Kansas Public School Health: Nutrition, Physical Education and Physical Activity Policies and Practices

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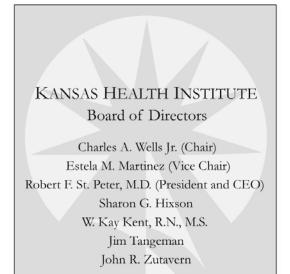
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Kim S. Kimminau led the research team that conducted this study at the Kansas Health Institute, and she is responsible for the content of this report. Interpretations of the data and opinions expressed are solely those of the authors and do not necessarily reflect the views of the Kansas State Department of Education, the Kansas Health Institute or the Sunflower Foundation.

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EXECUTIVE SUMMARY

The growing awareness of the social and medical impact of overweight and obesity has encouraged the development of local, state and federal initiatives. These efforts are particularly important when they target youth, because eating and activity patterns established in childhood have been shown to carry into adulthood. Intervening with this target population can help stem the tide, before overweight and obesity are established as a personal lifestyle and become a burden to an individual's health and to the health system.

The challenge for health promotion among youth is that their world is impacted by their family's behavior, their school environment, media, and other influences that are difficult to modify in a coordinated way. Every day, children receive mixed messages and guidance, making it very difficult to introduce or sustain lifelong, health-promoting lifestyles and behaviors, particularly among children who are at risk for, or already are, overweight.

To better understand the health environment for Kansas youth, this study examined key policies and practices that affect public school children across the state. The rationale for focusing on schools was threefold. First, most Kansas public school age children receive at least one meal daily in school during the school year; about one in four receive two meals. These meals are highly regulated in terms of their nutritional content, as required by the United States Department of Agriculture. Children also eat snacks, purchase additional food and beverage items, and even sell food for fund-raising activities, widening the impact of food in the context of the school day.

Second, most schools offer — and some require — physical education and time for physical activity for students. Well-established research links sedentary lifestyles with increased risk of overweight, diabetes, cardiovascular disease and other chronic conditions that impact an individual's quality of life and overall health. Since habits formed early in life are most likely to persist into adulthood, it makes sense that children who are encouraged to be active are more likely to maintain a healthy level of physical activity as they age.

Finally, there are already multiple federal and state programs aimed at addressing the "obesity epidemic" in schools. Promoting a healthy school environment is the obvious goal, but the chance that some of these programs conflict with each other or with other academic issues was worth investigating. Educators and administrators juggle numerous priorities, and learning how food services, physical education and physical activity support or conflict with other educational requirements (i.e., No Child Left Behind Act, state standardized testing) was considered essential in approaching potential policy reform and practice modification in Kansas.

The three primary topical areas of this study are: nutrition (including food service selections, a la carte foods, and vending machines), physical education, and physical activity. A set of three complementary and comprehensive surveys were administered during early 2006 to school administrators, physical education and nutrition educators, school food service staff, and others with direct knowledge of their school or district policies and practices. The study included only public schools in Kansas, and the overall response rate was 96 percent of school districts and 26 percent of schools. Responding schools are representative of the state by grade level (e.g., elementary, middle/junior high, and high), geographic distribution (rural vs. urban), and district and student body size (small, medium and large). The data were analyzed with particular attention to differences or similarities between rural and urban schools or districts, and between small, medium and large schools because these contrasts were predicted to highlight key policy issues and challenges. Almost 1,000 superintendents, principals, food service staff and educators participated in the project.

Findings from the study include:

- School and district staffs recognize that a healthy school environment is important, and that schools should play a role in addressing health improvement for youth (for example, decreasing the levels of overweight and obesity among students). They also recognize that schools cannot be the only source of support for these goals — they believe it will take the entire community, including parents, local government and others, to effectively encourage healthy youth.
- 2. **Physical education professionals think they need more time with children** to do their jobs and instill healthy patterns of physical activity in every child.

- 3. School food service professionals feel enormous stress and conflict in trying to provide children with healthful meals. These conflicts include meeting requirements of the reimbursable school lunch program, offering food items that children like and will eat, and meeting financial pressures on their program caused in part by the presence of vending machines, school stores, open campus policies and the need to keep the cost of school breakfasts and lunches low. Given the importance of providing the school lunch program to children, a closer examination of the financial incentives and challenges the program faces is warranted.
- Required physical education decreases at the same time vending machine items and a la carte offerings become increasingly common in school — between grades 6 and 9 across the state.
- 5. Almost 59 percent of public schools, representing an estimated 269,000 children in Kansas, provide vending machine offerings every school day. Vending machines are more common in rural than urban schools across the state. The money collected through vending machines is most commonly used for sports clubs and student incentives.
- 6. Relatively few schools (20 percent or fewer, depending on the intervention) have instituted nationally recommended strategies to increase physical activity among students. Strategies include encouraging walking or biking to school, changing the physical education curriculum, increasing physical education class time or increasing recess frequency and/or duration.

The opportunities to improve student health are numerous. While some require careful consideration of costs and possible benefits, others include no- or low-cost options proven effective as part of a comprehensive approach to promoting a healthy child environment. For example, every school district in Kansas was required by July 2006 to institute school wellness guidelines for compliance with the reauthorized federal Child Nutrition Programs. Kansas-specific guidelines were developed under the leadership of the Kansas State Department of Education and were instituted at the local level in each of the 300+ school districts across the state. While the resulting wellness guidelines are just that — guidelines — they represent an important step toward institutionalizing the goal of a healthy school environment for all children.

To augment current guidelines, the results from this project provide KSDE, district and local administrators and educators, and other policymakers with a comprehensive assessment of how current school district and school-level policies affect the goals in improving children's food choices and physical activity, and which policies may need review.

A printed issue brief, *One Piece of the Childhood Obesity Puzzle: Kansas Public Schools*, is available on request from KHI or online at www.khi.org. The brief includes study highlights, along with specific recommendations on how Kansas might use these data to improve the health of its children and adolescents.

INTRODUCTION

The increasing prevalence of obesity among children and adults in the United States has generated substantial interest among public health officials, policymakers and the public at large. The focus often turns to the spiraling costs of managing and treating associated health conditions, such as diabetes and heart disease. If left unchecked, obesity-related chronic disease — heart disease, some cancers, stroke and diabetes — are the first, second, third and sixth leading causes of death among adults in the United States.

The costs associated with these conditions have caused an increasing demand for effective interventions at the individual, family, community and state levels. Annual obesity-attributable U.S. medical expenses were estimated at \$75 billion for 2003. The national cost of childhood obesity is estimated at approximately \$3 billion for those with Medicaid; children covered by Medicaid are nearly six times more likely to be treated for obesity than children covered by private insurance (National Conference of State Legislatures, 2006).

