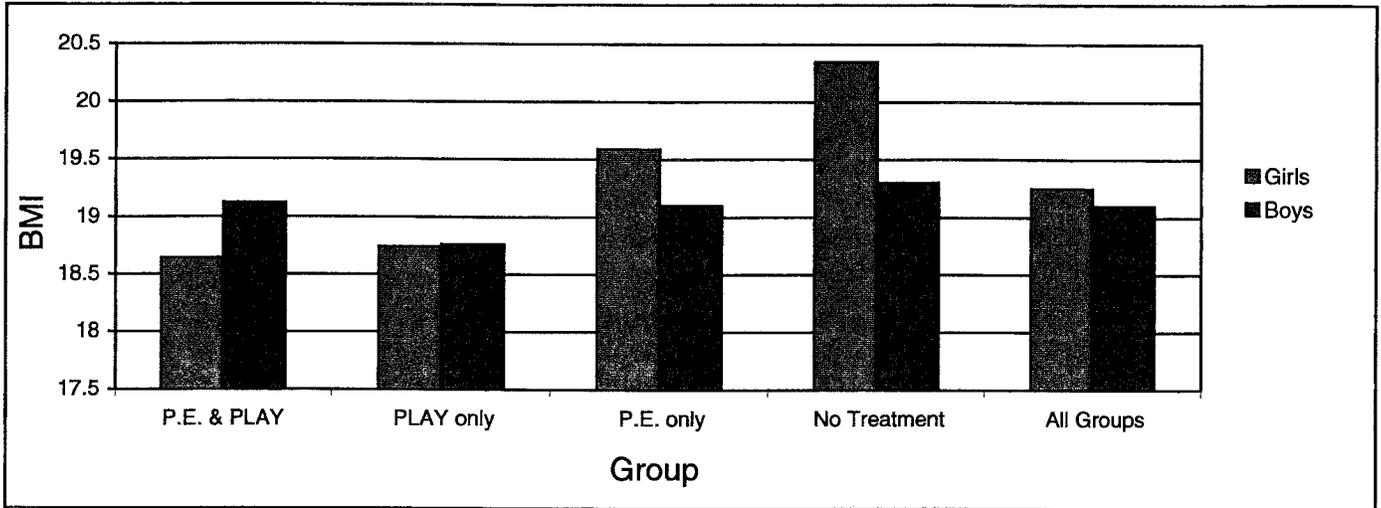
The least active children had the highest BMIs. Data showed no significant differences between the groups. However, because of the short length of the intervention, it is difficult to use data from this study to draw conclusions regarding the effectiveness of P.L.A.Y. in combating overweight and obesity. Using P.L.A.Y. over the course of several years may potentially impact the BMI of students.

Attraction to physical activity, as measured by the CAPA, did not appear to be impacted by the PLAY program. However, the most active boys reported the highest attraction to physical activity. Personality traits such as attraction to physical activity change slowly and a 12-week intervention program is not likely to impact CAPA scores significantly.

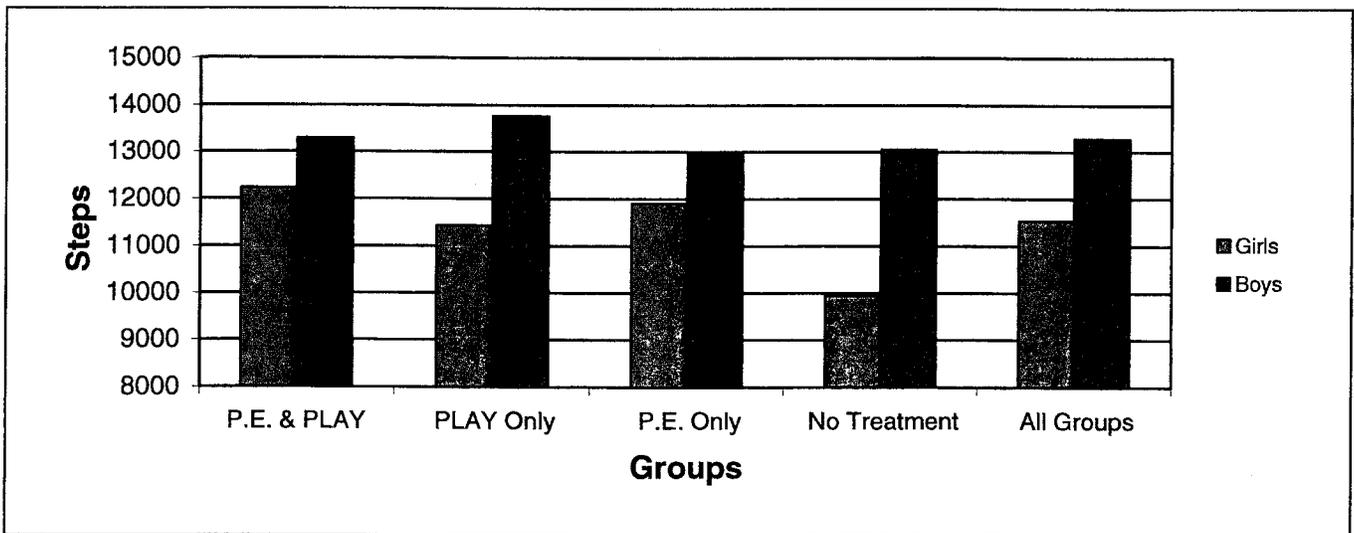
This study was published in the Journal of School Health in October 2003.

Below you will find graphs of the study:

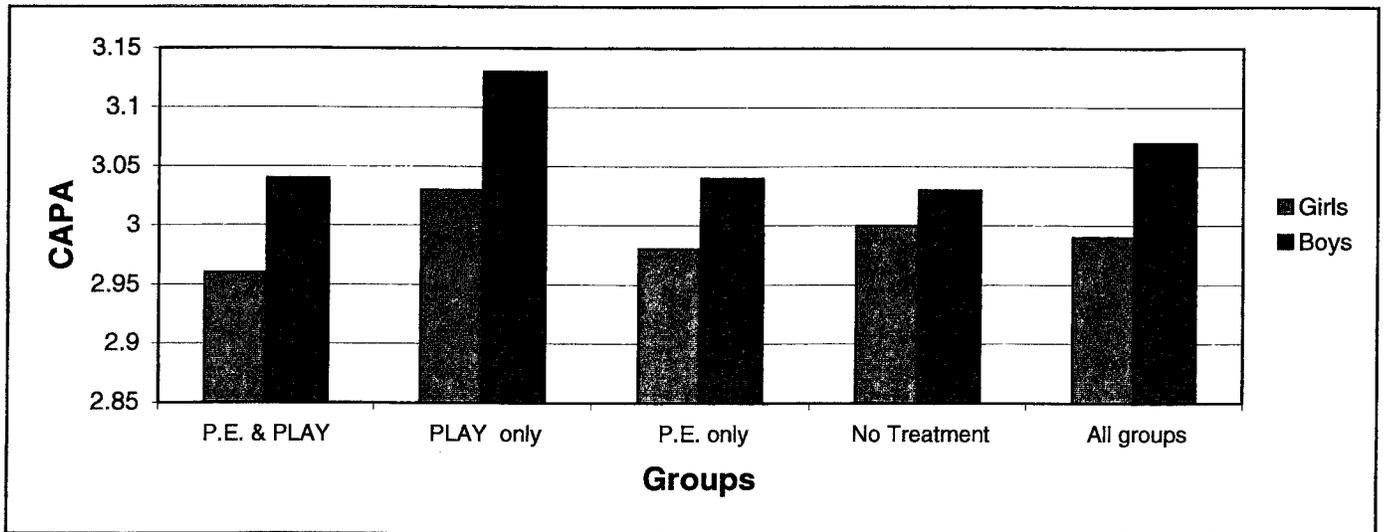
BMI by Group and Sex



Steps by Group and Sex



CAPA by Group and Sex



ADDITIONAL INFORMATION:

For additional information contact:

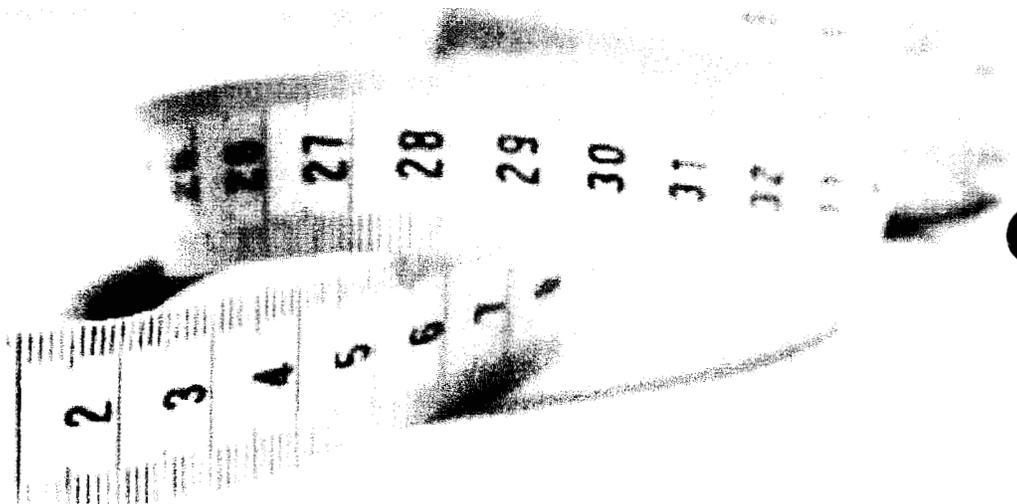
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ISSUE REPORT

F as in Fat:

HOW OBESITY POLICIES ARE FAILING IN AMERICA

2005



 **Trust for
America's Health**
WWW.HEALTHYAMERICANS.ORG

PREVENTING EPIDEMICS.
PROTECTING PEOPLE.

TRUST FOR AMERICA'S HEALTH IS A NON-PROFIT,
NON-PARTISAN ORGANIZATION DEDICATED TO SAVING
LIVES BY PROTECTING THE HEALTH OF EVERY COMMUNITY
AND WORKING TO MAKE DISEASE PREVENTION A
NATIONAL PRIORITY.

ACKNOWLEDEMENTS

This report is supported by grants from the Dr. Robert C. Atkins Foundation, the Bauman Foundation, and the Benjamin Spencer Fund. The opinions expressed in this report are those of the authors and do not necessarily reflect the views of these foundations.

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TFAH thanks the reviewers for their time, expertise and insights. The opinions expressed in this report do not necessarily represent the views of these individuals or their organizations.

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Introduction

In October 2004, Trust for America's Health (TFAH) issued a report examining obesity policies in America entitled, "F as in Fat: How Obesity Policies are Failing in America."¹ The 2004 report concluded that national and state policies are falling far short of obesity prevention and reduction goals. It found that the U.S. does not have the aggressive, coordinated national and state strategies needed to address the crisis – and this threatens to make the epidemic worse.

Obesity is a complex issue, involving many contributing factors. While it is undisputable that individual behavior – "eating less, exercising more" – is critical to addressing obesity, government also has an important role to play. From sidewalks to school lunches, government can positively affect people's behavior when it comes to diet and physical activity.

This report is the second annual edition of "F as in Fat" and updates the information provided in the 2004 report. It is intended

to set a baseline of current national and state policies and programs. The report includes six sections:

Section 1: The States. This section provides information on each state's rate of obesity, related diseases, and related costs; school nutrition and physical activity policies; and additional state strategies and actions, including tax policies, litigation restrictions, and participation in major federal obesity grant programs.

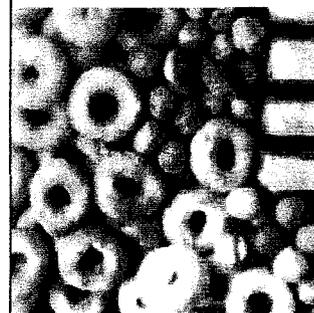
Section 2: States and Smart Growth Initiatives. This section reviews "smart growth" initiatives intended to help encourage more active and healthier living in communities, such as increasing recreational spaces, making walking between locations more convenient and safe, and making healthy food more accessible and affordable.

Section 3: The Federal Government. This section focuses on changes in federal initiatives and actions taken in the past year.

Section 4: Health Insurance. This section examines actions taken by health insurance providers and private industry aimed at reducing obesity.

Section 5: Private Sector. This section provides examples of some obesity-related efforts and products launched by the corporate sector.

Section 6: Recommendations. This section offers a series of recommendations for steps that can be taken today by policymakers to have a positive impact on combating obesity in America.



SOFT DRINKS IN SCHOOLS AND "POURING RIGHTS"

A BRITISH CASE STUDY

A recent study in the United Kingdom explored the concept of reducing childhood obesity by targeting carbonated drink consumption. Over time, sweetened carbonated drinks can significantly increase caloric consumption and promote an energy imbalance. "Theoretically, daily consumption of one can of a sweetened carbonated drink over a 10-year period can add 50 kg of weight," which equates to 110 pounds.¹⁰⁸

The study, which engaged over 600 children ages 7-11, presented students with a simple message for one hour each school term. The study encouraged children to decrease sugar consumption to improve well-being and dental health. A series of educational exercises, including an interactive session to develop a song incorporating the message, imparted the benefits of replacing carbonated drinks with water or fruit juice alternatives. The researchers used BMI to determine the effectiveness of the program.¹⁰⁹

After one year, the average percentage of overweight and obese children increased over 7 percent in the control groups not exposed to the message, while the intervention groups saw a slight overweight and obese reduction of less than 1 percent.¹¹⁰

2. PHYSICAL EDUCATION

Forty-nine states and D.C. have requirements for some form of physical education in elementary and secondary schools. This is an increase from 48 last year. Oklahoma passed a new requirement. South Dakota is the only state without a physical education requirement.

In the past year, 17 states have passed legislation, resolutions, or new requirements to try to improve physical education programs: Arizona, Colorado, Kansas, Kentucky, Louisiana, Montana, New Hampshire, New Mexico, North Carolina, North Dakota, Oklahoma, South Carolina, Texas, Vermont, Virginia, Washington, and West Virginia.

More than 20 other states debated or introduced legislation aimed at improving physical education programs that either did not reach a vote or were not enacted.

Even though nearly every state has requirements, they are often not enforced at the local level and numerous exemptions are permitted.

Many state education agencies argue that physical education policies are often not enforced because there are already too many other mandated curriculum requirements.¹¹¹ Some education experts point out that the Elementary and Secondary Education Act (ESEA), known as the "No Child Left Behind Act," which emphasizes student achievement on standardized tests, is forcing school districts to divert limited resources away from programs that are not tested, like physical education and extracurricular sports.¹¹²

In addition, states often allow schools exemptions from physical education standards.¹¹³ Therefore, having requirements in place does not necessarily mean all students are receiving physical education.

Additional reasons cited for ineffective physical education requirements are:

- Physical education and extracurricular physical activities rarely have sufficient resources to be successful.¹¹⁴
- Physical education is often viewed as a less essential use of limited funds and time during the school day, compared with

many core curriculum requirements, such as math, science, and reading.¹¹⁵

The CDC, together with partners in other federal agencies and health organizations, developed "Guidelines for School and Community Programs to Promote Lifelong Physical Activity Among Young People," which were issued in 1997. The Guidelines

recommend comprehensive, daily physical education for students beginning in kindergarten through grade 12.¹¹⁶ Schools and communities have the potential to improve the health of young people by providing instruction and programs in physical education because these programs reach most children and adolescents.

Illinois is the only state that requires daily physical education in every grade. However, Illinois permits students to be excused from physical education requirements for various reasons, and a study by the Robert Wood Johnson Foundation (RWJF) notes that the state policy is not strongly enforced.¹¹⁷

Some research has shown that physical fitness levels affect student performance. An analysis by the California Department of Education found that higher student fitness levels were associated with higher performance on standardized achievement measures.¹¹⁸

The table describes each state's physical education requirements and exemptions. (Changes from last year are noted in red).

STATE	PHYSICAL EDUCATION REQUIREMENT SET AT STATE LEVEL	POLICY FOR BEING EXCUSED FROM PHYSICAL EDUCATION
Alabama	30 minutes daily required in elementary and middle schools (50 minutes recommended for middle school). One credit is required for high school graduation.	No exceptions in elementary or middle school, unless student attends a church school as defined by law. No exceptions for high school.
Alaska	One unit of physical education is required to graduate from high school, though specific standards are left to local districts. HB 128 (introduced 2/4/05) established the Alaska Schools Physical Activity Task Force to establish recommendations for maximizing physical activity and education within the state's schools	
Arizona	Required for elementary and middle school. Duration and frequency are not specified. There is no requirement for high school. 2005 law AZ HB 2111 establishes a task to create a uniform physical education policy for grades K-8.	Parents can withdraw a child if they object to any activity or learning material.

STATE	PHYSICAL EDUCATION REQUIREMENT SET AT STATE LEVEL	POLICY FOR BEING EXCUSED FROM PHYSICAL EDUCATION
Arkansas	One hour per week required for elementary and middle schools. Physical education is required in high school, although frequency and duration are not specified. One-half credit is required for high school graduation.	Student may be excused for medical or religious reasons. The local school board must then "encourage" a student who has been granted a waiver to have appropriate instruction in health education or other lifestyle modification as an alternative to physical education.
California	Elementary school requirement is 200 minutes every 10 days; requirement for grades 7-8 is 400 minutes every 10 days. For high school graduation, two physical education courses are required, unless exempted.	School district may grant temporary exemption if a student (1) is ill or injured and a modified program cannot be provided, or (2) is enrolled for one-half, or less, of the coursework normally required of full-time pupils. Students can be exempt for two years if they have passed the physical performance test administered in ninth grade. Permanent exemption from physical education is available for students 16 or older who are enrolled as a postgraduate pupil, or enrolled in a juvenile home, ranch, camp or forestry camp.
Colorado	Data not available on requirements. New law CO SB 81 encourages school districts to provide students access to daily physical activity.	
Connecticut	Required in elementary, middle and high school, although duration and frequency are not specified. One credit is required for high school graduation.	Student may be excused for medical reasons. Credit for physical education may be fulfilled by an elective.
Delaware	Required in elementary, middle and high school, although duration and frequency are not specified. One credit is required for high school graduation.	Student may be excused for medical or religious reasons.
D.C.	1 1/2 credits required for high school graduation. Did not provide response to survey question about elementary and middle school requirements.	The high school graduation requirement is waived for students participating in an evening high school diploma program.

STATE	PHYSICAL EDUCATION REQUIREMENT SET AT STATE LEVEL	POLICY FOR BEING EXCUSED FROM PHYSICAL EDUCATION
Florida	No current physical education requirement for elementary and middle school. One credit is required for high school graduation. By Dec. 1, 2004, each district school board must adopt a physical education policy. Any district that does not adopt an education policy by Dec. 1, 2005, must at minimum provide 30 minutes of physical education three days a week for grades K-5. Statutes require each district school board to provide courses designed to ensure that students meet the Sunshine State Standards for Health and Physical Fitness.	Students may be excused if they participate in an interscholastic sport at the junior varsity or varsity level. Two full seasons satisfy the one-credit high school graduation requirement if the student passes a competency test on personal fitness with a score of C or better. One-half credit is satisfied if a student completes one semester with a grade of C or better in (1) a marching band class or in a physical activity class that requires participation in marching band activities, or (2) Reserve Officer Training Corps class.
Georgia	Ninety hours required at each grade level in elementary school. One unit (140 hours) is required for high school graduation.	Not identified through statute or code.
Hawaii	1 1/2 credits required for high school graduation. Did not provide response to survey question about elementary and middle school.	Did not provide an answer to survey question.
Idaho	Required in elementary, middle and high school, although duration and frequency are not specified. One credit is required for high school graduation.	Not identified through statute or code.
Illinois	Required daily in grades K-12. Duration is not specified.	Student may be excused for medical reasons. School board is authorized to excuse students enrolled in grades 11-12 if they: (1) participate in an interscholastic athletic program, or (2) are required to take an academic class necessary to enroll in college, or (3) are required to enroll in an academic class needed to graduate from high school. Students in grades 9-12 may be excused if they enroll in a marching band or ROTC program. A vocational or technical course may be substituted for physical education in grades 9-12.
Indiana	Required in elementary, middle and high school. Recommended duration and frequency are: 105 minutes of motor skills development for grades 1-3; 75 minutes of weekly physical education for grades 4-6; and 100 minutes of physical education weekly for middle school. Two semesters are recommended in high school, and one credit is required for graduation.	Not identified through statute or code.

STATE	PHYSICAL EDUCATION REQUIREMENT SET AT STATE LEVEL	POLICY FOR BEING EXCUSED FROM PHYSICAL EDUCATION
Iowa	Required in elementary, middle and high school. Duration and frequency are only specified for high school at 50 minutes per week.	12th graders may be excused from the physical education requirement by the school principal if: (1) the student is enrolled in a work-study or other educational program that requires the student to be off school premises during the day, or (2) the student is enrolled in an academic class not otherwise available, or (3) the student participates in an athletic program that requires at least as much time as the physical education requirement. Students in grades 9-12 may be excused if requested by a parent or guardian. These students must then participate in an athletic program that requires at least as much time as the physical education requirement.
Kansas	Required in elementary, middle and high school, although duration and frequency are not specified. One unit of physical education, of which one-half unit may include health education, is required for high school graduation. 2005 law KS SB 154 encourages schools to improve physical activity policies and SCR 1604 requires a study of physical education policies.	High school graduation requirement may be waived for medical or religious reasons.
Kentucky	Required in elementary, middle and high school, although duration and frequency are not specified. One-half credit (60 hours) is required for high school graduation. New law KY SB 172 requires school councils with grades K-5 to implement a wellness policy that includes moderate to vigorous activity each day and may allow physical activity up to 30 minutes per day or 150 minutes per week as part of the instructional day.	Students may be excused with a physician's note.
Louisiana	30 minutes required daily in elementary school, and 150 minutes weekly required in middle school. 1 1/2 credits are required for high school graduation. (These requirements were reenacted this year).	For elementary school, adapted physical activity shall be provided for students with special needs that prevent them from participating in regular physical education classes. No exception identified through statute or code for middle or high school.

STATE	PHYSICAL EDUCATION REQUIREMENT SET AT STATE LEVEL	POLICY FOR BEING EXCUSED FROM PHYSICAL EDUCATION
Maine	Required in elementary, middle and high school, although duration and frequency are not specified. One unit is required for high school graduation.	Not identified through statute or code.
Maryland	Required in elementary, middle and high school, although duration and frequency are not specified. One-half credit is required for high school graduation.	Not identified through statute or code.
Massachusetts	Required in elementary, middle and high school, although duration and frequency are not specified.	Student may be excused for medical or religious reasons.
Michigan	Required in elementary, middle and high school, although duration and frequency are not specified.	School districts may credit a student's participation in extracurricular athletics or other extracurricular activities involving physical activity as meeting the physical education requirement.
Minnesota	Required in elementary, middle and high school, although duration and frequency are not specified.	Students may be excused for medical or religious reasons. Local school districts are given the authority to exempt students for athletic purposes.
Mississippi	Required in elementary and middle school, although duration and frequency are not specified. Not required in high school.	Not identified through statute or code.
Missouri	Fifty minutes required per week in elementary school, with 25 minutes required weekly for half-day kindergarten students. Three thousand minutes are required per year in middle school. No requirements for frequency or duration are specified in high school; however, one unit is required for graduation.	Students may be excused for medical or religious reasons.
Montana	Required in elementary and middle school, although duration and frequency are not specified. One-half unit each year is required in middle school. In high school, one unit total (135 hours) is required for graduation, in increments of half units for two years. A resolution was enacted to encourage greater opportunities for students to participate in physical activity and sports programs (MT HJR 17).	Not identified through statute or code.

STATE	PHYSICAL EDUCATION REQUIREMENT SET AT STATE LEVEL	POLICY FOR BEING EXCUSED FROM PHYSICAL EDUCATION
Nebraska	Required in elementary and middle school, although duration and frequency are not specified. Daily physical education is required for two years in high school.	Not identified through statute or code.
Nevada	The state developed performance standards for physical education that are benchmarked for grades 2, 3, 5, 8, and 12. Standards are designed to help districts develop and implement their own curriculum. Two credits are required for high school graduation.	Not identified through statute or code.
New Hampshire	Required in elementary, middle and high school, although duration and frequency are not specified. One unit is required for high school graduation. New legislation passed created an Advisory Committee to develop a policy for physical education requirements for schools.	Not identified through statute or code.
New Jersey	150 minutes of health, safety and physical education required each week in elementary (except kindergarten), middle and high school. 3 ³ / ₄ credits are required in health, safety and physical education for each year of attendance in high school.	Determined by local school boards. Schools are required to provide alternatives in order for students to meet the physical education core standards.
New Mexico	Required in elementary, middle and high school, although duration and frequency are not specified. One unit is required for high school graduation. State enacted physical education legislation (HJM 83) creating a committee to study physical education programs.	The high school graduation requirement may be waived because of a medical condition.
New York	In elementary school, 120 minutes per week are required. Frequency requirements are daily for grades K-3 and three times a week for grades 4-6. In middle and high school, 120 minutes weekly are required, with a frequency of three times per week in one semester and at least two times a week in the other semester. Two credits are required for high school graduation.	Not identified through statute or code.
North Carolina	Required in elementary, middle and high school, although duration and frequency are not specified. One unit is required for high school graduation. Board of Education set new requirements for at least 30 minutes of physical education daily for students in grades K-8.	Not identified through statute or code.

STATE	PHYSICAL EDUCATION REQUIREMENT SET AT STATE LEVEL	POLICY FOR BEING EXCUSED FROM PHYSICAL EDUCATION
North Dakota	Required in elementary, middle and high school, although duration and frequency are not specified. Legislation (House Concurrent Resolution 3034) encourages schools to provide mid-morning and mid-afternoon recess of at least 10 minutes in grades K-6.	Not identified through statute or code.
Ohio	Required in elementary, middle and high school, although duration and frequency are not specified. One-half credit (60 hours) is required for graduation from high school.	Not identified through statute or code.
Oklahoma	Beginning with the 2006-07 school year, requires physical education or exercise programs for at least 60 minutes per week for all students in full-day kindergarten and grades 1-5. Encourages school districts to provide physical education instruction to students in grades 6-12.	Not identified through statute or code.
Oregon	Required in elementary, middle and high school, although duration and frequency are not specified.	Not identified through statute or code.
Pennsylvania	Required in elementary, middle and high school, although duration and frequency are not specified.	Not identified through statute or code.
Rhode Island	An average of 20 minutes of daily health and physical education required in elementary, middle and high school.	Not identified through statute or code.

STATE	PHYSICAL EDUCATION REQUIREMENT SET AT STATE LEVEL	POLICY FOR BEING EXCUSED FROM PHYSICAL EDUCATION
South Carolina	Required in elementary, middle and high school. One unit is required for high school graduation. 2005 legislation SC HB 3499 establishes revised physical education standards in schools; however, implementation is contingent on funding. All elementary school students will eventually have the equivalent of 30 minutes per day (150 minutes per week). In 2006-07, the minimum time will be 60 minutes per week, in 2007-08 it will be 90 minutes per week, and so on. The bill mandates a certified physical education teacher-to-student ratio; the ratio will be 700 to 1 in elementary schools in 2006-07; 600 to 1 in 2007-08, and 500 to 1 in 2008-09. One teacher at each school must be designated the Physical Education Activity Director to "plan and coordinate opportunities for physical activity that exceed the designated weekly student physical education instruction times..." All public schools must administer the South Carolina Physical Education Assessment in grades 2, 5, 8, and in high school. The State Department of Education is responsible for compiling scores and determining "effectiveness" of physical education programs in each school or school district.	One Junior ROTC credit may be taken instead of physical education. Students who are physically or mentally unable to take physical education must take a suitable modified course.
South Dakota	No requirements at the state level.	
Tennessee	Required in elementary, middle and high school, although duration and frequency are not specified. One unit is required for high school graduation.	Credit earned in two years of Junior ROTC may be substituted; participation in marching band or interscholastic athletics may not be substituted.
Texas	135 minutes per week required in elementary school. Physical education is required in middle and high school, although duration and frequency are not specified. 1 1/2 units are required for high school graduation. New law requires schools to include an emphasis on the importance of proper exercise (TX SB 42).	School districts may allow a student to substitute certain physical activities towards the high school graduation requirement. Waivers may be granted for credit to individual students for private or commercially sponsored programs in Olympic-level physical training.
Utah	Required in elementary, middle and high school, although duration and frequency are not specified. 1 1/2 units are required for high school graduation.	Not identified through statute or code.

STATE	PHYSICAL EDUCATION REQUIREMENT SET AT STATE LEVEL	POLICY FOR BEING EXCUSED FROM PHYSICAL EDUCATION
Vermont	Required in elementary, middle and high school, although duration and frequency are not specified. 1½ years of physical education are required for high school graduation. Legislation in late 2004 required the Department of Education to develop a model fitness policy (H544, S 241).	Not identified through statute or code.
Virginia	Required in elementary, middle and high school, although duration and frequency are not specified. Two credits of health and physical education are required for high school graduation. SB 1130 requires physical education including cardio, muscle building, and stretching exercises (amends 22.1-200 of the Code of Virginia).	Not identified through statute or code.
Washington	Required in elementary, middle and high school, although duration and frequency are not specified. Two credits (300 hours) of health and fitness education are required for high school graduation. State released model policy in 2004 as required by SB 5436. The law mandates local school districts to establish school physical education policies by Aug. 1, 2005. (Amends 28 A235 RCW).	Student may be excused on account of physical disability, employment or religious beliefs, or because of participation in athletics or military science and tactics, or for other good cause.
West Virginia	Required in elementary, middle, and high school. One credit is required for high school graduation. House Bill 2816 requires 30 minutes a day at least three days a week for grades K-5; a full period of physical education daily for one semester for grades 6-8; and one full course during high school for grades 9-12. (Amends CWV 18-2-7a).	Not identified through statute or code.
Wisconsin	Required in elementary, middle and high school. Frequency is only specified for elementary school, three times per week. Duration and frequency are not specified for middle and high school. 1½ credits are required for high school graduation.	Not identified through statute or code.
Wyoming	Required in elementary, middle, and high school, although duration and frequency are not specified.	Not identified through statute or code.

*The data in this table do not distinguish between what schools are required to offer and what students are required to take.

RECOMMENDED ACTIVITY GUIDELINES FOR CHILDREN AGES 5-12

From the National Association for Sport and Physical Education¹¹⁹

The American Alliance for Health, Physical Education, Recreation and Dance (AAHPERD) issued a set of recommended levels of physical activity for children. AAHPERD is an alliance of six national organizations and is the largest organization of professionals supporting and assisting those involved in physical education, leisure, fitness, dance, health promotion, and education and all specialties related to achieving a healthy lifestyle.

Guideline 1. Children should accumulate at least 60 minutes, and up to several hours, of age-appropriate physical activity on all or most days of the week. This daily accumulation should include moderate and vigorous physical activity with the majority of the time being spent in activity that is intermittent in nature.

Guideline 2. Children should participate in several bouts of physical activity lasting 15 minutes or more each day.

Guideline 3. Children should participate each day in a variety of age-appropriate physical activities designed to achieve optimal health, wellness, fitness, and performance benefits.

Guideline 4. Extended periods (periods of two hours or more) of inactivity are discouraged for children, especially during the daytime hours.

3. BODY MASS INDEX INITIATIVES AND DIABETES SCREENING IN SCHOOLS

Four states have passed legislation allowing schools to collect Body Mass Index (BMI) information on students.

Two states have enacted legislation requiring non-invasive diabetes screening in schools.

As noted in the introduction, the utility of BMI screenings for individual obesity management is still being debated by medical professionals. Both the American Academy of Pediatrics (AAP) and the American Academy of Family Physicians (AAFP) endorse across-the-board BMI screening initiatives. However, some other organizations, including the U.S Preventive Services Task Force (USPSTF), still believe there is insufficient evidence to formally issue a recommendation for or against such screening.¹²⁰

Despite the lack of consensus, a number of states have begun initiatives to screen stu-

dents' BMI levels in schools. There are no studies yet that examine the results or effectiveness of these programs on reducing obesity.

During the 2003-04 school year, Arkansas became the first state in the country to begin testing children's BMI levels. Approximately 440,000 public school students in the state had their height and weight measured to assess BMI.¹²¹ The results were mailed to parents from June through July 2004. The overall results are intended to help Arkansas identify schools, school districts, and student populations that may need interventions to help reduce the prevalence of overweight.

An initial review of the 2003-04 school year data in Arkansas found that 38 percent of students were either overweight (21 percent) or at risk of becoming overweight (17 percent).¹²² These numbers were higher



NGA Center for
BEST PRACTICES

Issue Brief

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February 4, 2003

Preventing Obesity in Youth through School-Based Efforts

Summary

Obesity has reached epidemic proportions in the United States and threatens to impact the health and well-being of numerous children and adolescents. The number of overweight youth has more than doubled since the early 1970s. Today, approximately 13 percent of children and adolescents—nearly 5.3 million youth—are seriously overweight.^{1, 2}

Since most children and adolescents are enrolled in schools, schools present a unique opportunity to promote healthy eating and regular physical activity. States, school districts and schools are addressing childhood obesity through multi-pronged strategies that include developing school nutrition and physical activity policies, implementing classroom instruction in nutrition and physical education, and creating a supportive school environment. States can help prevent and reduce obesity in school-age youth by:

- **Developing policy and program guidelines for schools.**
- **Strengthening physical activity requirements, standards and programs in schools.**
- **Implementing nutrition policies and education programs.**
- **Fostering school and community partnerships that promote regular physical activity.**
- **Engaging students, school faculty, families, and communities in promoting healthy eating and regular physical activity.**
- **Creating public awareness and education campaigns.**

Childhood Obesity

The increase in children that are overweight or obese is attributable to multiple factors including an increase in sedentary lifestyles and intake of high-caloric foods.⁹ Environment, race/ethnicity, and gender also play a factor in determining whether children will have a higher likelihood of becoming obese. Some facts on obesity:

- Children with obese mothers, low family incomes, and lower cognitive stimulation are at greater risk than their peers for becoming obese.¹⁰
- Mexican American male children tend to have a higher prevalence of being overweight than non-Hispanic black and non-Hispanic white male children. Non-

Use of the Term *Obesity*

Body Mass Index (BMI) provides a guideline based on weight and height to determine *overweight* and *obese* for adults. For children and adolescents, obesity is calculated based on growth charts, physical development, gender, and age; and therefore, child measures do not have the same cut-points for BMI as adults. Based on current recommendations of expert committees, children with BMI values at or above the 95th percentile of the sex-specific BMI growth charts are categorized as overweight. To avoid stigma, the terms *at-risk* and *overweight* are used when referring to children and youth and correspond to *overweight* and *obese* for adults.

Despite this technical language, the use of *obesity* when referring to children is widely accepted. For simplicity and clarity, the terms *overweight* and *obesity*, and their variation have been used throughout this issue brief.

Source: Centers for Disease Control and Prevention, BMI Table for Children and Adolescents.

Hispanic black female children tend to have a higher prevalence of being overweight when compared with non-Hispanic white and Mexican American female children.¹¹

- Breastfeeding may reduce the likelihood of a child becoming obese.¹²
- Healthy eating and regular physical activity are established in children at young ages and are affected by factors including parents' eating habits.¹³

Overweight and obese children place significant health, social and economic costs on states. Youth who are obese are at an increased risk for obesity-related illnesses including heart disease, diabetes, high blood pressure, gallbladder disease, and osteoarthritis.¹⁴ They are more likely than their peers to be absent from school, experience low self-esteem, and become obese adults.^{15,16} Costs due to obesity-related illnesses in children have more than tripled since the 1970s, from \$35 million in 1979 to \$127 million in 1999.¹⁷

The Role of Schools in Promoting Healthy Living

Children's health and well-being play a critical role in their ability to come to school ready to learn and in their overall academic achievement.¹⁸ Schools have a unique opportunity to provide children and adolescents the skills and support they need to adopt healthy behaviors. They have regular access to children and youth — more than 95 percent of all children and adolescents aged 5-17 are enrolled in school.¹⁹ Teachers and other school personnel can educate, support and reinforce students' health behaviors, including promoting healthy eating and regular physical activity. States can take several steps to encourage healthy lifestyles through school-based efforts such as:

- **Developing policy and program guidelines for schools.**
- **Strengthening physical activity requirements, standards and programs in schools.**
- **Implementing nutrition policies and education programs.**
- **Fostering school and community partnerships that promote regular physical activity.**
- **Engaging students, school faculty, families, and communities in promoting healthy eating and regular physical activity.**
- **Creating public awareness and education campaigns.**

Develop Policy and Program Guidelines for Schools

Many states are developing physical activity and nutrition guidelines and recommendations for schools. In addition to using national research to inform policy, some states are supporting state-level research to determine the status of diet and physical activity in youth, and craft policy recommendations.

In **California**, the Public Health Institute and the California Department of Health Services conducted a survey of California adolescents, ages 12 to 17 years, to gather information on adolescents' diet and physical activity. The results of the study formed the basis of policy recommendations for improving the health status of California adolescents that were highlighted in the report, "California Teen Eating, Exercise, and Nutrition Survey."²⁰

The **Kentucky** State Department of Education is in the final stages of crafting a "Comprehensive Plan for Coordinated School Health" that provides objectives and activities that support schools in developing coordinated school health programs. Physical activity, nutrition education, and the decrease of tobacco usage are major areas of emphasis. The Lieutenant Governor's Task Force on Nutrition and Fitness introduced a bill during the last legislative session that would have required daily physical activity for elementary school students, limited the sale of certain foods during school hours, and established training requirements and continuing education for school food service directors and managers. The bill received widespread support from numerous stakeholder groups but did not pass.

Maine is using a significant percentage of its tobacco settlement funds to support “Healthy Maine Partnerships.” Under this initiative, the state employs 54 school health coordinators located in school districts or schools in 31 regions of the state to promote physical activity, nutrition, and tobacco prevention and education programs and policies. In one site, nutrition activities have been so successful that area grocery stores have had to improve the variety of available fruits and vegetables, due to increased demand from families.

In **Michigan**, the Departments of Education and Community Health, and the Governor’s Council on Physical Fitness, Health and Sports formed a Healthy Weight Advisory Group comprised of experts representing universities, health professional associations, schools and other key groups. The advisory group developed a consensus paper, “The Role of Michigan Schools in Promoting Healthy Weight” to provide practical guidelines and policy recommendations to school districts for promoting healthy weight for all students²¹.

Strengthen Physical Activity Requirements, Standards, and Programs in Schools

Regular physical activity promotes numerous health, social and educational benefits in youth. It can help control weight, improve strength and endurance, reduce stress, and improve self-esteem.²² It can increase concentration, reduce disruptive behavior and improve academic achievement, even when time for physical education reduces time spent on academics.²³ In fact, students who participate in interscholastic sports are less likely to smoke or use drugs, and are more likely to have high academic achievement and overall good conduct.²⁴ In spite of the benefits of regular physical activity, only one in three (35 percent) of students in grades 9-12 participate regularly in vigorous physical activity.²⁵

National guidelines recommend that elementary school children receive 150 minutes per week of physical activity, and that middle school and high school students receive 225 minutes per week.²⁶ Nearly all states have some type of legislative mandate for physical activity. However, many of these mandates are broad and leave local school districts to determine such parameters as the number of hours students spend in physical education.

Education reform efforts have spawned the development of educational standards, which in nearly all states (i.e., 44 states) include state standards for physical education. Over 80 percent of the states with physical education standards follow national guidelines. A few states include physical education as part of state assessments and graduation requirements.²⁷ In spite of these efforts, physical education requirements continue to be eroded by academic requirements that place greater emphasis on subjects such as reading, writing and arithmetic.

Illinois is the only state in the nation that requires daily physical education for all students, grades kindergarten through 12. Certified physical education specialists teach physical education at the elementary, middle and high school levels.

Daily time is to be commensurate with other subjects. At the secondary level, individual waivers are available, at local district discretion, for varsity athletics, marching band, and ROTC.

The **Maine Move** and Improve program, of Eastern Maine Medical Center and endorsed by the Governor’s Council on Physical Fitness and Sports, is designed as a twelve-week, free physical activity program to reduce the risk of disease associated with physical inactivity. Originally initiated as a worksite wellness program, the effort has

School Physical Activity Facts:

- Only 6-8 percent of senior, middle, and elementary schools provide daily physical education for the entire school year for students in all grades.
- Approximately 71 percent of elementary schools provide regularly scheduled recess for students in all grades kindergarten through 5.
- Only 49 percent of all schools offer intramural activities or physical activity clubs for students.
- 65 percent of high school students participate in vigorous physical activity on 3 or more days a week; 27 percent participate in moderate physical activity on 5 or more days a week.

Sources: Centers for Disease Control and Prevention (CDC), School Health Policies and Programs Study, 2000; CDC National Youth Risk Behavior Survey, 1999.

grown to include schools, seniors and community groups. Participants commit to be physically active 30 minutes per day, four days a week for 10 of the 12 weeks of the program. Maine businesses donate incentive prizes including monetary prizes, and canoes, kayaks and mountain bikes.

Minnesota's state graduation standards include physical activity. High school students in most school districts have to complete physical activity standards in order to graduate. Students are asked to write independent fitness plans as part of the requirement.

In **Texas**, SB19 authorized the State Board of Education to require elementary school students to participate in daily physical activity. Implementation of the law resulted in recent Texas Education Agency (TEA) guidelines requiring elementary students to participate in at least 30 minutes of physical activity a day or 135 minutes per week. The legislation also requires that all elementary schools implement a coordinated school health program by 2007.

Implement Nutrition Policies and Education Programs

Proper nutrition is an important building block to a child's ability to learn and their overall health status. Children who are hungry are more likely to have behavioral, emotional and academic problems at school.²⁸ School food service programs contribute a significant amount of the nutrition that many children receive in a given day, particularly for those youth who are low-income and thus qualify for free or reduced-price breakfasts and lunches. Effective nutrition policies and education programs promote and reinforce healthy eating habits, create supportive environments, and teach youth the importance of eating right.

Schools face numerous challenges in assuring that youth eat healthy meals during the school day. Many school food service programs follow federal nutritional guidelines and must do so if they participate in federal school meal programs (i.e., the National School Lunch and School Breakfast Programs). However, efforts to provide nutritious foods in schools often compete with the wide availability of junk foods, the strong impact of advertising on youth's food choices, and diminishing school budgets that spawn private fund-raising through the sale of candy and other junk foods to fund athletic and extra-curricular activities.

Most schools have increased children's food options through the sale of foods in vending machines, school stores and snack bars.²⁹ Schools faced with dwindling education budgets have turned to "pouring rights contracts" to supplement school and food service budgets through the sale of soft drinks. Nearly 50 percent of schools have contracts with soft drink companies; 92 percent of these schools receive a specific percentage of soft drink sales receipts.³⁰

To address the growing prevalence of overweight and obese youth, states and school districts are implementing policies to restrict or significantly limit the sale of junk food and soft drinks during school hours. Some

states and school districts have found creative approaches that minimize the sale of soft drinks and junk foods in school vending machines while maintaining revenues. Finally, many states are implementing nutrition education curricula and increasing the qualifications of school nutrition staff.

In **California**, the school board of the *Los Angeles Unified School District* unanimously voted to ban the sale of soft drinks in all district schools, effective January 2004. In addition, the new policy requires that schools and the district not enter into any new contracts, or renew or extend contracts for non-approved beverages. Statewide, soft drink sales are prohibited in elementary schools and may be sold only after the end of the last

School Food Service and Nutrition Facts:

- Nearly 93 percent of senior high schools operate vending machines, school stores, or snack bars; only 21 percent sell low fat yoghurt or fruits and vegetables in these venues.
- Nearly 20 percent of schools usually give students less than 20 minutes to eat lunch once they are seated.
- Only 2 percent of school-aged children meet the Food Guide Pyramid serving recommendations for all five major food groups.
- Overall, 56 to 85 percent of children consume soda on any given day.

Sources: Centers for Disease Control and Prevention, School Health Policies and Programs Study, 2000; U.S. Department of Agriculture, Foods Sold in Competition with USDA School Meal Programs: A Report to Congress, January 2001.

USDA Requirements for School Meal Programs

Schools that participate in the USDA school meal programs (i.e., school lunch, school breakfast and after-school snack programs):

- Must meet the Dietary Guidelines for Americans, which recommend that no more than 30 percent of an individual's calories come from fat, and less than 10 percent from saturated fat.
- Must provide one-third of the Recommended Dietary Allowances (RDA) of protein, Vitamin A, Vitamin C, iron, calcium and calories through school lunches and one fourth of the RDA requirements through school breakfasts.
- Must not sell "foods of minimal nutritional value (FMNV)" as defined by federal regulations, in food service areas during the school meal periods.
- Can sell FMNV outside of the food service area at any time during the school day. All other foods including foods and beverages from vending machines, school stores and snack bars can be sold anywhere on the school campus.

Source: U.S. Department of Agriculture, Food and Nutrition Service, National School Lunch Program and National School Breakfast Program at

lunch period in middle schools. The state requirement will go into effect in 2004, pending allocation of funds for increased meal reimbursement in the budget act of 2003.³¹

In **Minnesota**, *North Community High School* (Minneapolis) worked with its beverage vending company to provide healthier drink choices in the school's vending machines. As a result, soda machines available to students were reduced to one; several 100 percent fruit and vegetable juice, and water vending machines were added throughout the school; and students are now allowed to bring water to class.

West Virginia prohibits the sale or serving of candy, soft drinks, chewing gum or flavored ice bars during the school day. County school boards may permit the sale of soft drinks in high schools except during breakfast and lunch periods. In addition, all county school superintendents are required to designate a school nutrition program director. The director must meet specific nutrition education and training qualifications.

Foster School and Community Partnerships That Promote Regular Physical Activity

States are developing unique partnerships between schools, communities, park and recreation programs, and biking programs to promote regular physical activity for youth, school faculty, and community members. As a result, schools and communities are creating safe walking and bike paths, encouraging walking and biking to school, and promoting the use of school and community facilities for exercise during extended hours. In communities where safe physical activity is a concern because of violence, ill-equipped walkways, or a lack of parks, these efforts are critical to providing important options for physical fitness. After-school care programs, and community sports and recreation programs also play a critical role in providing youth access to sports, physical activity, and active play.

In **Minnesota**, the state education agency and health department in partnership with Be Active Minnesota, a non-profit organization, partnered to fund "walk-to-school" grants. Funds were provided directly to local schools for creating activities that promoted walking to school.

In **Texas**, the Public Health Promotion Program within the State Department of Health worked with schools and communities in selected regions of the state to establish walking trails to promote accessible physical activity in community parks and schools, and on school grounds. In addition, the Program fostered collaboration between local schools, agencies, community and worksite wellness staff, and others to encourage the use of school buildings and community facilities for physical activity.

Engage Students, School Faculty, Families, and Communities in Promoting Healthy Eating and Regular Physical Activity

Youth are an important voice and partner in making nutrition and physical activity changes in schools. Engaging youth in promoting and advocating for health and fitness not only contributes to improved policies in schools but also provides youth with an important learning tool. School faculty and parents provide

important reinforcement and can also benefit from a school's physical activity and nutrition program improvements.

In **California**, Project LEAN, a partnership between the California Department of Health Services and Public Health Institute, works with state and local physical activity and nutrition leaders across the state to promote healthy eating habits and regular physical activity. Food on the Run, one of Project LEAN's key programs, engaged low-income high school students in studying their school's school nutrition and physical activity policies and developing strategies to advocate for healthier alternatives. As a result, high school students created walking clubs and bike trails, and improved the nutritional value of foods served in their high school cafeterias.