While the costs mount, the debate rages on: Is preventing obesity a personal choice or a matter of public health? For those who feel that its influence on the entire population warrants broad-scale intervention, educators and schools have been primary targets. **Because schools reach almost all children and adolescents, they offer unique opportunities to influence individual physical activity and eating behaviors.**

The school environment has the potential to affect state and national obesity prevalence for a number of reasons. More than half of the children in the U.S. eat one of their daily meals in school; one in four eats two meals per day in school, and many purchase or receive a school-provided or prepared meal. Children obtain about one-third of their total daily energy requirement from school lunch (USDA, 2004), and should release about 50 percent of their daily energy expenditure while at school, depending on the length of their school day (Institute of Medicine, 2005). **Evaluations suggest that school-based nutrition programs can improve youth eating behaviors. Schools also have the opportunity to influence children's attitudes toward physical activity and self-perceptions of physical or athletic competence — factors that promote lifelong physical activity habits.**

RECENT STATE-BY-STATE LEGISLATIVE ACTION

In the past few years, policy changes at the state level have impacted the nutritional environment in schools. Examples include: setting nutritional standards by grade level (California); prohibiting the sale of competitive, low-nutritional-value foods during meal service times (Alabama); permitting sale of foods other than school breakfast and lunch items only after regular school hours (Hawaii); and prohibiting a la carte meal service (Louisiana). In each case, state legislatures have acted to impact the choices children have — or do not have — while at school; their actions are based on understanding the growing problem of childhood obesity and balancing the financial impact of changes on school-related finance. (See Appendix A for a recently updated list of state legislative action.)

The recent trend toward offering soft drinks and food in vending machines at schools has drawn the attention and concern of public health officials and policymakers. Health and nutrition professionals worry about the potential adverse health impacts of easily available sweetened, carbonated beverages and other foods of low-nutritional content. On the other hand, school administrators cite the benefits students enjoy through the additional revenues brought in by pouring rights contracts (a contract with a single vendor that offers only a particular brand of beverages [i.e., Coca Cola]) and vending machine revenues — at a time when the federal budget and many state budgets have constrained school funding.

Policymakers are caught in the middle, with little objective information about the number of contracts currently in place, the amount of money generated, or what alternative approaches have proven feasible. Nonetheless, legislative action has targeted vending machines in schools. In 2005, 22 states introduced legislation that would prohibit foods or beverages of minimal nutritional value (California, Illinois, Florida and others). In some states, legislatures have attempted to control school negotiations with soft drink vendors or their ability to make low-nutritional foods available to students (Colorado). Other states have reviewed the issues and have chosen to leave decision making at the local level (Oregon).

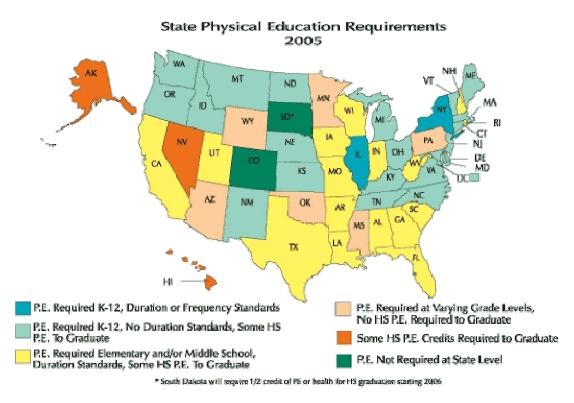
Oregon found that most money generated by the contracts came from student purchases and not from the companies (Pinson and Gaetjens, 2005). **The contracts proved to be more**

lucrative for the vendors than for the schools; vendor payments to schools were \$2–8 per student per year and vendor revenues were \$14–32 per student per year, plus advertising and other rights. Currently, Kansas does not have a complete picture of this issue: There is no central repository of such contracts and no statewide policy guiding districts or schools in vendor negotiations. (The nature of pouring rights contracts related to student nutrition policy was not included in the scope of this effort and the nature of these contracts remains unstudied.)

KANSAS PHYSICAL EDUCATION AND PHYSICAL ACTIVITY REQUIREMENTS

To address the physical activity component of childhood obesity, many states have reviewed their support of both formal, curriculum-based physical education requirements and the ways in which schools encourage physical activity, primarily through recess for elementary students. **State policies vary widely, from no physical education requirements at all to requirements that specify a minimum number of minutes per class, day, or week.**

Unlike Kansas, 38 states require physical education (PE) at all grade levels, but only one, Illinois, requires PE on a daily basis for all students. Figure 1 displays these requirements, and while included here to provide some level of comparison, it slightly misrepresents the current environment in Kansas. Physical education is not currently *required* for all K–12 students in Kansas public schools, as displayed; Kansas requires physical education for public school children in K–5 but not for grades 6–12 (save for one unit required for high school graduation).



Source: National Council of State Legislatures

Discussion of the various physical education requirements is often met with confusion and the question: "When did that change?" Frequently, those asking the question remember their own school days and believe students still are required to take PE. The Kansas state requirement includes required PE for children in K–5 and a high school graduation requirement as follows:

"One unit of physical education, which shall include health and which may include safety, first aid, or physiology. This requirement shall be waived if the school district is provided with either of the following:

(A) A statement by a licensed physician that a pupil is mentally or physically incapable of participating in a regular or modified physical education program; or

(B) a statement, signed by a lawful custodian of the pupil, indicating that the requirement is contrary to the religious teachings of the pupil." (Kansas State Department of Education, 2006a)

An additional policy regarding interscholastic athletics also exists (Regulation 91-31-23 [1996]). The policy does not allow any student below sixth grade to participate in interscholastic

athletics. For some students, it allows athletic practice during the school day only when one or more elective academic courses or a study period is offered. However, a high school cannot conduct athletic practice during the school day, and the policy does not allow athletic practice to count for credit or as a physical education course.

The state of Kansas, along with 39 other states, has no state policy regarding recess. States that do have a recess policy generally encourage daily physical activity levels for elementary school children that follow their state's wellness policy guidelines. (See Appendix B for a summary of physical activity regulations and policies).

RECENT KANSAS-BASED RESEARCH REGARDING STUDENT HEALTH

The connection between daily physical activity and overweight is simple: If the calorie intake from food and beverages exceeds the body's need and daily energy expenditure, an average person will store those excess calories in the form of fat — and will gain weight. While KSDE has provided guidelines regarding adequate physical activity, currently we do not know what the *actual* levels of physical activity are among public school students in Kansas. No comprehensive study assessing their daily activity levels has been accomplished, so state decision makers have little information on whether to encourage or mandate greater levels of physical activity, whether there are highly performing school programs already in place, and if so, how to encourage the adoption of similar programs among other schools. This study requested information concerning policies regarding physical activity, but no direct measurement is available. A comprehensive research-based study would be needed to determine just how much activity is typical for Kansas students.

In 2004, the Kansas State Department of Education surveyed 225 secondary (grade 6–12) schools in Kansas, asking principals and teachers approximately 20 questions in the areas of nutrition and physical education. While the results of this survey have been the best source of state-specific information, the findings are limited in two ways. First, the questionnaire was designed to study many aspects of health education practices in schools and, therefore, the scope and depth of questions related to nutrition and physical activity were limited. Second, the response rate to the survey was less than optimal, so the results are representative only of the

responding schools and not of *all* schools in Kansas. The deficit of information about policies and practices at the school district and building levels is a critical one because in Kansas many policies regarding school nutrition and physical activities are decided at those levels.

The "Physical Essentials, Physical Focus and Physical Dimensions" physical activity and health/wellness curriculum, started in 1992 by KSDE, was recently evaluated. The program is designed to provide youth with the knowledge and skills to enjoy a physically healthy lifestyle. Initially piloted in five high schools ("Physical Dimensions"), the program has been implemented in more than 150 high schools across the state and has expanded into middle schools ("Physical Focus"). Evaluation of these curricula indicates that, when compared to control school classes, the program received more favorable ratings on a number of different measures, including higher levels of physical activity. Policies that regulate the frequency of required PE classes can significantly limit the program; even though the program produces more physically active students both during the PE class and out of school, the benefit is limited when students are required to participate only two or three times a week.

The Kansas Department of Health and Environment is currently conducting a Sunflower Foundation-supported study to collect and validate height and weight data from school-age children across the state. Other data of interest include academic performance measures and additional health indicators, so researchers can better assess overweight and obesity and its impact on school-age children and adolescents. A parallel project underway in a subset of participating high schools includes a detailed study of nutrition, competitive foods, vending machine contracts and direct assessment of physical activity levels. Data from these two studies are not yet available. Both of these studies inform the issues, but neither is designed to estimate statewide conditions, policies and practices that could inform policy initiatives.

KANSAS CONCURRENT RESOLUTION 1604

During the 2005 legislative session, the Kansas Legislature passed Concurrent Resolution 1604 concerning healthy eating and physical activity in public elementary and secondary schools. The resolution requested that KSDE study the state's public schools with regard to school food programs, the availability of other food on the premises, and any available classes on health and physical activities intended to promote healthy bodies and physical fitness. The resolution asked that suggested improvements be reported to the Legislature by the beginning of the 2007 session. The rationale for this resolution was driven by the need to understand what policies are in place that would inform intended policymaking efforts. This project and report are designed to enable KSDE to be responsive to CR 1604 based on the assessment of school and district-level policies and practices across the state.

MATERIALS AND METHODS

SURVEY INSTRUMENT DEVELOPMENT

The Kansas School Nutrition and Physical Activity Survey developed for this project was modeled after numerous national- and state-based studies, including: the Centers for Disease Control and Prevention (CDC) School Health Policies and Programs Study (SHPPS); the National Association for Sport and Physical Education "It's time for your school's physical education checkup: How are you doing?"; the Centers for Disease Control and Prevention's School Health Index; questions based on the Kansas "Eat Smart" Nutrition Guidelines and the "Play Hard" Physical Activity Guidelines; the School Physical Activity and Nutrition Survey Physical Education/Physical Activity District Survey (SPANS); the LEAD Health Education Teacher Questionnaire; and the Missouri Team Nutrition Survey. The project team revised some of the selected questions to make them relevant to Kansas and also developed unique questions where needed.

The CDC SHPPS, the largest, most comprehensive assessment of school health policies and programs, was used extensively for this project. SHPPS is conducted at the state, district, school, and classroom levels nationwide. The study provides data to help improve school health policies and programs. SHPPS was conducted in 1994 and 2000, and data collection for the 2006 study began in January 2006 in Kansas. The survey assesses characteristics of eight components of school health programs at the elementary, middle/junior, and senior high school levels.

Since Kansas schools had recently participated in the SHPPS survey, KSDE was concerned about survey burden among physical education staff. The Kansas School Nutrition and Physical Activity Survey used for this study requested voluntary participation from physical educators who were members of the Kansas Association for Health, Physical Education, Recreation and Dance (KAHPERD).

Relevant questions were included in the district- and school-level questionnaires from the SHPPS 2000 study. Additional questions were added from other validated instruments to customize the final survey.

To meet the needs of KSDE and make data collection as efficient as possible, the Kansas Nutrition and Physical Activity Survey was tailored to three respondent groups. The first was district-level administrators and personnel who deal with different schools regarding both delivering the school lunch program and who set or are aware of district policies around physical activity and physical education. The second group was school-level staffs, including principals, food service staff and others familiar with how nutrition and physical activity policies are implemented. Collectively, these two groups include individuals designated as "authorized representatives" and food service "site directors." The third targeted group was educators who provide physical education, physical activity guidance and/or structured activity programs at the school level.

In each of the three tailored surveys, sub-sets of questions were customized to the expertise of each respondent group. In all three surveys, respondents were asked a set of opinion questions so their overall attitudes could be summarized.

The district-level nutrition survey consisted of 43 questions. The school-level nutrition survey consisted of 38 questions, and the physical activity and physical education survey consisted of 52 questions. Before fielding, the surveys were pilot-tested by content experts and retired school staff members who volunteered to help improve question consistency, wording, answer categories, skip patterns and other refinements that enhanced the ease of administration and consistency among the three versions. The surveys can be found in Appendix C of this report.

SURVEY ADMINISTRATION

The surveys were administered on the Internet. KSDE has a history of very effective use of online services, as all school districts have high-speed Internet access. Survey questions were sent to a vendor experienced in online survey formatting and administration, and with appropriate security policies to protect privacy and data integrity. Before the surveys were made available to respondents, the research team tested the online versions to ensure transcription accuracy; the team also tested numerous features requested to make it as easy as possible to complete the survey. For example, we wanted to ensure that respondents could stop at any point,

save their responses and restart at the point where they had ended. This design feature allowed staff to complete the survey at their convenience and, if needed, follow-up with someone else for more information before answering or completing a question.

A request to complete the two nutrition surveys was sent by KSDE to two e-mail lists, and KAHPERD sent the physical activity survey to its e-mail membership list. First, Jodi Mackey, director of student nutrition and food services at KSDE, composed a short e-mail alerting recipients to the survey and asking for their participation. Vicki Worrell, executive director of KAHPERD, coordinated distribution to the KAHPERD list. Following the request to participate, a follow-up e-mail with a "hot link" that directly opened to the introductory screen on the appropriate survey was sent to each of the respective three survey pools.

One additional follow-up e-mail was sent to encourage participants who had not completed the survey to do so before the fielding period ended. The surveys were fielded for five weeks.

DATA CLEANING

When the raw survey data were provided to the research team by the survey vendor, the data were immediately moved to a secured server at KHI. Only research team staff responsible for analysis was permitted access through password protection.