In **Maine**, the Department of Education's state-sponsored School Site Health Promotion Wellness Conference is held for school wellness teams. In its 17th year, the conference prepares teams to promote activities that focus on providing support for teachers and other school staff to be healthy. Activities include health fairs, health screenings, Move and Improve, and stress management workshops. These efforts have resulted in numerous positive outcomes. For instance, some schools have their entire staff wearing pedometers to track their daily walking, aiming for 10,000 steps a day.

Create Public Awareness and Education Campaigns

Public awareness and education campaigns are a critical component of a multi-pronged statewide effort. For youth who are highly-influenced by media, these campaigns can become an important counterweight to junk food advertising and serve as an important motivator for physical activity and healthy eating. In addition to using strategies to reach youth, states are using innovative approaches to educate other key stakeholders such as school board members.

The VERB Campaign, launched by the U.S. Department of Health and Human Services to encourage physical activity and healthy behaviors for kids, is a driving force behind many states' more recent youth campaign efforts targeted at increasing physical activity. The multicultural media campaign is designed to promote healthier lifestyles in youth by reaching them through television, radio spots and the Internet. VERB focuses on physical activity, pro-social activity and an effort to reduce "screen time."

California Project Lean, with support from the California Department of Health Services, has partnered with the California School Boards Association to help prepare local school board members to better address school nutrition policy. The effort includes a set of tools that school boards can use to examine their school's nutrition policy, a series of school nutrition advertisements that can be placed in local school board magazines, and nutrition policy case studies from around the state.

In **Maine**, the Governor's Council on Physical Fitness and Sports promotes All Children Exercise Simultaneously (ACES), a one-day physical activity promotion program held the first Wednesday in May. ACES works with schools to promote public awareness and education about the importance of regular physical activity. Nearly 17,000 Maine school children participated in May 2002.

In **Minnesota**, efforts are underway to plan VERB events throughout the state in conjunction with the state's park and recreation association. Activities will infuse the VERB message through walking campaigns, basketball clinics, cross-country skiing, and other events that highlight the importance of regular physical activity. The Mall of America is also interested in partnering with the state to conduct VERB activities using its facilities and regular access to youth.

Conclusion

Today's youth live in a society where they are bombarded with advertisements for junk food, rewarded with food, and entertained by watching television. It is no surprise that the numbers of overweight and obese children and adolescents has reached epidemic proportions. Schools are a critical part of the solution because of their regular access to children and adolescents. Many states concerned with the obesity epidemic are

responding through innovative school-based policies and programs. However, schools are not the only partners needed in this effort. Health care providers, community based organizations, businesses and policymakers can also play a core role in helping to prevent and reduce the prevalence of overweight and obese children.

Selected Sources for Further Information and Guidance

Numerous federal agencies and organizations provide resources, technical assistance, and comprehensive guidelines to states for addressing overweight and obesity in youth through school-based strategies.

1. The American Alliance for Health, Physical Education, Recreation and Dance provides a summary of state physical education and activity policies in the report, "2001 Shape of the Nation Report: Status of Physical Education in the USA" at <http://aahperd.org>
2. The American Dietetic Association can be found at <http://www.eatright.org>
3. The American Obesity Association can be found at <http://www.obesity.org>
4. "Bright Futures in Practice: Physical Activity" and "Bright Futures in Practice: Nutrition", supported by the Health Resources and Services Administration, Maternal and Child Health Bureau, provide guidelines to health professionals for promoting physical activity and nutrition in infants, children and adolescents at <http://www.mchb.hrsa.gov/>
5. California Project LEAN can be found at <http://www.caprojectlean.org>
6. The Centers for Disease Control and Prevention, Division of Adolescent and School Health includes resources such as the School Health Index; comprehensive guidelines in areas including healthy eating and physical activity; and data from the School Health Policies and Programs, and the Youth Risk Behavior Surveillance studies at <http://www.cdc.gov/nccdphp/dash/>
7. The Centers for Disease Control and Prevention; Nutrition and Physical Activity Program includes resources on promoting physical activity, healthy eating, and addressing overweight and obesity at <http://www.cdc.gov/nccdphp/dnpa/>
8. The National Association of State Boards of Education has resources for state school boards including "Fit, Healthy and Ready to Learn: A School Health Policy Guideline. Part 1. Physical Activity, Healthy Eating and Tobacco Use Prevention" at <http://www.nasbe.org/HealthySchools/fithealthy.mgi>
9. The Office of the Surgeon General provides access to key reports including: "Physical Activity and Health" and "The Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity, 2001" at <http://www.surgeongeneral.gov/sgooffice.htm>
10. The U.S. Department of Agriculture provides comprehensive information about the child nutrition program at <http://www.fns.usda.gov/cnd/Default.htm> and school resources including the school kit "Changing the Scene: Improving the School Nutrition Environment" at <http://www.fns.usda.gov/tn/>
11. The U.S. Department of Health and Human Services' VERB Campaign can be found at <http://www.verbnow.com>

Endnotes:

This brief was written by Karen VanLandeghem, consultant to NGA, and prepared under a cooperative agreement with the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau.

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NASPE National Association for Sport & Physical Education

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Understanding the Difference

IS IT PHYSICAL EDUCATION OR PHYSICAL ACTIVITY?

With heightened attention on childhood obesity prevention efforts, there seems to be some confusion between the terms "physical education" and "physical activity." Often the words are used interchangeably but they differ in important ways. Understanding the difference between the two is critical to understanding why both contribute to the development of healthy, active children. The National Association for Sport and Physical Education (NASPE) believes every child in the United States deserves both a quality physical education and physical activity program.

School **physical education programs** offer the best opportunity to provide physical activity to all children and to teach them the skills and knowledge needed to establish and sustain an active lifestyle. Physical education teachers assess student knowledge, motor and social skills, and provide instruction in a safe, supportive environment. NASPE recommends that schools provide 150 minutes of instructional physical education for elementary school children, and 225 minutes for middle and high school students per week for the entire school year. Based on sequence of learning, physical education should not be compared to or confused with other physical activity experiences such as recess, intramurals, or recreational endeavors.

A quality physical education program provides learning opportunities, appropriate instruction, meaningful and challenging content for all children, and should include:

Opportunity to Learn:

- Instructional periods totaling 150 minutes per week (elementary) and 225 minutes per week (middle and high school)
- Qualified physical education teachers providing a developmentally appropriate program
- Teacher/student ratio in physical education no greater than 1:25 (elementary) and (1:30 middle/high) for optimal instruction (similar to other classroom settings)
- Adequate equipment and facilities for all students to be active at the same time

Appropriate Instruction:

- Full inclusion of all students
- Maximum participation and ample practice opportunities for class activities
- Well-designed lessons that facilitate student learning
- Out of school assignments that support learning and practice of learned skills
- Appropriate discipline and class management (physical activity should never be used as punishment)
- Use of regular assessment to monitor and reinforce student learning

Meaningful Content:

- Instruction in a variety of motor skills that are designed to enhance the physical, mental, and social/emotional development of every child
- Fitness education and assessment to help children understand, improve and/or maintain their physical well-being
- Development of cognitive concepts about motor skill and fitness
- Opportunities to improve emerging social and cooperative skills through physical activity and gain a multi-cultural perspective

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- Promotion of recommended amounts of physical activity now and throughout life

Physical activity is bodily movement of any type and may include recreational, fitness and sport activities such as jumping rope, playing soccer, lifting weights, as well as daily activities such as walking to the store, taking the stairs or raking the leaves. Similar health benefits to those received during a physical education class are possible during physical activity bouts when the participant is active at an intensity that increases heart rate and produces heavier than normal breathing. NASPE recommends school-age children accumulate at least 60 minutes and up to several hours of physical activity per day while avoiding prolonged periods of inactivity.

Opportunities to accumulate physical activity during the school day include time spent in physical education class, classroom-based movement, recess, walking or biking to school, and recreational sport and play that occurs before, during, and after school. Parents and grandparents are urged to get active with their children. The benefits of regular physical activity include:

- Reduces the risk for overweight, diabetes and other chronic diseases
- Assists in improved academic performance
- Helps children feel better about themselves
- Reduces the risk for depression and the effects of stress
- Helps children prepare to be productive, healthy members of society and
- Improves overall quality of life.

NASPE encourages parents and community members to visit the local schools to view daily developmentally appropriate physical education classes and supplementary physical activity opportunities such as recess, physical activity breaks and after school programs.

To learn more about the importance of physical education and physical activity, visit the NASPE website at www.naspeinfo.org.

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MEMBER LOGIN

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National Association for Sport & Physical Education

An Association of the American Alliance for Health, Physical Education, Recreation and Dance

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What Constitutes a Quality Physical Education Program?

The National Association for Sport and Physical Education (NASPE) believes that every student in our nation's schools, from kindergarten through grade 12, should have the opportunity to participate in quality physical education. It is the unique role of quality physical education programs to develop the health-related fitness, physical competence, and cognitive understanding about physical activity for all students so that they can adopt healthy and physically active lifestyles. Today's quality physical education programs are important because they provide learning experiences that meet the developmental needs of youngsters which help improve a child's mental alertness, academic performance, readiness to learn and enthusiasm for learning.

According to NASPE guidelines, a high quality physical education program includes the following components: opportunity to learn, meaningful content and appropriate instruction. Each of these areas is outlined in detail in NASPE's quality physical education (QPE) documents which range from the National Standards for Physical Education to Appropriate Practice Documents, Opportunity to Learn Documents and the Assessment Series. Books can be ordered online at www.aahperd.org/naspe or call 1-800-321-0789.

Opportunity to Learn:

- Instructional periods totaling 150 minutes per week (elementary) and 225 minutes per week (middle and secondary school)
- Qualified physical education specialist providing a developmentally appropriate program
- Adequate equipment and facilities

Meaningful Content:

- Instruction in a variety of motor skills that are designed to enhance the physical, mental, and social/emotional development of every child
- Fitness education and assessment to help children understand, improve and/or maintain their physical well-being
- Development of cognitive concepts about motor skill and fitness
- Opportunities to improve their emerging social and cooperative skills and gain a multi-cultural perspective
- Promotion of regular amounts of appropriate physical activity now and throughout life

Appropriate Instruction:

- Full inclusion of all students
- Maximum practice opportunities for class activities
- Well-designed lessons that facilitate student learning
- Out of school assignments that support learning and practice
- No physical activity for punishment



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It's Time for Your School's Physical Education Checkup: How Are You Doing?

The National Association for Sport and Physical Education (NASPE), which has been setting the standard for the profession for over 30 years, is committed to quality physical education for every student including Limited English Proficiency (LEP) and those with special needs. Does your school's physical education program help every student attain the knowledge, skills and attitudes necessary for them to lead healthy, active and productive lives? This new school year NASPE urges principals, teachers and parents to conduct an assessment of their school's physical education program--evaluate its strengths and weaknesses and then encourage a plan for improvement where needed. Here are 15 quick questions to ask:

1. Is physical education taught by a qualified teacher with a degree in physical education?	Yes ? No ?
2. Do students receive formal instruction in physical education: a. for a minimum of 150 minutes per week (elementary) and 225 minutes per week (middle and high)? OR b. at least 3 class periods per week for all grades the entire school year.	Yes ? No ?
3. Is the physical education class size about 25-30 to ensure safe, effective instruction?	Yes ? No ?
4. Is there adequate equipment for every student to be active?	Yes ? No ?
5. Is technology incorporated on a regular and continuing basis?	Yes ? No ?
6. Are indoor and outdoor facilities safe and adequate (so that physical education classes need not be displaced by other activities)?	Yes ? No ?
7. Is there a written mission statement and sequential curriculum based on state and/or national standards that are implemented appropriately in physical education?	Yes ? No ?
8. Are formative and summative assessments of student learning included in the physical education program, and are they related to meaningful content objectives?	Yes ? No ?
9. Does the program provide for maximum participation for every student (e.g., inclusion, no elimination games, all students active at once, developmentally appropriate activities, etc)?	Yes ? No ?
10. Does the program help to systematically develop the physical, cognitive and social - emotional aspects of each student?	Yes ? No ?
11. Do the physical education teachers regularly participate in physical education professional development activities and have memberships in related professional organizations?	Yes ? No ?
12. Do the physical education teachers receive student health information and have a plan for handling emergencies?	Yes ? No ?
13. Is there regular periodic evaluation by administrators of the physical education program and teacher performance?	Yes ? No ?
14. Do the physical education teachers communicate with each other and parents on a frequent basis?	Yes ? No ?
15. Do the physical education teachers seek feedback for improvement from students, peers, and parents as a means for program evaluation and improvement?	Yes ? No ?



Setting the Standard

HOW DID YOU DO?

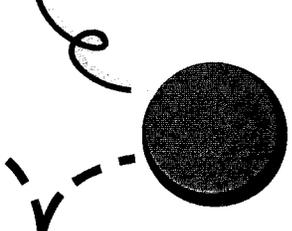
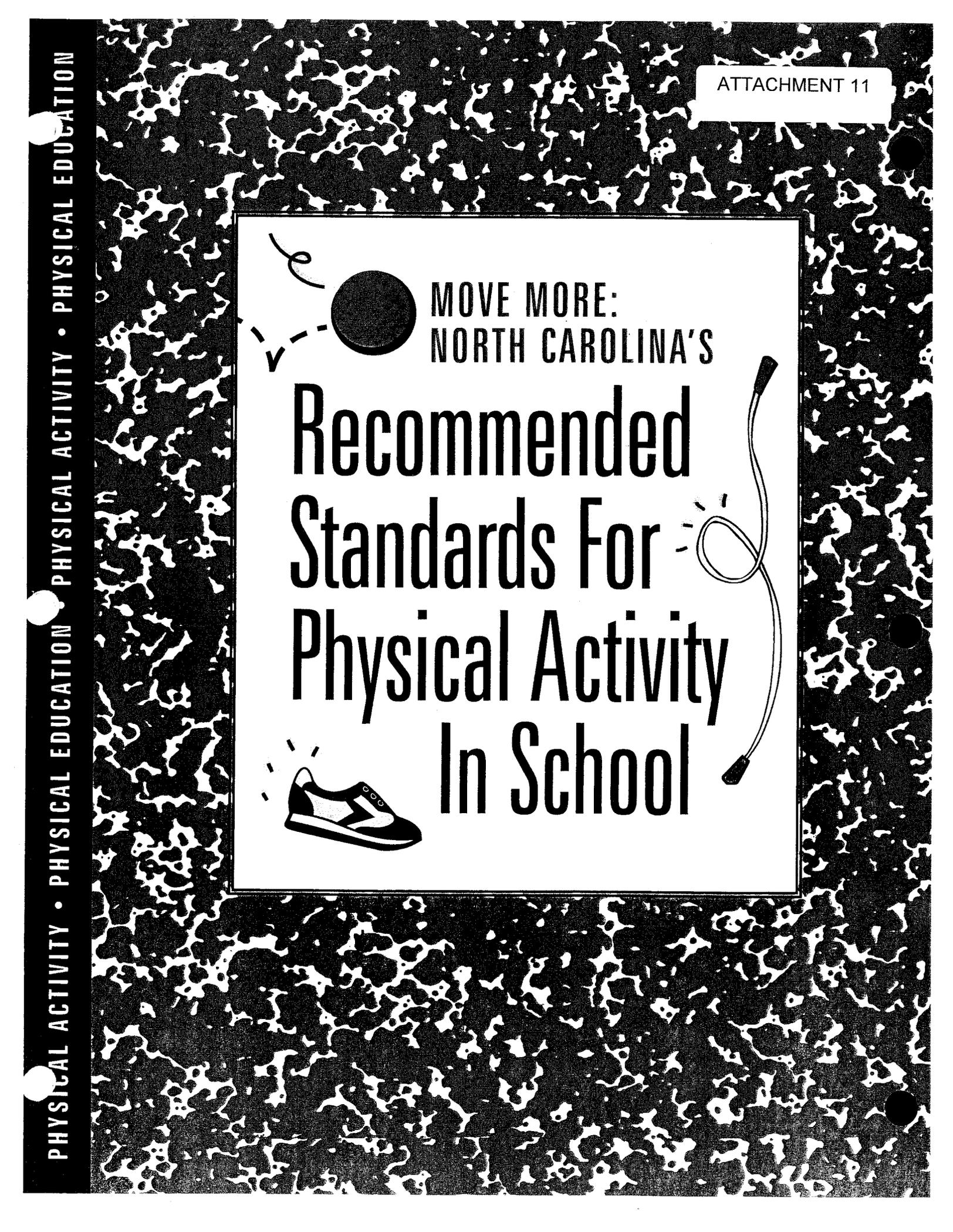
If you answered "YES" to all of the questions on the Physical Education Check-up, your school may qualify for the NASPE STARS national recognition program for quality physical education programs. For more information, visit www.naspeinfo.org/stars.

If you answered "NO" to one of more of the questions on the Physical Education Check-up, please utilize this Action Plan for Quality Physical Education to get you started improving your school physical education program. NASPE has the necessary physical education standards, opportunity to learn standards, appropriate instructional practices and assessment tools to help you. Call 1-800-321-0789 or visit our website at www.naspeinfo.org.

Action Plan for Quality Physical Education

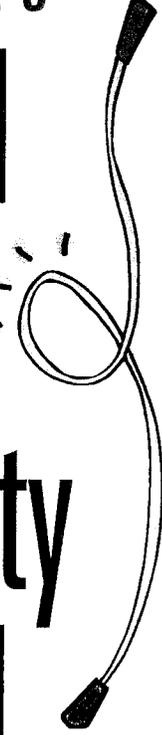
Criteria	Action	Short Term Objectives/ Goals	Long Term Objectives / Goals	Criteria Met
<i>List any questions with a "NO" response from the physical education check-up.</i>	<i>How do you propose to change this to a "YES" response? List action steps here.</i>	<i>List specific goals for the first 1-3 years.</i>	<i>List specific goals for the next 3-5 years.</i>	<i>Place the date of success here!</i>

A nonprofit professional membership organization, NASPE is the only national association supporting K-12 physical education programs and physical educators. Through its nearly 18,000 members, NASPE develops and supports physical activity, physical education and sport programs that promote healthy behaviors and enhance individual well-being. NASPE is an association of the American Alliance for Health, Physical Education, Recreation and Dance.



MOVE MORE:
NORTH CAROLINA'S

Recommended Standards For Physical Activity In School



Acknowledgements

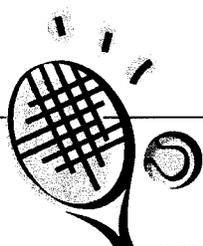
Physical activity is an important component of good health for all persons, regardless of age or ability. It is critical that children and adolescents engage in physical activity on a regular basis to improve their health and their success in school. Yet we know that not enough children engage in regular physical activity and physical education.

To that end, North Carolina's Consensus Panel to Recommend Standards for Physical Activity in School* was convened in January 2005. The panel consisted of 30 local, state and national experts representing public schools, public health, Cooperative Extension and health advocacy groups. The panel developed the recommendations included in *Move More: North Carolina's Recommended Standards For Physical Activity In School* as a tool for educators, parents, community leaders, industry representatives and policy makers to begin to create school environments that support physical activity.

This document serves as a companion document to *Eat Smart: North Carolina's Recommended Standards For All Foods Available In School*, which was released in May, 2004.¹

The *Move More School Standards* support the recommendation from the NC Healthy Weight Initiative's 100-member task force to "Establish state policies to ensure adequate time for physical activity in schools, including quality daily physical education, recess and after-school activities." This was

one of six policy and environmental recommendations presented in the task force report, *Moving Our Children Toward A Healthy Weight: Finding The Will and The Way*.²

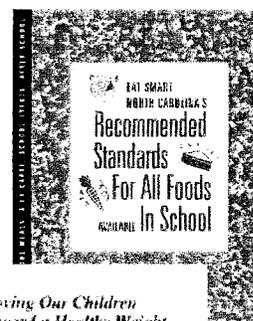


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Suggested citation: Ballard K, Caldwell D, Dunn C, Hardison A, Newkirk J, Sanderson M, Schneider L, Thaxton Vodicka S, Thomas C, *Move More, North Carolina's Recommended Standards For Physical Activity In School*. North Carolina DHHS, Division of Public Health, Raleigh, NC, 2005.

The *Move More School Standards* and the *Eat Smart School Standards* are two of many tools that support Eat Smart, Move More...North Carolina, a statewide partnership among organizations, communities and individuals to promote increased opportunities for healthy eating and physical activity. Both of the above mentioned documents are available at www.EatSmartMoveMoreNC.com, www.NCPublicSchools.org and www.NCHealthySchools.org.

*Panel members listed on inside back cover

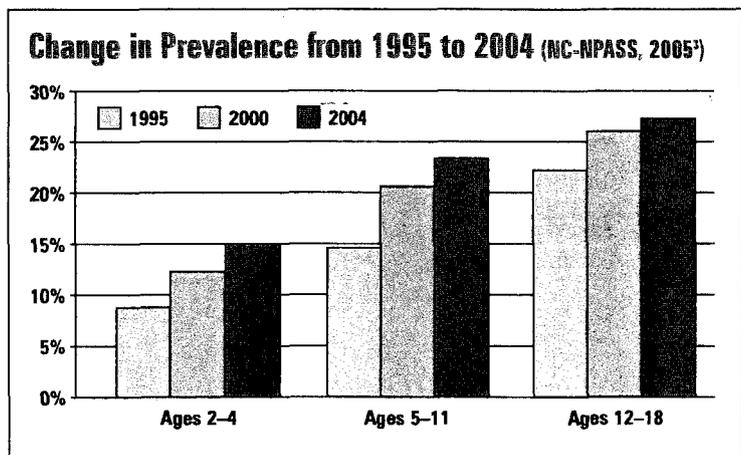
Move More: NC's Recommended Standards For Physical Activity In School

Childhood overweight and adult obesity have reached epidemic proportions nationally and in North Carolina, and are increasing in all age groups, among all races and ethnicities.³ North Carolina children are more likely than their national peers to be overweight.³ Between 1995 and 2004, the prevalence of overweight in North Carolina's children and adolescents increased 19.8 percent in 12- to 18-year-olds, 62.2 percent in 5- to 11-year-olds and 65.3 percent in 2- to 4-year-olds. In 2004, more than one in four 12- to 18-year-olds were overweight; more than one in five 5- to 11-year-olds were overweight; and one in seven 2- to 4-year-olds were overweight.³

For the first time in more than 100 years, our children's life expectancy is declining due to the increase in overweight.⁴ Centers for Disease Control and Prevention (CDC) scientists recently predicted that nearly one-third of individuals born in 2000 would develop diabetes in their lifetime.⁵

Lack of adequate physical activity and poor eating habits are widely recognized contributors to the childhood overweight epidemic. It is recommended that children and adolescents participate in at least 60 minutes and up to several hours of age-appropriate physical activity per day.⁶ Among North Carolina middle school youth, only half report getting at least 20 minutes of vigorous physical activity, and only 25.3 percent report getting at least 30 minutes of moderate physical activity on most days.⁷ Physical education provides one way for children and adolescents to acquire a portion of the recommended amount of physical activity. However the percentage of North Carolina high school students who reported attending physical education class at least one day per week in 2003 was 47.3 percent. This is lower than the national average of 55.7 percent.⁷

The problem



The social stigmatization and low self-esteem often associated with childhood overweight is another serious consequence not to be overlooked.

William Dietz, M.D., Director, Division of Nutrition and Physical Activity, CDC

The impact

The human and economic impacts of the obesity epidemic are staggering. Overweight and obesity increase the risk for chronic diseases such as heart disease, stroke, diabetes and some cancers, negatively affecting North Carolinians' quality of life. A preliminary economic analysis of physical inactivity, which included specific types of medical conditions, specific types of workers' compensation claims and lost productivity indicators revealed that the annual cost to taxpayers for North Carolina adults' physical inactivity is approximately \$9.7 billion and rising.⁸ If the current trend persists, the burden could increase to more than \$13.4 billion in 2008.⁸

The annual cost of physical inactivity in North Carolina is approximately \$9.7 billion. This cost will inevitably rise due to the state's aging population, population growth, high prevalence of physical inactivity and, of course, medical care inflation.

—David Chenoweth, Ph.D.
President, Health Management Associates, 2004

If efforts to reduce the number of physically inactive adults in North Carolina were successful—even a modest five percent reduction from 62.4 percent to 57 percent—the statewide financial toll from this modifiable risk factor could be reduced by approximately \$570 million per year.⁸ Physical inactivity negatively impacts our state's current and future economic health as businesses struggle to finance the costs of an increasingly overweight, ill and aging workforce. Encouraging active lifestyles is a reasonable solution to creating a healthier, more productive North Carolina for all.

The solution

Ensuring that children and adolescents are physically active each day is one way to improve children's physical and mental health, as well as their ability to learn. Healthy, active children are likely to become healthy, active adults. Teaching children and adolescents the benefits of an active lifestyle and giving them the skills to remain active for life should be common goals of preschools and schools, families and communities.

Next to the home, school is the setting where children and adolescents spend the largest amount of time. Schools are places of extraordinary influence on the development of lifelong behavior patterns. This influence stems not only from what children learn in the classroom, but also from environmental cues, role modeling and peer influence.

Schools cannot be expected to solve all the problems associated with physical inactivity, but they do play a significant role. They can and must be places where the urgency of childhood overweight prevention is understood and where physical activity and healthy eating opportunities, consistent messages and supportive environments are priorities. *The Move More School Standards* can assist schools in changing their environments and policies to increase both physical activity and physical education opportunities for students.

Both physical education and recess afford opportunities to achieve the daily physical activity goal without any evidence of compromising academic performance.⁹

THE BENEFITS OF PHYSICAL ACTIVITY

The benefits of regular physical activity are numerous and include both immediate and long-term effects. Physical activity:

- reduces the risk for overweight, diabetes and other chronic diseases,
- is associated with improved academic performance,
- helps children feel better about themselves,
- reduces the risk for depression and the effects of stress,
- helps children prepare to be productive, healthy members of society and
- improves overall quality of life.

A lot of kids are
overweight and
sitting the whole
day won't help us
get any healthier.

—Jonah, 6th grader

The terms “physical activity” and “physical education” are often used interchangeably. However, they differ in important ways. Understanding the difference between the two is critical to understanding why both contribute to the development of healthy, active children.

Physical Activity is a *behavior*. Physical Education is a *curriculum (or a class)* that includes physical activity.

Students need both physical activity and physical education to develop lifelong, active-living habits.

Physical activity and physical education

What is physical activity?

Physical activity is bodily movement of any type and may include recreational activities such as jumping rope, playing soccer, lifting weights and daily activities, such as walking to the store, taking the stairs or raking leaves. Physical activity provides health benefits to people who are active at an intensity that increases heart rate and requires heavier than normal breathing. The National Association

for Sport and Physical Education (NASPE) recommends children accumulate at least 60 minutes and up to several hours of physical activity per day while avoiding prolonged periods of inactivity.⁶ Children can accumulate their 60 minutes to several hours of activity in shorter bouts lasting 10 to 15 minutes each.¹¹ Opportunities to accumulate physical activity include time spent in classroom-based movement, recess, walking or biking to school, physical activity time during the physical education course and recreational sport and play that occurs during, before and after school.

PHYSICAL ACTIVITY:

Any bodily movement that is produced by moving muscles. Physical activity may include planned activity such as walking, running, basketball or other sports. Physical activity may also include other daily activities such as yard work, walking the dog or taking the stairs instead of the elevator.

EXERCISE:

A subset of physical activity that is planned or structured. It is done to improve or maintain one or more of the components of physical fitness—cardio-respiratory endurance (aerobic fitness), muscular strength, muscular endurance, flexibility and body composition. Examples of exercise include running, lifting weights and stretching.

PHYSICAL FITNESS:

An outcome, generally considered an ideal subset or form of health and related to an individual's ability to perform physical activities that require aerobic fitness, endurance, strength or flexibility.

79.4 percent of North Carolina parents surveyed believe the problem of child overweight is either a serious or very serious problem in their community.

North Carolina Child Health Assessment and Monitoring Program (CHAMP) 2005 Preliminary Data¹⁰

Physical education contributes to the physical activity time that students need. Physical education, by its nature, involves some physical activity, as well as some instructional time. On average, a student taking a quality physical education class should spend approximately half the class time being physically active, using skills taught in class.¹² For example, on days when students have physical education class, they can be expected to accumulate 20 minutes of physical activity within a 40 minute physical education class. On days when students do not have physical education class, students should accumulate physical activity minutes throughout the school day, in 10 to 15 minute increments.

What is physical education?

Physical education is a curriculum (or a class) taught by a qualified physical education teacher. Physical education is critical to teach students the skills they need to be physically active for life and to practice those skills under the watchful eye of a qualified physical educator. Physical educators assess student knowledge, motor and social skills, and provide instruction in a supportive environment.¹³ NASPE recommends that schools provide 150 minutes of physical education for elementary school children and 225 minutes of physical education for middle and high school students each five-day school week.¹⁴ Physical education is part of the NC Healthful Living Standard Course of Study, which all students should receive.

It's all academic

The Consensus Panel recognizes the challenges schools face in meeting student academic and health needs. Both are important, and both require time and resources. The Consensus Panel wants to ensure that no curricular area is compromised by efforts to meet the *Move More School Standards*, yet acknowledges the positive impact that regular physical activity and physical education can have on students' academic success, as well as their success in life.

What is Coordinated School Health?

North Carolina embraces the CDC model of Coordinated School Health. Coordinated school health is an eight-component model that addresses health education, physical education, nutrition, school environment, mental health, community/family involvement, health services and staff wellness.¹⁵ Coordinated school health should be organized at the school and local education agency (LEA) level to address the health and fitness of students, teachers and staff.

What is the NC Healthful Living Standard Course of Study?

The NC Healthful Living Standard Course of Study supports and reinforces the goals and objectives of its two major components: physical education and health education. Just as physical education is critical to help students become and remain active for life, health education is critical to teach students the life skills and knowledge they need to make healthy choices in

all areas, including substance use and abuse, sexual behavior, nutrition and mental health. Meeting the *Move More School Standards* should not interfere with students' opportunity to master these life skills and acquire this knowledge.

Is there a connection between physical activity, physical education and academic achievement?

Physical activity and physical education have positive effects on physical and mental health. Regular physical activity causes changes in the brain and brain chemistry that improve mood and cognitive functioning. Cognitive function includes brain-related abilities such as attention, concentration, memory, language, abstract reasoning and calculation. Evidence suggests that students in elementary through high school perform better academically when they are physically active.¹⁶

A summary of research examining the academic effect of participation in physical education programs found that an increase in physical education time, even with reductions in academic instruction time, had favorable effects on students' academic achievement.¹⁶ Finally, healthy children miss less school and are more attentive when present.

Action for Healthy Kids (AFHK), a national non-profit organization, reports it is probable that students with poor nutrition, inactivity and weight problems have a higher prevalence of illness, psychological and social problems that are frequent causes of absenteeism.¹⁷

The bottom line

Children and adolescents need more physical activity and physical education. Schools, parents and communities must rise to the challenge to ensure that children of all ages have access to multiple opportunities throughout the day, at school and before and after school, to be physically active. The *Move More School Standards* provide guidance for schools to write policies that will help move children toward a healthy, active lifestyle.

Proposed implementation

Ideally, schools will begin to work immediately to develop and implement policies in support of the *Move More School Standards*. Such policies should consider all aspects of implementing the *Move More School Standards*, including, but not limited to, availability of funds and personnel, staff and community involvement, classroom and community education and strategies for monitoring compliance with the policy.

The *Move More School Standards* may also provide guidance to policy makers and policy advocates as they address issues related to overweight, obesity and other chronic diseases. Financial incentives tied to particular levels of performance will enhance the speed and quality of implementation as will legislation enacted by the General Assembly and policies passed by the NC Board of Education, LEA or individual school.

It is very important
for school age
children to get
some type of daily
exercise

—Patrice, 7th grader

“Physical Education is central to the learning process of each and every child. Brain research is validating our profession. Because we know more about how the brain learns, we can better teach our students.”

—Jean Blaydes-Madigan,
Action Based Learning

Barbara gives you
a chance to stretch
your legs and rubs
you get the it's good
to be able to get up
and run and play."

—Aaron, 6th grader

For example, schools can achieve the Minimum Level of the *Move More School Standards* for Time Allocation simply by implementing the revised Healthy Active Children policy passed by the NC State Board of Education in April 2005. This policy states that schools must provide a minimum of 30 minutes of physical activity for school children in kindergarten through eighth grade each school day. Schools can achieve this level of activity through a combination of physical education and movement incorporated throughout the school day, either in recess or physical activity breaks integrated into the NC Standard Course of Study.

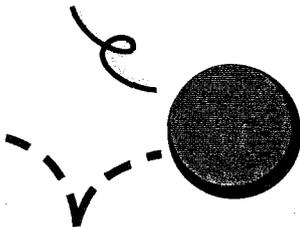
In addition to creating opportunities for students to participate in physical education and physical activity, administrators also need to consider the elements of quality for physical education and physical activity programs. Creating quality experiences for North Carolina youth means striving to meet at least some of the *Elements of Quality Physical Education and Physical Activity* outlined on page 8. For example, quality physical activity is not only providing the recommended number of minutes of physical activity during the school day using various equipment, but also includes reporting activity time to caregivers, encouraging physical activity at home and staying current on methods for incorporating physical activity into the NC Standard Course of Study.

The *Move More School Standards* are voluntary and outline three achievement levels. The *Move More School Standards* put physical education courses on the same level as other courses taught in public schools and put achieving recommended levels of physical activity on the same level of importance as other preventive health behaviors, such as immunizations and eye exams. The *Elements of Quality Physical Education and Physical Activity* piece of the *Move More School Standards* outlines ways that schools can improve the quality of their physical education and physical activity programs. Schools can choose the starting point and the achievement level they wish to pursue:

Needs Improvement: Not compliant with law or policy

Minimum Standard: Compliant with existing law or policy. Reflects Consensus Panel recommendation when no law or policy exists

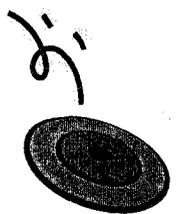
Superior Standard: Above and beyond law or policy. Reflects Consensus Panel recommendation when no law or policy exists



MOVE MORE SCHOOL STANDARDS

NEEDS IMPROVEMENT—Not meeting the law and/or policy
MINIMUM STANDARD—Letter of the law and/or policy or Consensus Panel recommendation when no policy exists
SUPERIOR STANDARD—Above and beyond the law and/or policy or Consensus Panel recommendation when no policy exists

	Needs Improvement		Minimum Standard (Minimum Standard requires meeting both Physical Education and Physical Activity criteria)		Superior Standard (Superior Standard requires meeting both Physical Education and Physical Activity criteria)	
	Physical Education (PE)	Physical Activity (PA)	Physical Education (PE)	Physical Activity (PA)	Physical Education (PE)	Physical Activity (PA)
Qualified Teachers Certification/Licensure	One or more PE teachers on staff not licensed	N/A	All PE teachers licensed in Physical Education	N/A	All PE teachers have a 4-year degree in PE and/or national board certification in PE	N/A
Time Allocation Students	Throughout the 180 day school year, offer: Grades K-5: PE less than 90 minutes each 5 day school week Grades 6-8: PE less than 90 minutes each 5 day school week Grades 9-12: Non-compliant with graduation requirement	Throughout the 180 day school year: PA not offered daily	Throughout the 180 day school year, offer: Grades K-5: Minimum of 90 minutes each 5 day school week Grades 6-8: Minimum of 90 minutes each 5 day school week Grades 9-12: One unit ¹ of Healthful Living	Throughout the 180 day school year, offer: Grades K-5: PA at least 30 minutes each instructional day ² Grades 6-8: PA at least 30 minutes each instructional day ² Grades 9-12: N/A	Throughout the 180 day school year, offer: Grades K-5: Minimum of 150 minutes each 5 day school week Grades 6-8: Minimum of 225 minutes each 5 day school week Grades 9-12: Two or more units of Healthful Living required for graduation and PE electives available all four (4) years	Throughout the 180 day school year, offer: Grades K-5: PA more than 30 minutes each instructional day ² Grades 6-8: PA more than 30 minutes each instructional day ² Grades 9-12: PA more than 30 minutes each instructional day ² Additional PA opportunities during the school day
Duty Free Period	One or more PE teachers do not receive duty free period for planning in addition to lunch	N/A	All PE teachers have at least one duty free period for planning in addition to lunch	N/A	All PE teachers and PE department heads have the same duty free period(s) in addition to lunch as other teachers and department heads	N/A
Class Size	Grades K-5: 1:25 teacher/student ratio in less than the majority of PE classes Grades 6-12: 1:30 teacher/student ratio in less than the majority of PE classes	N/A	Grades K-5: 1:25 teacher/student ratio in majority of PE classes Grades 6-12: 1:30 teacher/student ratio in majority of PE classes	N/A	Grades K-5: 1:25 teacher/student ratio in all PE classes Grades 6-12: 1:30 teacher/student ratio in all PE classes	N/A
Facilities	There are no assigned locations for all PE classes appropriate for teaching PE as defined by: Grades K-5: ^{3, 4} More than 60 students in a full size gym Grades 6-8: ^{3, 4} More than 60 students in a full size gym Grades 9-12: ^{3, 4} More than 60 students in a full size gym	The classroom is the only location available to accumulate PA excluding PE class	There is a dedicated location for all PE classes appropriate for teaching PE as defined by: Grades K-5: ^{3, 4} No more than 60 students in a full size gym Grades 6-8: ^{3, 4} No more than 60 students in a full size gym Grades 9-12: ^{3, 4} No more than 60 students in a full size gym	The classroom, and one additional location such as a walking trail, (excluding PE class) is available to accumulate PA	There is a dedicated location for all PE classes and access to other areas that would enhance PE such as multi-purpose room, fitness trail, swimming pool, climbing wall, computerized fitness lab as defined by: Grades K-5: ^{3, 4} Less than 60 students in a full size gym Grades 6-8: ^{3, 4} Less than 60 students in a full size gym Grades 9-12: ^{3, 4} Less than 60 students in a full size gym	The classroom and two or more additional locations such as a walking trail (excluding PE class) are available to accumulate PA
Equipment/Supplies	Insufficient equipment/supplies to facilitate maximum learning and practice time for all students in each PE class period	Insufficient equipment/supplies to accumulate PA excluding PE class	Sufficient equipment/supplies to facilitate maximum learning and practice time for all students in each PE class period	Sufficient equipment/supplies to accumulate PA excluding PE class	Extensive variety of equipment/supplies in sufficient quantities to facilitate maximum learning and practice time for all students in each PE class period	Extensive variety of equipment/supplies in sufficient quantities to accumulate PA excluding PE class



1. Unit is defined as 130 credit hours on a block schedule and 150 credit hours on a traditional schedule

2. This may be met through a combination of PE and other activities such as recess, dance and other curriculum-based physical activities. PA should complement, not substitute for PE

3. Based on NASPE recommendations for 110-150 square feet per student for elementary schools. There are no specific recommendations for middle and high school. Until such time that the research provides a standard, the elementary recommendation will be used as a guide.

4. Standards are set using 70' x 100' for the dimensions of a full size gym or multipurpose room.

MOVE MORE SCHOOL STANDARDS

ELEMENTS OF QUALITY PHYSICAL EDUCATION AND PHYSICAL ACTIVITY IN SCHOOL

	Physical Education Standards	Quality Physical Activity
Professional Development	Physical education teachers acquire 50% or more of professional development (CEUs) in Health Education and/or Physical Education over a 5-year period	75% or more of teachers and assistants attend a physical activity training over a 5-year period
Professional Involvement	100% of the physical education teachers are members of NCAAPERD (See glossary)	75% or more of all teachers are members of a professional teaching organization
Physical Fitness Tests	Students receive individual pre and post physical fitness tests, as well as periodic evaluation(s) as part of classroom instruction to improve fitness levels	N/A
Communication	Physical education staff communicates with each other on a regular basis (e.g., weekly meetings, shared lesson plans, other collegial sharing) Parents receive written progress reports at least once a quarter and at least one other form of communication (e.g., year plan, newsletter, website)	Classroom teachers communicate with each other about ways to incorporate physical activity in the classroom setting, as well as integrate lessons with other classroom activities Classroom teachers report to families on physical activities that occur at school and encourage families to include 30 minutes of physical activity at home
Program Aligned Curriculum	All physical education teachers use the NC Healthful Living Standard Course of Study (SCOS) and LEAs provide enhanced curriculum and guidance aligned with the SCOS	LEAs provide physical activity curriculum and guidance
Lesson Plans	Physical education teachers have a yearly plan that follows the NC Healthful Living Standard Course of Study and is used to develop daily lesson plans	Classroom teachers have a yearly plan that integrates daily moderate to vigorous physical activity throughout the school year
Technology	At least two methods of technology are used to teach and communicate physical education (e.g., heart rate monitors, pedometers, wellness equipment, fitness gym)	Technology is available for the classroom teachers and students to enhance daily physical activity lessons (e.g., pedometers, heart rate monitors, websites)
Evaluation	Students are formally assessed on all of the following: knowledge, motor skills/movement forms, health-related fitness, personal and social responsibility	Classroom teachers are supervising and interacting with students through the physical activity program or recess
Program and Teacher Evaluation	Physical education staff actively solicit and act on student and parental feedback about the physical education program Periodic performance evaluation of teachers by the appropriate administrator uses the DPI Physical Education Teacher Evaluation Form and includes planning, instructional practices, and use of assessments	There is regular periodic performance evaluation of teachers by the appropriate administrator to include planning of and implementation of physical activity time
Student Health and Safety	There is a district/school/department written emergency plan for responding to and documenting injuries and other health-related incidents in physical education/activity Physical education teachers are provided at the beginning of the school year and updated regularly with information about students' health conditions relevant to physical education	There is a district/school/department written emergency plan for responding to and documenting injuries and other health-related incidents in physical education/activity Teachers are provided at the beginning of the school year and updated regularly with information about students' health conditions relevant to physical activity
Physical Education Coordinator	There are one or more Healthful Living Coordinator(s) for the LEA	N/A
Local Educational Agency (LEA) Support	There is an amount of funding in a physical education budget to provide staff development and resources for a quality physical education class equal to the amount for other teachers in the school There is a Local Board policy to provide quality physical education as part of coordinated school health	Local Board policy to provide adequate amounts of physical activity
Outside School Day	N/A	Before- and after-school programs have a physical activity component
Community Involvement	There is a policy for shared use of facilities such as gymnasiums, walking trails, tracks, community recreation facilities, etc.	There is a policy for shared use of facilities such as gymnasiums, walking trails, tracks, community recreation facilities, etc.



Including more physical activity and physical education in the school day will not happen overnight and will take the efforts of many to fully implement. School personnel, community leaders and families, as well as policy makers, bring different perspectives to this issue. However, all share the common goal of providing a healthy future for children.

From paper to practice

School personnel as role models

School personnel who are committed to their own health and well-being are a valuable asset to the school, not only as role models, but as advocates. Providing wellness training for teachers and staff would increase the knowledge and commitment these groups share in supporting a healthy school environment. Training should equip teachers and staff with the skills to evaluate and improve their own physical activity habits, enhancing their ability to serve as role models.

School personnel who make healthy choices are likely to advocate for school environments that promote increased physical activity and healthy eating for students. This role as advocate can take many forms. Voicing support for more physical activity time, proper equipment and facilities, encouraging physical activity outside the school day and advocating for quality physical education may be appropriate.

Adults acting as positive role models for children, is a recommendation of the NC Healthy Weight Initiative's 100-member Task Force.²

Community links

Key community institutions such as city or county parks and recreation departments, local health departments, hospitals, civic groups and community policy makers all share an interest in increasing physical activity and improving the health of the community.

In addition to providing community opportunities for students to be physically active, these stakeholders have many opportunities to work directly with schools to complement efforts to improve student physical activity. For example, constructing accessible, well-lit, safe sidewalks and bike paths from neighborhoods to schools facilitates student walking and bicycling. The development of sports and recreation facilities near schools or the negotiation of shared use policies will also provide additional opportunities for students to become more active.

Parents and parent groups may form partnerships with schools to help provide physical activity. Volunteers assisting with structured recess activities in elementary schools or as intramural coaches in middle and high schools can help support school physical activity efforts.

In addition to offering facilities and labor, organizations such as hospitals, health departments, non-profit health agencies and educational institutions can provide schools with technical assistance in the areas of grant writing and program evaluation to support physical activity initiatives.

Whatever the need, there is likely a community partner willing to play a major role in helping the school's efforts to increase student physical activity.



Families as the foundation

Families are the foundation of the solution to childhood overweight and adult obesity. They provide the child's first learning environment and have the potential to make the environment supportive of physical activity and healthy eating. Families can influence children's physical activity practices by ensuring opportunities for daily movement and limiting the amount of time allowed for television or video games. They can influence children's physical activity patterns by establishing regular times for the family to be active together as often as possible. They can decide, as a family, activities they can do together instead of watching television. And they can commit to "walking the talk," balancing physical activity with healthy eating to improve their own health and provide an example for their children.

Research shows that parental influence plays a role in promoting physical activity. In adolescents, parent support and help were positively associated with physical activity.¹⁸ Families can also influence opportunities for children and adolescents to make good choices with respect to physical activity by being advocates for environmental and policy change to support physical activity outside the home.

Parental and community involvement through School Health Advisory Councils (SHACs), participation in school activities, parent-teacher organizations or local board of education meetings can ensure that consistent messages about the role of physical activity and healthy lifestyles in health and learning are provided and reinforced at home, school and in the community.

More than 94 percent of elementary, middle and high school parents surveyed said they believe it is important for schools to have physical activity policies that provide daily physical education for students.

Ninety-eight percent of parents surveyed said they believe it is important for schools to provide routine physical activity opportunities, in addition to physical education, throughout the school day for students of all abilities.

North Carolina Child Health Assessment and Monitoring Program (CHAMP) 2005 Preliminary Data¹⁸

Beyond the Move More School Standards

Move More: NC's Recommended Standards for Physical Activity In School represents the best thinking of the Consensus Panel on how schools can help change physical activity patterns of students in school and influence change in families and communities. However, there are important considerations outside the scope of the *Move More School Standards* that families, schools and communities might consider.

Preschools

Schools that offer preschool should provide opportunities for a minimum of 60 minutes and up to several hours of active play each day. While there are no standards established for physical education in preschool, preschool-age children need the opportunity to learn and practice basic motor skills, such as walking, running, jumping and hopping. In addition, preschool-age children need the opportunity to learn skills such as catching, throwing, kicking and hitting a ball. These skills do not develop spontaneously—they must be taught in an environment that stimulates their development.

Children who are exposed to a variety of physical activities and encouraged to practice skills will develop a sense of accomplishment and mastery, fostering their lifetime enjoyment of physical activity.

Outdoor physical environment

Outdoor play areas provide space where children can engage in active learning and physical activity. Play areas should provide safe places for students and teachers to interact with the natural environment.¹⁹ School grounds should be designed and managed to promote physical activity, physical education and healthy psychological and social development through creative play.¹⁹

Recess

Providing daily recess periods for elementary and preschool students is recognized as an essential component of the total educational experience by NASPE and is one of the recommendations from the NC Healthy Weight Initiative.² Children need a variety of movement experiences to develop a healthy mind and body.¹¹ Recess provides students opportunities for active play during the school day, contributing to their social, physical and cognitive development.

Before- and after-school programs

Before- and after-school programs are excellent opportunities to provide physical activity for many children. Some of the guidelines for developing or enhancing these programs include giving children a choice of activities; giving children an equal opportunity to participate regardless of physical ability; giving children the opportunity to be involved in program planning; providing age-appropriate, supervised activity under the guidance of a qualified adult; and providing adequate facilities and equipment.

I think physical activity in school is great. It's lots of fun and it keeps me smiling. Every school should have physical activity.

—Ann, 8th grader

Intramurals

Intramural and other physical activity programs extend and complement physical education to ensure that all children are provided the opportunity, regardless of ability, to participate in activities that can contribute to their enjoyment of leisure time physical activity.²⁰ Intramurals provide increased opportunity for physical activity and skill development and should be available to all children regardless of their previous sports involvement or skill.

Other considerations

- Schools allow only temporary excuses from physical education for acceptable reasons.
- Schools require documentation and classwork requirements in lieu of missed physical education classes.
- Physical activity and physical education allow individuals with disabilities to practice movement skills/forms in meaningful ways.
- Physical activity is not used as punishment.
- Physical activity and physical education emphasize fun and the development of lifelong skills rather than competition.
- Teachers and administrators lead active recess and special physical activity events.
- Schools and communities provide physical activities that are culturally sensitive and appealing to a wide audience and range of abilities.

CALL TO ACTION

North Carolina is experiencing an unprecedented obesity epidemic, affecting children and adults alike. This obesity epidemic is taking a toll on the quality of our citizens' lives, as well as the economic strength of our state. The solution seems simple: get North Carolinians to eat smart and move more. Yet we know that many of us do not meet even minimum recommendations for physical activity and healthy eating. We have an opportunity, as a state, to change that. Creating a North Carolina where physical activity and healthy eating are the norm, rather than the exception, is the vision set out by state leaders for winning the battle against chronic disease and obesity for North Carolina. In order to be successful, we must start with our children and raise a generation of adults who grow up experiencing first-hand the benefits of an active, healthy lifestyle.

Schools have the potential to help students gain the knowledge, skills and confidence to enjoy a lifetime of physical activity, through quality physical education and physical activity incorporated throughout the school day. *Move More: NC's Recommended Standards For Physical Activity In School* is a sound tool to guide and build support for change in schools. Equally important is the need for families and communities to complement the work of the schools by making physical activity part of community and family life. It is imperative that we seize this opportunity to make a positive impact on North Carolina's future. Our children and their future deserve no less.

Be Part OF THE Solution

Physical activity and healthy eating go hand-in-hand for a healthy lifestyle and should be promoted together. Students, families, teachers, principals, superintendents, school board members and community leaders each play a role in making school a place that supports increased physical activity and healthy eating.

- Students:**
- **Eat smart and move more**—to look, feel and do your best.
 - Get informed and get involved.
 - Set goals for yourself.
 - Serve as a role model to younger students.
 - Eat a healthy breakfast, lunch, snacks and dinner.
 - Participate in physical activity at least 60 minutes each day.

- Families:**
- **Eat smart and move more**—children are watching you.
 - Advocate for healthy school meals and nutrition education.
 - Learn how your school's physical education program is financed and discuss it with others.
 - Advocate for increased physical activity in schools.
 - Provide healthy snacks and/or fun physical activity for parties and events.
 - Monitor and limit your child's TV time.
 - Be physically active with your children.
 - Take advantage of opportunities for physical activity in your community.

- Teachers/Staff:**
- **Eat smart and move more**—children are watching you.
 - Teach and role model good nutrition and physical activity.
 - Coordinate physical activity with physical education staff.
 - Teach life skills—not just the facts.
 - Include physical activity as part of celebrations, meetings and other special events.
 - Move with students—support physical activity and physical education programs.
 - Incorporate physical activity into your curriculum (or class).

- Principals:**
- **Eat smart and move more**—children are watching you.
 - Support a healthy eating and physical activity environment and tell others about your commitment.
 - Establish school policy and enforce district and state policy.
 - Seek alternative sources of revenue for your school that do not send conflicting messages.
 - Include physical activity breaks during meetings and school events.
 - Provide continuing education opportunities for staff on nutrition and physical activity.

- School Superintendents/
School Board Members:**
- **Eat smart and move more**—children are watching you.
 - Support a healthy eating and physical activity environment and tell others about your commitment.
 - Make funds available to support healthy eating and physical activity.
 - Establish and enforce policy for physical activity in school.
 - Require comprehensive quality physical education for PreK–12.

- Community Leaders:**
- **Eat smart and move more**—children are watching you.
 - Support healthy school and community environments and tell others about your commitment.
 - Provide community opportunities (such as facilities and manpower) for students to be physically active.
 - Assist schools in resource development, including grant writing, program planning and program evaluation.
 - Partner with parent groups to assist with structured recess or intramural activities at schools.

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Box like the security to example, dance
succeed sports etc

—Sarah, 7th grader

Glossary

After-School Programs: Programs taking place immediately following school classes. After-school programs are designed to provide care for and educational enhancement to children in the hours immediately following school classes.

Balanced Curriculum: A guiding document for elementary and middle school focusing on the importance and values of delivering a well-rounded education which includes all areas of the Standard Course of Study. To download a copy of this document go to www.NCPublicSchools.org/curriculum.

Body Mass Index (BMI): An index of body weight for height used to classify overweight or obesity in adults. BMI, adjusted for age and gender, is also used to identify children and adolescents who are overweight or at-risk for overweight.

Built Environment: All of the buildings, spaces and products created or modified by people. For example: buildings (housing, schools and workplaces), land use (industrial or residential), public resources (parks, museums), zoning regulations, transportation systems.

Certified Physical Education Teacher: Teacher with a teaching certification in physical education.

Child Health Assessment Monitoring Program (CHAMP): Surveillance system to monitor health and risk behaviors of children in North Carolina under 18 years of age.

Childhood Overweight: A gender- and age-specific Body Mass Index (BMI) at or above the 95th percentile for children and youth aged two to 20 years, based on 2000 Centers for Disease Control and Prevention (CDC) growth charts. The terms obesity and overweight are used interchangeably for children and youth and refer to children at or above the 95th percentile.

Classroom Events: Events occurring in a school classroom in which all students participate and enjoy.

Chronic Disease: An illness that is prolonged, does not resolve spontaneously, and is rarely cured completely. Chronic diseases such as heart disease, cancer and diabetes account for seven of every 10 deaths and affect the quality of life of 90 million Americans. Although chronic diseases are among the most common and costly health problems, they are also among the most preventable. Adopting healthy behaviors such as eating nutritious foods, being physically active and avoiding tobacco use can prevent or control the devastating effects of these diseases.

Communities in Schools: A statewide not-for-profit organization that works with local school systems to get the community more involved with supporting students and teachers.

Community Schools: Community schools are K–12 public schools that combine the rigorous academics associated with high quality instructional environments and a wide range of vital in-house services, supports and opportunities that promote children’s learning and development. Supports range from medical and mental health services to extended day and weekend activities, such as sports, homework assistance centers and computer enrichment clubs.

Eat Smart Move More...North Carolina (ESMM NC): A statewide partnership among organizations, communities and individuals to promote increased opportunities for healthy eating and physical activity. For more information, go to www.EatSmartMoveMoreNC.com.

Eat Smart School Standards: The *Eat Smart: North Carolina’s Recommended Standards For All Foods Available In School* is a tool for parents, community leaders, educators, industry representatives and policy makers. The *Eat Smart School Standards* help move the conversation and stimulate change around the important role of healthy eating in schools. This document can be viewed at <http://www.EatSmartMoveMoreNC.com/ESMMmaterials/SchoolFoodsStandards.pdf>.

Exercise: A subset of physical activity that is planned or structured. It is done to improve or maintain one or more of the components of physical fitness—cardiorespiratory endurance (aerobic fitness), muscular strength, muscular endurance, flexibility and body composition. Examples of exercise include running, lifting weights or stretching.

Extracurricular: Outside the regular course of study but under the supervision of the school.

Full Size Gym: The exact size of a full size gym or multipurpose room will vary. An estimate would be 70' x 100', or approximately 7,000 square feet.

Healthy Eating: A dietary pattern consistent with the Dietary Guidelines for Americans.

Intramural Events: Team and dual/individual activities, tournaments, meets and/or special events, clubs, open gym days and dance activities that are limited to participants and teams from within a specific school or institutional setting.

Instructional Day: Time in which students are in class—typically five and a half hours per day.

Local Education Agencies (LEAs): Local Education Agency is also referred to as the School District or School System.

Moderate Amount of Physical Activity: An amount of activity sufficient to burn approximately 150 calories of energy per day, or 1000 kilocalories per week. The duration of time it takes someone to achieve a moderate amount of activity depends on the intensity of the activities chosen.

Moderate Intensity Physical Activity: Any activity performed at 50 to 69 percent of maximum heart rate. For most people, it is equivalent to sustained walking, is well within most individuals’ current physical capacity, and can be sustained comfortably for prolonged periods of time (at least 60 minutes). A person should feel some exertion but also should be able to carry on a conversation comfortably during the activity.

Modifiable Risk Factor: A risk factor is a characteristic that increases a person's chance of having a disease. A risk factor for a disease is not necessarily a cause of the disease, although at times it is. Modifiable risk factors can be changed by treatment, intervention or changes in behavior and lifestyle.

National Association of State Boards of Education (NASBE): A non-profit organization founded in 1958, NASBE works to strengthen state leadership in educational policymaking, promote excellence in the education of all students, advocate equality of access to educational opportunity, and assure continued citizen support for public education. For more information, go to: www.NASBE.org.

National Association for Sport and Physical Education (NASPE): A non-profit professional organization comprised of individuals engaged in the study of human movement and the delivery of sport and physical activity programs. Through its members as well as corporate and public partnerships, NASPE develops and supports quality sport and physical activity programs that promote healthy behaviors and individual well-being. Educating the American public about the importance of physical education for all children and youth is a primary focus. NASPE's 20,000 members include K-12 physical educators, college and university faculty, researchers, coaches, athletic directors and trainers. For more information, go to: www.NASPEinfo.org.

National Board Certification: National Board Certification assessments require teachers to demonstrate teaching practice, content knowledge and educational methods—content knowledge. North Carolina continues to lead the nation in the number of teachers who earned certification by the National Board of Professional Teaching Standards, the most accepted symbol of teaching excellence in the United States. Achieving National Board Certification is a strong endorsement of teacher quality. To date, approximately 250 North Carolina physical education teachers hold National Board Certification and the number continues to increase yearly. For more information on National Board Certification, visit www.NBPTS.org.

North Carolina Alliance for Athletics, Health, Physical Education, Recreation and Dance (NCAAHPERD): A professional association that provides advocacy and professional development for health, physical education, recreation, dance and athletic professionals. Under the Alliance, there are six associations working with NCAAHPERD to make North Carolina a healthier and more active state. They include: The Dance Education Association of North Carolina (DANCE), North Carolina Association for Athletic Education (NCAAE), North Carolina Association for the Advancement of Health Education (NCAAHE), North Carolina Association of Intramurals and Recreation (NCAIR), Physical Education Association (PEA) and Student Majors Association (SMA). For more information, visit www.NCAAHPERD.org.

NC Cooperative Extension Service: An educational partnership helping people put research-based knowledge to work for economic prosperity, environmental stewardship and an improved quality of life. Their educational programs focus upon enhancing agricultural, forest and food systems; strengthening and sustaining families; developing responsible youth; building quality communities and conserving and improving the environment and natural resources.

North Carolina Healthful Living Standard Course of Study: The Healthful Living Education curriculum promotes behaviors that contribute to a healthful lifestyle and improved quality of life for all students. The Healthful Living Education curriculum, when fully integrated, supports and reinforces the goals and objectives of its two major components—health and physical education. When the concepts of these two areas are integrated, learning is enhanced to its maximum. To view the Healthful Living Standard Course of Study, visit www.NCPublicSchools.org/curriculum/health.

North Carolina Healthy Schools: The goal of North Carolina Healthy Schools is to create a working infrastructure between education and health to enable schools and communities to create a Coordinated School Health Program. A model school health program includes all eight components: Comprehensive School Health Education; School Health Services; A Safe Physical Environment; School Counseling, Psychological and Social Services; Physical Education; Nutrition Services; School-Site Health Promotion for Staff; Family and Community Involvement in Schools. For more information, visit www.NCHealthySchools.org.

North Carolina Nutrition and Physical Activity Surveillance System (NC-NPASS): A system that provides accurate, timely information relevant to child health indicators of nutritional status such as overweight, underweight and anemia. Local public health departments and WIC programs routinely submit data on clients to the NC Health Services Information System (HSIS). NC-NPASS is a subset of this larger HSIS database and includes height, weight, a few lab measures and limited behavioral data.

North Carolina Standard Course of Study: A program adopted by the State Board of Education that sets content standards and describes the curriculum which should be made available to every child in North Carolina's public schools. It includes the subject or skills areas of arts education, English language arts, guidance, healthful living, information/computer skills, mathematics, science, second language studies, social studies and workforce development education.

No Child Left Behind (NCLB): The No Child Left Behind Act, signed into law in 2002, has expanded the federal role in education and set requirements in place that affect every public school in America, including those in North Carolina. At the core of No Child Left Behind are measures designed to close achievement gaps between different groups of students. The NCLB web site addresses key NCLB elements as they are implemented in North Carolina, including methods of measuring progress in students' academic achievement, standards for teachers and ramifications for Title I schools. For more information, visit www.NCPublicSchools.org/nclb/.

NC Healthy Weight Initiative: The mission of the NC Healthy Weight Initiative is to shape the eating and physical activity patterns of North Carolina children and youth in ways that lead to healthy weight and reduce the risk for chronic disease. The NC Task Force for Healthy Weight in Children and Youth created a comprehensive state plan, *Moving Our Children Toward a Healthy Weight: Finding the Will and the Way*, that provides recommendations for action to address childhood overweight. For more information and the state plan, visit www.NCHealthyWeight.com.

Obesity: A Body Mass Index (BMI) of 30 or greater in adults. The terms obesity and overweight are used interchangeably for children and youth and refer to children at or above the 95th percentile.

Overweight: A Body Mass Index (BMI) between 25 and 29 for adults. The terms obesity and overweight are used interchangeably for children and youth and refer to children at or above the 95th percentile.

Physical Activity: Describes any bodily movement that is produced by moving muscles and using energy.

Physical Education: A course taught by a certified physical education teacher, that provides the environment where students learn, practice and receive assessment on developmentally appropriate motor skills, social skills and knowledge as defined in the North Carolina Healthful Living Standard Course of Study. (HSP-S-000)

Physical Fitness: An outcome, generally considered an ideal subset or form of health and related to an individual's ability to perform physical activities that require aerobic fitness, endurance, strength or flexibility and is determined by a combination of regular activity and genetically inherited ability.

Policy: A principle plan or course of action as pursued by an organization.

Quality Physical Education: According to NASPE guidelines, a high quality physical education program includes the following components: opportunity to learn, meaningful content and appropriate instruction. It is the unique role of quality physical education programs to develop the health-related fitness, physical competence, and cognitive understanding about physical activity for all students so they can adopt healthy and physically active lifestyles. For more information visit www.AAHPERD.org/naspe.

Recess: A break during the school day set aside to allow children the time for active play. Schools vary in the number of recess periods given children each day, the length of the periods, and the environments available. Typically recess occurs outdoors and in a designated play area. During inclement weather, schools may have recess periods in a game room, gymnasium, or inside the classroom. For more information, visit the National Association of Early Childhood Specialists in State Departments of Education website at <http://NAECS.crc.uiuc.edu/position/recessplay.html>.

School Health Advisory Councils (SHACs): The group mandated by the NC State Board of Education to help plan, implement and monitor the State's Healthy Active Children Policy as well as other health issues as part of a Coordinated School Health Program.

School Health Initiatives: All school health activities in the various sections of the NC Division of Public Health that contribute to the advancement of school health as one of the Division's priorities. Leadership for School Health Initiatives is provided by the School Health Matrix and the School Health Unit.

Vigorous Intensity Physical Activity: Hard or very hard physical activity requiring sustained, rhythmic movements and performed at 70 percent or more maximum heart rate according to age. Vigorous activity is intense enough to represent a substantial physical challenge to an individual and results in significant increases in heart and respiration rate.

Existing Policy, Law and Regulation

North Carolina State Board of Education Policy Manual

POLICY IDENTIFICATION

Priority: High Student Performance **Category:** Healthy Schools

Policy ID Number: HSP-S-000

Policy Title: Policy regarding physical education in the public schools

Current Policy Date: 01/09/2003—Amended 4/07/2005

Other Historical Information:

Statutory Reference:

Administrative Procedures Act (APA) Reference Number and Category:

HEALTHY ACTIVE CHILDREN:

Section 1. LOCAL SCHOOL HEALTH ADVISORY COUNCIL

- a. Each school district shall establish and maintain a local School Health Advisory Council to help plan, implement and monitor this policy as well as other health issues as part of the coordinated school health plan.
- b. The local School Health Advisory Council shall be composed of community and school representatives from the eight areas of a coordinated school health program mentioned in Section 4(a), representatives from the local health department and school administration.

Section 2. PHYSICAL EDUCATION

- a. To address issues such as overweight, obesity, cardiovascular disease and Type II diabetes, students enrolled in kindergarten through eighth grade are to participate in physical activity as part of the district's physical education curriculum. Elementary schools should consider the benefits of and move toward having 150 minutes per week with a certified physical education teacher throughout the 180-day school year. Middle schools should consider the benefits of and move toward having 225 minutes per week of Healthful Living Education with certified health and physical education teachers throughout the 180-day school year.
- b. The physical education course shall be the environment in which students learn, practice and receive assessment on developmentally appropriate motor skills, social skills and knowledge as defined in the North Carolina Healthful Living Standard Course of Study and foster support and guidance for being physically active. In order to meet enhanced goals, these classes should be the same class size as other regular classes.

Section 3. RECESS AND PHYSICAL ACTIVITY

- a. Structured/unstructured recess and other physical activity (such as, but not limited to, physical activity time, physical education or intramurals) shall not be taken away from students as a form of punishment. In addition, severe and/or inappropriate exercise may not be used as a form of punishment for students.
- b. A minimum of 30 minutes of moderate to vigorous physical activity shall be provided by schools for all K–8 students daily. This requirement can be achieved through a regular physical education class and/or through activities such as recess, dance, classroom energizers or other curriculum based physical education activity programs. However, such use of this time should complement and not substitute for the physical education program.

- c. The physical activity required by this section must involve physical exertion of at least a moderate to vigorous intensity level and for a duration sufficient to provide a significant health benefit to students.

Section 4. COORDINATED SCHOOL HEALTH PROGRAMS (CSHP)

- a. The State Board of Education shall make available to each school district a coordinated school health model designed to address health issues of children. The program must provide for coordinating the following eight components:
 1. safe environment,
 2. physical education,
 3. health education,
 4. staff wellness,
 5. health services,
 6. mental and social health,
 7. nutrition services and
 8. parental/family involvement.
- b. The North Carolina Department of Public Instruction shall notify each school district of the availability of professional development opportunities and provide technical assistance in implementing coordinated school health programs at the local level.

Section 5. THIS AMENDED POLICY SHALL BE FULLY IMPLEMENTED BY THE 2006–2007 SCHOOL YEAR.

- a. Each local school district shall develop an action plan prepared in collaboration with the local School Health Advisory Council to assist in the implementation of the policy. This action plan shall identify steps that need to be taken each year to fully implement the policy by the 2006–2007 school year and shall include a review and appropriate modification of existing physical education and health curricula.
- b. Action plans shall be submitted to the North Carolina Department of Public Instruction by July 15, 2004.
- c. Progress reports shall be submitted to the North Carolina Department of Public Instruction by July 15, 2005 and 2006.
- d. Beginning July 15, 2007, each local school district in collaboration with the local School Health Advisory Council shall prepare a report annually which will include the minutes of physical education and/or healthful living, physical activity received by students in each school within the district. Indicators that will mark successful implementation and evidences of completion shall be a part of the plan.
- e. This report shall be completed by July 15th each year and remain on file for a period of 12 months to be provided upon request of the North Carolina Department of Public Instruction and local boards of education.
- f. Progress reports and the annual reports shall also include any other information that may be recommended from the State Board of Education's Ad Hoc Committee studying implementation of the physical education and Healthful Living programs in kindergarten through eighth grades.

North Carolina SBE Policy
Title 16, North Carolina Administrative Code
Subchapter 6D—Instruction,
Section .0100—Curriculum

Basic Education Program (BEP)

Policy ID Number: HSP-G-003

Policy Title: 16 NCAC 6D.0102 Policy delineating the curricular components of the Basic Education Plan.

Current Policy Date: 11/05/1998

Other Historical Information: Previous board dates: 08/07/1991

Statutory Reference: GS 115C-12(9)c.; GS 115C-81

Administrative Procedures Act (APA) Reference Number and Category: 16 NCAC 6D .0102

- a. Each LEA shall implement the BEP as developed by the department, to the extent that state funds are made available to it. This rule covers the curricular component of the BEP.
- b. The standard course of study includes, at least, a program of studies in the following areas:
 1. arts education,
 2. communication skills,
 3. guidance,
 4. healthful living,
 5. information and computer skills,
 6. mathematics,
 7. science,
 8. second language studies,
 9. social studies and
 10. vocational education.

Graduation Requirements

Policy Identification

Priority: High Student Performance

Category: Student Accountability Standards/Graduation Requirements

Policy ID Number: HSP-N-004

Policy Title: 16 NCAC 6D .0503 State graduation requirements

Current Policy Date: 06/03/2004

Other Historical Information: Previous board dates: 12/01/1999, 05/04/2000, 06/01/2000, 07/12/2001, 10/04/2001, 03/07/2002, 05/02/2002, 07/11/2002

Statutory Reference: GS 115C-12(9b); GS 115C-81(b)(4); NC Constitution, Article IX, Section 5

Administrative Procedures Act (APA) Reference Number and Category: 16 NCAC 6D .0503

In order to graduate high school, students shall have at least one credit in Healthful Living (health and physical education) in all of the four courses of study: career preparation, college technical preparation, college/university preparation or occupational.

Standard Course of Study for Healthful Living

Policy ID Number: HSP-F-007

Statutory Reference: GS 115C-81; Senate Bill 1, 1985 General Assembly Session

There will be a standard course of study for all children in the area of Healthful Living (health and physical education).

PHYSICAL EDUCATION LAWS

Duty-Free Period

General Statute 115C-301.1.

...all full-time assigned classroom teachers shall be provided a daily duty-free period during the regular student contact hours. The duty-free period shall be provided to the maximum extent that (i) the safety and proper supervision of children may allow during regular student contact hours and (ii) insofar as funds are provided for this purpose by the General Assembly. If the safety and supervision of children does not allow a daily duty free period during regular student contact hours for a given teacher, the funds provided by the General Assembly for the duty-free period for that teacher shall revert to the general fund.

Classroom Teacher Duties/Recess

115C-307 (b)

It shall be the duty of all teachers, including student teachers, substitute teachers, voluntary teachers, and teacher assistants when given authority over some part of the school program by the principal or supervising teacher, to encourage temperance, morality, industry and neatness; to promote the health of all pupils, especially of children in the first three grades, by providing frequent periods of recreation; to supervise the play activities during recess and to encourage wholesome exercises for all children.

Maximum Class Sizes

115C-301 (c)

The average class size for each grade span in a local school administrative unit shall at no time exceed the funded allotment ratio of teachers to students. At the end of the second school month and for the remainder of the school year, the size of an individual class shall not exceed the allotment ratio by more than three students. At no time may the General Assembly appropriate funds for higher unit-wide class averages than those for which State funds were provided during the 1984–85 school year.

Maximum Teaching Load

115-C-301 (d)

The average class size for each grade span in a local school administrative unit shall at no time exceed the funded allotment ratio of teachers to students. At the end of the second school month and for the remainder of the school year, the size of an individual class shall not exceed the allotment ratio by more than three students.

At no time may the General Assembly appropriate funds for higher unit-wide class averages than those for which State funds were provided during the 1984–85 school year.

Alternative Maximum Class Sizes

115C-301(e)

The State Board of Education, in its discretion, may set higher maximum class sizes and daily teaching loads for classes in music, physical education and other similar subjects, so long as the effectiveness of the instructional program in those areas is not thereby impaired. **NOTE: This does not include the Health Education classes, only physical education.**

Waivers and Allotment Adjustments

Section 115-C-301 (g)

Local boards of education shall report exceptions to the State Board of Education as provided in GDS 115-47C (10) and shall request allotment adjustments or waivers from the standards set out above. Within 45 days of receipt of reports, the State Board of Education, within funds available, may allot additional positions or grant waivers for the excess class size or daily load.

- If the exception resulted from (i) exceptional circumstances, emergencies or acts of God, (ii) large changes in student population, (iii) organizational problems caused by remote geographic location or (iv) classes organized for a solitary curricular area and
- If the local school board cannot organizationally correct the exception.

To Regulate Extra Curricular Activities

GS 115C-47(4)

16 NCAC 6E.0202: Policy regarding interscholastic athletics
SS-D-002: Policy and regulations governing middle/junior high school athletics

Local boards of education shall make all rules and regulations necessary for the conducting of extracurricular activities in the schools under their supervision, including programs of athletics, where desired, without assuming liability therefore, provided that all interscholastic activities shall be conducted in accordance with rules and regulations prescribed by the State Board of Education.

To Adopt Rules and Polices Limiting the Non-instructional Duties of Teachers

GS 115C-47 (18a)

Local Boards of Education shall adopt rules and policies limiting the non-instructional duties assigned to teachers. A local board may temporarily suspend the rules and policies for individual schools upon a finding there is a compelling reason the rules or policies should not be implemented. These rules and policies shall ensure that:

- a. Teachers with initial certification are not assigned extracurricular activities unless they request the assignments in writing and that other non-instructional duties assigned to these teachers are minimized, so these teachers have opportunity to develop into skilled professionals.
- b. Teachers with 27 or more years of experience are not assigned extracurricular activities unless they request the assignments in writing and that other non-instructional duties assigned to these teachers are minimized, so these teachers have opportunity to formally share their experience and expertise with their colleagues.
- c. The non-instructional duties of all teachers are limited to the extent possible given federal, State and local laws, rules and policies, and that the non-instructional duties required of teachers are distributed equitably among employees.

To Provide In Service Training for Teachers

GS 115C-47 (20) and GS 115C-300

Local boards of education are authorized to provide for the training of teachers as provided in GS 115C-300. Local boards of education are authorized to provide for the professional growth of teachers while in service and to pass rules and regulations requiring the improvement of instruction in the classroom and for promoting community improvement.

To Implement guidelines to Support and Assist Students with Diabetes

GS 115C-47 (42)

Local boards of education shall ensure that the guidelines adopted by the State Board of Education under GS 115C-12(31) are implemented in schools in which students with diabetes are enrolled. In particular, the boards shall require the implementation of the procedures set forth in those guidelines for the development and implementation of individual diabetes-care plans upon parental request. Local boards also shall make available necessary information and staff development to teachers and school personnel in order to support and assist appropriately students with diabetes in accordance with their individual diabetes-care plans.

—Jonah, 6th grader

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Copies of this document can be downloaded from the following websites:
www.EatSmartMoveMoreNC.com • www.NCPublicSchools.org • www.NCHealthySchools.org

WORKING TOGETHER TO HELP CHILDREN AND ADOLESCENTS EAT SMART AND MOVE MORE

IN SUPPORT OF

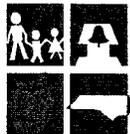


NC HEALTHY SCHOOLS

NC Healthy Weight Initiative

MOVING OUR CHILDREN TOWARD A HEALTHY WEIGHT

PROJECT PARTNERS



NC Department of Public Instruction



ARIZONA STATE LEGISLATURE

INTERIM MEETING NOTICE OPEN TO THE PUBLIC

MANDATORY PHYSICAL EDUCATION IMPLEMENTATION TASK FORCE

Date: Thursday, September 22, 2005

Time: 2:00 p.m.

Place: House Hearing Room 5

AGENDA

1. Call to Order
2. Presentations:
 - The New Physical Education – Dr. Robert Pangrazi
 - The Requirements of a Physical Education Teacher – Dr. Pamela Kulinna
3. Reports:
 - State Specific Information – Shannon Harper, American Heart Association
 - Department of Education Survey – Art Harding, Department of Education
4. Public Testimony
5. Discussion
6. Schedule Next Meeting
7. Adjourn

Members:

Senator Barbara Leff, Vice-Chairman
Senator Harry Mitchell
Kimberly Babeu
Liane Bowles
Dr. Ken Cameron
Don Hiemstra
Jennal Johnson
John Koury

Representative Mark Anderson, Chairman
Representative David Lujan
Pamela Kulinna
Dr. Harold Magalnick
Sylvia Mejia
Robert P. Pangrazi
Margaret Tate

9/19/05
jmb

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ARIZONA STATE LEGISLATURE

MANDATORY PHYSICAL EDUCATION IMPLEMENTATION TASK FORCE

**Minutes of the Meeting
Thursday, September 22, 2005
2:00 p.m., House Hearing Room 5**

Members Present:

Senator Barbara Leff, Vice-Chairman
Liane Bowles
Dr. Ken Cameron
Don Hiemstra
Jennal Johnson
John Koury
Pamela Kulinna

Representative Mark Anderson, Chairman
Representative David Lujan
Dr. Harold Magalnick
Sylvia Mejia
Robert P. Pangrazi
Margaret Tate

Members Absent:

Senator Harry Mitchell
Kimberly Babeu

Staff:

Dallas Gold, Senate Education Committee Analyst

Chairman Anderson called the meeting to order at 2:07 p.m. and attendance was noted.

INTRODUCTION OF COMMITTEE MEMBERS

Representative Anderson asked the Committee members to introduce themselves. The introductions were as follows:

Don Hiemstra from Grayhawk Elementary School in the Paradise Valley School District.

John Koury, Superintendent of the Hyder Elementary School District in Mesa.

Pam Kulinna, a faculty member at Arizona State University (ASU) in Physical Education.

Liane Bowles an elementary Physical Education teacher in Chandler.

Margaret Tate with the Arizona Department of Health Services (DHS).

Bob Pangrazi spent 40 years in education, including 30 years at ASU, and retired a year and a half ago, and is a consultant for a number of national companies, and the President's Council on Physical Fitness and Sports.

Harold Magalnick, pediatrician on the Committee for School Health for the American Academy of Pediatrics.

Barbara Leff, Arizona State Senator.

Kimberly Babea with Flowing Wells Elementary School.

Ken Cameron, Director of Research and Evaluation with the Glendale Union High School District, also a Physical Education educator.

Jennal Johnson, nurse practitioner, who specializes in diabetes and is the parent of an eighth grader.

PRESENTATIONS

The New Physical Education

Dr. Robert Pangrazi, Consultant on Physical Fitness and Sports, gave a power point presentation and explained the statistics on children and their activity levels. He explained that although there are many good Physical Education (P.E.) classes in Arizona, those classes should be mainly for teaching of skills. Due to infrequency of these classes, something else needs to be put together to help start the habits of activity in students. Dr. Pangrazi stated that instead of concentrating on children exercising twice a week in P.E. class, things can be done to keep students active throughout the day. He described a pilot program he started in Mesa, Arizona. At three schools in Mesa he brought the principals and teachers together to involve everyone in the program. For students who stay in one classroom for multiple subjects, he recommends that between subjects the teachers will have various three minute activities to engage the children in a short activity approximately every hour. He also recommends an activity aide that is to encourage and help the students do various activities during their recess periods. In other words, instead of a half hour activity session twice a week, it is much better to add various smaller activities throughout each day. He also explained that habits such as these can stay with children and help keep them more active further on in their lives. He explained that instead of just concentrating on P.E. classes, what needs to be addressed is the whole school environment. He also pointed out that his program is less costly than trying to expand the P.E. programs in all the schools.

Pamela Kulinna, Physical Education Faculty Member, Arizona State University (ASU) distributed three handouts: The National Association for Sport and Physical Education, What Constitutes a Quality Physical Education Program (Attachment A), Healthy and Ready to Learn (Attachment B), and Quality Physical Education Taught by Qualified Physical Education Teachers (Attachment C). She explained that Attachment A lists what constitutes a quality physical education program, Attachment B addresses physical activity and physical education in the school setting, and Attachment C is the hard copy of the slide presentation she showed to the Committee. She explained that the goal of physical education is to develop physically educated individuals that have the knowledge, skills, attitudes and behaviors to be physically active for a lifetime. She discussed the components of a high quality physical education program. Ms. Kulinna explained that the Centers for Disease Control (CDC) have also set out standards such

as a student teacher ratio comparable to other content areas. She said that the CDC has also recommended certain amounts of time for recesses and involvement levels. Ms. Kulinna stated that in order to have a quality physical education program you need a qualified physical education teacher. She spoke of the national standards that teachers need to meet and that there is a board that offers a Master Teaching Certificate in Physical Education. She discussed the need for physical education teachers to continue learning and have the opportunities to do in-service continued learning along with teachers in all other content areas. Ms. Kulinna said she did not have the exact number of teachers who are certified to teach and how many actually have physical education certificates.

Dr. Pangrazi mentioned that, in Mesa, many of the charter schools do not have physical education or sports programs. He said that those schools often come to public schools to fill that need.

Art Harding, Legislative Liaison, Arizona Department of Education (ADE) explained the survey his department compiled. The survey was sent out to all the schools, but not all of them could submit their answers due to technical problems. Mr. Harding stated that he had received a lot of emails and phone calls inquiring about the survey, which shows interest in the survey. He reviewed the survey questions with the Committee. Mr. Harding explained the benefits of owning the data from the survey.

Shannon Harding, American Heart Association distributed the following handouts and explained the information they provided:

- The Obesity Epidemic - the Centers for Disease Control (CDC), (Attachment D).
- NCPPA News – National Coalition for Promoting Physical Activity (Attachment E).
- Recent State Policies/Activities – Education Commission of the States (Attachment F).
- Physical Education Report and Recommendations – Florida Department of Education (Attachment G).
- Report of the Florida Governor’s Task Force on the Obesity Epidemic (Attachment H).
- Physical Activity Programs for Children and Teens – Florida Department of Health (Attachment I).
- Childhood Obesity – 2005 Update and Overview of Policy Options – National Conference of State Legislatures (Attachment J).
- Conclusion (Attachment K).
- Analysis of F as in Fat (Attachment L).

DISCUSSION

Representative Anderson announced that no one was signed up for public testimony. He also said the committee would take a few minutes to discuss and decide what next step the committee should take. He then asked if nutrition was a part of the pilot program Dr. Pangrazi is working with in Mesa.

Dr. Pangrazi explained that the district nutrition is guiding that part of the program. The nutritional part of the program involves experimental lunches and no snacks that are not healthy,

from home or school. Dr. Pangrazi explained that his model program involves six schools; three schools are using the program and three schools are control schools.

Mr. Hiemstra recommended that the committee look to the Florida model that gives the school districts the opportunity to adopt a policy above minimal standards. He said that schools would be more accepting of a program they had a hand in creating.

Ms. Johnson requested that the committee specify that charter schools be included in any mandates. She noted that charter schools are not included in many requirements of the state's school systems.

Dr. Magalnick expressed concerns about not having any consistency if schools are allowed to develop their own programs. He stressed the need for a minimal standard.

Representative Anderson asked if P.E. is a certain number of minutes, a certain number of days a week, but a physical activity program encourages activity throughout the day, are both needed.

Dr. Pangrazi explained that physical education is about skill development and the knowledge that it takes to keep your body health. He stated that he believes physical education is a subset of a healthy and active school, like nutrition, sun safety, and physical activity.

Senator Leff asked if someone could get information on tracking any correlation between the lack of activity in and out of the classroom and the increase of children being diagnosed and needing medication.

Liane Bowles stated that she likes the South Carolina model that phases in gradually increasing their mandate. She said she likes Dr. Pangrazi's approach. She explained that she sees physical education as learning the skills and concepts and physical activity time like a lab in a science class where you go out and practice those skills.

Mr. Hiemstra stated that the committee should really talk to teachers to get their input. He asked for a breakdown of the cost of potential solutions to the problem. He invited Dr. Pangrazi to come to his school and do a presentation to his staff.

Dr. Pangrazi said he would be happy to go out and do more presentations. He stated that in the three schools in his model everyone, even the teachers, were on board because they feel it helps the kids in other areas of school. He stated that the only thing the teachers are asked to do is the two to three minutes breaks in the classroom without equipment.

Mr. Hiemstra asked about the funding for the Mesa schools.

Dr. Pangrazi explained that they figure about \$6,000 a year. He said when broken down it averages out to be about one-tenth of a teacher.

Mr. Koury stressed that funding needs to be seriously looked at. He wanted to stress that when putting together the standards, what is needed is to look at the standards realistically.

Dr. Cameron stated that there needs to be coordination and oversight between the Committee, the Department of Education and the schools. He said that there needs to be an evaluation program in place.

Ms. Kulinna said that she believes there could be a comprehensive program that would include an educational format and still give the districts some flexibility. She said that the National Standards for physical education teachers should be included.

Ms. Mejia stressed the need for professional development for physical education teachers. She said that maybe the Department of Education could look into that.

Dr. Magalnick stated that first the committee should see what programs are already available through DHS and how they can be incorporated into the Department of Education's programs to have collaboration.

Ms. Tate said that if the committee would like she would have someone from DHS present their programs and some funding ideas.

Senator Leff pointed out that there are private groups that would be willing to donate items for physical activity and education. She said it would be foolish to turn their backs on donations.

Ms. Johnson mentioned that pharmaceutical companies supply pedometers for free to her work in the diabetes field.

Dr. Magalnick said that he would like to see what the insurance industry is looking to do in the area of donations and such.

Representative Anderson asked if a side-by-side comparison of the known programs could be made up for the committee.

Senator Leff said that there seems to be a common thread among many of the states. That common thread seems to be the National Standards. She said the committee does not need to look at duplicate programs. She also asked if anyone knows or could get information on what federal funding might be available.

Ms. Tate said that she would include various funding sources in the presentation that DHS will do for the next meeting.

Representative Anderson said in wrapping up this meeting that for the next meeting the Committee should expect to have the surveys back from the Arizona Department of Education with all the data compiled. He said that the Department of Health Services will put together a presentation on programs and funding.

The Committee set a tentative date of October 19, 2005 at 2:00 p.m. for the next meeting.

There being no further business, the meeting was adjourned at 4:21 p.m.

Respectfully submitted,

Shelley Ponce
Committee Secretary

(Tapes and attachments on file in the Secretary of the Senate's Office/Resource Center, Room 115.)

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NASPE National Association for Sport & Physical Education
NASPE Sets the Standard

AAHPERD
 American Alliance for
 Healthy Physical Educ
 Recreation and Dance

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What Constitutes a Quality Physical Education Program?

The National Association for Sport and Physical Education (NASPE) believes that every student in our nation's schools, from kindergarten through grade 12, should have the opportunity to participate in quality physical education. It is the unique role of quality physical education programs to develop the health-related fitness, physical competence, and cognitive understanding about physical activity for all students so that they can adopt healthy and physically active lifestyles. Today's quality physical education programs are important because they provide learning experiences that meet the developmental needs of youngsters, which help improve a child's mental alertness, academic performance, readiness to learn and enthusiasm for learning.

According to NASPE guidelines, a high quality physical education program includes the following components: opportunity to learn, meaningful content and appropriate instruction. Each of these areas is outlined in detail in NASPE's quality physical education (QPE) documents which range from the National Standards for Physical Education to Appropriate Practice Documents, Opportunity to Learn Documents and the Assessment Series. Books can be ordered online at www.aahperd.org/naspe or call 1-800-321-0789.

Opportunity to Learn:

- Instructional periods totaling 150 minutes per week (elementary) and 225 minutes per week (middle and secondary school)
- Qualified physical education specialist providing a developmentally appropriate program
- Adequate equipment and facilities

Meaningful Content:

- Instruction in a variety of motor skills that are designed to enhance the physical, mental, and social/emotional development of every child
- Fitness education and assessment to help children understand, improve and/or maintain their physical well-being
- Development of cognitive concepts about motor skill and fitness
- Opportunities to improve their emerging social and cooperative skills and gain a multi-cultural perspective
- Promotion of regular amounts of appropriate physical activity now and throughout life

Appropriate Instruction:

- Full inclusion of all students
- Maximum practice opportunities for class activities
- Well-designed lessons that facilitate student learning
- Out of school assignments that support learning and practice
- No physical activity for punishment
- Uses regular assessment to monitor and reinforce student learning

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ATTACHMENT A

HEALTHY and Ready to Learn

Research shows that nutrition and physical activity affect student academic achievement.

David Satcher

Remember when children came home from school and played outside before dinner? When fast food was a novel treat, and soft drinks came in a cup small enough for a child to hold in one hand? When kids walked or rode their bikes to school and went home for lunch?

Things have changed in recent decades. Students no longer go home for lunch, restaurant serving sizes have expanded along with customers' waistlines, and many children—out of desire or necessity—stay indoors watching television or playing computer games. Only 2 percent of school-age children in the United States consume the recommended daily number of servings from all five major food groups (U.S. Department of Agriculture, 1994–1996). Schools have changed, too, selling candy, chips, and soda while offering fewer opportunities for students to be physically active.

During the last two decades, many school systems have abolished recess and cut back on physical education and extracurricular sports. According to the

American Association for the Child's Right to Play, an estimated 20 percent of all elementary schools in the United States have dropped recess in favor of more classroom time (Tyre, 2004). Fewer than 25 percent of children in the United States get at least 30 minutes of *any kind* of daily physical activity (International Life Sciences Institute, 1997), and fewer than 30 percent of U.S. high school students attend physical education class every day (Centers for Disease Control and Prevention, 1999). Not surprisingly, these cultural shifts have resulted in a marked decline in children's health.

Today, 9 million children in the United States are overweight—triple the number in 1980 (Ogden, Flegal, Carroll, & Johnson, 2002). Poor nutrition and sedentary lifestyles are the root causes. The incidence of overweight in children is much higher among African American and Latino children than in other groups (Hoelscher et al., 2004; Thorpe et al., 2004).

Overweight and obesity are not just cosmetic issues—they are health issues. Childhood weight problems can lead to

elevated blood pressure and cholesterol, joint problems, Type II diabetes, gallbladder disease, asthma, depression, and anxiety (U.S. Department of Health and Human Services, 2001). Severely overweight children miss four times as much school as normal-weight children and often suffer from depression, anxiety disorders, and isolation from their peers (Schwimmer, Burwinkle, & Varni, 2003). These problems often continue into adulthood, with 70–80 percent of overweight children and adolescents becoming obese adults.

A Wake-Up Call to Schools

Schools can be a powerful catalyst for change when it comes to preventing and reducing overweight and obesity.



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The school setting is a great equalizer, providing all students and families—regardless of ethnicity, socioeconomic status, or level of education—with the same access to good nutrition and physical activity. Because children also teach their parents, important lessons learned at school can help the entire family.

In 2004, the nonprofit organization Action for Healthy Kids released a special report identifying the link among the factors of poor nutrition, inactivity, and academic achievement (2004). It is a wake-up call to schools: Improving children's health likely improves school performance.

The relationship is based on substantial research. Well-nourished students

tend to be better students, whereas poorly nourished students tend to demonstrate weaker academic performance and score lower on standardized achievement tests. The majority of U.S. children are not eating a balanced, nutrient-rich diet. Inadequate consumption of key food groups deprives children of essential vitamins, minerals, fats, and proteins necessary for optimum cognitive function (Tufts University School of Nutrition, 1995). Children who suffer from poor nutrition during the brain's most formative years score much lower on tests of vocabulary, reading comprehension, arithmetic, and general knowledge (Brown & Pollitt, 1996). In a 1989 study, 4th graders with the lowest amount of protein in their diets showed the lowest achievement test scores (School Nutrition Association). A 2001 study revealed that 6- to 11-year-old children from food-insufficient families had significantly lower arithmetic scores and were more likely to repeat a grade (Alaimo, Olson, & Frongillo). Even skipping breakfast has been shown to adversely affect student achievement on problem-solving tests (Pollitt, Leibel, & Greenfield, 1991).

That nutrition affects academic achievement comes as no revelation. After all, as children we were told to eat our breakfast before leaving for school. What may come as a surprise, however, is that physical activity also plays an important role in students' performance—even when it uses time that is normally set aside for academics.

Students who participate in daily physical education exhibit better attendance, a more positive attitude toward

school, and superior academic performance (National Association for Sport and Physical Education & Council of Physical Education for Children, 2001). Two studies demonstrated that providing more time for physical activity—by reducing class time—can lead to increased test scores, particularly in the area of mathematics (Shephard, 1997; Shephard et al., 1984). Another study linked physical activity programs to stronger academic achievement; increased concentration; and improved math, reading, and writing test scores (Symons, Cinelli, James, & Groff, 1997). The President's Council on Physical Fitness and Sports states that

Evidence suggests that time spent in physical education does not decrease learning in other subjects. Youth who spend less time in other subjects to allow for regular physical education have been shown to do equally well or better in academic classes. (1999)

The California Department of Education analyzed results of student physical fitness testing in 2001 and compared them with the same students' scores on the Stanford Achievement Test (SAT-9). The analysis showed that higher academic achievement correlated strongly with higher levels of fitness at each of the three grade levels measured (grades 5, 7, and 9). The relationship was greatest in mathematics: Girls in the higher fitness levels demonstrated higher achievement than males at similar fitness levels (2004).

Healthy Change

Educators across the United States are facilitating changes at the state, district, and school levels to improve student

Arizona Healthy School Environment Model Policy

Following are some guidelines for physical activity adapted from the Arizona Healthy School Environment Model Policy, modeled after the National Association of State Boards of Education (NASBE) sample policy.

Recommendations for Physical Activity

- Offer physical education courses in an environment in which students learn, practice, and are assessed on developmentally appropriate motor skills, social skills, and knowledge.
- Provide students with at least 60 minutes of physical activity on all or most days of the week.
- Discourage extended periods of inactivity (periods of two or more hours).
- Provide at least 150 minutes each week of physical education classes for elementary school students and at least 225 minutes each week for middle and high school students for the entire school year.
- Ensure that students are moderately to vigorously active in physical education classes for at least 50 percent of the time.

Encouraging Lifetime Physical Activity

- Provide daily recess periods of at least 20 minutes for all elementary school students.
- Provide physical activity breaks during classroom hours.
- Encourage parents and community members to institute programs that support physical activity, such as a walk-to-school program.

The complete model policy is available at www.actionforhealthykids.org.



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health. Collaborating in teams as part of the Action for Healthy Kids initiative, they are creating and distributing nutritional guidelines, educating policymakers, helping to develop school wellness policies, instituting changes in vending and other noncafeteria food sales, creating school health councils, and improving health education. The teams are successful because they are inclusive and grassroots, representing administrators, teachers, health professionals, community leaders, parents, and students.

The Arizona Action for Healthy Kids team worked in cooperation with the Arizona Department of Education and USDA Team Nutrition to create and implement a model healthy school policy in eight pilot schools (see "Arizona Healthy School Environment Model Policy"). The policy addresses food-service operation, nutrition education, food choices at school, physical education, and a healthy school environment. To facilitate

implementation, each pilot school received \$5,000–\$10,000 as part of a USDA Team Nutrition grant. Among other improvements, participating schools replaced low- or no-nutrient foods with more healthful items, such as water, juice, low-fat milk, fruits, and vegetables.

The pilot study found no negative impacts on vending machine or cafeteria sales once healthier options were offered. In fact, sales in some schools increased with the more healthful selections. The Healthy Food Sales and Schools Act, which has been introduced in the Arizona legislature, proposes that all schools be required to implement nutrition standards on the basis of those recommended in the initial Healthy School Environment Model Policy created by Arizona Action for Healthy Kids. A bill addressing physical education standards has also been introduced.