Some respondents could serve more than one role in their position within the district or at a school. They may have district- and school-level responsibilities, particularly if they are involved in the school lunch program in small districts with only one or two school buildings. No attempt was made to merge the three e-mail lists, so some people may have received duplicate requests to participate.

Each survey was reviewed to assess completeness, and skip patterns were studied to ensure that logical sequences were preserved. When individuals, districts or schools appeared to be duplicates, closer examination was conducted to ensure that each survey represented a legitimate response based on the respondent's characteristics. Because each survey could be linked to its source and because each survey submission was date and time-stamped, eliminating unintended duplicates or partially completed surveys was part of the cleaning procedure.

Recoding of some data was necessary. First, a number of the survey questions included a field for a fill-in answer. The research team reviewed each fill-in answer and either recoded it into one of the question's structured answer choices or grouped it into a new categorical response. Reclassifying the answers allowed us to assemble responses into fewer categories for analysis. Second, some respondents self-identified as an individual other than the staff type we targeted for the survey. For example, the school-level nutrition survey targeted respondent groups who were food service directors and food service site managers. Other school staff, including principals, head cooks and others, responded to the survey. The research team recategorized these respondents into the existing categories or added self-defined groups for analysis.

DATA ANALYSIS PROTOCOL

Standard approaches to survey data analysis were employed. Once the data were cleaned and recoded where necessary, each question's pooled answer distribution was analyzed for logic and pattern analysis. Following distributional, univariate assessment, two-way or multi-way tables were constructed so each question could be profiled and reported. Select question or question sets were analyzed using multivariate methods, primarily regression analyses. All data analysis was completed using SAS[®] 9.1.

Each survey question response category was summarized, and univariate statistics were generated. As these data represent a cross-sectional, point-in-time estimate for each respondent type, each has an associated error rate. Rather than present each value with a confidence interval or coefficient of error, only point estimates are presented. The range of precision for each estimate ranges between two and nine percent. This means that each value may *actually* be more or less than that presented. For those who would like to review the confidence estimates for any of the data presented, they are directed to contact the authors for additional details.

To generalize from the sample, tests for normalcy were conducted. Respondent characteristics were compared to state-level values on a number of variables. We compared the percent of responding elementary, middle/junior high and high schools to the percent statewide. We also reviewed the number of schools and districts in rural areas compared to urban communities (using the classification of rurality for the primary county served by the school or district). Finally, we compared whether respondents represented small, medium or large districts, based on student enrollment. **In each case, the respondents represent the state surprisingly well — and therefore are highly likely to represent statewide practices, policies, attitudes and opinions.** For example, 58 percent of public schools in Kansas are elementary schools, 16 percent are middle/junior high schools and 25 percent are high schools. Fifty-five percent of survey respondents represent elementary schools, 14 percent are middle/junior high schools and 30 percent are high schools, making the respondent pool quite representative of the state distribution.

RESPONSE RATES

Nine hundred eighty-five school- and district-level respondents participated in the surveys. Because of the administration design using three surveys, there was some overlap and some missing data (n=7) regarding the respondent's role in his or her district or school. The research team categorized all respondents into three major groups. These included food service professionals (235 food service directors, 306 food service site managers), administrators (69 superintendents, 23 business managers, five principals, 58 board clerks or secretaries, 12 building secretaries, 12 administrators) and PE/health teachers (three school nurses, 238 physical education teachers, 16 health education teachers). In each case, respondents self-identified their role and responsibilities; the research team did not verify this information. Based on our assumptions about the sample of available respondents from the e-mail distribution lists and other available information, we achieved a 96 percent response rate of school districts to at least one of the three surveys. Each of the individual survey response rates are as follows:

School-level nutrition survey	63 percent
District-level nutrition survey	86 percent
Physical activity survey	37 percent

RESPONDENT OPINIONS

RATIONALE FOR OPINION QUESTIONS AND ANALYSIS PROTOCOL

At the start of each survey, opinion questions were posed to determine the three respondent groups' level of awareness and concern about childhood overweight, obesity, nutrition and school responsibility. For reporting purposes, responses were collapsed into the three groups: food service professionals, administrators and PE/health teachers. Where questions were identical, answers were merged across the three surveys by respondent type. As in data cleaning, common fill-in answers were either grouped as a new answer category or collapsed into the existing answer choices. Most of the responses were based on a five-point Likert scale, where respondents specify their level of agreement. For this survey, a forced-choice method was *not* used; a middle option (3, or neutral) was available. In addition, "Don't Know" was an optional answer for some questions where specific knowledge regarding school policy was needed.

Answer patterns were examined to determine if respondents avoided using extreme response categories (central tendency bias) and whether they answered to portray themselves in a desirable light (social desirability bias). Neither bias type systematically characterizes responses to the opinion questions. Central tendency bias most often characterized the administrator response group and social desirability bias, along with a skewed distribution toward either extreme on the closed-answer scale, most often characterized the PE/health teachers group.

Responses to opinion questions were compared among the three groups and are presented in each case when collected. Comparisons also were made on three other variables: 1) respondent's self-reported years of experience (10 years or fewer vs. more than 10 years of experience); 2) rural school and district respondents compared to urban school and district respondents; and 3) small (13–499 students), medium (500–1,999) and large (2,000 or more students) school district respondents. Where relevant, these comparisons are reported in the text associated with each opinion statement survey result.

WHAT SCHOOL AND DISTRICT STAFFS THINK ABOUT THE ISSUES

Concern about Overweight and Obesity

The first opinion question posed to all respondents concerned overweight and obesity (Table 1). The statement was meant to gauge both awareness of overweight and obesity among children and adolescents, and degree of concern for this aspect of student health.

Among the three respondent groups, health and PE teachers responded most strongly to the question, with 74 percent strongly agreeing with the statement — two times higher than administrators and substantially higher than food service representatives. There is no difference between rural and urban respondents on this question. However, a difference is noted between respondents with less than 10 years of teaching or administrative experience and those with more than 10 years. Fewer respondents with 10 or fewer years of experience disagreed or strongly disagreed (5.0 percent) with the statement than did respondents with more than 10 years of experience (8.5 percent).

Respondent group	Strongly Disagree 1	2	3	4	Strongly Agree 5
Food service professionals	2.9	4.2	15.4	29.7	47.8
Administrators	5.2	4.6	10.4	32.6	37.2
PE/health teachers	4.4	2.4	3.2	15.7	74.2

Table 1. "Overweight and obesity among children and adolescents are of concern to me."

*Percentages total more or less than 100% because of rounding.

Concern about "Junk Food"

Foods of minimal nutritional value, commonly referred to as "junk food," and soft drinks have grown in popularity and exposure to public school students. Most people regard junk food as unhealthy and fattening since these items frequently lack nutritional density, are high in calories per serving size, and are characterized by refined carbohydrates, processed fats and few essential nutrients. All respondents were asked to share their concern about junk food in school (Table 2).

PE/health teachers and food service professionals were more likely to agree or strongly agree that these items are of concern as compared to administrators. Respondents from larger school districts followed by medium school districts and then small school districts agree or strongly agree with the statement (58.4 percent, 55.1 percent, and 42.6 percent, respectively).

Respondent group	Strongly Disagree 1	2	3	4	Strongly Agree 5
Food service professionals	7.8	14.8	22.8	24.0	30.1
Administrators	14.0	18.6	31.4	25.0	11.1
PE/health teachers	7.9	12.3	19.0	25.7	35.2

Table 2. "The availability	of junk food and soft drink	s in my school/district
are of concern to me."		

*Percentages total more or less than 100% because of rounding.

Vending Machines and School Budgets

The media, some school officials and others have reported that vending machines are vital to the financial viability of schools, while others claim the dollars brought in benefit the vendors more than the schools. The survey asked administrators and food service professionals their opinion about the financial impact of vending machines in light of student programming (Table 3).

Most respondents were neutral or disagreed that a lack of vending machines would cause significant cutbacks. Almost 41 percent of food service staff disagreed or strongly disagreed with the statement while 57.6 percent of administrators felt similarly.

It is important to note that school administrators overwhelmingly represent the group who control and oversee vending machines and their contents in schools. The food service staffs are not generally held responsible for the vending machines, and their programs don't generally benefit from vending machine profits. More rural respondents (51.8 percent) than urban respondents (43.4 percent) disagreed or strongly disagreed with this statement, even though vending machines are more common in rural than in urban schools.

Respondent group	Strongly Disagree 1	2	3	4	Strongly Agree 5
Food service professionals	21.8	18.8	26.3	23.3	9.8
Administrators	31.2	26.4	25.7	12.5	4.2

Table 3. "Our school/district would have to make significant cutbacks in student programs if we did not have vending machines."

*Percentages total more or less than 100% because of rounding.

Question not asked of PE/health teachers

School Responsibility for Healthy Choices

The survey explored the assumption that schools are responsible for promoting healthy choices among children. Some feel this is a family responsibility, while others consider teaching skills for lifelong health part of the mission of public education.

As Table 4 illustrates, food service professionals and PE/health teachers both agreed or strongly agreed that schools have a role in promoting healthy choices; administrators were more equivocal regarding this issue. Differences were not detected between rural and urban respondents or between respondents with different levels of experience. The same gradient from large to small school districts was identified for this question, too, where large district respondents felt most strongly (54.5 percent agree or strongly agree), followed by medium-size districts (43.0 percent) and small-size districts (37.3 percent).

Respondent group	Strongly Disagree 1	2	3	4	Strongly Agree 5
Food service professionals	2.3	2.9	9.4	30.3	55.2
Administrators	1.2	5.6	19.2	42.2	31.7
PE/health teachers	2.0	1.6	2.9	13.9	79.5

Table 4. "Schools have a responsibility to promote healthy choices among children and adolescents."

*Percentages total more or less than 100% because of rounding.

The Importance of Physical Activity

The survey explored whether respondents feel that both physical activity and good nutrition are equally important in combating childhood overweight and obesity (Table 5). Most respondents are aware of the importance of both diet and exercise. No difference by rurality or district size is noted, but respondents with more than 10 years of experience were twice as likely to disagree or strongly disagree (5.7 percent) than those with 10 years or less (2.3 percent) that keeping children physically active during the school day is as important as good nutrition.

important as good nutrition."							
Respondent group	Strongly Disagree 1	2	Strongly Agree 5				
Food service professionals	2.4	1.8	7.8	28.7	59.3		
Administrators	1.3	5.9	19.6	38.6	34.6		
PE/health teachers	2.0	0.8	1.6	11.4	84.2		

Table 5 "Keeping children physically active during the school day is as

*Percentages total more or less than 100% because of rounding.

Viewing Students as Customers

The trend to provide a variety of lunch choices, including name-brand foods such as Pizza Hut pizza, can send a conflicting message to public school students. On one hand, they are taught about the food pyramid, physical activity and healthy nutrition. On the other hand, schools provide access to foods that are not as nutritious as the reimbursable USDA lunch selection.

Table 6 reflects a core dilemma facing food service staffs across the state. They must provide a nutritionally balanced meal to all students, at an affordable price, yet they must consider student preferences and other competitive sources of food on school premises that challenge their ability to maintain optimal food services for all. An equal number of respondents strongly agree as strongly disagree with the premise that students are customers. Administrators, on the other hand, are three times less likely to see students as customers to be given desired choices.

Respondent group	Strongly Disagree 1	2	3	4	Strongly Agree 5
Food service professionals	12.8	18.4	34.2	22.1	12.6
Administrators	24.7	34.9	28.1	7.5	4.8

Table 6. "Students should be considered customers and given the food choices they want."

*Percentages total more or less than 100% because of rounding. Question not asked of PE/health teachers

Question not asked of PE/health teachers

Required Time for Physical Education

The physical activity survey asked respondents to share their concern about the lack of a state required minimum number of minutes of physical education in public schools. As might be expected, this targeted group responded strongly to the statement, "The lack of a state required minimum number of physical education minutes per week for students is of concern to me." (Table 7).

Table 7. "The lack of a state required minimum number of physical education minutes per week for students is of concern to me."

Respondent group	Strongly Disagree 1	2	3	4	Strongly Agree 5
PE/health teachers	2.4	1.2	4.9	13.8	77.6

*Percentages total more or less than 100% because of rounding.

Question only asked of PE/health teachers

Sharing Weight Information with Parents

All respondents were asked about sharing information concerning a student's weight with parents. In other states, such reporting has claimed to "have halted the progression of the childhood obesity epidemic" (Arkansas Center for Health Improvement, 2006). Given sensitivities to unfunded mandates and other required activities, it is important to consider the view of school staffs that measuring and reporting height and weight, coming with little or no additional resources, represent another demand on their time. However, by a greater than three to one margin, respondents favor reporting risk information about weight to the parents. PE/health teachers overwhelmingly support such an initiative. (Table 8).

*Table 8. "*Most Kansas schools measure students' heights and weights to determine their level of growth and development. Do you favor sharing this information with parents to identify children who may be overweight or underweight for their age?"

Respondent group	Yes	Νο
Food service professionals	75.8	24.2
Administrators	75.7	24.3
PE/health teachers	92.8	7.2
Total	83.1	16.9

WHAT SCHOOL AND DISTRICT STAFFS THINK ABOUT BARRIERS

While soliciting opinions concerning the issue of overweight and obesity in the context of schools, the surveys also asked respondents to share their views about possible reasons nutrition and physical activity policy change may be problematic, and what some of the barriers are in their schools and districts.