Several states have worked to create and disseminate nutritional standards

for schools. In Idaho, the Action for Healthy Kids team developed "Idaho Recommendations for Promoting a Healthy School Nutrition Environment." The guidelines recommend that all foods and beverages available on school campuses and at school events meet USDA dietary guidelines. The state superintendent of public instruction and the state board of education endorsed the team's recommendations and distributed them to school district leaders throughout the state. Sixteen of Delaware's 19 school districts agreed to adopt health standards, beginning with the 2004–2005 school year. In Massachusetts, statewide distribution of nutritional guidelines will affect 1 million students.

Students themselves are concerned about these issues. In a 2002 poll conducted by Action for Healthy Kids, 81 percent of the 1,308 student leaders surveyed believed that schools should make eating healthy a priority, and 72 percent believed that schools should make physical activity more of a priority. In Massachusetts, the Action for Healthy Kids team is working in collaboration with the Department of Education student advisory group to educate student governments on creating nutrition and physical activity policies.

The team approach can often open doors for especially committed individuals, providing support and resources that wouldn't otherwise be available. For example, a minigrant provided by the Minnesota Action for Healthy Kids team enabled a physical education teacher to enhance her school's physical education program by weaving more activity into students' daily lives. Jo Zimmel started using pedometers at Garlough Elementary School in West St. Paul, Minnesota, to obtain a baseline measure of kids' activity levels while at school. She developed strategies to increase activity during school

hours and taught kids as well as teachers how to find time for extra movement each day. At the conclusion of the program, Zimmel will evaluate the students' progress, using the pedometers to measure their post-activity levels.

Schools need not act alone to tackle the issues of good nutrition and physical activity. They can encourage community partners to sponsor an extracurricular fitness program or draw on grandparents to help start a walking club. Schools will benefit as both achievement scores and attendance improve. Students will benefit as they perform and behave better in school and experience more energy and fewer illnesses. Schools not only need to

Resources for Improving the School Health Environment

■ Model school-based approaches, a school wellness policy tool, statistics relating to childhood nutrition and physical activity, and information on joining a state team are available at www.actionforhealthykids.org.

■ For an overview of issues relating to foods and beverages in schools and for strategies to improve school health environments, read *Making It Happen: School Nutrition Success Stories*. To download a free copy, go to www.cdc.gov/healthyyouth.

■ The Centers for Disease Control and Prevention offer a tool that schools can use to identify the strengths and weaknesses of nutrition policies and programs and to develop an action plan for improvement. *School Health Index: A Self-Assessment and Planning Guide* is available at <http://apps.nccd.cdc.gov/shi>.

AIMS OF EDUCATION

Education . . . is a process of living and not a preparation for future living.

—John Dewey

teach good eating habits and healthy levels of physical activity, but they also need to model and reinforce these habits every day throughout the building.

What Schools Can Do

Schools can take a number of steps to promote student health.

Form a school health advisory council. Principals, superintendents, and board members do not have to change schools on their own. Instead, they need to engage a group of volunteers—including parents, students, medical professionals, business professionals, school administrators, youth group leaders, and law enforcement officials—to help conceive and implement nutrition education and physical activity programs that make sense for the local school community.

Develop a comprehensive wellness policy. With the 2004 passage of the Child Nutrition Reauthorization Act, all schools that participate in federal school meal programs will need to develop a local wellness policy. This road map needs to include guidelines for all foods and beverages sold in school as well as guidelines for teaching students how to make good decisions about what they eat. The policy must include goals for increasing students' physical activity and school strategies for promoting student wellness. Policies should include recommendations for

staff training on developing nutrition education curriculums and for new approaches in physical education. In addition, policies should address program implementation, monitoring, and evaluation.

Integrate physical activity and nutrition education into the regular school day. Teachers can start classes with fun calisthenics or dancing and can incorporate nutrition information and physical activity into reading, writing, math, science, and other subjects.

Incorporate nutrition education, healthy snacks, and physical activity into after-school programs. Students who stay after school can do more than finish home-

Schools can be a powerful catalyst for change when it comes to preventing and reducing overweight and obesity.

work, play board games, and watch television. Time should be set aside for physical activities that engage students in fun and innovative ways. In addition, after-school programs should provide access to healthful snacks and hands-on opportunities to learn about food and nutrition. Turnkey programs, including one sponsored by Action for Healthy Kids and the National Football League, can assist schools with implementation.

Encourage staff to model healthy lifestyles. A wellness program for faculty and staff can enhance school effectiveness by strengthening morale, reducing absenteeism, and cutting insurance costs. By exercising regularly and eating healthful foods, staff can also set a powerful example for students.

By taking these fundamental steps, schools can create healthy environments and, at the same time, promote student achievement. ■

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**Quality Physical Education
Taught by Qualified Physical
Education Teachers**
Dr. Pamela Hodges Kulinna

Handouts

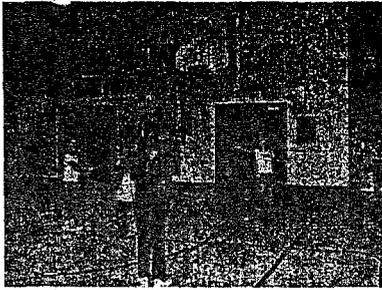
- One page handout from the National Organization (AAHPERD) on Quality Physical Education Programs
- Article written by David Satcher (former Surgeon General)
- Copies of my slides

**National Standards for Physical
Education**

"Physical activity is critical to the development and maintenance of good health.

The goal of physical education is to develop **physically educated individuals** who have the knowledge, skills, and confidence to enjoy a lifetime of healthful physical activity."

Physical Education maximizes physical activity and skill practice for all children



A Physically Educated Person:

Standard 1: Demonstrates competency in motor skills and movement patterns needed to perform a variety of physical activities.

Standard 2: Demonstrates understanding of movement concepts, principles, strategies, and tactics as they apply to the learning and performance of physical activities.

Standard 3: Participates regularly in physical activity.

Standard 4: Achieves and maintains a health-enhancing level of physical fitness.

Standard 5: Exhibits responsible personal and social behavior that respects self and others in physical activity settings.

Standard 6: Values physical activity for health, enjoyment, challenge, self-expression, and/or social interaction.

National Association for Sport and Physical Education. Moving into the future: National standards for physical education (2nd Ed.). Boston: WCB/McGraw-Hill; 2005.

3 key components of high quality Physical Education Programs

Opportunity to Learn

- 150 minutes a week elementary; 225 minutes a week secondary
- taught by a qualified physical education specialist
- adequate equipment/facilities

Meaningful Content

- motor skills, physical activity/fitness education, cognitive concepts, social/cooperative skills, activities promoting a multi-cultural perspective

Appropriate Instruction

- full inclusion
- maximum participation
- well designed lessons
- out of school assignments
- no PA as punishment
- uses assessment

(NASPE, 2005)

Additional guidelines for quality Physical Education from the CDC

- Student teacher ratio comparable to other classes
- Moderate-vigorous physical activity for 50% of class time
- **Sequential** physical education curriculum that is consistent with National Standards
- In addition to Physical Education:
 - Elementary: students should have at least 20 minutes of recess
 - Secondary: at least 50% of students should be enrolled in activity-based extracurricular course offerings (e.g., walking club, karate)

CDC's School Health Index

Qualified Physical Education Teachers

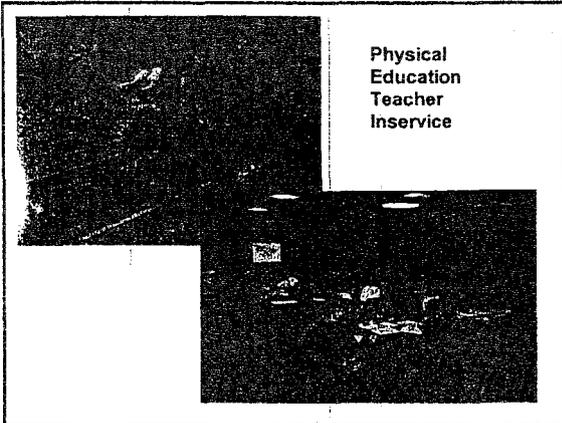
- National Standards for Beginning Physical Education Teachers (NASPE, 2003)
- NBPTS – offers a Master Teacher certificate for Physical Education

Beginning Teacher Standards

- "Beginning Physical Education Teachers must possess knowledge, performance, and dispositional characteristics necessary to positively influence, generate, or facilitate student learning in physical education."

Beginning Physical Education Teaching Standards with Performance Levels

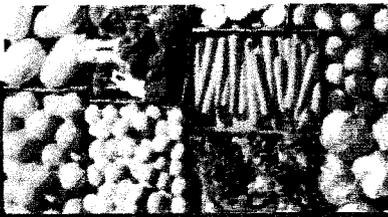
1. Content knowledge
2. Growth and Development
3. Diverse Learners
4. Management and Motivation
5. Communication
6. Planning and Instruction
7. Student Assessment
8. Reflection
9. Technology
10. Collaboration



Physical Education Teachers

- **Arizona Physical Education Teachers** are licensed secondary teachers with a K-12 endorsement in Physical Education. Paid on same scale as all other teachers.
- **Retooling?** Teachers can go back to a university and obtain a Physical Education endorsement in 30 credit hours.

Thank you



and Arizona Students

What is the problem?

The 2003 Youth Risk Behavior Survey indicates that among Arizona high school students:

Overweight

- 11% are overweight.¹
- 14% are at risk for becoming overweight.²

Unhealthy Dietary Behaviors

- 80% ate fewer than five servings of fruits and vegetables per day during the past 7 days.

Physical Inactivity

- 33% had not participated in sufficient vigorous physical activity during the past 7 days.³
- 71% had not participated in sufficient moderate physical activity during the past 7 days.⁴
- 8% had not participated in any vigorous or moderate physical activity during the past 7 days.
- 62% were not enrolled in a physical education class.
- 77% did not attend physical education class daily.

What are the solutions?

Better health education • More physical education and physical activity • Healthier school environments

What is the status?

The 2004 School Health Profiles indicates that among Arizona middle/junior and senior high schools:

Health Education

- Among schools that require health education, 26% require students to take two or more health education courses.
- 67% of schools teach 15 critical nutrition and dietary topics in a required health education course.
- 45% of schools teach 12 critical physical activity topics in a required health education course

Physical Education and Physical Activity

- Among schools that require physical education, 58% require students to take two or more physical education courses.
- 69% of schools with a required physical education course do not exempt students from taking physical education because they are enrolled in other courses or participate in sports or school activities.
- 69% of schools offer students intramural activities or physical activity clubs.

School Environment

Among schools that allow students to purchase snack foods or beverages from vending machines or at the school store, canteen, or snack bar —

- 43% have fruits or vegetables available for purchase.
- 71% have 100% fruit juice available for purchase.
- 91% have bottled water available for purchase.
- 6% do not allow students to purchase candy; high fat snacks; or soft drinks, sports drinks, or fruit drinks that are not 100% juice during school lunch periods.

¹ ≥95th percentile for BMI by age and sex

² ≥85th percentile but < 95th percentile for BMI by age and sex

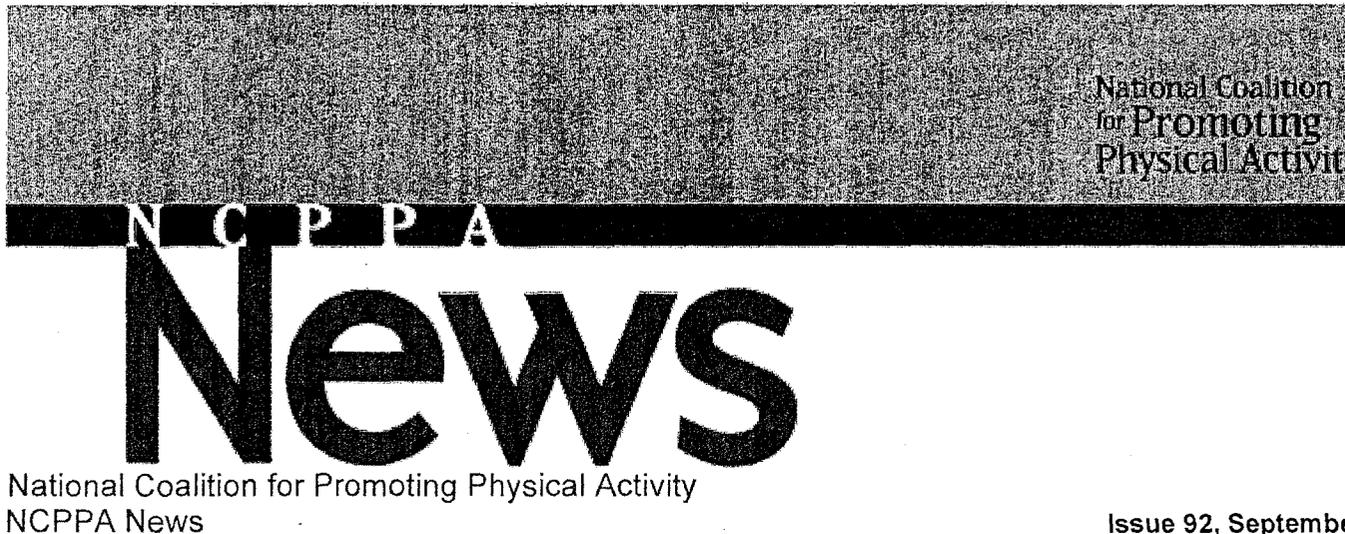
³ Participating in physical activities that made them sweat and breathe hard for ≥20 minutes on <3 of the past 7 days

⁴ Participating in physical activities that did not make them sweat and breathe hard for ≥30 minutes on <5 of the past 7 days



Shannon Harper

From: eNewsletter-owner@mail.ncppa.org on behalf of Sheila Franklin [sfranklin@ncppa.org]
Sent: Friday, September 16, 2005 9:51 AM
To: enewsletter@ncppa.org
Subject: [E-Newsletter] NCPPA News 9/15/05

**Physical Activity Fact**

Researchers found that people living in areas with high levels of greenery were three times more likely to be active than those living in less green places. Their likelihood of being overweight or obese was also lower. *Graffiti, Greenery, And Obesity In Adults: Secondary Analysis Of European Cross Sectional Study*. Anne; Macintyre, Sally ; Bonnefoy, Xavier, *British Medical Journal*, doi:10.1136/bmj.38575.664549.F7 (published August 2005)

News**News****Crete-Monee 201u Approaches Physical Education In New Way**

<http://www.starnewspapers.com/star/spnews/cup/04-cup1.htm>

The Star, September 4, 2005

Crete-Monee School District 201U has a creative way to comply with a new law requiring daily physical education, along with art and music, was eliminated in the elementary levels last year due to the district's budget. This summer, Gov. Rod Blagojevich signed House Bill 1540, requiring all students to "daily engage in court activity." There are some exceptions for high school students, but none for elementary. "We know that 20% of kids come to school obese," State Rep. Roger Eddy, R-Hutsonville, a co-sponsor of the bill, said. Eddy said that physical fitness is a goal of the bill, as many children are obese from early education on. Crete Elementary School teacher Laura Hirsch helped create PEP, or Positive Exercise and Play, as an alternative to traditional forms of physical education classes. ***More...***

An Injured Jogger and Reluctant Pool Novice Finds Even She Can Be a Masters Swimmer

<http://www.washingtonpost.com/wp-dyn/content/article/2005/09/05/AR2005090501054.html>

The Washington Post, September 6, 2005

Swimming was not my first choice as a fitness activity. A devoted jogger for 15 years, I never thought I'd re

got from my nightly runs. I took pride in my fitness and discipline. Swimming was not a sport I associated with until my back went out. It started with slight pain in a hamstring. Thinking it was a muscle pull, I did more. The pain moved down the back of my leg and up into my lower back. Soon I couldn't sit for long, and running got worse. Visits to numerous doctors produced varying theories -- a bulging disc, sciatica, fibromyalgia -- but no diagnosis. I tried muscle relaxers, anti-inflammatories, physical therapy, all in search of a return to running. I was crushed. So I stopped running and started eating. And ate my way into a 20-pound weight gain. Self-pity and lack of exercise are a dangerous combination. [More...](#)

Boy Sues For Place On Football Team -His Weight Was A Pound Over Limit

http://www.freep.com/news/locmac/weightsuit8e_20050908.htm

Detroit Free Press, September 8, 2005

Kyle St. Peter doesn't know the last time he touched a slice of pizza, a chicken nugget or a candy bar. It isn't much, but for an 11-year-old, it can be a huge sacrifice. And he did that, and more, to lose weight to play in the Heights flag football league. When he tipped the scales at 151 pounds at a last-chance weigh-in in mid-August, he was a pound over the limit, but 13 less than he weighed Aug. 2 -- he hoped he would find some way back onto the field.

Get Kids More Physically Active, Especially Girls

http://www.freep.com/voices/editorials/ephysed12e_20050912.htm

Detroit Free Press, September 12, 2005

Obesity has become such a plague on the children of this state, it is ridiculous that Michigan has not joined other states that make gym classes mandatory for every child, every year.

Right now, the state requires only that its public schools offer a health and a physical education course. But school boards have been too slow to mandate the classes at each grade level, which would signal that they recognize the danger of young people of getting into the habit of regular physical activity.

True, mandatory gym is a luxury most school districts can't afford; many are fortunate just to be able to comply with the weak Michigan law. But they ought to start entertaining creative ways to engage children in fitness activities to counter the dangerous trend toward obesity. [More...](#)

McDonald's Backs Phys Ed Program In Us Schools

http://news.yahoo.com/s/nm/20050913/hl_nm/mcdonalds_dc%3b_ylt=A9FJqa5P.CdDSIABzQXVJRIF%3b_ylu=X3oDMTBiMW04NW9mBHNIYwMIJVRPUCUI

Yahoo News, September 13, 2005

McDonald's Corp. on Monday said it is sponsoring a physical education program that will appear in one-third of elementary schools, the chain's latest move to combat critics who blame its burgers and fries for expanding childhood obesity. "McDonald's Passport to Play" will launch in 31,000 schools this fall, reaching an expected 7 million children through five, the company said. The move is part of McDonald's so-called "Balanced Lifestyles" initiative, an effort to promote physical activity and nutrition and deflect harmful claims that its food is unhealthy and fattening. "If you do the right thing and you are giving back to your community, you benefit as a brand," Bill Lamar, chief marketing officer for McDonald's USA, said in an interview. The idea for the program came as McDonald's was looking for a way to deliver its "Balanced Lifestyles" message to children and families through schools, Lamar added. [More...](#)

HEART SMART(tm): Kids Require Regular Exercise To Keep Them From Obesity

http://www.freep.com/features/food/heart13e_20050913.htm

Detroit Free Press, September 13, 2005

According to government surveys, 15.3 percent of children ages 6-11 in the United States are overweight. The arteries of overweight children act like those of middle-aged smokers, increasing the risk of an early heart attack. The damage can be reversed through eating a healthy diet and getting regular exercise, but almost half of children do not get enough regular exercise. Adopting a healthy lifestyle in childhood is the most cost-effective and practical way to reduce the risk of disease in adulthood. The American Heart Association recommends that all children age 2 and older should get at least 30 minutes of enjoyable, moderate-intensity activities every day. They should also perform at least one vigorous physical activity at least three to four days each week to achieve and maintain a good level of cardiovascular (heart and lung) fitness. [More...](#)

Schools Can Make Children Healthier, Study Finds

<http://www.post-gazette.com/pg/05256/570386.stm>

Pittsburgh Post-Gazette, September 13, 2005

Schools aren't to blame for the problem of childhood obesity, but they can make a difference by how they promote exercise, according to Pennsylvania Advocates for Nutrition and Activity. The statewide coalition of groups that promotes healthy eating and activity today is releasing a report showing that schools have made progress from turning off vending machines to enabling more students to walk to school -- in the first two years of its Healthy Zone Schools Program, which provides technical and other assistance. Participation grew from 9

2003-04 to 1,133 schools in 2004-05. While that is about a third of the public schools in Pennsylvania, the of urban, rural and suburban schools, with at least some from about two-thirds of the state's 501 districts. I except Sullivan had schools that participated. [More...](#)

Councilor Calls For Smoke-Free Trails

<http://pressherald.maine.com/news/local/050914smoking.shtml>

Portland Press Herald, September 14, 2005

Portland City Councilor Peter O'Donnell remembers inhaling a cloud of cigarette smoke as he jogged the E Promenade on a Sunday morning. "A guy was standing there," O'Donnell said, "a Styrofoam cup of coffee a cigarette in the other." It happens often enough, judging from complaints O'Donnell has heard from othe wants to put a stop to it. On Monday, the City Council will consider his proposal to ban smoking on recreat the Eastern and Western proms and Back Cove. The meeting is scheduled for 7 p.m. at City Hall. The bai on state laws against smoking in public buildings, restaurants and bars. It also would augment a council re last year, that designated city athletic facilities, playgrounds and assembly areas "tobacco-free zones," wh discourage smoking. [More...](#)

Attorney Makes A Good Case For Running

<http://www.dailypress.com/news/local/dp-85332sy0sep15,0,1574966.story?coll=dp-features-wmsbg>

The Daily Press, September 15, 2005

A family man, Lawrence Luck hits the pavement as often as he can to live a longer, fuller life. Lawrence L run by his son's side in the Rock 'n' Roll Half Marathon. But since his son is only 5, he'll have to wait a few week, Luck participated in his fifth consecutive Rock 'n' Roll Half Marathon in Virginia Beach. What started prepare for the Marine Corps Marathon in October in Washington, D.C., is now personal. "A reason that I' at age 50, I have a 5-year-old and a 2-year-old," said Luck, an attorney. "Doing this, I'll be around longer ir present to enjoy them longer than I would otherwise. "I think it's a good thing for them to be physically acti running as something enjoyable, an opportunity to get out of an office that's focused on mental activity and physical activity. [More...](#)

Special Alert **Special Alert**

Announcing- The KaBOOM! University of Play Oct. 27-29, Foster City, CA!

The *KaBOOM! University of Play (U Play!)* is an annual, award-winning playground and skatepark planning conference that has educated thousands of community-organizers on playspace design and planning, fun and public relations. *U Play!* is more than a workshop, it's a fun-filled, KaBOOM! experience led by the ex play! Join community and civic leaders, child-care providers and parents from around the country October Foster City, CA for 2 1/2 days of learning, inspiration, fun and even a hands-on build experience at a comr build playground event. Early-Bird registration discount deadline is September 23, 2005; registration dead October 14, 2005. Learn more at www.kaboom.org, e-mail Uplay@kaboom.org or contact Hahn Le at 2 6072.

Call for Abstracts-Social Marketing in Public Health

The 16th Annual National Conference on Social Marketing in Public Health invites abstract submissions to considered for oral presentations. The conference will be held, June 21-24, 2006 at the Sheraton Sand Ke on Clearwater Beach, Florida. The content should demonstrate the application of social marketing strateg health behavior change and improvement of public health practice. Abstracts may describe contributions 1 completed work involving social marketing, or work in progress that will be substantially completed by Jun particular interest are applications of social marketing strategies that address the health objectives for the promote social marketing within one's own agency, demonstrate the sustainability and/or self-sufficiency o marketing programs, or demonstrate cultural competency. Other suggested topics include, but are not lim use of social marketing to ameliorate health problems and issues of special populations; evaluation of soci marketing programs and strategies; social marketing approaches to defining health problems; examining s health problems, and changing health practices in school and community settings, and training and educal social marketing.

Grants

Grants

NEW! Nickelodeon Announces Giveaway Program to Encourage Healthy Play

Deadline for Applications: Rolling, until May 31, 2006

Children's television network Nickelodeon has announced the launch of the 2005-2006 "Let's Just Play" Giveaway Program, where the network will distribute more than \$1 million from September 2005 to June 2006. The "Let's Just Play" Giveaway offers kids around the United States the opportunity to take action and enter for a chance to win \$5,000 to improve their school or community program's fitness resources. The initiative is part of the network's year-long pro-social "Let's Just Play" campaign, which encourages healthy and active lifestyles for kids and families. Nickelodeon will award a minimum of 20 winners per month with \$5,000 each to help facilitate play in their communities. To enter, kids (6-15 years of age), partnering with teachers and other community-based leaders, tell Nickelodeon what they need for their public or private school (grades K-9) or community-based after-school organization to help them play better and why, and give three reasons why play is important. Once the entries are completed and mailed to Nickelodeon, the winners will be randomly selected and announced via Nickelodeon.com at the top of each month, beginning in September. As a partner of the "Let's Just Play" Giveaway, the Kellogg Company (<http://www.kellogg.com>) will match a Nickelodeon grant of \$100,000 for September, enabling the network to award funding to 40 winners that month.

US SOCCER FOUNDATION OPENS ON-LINE APPLICATION PROCESS FOR 2006 GRANTS PROGRAM

Deadlines for Mandatory Letters of Intent: September 30, 2005

Deadlines for Applications: December 1, 2005

The U.S. Soccer Foundation was established in 1994 to manage the surplus funds generated by the 1994 World Cup held in the United States. The annual grant-making program is at the core of the Foundation. Since it was established, almost \$20 million dollars in cash, equipment, and services have been awarded to more than 350 grantees. Foundation grantees represent the entire spectrum of soccer communities from the small rural club to the U.S. Soccer Federation, the National Governing Body for the sport of soccer in the United States. The focus for the Foundation's grants will be on proposals that develop players, referees, and coaches through programs, field enhancement, and the Foundation's All Conditions Fields Program, with special emphasis on the economically disadvantaged in soccer.

Second Round of Mattel Children's Foundation Domestic Grants to Benefit Children's Health and Welfare

Deadline for Applications: September 30, 2005

The Mattel Children's Foundation, a philanthropic program of Mattel, Inc., has announced the deadline for applications for a second round of grants. Charitable organizations in the U.S. that directly serve children in need are eligible for grants ranging between \$5,000 and \$25,000. Applicant organizations must have 501(c)(3) public charity status under the Internal Revenue Code. Funding priority will be given to organizations or programs that directly address a locally defined need impacting children in need (particularly children between the ages of 0 and 13) and that align with Mattel's philanthropic priorities, which include health, education, and girls' empowerment. Types of grants that will be considered: 1) program-specific grants -- i.e., funding for the launch of new program or expansion of existing programs; and 2) core operating support -- i.e., support of organizations to sustain their programs.

Enhancing Adolescent Health Promotion Across Multiple High Risk Behaviors

Deadline for Applications: October 1, 2005

The National Institute of Nursing Research (NINR), the National Institute on Alcohol Abuse and Alcoholism (NIAAA), and the National Heart, Lung, and Blood Institute (NHLBI) invite applications for research related to health promotion/risk reduction among adolescents. Specifically, this announcement seeks applications that 1) identify determinants of health promoting and health compromising behaviors among adolescents and 2) identify and evaluate interventions and methodologies that show promise for improving the health profiles of adolescents by assessing, preventing, reducing and/or ameliorating high-risk behaviors. Investigators responding to this announcement are required to target two or more of the high-risk behaviors in a single application. RESEARCH OBJECTIVES Risky behaviors are defined as activities that have the potential for some type of loss. Parallel areas related to health promotion among adolescents outlined in Healthy People 2010 and The Youth Risk Behavior Surveillance System (YRBSS), this PA will place emphasis on six priority health risk behaviors that contribute to leading causes of mortality and morbidity among youth and adults. These six health risk behaviors include: tobacco use, unhealthy dietary behaviors, inadequate physical activity, alcohol and other drug use, sexual behavior, and unintentional (accidents) and intentional behaviors (firearm related injuries). You may submit an application if your institution has any of the following characteristics:

- For-profit or non-profit organizations

- Public or private institutions, such as universities, colleges, hospitals, and laboratories
- Units of State and local governments
- Eligible agencies of the Federal government
- Domestic or foreign
- Faith based or community based organizations

Any individual with the skills, knowledge, and resources necessary to carry out the proposed research is invited to work with their institution to develop an application for support. Individuals from underrepresented racial and ethnic groups as well as individuals with disabilities are always encouraged to apply for NIH programs

Robert Wood Johnson Foundation Announces Scholars in Health Policy Research Program

Deadline for Applications: October 21, 2005

The Robert Wood Johnson Foundation's Scholars in Health Policy Research Program is intended to help a new generation of creative thinkers in health policy research within the disciplines of economics, political science, and sociology. Each year, the program selects up to twelve highly qualified individuals for two-year fellowships at three nationally prominent universities -- Harvard University, the University of California at Berkeley (in collaboration with the University of California at San Francisco), and the University of Michigan -- with the goal that they will seek to make important research contributions to future health policy in the United States. Scholars will work closely with faculty from the social sciences -- as well as from medicine, public health, and public policy -- in an environment conducive to disciplinary and multidisciplinary learning and collaborative research. Those selected scholars will have access to the full range of university resources, including libraries, computers, database research support, and will receive stipends from their university of \$77,000 for the first year and \$80,000 for the second year. Recent graduates of doctoral programs in economics, political science, and sociology, including those currently in graduate school, are invited to apply. Preference will be given to applicants who have not previously worked in health policy research. Applicants must have received a doctoral degree after January 2001 but no later than July 2005. Applicants must be U.S. citizens or have permanent residency status at the time of application.

USTA Tennis & Education Foundation Grant

Deadline for Applications: October 15, March 15

The USTA Tennis & Education Foundation (USTA T&EF) awards grants to not-for-profit organizations that support efforts in tennis and education to help disadvantaged, at-risk youth and people with disabilities. Considerable support is given to NJTL programs and those following the "Aces for Kids" model. The USTA Tennis & Education Foundation makes grants to 501(c)(3) organizations that demonstrate their commitment to the mission of "building lives through tennis and education." The Foundation does not fund programs that do not include tennis and education as part of their mission; administrative staff salaries or capital projects.

2006 National Trails Fund Grants

Deadlines for Applications: November 1, 2005 (postmark)

The National Trails Fund (NTF), created in 1998, is the only privately supported national grants program that provides funding to grassroots organizations working to establish, protect, and maintain foot trails in America. The American Hiking Society is now accepting applications for the 2006 National Trails Fund. Awards will range from \$500 to \$10,000 per project.

Bikes Belong Coalition Grants

Deadlines for Applications: 2005 Quarterly Deadlines: November 28

The Bikes Belong Coalition welcomes grant applications from organizations and agencies within the United States that are committed to putting more people on bicycles more often. The Bikes Belong Grants Program functions in three categories: Facility; Education or Capacity Building. For the education and facility categories, Bikes Belong will accept applications from non-profit organizations; and from public agencies and departments at the national, state, regional, and local level. For the capacity building category, Bikes Belong will only fund organizations whose mission is expressly related to bicycle advocacy. If your organization is new, and you are not yet legally a non-profit organization, you may submit an application with the assistance of another non-profit that has agreed to serve as your fiscal agent. You will need to provide a letter from the fiscal sponsor outlining their role in the project.

GoGirlGo! Grant and Educational Program Supports Girls Sports and Educational Program

Deadline for Applications: November 30, 2005

The Women's Sports Foundation's GoGirlGo! Grant and Educational Program seeks to maximize the use of sports/physical activity as an educational intervention and social asset in order to enhance the wellness of girls and young women.

they navigate between childhood and early womanhood. GoGirlGo! is dedicated to the development and girls' sports/physical activity programs that combine athletic instruction and programming with the delivery of educational information by qualified adults aimed at reducing risk behaviors that threaten the health and advancement of girls in third to eighth grade. The program provides financial assistance to sports and physical activity programs seeking to add new or expanded program participation opportunities for an underserved population of girls, particularly economically disadvantaged girls and/or girls from populations with high incidence of health-risk behaviors. Applicants must meet the following requirements: demonstrated ability to deliver girls' sports/physical activity programming to girls in third to eighth grade; delivery of a minimum eight-week sport/physical activity program with preference given to organizations working consistently with girls throughout the year; leadership administered by experienced and committed adults; 501(c)(3) program status or nonprofit status. If a program does not have nonprofit status, it may be possible to receive a grant under support of a local fiscal authority and commitment to implement the GoGirlGo! educational curriculum, including completion of a post-project survey.

2006 Brick Awards For Youth Community Leaders

Deadline for Applications: November 1, 2005

Each year, Do Something, a national not-for-profit organization that inspires young people to believe that anything is possible, honors six outstanding leaders age 18 and under and three outstanding leaders between the ages of 19 and 25 who use their talents to take action that measurably strengthens their communities in the areas of education, building, health, or the environment. Each of the 18 and under winners is awarded a \$5,000 higher education scholarship and a \$5,000 community grant, to be directed by the award winner to the not-for-profit organization of their choice. Winners in the 19 to 25 category each receive a \$10,000 community grant. Do Something accepts online applications for the program, and will not accept nomination applications (applicants must apply on their own behalf).

Foundation for Child Development Invites Proposals for Young Scholars Program

Deadline For Applications: November 1, 2005

The FCD Young Scholars Program (YSP) provides approximately four fellowships of up to \$150,000 each for a maximum period of three-years to study issues affecting the development of young immigrant children in the United States. The program aims to stimulate basic and policy-relevant research focused on the early education, health, and well-being of immigrant children from birth to age ten, particularly those who are living in low-income families. The FCD is particularly interested in research that can inform policies regarding the health and education of young newcomer children. Proposals may include research designs for an empirical study, pilot work for a larger scale research project that will seek additional funding from other public and private funders, or analysis of data previously collected. The fellowships will support individual scholarship by junior faculty who at the time of application are untenured or have received tenure within the past four years. Applicants must hold a Ph.D. or equivalent in one of the behavioral and social sciences or in an allied professional field (e.g., public policy, health, education, among others). Applicants must have earned their Ph.D. within the last fifteen years prior to 30, 2005 (seven years from completion of residency for MDs).

Women's Sport's Foundation's Offers Dorothy Harris Endowed Scholarship

Deadline for Applications: December 31, 2005

The Dorothy Harris Endowed Scholarship was established in honor of Dr. Dorothy Harris, pioneer and advocate for women in sports. Its goal is to assist women graduate students pursuing one of the following fields of study: Education, Sport Management, Sport Psychology or Sport Sociology. Any female, American citizen or legal permanent resident graduate student who will be pursuing a full-time course of study at an accredited postgraduate institution during the 2006-2007 school year is eligible to apply for the Scholarship. If you will not have tuition expenses in the 2006-2007 school year, you are not eligible for this scholarship. Scholarship checks will be issued in the summer of 2007.

Women's Sport's Foundation's Community Action Program (CAP) Spread the Word

Deadline for Applications: December 31, 2005

The Women's Sport's Foundation's Community Action Program (CAP) encourages communities to support and celebrate the grassroots participation and achievements of girls and women in sports and fitness. This program brings together community leaders from youth-serving agencies, sports organizations, schools and businesses to promote girls' and women's sports in their local community. "Spread the Word" is designed to help CAPs accomplish the Foundation's mission of increasing awareness through the distribution of educational and promotional materials at their events.

Aetna Foundation Regional Community Health Grants Program

Deadline for Applications: Various

The Aetna Foundation, a philanthropic program of Hartford-based Aetna, is inviting proposals for its Regional Community Health Grants Program.

Community Health Grants Program. The program provides funding focused on reducing disparities in health among racial and ethnic populations in eligible geographic areas. In 2005, Aetna will devote up to \$2.6 million in regional initiatives to address this issue. Grant requests ranging from \$25,000 to \$50,000 that address diabetes initiatives targeting individuals and families with prevention and healthy behavior modification messages to combat the growing incidence of type 2 diabetes in children and adults; and screening, education. Only nonprofit organizations with either 501(c)(3) designation or de facto tax-exempt status. Proposals are accepted only through the Aetna Foundation's online system. See the foundation's Web site for complete program guidelines, eligible geographic areas, regional deadlines, and application procedures.

Athletics and Wellness Support Grants

Deadline for Applications: Rolling Quarterly Reviews.

Finish Line, an athletic retailer specializing in brand name footwear, apparel and accessories, supports athletic wellness programs located in communities where their stores are located. The foundation funds projects for 501(c)(3) organizations; have a primary focus on assisting children and young adults 18 and under; focus on athletics or wellness; and benefit communities in which Finish Line stores are located. Finish Line has stores in 45 states. To find a store near you, visit <http://www.finishline.com/store/index.jsp>.

Cal Ripken Sr. Foundation Grants

Deadline for Applications: November 15; February 15; and April 15.

The Cal Ripken, Sr. Foundation provides a variety of grants to community groups and schools that meet or exceed requirements, in order to support the growth of youth baseball and softball, as well as promote character education for children. Please visit the title link for information about the grants and downloadable applications.

Blue Cross Blue Shield of Michigan Foundation Announces Community Health Improvement Matching Grants Program

Deadline for Applications: Accepted continually; Reviewed quarterly

The Blue Cross Blue Shield of Michigan Foundation (<http://www.bcbsm.com/foundation/>) has announced a Community Health Improvement Matching Grants Program to support nonprofit organizations addressing community health issues in Michigan. The foundation has allocated \$750,000 for this program and is offering matching grants up to \$25,000 per year for up to two years to implement programs designed to address one or more community health issues; enhance consumer awareness and change unhealthy behavior; and enhance quality of care, contain costs, and promote appropriate and necessary access to care. While consideration will be given to all initiatives designed to provide innovative solutions to important community health issues, priority will be given to proposals that focus on the following: clinical depression; domestic abuse; patient safety; and access to health care for the uninsured. The BCBSM Foundation's Community Health Improvement Matching Grants Program aligns with the Blue Cross Blue Shield of Michigan and Blue Care Network's Social Mission Health Initiative on depression, domestic abuse, physical activity and nutrition, and access to healthcare.

Amateur Athletic Union Flag Football Grants

Deadline for Applications: None Listed

The development of grassroots football relies heavily on the support and hard work of local youth agencies and volunteers. If your organization is a local chapter of the Amateur Athletic Union, you are qualified to apply for an Agency Grant, a small level grant, valued from \$500 to \$1,250, which recognizes local agencies for their contributions and strategies in the development of youth football, as well as innovative methods of using youth football programs as an effective teaching tool and positive motivator of young people. You may receive two grants per year if you apply for a fall and a spring program. If you are interested in applying for a grant to support your Flag Football program, follow the guidelines outlined in the grant proposal form found on their web site.

NIKE Bowerman Track Renovation Program

Deadline for Applications: Ongoing through May 31, 2009

The Bowerman Track Renovation Program provides matching cash grants to community-based, youth-oriented organizations that seek to refurbish or construct running tracks. The program distributes approximately \$2 million in matching grants each year. This 10 year, \$2 million program, administered by Nike's Community Affairs department, provides matching funds of up to \$50,000 to youth-oriented nonprofit organizations anywhere in the world. Organizations applying for the grant must demonstrate a need for running track refurbishment or construction.

- Grant recipients will provide track access to neighboring communities.
- Bowerman Track Renovation Program funds must be matched in some amount by other contributors agreed upon deadline.

Recipients of a Bowerman Track Renovation grant are encouraged, but not required, to use Nike Grind to resurface their track. Nike Grind material is made of recycled athletic shoes sliced and ground into rubber, providing a superior, environmentally conscious all-weather track surface. To date, nine Bowerman track owners have used Nike Grind in state-of-the-art track surfaces each consisting of approximately 75,000 recycled athletic shoes.

Rapides Foundation Re-Opens Walking Trail Mini-Grant Program

Deadline for Applications: Open

The Rapides Foundation funded twenty-seven walking trails from 1999-2004 throughout the foundation's Louisiana service area as a part of its mission to improve community health. The foundation has re-opened the program and is currently seeking to fund additional trails. The program is designed to promote regular exercise through the creation of publicly accessible walking trails in both urban and rural settings. The Walking Trail Mini-Grant Program provides support to nonprofit organizations for short-term projects that require no more than \$5,000 in funding support. Each award will be made for a year or less.

Touchstone Energy Co-op's Bright Ideas Education Grants for NC Teachers

Deadline for Applications: Various

North Carolina's Touchstone Energy Cooperatives (<http://www.ncemcs.com/>) have dedicated at least \$50 million to fund classroom-based projects through funding of the Bright Ideas Education Grant Program for 2005-2006. All North Carolina certified K-12 teachers are eligible for a Bright Ideas grant. The grants finance innovative and creative classroom projects that would otherwise go unfunded. The program has financed a variety of hands-on projects including activities in music, art, history, language, reading, science, career-planning, and information technology. Grants of up to \$2,000 are available.

NEW Resources

New Resources

Promoting Health and Preventing Obesity in After School Programs: Critical Issues to Consider, a paper by CANfit (California Adolescent Nutrition and Fitness Program) examines opportunities for after school programs to help address the physical activity and nutrition needs of middle school-aged youth of color.

The Land and Water Conservation Fund (LWCF): Vital to the Future of U.S. Public Parks and Recreation: The National Recreation and Park Association has published a White Paper that summarizes the importance of the LWCF to all Americans and rebuts the justifications made in the 2006 budget proposed to Congress to partially eliminate this valuable program.

Active for Life Newsletter

The September issue of the Active For Life newsletter is now available.

The International Health, Racquet & Sportsclub Association Launches Get Active! Website

The International Health, Racquet & Sportsclub Association (IHRSA) has launched a companion website to its bi-monthly consumer publication titled "Get Active". Visitors to the site will be able to access current and past "Get Active!" articles, relevant health information and exercise and nutrition tips. Visitors will also be able to send personalized e-mail to their elected U.S. representatives on several important health and fitness related issues.

The CDC Releases State Obesity Fact Sheets

These fact sheets contain results from weighted Youth Risk Behavior Survey (YRBS) and School Health Assessment and Program Review (SHAPE) data related to obesity among youth. The YRBS results describe the problem by identifying the percent of school students who are overweight, engage in unhealthy dietary behaviors, or are physically inactive. The results describe characteristics of health education, physical education, opportunities for physical activity, and the school environment among middle/junior and senior high schools that may help address the problem.

American College of Preventive Medicine Position Statement on Physical Activity Counseling

The American College of Preventive Medicine (ACPM) maintains that primary care providers should counsel about physical activity during routine patient visits. The organization suggests that interventions of only two minutes can be effective.

October Issue of Preventing Chronic Disease

The October issue of *Preventing Chronic Disease (PCD)* is now available. One of the featured articles del

community walking campaign in Missouri.

Events

Events

- **Action for Healthy Kids (AFHK) 2005 Healthy Schools Summit**, September 27-28, 2005, Washin
- **America On the Move Day of Action**, September 28, 2005, This nationwide event is back for a se in 2005 and is designed to encourage Americans to adopt a healthy lifestyle. It's a day for all Ameri take the pledge to: Move more - add an extra 2000 steps to your day and Eat smart - choose a wise eat100 fewer calories
- **Working Together to Create Great (Walking and Bicycling) Communities**; October 9-11, 2005 Chicago Radisson Hotel. This is the Association of Pedestrian and Bicycle Professionals' (APBP) 4 Professional Development Seminar. The theme of the seminar will be "Working Together to Create (Walking and Bicycling) Communities." The opening plenary will be organized around the great stri the City of Chicago has made for cyclists during the past decade.
- **International Walk to School Week**, October 3-7, 2005 (International Walk to School Day is Octob Register your event and visit your country's website at the above link.
- **Walking for Health: Measurement and Research Issues and Challenges**, October 13-15, 2005, Champaign, IL. Exchange the latest research programs in walking and gain training on programs, measurement techniques and statistical methods.
- **National Recreation and Parks Association Annual Congress and Exposition**, October 18-22, Antonio, TX
- **Cooper Institute Conference on Childhood Obesity**, October 27-29, 2005, Dallas, TX. The scier program will focus on current interventions; energy balance; diet, physical activity; and physical inac the genetic influences, neuroscience, and developmental factors that underlie these topics. The prc consist of lectures, discussions, and poster sessions.
- **KaBOOM! University of Play (U Play!)**, October 27-29, Foster City, *U Play* is an annual, award-wi playground and skatepark planning conference that has educated thousands of community-organiz playspace design and planning, fundraising, and public relations. Early-Bird registration discount d September 23, 2005; registration deadline is October 14, 2005. Visit the above link for more inform call 202.464.6072.
- **Active Aging 2005: The tipping point**, December 1- 3 2005, Orlando, Florida. Are you thinking of fitness and wellness center for older adults? Do you currently run a fitness or wellness facility for pe 50-plus? If you answered yes to either question, you won't want to miss the *Active Aging 2005 Com The tipping point*.
- **Obesity, Lifestyle, and Cardiovascular Disease Symposium**, January 18-20, 2006, Grand Hyatt Washington, DC. This two-day symposium, sponsored by the American Heart Association, will add challenge of obesity by focusing on the prevention and the treatment of this disease. The overall gc conference is to contribute to credible scientific efforts to reduce the prevalence of obesity and allev effects on cardiovascular disease.

Other Physical Activity E-Newsletters & Listservs

Other Physical Activity E-Newsletters & Listservs

P.E.4LIFE

P.E.4LIFE is a national advocacy organization established to promote quality, daily physical education pro our nation's children in grades K-12. To sign up for their free monthly E-Newsletter and receive the latest i the Physical Education for Progress (PEP) Grants, National P.E. Day and their innovative P.E.4LIFE Institi <http://www.pe4life.org>

Presidents Council on Physical Fitness Listserv and Newsletter

Stay up to date with the events and interests of The President's Council on Physical Fitness (PCPFS) with PCPFSNews. This quarterly publication features information on the council's members, events, and prog including the President's Challenge.

Shape Up America! Newsletter

Shape Up America!

Shape Up America! is a national initiative involving a broad-based coalition of industry, medical/health, nut physical fitness, and related organizations and experts to promote healthy weight and increased physical a America. They publish an electronic newsletter.

Community Sports & Health E-News

National Recreation and Park Association Join the NRPA Community Sports & Health Network and rec monthly E-Newsletter, as well as timely alerts and breaking news on programs, partnerships, and NRPA happenings. Learn more about program grants, technical assistance and training opportunities, and other offered through NRPA's National Partnerships.

Bikeleague News

League of American Bicyclists

BikeLeague News is the e-newsletter of the League of American Bicyclists, which promotes bicycling for fu and transportation, and works through advocacy and education for a bicycle-friendly America. Visit www.bikeleague.org to subscribe. With a current membership of 300,000 affiliated cyclists, including 40,00 individuals and 600 organizations, the League works to bring better bicycling to your community through it: Friendly Community program.

Pedestrian And Bicycle Information Center Monthly Newsletter

This newsletter shares information about health and safety, engineering, advocacy, education, enforcemen access and mobility with those interested in pedestrian and bicycle issues, including planners, engineers, citizens, advocates, educators, and the health-community.

NASPE-Talk

National Association for Sport and Physical Education

To exchange the latest news, ideas, and trends about physical education, physical activity and sport.

Physical Activity And Fitness Research Digest

The President's Council on Physical Fitness and Sports

The Digest discusses current research in the field of physical activity and fitness. To subscribe [click here](#) once on the page, click on E-mail Lists.

NCPPA Activity Advocate

National Coalition for Promoting Physical Activity

Activity Advocate covers the latest Capitol Hill actions as well as what's happening in statehouses across t on physical activity and related issues. To subscribe, send an email to info@ncppa.org with the word "sul the subject line. For more information go to www.ncppa.org

Transfer

Transfer is the Surface Transportation Policy Project's Electronic Update. Readers are invited to reprint ne items; proper citation is appreciated.

Centerlines

National Center for Bicycling & Walking

A free e-newsletter for individuals who are working to encourage more walking and bicycling as well as wa bikeable communities.

Health Behavior Information Transfer (HABIT)

Center for the Advancement of Health

This monthly electronic newsletter provides updates on funding and policy issues, opportunities to take action, summaries of articles of interest to the health and behavior research community.

Maternal & Child Health (MCH) Alert

The National Center for Education in Maternal and Child Health (NCEMCH) *MCH Alert* is a free weekly electronic newsletter. It provides timely MCH research and findings, policy developments, information about recently published articles, new programs and initiatives, and conferences to researchers, policymakers, advocates, teachers, and students.

The National Center on Physical Activity and Disability Email List

National Center for Physical Activity and Disability

A free monthly electronic newsletter published by NCPAD - the National Center On Physical Activity And Disability

University of South Carolina Physical Activity and Public Health On-Line Network

Prevention Research Center, University of South Carolina

The University of South Carolina Prevention Research Center maintains the *Physical Activity and Public Health On-Line Network*. This listserv is dedicated to advancing public health approaches to promoting physical activity, creating a national network of public health practitioners, researchers and interested others.

ExerciseDaily! ExerciseDaily! provides year-around research news and links on the latest discoveries in nutrition & fitness. Their goal is to create an information source in a practical format that is freely & readily available to the public at large. ExerciseDaily!'s articles are adapted from news releases and research findings of scientists at universities and institutions around the globe.

USC Prevention Research Center Notes

Prevention Research Center, University of South Carolina

The USC Prevention Research Center Notes is an electronic newsletter with current information about physical activity and public health. The newsletter includes brief updates of current journal articles, notices of new research materials, and resources, current policy issues, recommended websites, and updates from national organizations.

Strategic Alliance E-Newsletter

The Strategic Alliance is reframing the debate on nutrition and physical activity in California, away from a focus on individual choice and lifestyle, towards one of environment and corporate and government responsibility. The Strategic Alliance compiles regular updates to keep people informed about upcoming events and relevant nutrition and physical activity issues. Interest in the Strategic Alliance is continually growing and we hope these periodic newsletters will help everyone stay in the loop.

Prevention Institute E-Updates

Prevention Institute is a non-profit national center dedicated to improving community health and well-being by building momentum for effective primary prevention. Since its founding in 1997, the organization has focused on nutrition and physical activity, the environment and health, injury and violence prevention, health disparities, and youth development. As part of our work to build momentum for primary prevention, Prevention Institute disseminates periodic e-Updates on prevention-related activities, resources, and events.

Contact sfranklin@ncppa.org with your physical activity news and comments.

Recent State Policies/Activities

Physical Education

Education Commission of the States • 700 Broadway, Suite 1200 • Denver, CO 80203-3460 • 303.299.3600 • fax 303.296.8332 • www.ecs.org

The following summary includes policies enacted since 2000. Summaries are collected from state Web sites, state newsletters, *StateNet* and *Westlaw*. *StateNet* and *Westlaw* descriptions reflect the content of bills as introduced and may not reflect changes made during the legislative process. To assure that this information reaches you in a timely manner, minimal attention has been paid to style (capitalization, punctuation) or format.

State	Status/Date	Level	Summary
IL	Signed into law 07/2005	pre-K-12	<p>A physical education course of study must include a developmentally planned and sequenced that fosters the development of movement skills, enhances health-related fitness, increase knowledge, offers direct opportunities to learn how to work cooperatively in a group setting and encourages healthy habits and attitudes for a healthy lifestyle. A physical education course of study must provide students with an opportunity for an appropriate amount of daily physical activity. A physical education course of study must be part of the regular school curriculum and not extra-curricular or organization. Provides for excusing students in grades 9-12 who must use that time for other education services.</p> <p>http://www.ilga.gov/legislation/publicacts/fulltext.asp?Name=094-0189 Title: H.B. 1540 Source: http://www.ilga.gov/legislation</p>
LA	Signed into law 06/2005	pre-K-12	<p>Beginning in the 2006-2007 school year and thereafter, requires all public elementary schools to:</p> <ol style="list-style-type: none"> (1) Encourage and motivate children of all physical abilities to participate in physical activity for the purpose of allowing all children to reach their full potential as individuals. (2) Improve physical activity and fitness in schools by encouraging innovative physical education programs that consist of physical exertion of a moderate to vigorous intensity level. (3) Improve nutrition in children by making available during the day snacks with higher nutritional value. (4) Increase the awareness of children about the importance of physical activity and its benefits and the effects of both on improving health. (5) Encourage increased parental awareness of the positive impact on health and fitness of the activity level of children and of improving nutrition. (6) Encourage daily physical activity and the development of lifelong patterns of physical activity. (7) Encourage the enjoyment of physical activity and the improvement of nutritional awareness. <p>http://www.legis.state.la.us/billdata/streamdocument.asp?did=319230 Title: S.B. 146 (Sections K-12) Source: www.legis.state.la.us</p>
CO	Vetoed 06/2005	pre-K-12	<p>Establishes the statewide physical education recognition program to recognize and reward physical education teachers in schools and physical education teachers meeting established criteria. Creates the statewide physical education recognition board to establish objective criteria for a tiered rating to a physical education program or teacher, solicit and review applications for recognition, rate physical education programs and recommend annual monetary awards to the highest rated school programs and an outstanding physical education teacher in an elementary school, middle school and high school. Provides that if the act is not received at least \$50,000 by June 1, 2006, repeals the act effective July 1, 2006. If the act is repealed earlier, repeals the act effective July 1, 2010.</p>

http://www.leg.state.co.us/Clics2005a/csl.nsf/fsbillcont3/2EC8168D1E92E69187256F:Open&file=1237_enr.pdf

Title: H.B. 1237

Source: www.leg.state.co.us

- SC Signed into law 06/2005 pre-K-12 Adds Chapter 10, entitled Physical Education, School Health Services, and Nutritional Applies to elementary schools. Sets the amount of physical education instruction that kindergarten through fifth grade must receive each week on a phased-in basis. Provides education teacher to student ratio. Provides for a measure of effectiveness of the physical program and for a physical education activity director. Provides for the appropriation of licensed nurses in elementary schools. Provides for a coordinated school health model assessment program for school health programs. Provides for the minimum amount of school students must have to eat lunch. Provides for the establishment of a district level coordinated school health advisory council and sets its powers and duties. Provides nutrition component for the health curriculum. Implementation is contingent on funding http://www.scstatehouse.net/sess116_2005-2006/prever/3499_20050525.htm
Title: H.B. 3499
Source: <http://www.scstatehouse.net>
- TX Signed into law 06/2005 pre-K-12 From bill analysis: This Act allows for the expansion of physical activity requirements in junior high schools, up to the eighth grade; encourages the use of nationally recognized physical education guidelines; directs the reporting of information on physical activity, Advisory Councils, and compliance with guidelines on vending machines, food service products; directs coordinated health programs approved by the Texas Education Agency; the Department of Agriculture guidelines on foods of minimal nutritional value; and reissues Health Advisory Committee. <http://www.capitol.state.tx.us/cgi-bin/tlo/textframe.cmd?LEG=79&SESS=R&CHAMBER=S&BILLTYPE=B&BILLSUFFIX=00042&VERSION=5>
Title: S.B. 42
Source: <http://www.capitol.state.tx.us>
- TN SIGNED BY GOVERNOR. 05/2005 pre-K-12 Resolution urging the state board, in cooperation with all local education agencies, to implement a curriculum of instruction which will enable students to adopt and maintain healthy habits. <http://www.legislature.state.tn.us/bills/currentqa/BILL/HJR0088.pdf>
Title: H.J.R. 88
Source: <http://www.legislature.state.tn.us>
- WV Signed into law 05/2005 pre-K-12 Adds a new article, designated §5-1E-1, §5-1E-2, §5-1E-3, §5-1E-4 and §5-1E-5; and reenacts §18-2-6a and §18-2-7a, all relating to promoting healthy lifestyles; creating a Office in the Department of Education and the Arts; establishing the functions of the C special revenue account; establishing a voluntary menu labeling program; requiring physical education in the schools; and encouraging the use of health foods and beverages in the vending machines in schools. Requires the state department to establish the requirement that each child in schools of this state actively participates in physical education classes during the school year of his or her ability as follows:
(1) Kindergarten to and including grade five. -- Not less than thirty minutes of physical education including physical exercise and age appropriate physical activities; for not less than thirty minutes of physical education including physical exercise and age appropriate physical activities, each school day of the school year.
(2) Grade six to and including grade eight. -- Not less than one full period of physical education including physical exercise and age appropriate physical activities, each school day of the school year.
(3) Grade nine to and including grade twelve. -- Not less than one full course credit of physical education, including physical exercise and age appropriate physical activities which shall be required for graduation and the opportunity to enroll in an elective lifetime physical education course. http://www.legis.state.wv.us/Bill_Text_HTML/2005_SESSIONS/RS/BILLS/HB2816%2
Title: H.B. 2816
Source: <http://www.legis.state.wv.us>
- OK Signed into law 04/2005 pre-K-12 Requires the state board of education to establish a physical activity program for public schools in the fifth grade, which each school district may elect to implement. The program is to be based on the fitness challenges adopted by the Presidents Council on Physical Fitness and Sports.

to incorporate a "Walk Across Oklahoma" activity plan for school districts. The plan is that challenge students to complete virtual walks across the state and at the same time geography, and history about various locations in the state. http://www2.lsb.state.ok.us/06HB/hb1647_enr.rtf
 Title: H.B. 1647
 Source: <http://www2.lsb.state.ok.us>

AR Signed into law 04/2005 pre-K-12 Includes salaries or supplemental pay for staff for organized physical activity courses. Act 660 of 2005 in the definitions of "Athletic expenditures" and "Interscholastic expenditures."
<http://www.arkleg.state.ar.us/ftproot/bills/2005/public/hb2916.pdf>
 Title: H.B. 2916
 Source: www.arkleg.state.ar.us

AZ Signed into law 04/2005 pre-K-12 Establishes the mandatory physical education implementation task force. Sets forth the membership. Requires the task force to develop an implementation plan that will result in a physical education program in grades K-8 and that takes the following into consideration: (1) Program content; (2) Program constraints, including the length of the school day and school year; (3) Program cost; (4) National standards; (5) Staffing requirements; (6) Facilities and resource requirements; (7) Exemptions from a mandatory program both at the individual student and school level. Requires the implementation plan to include an appropriate timeline for achieving full implementation by a date certain and the development proposal for draft task force believes is necessary to successfully implement the proposed program. Report and implementation plan to be submitted to the governor and the legislature by 2005.
http://www.azleg.state.az.us/DocumentsForBill.asp?Bill_Number=2111
 Title: H.B. 2111
 Source: www.azleg.state.az.us

KS Signed into law 04/2005 pre-K-12 Requires the state board to develop nutrition guidelines for all foods and beverages for public school students during the school day. Requires the state board of education to state agencies, private foundations and other private entities in developing such guidelines particular attention to providing healthful foods and beverages, physical activities and with the goals of preventing and reducing childhood obesity. Requires local boards to develop guidelines when establishing the district's wellness policy.
<http://www.kslegislature.org/legsrv-bills/searchBillNumber.do>
 Title: S.B. 154
 Source: www.kslegislature.org

MD Signed into law 04/2005 pre-K-12 Requiring each county board of education to include the importance of physical activity instruction in health education; requiring all vending machines in public schools to have a device in accordance with specified policies.
<http://mlis.state.md.us/2005rs/bills/sb/sb0473e.pdf>
 Title: S.B. 473
 Source: StateNet

MD Signed into law 04/2005 pre-K-12 Requiring the State Department of Education to employ a full-time director of physical activity.
<http://mlis.state.md.us/2005rs/billfile/sb0233.htm>
 Title: S.B. 233
 Source: StateNet

OK Signed into law 04/2005 pre-K-12 Beginning with the 2006-2007 school year, the state board of Education must require, accreditation, that school districts provide to all students physical education programs including athletics. The state board must also require that public elementary schools provide instruction to students in full-day kindergarten and grades one through five, in physical education or other programs for a minimum of an average of sixty (60) minutes each week. Requires the

disseminate information to each school district on the benefits of physical education p strongly encourage districts to provide physical education instruction to students in gra twelve. Instruction in physical education is required to be aligned with the Priority Acar Skills as adopted by the State Board of Education. Encourages local boards to require complete two units or sets of competencies of physical and health education for gradu <http://www.sos.state.ok.us/documents/Legislation/50th/2005/1R/SB/312.pdf>

Title: S.B. 312

Source: <http://www2.lsb.state.ok.us>

VA Signed into pre- Clarifies that physical education is to include activities such as, but not limited to, card building, or stretching exercises, as appropriate. <http://leg1.state.va.us/cgi-bin/legp504051+ful+CHAP0350+pdf>

Title: S.B. 1130

Source: <http://leg1.state.va.us>

KY Signed into pre- Beginning with the 2006-2007 school year, requires each school to limit access to no each week to retail fast foods in the cafeteria, whether sold by contract, commercial v otherwise.

Requires every district to appoint a food service director who is responsible for the ma oversight of the food service program in the district; allows two or more contiguous dis "school food service area," in which a school food service director must be jointly sele participating superintendents to oversee the school food service area. Each school for must be certified as a "school food service and nutrition specialist" or certified by a Le issued by the American School Food Service Association within three years after this effect. Requires school cafeteria managers to annually receive at least two hours of cr in applied nutrition and healthy meal planning and preparation.

Defines "competitive food," "school day" and school-day-approved beverage." Defines approved beverage" as water, 100% fruit juice, lowfat milk, and any beverage that cor 10 grams of sugar per serving. Requires the state board to specify the minimum nutrit all foods and beverages sold outside the National School Breakfast and National Schc programs in vending machines, school stores, canteens, and a la carte cafeteria sales minimum nutritional standards to be based on the most recent edition of the United St Agriculture's Dietary Guidelines for Americans. Requires the state board rule to addre sugar, and fat content of the foods and beverages. Permits school districts to impose standards than the state board standards. Requires all schools to follow the state boa standards unless the school has obtained a waiver from the state board. Requires any by the state board to be reviewed on an annual basis.

Bars schools from selling competitive foods or beverages from the time of the arrival c at the school building until 30 minutes after the last lunch period. Allows only school-d beverages to be sold in elementary schools during the school day in vending machine canteens, or fundraisers that sell beverages by students, teachers, or groups on scho

Establishes fines and other sanctions for any public school that violates the school foc requirements in section 4 of this bill.

Requires each school food service director to annually assess school nutrition in the c written report to parents, the local school board, and school-based decision making cc must include:

- (a) An evaluation of compliance with the National School Breakfast and National Schc programs;
- (b) An evaluation of the availability of contracted fast foods or foods sold through com
- (c) A review of access to foods and beverages sold outside the National School Break School Lunch programs, including vending machines, school stores, canteens, and a sales;
- (d) A list of foods and beverages that are available to students, including the nutritione foods and beverages; and
- (e) Recommendations for improving the school nutrition environment.

Requires the state board to develop an assessment tool that each school district may physical activity environment. Requires the evaluation to be completed annually and r public at the same time as the school food service director's annual nutrition report. R board to discuss the findings of the nutrition report and physical activity report, seek p during a public meeting of the board, and annually hold an advertised public forum to improve school nutrition and physical activities in the school district.

Requires each school council of an elementary school to develop and implement a we includes moderate to vigorous physical activity each day and encourages healthy cho students. The policy may permit physical activity to be considered part of the instructi minutes per day, or 150 minutes per week. Each school council must adopt an assess an existing assessment program to annually determine each child's level of physical a the department to make available a list of available resources to carry out the provisio subsection, and to report annually to the Legislative Research Commission on how th providing physical activity under these requirements, and on the types of physical acti provided. The policy developed by the school council must comply with provisions req law, state law, or local board policy.

Bill summary, history and text: <http://lrc.ky.gov/RECORD/05RS/SB172.htm>

Fiscal note: <http://lrc.ky.gov/RECORD/05RS/SB172/FN.doc>

Title: S.B. 172

Source: lrc.ky.gov

ND To governor pre- Changes what each public and nonpublic high school must make available to each st approved by the superintendent of public instruction from one-half unit of health and o 03/2005 K-12 physical education during each school year, to just one-half unit of health and one-hal education.

<http://www.state.nd.us/lr/assembly/59-2005/bill-text/FAKI0200.pdf>

Title: H.B. 1048

Source: StateNet

AR Signed into pre- Defines "organized physical activity course." Beginning in the 2005-2006 school year, law 03/2005 K-12 grades 9-12 successfully completing an organized physical activity course meeting ce to earn .5 unit of physical education credit towards high school graduation. Specifies t limited to only the .5 unit of physical education credit for graduation for the organized i course, and that the student is not allowed any other credit toward graduation for that <http://www.arkleg.state.ar.us/ftproot/bills/2005/public/sb2.pdf>

Title: S.B. 2

Source: www.arkleg.state.ar.us

LA Signed into pre- Relates to the physical activity and nutrition of students. Identifies childhood obesity a law 07/2004 K-12 problem in Louisiana. Identifies benefits of regular physical activity and healthy eating purposes of this section are: (1) To promote, encourage, and motivate children of all p participate in physical activity for children to reach their full potential as individuals; (2) physical activity and fitness in schools by encouraging innovative physical education p consist of physical exertion of a moderate to vigorous intensity level; (3) To promote ir levels in children by providing for snacks with higher nutritional value during the schoo inform children and their parents about the importance of physical activity and improve effects of both on positive outcomes. (5) To increase parental awareness of their child fitness levels. (6) To promote daily physical activity, the enjoyment of physical activity, of nutritional levels and eating habits and the development of lifelong patterns of phys

Deletes existing provision that, beginning with the 2004-05 school year, schools servi grades K-6 provide at least thirty minutes of quality physical activity for students each Replaces with provision that in 2004-05 school year, schools serving children in such least thirty minutes of "quality moderate to vigorous" physical activity for students eve

Requires every public elementary school to annually report to its local board on compl provision. Also requires every local board to annually report to the state board on com provision. Requires suitably adapted physical activity to be included as part of the indi plans for students with chronic health problems, other disabling conditions or other sp preclude participation in regular physical activity.

Encourages secondary school students not enrolled in a physical education course to moderate to vigorous physical activity commensurate with student ability for at least 3

Requires various state agents, including the department of education and the departr hospitals, as well as the American Heart Association, to collaborate to develop an outi communication plan consisting of current information and research on health, nutritior education and fitness issues. This plan must be disseminated to every local public scl made available to parents and students.

Beginning with the 2004-05 school year, requires a public elementary or secondary sc each regional education service center region in the state to be annually identified for program of physical activity implemented at the school. As funds are available, require awards to be given these outstanding schools.

Allows any public school serving students in grades 7, 8, 9 or 10 to apply to participat pilot program to begin in the 2005-06 school year. Requires the state board to choose schools from each of the eight regional service districts to participate in the program, s equal geographic distribution. Identifies areas of study: (1) An annual assessment tha aspects of health-related fitness, rather than skill or agility, of the students in participat assessment of the changes in weight status of the students who are enrolled in partici who are receiving combined nutritional and physical activity intervention versus a nutr or physical activity intervention alone; and (3) The collection of individual baseline anc to measure the improvement of each individual student. No assessment shall compar another. Identifies state entities required to collaborate to develop the elements of the the recommendations for its implementation. Requires every school selected to partici program to provide a comprehensive report to the state board at the end of each schc effectiveness of the pilot program in accomplishing the pilot program objectives.

States that the pilot program established in this bill must in no way interfere with or req purpose, assessment or program implemented by the Governor's Council on Physical Sports.

http://www.legis.state.la.us/leg_docs/04RS/CVT7/OUT/0000LVUO.PDF

Title: S.B. 871

Source: www.legis.state.la.us

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|----|-------------------------|----------|---|
| VT | Signed into law 06/2004 | pre-K-12 | <p>The purpose of the act is to encourage wellness programs in Vermont public schools ; communities. Wellness programs will be designed to encourage life-long patterns of t regular physical exercise among Vermont citizens. Provides for physical activity progr education programs; provides for nutrition education; provides for assistance to schoc wellness; provides for a definition of nutritious foods. Requires the development of a n fitness and nutrition policy. http://www.leg.state.vt.us/docs/legdoc.cfm?URL=/docs/2004/acts/ACT161.HTM</p> <p>Title: H.B. 272</p> <p>Source: http://www.leg.state.vt.us</p> |
| FL | To governor 05/2004 | pre-K-12 | <p>Creates the "Middle School Reform Act;" provides definitions; prescribes program criti provides a timeline for implementation; requires an academic performance study of m students and schools with recommendations for increase in performance; requires scl plan to include rigorous reading requirement; provides for individual student plans; prc to academic improvement plans; adds criteria to the assessment process for instructic requires DOE to conduct study on physical education in public schools; requires scho implement mandatory physical education under certain circumstances.</p> <p>http://www.flsenate.gov/cgi-bin/view_page.pl?</p> |

[Tab=session&Submenu=1&FT=D&File=sb0354er.html&Directory=session/2004/Sena](#)
 Title: S.B. 354
 Source: Florida Legislative Web site

- AL Signed into law 05/2004 pre-K-12 Urges schools to provide instruction on healthy lifestyle choices including programs for education; urges restrictions on granting waivers for physical education.
<http://alisdb.legislature.state.al.us/acas/ACASLogin.asp>
 Title: S.J.R. 97
 Source: Alabama Legislative Web site
- VA Signed into law 04/2004 pre-K-12 Requires local boards to incorporate art, music, and physical education as a part of the program at the elementary school level, and to employ five elementary resource position students in kindergarten through grade five for art, music, and physical education.
<http://leg1.state.va.us/cgi-bin/legp504.exe?041+ful+CHAP0955>
 Title: H.B. 1014
 Source: leg1.state.va.us
- CA Signed into law 09/2003 pre-K-12 Requires the department of education to encourage K-12 schools to provide quality physical education that develops the knowledge, attitudes, skills, behavior, and motivation needed to be physically fit. Requires the department to encourage those schools to provide extracurricular physical education programs and clubs, and to encourage the use of school facilities for physical fitness programs. Authorizes test results to be given orally. This bill would delay until July 1, 2007, the requirement that a pupil pass the physical performance test as a condition of receiving the exemption.
http://www.leginfo.ca.gov/pub/bill/sen/sb_0051-0100/sb_78_bill_20030922_chaptered.html
 Title: S.B. 78
 Source: California Legislative Web site
- LA Signed into law 07/2003 pre-K-12 Starting in the 2004-05 school year and thereafter, requires every public school serving grades K-6 to offer students at least 30 minutes of quality physical activity every school day.
http://www.legis.state.la.us/leg_docs/03RS/CVT2/OUT/0000KT2Y.PDF
 Title: S.B. 398
 Source: www.legis.state.la.us

ME Signed into law 06/2003 pre-K-12 Requires the director of the office of substance abuse to review procedures for collecting alcohol use information, including a review of Washington State's "Healthy Youth Survey" report to legislature in fall 2003 with recommendations on specified areas. Requires the office of substance abuse to review the office's methods of preparing teachers and other staff for the Maine Youth Drug and Alcohol Use Survey in schools, to ensure that survey administrators are adequately prepared. Requires the director to collaborate with appropriate local districts to design a plan for training and coordinating administration of the 2004 survey, to be implemented in fall 2004.

Requires the commissioner of education to review the Project ALERT program and other prevention programs and prepare recommendations on whether these programs are available statewide and through the system of learning results, and to include a teacher training program. Requires commissioner to present such recommendations to the legislature.

Requires the commissioner of education to examine state standards and performance standards to determine whether standards on health and physical education adequately incorporate the principles and goals of the alcohol and drug use policies for student athletes as presented in the Youth Policy and Empowerment Project, and to propose changes to those standards if the commissioner determines that they do not adequately incorporate those principles and goals. Requires the commissioner to present the results of that review and those recommendations to the Advisory Council.

<http://www.mainelegislature.org/legis/bills/billdocs/LD042501.doc>
 Title: H.P. 333 (LD 425)
 Source: www.mainelegislature.org

- FL Rule Adoption 06/2003 pre-K-12 The current model for certification in physical education is replaced by a new comprehensive model for K-12, physical education certification area effective July 1, 2003 as adopted in Rule 6A-4.028, FLORIDA REG 27169 (SN) <http://fac.dos.state.fl.us/>
Title: FAC 6A-4.028
Source: StateNet
- AR Signed into law 04/2003 pre-K-12 Changes the requirement for physical education under Arkansas Code from students through grade 8; requires the district to provide assurance of compliance.
Title: S.B. 936
Source: Arkansas Legislative Web site
- MS Signed into law 03/2003 pre-K-12 Allows local boards to create a local school health/physical education advisory council to implement health and physical education instruction. Lists areas in which local school education councils may make recommendations and requires the local board to appoint a local council, with one person on the council representing each of 11 groups, including health care professionals and parents who are not employed by the district. Specifies that the coordinator employed by the state department of education monitor and act as a clear coordinator for the activities of the local school health/physical education advisory councils to be created.
<http://billstatus.ls.state.ms.us/documents/2003/html/SB/2300-2399/SB2339SG.htm>
Title: S.B. 2339
Source: billstatus.ls.state.ms.us
- CA Chaptered by Secretary of State. Chapter No. 09/2002 pre-K-12 Encourages school districts, to the extent resources are available, to provide quality physical education. Permits a school district or county superintendent of schools to grant an exemption for courses in physical education during grades 10 to 12 if the student passes a designated examination test administered in the 9th grade. Authorizes the use of physical performance as a factor in considering a school's performance.
Title: S.B. 1868
Source: Lexis-Nexis/StateNet

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www.firn.edu/doe/besss/health/pdb/pemast

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Sunshine State Standards for Health Education and Physical Education

The Sunshine State Standards were approved by the State Board of Education in 1996 to provide expectations for student achievement in Florida. The Standards were written in seven subject areas, including Health Education and Physical Education. Each subject area was divided into four separate grade clusters (PreK-2, 3-5, 6-8, and 9-12). This format was chosen to provide flexibility to school districts in designing curriculum based on local needs. The Health Education and Physical Education standards fall into three major categories—Physical Education Literacy, Responsible Physical Activity Behaviors, and Advocate and Promote Physically Active Lifestyles. Under each category are the following standards, and under each standard are grade-level appropriate expectations.

Physical Education Literacy

- Standard 1: The student demonstrates competency in many movement forms and proficiency in a few forms of physical activity.
- Standard 2: The student applies concepts and principles of human movement to the development of motor skills and the learning of new skills.
- Standard 3: The student analyzes the benefits of regular participation in physical activity.

Responsible Physical Activity Behaviors

- Standard 1: The student achieves and maintains a health-enhancing level of physical fitness.
- Standard 2: The student demonstrates responsible personal and social behavior in physical activity.

Advocate and Promote Physically Active Lifestyles

- Standard 1: The student understands how participating in physical activity promotes inclusion and an understanding of the abilities and cultural diversity of people.
- Standard 2: The student understands that physical activity provides the opportunity for enjoyment, challenge, self-expression, and communication.

Many school districts use the Health Education and Physical Education Standards in designing curriculum for their physical education programs (see link below):

<http://www.firn.edu/doe/curric/prek12/index.html>

A district-level example (Brevard Public Schools) of how best practices for physical education are communicated to students and parents is provided in Appendix E of this report and at the link below:

<http://secondarypgms.brevard.k12.fl.us/BP%20PE.pdf>

At the classroom level, the following will address efforts to involve students in physical education and physical activity. A good example of why the entire concept of physical education, and not just physical activity, needs to be addressed, is the potential for integrated learning.

Obesity in Florida



Report of the Governor's Task Force on the Obesity Epidemic

February 2004

HEALTH

The Governor's Charge to the Task Force

In Fall 2003, Governor Jeb Bush formed the Governor's Task Force on the Obesity Epidemic to make recommendations regarding the problem of overweight and obesity in Florida. The creation of the task force was announced at a press conference on October 15. Dr. John Agwunobi, Secretary of the Florida Department of Health, represented the Governor. Also present were Jim Horne, Secretary of the Department of Education; Charles Bronson, Commissioner of the Department of Agriculture and Consumer Services; Mary Pat Moore representing Rhonda Medows, Secretary of the Agency for Health Care Administration; and Jennie Hefelfinger, Chief of the Bureau of Chronic Disease Prevention at the Department of Health.

The Governor appointed 16 members to the task force and instructed the Florida Department of Health (DOH) to staff the task force's public hearings and meetings. The task force held four public hearings—two in Tallahassee, one in Orlando, and one in Miami. These meetings occurred on October 29 (Tallahassee), November 12 (Orlando), December 2 (Miami), and December 15, 2003, (Tallahassee). The task force met by conference call on two occasions: December 29, 2003, and January 9, 2004. Through these venues, task force members heard testimony from experts in the fields of public health, physical activity, nutrition, education, epidemiology, and medicine. Statewide stakeholders were invited to participate, and comments from the public were encouraged and considered at the information-gathering meetings. The public responded overwhelmingly, contributing to over 450 recommendations, which were submitted through mail, email, invited presenters, and public comment.

At the final face-to-face meeting in Tallahassee on December 15, 2003, the task force members considered all the information and recommendations gathered at the three prior public forums and those recommendations submitted through mail and emails to the Department of Health or the Governor's Office. The subsequent conference calls were used to access additional information, refine recommendations and approve the final recommendations.

Through their representation as invited guests of the task force, legislative members were provided information necessary to create policy level interventions that support the task force recommendations for enabling Florida to prevent obesity by fostering behaviors that promote lifelong physical activity and healthful nutrition.

Governor's Executive Order #03-196 Requirements

The Governor's Executive Order delineated the responsibilities of the task force:

- 1. Recommend ways to promote the recognition of overweight and obesity as a major public health problem in Florida that also has serious implications for Florida's economic prosperity;**
- 2. Review data and other research to determine the number of Florida's children who are overweight or at risk of becoming overweight;**
- 3. Identify the contributing factors to the increasing burden of overweight and obesity in Florida;**
- 4. Recommend ways to help Floridians balance healthy eating with regular physical activity to achieve and maintain a healthy or healthier body weight;**
- 5. Identify and research evidence-based strategies to promote lifelong physical activity and lifelong healthful nutrition, and to assist those who are already overweight or obese to maintain healthy lifestyles;**
- 6. Identify effective and culturally appropriate interventions to prevent and treat overweight and obesity;**
- 7. Provide policy recommendations to improve nutrition and physical activity for our youth, especially in areas where they congregate such as schools, after-school programs, and community and youth centers; and**
- 8. Provide recommendations for parents, caregivers, health care providers, youth leaders and other youth-based programs to encourage and support healthy eating and increased physical activity to promote family strengthening and family stability.**

Meeting Three • December 2, 2003 • Miami Jackson Senior High School • Miami, FL

8:30–8:40 a.m.	WELCOME AND INTRODUCTIONS Zachariah P. Zachariah, M.D., Task Force Chair
8:40–9:00 a.m.	EXERCISE RESEARCH Michael Overton, Ph.D., Florida State University
9:00–9:30 a.m.	SCHOOL HEALTH INDEX FOR PHYSICAL ACTIVITY, HEALTHY EATING, AND A TOBACCO-FREE LIFESTYLE Howell Wechsler, EdD, M.P.H., Centers for Disease Control and Prevention, Division of Adolescent School Health
9:30–9:50 a.m.	FITNESS REPORT CARD Stu Ryan, Ph.D., University of West Florida
9:50–10:00 a.m.	GENERATION EXCELLENCE Nancy Frees, Collier County Health Department
10:00–10:10 a.m.	Stretch Break
10:10–10:25 a.m.	PHYSICAL EDUCATION IN SCHOOLS Barbara Palmer, Florida Alliance of Health, Physical Education, Recreation and Dance
10:25–10:35 a.m.	RECESS IN SCHOOLS Lori Laughrey, Hillsborough County
10:35–10:45 a.m.	COORDINATED SCHOOL HEALTH PILOT STUDY Cheryl Hall, Landmark Middle School, Jacksonville
10:45–10:55 a.m.	GET FIT FLORIDA! Kristen Berset, Miss Florida
10:55–11:05 a.m.	TELEVISION-VIEWING TIME AMONG CHILDREN Fleur Sack, M.D., President, Florida Academy of Family Physicians
11:05–11:15 a.m.	ATHLETICS IN SCHOOLS Wink L. Barnette, Executive Director, Florida Athletic Coaches Association
11:15–11:25 a.m.	FIT KIDS AND FIT FLORIDA Larry Pendleton, President Florida Sports Foundation
11:25–12:10 p.m.	ENGINEERING PHYSICAL ACTIVITY INTO AMERICAN'S LIVES Mark Fenton, M.S., University of North Carolina Pedestrian and Bicycle Information Center and PBS Host of "America's Walking" Television Show
12:10–1:00 p.m.	Lunch/Health Walk
1:00–1:25 p.m.	THE ROLE OF SCHOOLS IN PHYSICAL ACTIVITY AND NUTRITION Eric Bost, Under Secretary, U.S.D.A.
1:25–1:50 p.m.	COMMUNITY GUIDE Greg Heath, Ph.D., Centers for Disease Control and Prevention, Division of Physical Activity and Nutrition
1:50v2:10 p.m.	WORKSITE AND COMMUNITY WELLNESS Jill Varnes, Ph.D., University of Florida
2:10–2:25 p.m.	GAINESVILLE—WELL-CITY USA Joe Cirulli and Debbie Lee, Gainesville Wellness Task Force
2:25–2:35 p.m.	Stretch/Break
2:35–2:50 p.m.	FAITH-BASED INITIATIVE Robin Dewey, Baker County Health Department
2:50–3:20 p.m.	GET UP, GET OUT. Dot Richardson, M.D., Gold Medal Olympian and Co-chair of President's Council on Physical Fitness and Sports
3:20–4:20 p.m.	PUBLIC COMMENT
4:20–4:30 p.m.	CLOSING REMARKS Zachariah P. Zachariah, M.D., Task Force Chair

"So what is the price we pay for physical inactivity and our nutrition choices? First, there are health consequences. Overweight and obesity and the associated physical inactivity and poor nutrition are the second leading cause of premature, preventable death after tobacco." –Tammie Johnson, M.P.H., Florida Department of Health

Meeting three of the Governor's Obesity Task Force embraced issues surrounding the lack of physical activity in Florida, and methods to overcome this disparity. A number of exceptional speakers presented information pertaining to the problems and possible solutions. Presentations addressed physical education in schools; recess in schools; need for more research in the area of physical activity; utilizing the school health index; implementing fitness report cards in schools; partnering with coordinated school health programs; decreasing television viewing

and computer screen time; continuing utilization of athletics in schools as a motivational factor; implementing community initiatives such as Walk-able Communities and Rails and Trails; initiating worksite wellness programs; and utilizing faith based programs to encourage increased physical activity among individuals and communities.

"It is important to have school health committees and to create awareness among staff about how to link people together to communicate with students' families and to enlist community support for change. It is important to help schools that are making a change connect with other schools to get out their message so they can all get excited and say, hey, you know, we're in this together." —Mary McKenna, Ph.D., CDC Division of Adolescent and School Health



Barbara Palmer and Ellen Smith recommended daily physical education be required in all grades pre-kindergarten through twelfth, and stated that all physical education teachers be certified. Lori Laughrey said that recess helps control obesity and overweight in children by encouraging healthy and active lifestyles in youth, and improves children's academic achievement, social skills, and a sense of well-being. A number of presenters cited the importance of assessing physical education programs by way of Fitness Report Cards and the School Health Index for Physical Activity, Healthy Eating and a Tobacco-Free Lifestyle and utilizing coordinated school health programs as partners for assisting in improving health among children in the public school system. Ms. Palmer stated, "there ought to be a Governor's Fitness Award that schools could be measured at the end of the year including pre and post assessment for that school as well as for individuals on how they do in fitness and in health".

Dr. Fleur Sack, representing the Florida Academy of Family Physicians, admonished the importance of limiting television-viewing time among children. She stated that in addition to obesity, TV viewing is associated with poor academic performance, sexual promiscuity, and drug/alcohol abuse. Florida Athletic Coaches Association's Jim Kroll stressed the importance of student involvement in school-based athletics as a motivational tool to keep students interested in attending school and becoming more physically fit.

"Add physical education to the whole school reform efforts, the whole accountability business and put school physical education on those school report cards and that's being done in South Carolina." —Howell Wechsler, Ed.D., CDC Division of Adolescent and School Health



In addition, Mark Fenton and Dr. Greg Heath stated the importance of community-wide campaigns to improve facilities and programs that create opportunities for increased physical activity among individuals. Dr. Jill Varnes, Joe Cirulli, and Debra Lee recommended creating quality worksite wellness programs in an attempt to provide more opportunities for the general public to become more involved in physical activity.

Finally, Robin Dewey introduced a successful faith based initiative that was implemented in Baker County. The initiative increased awareness of personal health by screening citizens for diabetes and healthy weight, and established a fitness trail in an attempt to increase physical activity among citizens in their community.

Evidenced-based research and best practice models led to the development of the Governor's recommendations encompassing promotion of physical activity among Florida's adults and youth.

Task Force Recommendations

To develop recommendations on preventing overweight and obesity and their resulting health impacts, the task force considered testimony from state and national experts and input from concerned individuals; state and local data from government and voluntary agencies in Florida; and national data from the Centers for Disease Control and Prevention, the National Institutes of Health and other organizations. The task force reviewed over 450 recommendations of which 150 were consolidated by similar content and honed for clarity. Taking this process further resulted in 22 recommendations that were approved by majority vote by the task force. These recommendations can be divided into two major health issues (improved nutrition and increased physical activity) and six general focus areas: (family setting, community setting, healthcare, public health, schools, and worksites). Since recommendations crossed health issues and focus areas, they are listed here in the following nine categories:

- **The Role of the Family in Promoting Lifelong Healthy Nutrition and Physical Activity**
- **The Role of the Community in Promoting Lifelong Healthy Nutrition**
- **The Role of the Community in Promoting Lifelong Physical Activity**
- **The Role of Healthcare Providers in Promoting Lifelong Healthy Nutrition and Physical Activity**
- **The Role of Public Health in Promoting Lifelong Healthy Nutrition and Physical Activity**
- **The Role of Schools in Promoting Lifelong Healthy Nutrition**
- **The Role of Schools in Promoting Lifelong Physical Activity**
- **The Role of the Worksite in Promoting Lifelong Physical Activity and Healthful Nutrition**
- **Recommendation Requiring Further Study**

The Role of the Family in Promoting Lifelong Healthy Nutrition and Physical Activity

1. The task force recommends that families and other caregivers coordinate with schools, community organizations and policy makers to support and sustain healthy lifestyles among youth. Parents and caregivers should promote family meals with no television or other distractions and should encourage reading instead of television viewing or computer use following the American Academy of Pediatrics' policy of allowing no more than two hours of screen time per day. Parents and caregivers should seek out and provide options other than television viewing or computer use for children after school and provide healthy snack options and parents should be empowered to provide positive role models and opportunities for healthy lifestyles to children.

The Role of the Community in Promoting Lifelong Healthy Nutrition

2. The task force strongly recommends that communities promote lifelong healthy nutrition through opportunities available within each locale and to create, support and maintain new partnerships to assist in this effort. Businesses, governments, associations and organizations all can collaborate and form partnerships to ensure healthy nutrition is more abundant for all residents and should look to available resources to provide

exhibits and demonstrations on healthy eating and cooking. Chain restaurants should post nutrition information that is readily accessible by the consumer and are encouraged to partner with local grocers and vendors to promote healthier ingredient usage and should promote the national 5 A Day campaign to increase fruit and vegetable consumption.

3. The task force strongly recommends that other community organizations including faith-based organizations, civic and service clubs, voluntary health agencies, boards and commissions, and other local projects review programs and determine options for promoting healthful nutrition opportunities into current and future planning.

The Role of the Community in Promoting Lifelong Physical Activity

4. The task force strongly recommends that communities promote access to lifelong physical activity opportunities by working with local governments, planners, land and real estate developers, organizations and associations, clubs, and other policy making agencies within a community. Communities must review local environments and assess where improvements for physical activity opportunities may be implemented and should invest in bicycle and pedestrian infrastructure and review transit-oriented development to promote "walkable" and "bikeable" communities and should review long-term planning efforts to ensure that numerous physical activity options are available to residents for safe areas to exercise and play. Communities should consider interventions that promote creating, strengthening and maintaining social networks, use of "buddy" systems, personal contracting, and walking groups. Communities should consider investing resources in efforts to assist family and community members to work with and mentor to youth to promote leadership and positive role models.
5. The task force strongly recommends that state and local agencies responsible for community planning ensure that policies are routinely considered for accommodating pedestrians and bicyclists and others who share the roadways and pathways in each community and ensure that communities have bicycle and pedestrian development plans as part of their planning process for new construction. These agencies must also advocate for improved planning for new construction and determine the possibility of retrofitting current communities to designate safe areas for adults and children to exercise and play. This includes improvements for sidewalks, street lighting, traffic calming, and other environmentally safe constructs that encourage physical activity.
6. The task force strongly recommends that other community organizations, including faith-based organizations, civic and service clubs, voluntary health, boards and commissions, and other local projects review programs and determine options for including increased physical activity opportunities into current and future initiatives.

The Role of Healthcare Providers in Promoting Lifelong Healthy Nutrition and Physical Activity

7. The task force strongly recommends that healthcare providers be empowered to support healthy eating and increased physical activity among their patients and are encouraged to implement national practice standards to assess their patients weight and physical activity status on a routine basis. Patients who are overweight or obese should be recommended for adaptive behavior change methods that include goal setting

and self-monitoring, building social support, behavioral reinforcement, structured problem solving, and relapse prevention. The use of licensed nutritionists and dietitians is encouraged to provide sound nutrition counseling.

8. The task force strongly recommends promoting health insurance efforts that support science-based eating and physical activity programs and working with the health insurance industry to offer incentives to people who practice healthier lifestyles.
9. The task force strongly recommends promoting weight loss and weight management in programs focused on diabetes, congestive heart failure and hypertension or high blood pressure and supports and endorses using medical practice guidelines for the promotion of healthier lifestyles and disease management.

The Role of Public Health in Promoting Lifelong Healthy Nutrition and Physical Activity

10. The task force strongly recommends that the Department of Health continue to promote lifelong physical activity through current programming and seek to enhance this effort by increasing opportunities, programming, leadership, and funding through local county health departments. The Department should work with the Governor's Office to establish promotional opportunities that reinforce national and state health observances and will work to appoint a Governor's Task Force on Fitness and Health. The Department should also design and implement evidenced-based healthy behavior campaigns and programs that are culturally sensitive and consider all populations in Florida and should ensure an evaluation component to assess success. The Department should continue to assess the current burden of overweight and obesity on the state and promote this information and data to policy makers, should seek out and apply for funding opportunities, work toward strengthening state and local public health programs on nutrition and physical activity, and should request state funding for promotion of the 5 A Day program. The Department should develop tools to assist in promoting healthy lifestyles and should develop a state-level clearinghouse for easier resource access.

The Role of Schools in Promoting Lifelong Healthy Nutrition

11. The task force strongly recommends that every school district be required by state government to maintain an independent nutrition advisory panel. These panels will be charged with meeting at least annually to review and determine strong school district policies surrounding all nutritional offerings at schools and will report annually on compliance to the Department of Education and the local school boards. These panels will ensure that school food service policies are revised when research provides new evidence of practice standards' improvements. School nutrition offerings include daily school breakfasts and lunches, vending selections, a la carte selections, fundraising selections, and other food options that are available on school grounds. This includes incentives (coupons provided to students for positive performance) that are provided by local businesses to promote product familiarity and loyalty. These panels will make recommendations regarding school nutrition assessments using the Centers for Disease Control and Prevention's School Health Index and will determine further recommendations for improving healthful nutrition. These panels will make recommendations on actions to reduce the use of food as a reward and or punishment and provide non-food options to teachers to continue to reinforce positive student performance. These panels will make recommendations on improving the time allocated for school lunches for students and will work to ensure an enjoyable eating experience and will review and approve all non-federally approved food service contracts to assure compliance with nutritional

standards. A majority of these panels will be comprised of parents of school children, additional representatives will include a healthcare professional with expertise and knowledge about the prevention of overweight and obesity, a registered dietitian, student representatives, teachers, and school food service personnel.

12. The task force strongly recommends that school districts elect to include formal curriculum on nutrition and dietary instruction in kindergarten through twelfth grades. Teachers will be given education and training on how to model healthy eating behaviors and they will be empowered to facilitate educational opportunities to support and sustain lifelong healthy eating. Nutrition education will be incorporated into various curricula including, but not limited to, math, science, home economics, and language arts and will be linked to the Sunshine State Standards where possible. Nutrition activities will be integrated into other educational opportunities both inside and outside of the classroom. Teachers, administrators, school food service personnel, other school personnel, and parents and students will all collaborate on creating a healthy nutrition environment.
13. The task force strongly recommends that school districts elect to enforce and monitor compliance with the current United States Department of Agriculture and Centers for Disease Control and Prevention dietary guidelines as they relate to school food service offerings. Where possible, federal standards should also be incorporated by schools to manage those items not currently covered under these federal standards such as a la carte offerings, vending selections, before and after school food service, fundraising opportunities, and other school nutrition offerings.
14. The task force strongly recommends that school districts elect to seek partnerships with local businesses, industries, corporations, philanthropies, and other organizations, including state and federal grant opportunities that may assist in providing funding and or resources to schools that have economic needs typically filled by vending sales.
15. The task force strongly recommends that school districts elect to utilize multimedia methods and awareness events to support healthful nutrition throughout the school year targeting not only students and staff but also parents and caregivers utilizing various technologies. Events can include health observances such as 5 A Day Week or designated weeks to promote different types of nutrition activities, celebrations and assemblies including a healthy nutrition message, implementation of nutrition fairs similar to science and history fairs, and support of speaker's bureaus to expand knowledge, skills and abilities of parents and staff should be provided.

The Role of Schools in Promoting Lifelong Physical Activity

16. The task force strongly recommends that every school district be required by state government to maintain an independent physical activity and physical fitness advisory panel. These panels will be charged with meeting at least annually to review and determine strong school district policies surrounding all physical activity/fitness offerings at schools and will report annually on compliance of these offerings in schools to the Department of Education and the local school boards. School physical activity/fitness offerings include those activities that occur both during and after school that are part of the school environment. These panels will make recommendations upon assessing the school environment using the Centers for Disease Control and Prevention's School Health Index and will determine further recommendations for student fitness testing every year beginning

in the first grade. These panels will make recommendations on actions to reduce the use of physical activity as a reward and or punishment in the classroom and provide options to teachers to continue to reinforce positive student performance. These panels will make recommendations on the installation of fitness facilities for all new school construction and will make recommendations for safety issues. These panels should set minimum personal fitness requirements for all healthy (no medical problems or disabilities) school age children in kindergarten through twelfth grades. These panels will gather data from state, national and international sources on physical fitness standards and norms. A majority of these panels will be comprised of parents of school children, additional representatives will include a healthcare professional with expertise and knowledge about the prevention of overweight and obesity, a certified physical activity expert, student representatives, teachers, and school physical activity/fitness personnel.

17. The task force strongly recommends that school districts elect to include formal curriculum on physical activity and physical education instruction in kindergarten through twelfth grades. Teachers will be given education and training on how to model physical activity behaviors; trained on the importance of building positive physical habits during school and away from school; and empowered to facilitate educational opportunities with other school program offerings to support and sustain lifelong physical activity. Physical activity and physical fitness education will be incorporated into various curricula including, but not limited to, math, science, home economics, and language arts and will be linked to the Sunshine State Standards where possible. Physical activities will be integrated into other education opportunities both inside and outside of the classroom. Teachers, administrators and other school personnel will all collaborate on creating a positive physical activity environment.