Time, Training and Tools

Using a five-point Likert scale, respondents were asked to indicate their level of agreement with a number of statements. First, they were asked to respond to three issues that might impact classroom teachers in providing health and nutrition education to students: time, training and tools (Table 9).

Respondents identified not having enough time as the most common challenge, followed by not enough training and a lack of appropriate tools and resources. As in some other results, PE/health teachers shared the strongest opinions about these issues, but overall, the responses to this barrier-related question are remarkably similar across all three groups. No difference was detected based on years of experience, rurality or size of school district.

Issue	Respondent group	Strongly Disagree	2	3	4	Strongly Agree 5
Time due to competing instructional demands			2	3	4	
	Food service professionals	5.6	6.4	15.2	37.6	35.2
	Administrators	3.6	10.2	15.3	32.1	38.7
	PE/health teachers	5.6	3.6	7.2	22.7	70.0
Professional training in health content areas						
	Food service professionals	3.4	13.8	32.8	32.8	17.2
	Administrators	6.0	17.3	38.4	26.3	12.0
	PE/health teachers	4.8	16.7	21.5	30.3	26.8
Tools such as curricula and related resources						
	Food service professionals	5.2	11.3	36.5	35.6	11.3
	Administrators	6.7	21.6	35.1	29.8	6.7
	PE/health teachers	7.4	13.8	28.1	32.0	18.6

Table 9. "Classroom teachers are challenged to provide health education and nutrition education because they lack adequate..."

*Percentages total more or less than 100% because of rounding.

Operational, Strategic and Environmental Needs

The second barrier statement posed to all respondents relates to what the respondent felt was needed to promote healthier students. These "needs" represent a diverse list of operational, strategic and attitudinal issues that schools and districts may face in trying to influence and promote their own culture change to healthier school environments.

As Table 10 outlines, food service professionals were more likely to agree that non-foodservice related factors were important barriers. Administrators identified funding and community/family and parent support, and PE/health teachers responded strongly concerning the need to have PE and physical activity requirements for students.

		Strongly				Strongly
Need	Respondent group	Disagree 1	2	3	4	Agree 5
More funding						
	Food service professionals	1.4	8.2	21.9	34.9	33.6
	Administrators	4.4	6.2	20.7	31.0	37.9
	PE/health teachers	2.5	6.2	14.1	23.6	53.5
Written policies						
	Food service professionals	7.4	8.7	23.5	32.2	28.2
	Administrators	8.7	15.2	31.2	34.1	10.9
	PE/health teachers	2.9	7.5	18.8	25.0	45.8
Leadership that supports efforts to create a healthy school environment						
	Food service professionals	3.2	5.7	19.0	34.8	37.3
	Administrators	5.4	13.5	32.4	33.1	15.5
	PE/health teachers	5.4	8.8	15.5	28.0	42.3
Staff/faculty training						
	Food service professionals	1.9	3.2	24.2	44.6	26.1
	Administrators	3.4	8.8	29.9	39.5	18.4
	PE/health teachers	1.7	10.0	16.2	38.3	33.8
Healthier and/or more appealing food choices						
	Food service professionals	4.4	17.0	39.6	27.7	11.3
	Administrators	8.2	19.0	25.8	29.2	17.7
	PE/health teachers	2.1	8.2	11.1	27.6	51.0

Table 10. "My school/district needs the following to promote healthier students."

Need	Respondent group	Strongly Disagree 1	2	3	4	Strongly Agree 5
More health education required of students						
	Food service professionals	1.4	4.2	21.8	43.0	29.6
	Administrators	6.1	18.4	39.5	24.5	11.6
	PE/health teachers	1.7	4.6	19.0	30.0	44.7
More physical education and physical activity required of students						
	Food service professionals	2.0	6.7	15.3	41.3	34.7
	Administrators	6.8	18.9	31.8	25.7	16.9
	PE/health teachers	3.4	2.1	4.6	19.3	70.6
Integration of nutrition education into existing curricula (science, math, social studies, health education, etc.)						
	Food service professionals	1.3	7.3	18.0	36.0	37.3
	Administrators	3.5	14.1	37.3	28.2	16.9
	PE/health teachers	2.9	2.5	14.6	32.2	47.0
Less dependence on vended foods and beverages						
	Food service professionals	3.2	9.2	20.9	22.2	44.4
	Administrators	12.5	16.0	31.2	20.8	19.4
	PE/health teachers	9.9	9.4	18.0	18.0	44.6

Table 10 (continued). **"My school/district needs the following to promote healthier students."**

Need	Respondent group	Strongly Disagree 1	2	3	4	Strongly Agree 5
Less dependence on selling foods and beverages to raise funds for school organizations						
	Food service professionals	4.7	11.5	24.3	19.6	39.9
	Administrators	15.7	20.0	38.6	15.7	10.0
	PE/health teachers	6.9	13.8	20.7	18.1	40.5
Student involvement						
	Food service professionals	1.3	2.6	21.8	34.6	39.7
	Administrators	1.4	4.2	23.6	45.1	25.7
	PE/health teachers	1.3	4.3	14.5	34.0	46.0
Community, family and parent support						
	Food service professionals	1.9	1.9	12.2	32.7	51.3
	Administrators	2.1	3.4	11.0	33.8	49.7
	PE/health teachers	1.7	2.1	7.2	23.2	65.8

Table 10 (continued). "My school/district needs the following to promote healthier students."

*Percentages total more or less than 100% because of rounding.

School Needs in Rank Order

Rank ordered responses concerning school needs to promote healthier students are presented in Table 11. The top four reflect the respondents' perception that more support for health promotion must come from individuals, organizations or policies outside their control. The bottom three rankings are food-related issues that are under school control.

Rank	Need	Agree/Strongly Agree (percent)
1	Community, family and parent support	86.1
2	Student involvement	75.9
3	More physical education and physical activity required of students	73.0
4	More funding	72.6
5	Integration of nutrition education into existing curricula (science, math, social studies, health education, etc.)	68.7
6	Staff/faculty training	67.8
7	Leadership that supports efforts to create a healthy school environment	65.0
8	More health education required of students	63.3
9	Written policies	61.1
10	Healthier and/or more appealing food choices	58.6
11	Less dependence on vended foods and beverages	57.7
12	Less dependence on selling foods and beverages to raise funds for school organizations	50.0

Table 11. Rank Order of School/District Needs to Promote Healthier Students

Influencing Factors for Wellness, Nutrition and Physical Activity

To gain a better understanding of internal and external influences on public school decisions, the survey asked respondents to identify factors that influence their school or district decisions regarding student wellness, nutrition and physical activity.

Food service professionals agree or strongly agree that state and federal laws and policies, budget, and superintendents and/or principals influence a school's health environment. Administrators acknowledge their own influence, and — like the food service professionals cite state and federal laws and policies and budget considerations as important factors. PE/health teachers were more likely than the others to perceive No Child Left Behind requirements and state standardized testing as influencing the school's health promotion agenda (Table 12).