18. The task force strongly recommends that school districts elect to enforce and monitor compliance with the current Centers for Disease Control and Prevention physical activity guidelines as they relate to school offerings. Where possible, standards should also be incorporated by schools to manage those activities not currently covered under these federal guidelines such as before and after school activities, school field trips and programs and other school fitness offerings. School districts should aim for providing numerous and creative physical activity selections such as dance, aerobics and weight training and should be encouraged to seek input from students on the types of offerings that appeal to them. Schools should reinstate regular recess periods (age appropriate) to encourage daily physical activity. Schools should investigate the possibility of using different methodologies and technologies to encourage students to increase their physical activity such as pedometers or interactive physically oriented computer programs and other devices. Schools should address adaptive physical activity issues related to students with disabilities and/or special needs and provide opportunities for individual fitness activities along with organized group sports. Schools should work with local transit and community planning organizations to ensure safe routes to schools so that students and staff can walk or ride bikes to school. School clubs similar to school service clubs should be considered to support physical activity and fitness for those students who do not compete in organized school sporting activities. Schools should review local policies for utilizing school grounds and determine liability issues to support offering school physical fitness facility access to students and staff before and after school hours for activities other than organized sports.

19. The task force strongly recommends that school districts elect to seek partnerships with local businesses, industries, corporations, philanthropies, state and federal grant opportunities, and other organizations that may assist in providing funding and or resources to schools that have economic needs typically filled by vending sales.

20. The task force strongly recommends that school districts elect to utilize multimedia methods and awareness

events to support and promote physical activity/fitness opportunities throughout the school year targeting not only students and staff but parents and caregivers as well. Events can include awareness days such as "Fitness Friday's" or designated weeks, celebrations and assemblies, implementing exercise fairs similar to science and history fairs, promoting health education programs throughout the school year, and providing incentives to students and staff.

The Role of the Worksite in Promoting Lifelong Physical Activity and Healthful Nutrition

21. The task force strongly recommends that all worksites consider opportunities to improve the overall health of employees to improve job performance, reduce turnover and sick leave and to improve productivity. Employers should encourage and support employees to become more physically active and offer opportunities throughout the workday (via breaks or flexible working hours) for physical activity. Employers should review the work environment to ensure safe facilities for physical activity and should consider providing structured onsite facilities or incentives for promoting physical activities where funding allows or work with local fitness agencies and facilities to promote incentives for membership. Employers should practice physical activity and healthful nutrition and provide leadership as role models for their employees. Employers should review benefit options, especially insurance offerings, and determine where cost savings may be realized by having a healthier workforce and work with benefit companies to determine any cost savings to the employee. Employers should provide workplace policies that promote healthy vending and cafeteria selections and ensure that other healthful nutrition options are available at office meetings and celebrations.

Recommendation Requiring Further Study

22. The task force strongly recommends that the Department of Insurance collaborate with the Agency for Health Care Administration and any other necessary organization to further study the issue of medical nutrition therapy and provide its findings to the Department of Health. This issue will require the assistance of various partners and agencies to fully determine the best course of future action. Once this issue is fully investigated a recommendation may be made to the Governor, the Speaker of the House and the President of the Senate for policy consideration.



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Drugs, Devices & Cosmetics
MQA Online Services
Licensure & Certification of Health Professionals
Permitting

Emergencies

Brain & Spinal Cord Injury
Emergency Medical Services
Emergency Operations

Mothers and Children

Abstinence
Birth Defects Registry
Child Care Food Program
Childrens Medical Services
Immunization Services
Child and Adolescent Health
Maternal & Child Health
School Health
Women, Infants, & Children (WIC)

Tobacco

Biomedical Research
Florida Clean Indoor Air Act
Health Awareness & Tobacco
Tobacco Prevention & Control

Physical Activity

Physical Activity Programs for Children and Teens

The Florida Department of Health does not endorse the following programs but offers the websites and descriptions as possible resources to individuals, families, groups and organizations in developing physical activity and physical education programs for children and teenagers.

SPARK (Sports, Play, and Active Recreation for Kids)

SPARK is an innovative elementary (K-6) physical education curriculum and staff development program that has been validated by the Program Effectiveness Panel of the United States Department of Education. The SPARK program, which evolved from a research study supported by the Heart, Lung, and Blood Institute of the National Institutes of Health, currently offers materials and services to schools, university grants, recreation departments, after school programs, hospital community outreach and health organizations on a non-profit basis, through San Diego State University Foundation.

<http://www.foundation.sdsu.edu/projects/spark/index.html>

EPEC - (Excellence in Physical Education Curriculum)

A physical education curriculum improvement program from Michigan. "EPEC is an exciting curriculum that provides students with the fitness levels, motor skills, activity-related knowledge, and personal/social/attitudinal characteristics they need to be active for life."

<http://www.michiganfitness.org>

SHAPEDOWN

"The nation's leading Pediatric Obesity Program for over 20 years. Children and teens in SHAPEDOWN enhance their self-esteem, improve peer relationships, adopt healthier habits and begin to normalize their weight within their genetic potential. Parents feel better about their parenting and about their child. The family becomes healthier and closer. The results of SHAPEDOWN go far beyond weight."

<http://www.Shapedown.com>

HUGS International

The teen program component of this website offers "8 stages that show teens how to build a non-diet lifestyle."

<http://www.hugs.com>

Way to go Kids

Education and fitness program for overweight kids ages 9-14. "WAY TO GO KIDS! is a nutrition and fitness education program designed specifically for Registered Dietitians to teach overweight and underactive kids (ages 9-14) the skills needed to develop healthy lifestyle habits. The focus of this upbeat educational program is to encourage healthy eating habits, increased activity, and provide tools to help kids get their weight under control. This complete eight week nutrition and fitness program is ready to implement in any facility.

<http://www.waytogokids.com>

EAT SMART, PLAY HARD

A nutrition education and promotion campaign designed to motivate children to make healthy eating choices and be physically active.

<http://www.healthyweightnetwork.com>

The Feelin' Good Mileage Club

"Everyone loves the Feelin' Good Mileage Club! For kids-it's fun; for playground supervisors-it channels kids' energy; for teachers-it gets kids ready to learn; for principals-it's part of the children's education process; for parents-it's getting their child fit". This website also offers the Mega Mileage Club.

<http://www.fitnessfinders.net>

Coordinated Approach to School Health (CATCH)

"CATCH is a coordinated effort between classroom, cafeteria and physical education. The CATCH program involves the coordination of four components: health education, physical education, nutrition services, and parent involvement. CATCH is much more than a cardiovascular or diabetes education program. It's a great start toward coordinated school health programming."

<http://www.sph.uth.tmc.edu/chppr/catch/>

Sport Aerobics

"Sports Aerobics is an exciting aerobic exercise program using sport skills and fitness movements to develop health and motor related fitness outcomes." This program is for pre-school through high school aged youth of any ability.

<http://www.sportaerobics.com>

Movin' and Groovin' Fitness for Kids

This program is designed to lead children through a fun, fast-paced workout on video. "This 30 minute videotape features 10 original motivating & encouraging songs that provide positive messages on topics like nutrition, respect & a good night's sleep." There is a Movin' and Groovin' Fitness 1 for ages 4 to 8, and Movin' and Groovin' Fitness 2, for ages 8 and up.

<http://www.exerciseforkids.com>

VERB ... It's What You Do!

A National campaign designed to motivate youth to become more physically active. Link for health care professionals and parents to learn more about the VERB campaign:

<http://www.cdc.gov/youthcampaign/>

Link for youth between the ages of 9-12:

<http://www.verbnow.com/>

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National Conference of State Legislatures
Childhood Obesity – 2005 Update and Overview of Policy Options

Updated July 29, 2005

Physical Activity or Physical Education in Schools

Forty-eight states continue to require physical education in schools, but the scope of the requirement varies. In 2005, 35 states considered legislation related to physical activity or physical education in schools and at least eight of those states enacted legislation including Arizona, Colorado, Kansas, Kentucky, Louisiana, Montana, South Carolina, and Texas. States have focused on refining or increasing physical education requirements or encouraging positive physical activity programs for students during and after the school day. Both the cost of physical education programs and an emphasis on academics have sometimes been considered barriers to increasing physical education in schools. Connecticut enacted legislation in 2005 to require a daily recess period to encourage physical activity by school children without incurring additional costs for physical education programs. Recognition is growing that physical activity during the school day can increase student achievement. Legislation that passed both chambers of the legislature in 2005 is summarized below.

Arizona	<p>AZ HB 2111 (2005) (enacted), Chapter 67.</p> <p>Establishes a mandatory physical education implementation task force charged with developing an implementation plan that will result in a uniform physical education program in kindergarten through grade eight.</p>
Colorado	<p>CO SB 81 (2005)(enacted)</p> <p>Recognizes overweight among children and youth as a major public health threat and encourages school district boards of education to adopt policies to improve children's nutrition by offering healthful foods at school, providing culturally sensitive nutrition education, establishing local school wellness policies in accord with the federal "Child Nutrition and WIC Reauthorization Act of 2004", ensuring student access to fresh produce (especially Colorado-grown) and student access to</p>

	daily physical activity.
Connecticut	CT SB1309 (2005)(vetoed) As part of a more comprehensive bill, requires a daily minimum period of physical activity for students. Establishes committees to monitor and implement nutrition and physical activity policies.
Kansas	KS SB 154 (2005)(enacted) Among other provisions, encourages attention to reducing childhood obesity through physical activity, healthful foods, and wellness education.
Kentucky	KY SB 172 (2005) (enacted), Act No. 84. Requires 30 minutes of physical activity each day in schools, or 150 minutes per week, coordinated by a certified physical education specialist, beginning with the 2006-2007 school year for preschool through intermediate programs, 2007-2008 for middle school programs, and 2008-2009 for high school programs.
Louisiana	LA SB 146 (2005) (enacted), Act No. 331. Limits students' access to certain foods and beverages at school. Encourages daily physical activity at school to develop lifelong enjoyment of physical activity.
Montana	MT H.J.R. 17 (2005) (enacted) Encourages local schools to provide greater opportunities for student participation in physical activities and sports programs in order to respond to children and adolescents who are overweight or at risk of becoming overweight including 18 percent of Montana high school students.
South Carolina	SC HB 3499 (enacted), Act. No. 102. Establishes physical education and nutritional standards in elementary schools. Phases in weekly requirements for the amount of physical education instruction that students in kindergarten through grade five must receive. Implements a

	coordinated school health program; all contingent on the appropriation of funding.
Texas	<p>TX SB 42 (2005) (enacted)</p> <p>Encourages school districts to promote physical activity for children through classroom curricula for health and physical education. Provides for the State Board of Education by rule to require students in kindergarten to grade nine to participate in up to 30 minutes of daily physical activity as part of a school district's physical education curriculum, through structured activity or during a school's daily recess. Provides for consultation with educators, parents, and medical professionals to develop physical activity requirements.</p>
West Virginia	<p>WV HB 2816 (2005) (enacted), Act No. 121.</p> <p>Among other provisions, establishes physical activity requirements in public schools using body mass index as an indicator of progress. For students in grades four through eight and students enrolled in high school physical education, includes body mass index measurement in required fitness testing procedures.</p>

School Wellness Policies

The federal Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108 - 265) requires each school district participating in the National School Lunch and/or Breakfast Program to establish a local wellness policy by the beginning of the 2006-2007 school year. Statewide legislation for wellness policies was considered or enacted in 2005 independently or in response to the federal requirement and in California, Colorado, Illinois, Ohio, Rhode Island and Tennessee as summarized below. Additional information about federal wellness policy requirements can be found on the U.S. Department of Agriculture web site at: <http://www.fns.usda.gov/tn/Healthy/wellnesspolicy.html>

California	<p>CA SB 567 (2005)</p> <p>Requires local school districts that participate in federal school lunch programs to establish and implement a local school wellness policy, including a plan for measuring and ensuring compliance of each school with the wellness policy.</p>
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Colorado	<p>CO SB 81 (2005) (enacted)</p> <p>Among other provisions of a comprehensive children's nutrition bill, encourages local school wellness policies in accord with the federal "Child Nutrition and WIC Reauthorization Act of 2004."</p>
Illinois	<p>IL HB 733, SB 162 (2005) (enacted) Public Act No. 94-199</p> <p>Both bills require the State Board of Education to establish a State goal that all school districts have a wellness policy that is consistent with recommendations of the Centers for Disease Control and Prevention. Requires the Department of Public Health and the State Board to form an interagency working group to publish model wellness policies. Creates the School Wellness Policy Taskforce to identify barriers to implementing wellness policies and recommend how to reduce those barriers.</p>
Ohio	<p>OH HB 173 (2005)</p> <p>Would establish the School Physical Fitness and Wellness Advisory Council.</p>
Rhode Island	<p>RI HB 5563 (2005) (enacted), Public Law Chapter No. 74; and RI SB 565 (2005) (enacted), Public Law Chapter No. 79.</p> <p>Both bills require school districts receiving state education aid to include strategies to decrease obesity and to improve health and wellness of students and employees through nutrition, physical activity, health education, and physical education in their strategic plans. Bills also require school committees to establish school health and wellness subcommittees to decrease obesity and promote health and physical education in the schools. Both are effective August 1, 2005.</p>
Tennessee	<p>TN HB 2055, TN S.B. 2038 (2005)</p> <p>Both bills would enact the Child Nutrition and Wellness Act of 2005 to educate the public about child nutrition and wellness and to advocate improvement in child nutrition and wellness.</p>

Task Forces, Commissions, or Studies

States with legislative proposals to create childhood obesity task forces, commissions or studies in 2005 included Kansas, New Mexico, North Carolina, Virginia, and West Virginia as described below.

Kansas	KS HB 2208 (2005) Would establish a task force on the prevention and treatment of obesity.
New Mexico	NM SJM 2 (2005) Requests the Departments of Health and Public Education to study and make recommendations on ways to increase the physical activity and improve the eating habits of youth.
North Carolina	NC SB 637 (2005) Would make an appropriation to the board of Governors of the University of North Carolina to fund the obesity research and prevention initiative.
Virginia	VA HJR 589 (2004-2005) Would establish a joint subcommittee to study the relationship between obesity and the school lunch program.
West Virginia	WV HCR 28 (2005) Requests the Joint Committee on Government and Finance to direct the Legislative Oversight Commission on Health and Human Resources Accountability to continue to study the obesity epidemic in West Virginia by continuing to monitor ongoing state activities to curtail obesity.

Conclusion

The evidence is clear; the epidemic of overweight and obesity is a significant concern that will require the assistance and support of everyone in Florida to combat.

The health consequences of overweight and obesity have created a tremendous personal burden on our citizens, including our children, and have also created an economic burden on our state and counties. Due to overweight and obesity, children are being diagnosed with diseases and conditions typically only seen in adults including type 2 diabetes, previously referred to as adult onset diabetes. As people develop chronic diseases at earlier ages we will see the state and individual counties facing economic crises due to increasing demands on our overburdened healthcare system.

Our society can no longer afford either the personal costs or the economic costs created by this epidemic. We must look to broad solutions to correct this complex problem. This report outlines solutions to this problem.

On an individual basis, fighting this epidemic will require people to become more physically active and to make healthier, more nutritious food choices.

Communities are encouraged to take action by working to provide more opportunities for people to play and exercise that are low cost or free of charge. Physicians and other healthcare providers can advise their patients on healthful eating and ways to increase their level of physical activity. Early interventions that will help patients maintain a healthy weight instead of waiting until someone is obese are needed. Public health can and should work to help create awareness and provide information and education about healthy lifestyles. Schools can and should provide healthful options for students and staff throughout the day to support healthy eating and exercise habits. Worksites can and should provide information and incentives for employees to become healthier. And finally, parents can and should take a more active role in providing healthful food options at home

and become involved in their children's schools to assist in creating a supportive environment while their children are away from home. Parents must find options for their children's time spent in front of TV or video/computer monitors and promote increased physical activity. There are numerous possibilities for involvement in combating this epidemic.

There is no one group or entity responsible for this epidemic. We as a society have created this epidemic and we must all work together to overcome it. We must work within our communities to help create healthier environments and provide nutritious offerings so people can make the healthy choice the easy choice. Florida can lead the nation in overcoming this epidemic by working proactively and by working together and becoming involved in our communities. The obesity epidemic is everyone's problem and needs the help of all of us at the local and state levels. We must do this for our children and ourselves!

The Governor's Task Force on the Obesity Epidemic has been privileged to review the data and the facts surrounding the overweight and obesity problem in Florida. The task force is grateful to the many citizens and invited guests who provided tremendous input and support in the development of these recommendations. The task force looks forward to future policy initiatives at the state and local level that will ultimately impact positive behavior change and improve lifestyles of our citizens.

We must work within our communities to help create healthier environments and provide nutritious offerings so people can make the healthy choice the easy choice.

...fighting this epidemic will require people to become more physically active and to make healthier, more nutritious food choices.

Analysis of F as in Fat

- Arizona is one of only 5 states in the nation that has no physical education requirement for high school graduation. Three states require .5 credits, 20 states require 1 credit, 7 states require 1.5 credits, 5 states require 2 credits, and New Jersey requires 3.5 credits for high school graduation. Ten additional states require physical education at the high school level but not as a graduation requirement.
- Arizona is one of 33 states that requires physical education at the middle school level but fails to specify frequency and duration requirements. Ten states require 0-60 minutes per week, 4 require 61-120 minutes per week, 3 require 121-180 minutes per week and one state requires between 181-240 minutes of physical education per week. Among the 11 states that specify frequency and duration requirements at the middle school level physical education, the average requirement is 109 minutes per week. According to the data presented in the F is for Fat report, no states meet the NASPE recommendation for 225 minutes of physical education per week at the middle school level (California come closest at 200 minutes per week).
- Arizona is one of 31 states that requires physical education at the elementary school level but fails to specify frequency and duration requirements. Ten states require 0-60 minutes per week, 6 require 61-120 minutes per week, 4 require 121-180 minutes per week and no states requires between 181-240 minutes of physical education per week. Among the 14 states that specify frequency and duration requirements for elementary physical education, the average requirement is 100 minutes per week. According to the data presented in the F is for Fat report, only 4 states meet the NASPE recommendation for 150 minutes of physical education per week at the elementary school level.
- State wide physical education and physical fitness assessments are occurring in California and are proposed in South Carolina. In both states, the state department of education is responsible for compiling and reporting the data and in SC it is proposed that the state department of education will also be responsible for program evaluation.
- Twenty nine states do not specify in policy acceptable reasons to be excused from physical education requirements or provide alternatives for satisfying the requirements. The most common reasons cited for permitting students to be excused from physical education requirements included Medical and Religious reasons. Ten states provide exemptions for medical reasons and 8 states provide exemptions for religious reasons. Eleven states permit substituting another activity for physical education requirements. The most common activities permitted include substituting interscholastic athletics, marching band, ROTC, and other organized physical activities in order to meet physical education requirements. It should be noted that while these alternatives provide additional opportunities for physical activity they typically fail to address the educational needs of students in terms of providing the knowledge and skills be remain physically active for life.

ARIZONA STATE LEGISLATURE

INTERIM MEETING NOTICE OPEN TO THE PUBLIC

MANDATORY PHYSICAL EDUCATION IMPLEMENTATION TASK FORCE

Date: Wednesday, October 19, 2005

Time: 2:00 p.m.

Place: House Hearing Room 5

AGENDA

1. Presentation on the P.L.A.Y. (Promoting Lifetime Activity for Youth) Program—Carol Vack, Arizona Department of Health Services
2. Presentation on the Physical Education Survey Conducted by the Arizona Department of Education—Art Harding, Arizona Department of Education
3. Presentation of Physical Education Activities in Selected States—Staff
4. Public Testimony
5. Review Proposed Recommendations—Staff
6. Discussion
7. Discuss Scheduling of Future Meetings
8. Adjourn

Members:

Senator Barbara Leff, Vice Chair
Senator Harry Mitchell
Kimberly Babeu
Liane Bowles
Dr. Ken Cameron
Don Hiemstra
Jennal Johnson
John Koury

Representative Mark Anderson, Chair
Representative David Lujan
Pamela Kulinna
Dr. Harold Magalnick
Sylvia Mejia
Robert P. Pangrazi
Margaret Tate

10/11/05
jmb

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ARIZONA STATE LEGISLATURE
Forty-seventh Legislature – First Regular Session

MANDATORY PHYSICAL EDUCATION IMPLEMENTATION TASK FORCE

Minutes of Meeting
Wednesday, October 19, 2005
House Hearing Room 5 -- 2:00 p.m.

Chairman Anderson called the meeting to order at 2:06 p.m. and attendance was noted by the secretary.

Members Present

Senator Mitchell
Dr. Ken Cameron
Don Hiemstra
Jennal Johnson
John Koury
Pamela Kulinna
Senator Leff, Cochair

Representative Lujan
Dr. Harold Magalnick
Robert P. Pangrazi
Margaret Tate
Liane Bowles
Representative Anderson, Cochair

Members Absent

Kimberly Babeu

Sylvia Mejia

Speakers Present

Carol Vack, Local Health Liaison/Preventative Health Services Block Grant Manager, Division of Public Health Services, Arizona Department of Health Services
Art Harding, Legislative Liaison, Arizona Department of Education
Brian Lockery, Majority Research Analyst, House Education Committee
Larry Pieratt, Executive Director, Horizon Community Learning Center

PRESENTATIONS

P.L.A.Y. (Promoting Lifetime Activity for Youth) Program

Carol Vack, Local Health Liaison/Preventative Health Services Block Grant Manager, Division of Public Health Services, Arizona Department of Health Services (DHS), provided materials given to schools for the P.L.A.Y. Program (Attachment 1). She explained that P.L.A.Y. is an evidence-based program for students in grades four through eight. The program was developed in 1996 by DHS in partnership with Dr. Robert Pangrazi from Arizona State University and county health departments. Research indicates that most children are very active until about grade three when activity levels begin to decline, and this decline continues until the early 20s

with a marked change in early adolescence. The intent is to prevent the decline in physical activity levels by intervening during the ages when the decline first begins.

Ms. Vack related that Step 1 of the program involves promoting activity by explaining the program, discussing the importance of physical activity, sending a parent newsletter home with children, taking a 15-minute activity break outside most days of the week, prompting children to be physically active, and discussing how important it is to have fun and enjoy the activities (one week). Step 2 involves teacher-directed activities by teaching children new non-competitive games, encouraging children to play or walk around, and taking a 15-minute activity break during the normal school day (at least three weeks). Step 3 involves student-directed activities by introducing classroom materials (wall chart, log sheets), discussing activity choices, encouraging children to be active, and giving a President's Active Lifestyle Award to students that accumulate at least 60 minutes of activity for at least five days each week over the course of six weeks (at least eight weeks).

She stated that DHS funds county health departments from the Centers for Disease Control (CDC) Preventive Health and Health Services Block Grant, provides all materials and activity equipment for implementation, trains county health department staff to train teachers on the program and how to manage activity versus academic lessons, evaluates the program, provides technical assistance and consultation, and monitors contracts. The county health departments recruit school partners, train teachers through school in-service meetings, provide the school or program with written materials and physical activity equipment such as balls and jump ropes, collect program data and submit the data to DHS, and award President's Active Lifestyle Awards to eligible students. The schools sponsor one hour in-service training for teachers, encourage but do not mandate teacher participation, teachers sign an informal "contract" agreeing to implement the program for at least 12 weeks, teachers encourage students to be active and log activity, and coordinate the President's Active Lifestyle Award presentation.

She added that in 2004, 12 Arizona counties implemented the program, 338 schools participated in the program, 916 teachers implemented the program, and 22,864 students in grades four through eight participated in the 12-week program.

Ms. Vack advised Ms. Johnson that a study was conducted with Arizona State University two-and-a-half to three years ago to see if the program is effective in getting children to be more active, and found that it is. Teachers are asked the number of years of participation when they fill out the initial participation form, and many use the program year after year, especially in rural counties. She noted that there is a requirement to reach at least 50 percent of schools with 80 percent of children receiving free and reduced lunch.

In response to questions posed by the Members, Ms. Vack conveyed that the block grant is a separate line item in the federal budget, and about \$750,000 is currently provided to counties for the program. The budget for the upcoming year, which begins in January 2006, has been cut by \$400,000, so the counties will receive about one third of the current funding. She explained that the counties train the teachers, but if a teacher attends one year and is not able to attend the next year, that teacher can still participate in the program. Generally equipment disappears and has to be replaced every year. Some schools add the program at recess and some take an extra break

during the day. The program does not address children with special health care needs and body mass index (BMI) is not measured. When an evaluation was done after the first year, BMI was measured, but at the end of 12 weeks, a difference in the children is not expected. Funds are not available to follow the children longitudinally.

Ms. Vack related to Mr. Koury that the percentage of schools in the program depends on the county. The percentage is much higher in very rural counties, but the program is not available in Maricopa County as there are only two staff people at the Maricopa County Health Department. She indicated that she will provide a list by county and agreed to find out the cost to implement the program statewide in every school in fourth to eighth grade. She advised that the program was designed for fourth to sixth grade, but sixth grade is often in middle schools or junior high schools. Middle school science teachers began implementing the program and wanted to include seventh and eighth grade, so the graphics were changed to be more appropriate for fourth to eighth grade.

Physical Education Survey Conducted by the Arizona Department of Education

Art Harding, Legislative Liaison, Arizona Department of Education (ADE), stated that ADE prepared a survey to obtain an overview of physical education (PE) in Arizona schools. Questions were provided from Chairman Anderson and Shannon Harper to develop the survey. The survey was sent out, but failed technically, and had to be resent. A total of 547 responses were received. Along with the survey, a final question asked for input or statements, to which about 250-300 people responded, that he can e-mail to the Members. Many of the responses related to concerns about the questions and facilities. Some charter schools indicated that facilities are not available or money must be spent to contract for facilities. Several responses talked about how great Dr. Pangrazi's program is. Some schools indicated that PE is not mandated, but is an elective, and many schools indicated that the multi-purpose room is only available part of the day. He reviewed the results of the survey (Attachment 2). He added that the survey was informal, not scientific, and offered to provide the raw data to the Members.

Senator Mitchell noted that the question was asked if a swimming pool is available for PE classes. Most high schools probably have swimming teams, but not pools. Mr. Harding answered that many schools contract with cities, etc., to use pools, and there was no indication if the pools are inside or outside. He related to Dr. Magalnick that this is the first survey he was involved in sending to every school site, so he is not sure what the response rate is compared to other surveys.

Senator Leff remarked that it would be interesting to have a shorter survey to find out the philosophy of school boards.

Mr. Harding indicated to Mr. Pangrazi that the data was not segregated, but he may be able to pull out grades K-8, which is what the Committee is charged with addressing.

Chairman Anderson said he knows it is difficult to analyze the survey after having just received it, but the first question and one of the most important, is whether PE is required. Sixty-four percent responded that it is required for all students, which means about 36 percent believe it is

not. Taking into account that the responses are probably from schools that are the most conscientious or positive about PE, there could actually be about 46 or 50 percent who believe it is not required. The second question is the average times per week a student attends PE to which 58 percent said fewer than two times per week, which may not necessarily be physical activity, but perhaps a health class or something.

Dr. Magalnick stated that for the majority, a quarter of the time is instruction, not activity, which goes along with question number five asking the length of time children actually exercise, and 75 percent exercise less than 75 percent of the time.

When Senator Leff asked if the state standards are written so every school must do something or every school district has to have something in place, Mr. Harding indicated that he will send her a link for the PE standards, noting that the requirement is somewhat ambiguous.

Mr. Pangrazi opined that there is very little in terms of standards that have no "teeth" whatsoever. It is sad how little ADE knows about the PE standards and there is no institutional accountability. He recommended ferreting out the school levels because talking about an elementary school, a middle school, and a high school is like talking about day and night since there is such a difference in the facilities, etc.

Chairman Anderson asked if someone at ADE deals with other topics such as history. Mr. Harding responded that there are people at ADE who are not experts in each field, but facilitate the creation of standards with teachers. He advised Senator Leff that schools sign an affidavit stating that the standards will be implemented. Senator Leff wondered about involvement of the school districts.

Mr. Koury said school systems are set up so standards are implemented through local control. Governing boards are responsible for schools, and some give individual schools a lot of power while some do not. The key is the standards and whether the standards are enforced, so perhaps every school district should be asked if the PE standards are fully implemented.

Senator Leff said she believes the Committee must determine if the standards make sense and provide adequate direction.

Mr. Pangrazi submitted that the present situation is the result of local control.

Chairman Anderson stated that local control is an ongoing discussion and suggested working with local people and the Arizona School Boards Association to develop good policies.

Dr. Cameron explained that the Paradise Valley School District has a governing board with a standing committee of parents and staff called the Curriculum Advisory Council, which is trained in the standards that are developed. For math, for example, a Math Committee would be formed to determine what should be included in the scope and sequence by grade level, which is presented to the council and then the governing board three times to allow for public input. The governing board approves the standards, and the next fall, the schools determine how to train staff to train teachers on implementation. For PE, there is a PE Subcommittee. He indicated to

Senator Leff that the standards provide the guidance that is needed. Staff has been trained to be very content specific, so when content general information is received, the committees review those so they are content specific, then a certain amount of money is put aside for PE for materials to implement the standards.

Dr. Magalnick asked if that model is used across the state. Dr. Cameron responded that it is replicated in many areas in regard to curriculum in general, but he cannot answer specifically to PE.

Dr. Cameron remarked that the schools indicating that weight/fitness rooms are available are probably high schools. He opined that hardly any of the information in the survey is useful because every child is required to have PE in elementary school, whether it is once or twice a week, etc. In high school, only one year of PE is needed to graduate, so maybe three-fourths of the children would not take PE, so the answer from the high schools would be no, which could skew the results a bit. He indicated that PE is required in Paradise Valley School District.

Mr. Koury stated that the smaller the school district, the less everything comes together, but the larger school districts, especially K-6, are doing a better job.

Ms. Bowles stated that when standards were developed several years ago, national standards were used as a guideline, which are very general and help her as a teacher, but do not include measurements or accountability. Not all schools implement standards the same way. Her district has no oversight. When she complained about a PE teacher of poor quality, the principal indicated there is no problem as long as the children are not being abused. No one cares as long as AIMS tests are okay.

Dr. Pangrazi said there is a huge variation in what is required. It could be one day per week, which is fairly common, or two days per week, which is more common. He submitted that requiring PE five days per week runs the risk of watering down the product because the expense is so great. Schools would do their best, but it would probably mean sending out four first grade classes all at once because it is not possible to hire enough teachers to provide PE every day. He noted that Texas has a very strong five-day required PE program where 120 children are on the playground at one time. The children do not like it, there is no instruction, and fights occur because it is not possible to keep track of all the children. In California, non-certified aides were hired to teach PE, so the quality was poor, and after money ran out for the aides, which was March 10 last year, PE was eliminated. He would like to change the role of the physical educator to more of a physical activity coordinator similar to language in the Kentucky bill that was passed where schools are held accountable twice a year for making sure a certain amount of time is allotted for physical activity (Attachment 3).

He stated that most schools model standards after the National Association for Sports & PE (NASPE), which has six standards, but no school in the country holds itself accountable for all of those because it is not possible as there are no measures for accountability. The only standard there is the ability to do is physical activity, which is achievable by all students. This is the perfect chance, with the required wellness bill that mandates nutrition and activity, to change the

focus and put Arizona in the forefront of what is done for children by working on nutrition and physical activity outcomes.

Chairman Anderson stated that he appreciates Mr. Pangrazi's comments. The Task Force does not want to mandate anything that will be negative, but does want children to be more active. It is just a matter of how to work with everybody, get a handle on weaknesses in the state, and determine methods of enhancement.

Senator Leff asked the difference between the P.L.A.Y. program and the new program in Mesa. Dr. Pangrazi explained that P.L.A.Y. is a subset of what he previously shared with the Committee, which was developed a number of years ago for schools with no required PE or any PE at all. Last time he talked about ideas for structuring the playground to get children more involved in activity, such as offering activity breaks on the hour, getting children involved in walking programs to school, and doing some health and nutrition behaviors, so it is much more comprehensive and deals with nutrition and activity. P.L.A.Y. is a very small component of that where the teacher takes children onto the playground or to the multi-purpose room to play games. He is not trying to sell the program, but brought it for discussion to get the Members to think about a different approach rather than going to five days a week of PE, which would only add about an hour of activity per week and is not nearly enough. The intent is to change the environment of the school so children are more active, such as making the playground a no parking zone.

Senator Leff wondered if it would be better to provide funds to authorize DHS to put the new program together for schools as opposed to the Committee developing a program when the Members do not have the expertise.

Mr. Pangrazi stated that the program gives the superintendent local control, and a set of strategies could be offered with instruction on implementation, but accountability is needed for providing a certain amount of activity.

Mr. Koury stated that the standards are too general, so he does not know how schools can be held accountable. First, PE would have to be included in the day so it is workable, funding would be needed, and someone would have to determine how to provide accountability, which is very easy to show in math, but not PE.

Senator Leff said with the P.L.A.Y. program it is possible to count activity. She does not believe children should be judged on whether or not weight is reduced, but perhaps how many steps are taken per day, because all children are different.

Mr. Pangrazi agreed that the school day is full, but submitted that physical activity can be increased by sending home activity homework and making recesses more active by establishing a no parking zone on the playground. About one-third of schoolchildren are below par, which are the ones that need to be reached. It is easy in school to increase the number of steps with pedometers, recall instruments, and surveys where students log time if the school cannot afford the instruments. Children in elementary schools in Mesa are wearing pedometers, which cost about \$6.50 each, to measure activity time and steps. The cost is much less than a textbook.

Ms. Kulinna said she likes Mr. Pangrazi's ideas. As part of the package that might be put together for schools, she would like to see a minimum level of PE so it is a core part of the program, even if two days as a minimum is recommended. Another standard that is measurable is content knowledge. For example, she interviewed students this morning and even middle school students did not know why physical activity is good for their health. Students need to understand why it is important to move and how it relates to their health, which could be built into the PE program.

Dr. Magalnick suggested looking to the future and whether healthy citizens would be produced ten years from now. Perhaps people involved in paying for health could be brought in, such as the Arizona Health Care Cost Containment System plans.

Senator Leff opined that one of the major goals is for children to find out that exercise can be fun because many children believe it is something that has to be done. The activities Dr. Pangrazi is talking about can be incorporated into everyday life, and she likes the idea of daily activities that can be done throughout a person's lifetime.

Physical Education Activities in Selected States

Brian Lockery, Majority Research Analyst, House Education Committee, indicated that the Members were provided with documents from Shannon Harper who had to leave for a business trip early, so he was not able to discuss the documents with her (NASPE, Attachment 4; Comparison Matrix, Attachment 5).

DISCUSSION/REVIEW PROPOSED RECOMMENDATIONS

Dr. Pangrazi indicated to Ms. Tate that Kentucky is one of the few states that require accountability for physical activity. He is not suggesting that the Kentucky bill is the proper format, but provided copies of wording in the bill. He offered to bring the entire bill to the next meeting. He related to Senator Leff that available resources to be supplied by the Kentucky Department of Education to carry out the provisions would include pedometers, recall instruments, and other instruments.

Ms. Johnson distributed a recommendation that she hoped would be combined with other recommendations. She said she liked the program Dr. Pangrazi presented, and most of the recommendation is that program (Attachment 6). She believes adding up activity breaks and implementing the program before or after school needs to be considered.

Dr. Magalnick related that ADE and DHS will hold a meeting on November 4, 2005 on implementation of K-8 dietary requirements for schools, including what will be in vending machines. It would be good to obtain recommendations from that task force to determine how those can be implemented with what the Committee is looking at as far as PE. Mary Szafranski from ADE is leading the briefing.

Mr. Pangrazi remarked that people at the state level do much work in relation to health and nutrition, etc., but there is no point person at ADE for PE. Many states do have a point person for PE, which is something that should be considered for the future.

Senator Leff stated that Kentucky is the first state with language stating that physical activity may not exceed 30 minutes per day or 150 minutes per week, which would take much pressure off schools. She asked Mr. Lockery to find out the reason for the language.

Ms. Johnson noted that charter schools were not included in the bill restricting access to junk food in schools and wondered if there is any redress. Chairman Anderson responded that the nutrition bill already passed and is being implemented. There will be legislation to include high schools next session, so there will be more discussion about the issue, but he believes the focus of the Committee should be more on physical fitness.

Ms. Johnson opined that nutrition information, but not an entire curriculum on nutrition, should be included in the PE program because children can be fit, but that does not prevent diabetes.

Mr. Pangrazi indicated that he could bring a spreadsheet of strategies involved in creating an active and healthy school, such as discussing nutrition facts on a yearly nutrition calendar published by the United States Department of Agriculture each morning, integrating the food pyramid, etc.

Chairman Anderson asked the Members to review the handouts before the next meeting, noting that any recommendations received prior to the meeting will be sent to everyone.

PUBLIC TESTIMONY

Larry Pieratt, Executive Director, Horizon Community Learning Center, stated that Horizon is a K-12 school in the tenth year of operation. Prior to that, he was principal at Centennial Middle School in the Kyrene School District where he implemented PE every day, which was continued until the past year when the board reduced the program. He stated that he had an opportunity to pilot the Dynamic PE Program, which Dr. Pangrazi authored and Mr. Pieratt learned at Ohio State University, in elementary PE in the Southwestern City School District in Columbus, Ohio prior to joining the Kyrene School District. After four years, the program was adopted district wide to about 30 elementary schools.

He stated that Horizon currently has 1,400 students and requires PE on a daily basis in grades K-10. The state only requires PE through grade nine and requires standards to be met in K-8, but does not say how the standards should be implemented, which is a local school board decision.

It is often up to the principal to apply those standards within the school with a given number of FTEs and a certain amount of money. As a teacher in PE, he has seen the positive impact on students. Horizon spends \$350,000 per year on seven PE teachers. In the high school, two years of health and PE are required versus one year required by the state. The students have PE five days per week in K-8 delivered by certified teachers in PE using the Dynamic PE Program.

Mr. Pieratt suggested that the standards could be more specific in minutes and time and define how a school district is accountable, and school districts will respond. He and the superintendent

signed an affidavit for the charter school, but monitoring is done by parents through the State Board of Education for school districts and the State Board for Charter Schools for charter schools. The principal at an elementary school forwarded an e-mail to him from a parent who was upset because her son has asthma and could not remain on the field one day because the grass had recently been cut, so he missed 20 percent of PE. That is the kind of accountability school districts and principals listen to. He added that funding should also be included to carry out the standards and suggested that perhaps when forms are signed stating that state standards are being met, schools should be asked which state standards are being met.

When Chairman Anderson asked how the school is able to have daily PE with AIMS testing, Mr. Pieratt responded that the elementary school runs from 8:00 a.m. to 3:15 p.m. and the calendar year is 180 days. The students are doing extremely well on the AIMS test.

Senator Leff stated that the program under discussion does not have to take away from the school day or academics. Children learn better when they are physically active and activities could be incorporated into the curriculum.

Mr. Pieratt said he would support that if it is the minimum, but if it is the expectation, he has concerns because it raises the question why a school like Horizon has the program it has. Senator Leff responded that Horizon has the program it does because it is the right thing to do and the school is able to have the program.

Mr. Pieratt wondered why others should not also try to do the same. He does not believe five days can be mandated unless associated funding is provided, which probably cannot be done. What can be done is a minimum number of minutes, defining how those minutes can be used, and it can be a program like Dr. Pangrazi is presenting or the Dynamic PE Program designed years ago. He explained that Dynamic PE is taught by a certified teacher on a regular basis and the standards are defined within the program. Adopting those standards would be something to look at. He is concerned that if PE is reduced to physical activity only, that is all students will get because most schools will go to the minimum and put emphasis on what they are held accountable for by the public.

Senator Leff asked Mr. Pangrazi for a presentation on the Dynamic PE model.

Chairman Anderson stated that the Committee will meet again in two or three weeks.

Without objection, the meeting adjourned at 4:13 p.m.

Linda Taylor, Committee Secretary
November 2, 2005

(Original minutes, attachments, and tape are on file in the Office of the Chief Clerk.)

**SUPERINTENDENT OF PUBLIC INSTRUCTION TOM HORNE
ARIZONA DEPARTMENT OF EDUCATION
PHYSICAL EDUCATION SURVEY**



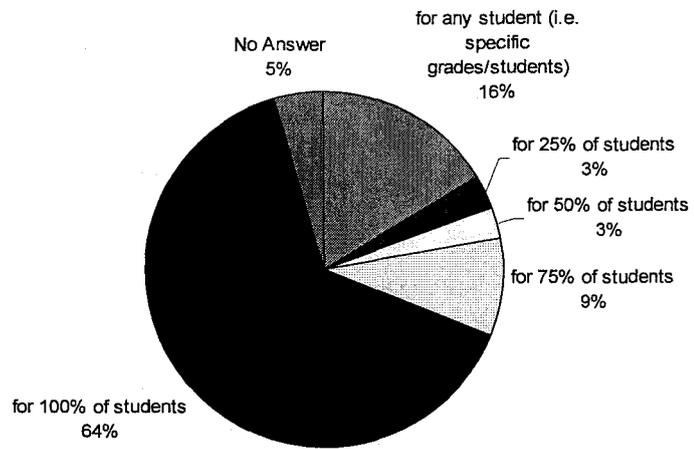
Presentation for the Mandatory Physical Education Taskforce
Rep. Mark Anderson, Chair

**SUPERINTENDENT OF PUBLIC INSTRUCTION TOM HORNE
ARIZONA DEPARTMENT OF EDUCATION
PHYSICAL EDUCATION SURVEY**

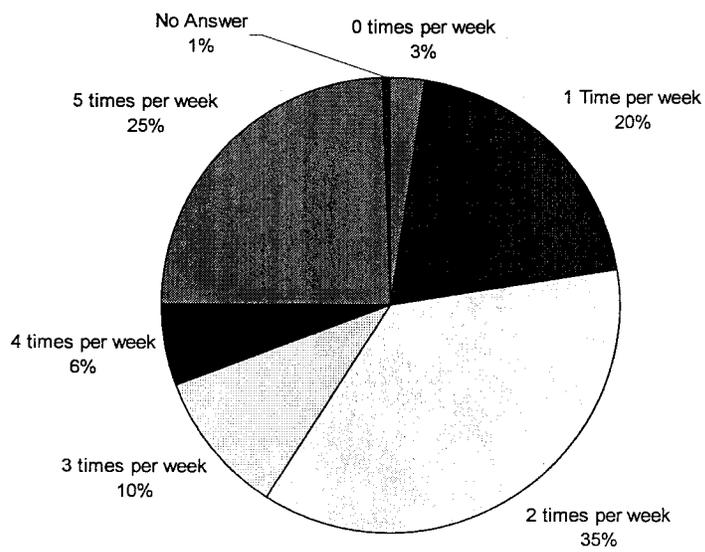


Presentation for the Mandatory Physical Education Taskforce
Rep. Mark Anderson, Chair

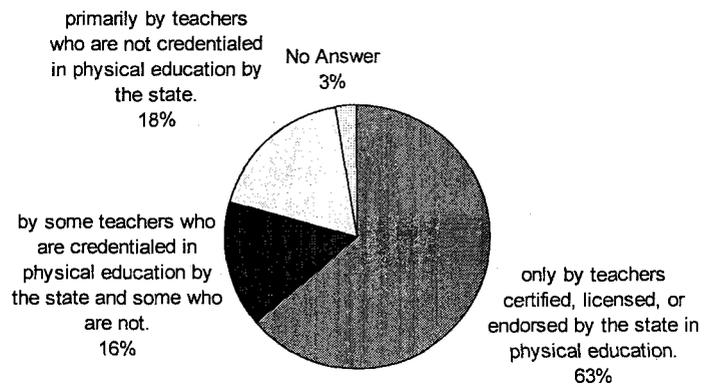
Q1. In your school, is physical education required:



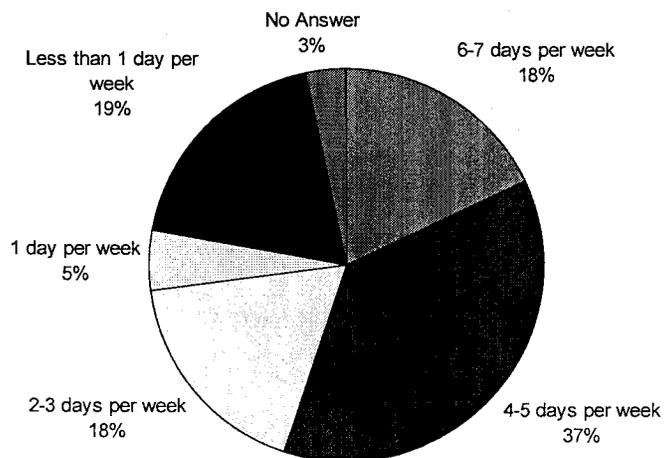
Q2. In your school, the average times per week a student attends physical education is:



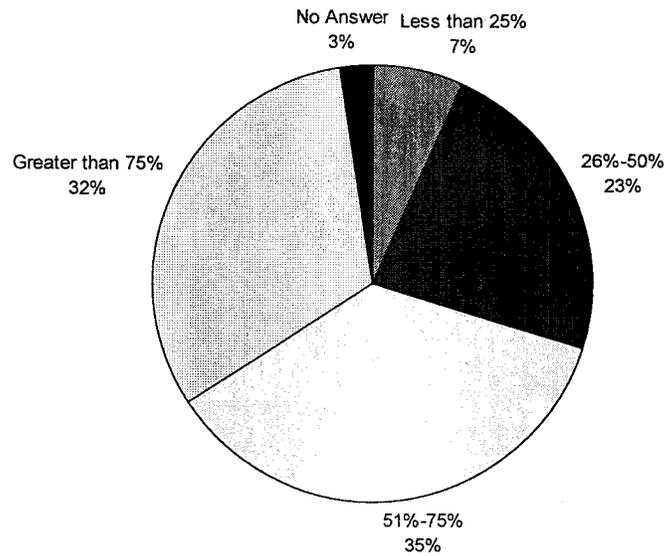
Q3. In your school, are physical education classes taught:



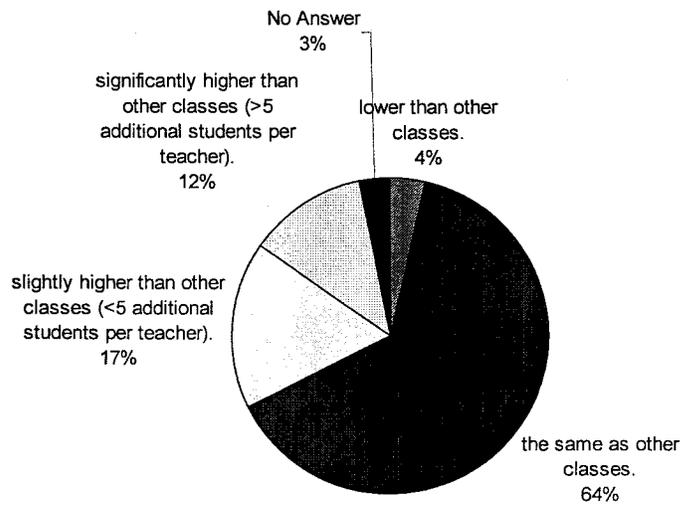
Q4. How frequently do students use the school's/district's athletic or activity facilities outside of the regular school day for sports and/or physical activity programs?



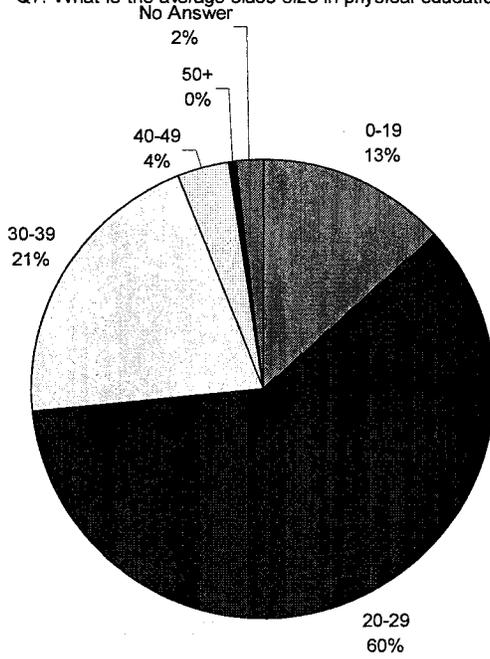
Q5. For what portion of the physical education classes at your school are students engaged in moderate to vigorous physical activity?



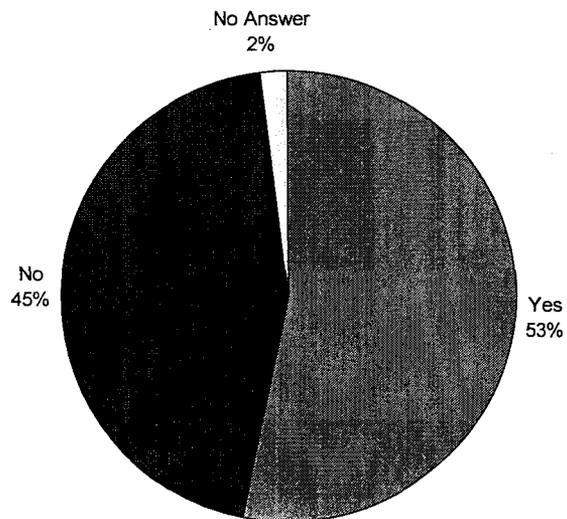
Q6. The student-to-teacher ratio in physical education classes in our school is:



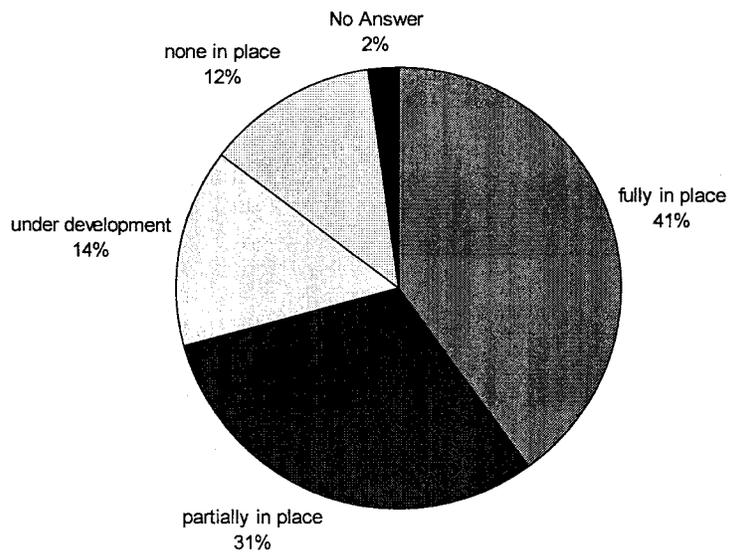
Q7. What is the average class size in physical education?



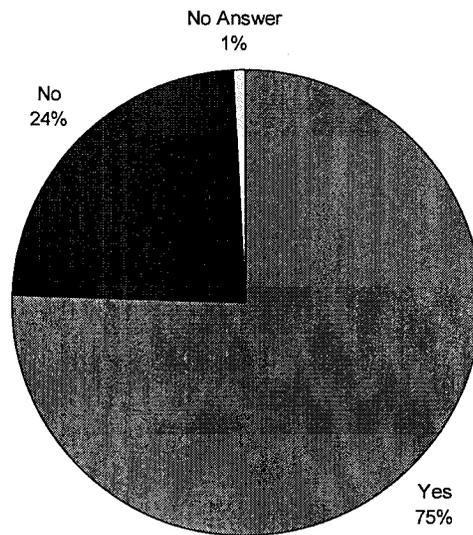
Q8. In your school/district, are professional development opportunities for physical education teachers available that specifically address their content area?



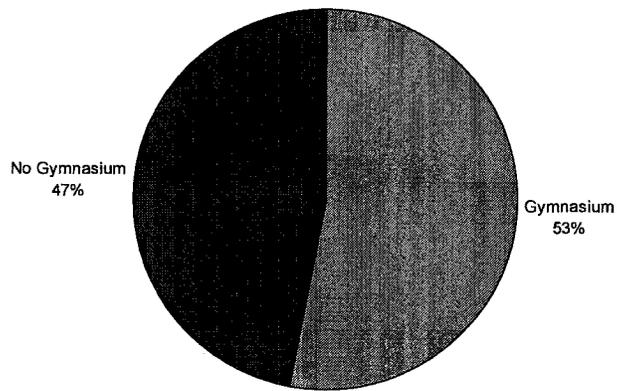
Q9. Does your school/district have a sequential physical education curriculum at all grade levels that is consistent with state and national standards for physical education?



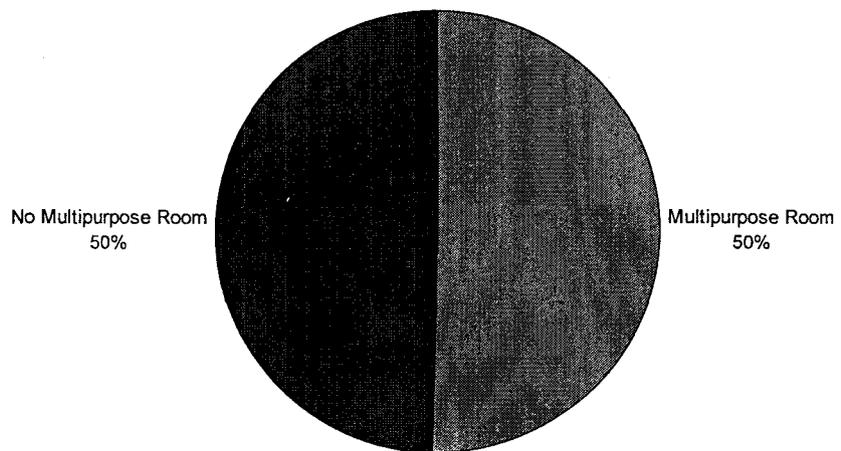
Q10. Is there a dedicated indoor space to hold physical education classes?



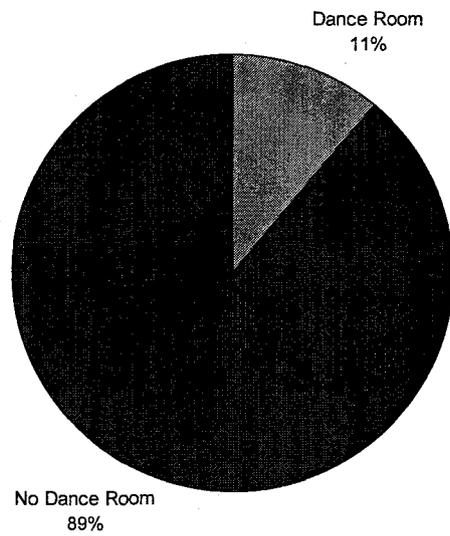
Q11a. Which of the following facilities are available for physical education classes in your school/district?



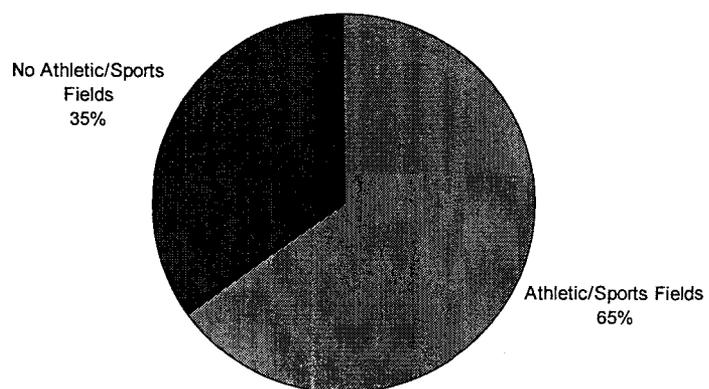
11b. Which of the following facilities are available for physical education classes in your school/district?



11c. Which of the following facilities are available for physical education classes in your school/district?

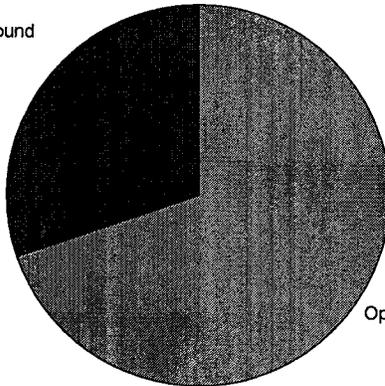


11d. Which of the following facilities are available for physical education classes in your school/district?



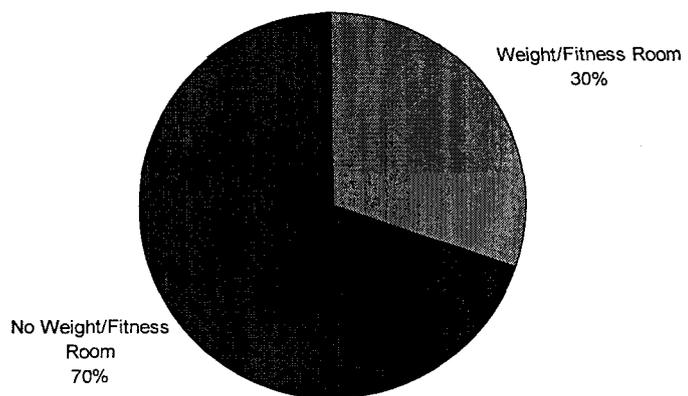
11e. Which of the following facilities are available for physical education classes in your school/district?

No Open Playground
Areas
30%

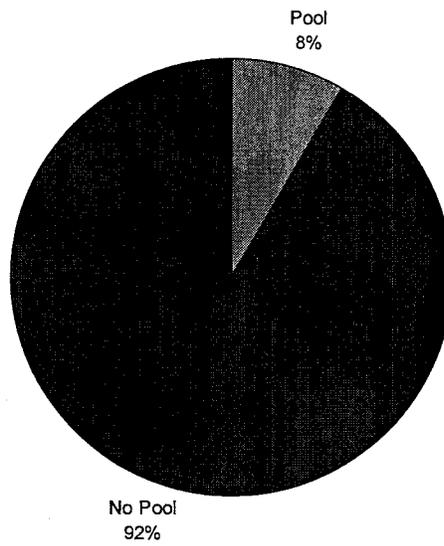


Open Playground Areas
70%

11f. Which of the following facilities are available for physical education classes in your school/district?



11g. Which of the following facilities are available for physical education classes in your school/district?



(11) Each school council of a school containing grades K-5 or any combination thereof, or if there is no school council, the principal, shall develop and implement a wellness policy that includes moderate to vigorous physical activity each day and encourages healthy choices among students. The policy may permit physical activity to be considered part of the instructional day, not to exceed thirty (30) minutes per day, or one hundred and fifty (150) minutes per week. Each school council, or if there is no school council, the principal, shall adopt an assessment tool to determine each child's level of physical activity on an annual basis. The council or principal may utilize an existing assessment program. The Kentucky Department of Education shall make available a list of available resources to carry out the provisions of this subsection. The department shall report to the Legislative Research Commission no later than November 1 of each year on how the schools are providing physical activity under this subsection and on the types of physical activity being provided. The policy developed by the school council or principal shall comply with provisions required by federal law, state law, or local board policy.

PE Implementation Plan for K-8th Grade

Proposed by Jennal Johnson

Goal: To improve the knowledge and skills of Arizona's elementary and middle public school students to remain physically active for life in order to reduce the prevalence of obesity and associated illnesses. Additionally, active and healthy children perform better academically; therefore the school environment should promote active and healthy behaviors. A quality physical activity and appropriate education program can be a cost-effective way to combat obesity and its associated increased cardiovascular risk.

Current AZ PE Status: Arizona requires physical education at the elementary and middle school level but does not specify frequency and duration requirements. PE curriculum may focus more on athletic skills and knowledge of team sports rather than on physical fitness. Finally, PE is not required for graduation.

Challenges to promoting requirements in elementary and secondary schools:

- Too many other mandated curriculum requirements
- Federal requirements related to "No Child Left Behind" and state high stakes graduation test promote emphasis on subjects included in standardized or graduation testing and resources are diverted away from PE.
- Limited number of endorsed PE teachers
- Limited facilities and staff in smaller or rural schools
- Limited financial resources

Proposed Plan:

By 2006/2007 all public elementary and middle school students will have the equivalent of 30 minutes per day 3 days a week of developmentally appropriate physical activity from the Physical Activity Pyramid and 30 minutes a day at least three days a week for K-6 physical education utilizing the Fitness for Life Model Curriculum and Nutrition curriculum to be developed and approved by AZ Department of Education. By 2007/2008 the physical activity requirement will be 30 minutes per day 5 days a week (Activities and instruction should be adapted for children with disabilities) for K-8 and the education 30 minutes a day at least three days a week for K-8 (Based on NASPE Physical Activity Guidelines for Children). Physical activity periods can consist of the following:

Activity breaks

Active recess

PE class

Before or after school activity programs if no PE class of recess

Physical Activity can be carried out in the classroom, lunchroom, all purpose room or outside as long as adequate safety procedures are followed. Significant space or resources are not necessary in order to accomplish physical activities from the Physical Activity Pyramid. Physical activity should be monitored utilizing heart rate monitors,

pedometers and physical activity logs. One teacher at each school will be designated the Physical Education Activity Director in order to plan and coordinate opportunities for physical activity that meets or exceeds the designated weekly student physical activity times. Preferably this teacher is an endorsed PE teacher. The Physical Education Activity Director will enlist the assistance of a school nurse to monitor safety issues such as student self-administering medications and establishing emergency procedures. Each school district and the Charter School Board will offer quarterly in-services related to physical activity, the Fitness for Life Model Curriculum (promotes knowledge for physical activity for life) and Nutrition Curriculum. The PE teacher to student ratio will be 1 to 700 in 2006/2007, 1 to 600 in 2007/2008 and 1 to 500 in 2008/2009. The Department of Education is responsible for developing Physical Education Activity In-service content in conjunction with experts at state universities and AZ Department of Health Services. The Department of Education will be responsible for evaluating the effectiveness of physical education programs in each school or school district.

Staffing: Individual schools may consider hiring activity aides to assist the Physical Education Activity Director. Interscholastic sports, marching band, ROTC, community activities or academic achievements do not substitute for required physical activity. Exemptions for medical reasons are allowed if approved by a state licensed health care provider.

This is the required default minimum. The rest is to be decided by each school district or individual charter school.

ARIZONA STATE LEGISLATURE

INTERIM MEETING NOTICE OPEN TO THE PUBLIC

MANDATORY PHYSICAL EDUCATION IMPLEMENTATION TASK FORCE

Date: Monday, November 28, 2005

Time: 2:00 p.m.

Place: House Hearing Room 5

AGENDA

1. Call to Order
2. Presentation on Online Physical Education--Shannon Harper, American Heart Association
3. Presentation on Questions Posed by Task Force Members at the Last Meeting--Staff
4. Public Testimony
5. Discussion
6. Recommendations
7. Adjourn

Members:

Senator Barbara Leff, Vice-Chair
Senator Harry Mitchell
Kimberly Babeu
Liane Bowles
Dr. Ken Cameron
Don Hiemstra
Jennal Johnson
John Koury

Representative Mark Anderson, Chair
Representative David Lujan
Pamela Kulinna
Dr. Harold Magalnick
Sylvia Mejia
Robert P. Pangrazi
Margaret Tate

11/21/05
jmb

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ARIZONA STATE LEGISLATURE

MANDATORY PHYSICAL EDUCATION IMPLEMENTATION TASK FORCE

Minutes of the Meeting
Monday, November 28, 2005
2:00 p.m., House Hearing Room 5

Members Present:

Liane Bowles
Dr. Ken Cameron
Don Hiemstra
Jennal Johnson
John Koury
Pamela Kulinna

Representative Mark Anderson, Chairman
Representative David Lujan
Dr. Harold Magalnick
Sylvia Mejia
Robert P. Pangrazi
Margaret Tate

Members Absent:

Senator Barbara Leff, Vice-chairman
Senator Harry Mitchell
Kimberly Babeu

Staff:

Brian Lockery, House Research Analyst
Thomas Adkins, House Research Analyst
Dawn Nazary, Senate Research Analyst
Bill Boyd, Senate Research Analyst

Chairman Anderson called the meeting to order at 2:07 p.m. and attendance was noted.

PRESENTATIONS

Shannon Harper, American Heart Association, informed the Committee that due to schedule conflicts Beth Collins from Peoria School District was unable to give the presentation on Online Physical Education.

Mr. Robert Pangrazi, Consultant on Physical Fitness and Sports explained that to his knowledge the Online Physical Education program is only for high school students because it is self directed.

Brian Lockery, House Legislative Research Analyst, distributed a handout titled *State Physical Education Requirements by Grade Level – Summary Chart* (Attachment A). He explained that the chart shows physical education requirements or lack there of for the various states, exit exam requirements in various states, and what states have requirements for both.

In response to Mr. Pangrazi, Mr. Lockery explained that Arizona is in the classification where physical education is required at varying grade levels, but duration is not specified and there are no high school physical education graduation requirements. He said that many states that have a significantly stronger commitment to physical education also have mandatory high school exit exams.

PUBLIC TESTIMONY

Jeff Smith, Director of Curriculum and Instruction for the Paradise Valley Unified School District and Service President of Educational Services Division of the Arizona School Administrators Association, explained that from the perspective of schools in today's era of high stakes accountability and standards, the schools need either more time or money or both. He noted a McWell study that identified some 200 standards and over 3,000 benchmarks in national and state level documents for 14 different subject areas. Classroom teachers in this study estimated that the amount of time it would take to adequately address the content articulating those documents was 15,465 hours. In general, the K-12 schools in Arizona employ 180-day school years, at six to seven hours a day, not counting all the various daily interruptions, resulting in 9,042 hours actually used for instruction. Mr. Smith said that when a mandate is passed along to schools without funding attached, the schools are forced to make decisions that require a reduction in other programs. He asked that the Committee be cognizant of the requirements passed along and the impact they have on the already over crowded school day and asked that the Committee be sure to tie appropriate funding to any recommendations they would make.

In response to Representative Anderson, Mr. Smith explained that he only has knowledge of the situation in Arizona, but that Arizona school funding is the lowest or one of the lowest in the nation. He said that the Committee can either increase the length of the school day, increase funding, or lower standards. He explained that three criteria are considered to decide the priority of the standards:

- What is going to be on the test.
- What is necessary for the next grade level.
- What is important to know in life.

Dr. Harold Magalnick, Pediatrician, stated that when teaching children the ability to exercise in ways that will be used in everyday life, if the skills are taught early on then the time needed to keep teaching the same skills decreases with time.

Mr. John Koury, Superintendent of the Hyder Elementary School District in Mesa, said that the Committee needs to come up with the techniques needed by teachers to incorporate activity into their daily schedules and he does not think that can be done in three months.

Representative Lujan stated that the Committee needs to keep a perspective on the pressures that school districts face. He said he is not sure how to incorporate physical education requirements with all the requirements schools presently face.

Ms. Jennel Johnson said that the charter school her children go to does not have physical education classes, but once a quarter they have a field day. She said the school is more academically focused. Ms. Johnson said that her children complain about the lack of physical activity and have shown that when academics are broken up with activities, the children are better able to focus academically.

Representative Anderson said that the Committee needs to decide if a mandate is needed. He stated that the issues the Committee need to address are:

- How much money is it going to cost.
- How much extra time can be carved out for physical education.
- How much extra time in a day would be needed.

Ms. Johnson stated that the Committee needs to decide what outcome is preferable and then find a strong component to get there.

Mr. Pangrazi explained that by changing the school environment as he pointed out in his proposal (Attachment B), a lot can be done without carving out the time that is viewed as a traditional physical education class.

Mr. Smith stated that changing the whole school environment to integrate physical activity throughout the school day is what needs to be done in general for the whole educational establishment.

DISCUSSION

Ms. Harper distributed a handout *What Recommendation Questions need to be Addressed from the PE Task Force November 28, 2006* (Attachment C). She explained that the Committee has to write a report of their recommendations to be given to the Governor and the Legislature by December 16, 2005. She explained that the handout was a compilation of notes and questions asked by the Committee during the last three months and that it would provide an outline of points and conclusions for the Committee to use in forming their recommendation.

Mr. Pangrazi stated that he thinks there needs to be a state director of physical education or physical activity education. He stated that in his handout it points out how to increase activity levels of students in specific behaviors, nutritional behaviors, sun safety and provide accountability. His point was to focus on the environmental approach to the school and less on the narrow view of physical education. Physical education would only be a part of the program.

Ms. Bowles distributed her proposal *Mandatory Physical Education Implementation Timeline* (Attachment D). She informed the Committee the proposal detailed a good quality physical education program that is phased into the schools and gradually brings up each school's requirements to eventually reach the national standards. She said that the first step is to bring all schools up to an equal minimum level, and then each school can gradually phase in other components to bring it up to national standards. She said that by phasing the program in, it

allowed the schools time for hiring and time for the school facilities board to get the facilities into place.

In response to Ms. Johnson, Ms. Bowles agreed that her proposal is more of a traditional physical education model. Ms. Bowles explained that schools have a lot of standards to meet and it is hard to teach what is needed in just a class or two a week. The time needs to gradually increase to really teach the students and teach them well.

In response to Representative Anderson's question, Mr. Pangrazi stated that his program includes a section on physical education, but it is not as structured as Ms. Bowles proposal, so he does not see it as a conflict. He said the two programs could work well together. He stated the need to look at the needs of the whole child including nutrition, sun safety, and physical activity. He stated that simply adding 30 minutes to a child's day is not going to help.

Dr. Cameron stated that the accountability part of any program should include tests such as:

- Blood pressure screenings
- Body mass index (BMI) screenings
- Some fitness program screenings

Dr. Cameron said the tests might give a broader picture of how kids are in the State of Arizona. He suggested making that part of a program evaluation in the accountability part of the recommendation.

Ms. Johnson stated that the old system of physical education so far hasn't helped kids to be healthy so the model of what's being taught should be changed to move towards healthier kids not just sports.

Ms. Bowles said that some basic skills are needed that are best learned as a child to have the confidence to join or try a sport when they are older.

Dr. Cameron said that children need the skill foundational base in order to build upon some of those skills and activities.

Dr. Magalnick suggested the Committee begin with a basic tenet of what the Committee believes would help it move in the right direction when forming their recommendation.

Representative Anderson said that one thing the Committee could do would be to first focus on the introductory or mission statement and a conclusion and work from that to answer all the questions.

Dr. Magalnick said that the main question is whether to continue the old program or decide if the Committee is looking for a paradigm shift.

Dr. Cameron stated that from his observations, an environmental approach as proposed by Mr. Pangrazi is the preferred program and it also maintains the current level of physical education and then expands on it.

Dr. Magalnick stated it is not just what is done in school, but the expectation is for the family and society to incorporate this into what the child does out of school. He said it is not just a school but a societal problem and what needs to change is how the physical activity is viewed within the entire spectrum.

Dr. Cameron stated that the physical education or physical activity person on each campus would need to communicate with parents about physical activity.

Ms. Tate stated that physical activity and nutrition should be considered simultaneously.

Representative Anderson stated that the committee needed to go through the questions and answer sheet to make sure they discussed the tough issues and reach a consensus on how best to address the issues. At some point a vote would be needed on the official recommendation.

Ms. Harper explained that to address concerns about physical activity, physical education, and nutrition, perhaps that can be blended into the school wellness councils since all the schools are going to have councils. She asked if a phase-in approach needed to be added to the mix.

Representative Anderson asked the Committee to also think about whether to start with a certain number of schools or a watered down version and then build it up over time or start with the full blown program in every school.

Dr. Magalnick said that he thinks an appropriate model would take kids entering the school system and then follow them through the various grades to see how the program works and if it makes a difference. The later you start it, the harder it is to change children's attitudes.

Mr. Pangrazi stated that his current pilot program in Mesa is gathering data on the Healthy and Active School Program. He said that the data should be available at the end of the school year. He explained that he did not think that there were two separate proposals being discussed by the Committee. He said that his proposal includes a component for physical education that just slightly differs from Ms. Bowles proposal, but that her proposal could easily be put into the Healthy and Active School proposal in place of the physical education component currently in place.

Ms. Bowles said that would work, but that the main concern is that whatever is done is of a high quality.

Dr. Cameron said that the Committee should agree that a phase-in is the best course of action, but a timeline would depend on the program.

Representative Anderson received agreement from the Committee that no one was opposed to a phase-in approach.

Representative Lujan suggested if there are budget concerns, perhaps the committee would consider the accelerant schools be phased in first, then work down the list.

Ms. Johnson commented that the recommendation will fail if it goes to the Legislature with a high price tag.

Mr. Pengrazi stated that for the 58 schools included in his data, the price for more daily physical education was approximately \$35 million, but only \$1 million if what is in place is maintained with a change in the environment.

Representative Anderson explained that it would be best to come up with the best and most realistic recommendation and put it forward. If compromises are necessary, the program can still be improved. As for funding, a mandate is needed with the recommendation that it does not go through without the funding. If funding becomes a stopping point, then a plan perhaps to start with a few schools and build up from there would be best. The Committee should first make a realistic, best recommendation, then go from there, not start out with the minimum.

Ms. Bowles stated that both programs can blend well together, but her first priority would be to bring all schools up to the minimum of 30 minutes twice a week of physical education.

Mr. Heimstra stated that bringing the State up to the national standards for physical education has to be a priority, just as looking at the broader base of health education, nutrition and health standards is important to be considered. He said that the Committee should bring both proposals to the Legislature to try to move the State forward.

Mr. Pangrazi stated that his proposal has the physical education component in it that does not differ greatly from Ms. Bowles proposal, however, he insisted that there has to be more to a program to really benefit the children of Arizona.

Ms. Mejia stated that not only is the State lacking in the national standards, but also there is no consistency within the districts. She said that consistency needs to be considered to bring all schools up to a minimum standard, then build from there.

Ms. Johnson said that she is concerned with having little or no data to tell where each school is and where the whole State needs to be. She voiced the question of how much time is spent in teaching time versus activity time.

Ms. Bowles said that the data from the Center for Disease Control (CDC) indicates that 50% of class time children should be active.

Mr. Koury suggested that perhaps the Committee members who are involved in physical education should meet to create the recommendation and then the rest of the Committee could vote on it.

Mr. Pangrazi said that his proposal contains quality physical education and Ms. Bowles' proposal could easily be incorporated into his proposal.

Representative Anderson asked the committee which proposal should be included in their recommendation. He asked if the Committee preferred to come up with a recommendation for a minimum number of minutes per day, per week, for physical activity.

Ms. Johnson stated the Committee should give the districts the flexibility to design their own programs with standards that must be followed.

Dr. Cameron stated that there is a difference between physical education and physical activity and to specify a certain length of time it needs to be done for each. He said that Mr. Pangrazi's proposal is a good place to start with the 60 minutes per week and then how that is divided still provides some flexibility.

Mr. Pangrazi stated that there is a definite need for a physical education component but then a mandate is also needed for a certain amount of activity above and beyond that component.

Ms. Bowles stated that the districts should have some say in the programs as too much flexibility could very easily get watered down. She stated that in her opinion there is a need for 60 minutes of physical education by a certified teacher with quality equipment. In addition, it is needed to outline what is quality physical activity and that each school should offer a physical activity component outside of the physical education classes.

Ms. Johnson stated that it should be specified that recess does not count unless there is a structured activity in which 90% of the children are participating.

Ms. Mejia commented that by adding an option for the districts, accountability is difficult. She said that being specific is a necessity.

Representative Anderson stated that it would much easier to mandate and require accountability for physical education than for physical activity.

Mr. Pangrazi stated that physical activity is already being monitored using pedometers and looking at school-wide averages. He stated that what will matter to students is what matters to the school and parents. He said that it is all a priority issue.

Mr. Koury explained that students respond to incentives, just as schools do.

Dr. Magalnick stated that if physical education is started early on, then as progress is made, less time is needed.

Dr. Cameron stated that there needs to be more focus on positive rewards over negative labeling.

Representative Anderson said due to lack of time, the Committee Members should review the proposals and handouts and send their ideas in writing to staff. The staff can draft a recommendation and send it to the Members before the final meeting and a vote is to be taken.

The Committee set a tentative date of December 14, 2005 at 2:00 p.m. for the next meeting.

There being no further business, the meeting was adjourned at 4:04 p.m.

Respectfully submitted,

Shelley Ponce
Committee Secretary

(Tapes and attachments on file in the Secretary of the Senate's Office/Resource Center, Room 115.)

**State Physical Education Requirements by Grade Level-
Summary Chart**

P.E. Required K-12, Duration or Frequency Standards Specified for All Grades	IL, NY
P.E. Required Elementary and/or Middle School, Duration Standards Specified, Some HS P.E. Credits Required to Graduate	AL, AR, CA, FL, GA, IN, IA, LA, MO, NH, RI, SC, TX, UT, WV, WI
P.E. Required K-12, No Duration Standards Specified, Some HS P.E. Credits Required to Graduate	CT, DE, ID, KS, KY, ME, MD, MA, MI, MT, NE, NJ, NM, NC, ND, OH, OR, TN, VT, VA, WA
P.E. Required at Varying Grade Levels, No State-Level H.S. P.E. Graduation Requirements	AZ, MN, MS, OK, PA, WY
Some HS P.E. Credits Only Required to Graduate	AK, DC, HI, NV
No State-Level P.E. Requirements	CO, SD ½ credit P.E. or Health required for HS graduation beginning in 2006

Sources: NCSL Staff Research, National Association of State Boards of Education, Trust for America's Health, Center for the Study of Social Policy, NIHCM Foundation

**“High-Stakes” High School Graduation Exams
Exit Exam Requirements Across the Country**

26 states have exit exams or are scheduled to implement them sometime during the next seven years.

States with mandatory exit exams in 2005 (19 states):

AL, AK, FL, GA, IN, LA, MA, MN, MS, NV, NJ, NM, NY, NC, OH, SC, TN, TX, VA

States phasing in exit exams by 2012 but not yet withholding diplomas (7 states):

AZ (2006), CA (2006), ID (2006), MD (2009), OK (2012), UT (2006), WA (2008)

A PROPOSAL TO THE PHYSICAL EDUCATION TASK FORCE

ROBERT P. PANGRAZI, MEMBER

The need for an integrated approach to physical education, physical activity, nutrition, and sun safety is necessary for the health of Arizona's school children.

- The number of overweight children has tripled in the last 25 years
- Nearly a quarter of children, ages 5 to 10 have high cholesterol, high blood pressure, or other early warning signs of heart disease
- According to CDC, for the first time in 100 years, the current generation of school children will have a shorter lifespan than their parents
- Arizona ranks second in the world and first in the U.S. for skin cancer. The incidence of skin cancer in Arizona is occurring at a younger age with increasing frequency.
- Regular physical activity helps improve strength and endurance, helps prevent problems of overweight, builds healthy bones and muscles, and can reduce stress.
- Healthy and active children have the opportunity to perform at their best academically.

Therefore the following recommendations for implementation are offered:

Create a State of Arizona Director of Physical Activity Education

It is apparent that no person at the state level is directly responsible for physical education and physical activity promotion in the school setting. Funding for a state director would indicate the state values physical education and physical activity promotion and would assure statewide direction for school administrators. It would offer central coordination to assure that Active and Healthy School programs are implemented. In addition, accountability and

assessment measures would be developed in this office. Data analysis would be coordinated through this office.

Offer Quality Physical Education:

1. Assure all schools maintain existing physical education programs that are taught by a certified teacher who has a physical education endorsement.
2. Offer a minimum of 60 minutes of physical education instruction weekly with a desired goal of 90 minutes where possible.
3. Maintain a student to teacher ratio that is the same as classroom teachers. If the average classroom teacher class size is 30 to 1, the physical activity education teacher ratio should be the same.
4. The physical education program will adhere to the state and national physical education standards.
5. The student to teacher ratio in the elementary school setting should be 500 students to 1 physical activity education teacher.

Develop and Maintain Active and Healthy Schools

The *Child Nutrition and WIC Reauthorization Act of 2004* passed by Congress mandates that all school districts with a federally-funded school meals program develop and implement wellness policies that address nutrition and physical activity by the start of the 2006-2007 school year.

The following are some of the areas that the *Reauthorization Act* recommends schools implement to meet their wellness program plan:

1. Provide recess and lunch time active breaks for all students.

2. Present activity breaks in the classroom during subject matter breaks or after 60 minutes of instruction. These breaks last 3-5 minutes and give students a respite from long periods of sitting.
3. Design school walking programs that are buddy based or small group based.
4. Develop activity contracts for students (teaching students to monitor their daily activity patterns outside of the school setting).
5. Facilitate programs for parents; sharing information with parents through newsletters and school based programs.
6. Place point of decision prompts throughout the school to encourage healthy eating and physical activity.
7. Encourage students to participate in after school physical activities.

Increase the Activity Levels of Students

Physical education on a daily basis is certainly a desirable goal for all Arizona schools. However, it is an expensive proposition that may be stalled by funding demands. The goal of Active and Healthy schools is to supplement the existing physical education program to offer a wellness based program. Active and Healthy schools require changing the environment so that students learn the habits and behaviors necessary for a healthy lifestyle.

To assure implementation of the WIC Reauthorization Act in all Arizona schools, the Physical Activity Education teacher will serve as the Active and Healthy School coordinator. This person will be given one released period per day to coordinate and promote the Active and Healthy School program. This person will be responsible for assuring that physical activity, nutrition, and sun safety programming is implemented. Specific responsibilities for the Active and Healthy School coordinator will include but not be limited to the following expectations:

- Make the playground an activity-friendly environment to encourage and motivate all students to be active.
- Train classroom teachers and playground aides to promote and reinforce student behaviors.
- Teach simple active playground games to students.
- Help organize lunch hour activities such as intramurals, walking clubs, and jump rope teams.
- Teach classroom teachers how to offer 3 to 5 minute activity breaks during subject matter breaks or after 60 minutes of instruction.
- Place point of decision prompts throughout the school that reinforce the need for physical activity and healthy nutritional habits.
- Write wellness-based newsletters for parents that include information about the need for an active lifestyle, healthy eating and nutritional habits, and sun safety.
- Promote healthy eating and nutrition behaviors that include healthy lunches, healthy eating skills, and nutritious food choices.
- Promote sun safety behaviors including active learning games from the SunWise materials, announcing the UV index, and encouraging the use of protective clothing and sunscreen.
- Create outside of school physical activity homework. For example, the President's Council on Physical Fitness and Sports offers a *Presidential Active Lifestyle Award* that offers recognition for activity accumulated outside of the school setting.

Nutrition

Nutrition and eating skills receive emphasis equal to physical activity in an Active and Healthy School. The Active and Healthy School coordinator will be responsible for identifying the school personnel who are assume leadership for the following components. These could be school principals, school lunch coordinators, school nurses, and parent-teacher organization leaders. The nutritional policies will include, but not be limited to, the following:

- Offer healthy school lunches as certified by the director of food and nutrition.
- Develop and disseminate a nutrition newsletter to parents and teachers.
- Post point of decision prompts in the lunchroom.
- Offer integrated information on eating skills and food choices in instructional settings.
- Offer students nutritious snacks and treats at birthday parties and other school sponsored events.
- Include a daily “nutrition fact” during school announcements to all students.
- Offer healthy “brown bag” recommendations to students, teachers, and parents.
- Assure school fund raisers are limited to nutritious food items or non-food entities.

Sun Safety

The Active and Healthy School Coordinator shall assure a sun safety program is implemented and supported. The state of Arizona now mandates a sun safety program and it will require but not be limited to the following strategies:

- Utilize existing shade and shade structures for physical education and activity breaks whenever possible.

- Encourage protective clothing, particularly hats, for activity breaks and outdoor physical education activities
- Post and announce the UV index each day
- Encourage the use of sunscreen
- Implement the SunWise materials that include active games and lesson plans.

Accountability/Assessment

Schools will be required to assess the following behaviors:

1. Student Physical Activity Levels. There are a number of ways to monitor physical activity including:

- a. the use of pedometers to measure steps or activity time
- b. logs to record the minutes of daily physical activity
- c. internet recording of minutes of daily activity on the President's Council on Physical Fitness & Sports

2. School Nutrition – Food Service Evaluation. Arizona currently has a Healthy School Environment Model Policy that includes a school food service – nutrition program. Components of the policy include:

- a. Food service operation
- b. Nutrition Education
- c. Healthy food choices at school

3. Sun Safety Evaluation. The State of Arizona now mandates instruction on skin cancer prevention. Instruction must include the basic facts about skin cancer and a comprehensive set of strategies and behaviors to reduce the risk of contracting skin cancer. Evaluation could include:

- a. student knowledge evaluation

b. administrative school evaluation of strategies and behaviors implemented

Funding

All phases of implementation of this program would be contingent upon appropriation of adequate funding. There is no mandatory financial obligation to school districts if state funding is not appropriated for each of the levels of implementation

**What Recommendation Questions Need to be Addressed from the PE Task Force
November 28, 2006**

Goal: HB 2111 states: The task force shall develop an implementation plan that will result in a uniform physical education program for grades K-8, the task force shall consider the six questions: time, program content, staffing, facilities and resources, fiscal considerations and exemptions. The final report shall include an implementation plan and a proposal for draft legislation. Questions are in green.

Time Constraints:

Three year phase-in (PI) approach than transitioning toward the national standards in that time period. Ultimate goal is a quality physical education program.

Is task force comfortable with a 3 year phase-in?

How many days a week and minutes a day does the Task Force want for PE? Do we want daily PE for 30 minutes or 30 minutes 3 times a week?

Should PA breaks for 3 to 5 minutes be put into the classrooms at transition times, with point of prompt in classroom?

Recess otherwise know "Activity Break" should this be above and beyond PA or PE?

Program Content:

Need a base of state standards that transition to national standards. Base standards should be based off of NASPE (national standards) for purpose of transitioning with some listed later for phase in approach: (Phase In denoted by PI)

Schools shall establish specific learning goals and objectives for PE. A sequential, developmentally appropriate curriculum shall be designed, implemented, and evaluated to help students develop the knowledge, motor skills, self-management skills, attitudes, and confidence needed to adopt and maintain pa throughout their lives. The PA program shall:

- Emphasize knowledge and skills for a lifetime of regular physical activity;
- Be consistent with national standards that define what students should know and be able to do;
- Devote at least 50 percent of class time to actual physical activity each week, with as much time as possible spent in moderate physical activity; (PI)
- Provide many different physical activity choices;
- Feature cooperative as well as competitive games;
- Meet the needs of all students;
- Take into account gender and cultural differences in students' interests;
- Teach self-management skills as well as movement skills;
- Actively teach cooperation, fair play, and responsible participation in physical activity;
- Have student/teacher ratios comparable to those in other curricular areas; (PI)
- Promote participation in physical activity outside of school;
- Be an enjoyable experience for students.
- Suitably adapted physical education shall be included as a part of individual education programs or other written plans for students with chronic health problems, other disabling conditions, or other special needs that preclude such students' participation in regular physical education instruction or activities. (PI)

In what years should the PI happen or should it be understood wiggle room exist with PI marked questions and will have to be addressed at end of 3 years?

Should the program be developed by the district or do districts want a prescribed curriculum from the state?

What Recommendation Questions Need to be Addressed from the PE Task Force November 28, 2006

Staffing Requirements:

Examples have been presented to the Task Force about staffing; areas to be flushed out are as follows:

- The state will need to provide adequate funding for a district level PE director, a qualified PE teacher(s) at every school. Does the Task Force agree?
- Professional development in-service training funding will need to specifically be allocated from the state. Does the Task Force agree?
- Should classroom teachers with adequate in-service training perform PE with the oversight of a PE teacher at the school or individual district level during transition/growing years of the PE program?
Does the Task Force want to revisit the model of staffing provided by Dr. Pangrazi that would include a PE Educator (per school), a Physical Activity Aide (per school) and appropriate district level staff?

Facilities and Resource Requirements:

Needs Physical Education Equipment and Facilities (a list would be?):

-PA/PE tools such as balls, nets, goals, etc.?

Books and learning materials?

PE clothes?

Point of prompt signs for playgrounds, classrooms, rest of school buildings?

-Buildings/Office for PE and staff space?

Pangrazi Model – “School environments must be changed rather than programs.”

The School Facilities Board provides the following to schools:

R7-6-249. Physical Education and Comprehensive Health Program Facilities

A. A school facility shall have area and space and fixtures, in accordance with R7-6-250 as modified from time to time, for physical education activity and space for a comprehensive health program established in compliance with the academic standards prescribed by the State Board of Education.

B. For schools designed for 20-50 students, the indoor space available for physical education must be one single space of at least 1,600 square feet. For schools designed for 50 to 125 students, the indoor space available for physical education must be one single space of at least 2,600 square feet. For schools designed for more than 125 students, the total indoor space available for physical education must be at least 5,100 square feet and one single space that is at least 2,600 square feet must be available. This space may have more than one function and may fulfill more than one guideline requirement (cafeteria and/or auditorium). The comprehensive health space is the indoor space available for physical education.

Historical Note

New Section made by exempt rulemaking at 8 A.A.R. 287, effective June 7, 2001 (Supp. 01-4).

R7-6-250. Equipment List for Physical Education

A. A school facility shall have the following equipment and fixtures for physical education

1. Exterior to the building, one basketball court size surface area and two goals per 300 students, four court maximum.

2. Exterior to the building, one baseball/softball backstop.

B. Concrete shall be used when installing basketball courts.

Additional Information:

Second, you wanted to know if there is a way to finance sports stadiums or fields other than by issuing Class B bonds. As part of its annual budget, a district could use monies in its Capital Outlay Revenue Limit (CORL) allocation to fund those items, since CORL monies are unrestricted. A district could also generate additional capital funding by holding a Capital Override election.

What Recommendation Questions Need to be Addressed from the PE Task Force November 28, 2006

Fiscal Considerations:

Staffing might look like?

- District Physical Education person or staff
- Physical Education teacher each school
- Physical Education aide

Other cost to consider?

- Equipment
- Transportation

(Before actually cost can be addressed a program needs to be presented so the JLBC will have something to work from. Rough cost can be assumed from the Pangrazi model and input from the districts.)

Exemptions:

Standard exemption statement: Physical education teaches students essential knowledge and skills; for this reason, exemptions for physical education courses shall not be permitted on the basis of participation on an athletic team, community recreation program, ROTC, marching band, or other school or community activity. A student may be excused if a physician states in writing that physical activity will jeopardize the students' health and well-being or a parent/guardian requests an exemption on religious grounds.

Should exemption be put in place for rural schools, high schools or charter schools?

Should the phase-in approach be longer for schools with special situations such as being in a rural area?

Is the Task Force okay with this statement?

Other Questions Not in Bill but Worthy of Information:

Testing or Assessment:

Models such as CA fitness assessment exist, what kind of model should be included the recommendations? Also what the grade would look like on a report card?

Measurement is a part of the new 2004 Child Nutrition Reauthorization Act that is requiring a wellness policy for each school district that participates in the national school lunch program by the fall of 2006. This policy is to address a PA component and the overall wellness policy is to establish a plan for measuring implementation and involve the parents, students, and representatives of the school.

Perhaps if a school has a wellness council the same council could be activity in PE too. Should the PE recommendations integrate with school wellness policies?

Enforcement:

Look to comparison matrix. Does the Task Force want to report to go to ADE or an independent PA/PE panel with in the Department? What would work?

High Schools:

Rural Issues:

Facilities, Transportation, Teachers.

What Recommendation Questions Need to be Addressed from the PE Task Force
November 28, 2006

Other concepts or questions to address:

Does the task force want to adopt the Mesa Public Schools model as the recommendation of the group?
Does the task force want to adopt any of the other states bills/concepts as the recommendation of the group?
Does the task force want to address modifying the P.L.A.Y. program concept to expand to other grade levels and schools? (Research would have to be conducted to see if this is possible.)
Or does the task force want to create their own blend of recommendations based off knowledge gained from presentations to task force?

Notes:

Mandatory Physical Education Implementation Timeline

**By
Liane Bowles**

These are minimum standards. Districts are encouraged to go beyond the minimum requirements for their students.

2006-2007

- All Physical education classes will have a teacher to student ratio of 1:30.
- All schools will use a written sequential and progressive curriculum that includes skills and concepts of movement and health related fitness.

2007-08

- The Arizona Department of Education will have a Director of Physical Education as a full time position.
- All Physical education classes will have a maximum teacher/student ratio of 1:30
- All schools will use a written sequential and progressive curriculum that includes skills and concepts of movement and health related fitness.
- All schools will have sufficient equipment so that students may practice at multiple learning stations.
- All students in grades k-8 will have Physical Education 2 times per week
- All PE classes at the Elementary level will be 30 minutes or longer.
- All PE classes at the Middle School Level will be 40 minutes or longer.

2009-10

- All Physical Education classes will have a teacher/student ratio of 1:30
- All schools will use a written sequential and progressive curriculum that includes skills and concepts of movement and health related fitness.
- Each school will have sufficient equipment so that students may practice in pairs or independently.
- All students in grades k-8 will have Physical Education every other day.
- All PE classes at the Elementary level will be 30 minutes or longer.
- All PE classes at the Middle School Level will be 40 minutes or longer.
- All PE teachers will have at least 8 hours of professional development in Physical education every year.

2011-12

- All Physical Education classes will have a teacher/student ratio of 1:30
- All schools will use a written sequential and progressive curriculum that includes skills and concepts of movement and health related fitness.
- Each school will have an extensive variety of equipment to facilitate maximum learning for all students.
- All students in grades k-8 will have Physical Education 3 times per week.

- All PE classes at the Elementary level will be 30 minutes or longer.
- All PE classes at the Middle School Level will be 50 minutes or longer.
- All PE teachers will have at least 12 hours of professional development in Physical Education every year.
- All Physical Education teachers will have a PE endorsement on their teaching certificate.

2013-14

- All Physical Education classes will have a teacher/student ratio of 1:30
- All schools will use a written sequential and progressive curriculum that includes skills and concepts of movement and health related fitness.
- All students in grades k-8 will have Physical Education 5 times per week.
- All PE classes at the Elementary level will be 30 minutes or longer.
- All PE classes at the Middle School Level will be 50 minutes or longer.
- All PE teachers will have at least 16 hours of professional development in Physical Education every year.
- All Physical Education teachers will have a PE endorsement on their teaching certificate.
- All schools will have at least one dedicated indoor teaching space that facilitates the active movement of 30 students.

ARIZONA STATE LEGISLATURE

INTERIM MEETING NOTICE OPEN TO THE PUBLIC

MANDATORY PHYSICAL EDUCATION IMPLEMENTATION TASK FORCE

Date: Wednesday, December 14, 2005

Time: ~~9:30 a.m.~~ 2:00 p.m.

Place: House Hearing Room 5

AGENDA

1. Call to Order
2. Review Committee Recommendations--Shannon Harper, American Heart Association
3. Discussion
4. Public Testimony
5. Adopt Committee Recommendations
6. Adjourn

Members:

Senator Barbara Leff, Vice-Chair
Senator Harry Mitchell
Kimberly Babeu
Liane Bowles
Dr. Ken Cameron
Don Hiemstra
Jennal Johnson
John Koury

Representative Mark Anderson, Chair
Representative David Lujan
Pamela Kulinna
Dr. Harold Magalnick
Sylvia Mejia
Robert P. Pangrazi
Margaret Tate

12/9/05
br

People with disabilities may request reasonable accommodations such as interpreters, alternative formats, or assistance with physical accessibility. If you require accommodations, please contact the Chief Clerk's Office at (602) 926-3032, TDD (602) 926-3241.