No Child Left Behind requirements Food service professionals Administrators 5.2 6.1 17.4 33.0 38.3 Administrators 8.5 7.0 24.8 23.3 36.4 PE/health teachers 4.0 3.6 13.8 20.1 58.5 State standardized testing Food service professionals 2.6 7.9 22.0 29.0 38.6 Administrators 9.9 11.4 23.7 27.5 27.5 PE/health teachers 3.1 5.3 13.7 17.2 60.8 Local school board policy Food service professionals 1.5 12.3 24.6 31.5 30.0 Administrators 5.2 7.5 40.3 31.3 15.7 PE/health teachers 2.4 8.5 23.2 31.8 34.1 State and federal laws, regulations, policies and guidelines Food service professionals 1.4 4.1 13.0 44.5 37.0 Administrators 0.7 7.3 24.8 36.5 30.7	Influencing factor	Respondent group	Strongly Disagree				Strongly Agree
Behind requirements Food service professionals Administrators 5.2 6.1 17.4 33.0 38.3 Administrators 8.5 7.0 24.8 23.3 36.4 PE/health teachers 4.0 3.6 13.8 20.1 58.5 State standardized testing Food service professionals 2.6 7.9 22.0 29.0 38.6 Administrators 9.9 11.4 23.7 27.5 27.5 PE/health teachers 3.1 5.3 13.7 17.2 60.8 Local school board policy Food service professionals 1.5 12.3 24.6 31.5 30.0 Administrators 5.2 7.5 40.3 31.3 15.7 PE/health teachers 2.4 8.5 23.2 31.8 34.1 State and federal laws, regulations, re	Tactor		1	2	3	4	5
Administrators 8.5 7.0 24.8 23.3 36.4 PE/health teachers 4.0 3.6 13.8 20.1 58.5 State standardized testing Food service professionals 2.6 7.9 22.0 29.0 38.6 Administrators 9.9 11.4 23.7 27.5 27.5 PE/health teachers 3.1 5.3 13.7 17.2 60.8 Local school board policy Food service professionals 1.5 12.3 24.6 31.5 30.0 Administrators 5.2 7.5 40.3 31.3 15.7 PE/health teachers 2.4 8.5 23.2 31.8 34.1 State and federal laws, regulations, policies and guidelines Food service professionals 1.4 4.1 13.0 44.5 37.0 Administrators 0.7 7.3 24.8 36.5 30.7 PE/health teachers 2.2 4.0 19.2 34.4 40.2 Budget considerations and funding Food	Behind						
PE/health teachers 4.0 3.6 13.8 20.1 58.5 State standardized testing		Food service professionals	5.2	6.1	17.4	33.0	38.3
State standardized testing Food service professionals 2.6 7.9 22.0 29.0 38.6 Administrators 9.9 11.4 23.7 27.5 27.5 PE/health teachers 3.1 5.3 13.7 17.2 60.8 Local school board policy Food service professionals 1.5 12.3 24.6 31.5 30.0 Administrators 5.2 7.5 40.3 31.3 15.7 PE/health teachers 2.4 8.5 23.2 31.8 34.1 State and federal laws, regulations, policies and guidelines Food service professionals 1.4 4.1 13.0 44.5 37.0 Administrators 0.7 7.3 24.8 36.5 30.7 PE/health teachers 2.2 4.0 19.2 34.4 40.2 Budget considerations and funding Food service professionals 2.1 4.2 14.8 39.4 39.4 Administrators 1.4 7.2 21.7 34.1 35.5		Administrators	8.5	7.0	24.8	23.3	36.4
standardized testing Food service professionals 2.6 7.9 22.0 29.0 38.6 Administrators 9.9 11.4 23.7 27.5 27.5 PE/health teachers 3.1 5.3 13.7 17.2 60.8 Local school board policy Food service professionals 1.5 12.3 24.6 31.5 30.0 Administrators 5.2 7.5 40.3 31.3 15.7 PE/health teachers 2.4 8.5 23.2 31.8 34.1 State and federal laws, regulations, policies and guidelines Food service professionals 1.4 4.1 13.0 44.5 37.0 Administrators 0.7 7.3 24.8 36.5 30.7 PE/health teachers 0.7 7.3 24.8 36.5 30.7 PE/health teachers 2.2 4.0 19.2 34.4 40.2 Budget considerations and funding Food service professionals 2.1 4.2 14.8 39.4 39.4 Administrators 1.4 7.2 21.7 34.1 35.5		PE/health teachers	4.0	3.6	13.8	20.1	58.5
Administrators 9.9 11.4 23.7 27.5 27.5 PE/health teachers 3.1 5.3 13.7 17.2 60.8 Local school board policy Food service professionals 1.5 12.3 24.6 31.5 30.0 Administrators 5.2 7.5 40.3 31.3 15.7 PE/health teachers 2.4 8.5 23.2 31.8 34.1 State and federal laws, regulations, policies and guidelines Food service professionals 1.4 4.1 13.0 44.5 37.0 Administrators 0.7 7.3 24.8 36.5 30.7 PE/health teachers 2.2 4.0 19.2 34.4 40.2 Budget considerations and funding Food service professionals 1.4 4.1 13.0 34.4 40.2 Budget considerations and funding Food service professionals 2.1 4.2 14.8 39.4 39.4 Food service professionals 2.1 4.2 14.8 39.4 39.4	standardized						
PE/health teachers 3.1 5.3 13.7 17.2 60.8 Local school board policy Food service professionals 1.5 12.3 24.6 31.5 30.0 Administrators 5.2 7.5 40.3 31.3 15.7 PE/health teachers 2.4 8.5 23.2 31.8 34.1 State and federal laws, regulations, policies and guidelines Food service professionals 1.4 4.1 13.0 44.5 37.0 Administrators 0.7 7.3 24.8 36.5 30.7 PE/health teachers 2.2 4.0 19.2 34.4 40.2 Budget considerations and funding Food service professionals 1.4 4.1 13.0 44.5 30.7 PE/health teachers 2.2 4.0 19.2 34.4 40.2 Budget considerations and funding Food service professionals 2.1 4.2 14.8 39.4 39.4 Food service professionals 1.4 7.2 21.7 34.1 35.5 <		Food service professionals	2.6	7.9	22.0	29.0	38.6
Local school board policyFood service professionals1.512.324.631.530.0Administrators5.27.540.331.315.7PE/health teachers2.48.523.231.834.1State and federal laws, regulations, policies and guidelinesFood service professionals1.44.113.044.537.0Administrators0.77.324.836.530.730.731.315.7PE/health teachers2.24.019.234.440.230.7Budget considerations and fundingFood service professionals2.14.214.839.439.4Food service professionals1.47.221.734.135.5		Administrators	9.9	11.4	23.7	27.5	27.5
board policy Food service professionals 1.5 12.3 24.6 31.5 30.0 Administrators 5.2 7.5 40.3 31.3 15.7 PE/health teachers 2.4 8.5 23.2 31.8 34.1 State and federal laws, regulations, policies and guidelines Food service professionals 1.4 4.1 13.0 44.5 37.0 Administrators 0.7 7.3 24.8 36.5 30.7 PE/health teachers 2.2 4.0 19.2 34.4 40.2 Budget considerations and funding Food service professionals 2.1 4.2 14.8 39.4 39.4 Food service professionals 2.1 4.2 14.8 39.4 39.4		PE/health teachers	3.1	5.3	13.7	17.2	60.8
Administrators5.27.540.331.315.7PE/health teachers2.48.523.231.834.1State and federal laws, regulations, policies and guidelinesState and federal laws, regulations, policies and guidelinesState and federal laws, regulations, regulations, Policies and Administrators1.44.113.044.537.0Administrators0.77.324.836.530.730.730.731.440.2Budget considerations and fundingFood service professionals2.14.019.234.440.2Food service professionals2.14.214.839.439.4Administrators1.47.221.734.135.5							
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State and federal laws, regulations, policies and guidelinesFood service professionals1.44.113.044.537.0Administrators0.77.324.836.530.7PE/health teachers2.24.019.234.440.2Budget considerations and fundingFood service professionals2.14.214.839.439.4Food service professionals1.47.221.734.135.5		Administrators	5.2	7.5	40.3	31.3	15.7
federal laws, regulations, policies and guidelinesFood service professionals1.44.113.044.537.0Administrators0.77.324.836.530.7PE/health teachers2.24.019.234.440.2Budget considerations and fundingFood service professionals2.14.214.839.439.4Food service professionals1.47.221.734.135.5		PE/health teachers	2.4	8.5	23.2	31.8	34.1
Administrators 0.7 7.3 24.8 36.5 30.7 PE/health teachers 2.2 4.0 19.2 34.4 40.2 Budget considerations and funding Food service professionals 2.1 4.2 14.8 39.4 39.4 Administrators 1.4 7.2 21.7 34.1 35.5	federal laws, regulations, policies and						
PE/health teachers 2.2 4.0 19.2 34.4 40.2 Budget considerations and funding Food service professionals 2.1 4.2 14.8 39.4 39.4 Administrators 1.4 7.2 21.7 34.1 35.5		Food service professionals	1.4	4.1	13.0	44.5	37.0
Budget considerations and fundingFood service professionals2.14.214.839.439.4Administrators1.47.221.734.135.5		Administrators	0.7	7.3	24.8	36.5	30.7
considerations and fundingFood service professionals2.14.214.839.439.4Administrators1.47.221.734.135.5		PE/health teachers	2.2	4.0	19.2	34.4	40.2
Administrators 1.4 7.2 21.7 34.1 35.5	considerations						
		Food service professionals	2.1	4.2	14.8	39.4	39.4
PE/health teachers 2.6 2.6 14.1 28.2 52.6		Administrators	1.4	7.2	21.7	34.1	35.5
		PE/health teachers	2.6	2.6	14.1	28.2	52.6