ARIZONA STATE LEGISLATURE

MANDATORY PHYSICAL EDUCATION IMPLEMENTATION TASK FORCE

Minutes of the Meeting
Wednesday, December 14, 2005
2:00 p.m., House Hearing Room 5

Members Present:

Senator Barbara Leff, Vice-chair	Senator	Representative Mark Anderson, Chair
Harry Mitchell		John Koury
Liane Bowles		Pamela Kulinna
Dr. Ken Cameron		Dr. Harold Magalnick
Don Hiemstra		Sylvia Mejia
Jennal Johnson		Robert P. Pangrazi

Members Absent:

Kimberly Babeu	Representative David Lujan
Margaret Tate	

Staff:

Thomas Adkins, House Research Analyst
Dawn Nazary, Senate Research Analyst
Bill Boyd, Senate Research Analyst

Chairman Anderson called the meeting to order at 2:07 p.m. and attendance was noted.

REVIEW COMMITTEE RECOMMENDATIONS

Shannon Harper, American Heart Association, distributed the following handouts:

- *Physical Education Recommendations from the Task Force, Rough Draft, December 2005 (Attachment A).*
- *Physical Education Recommendations for the Task Force Vote, December 14, 2005 (Attachment B).*
- *Physical Education Draft Recommendations, Options for Task Force Consideration and Vote, December 14, 2005 (Attachment C).*

Ms. Harper said that since this is the last meeting for this Committee, she put together the handouts in order to capture what the members have said over the last three months. An effort was made in these documents to reflect the concerns, questions, and ideas of the Committee. The first two handouts are rough drafts and it is important to remember they are not "set in stone." The first handout is a rough draft and includes the national standards and the three plans

that were submitted to Task Force Members. The second document has questions in green print that the Committee needs to go over to get a Task Force consensus.

Representative Anderson said the first two documents are going to be the basis for the official Committee report. The third document is an outline of what has to be answered at this meeting in order for the Committee to come to an agreement about its recommendation for the Legislature.

Dr. Magalnick said that the discussions were mainly about a program of physical activity and physical education being a part of that, however, the paperwork given out at this meeting focuses on physical education.

In response to Dr. Magalnick, Representative Anderson said that the decision about physical activity versus physical education is part of item #2 in Attachment 3, which would be discussed next.

DISCUSSION

Representative Anderson said that the Committee would go through and discuss the following items in Attachment C and staff will make sure the committee comes to a consensus on the items.

1. How should the program be implemented? The consensus of the Committee was that the program should be implemented statewide.
2. What program model should be required? The consensus of the Committee was a combination of the Physical Education Program and the Pangrazi Program.
3. What is the timeline for requiring physical education time requirements? The consensus of the Committee is for the two-year phase-in model.
4. How should the program be funded? The consensus of the Committee was a per pupil amount formula that includes staffing and equipment.
5. Should the recommendations include the listed staffing requirements? The consensus of the Committee was that there should be a State Level Director of Physical Activity and Education as well as a Qualified Physical Education Leader at each participating school district.
6. Should the program requirements include assessments and performance measures? The consensus of the Committee was a requirement for Department of Health Services and the Arizona Department of Education (ADE) to collaborate on an academic study of the effectiveness of the programs.
7. Should the program establish minimum standards for facilities and assistive resources? The Committee made no recommendation.

8. Should there be exemptions? The consensus of the Committee was that there should be reasonable exemptions supported by a health care professional's note.

The Committee decided on the following recommendations which were not included in Attachment C:

1. The Committee recommends that schools should use similar methods in regard to determining the student/teacher ratio for physical education courses as they do for regular classroom courses.
2. The Committee recommends that special education students also be included in the physical activity programs.

Senator Leff said that she feels there is a need to ask for a fiscal note from the Joint Legislative Budget Committee before any legislation could be formed from these recommendations.

Mr. Pangrazi said that some states have wording that these mandates will only be put forth with appropriate funding.

PUBLIC TESTIMONY

Damian Kramer, Founder and President of Primavera On-Line High School, stated that his school, a National Committee of Accreditation (NCA) accredited charter school, serviced approximately 2,300 students last year. The school was given a grant in 2003 from the ADE for a pilot for Safe and Drug-Free Schools Physical Education Program, to implement an on-line physical education program. A large number of the students were pregnant or parenting students and they found that many were living lifestyles that were unhealthy. They implemented the LIFT (Lifestyle Instruction For Teens) program, which is a physical education program, a nutritional program and a wellness program for their students. It is not based on getting the students together to run around a track. Each student goes through a physical assessment. The students are given a watch that hooks up to their computer, which gives the administrators the heart rate, body weight and many other critical items that are used to assess a student's wellness. He said that the school would be glad to go over the parameters of the program. He said the school would like to share the program with all school districts in the state.

Representative Anderson stated that he had researched this program and found it to be a very exciting concept and program with many benefits.

ADOPTION OF COMMITTEE RECOMMENDATIONS

Representative Anderson explained that someone would make a motion to accept the recommendations the Committee discussed and agreed to today.

Jennal Johnson moved that the Mandatory Physical Education Implementation Task Force accept the recommendations as discussed and developed today. The motion CARRIED by voice vote.

Representative Anderson said that as soon as staff has the information compiled, it will go to the Committee members to review.

There being no further business, the meeting was adjourned at 4:10 p.m.

Respectfully submitted,

Shelley Ponce
Committee Secretary

(Tapes and attachments on file in the Secretary of the Senate's Office/Resource Center, Room 115.)

Physical Education Recommendations from the Task Force
Rough Draft
December 2005

Our goals for this document:

Final report due December 15th of this year will contain an implementation plan and a proposal for draft legislation. Remember our goal is a blue print to a quality PE program

“The goal of physical education is to develop physically educated individuals who have the knowledge, skills and confidence to enjoy a lifetime of healthful physical activity” (National Association for Sports & Physical Education).

Report Starts:

The 2005 Arizona State Legislative session created a physical education implementation task force through House Bill 2111. The task force was charged to address six specific areas to determine how to best implement quality physical education in Arizona schools. The six areas include: time constraints, program content, potential exemptions, staffing facilities and resource requirements. The task force has developed the following recommendations around physical education implementation in Arizona.

A Message from the Task Force:

Physical Education cannot exist in a vacuum. The child must be looked at as a whole including family, environment, nutrition and wellness. An integrated approach must be utilized in order to achieve success in shifting the paradigm in the childhood obesity epidemic. The task force's efforts were not intended to duplicate existing nutrition and wellness policies that are in various stages of development at schools currently, but to compliment them. Clearly the demands of the current education system around unfunded mandates, no child left behind, high stakes testing and english as a second language funding issues, must be taken into consideration with any recommendation. The intent of the task force became clear early on, that the challenge was not to create another unfunded, unimplementable mandate but to generate an understanding of a potential program with standards that would be integrated over time.

The fourteen member task force came together in September of 2005 for a series of five, two hour meetings over the three months. At those meetings a series of experts presented on different aspects Physical Education.

Definitions of Physical Activity and Physical Education:

It is important to know and understand the difference between Physical Activity versus Physical Education, What a Quality Physical Education Program looks like compared the days of dodge ball and rope climbing.

First, the common ground terms used for the task force and this report were from the National Association for Sports & Physical Education (NASPE), their definitions will be used as the national standard through out this recommendation:

Who is NASPE:

The National Association for Sport and Physical Education seeks to enhance knowledge and professional practice in sport and physical activity through scientific study and dissemination of research-based and experiential knowledge to members and the public.

The National Association for Sport and Physical Education (NASPE) is a nonprofit professional organization comprised of individuals engaged in the study of human movement and the delivery of sport and physical activity programs. Through its members as well as corporate and public partnerships, NASPE develops and supports quality sport and physical activity programs that promote healthy behaviors and individual well-being. Educating the American public about the importance of physical education for all children and youth is a primary focus. NASPE's 20,000 members include K-12 physical educators, college and university faculty, researchers, coaches, athletic directors and trainers.

Physical Education vs. Physical Activity:

School **physical education programs** offer the best opportunity to provide physical activity to all children and to teach them the skills and knowledge needed to establish and sustain an active lifestyle. Physical education teachers assess student knowledge, motor and social skills, and provide instruction in a safe, supportive environment. NASPE recommends that schools provide 150 minutes of instructional physical education for elementary school children, and 225 minutes for middle and high school students per week for the entire school year. Based on sequence of learning, physical education should not be compared to or confused with other physical activity experiences such as recess, intramurals, or recreational endeavors.

Physical activity is bodily movement of any type and may include recreational, fitness and sport activities such as jumping rope, playing soccer, lifting weights, as well as daily activities such as walking to the store, taking the stairs or raking the leaves. Similar health benefits to those received during a physical education class are possible during physical activity bouts when the participant is active at an intensity that increases heart rate and produces heavier than normal breathing. NASPE recommends school-age

children accumulate at least 60 minutes and up to several hours of physical activity per day while avoiding prolonged periods of inactivity.

What a Quality Physical Education Program:

According to NASPE guidelines, a high quality physical education program includes the following components: opportunity to learn, meaningful content and appropriate instruction.

Opportunity to Learn:

- Instructional periods totaling 150 minutes per week (elementary) and 225 minutes per week (middle and secondary school)
- Qualified physical education specialist providing a developmentally appropriate program
- Adequate equipment and facilities

Meaningful Content:

- Instruction in a variety of motor skills that are designed to enhance the physical, mental, and social/emotional development of every child
- Fitness education and assessment to help children understand, improve and/or maintain their physical well-being
- Development of cognitive concepts about motor skill and fitness
- Opportunities to improve their emerging social and cooperative skills and gain a multi-cultural perspective
- Promotion of regular amounts of appropriate physical activity now and throughout life

Appropriate Instruction:

- Full inclusion of all students
- Maximum practice opportunities for class activities
- Well-designed lessons that facilitate student learning
- Out of school assignments that support learning and practice
- No physical activity for punishment
- Uses regular assessment to monitor and reinforce student learning

Concepts and Ideas:

An integrated approach to physical education is key but being cognizant of already overloaded schools is a must. Therefore, Arizona must shift the way the community and schools think about physical activity through the out a day in order to address the issue of childhood obesity and physical education.

Three of the task force members Robert P. Pangrazi, Liane Bowles, Jennal Johnson wrote their own recommendations, which are located in appendix of this document. The two programs listed below are from the collaboration of the task force and pieces of the submitted task force members programs.

Two programs listed below would allow the state to shift Arizonans' traditional school environment as a whole. One program looks at physical activity and physical education in the school as a whole, not just a half hour physical education class and sets-up an *Active and Healthy School*.

Another program would allow school districts to create their own pilot model with certain criteria to recognize what works best for them. Both models would allow the state to gather the necessary data needed to create a comprehensive program that encompasses all aspects of wellness: nutrition, physical activity, physical education and whole child and community plus adequate funding.

One: Pangrazi Program – The goal of *Active and Healthy Schools* is to supplement the existing physical education program to offer a wellness based program. *Active and Healthy Schools* require changing the environment so that students learn the habits and behaviors necessary for a healthy lifestyle.

How the Pangrazi Program Works:

To assure implementation of the WIC Reauthorization Act in all Arizona schools, a Physical Activity Education teacher will serve as the *Active and Healthy School* coordinator. This person will be given one released period per day to coordinate and promote the *Active and Healthy School* program. This person will be responsible for assuring that physical activity is implemented along with nutrition and sun safety which are not elaborated on in this report.

Specific responsibilities for the *Active and Healthy School* coordinator will include but not be limited to the following expectations:

- Make the playground an activity-friendly environment to encourage and motivate all students to be active
- Train classroom teachers and playground aides to promote and reinforce student behaviors
- Teach simple active playground games to students
- Help organize lunch hour activities such as intramurals, walking clubs, and jump rope teams

- Teach classroom teachers how to offer 3 to 5 minute activity breaks during subject matter breaks or after 60 minutes of instruction
- Place point of decision prompts throughout the school that reinforce the need or physical activity and healthy nutritional habits
- Write wellness-based newsletters for parents that include information about the need for an active lifestyle, healthy eating and nutritional habits, and sun safety
- Promote healthy eating and nutrition behaviors that include healthy lunches, healthy eating skills, and nutritious food choices
- Promote sun safety behaviors including active learning games from the SunWise materials, announcing the UV index, and encouraging the use of protective clothing and sunscreen

Create outside of school physical activity homework. For example, the President's Council on Physical Fitness and Sports offers a *Presidential Active Lifestyle Award* that offers recognition for activity accumulated outside of the school setting.

Offer Quality Physical Education:

- Assure all schools maintain existing physical education programs that are taught by a certified teacher who has a physical education endorsement
- Offer a minimum of 60 minutes of physical education instruction weekly with a desired goal of 90 minutes where possible
- Maintain a student to teacher ratio that is the same as classroom teachers. If the average classroom teacher class size is 30 to 1, the physical activity education teacher ratio should be the same
- The physical education program will adhere to the state and national physical education standards
- The student to teacher ratio in the elementary school setting should be 500 students to 1 physical activity education teacher

Two: Pilot program –A school district would apply to be a pilot school of the *Healthy and Active School* program or their own model which they can create or use a national model that already exist, as long as the pilot program meets certain criteria.

The school district would participate in a two year pilot program with an assessment component.

- The scope and focus will depend upon funding, pilot program might be grant funded and/or have a per pupil amount. State resources would be available for the program
- 12 schools would participate in a pilot program from across the state: a variety of schools should be represented such as rural, urban, schools at various levels of the free and reduced lunch program and the AZ learns achievement profile to get a comprehensive snap shot of all Arizona schools
- A pilot program can be a model that already exists in national or at the state level as long as meet certain requirements. Programs that are innovative; might integrate with a wellness council as one element

- Physical Activity breaks of 3 to 5 minutes and recess would be encouraged and could be another element of a pilot program
- The school district will need a physical education teacher that is willing to implement and monitor the progress of the program
- Someone must be identified and paid to administer the project
- Assessment can be done by the Arizona Department of Education, a local university or an outside panel.
- What happens after pilot program?

Elements to be Included In Any Program:

The Mandatory Physical Education Implementation Task Force recommends the following elements be included in a physical education program developed at the district level. A program for physical education should be sequential curriculum that is consistent with the national standards.

Time Constraints:

	First Year	Second Year	Third Year
Time	90 minutes per week or 30 minutes 3 times a week	120 minutes per week or 30 minutes 4 times a week	150 minutes per week or 30 minutes 5 times a week

National standards suggest students should participate in a physical education course at least a 150 minutes per week at the elementary level and 225 minutes per week in middle school. The above recommendation offers a graduated scale to allow schools time to create a successful physical education program based off of state standards.

The structure of any physical education class should follow the Centers for Disease Control guidelines that recommend moderate to vigorous physical activity for 50% of class time.

Staffing Requirements:

National recommendations state a qualified physical education teacher will possess knowledge, performance and dispositional characteristics necessary to positively influence, generate or facilitate student learning. The teacher should be a well-prepared specialist who is certified by the state to teach physical education.

Arizona physical education teachers are licensed as secondary teachers with a K-12 endorsement in physical education and paid on the same scale as other teachers.

School districts are strongly urged to hire the best physical education teacher available within the school districts community to facilitate physical education courses. School districts also need to appoint one staff person to be a liaison between the Department of

Education and school district for the reporting and monitoring of physical education programs.

During the course of the task force it became apparent that a state level director is needed to provide direction and monitor physical education and physical activity programs through out the states school districts. A state level director would need to do the following:

A State Level Director of Physical Activity and Education –

- Shows the state values physical education
- Would provide direction for school districts around PA/PE
- Would coordinate with the School Health and Nutrition Programs at the Arizona Department of Education
- Facilitate data collection of PA/PE programs in the state
- Clearing house of information around PA/PE programs in school districts
- Ability to write grants to bring in more funding for PA/PE programs, measurement, data collection and accountability research
- Would ensure accountability and assessment measures

Professional development will be key to effectively deliver physical activity and physical education programs through out schools. In order to adequately prepare classroom teachers for schools such as a *Healthy and Active School* program or to keep physical education teachers abreast of best practices, monies shall be allocated to facilitate to in-service trainings for all appropriate teachers.

Program Content:

Program content should be designed by individual schools districts with national standards and best practices as the objective.

Coordination with Child Nutrition and WIC Reauthorization Act of 2004 –

In order to avoid overlap, programs should coordinate with the wellness components that are required by federal law in the Child Nutrition and WIC Reauthorization Act of 2004.

The Child Nutrition and WIC Reauthorization Act of 2004 passed by Congress mandates that all school districts with a federally-funded school meals program develop and implement wellness policies that address nutrition and physical activity by the start of the 2006-2007 school year.

The following are some of the areas that the Reauthorization Act recommends schools implement to meet their wellness program plan:

- Provide recess and lunch time active breaks for all students

- Present activity breaks in the classroom during subject matter breaks or after 60 minutes of instruction. These breaks last 3-5 minutes and give students a respite from long periods of sitting.
- Design school walking programs that are buddy based or small group based
- Develop activity contracts for students (teaching students to monitor their daily activity patterns outside of the school setting)
- Facilitate programs for parents; sharing information with parents through newsletters and school based programs
- Place point of decision prompts throughout the school to encourage healthy eating and physical activity
- Encourage students to participate in after school physical activities

Activity breaks and recess shall not count toward the recommended physical education class time.

Measurement and Accountability-

Two levels of measurement need to be addressed in Arizona for to assess physical activity and physical education programs through out the state. School districts need to include an assessment piece in their physical education programs to monitor the achievement of students and the program itself. The second measurement needs to be a state level comprehensive study for physical activity and physical education data to obtain a clear understanding of these types of programs in the state of Arizona. Currently, the Arizona Department of Education does not have this type of data because there are no federal or state allocated funds for this type of collection.

One of the most popular assessment totals in the nation is the *fitnessgram*, a health related physical fitness assessment. The *fitnessgram* assesses aspects of a student's health related fitness, not skill or agility. The students are not compared to each other, but to health fitness standards, carefully established for each age and gender, that indicate good health. The state of California successfully uses the *fitnessgram* for its school and state level assessment needs, and could potential be used as a model. More information is available at <http://www.cooperinst.org/ftgmain.asp>

The only two sources of baseline data available in Arizona are: the Centers for Disease Control and Prevention's Youth Risk Behavior Survey (YRBS) which only includes ninth to twelfth graders and self-report physical activity data. In addition, data in the profile only reflects state level information, not individual school districts. Second, the voluntary School Health Education Profiles (AZ SHEP), which is mailed out to the school principal and health educators at the school. The AZ SHEP does not address physical activity data.

National standards can be used to create an Arizona Physical Activity and Physical Education Wellness assessment. The assessment should be tied to the *Healthy School Environment Model Policy* that already exists at the Department of Education. Some of the measurement areas in the current policy include food service operations, nutrition

education and healthy food choices. Once solid data is available, clear steps can be taken to reduce obesity among Arizona's youth.

Recognition and Awards –

Recognition is significant and important for any student, teacher or school district. Recognition should be an element in the physical education program designed by the district. Below are a couple of examples of programs that exist for this purpose, there are several more available through out the United States.

Examples of national recognized programs:

- The President's Council on Physical Fitness and Sports – created in 1966 for school based awards is still going strong with a variety of awards for students. More information can be found at <http://www.fitness.gov/challenge/challenge.html>
- STARS – was created by the National Association for Sports and Physical Education (NASPE) is designed to honor outstanding physical education programs. The program recognizes the school's entire physical education program, not just individual teachers.
For more information - <http://www.aahperd.org/naspe/stars/index.html>

Facilities and Resource Requirements:

Facilities-

The School Facilities Board provides the following to schools for Physical Education and Comprehensive Health programs, if a school does not have these types of facilities, an application should be made to remedy the situation.

R7-6-249. Physical Education and Comprehensive Health Program Facilities

A. A school facility shall have area and space and fixtures, in accordance with R7-6-250 as modified from time to time, for physical education activity and space for a comprehensive health program established in compliance with the academic standards prescribed by the State Board of Education.

B. For schools designed for 20-50 students, the indoor space available for physical education must be one single space of at least 1,600 square feet. For schools designed for 50 to 125 students, the indoor space available for physical education must be one single space of at least 2,600 square feet. For schools designed for more than 125 students, the total indoor space available for physical education must be at least 5,100 square feet and one single space that is at least 2,600 square feet must be available. This space may have more than one function and may fulfill more than one guideline requirement (cafeteria and/or auditorium). The comprehensive health space is the indoor space available for physical education.

Historical Note

New Section made by exempt rulemaking at 8 A.A.R. 287, effective June 7, 2001 (Supp. 01-4).

R7-6-250. Equipment List for Physical Education

A. A school facility shall have the following equipment and fixtures for physical education

1. Exterior to the building, one basketball court size surface area and two goals per 300 students, four court maximum

2. Exterior to the building, one baseball/softball backstop

B. Concrete shall be used when installing basketball courts

Resources –

A per pupil amount for a physical education program should take the following into consideration. This is a starting point but is not a comprehensive list; every district will have individual needs to address:

- Staffing FTE
- Equipment and other learning materials such as books
- Point of prompt signage for classrooms, play ground, offices or rest of school campus
- uniforms

Exemptions:

A national standard exemption statement: Physical education teaches students essential knowledge and skills; for this reason, exemptions for physical education courses shall not be permitted on the basis of participation on an athletic team, community recreation program, ROTC, marching band, or other school or community activity. A student may be excused if a physician states in writing that physical activity will jeopardize the students' health and well-being or a parent/guardian requests an exemption on religious grounds.

Fiscal Considerations:

Implementation for any of the recommendations laid out in this document is contingent on funding from the State Legislature.

APPENDIX

- Proposals to the Physical Education Task Force: Pangrazi, Johnson, Bowles
- Comprehensive Health Education Standards

A Proposal to the Physical Education Task Force

Robert P. Pangrazi

The need for an integrated approach to physical education, physical activity, nutrition, and sun safety is necessary for the health of Arizona's school children.

- The number of overweight children has tripled in the last 25 years
- Nearly a quarter of children, ages 5 to 10 have high cholesterol, high blood pressure, or other early warning signs of heart disease
- According to CDC, for the first time in 100 years, the current generation of school children will have a shorter lifespan than their parents
- Arizona ranks second in the world and first in the U.S. for skin cancer. The incidence of skin cancer in Arizona is occurring at a younger age with increasing frequency.
- Regular physical activity helps improve strength and endurance, helps prevent problems of overweight, builds healthy bones and muscles, and can reduce stress.
- Healthy and active children have the opportunity to perform at their best academically.

Therefore the following recommendations for implementation are offered:

Create a State of Arizona Director of Physical Activity Education

It is apparent that no person at the state level is directly responsible for physical education and physical activity promotion in the school setting. Funding for a state director would indicate the state values physical education and physical activity promotion and would assure statewide direction for school administrators. It would offer central coordination to assure that Active and Healthy School programs are implemented. In addition, accountability and assessment measures would be developed in this office. Data analysis would be coordinated through this office.

Offer Quality Physical Education:

1. Assure all schools maintain existing physical education programs that are taught by a certified teacher who has a physical education endorsement.
2. Offer a minimum of 60 minutes of physical education instruction weekly with a desired goal of 90 minutes where possible.
3. Maintain a student to teacher ratio that is the same as classroom teachers. If the average classroom teacher class size is 30 to 1, the physical activity education teacher ratio should be the same.

4. The physical education program will adhere to the state and national physical education standards.
5. The student to teacher ratio in the elementary school setting should be 500 students to 1 physical activity education teacher.

Develop and Maintain Active and Healthy Schools

The ***Child Nutrition and WIC Reauthorization Act of 2004*** passed by Congress mandates that all school districts with a federally-funded school meals program develop and implement wellness policies that address nutrition and physical activity by the start of the 2006-2007 school year.

The following are some of the areas that the ***Reauthorization Act*** recommends schools implement to meet their wellness program plan:

1. Provide recess and lunch time active breaks for all students.
2. Present activity breaks in the classroom during subject matter breaks or after 60 minutes of instruction. These breaks last 3-5 minutes and give students a respite from long periods of sitting.
3. Design school walking programs that are buddy based or small group based.
4. Develop activity contracts for students (teaching students to monitor their daily activity patterns outside of the school setting).
5. Facilitate programs for parents; sharing information with parents through newsletters and school based programs.
6. Place point of decision prompts throughout the school to encourage healthy eating and physical activity.
7. Encourage students to participate in after school physical activities.

Increase the Activity Levels of Students

Physical education on a daily basis is certainly a desirable goal for all Arizona schools. However, it is an expensive proposition that may be stalled by funding demands. The goal of Active and Healthy schools is to supplement the existing physical education program to offer a wellness based program. Active and Healthy schools require changing the environment so that students learn the habits and behaviors necessary for a healthy lifestyle.

To assure implementation of the WIC Reauthorization Act in all Arizona schools, the Physical Activity Education teacher will serve as the Active and Healthy School coordinator. This person will be given one released period per day to coordinate and promote the Active and Healthy School program. This person will be responsible for assuring that physical activity, nutrition, and sun safety programming is implemented.

Specific responsibilities for the Active and Healthy School coordinator will include but not be limited to the following expectations:

- Make the playground an activity-friendly environment to encourage and motivate all students to be active.
- Train classroom teachers and playground aides to promote and reinforce student behaviors.
- Teach simple active playground games to students.
- Help organize lunch hour activities such as intramurals, walking clubs, and jump rope teams.
- Teach classroom teachers how to offer 3 to 5 minute activity breaks during subject matter breaks or after 60 minutes of instruction.
- Place point of decision prompts throughout the school that reinforce the need for physical activity and healthy nutritional habits.
- Write wellness-based newsletters for parents that include information about the need for an active lifestyle, healthy eating and nutritional habits, and sun safety.
- Promote healthy eating and nutrition behaviors that include healthy lunches, healthy eating skills, and nutritious food choices.
- Promote sun safety behaviors including active learning games from the SunWise materials, announcing the UV index, and encouraging the use of protective clothing and sunscreen.
- Create outside of school physical activity homework. For example, the President's Council on Physical Fitness and Sports offers a *Presidential Active Lifestyle Award* that offers recognition for activity accumulated outside of the school setting.

Nutrition

Nutrition and eating skills receive emphasis equal to physical activity in an Active and Healthy School. The Active and Healthy School coordinator will be responsible for identifying the school personnel who will assume leadership for the following components. These could be school principals, school lunch coordinators, school nurses, and parent-teacher organization leaders. The nutritional policies will include, but not be limited to, the following:

- Offer healthy school lunches as certified by the director of food and nutrition.
- Develop and disseminate a nutrition newsletter to parents and teachers.
- Post point of decision prompts in the lunchroom.
- Offer integrated information on eating skills and food choices in instructional settings.
- Offer students nutritious snacks and treats at birthday parties and other school sponsored events.
- Include a daily "nutrition fact" during school announcements to all students.
- Offer healthy "brown bag" recommendations to students, teachers, and parents.
- Assure school fund raisers are limited to nutritious food items or non-food entities.

Sun Safety

The Active and Healthy School Coordinator shall assure a sun safety program is implemented and supported. The state of Arizona now mandates a sun safety program and it will require but not be limited to the following strategies:

- Utilize existing shade and shade structures for physical education and activity breaks whenever possible.
- Encourage protective clothing, particularly hats, for activity breaks and outdoor physical education activities
- Post and announce the UV index each day
- Encourage the use of sunscreen
- Implement the SunWise materials that include active games and lesson plans.

Accountability/Assessment

Schools will be required to assess the following behaviors:

1. Student Physical Activity Levels. There are a number of ways to monitor physical activity including:

- a. the use of pedometers to measure steps or activity time
- b. logs to record the minutes of daily physical activity
- c. internet recording of minutes of daily activity on the President's Council on Physical Fitness & Sports

2. School Nutrition – Food Service Evaluation. Arizona currently has a Healthy School Environment Model Policy that includes a school food service – nutrition program. Components of the policy include:

- a. Food service operation
- b. Nutrition Education
- c. Healthy food choices at school

3. Sun Safety Evaluation. The State of Arizona now mandates instruction on skin cancer prevention. Instruction must include the basic facts about skin cancer and a comprehensive set of strategies and behaviors to reduce the risk of contracting skin cancer. Evaluation could include:

- a. student knowledge evaluation
- b. administrative school evaluation of strategies and behaviors implemented

Funding

All phases of implementation of this program would be contingent upon appropriation of adequate funding. There is no mandatory financial obligation to school districts if state funding is not appropriated for each of the levels of implementation

Physical Education Implementation Plan for K-8th Grade

Jennal Johnson

Goal: To improve the knowledge and skills of Arizona's elementary and middle public school students to remain physically active for life in order to reduce the prevalence of obesity and associated illnesses. Additionally, active and healthy children perform better academically; therefore the school environment should promote active and healthy behaviors. A quality physical activity and appropriate education program can be a cost-effective way to combat obesity and its associated increased cardiovascular risk.

Current AZ PE Status: Arizona requires physical education at the elementary and middle school level but does not specify frequency and duration requirements. PE curriculum may focus more on athletic skills and knowledge of team sports rather than on physical fitness. Finally, PE is not required for graduation.

Challenges to promoting requirements in elementary and secondary schools:

- Too many other mandated curriculum requirements
- Federal requirements related to "No Child Left Behind" and state high stakes graduation test promote emphasis on subjects included in standardized or graduation testing and resources are diverted away from PE.
- Limited number of endorsed PE teachers
- Limited facilities and staff in smaller or rural schools
- Limited financial resources

Proposed Plan:

By 2006/2007 all public elementary and middle school students will have the equivalent of 30 minutes per day 3 days a week of developmentally appropriate physical activity from the Physical Activity Pyramid and 30 minutes a day at least three days a week for K-6 physical education utilizing the Fitness for Life Model Curriculum and Nutrition curriculum to be developed and approved by AZ Department of Education. By 2007/2008 the physical activity requirement will be 30 minutes per day 5 days a week (Activities and instruction should be adapted for children with disabilities) for K-8 and the education 30 minutes a day at least three days a week for K-8 (Based on NASPE Physical Activity Guidelines for Children). Physical activity periods can consist of the following:

- Activity breaks
- Active recess
- PE class
- Before or after school activity programs if no PE class or recess

Physical Activity can be carried out in the classroom, lunchroom, all purpose room or outside as long as adequate safety procedures are followed. Significant space or resources are not necessary in order to accomplish physical activities from the Physical Activity Pyramid. Physical activity should be monitored utilizing heart rate monitors, pedometers and physical activity logs. One teacher at each school will be designated

the Physical Education Activity Director in order to plan and coordinate opportunities for physical activity that meets or exceeds the designated weekly student physical activity times. Preferably this teacher is an endorsed PE teacher. The Physical Education Activity Director will enlist the assistance of a school nurse to monitor safety issues such as student self-administering medications and establishing emergency procedures. Each school district and the Charter School Board will offer quarterly in-services related to physical activity, the Fitness for Life Model Curriculum (promotes knowledge for physical activity for life) and Nutrition Curriculum. The PE teacher to student ratio will be 1 to 700 in 2006/2007, 1 to 600 in 2007/2008 and 1 to 500 in 2008/2009. The Department of Education is responsible for developing Physical Education Activity In-service content in conjunction with experts at state universities and AZ Department of Health Services. The Department of Education will be responsible for evaluating the effectiveness of physical education programs in each school or school district. Staffing: Individual schools may consider hiring activity aides to assist the Physical Education Activity Director. Interscholastic sports, marching band, ROTC, community activities or academic achievements do not substitute for required physical activity. Exemptions for medical reasons are allowed if approved by a state licensed health care provider.

This is the required default minimum. The rest is to be decided by each school district or individual charter school.

Liane Bowles program. (Didn't have electronically)

Comprehensive Health Education Standards from the Arizona Department of Education

<http://www.ade.az.gov/standards/health/PhysicalRationale.asp>

(Adopted 4.28.97)

(Performance Objectives Added 8.28.00)

PHYSICAL ACTIVITY STANDARDS RATIONALE

A wealth of information has been accumulated to point to the importance of physical activity in promoting health and wellness. Evidence also indicates that habits (lifestyles) established in youth are likely to influence adult lifestyles and associated health and wellness. Physical activity, a primary risk factor for many chronic health conditions, is an integral part of comprehensive school health education but also must be promoted as an important educational goal. Meeting physical activity standards includes both promotion of physical activity among youth and promotion of lifelong physical activity that will enhance workplace skills, fitness and wellness associated with quality of life. Achieving lifetime physical activity standards results in learning real life skills. Higher order skills include decision-making and problem solving required to become informed, lifetime physical activity consumers.

Rationale for Standard 1: Students demonstrate proficiency and the achievement of higher order cognitive skills necessary to enhance motor skills.

Movement competence implies the development of sufficient ability to enjoy participation in physical activities and re-establish a foundation to facilitate continued motor skill acquisition and increased ability to engage in developmentally appropriate daily physical activities. In addition to achieving competence in a few movement forms, which increases the likelihood of lifetime activity participation, the students apply concepts from exercise science disciplines that will help them achieve independence in developing movement competence in new movement forms. The focus is on movement forms appropriate for lifetime activity involvement and the establishment of personal competence.

Rationale for Standard 2: Students comprehend basic physical activity principles and concepts that enable them to make decisions, solve problems and become self-directed lifelong learners who are informed physical activity consumers.

Accessing accurate physical activity information, products and services is important to become informed, responsible physical activity consumers.

Rationale for Standard 3: Students exhibit a physically active lifestyle.

The intent of this standard is to establish patterns of regular participation in meaningful physical activity. This standard connects what is taught in school with students' choices for physical activity outside of school. Students are more likely to participate in physical activities if they have had opportunities to develop interests that are personally meaningful to them.

Rationale for Standard 4: Students achieve and maintain a health-enhancing level of physical fitness.

The intent of this standard is for the student to achieve a health-enhancing level of physical fitness. Students should be encouraged to develop personal fitness levels above those necessary for health-enhancement, based on unique personal needs and interests and necessary for many work situations and active leisure participation. Health-related fitness components include cardiorespiratory endurance, muscular strength and endurance, flexibility, and body composition. Expectations for students' fitness levels should be established on a personal basis, taking into account variation in entry levels, rather than setting a single standard for all children at a given grade level.

Rationale for Standard 5: Students develop self-initiated behaviors that promote effective personal and social interactions in physical activity settings.

The intent of this standard is achievement of self-initiated behaviors that promote personal and group success in activity settings. Behaviors such as safe practices, adherence to rules and procedures, etiquette, cooperation and teamwork, ethical

behavior in sports, and positive social interaction are necessary for all students to develop effective communication skills.

Rationale for Standard 6: Students demonstrate understanding and respect for differences among people in physical activity settings.

The intent of this standard is to develop respect for similarities and differences through positive interaction among participants in physical activity. Similarities and differences include characteristics of culture, ethnicity, motor performance, disabilities, physical characteristics (e.g., strength, size, shape), gender, race and socioeconomic status.

Rationale for Standard 7: Students develop behavioral skills (self-management skills) essential to maintaining a physically active lifestyle.

The intent of this standard is for students to develop an awareness of the intrinsic benefits of participation in lifelong physical activity. Physical activity can provide opportunities for enjoyment, physical fitness and personal challenge.

Physical Education Recommendations for the
Task Force Vote
December 14, 2005

Our goals for this document:

Final report due December 15th of this year will contain an implementation plan and a proposal for draft legislation.

"The goal of physical education is to develop physically educated individuals who have the knowledge, skills and confidence to enjoy a lifetime of healthful physical activity"
(National Association for Sports & Physical Education)

Members – please read the statement below and offer an edits verbal during the committe.

A Message from the Task Force:

Physical Education cannot exist in a vacuum. The child must be looked at as a whole including family, environment, nutrition and wellness. An integrated approach must be utilized in order to achieve success in shifting the paradigm in the childhood obesity epidemic. The task force's efforts were not intended to duplicate existing nutrition and wellness policies that are in various stages of development at schools currently, but to compliment them. Clearly the demands of the current education system around unfunded mandates, no child left behind, high stakes testing and english as a second language funding issues, must be taken into consideration with any recommendation. The intent of the task force became clear early on, that the challenge was not to create another unfunded, unimplementable mandate but to generate an understanding of a potential program with standards that would be integrated over time.

The fourteen member task force came together in September of 2005 for a series of five, two hour meetings over the three months. At those meetings a series of experts presented on different aspects Physical Education.

Edits:

Members – Concepts and Ideas were listed before recommendations so folks would be inclined to read that this is doable and then read the recommendation. Do you agree with this placement?

Concepts and Ideas:

Two programs listed below would allow the state to shift Arizonans' traditional school environment as a whole. One program looks at physical activity and physical education in the school as a whole, not just a half hour physical education class and sets-up an *Active and Healthy School*.

Another program would allow school districts to create their own pilot model with certain criteria to recognize what works best for them. Both models would allow the state to gather the necessary data needed to create a comprehensive program that encompasses all aspects of wellness: nutrition, physical activity, physical education and whole child and community plus adequate funding.

One: Pangrazi Program – The goal of *Active and Healthy Schools* is to supplement the existing physical education program to offer a wellness based program. *Active and Healthy Schools* require changing the environment so that students learn the habits and behaviors necessary for a healthy lifestyle.

Members – The bullet points below are elements for a pilot program design that will be done by school districts. Are any elements missing?

Two: Pilot program – A school district would apply to be a pilot school of the *Healthy and Active School* program or their own model which they can create or use a national model that already exist, as long as the pilot program meets certain criteria.

The school district would participate in a two year pilot program with an assessment component

- The scope and focus will depend upon funding, pilot program might be grant funded and/or have a per pupil amount. State resources would be available for the program
- 12 schools would participate in a pilot program from across the state, a variety of schools should be represented such as rural, urban, schools at various levels of the free and reduced lunch program and the AZ learns achievement profile to get a comprehensive snap shot of all Arizona schools
- A pilot program can be a model that already exists in national or at the state level as long as meet certain requirements. Programs that are innovative; might integrate with a wellness council as one element

- Physical Activity breaks of 3 to 5 minutes and recess would be encouraged and could be another element of a pilot program
- The school district will need a physical education teacher that is willing to implement and monitor the progress of the program
- Someone must be identified and paid to administer the project
- Assessment can be done by the Arizona Department of Education, a local university or an outside panel.
- What happens after pilot program?

Points to be added:

Members below are the recommendations from the Task Force. Remember the recommendations can include pie in the sky goals but the ones below were written to try to accommodate everyone's input. Please look at and offer changes.

Elements to be Included In Any Program:

The Mandatory Physical Education Implementation Task Force recommends the following elements be included in a physical education program developed at the district level. A program for physical education should be sequential curriculum that is consistent with the national standards.

Time Constraints:

	First Year	Second Year	Third Year
Time	90 minutes per week or 30 minutes 3 times a week	120 minutes per week or 30 minutes 4 times a week	150 minutes per week or 30 minutes 5 times a week

National standards suggest students should participate in a physical education course at least a 150 minutes per week at the elementary level and 225 minutes per week in middle school. The above recommendation offers a graduated scale to allow schools time to create a successful physical education program based off of state standards.

The structure of any physical education class should follow the Centers for Disease Control guidelines that recommend moderate to vigorous physical activity for 50% of class time.

Edits:

Staffing Requirements:

National recommendations state a qualified physical education teacher will possess knowledge, performance and dispositional characteristics necessary to positively influence, generate or facilitate student learning. The teacher should be a well-prepared specialist who is certified by the state to teach physical education.

Arizona physical education teachers are licensed as secondary teachers with a K-12 endorsement in physical education and paid on the same scale as other teachers.

School districts are strongly urged to hire the best physical education teacher available within the school districts community to facilitate physical education courses. School districts also need to appoint one staff person to be a liaison between the Department of Education and school district for the reporting and monitoring of physical education programs.

During the course of the task force it became apparent that a state level director is needed to provide direction and monitor physical education and physical activity programs through out the states school districts. A state level director would need to do the following:

A State Level Director of Physical Activity and Education –

- Shows the state values physical education
- Would provide direction for school districts around PA/PE
- Would coordinate with the School Health and Nutrition Programs at the Arizona Department of Education
- Facilitate data collection of PA/PE programs in the state
- Clearing house of information around PA/PE programs in school districts
- Ability to write grants to bring in more funding for PA/PE programs, measurement, data collection and accountability research
- Would ensure accountability and assessment measures

Professional development will be key to effectively deliver physical activity and physical education programs through out schools. In order to adequately prepare classroom teachers for schools such as a *Healthy and Active School* program or to keep physical education teachers abreast of best practices, monies shall be allocated to facilitate to in-service trainings for all appropriate teachers.

Edits:

Program Content:

Program content should be designed by individual schools districts with national standards and best practices as the objective.

Coordination with Child Nutrition and WIC Reauthorization Act of 2004 –

In order to avoid overlap, programs should coordinate with the wellness components that are required by federal law in the Child Nutrition and WIC Reauthorization Act of 2004.

The Child Nutrition and WIC Reauthorization Act of 2004 passed by Congress mandates that all school districts with a federally-funded school meals program develop and implement wellness policies that address nutrition and physical activity by the start of the 2006-2007 school year.

The following are some of the areas that the Reauthorization Act recommends schools implement to meet their wellness program plan:

- Provide recess and lunch time active breaks for all students
- Present activity breaks in the classroom during subject matter breaks or after 60 minutes of instruction. These breaks last 3-5 minutes and give students a respite from long periods of sitting.
- Design school walking programs that are buddy based or small group based
- Develop activity contracts for students (teaching students to monitor their daily activity patterns outside of the school setting)
- Facilitate programs for parents; sharing information with parents through newsletters and school based programs
- Place point of decision prompts throughout the school to encourage healthy eating and physical activity
- Encourage students to participate in after school physical activities

Activity breaks and recess shall not count toward the recommended physical education class time.

Measurement and Accountability-

Two levels of measurement need to be addressed in Arizona for to assess physical activity and physical education programs through out the state. School districts need to include an assessment piece in their physical education programs to monitor the achievement of students and the program itself. The second measurement needs to be a state level comprehensive study for physical activity and physical education data to obtain a clear understanding of these types of programs in the state of Arizona. Currently, the Arizona Department of Education does not have this type of data because there are no federal or state allocated funds for this type of collection

One of the most popular assessment totals in the nation is the *fitnessgram*, a health related physical fitness assessment. The *fitnessgram* assesses aspects of a student's health related fitness, not skill or agility. The students are not compared to each other, but to health fitness standards, carefully established for each age and gender, that indicate good health. The state of California successfully uses the *fitnessgram* for its school and state level assessment needs, and could potential be used as a model. More information is available at <http://www.cooperinst.org/ftgmain.asp>

The only two sources of baseline data available in Arizona are: the Centers for Disease Control and Prevention's Youth Risk Behavior Survey (YRBS) which only includes ninth to twelfth graders and self-report physical activity data. In addition, data in the profile only reflects state level information, not individual school districts. Second, the voluntary School Health Education Profiles (AZ SHEP), which is mailed out to the school principal and health educators at the school. The AZ SHEP does not address physical activity data.

National standards can be used to create an Arizona Physical Activity and Physical Education Wellness assessment. The assessment should be tied to the *Healthy School Environment Model Policy* that already exists at the Department of Education. Some of the measurement areas in the current policy include food service operations, nutrition education and healthy food choices. Once solid data is available, clear steps can be taken to reduce obesity among Arizona's youth.

Recognition and Awards –

Recognition is significant and important for any student, teacher or school district. Recognition should be an element in the physical education program designed by the district. Below are a couple of examples of programs that exist for this purpose, there are several more available through out the United States.

Examples of national recognized programs:

- The President's Council on Physical Fitness and Sports – created in 1966 for school based awards is still going strong with a variety of awards for students. More information can be found at <http://www.fitness.gov/challenge/challenge.html>
- STARS – was created by the National Association for Sports and Physical Education (NASPE) is designed to honor outstanding physical education programs. The program recognizes the school's entire physical education program, not just individual teachers.
For more information - <http://www.aahperd.org/naspe/stars/index.html>

Edits:

Facilities and Resource Requirements:

Facilities-

The School Facilities Board provides the following to schools for Physical Education and Comprehensive Health programs. If a school does not have these types of facilities, an application should be made to remedy the situation.

R7-6-249. Physical Education and Comprehensive Health Program Facilities

A. A school facility shall have area and space and fixtures, in accordance with R7-6-250 as modified from time to time, for physical education activity and space for a comprehensive health program established in compliance with the academic standards prescribed by the State Board of Education.

B. For schools designed for 20-50 students, the indoor space available for physical education must be one single space of at least 1,600 square feet. For schools designed for 50 to 125 students, the indoor space available for physical education must be one single space of at least 2,600 square feet. For schools designed for more than 125 students, the total indoor space available for physical education must be at least 5,100 square feet and one single space that is at least 2,600 square feet must be available. This space may have more than one function and may fulfill more than one guideline requirement (cafeteria and/or auditorium). The comprehensive health space is the indoor space available for physical education.

Historical Note

New Section made by exempt rulemaking at 8 A.A.R. 287, effective June 7, 2001 (Supp. 01-4).

R7-6-250. Equipment List for Physical Education

A. A school facility shall have the following equipment and fixtures for physical education

1. Exterior to the building, one basketball court size surface area and two goals per 300 students, four court maximum
 2. Exterior to the building, one baseball/softball backstop
- B. Concrete shall be used when installing basketball courts

Resources –

A per pupil amount for a physical education program should take the following into consideration. This is a starting point but is not a comprehensive list; every district will have individual needs to address:

- Staffing FTE
- Equipment and other learning materials such as books
- Point of prompt signage for classrooms, play ground, offices or rest of school campus
- uniforms

Exemptions:

A national standard exemption statement: Physical education teaches students essential knowledge and skills; for this reason, exemptions for physical education courses shall not be permitted on the basis of participation on an athletic team, community recreation program, ROTC, marching band, or other school or community activity. A student may be excused if a physician states in writing that physical activity will jeopardize the students' health and well-being or a parent/guardian requests an exemption on religious grounds.

Fiscal Considerations:

Implementation for any of the recommendations laid out in this document is contingent on funding from the State Legislature.

Acknowledgement and Thank You Section:

Physical Education Draft Recommendations
Options for Task Force Consideration and Vote
December 14, 2005

- 1) How should the program be implemented?
 - a. Pilot Program – if yes:
 - i. Pre-select the number of schools.
 - ii. Open grant process.
 - b. State Wide.

- 2) What program model should be required?
 - a. Physical Education only
 - b. Physical Education/Pangrazi
 - c. Pangrazi only

- 3) What is the timeline for requiring physical education time requirements?
 - a. Phase In – if yes:
 - i. Three (3) –year**
 - ii. Other
 - b. One (1) year

**The three year model is illustrated below:

	First Year	Second Year	Third Year
Time	90 minutes per week or 30 minutes 3 times a week	120 minutes per week or 30 minutes 4 times a week	150 minutes per week or 30 minutes 5 times a week

- 4) How should the program be funded?
 - a. Lump sum with competitive bid process.
 - b. Per pupil amount/formula.

- 5) Should the recommendations include the following staffing requirements?
 - a. State Level Director of Physical Activity and Education.
 - b. Qualified Physical Education Leader at each participating school district.

- 6) Should the program requirements include assessments and performance measures?
 - a. Yes – School measures that monitor student achievement and the State should conduct comparison study and data collection.
 - b. No.

- 7) Should the program establish minimum standards for facilities and assistive resources?
 - a. Minimum space guidelines (SFB)
 - b. Other equipment and instructional tools specific to program.

- 8) Should there be exemptions?
 - a. Yes – Athletic or community recreation team participant, ROTC, marching band, other school or community activity, and/or excusal with physician's note.
 - b. No.