Table 12. "The following factors influence my school/district's decisions regarding student wellness, nutrition and physical activity."

Influencing factor	Respondent group	Strongly Disagree	2	2		Strongly Agree
Knowledge of links between health and academic performance		1	2	3	4	5
	Food service professionals	2.9	7.9	27.9	38.6	22.9
	Administrators	2.2	4.4	30.1	47.8	14.7
	PE/health teachers	6.5	11.7	22.2	30.0	29.6
Media						
	Food service professionals	8.2	18.5	32.6	30.4	10.4
	Administrators	15.7	30.6	36.6	14.2	3.0
	PE/health teachers	6.9	19.4	40.1	19.8	13.8
Community opinions						
	Food service professionals	3.7	15.4	23.5	41.2	16.2
	Administrators	3.7	14.1	45.9	32.6	3.7
	PE/health teachers	1.8	11.9	40.6	26.5	19.2
Parents or PTO/PTA opinions or requests						
	Food service professionals	4.9	9.2	33.8	38.0	14.1
	Administrators	6.8	16.5	38.4	32.3	6.0
	PE/health teachers	3.3	19.0	36.7	23.8	17.1
Student or student organization opinions or requests						
	Food service professionals	2.1	9.2	33.1	40.8	14.8
	Administrators	2.3	12.9	43.9	31.1	9.8
	PE/health teachers	6.4	22.1	41.7	23.0	6.9

Table 12 (continued). **"The following factors influence my school/district's decisions regarding student wellness, nutrition and physical activity."**

Table 12 (continued). **"The following factors influence my school/district's decisions regarding student wellness, nutrition and physical activity."**

Influencing factor	Respondent group	Strongly Disagree 1	2	3	4	Strongly Agree 5
Superintendent and/or school principal opinions or requests						
	Food service professionals	2.1	4.2	25.4	40.8	27.5
	Administrators	3.7	6.7	30.4	39.3	20.0
	PE/health teachers	3.6	8.2	24.2	29.2	34.7

*Percentages total more or less than 100% because of rounding.

Influencing Factors in Rank Order

As in other statements posed to the survey respondents, budget and external constraints rank among the greatest influencing factors, while external groups such at PTO/PTAs, students and the media rank lowest in terms of recognized influence on school decisions concerning health (Table 13).

Table 13. Rank Order of Factors that Influence School/District's Decisions Regarding Student Wellness, Nutrition and Physical Activity

Rank	Influencing Factor	Agree/Strongly Agree (percent)
1	Budget considerations and funding	77.2
2	State and federal laws, regulations, policies and guidelines	74.6
3	No Child Left Behind requirements	71.6
4	State standardized testing	69.1
5	Superintendent and/or school principal opinions or requests	63.9
6	Knowledge of links between health and academic performance	60.9
7	Local school board policy	59.4
8	Community opinions	46.3
9	Parents or PTO/PTA opinions or requests	43.5
10	Student or student organization opinions or requests	40.6
11	Media	31.1

Barriers to Providing Quality Nutrition Services

The survey probed respondents to identify barriers to providing quality nutrition services to all students. Some of the categories listed were unique to the nutrition district-level and school-level versions of the surveys, and some were included only on the physical activity survey. Response results for all three surveys are presented in Table 14. The results for responses posed only in the two nutrition surveys are presented in Table 15.

Barrier	Respondent group	Strongly Disagree				Strongly Agree
		1	2	3	4	5
Insufficient funding						
	Food service professionals	19.1	16.6	27.4	18.5	18.5
	Administrators	12.3	10.3	19.9	28.8	28.8
	PE/health teachers	4.4	8.8	16.3	29.1	41.4
Lack of policies						
	Food service professionals	22.8	24.9	28.2	12.8	11.3
	Administrators	19.9	21.9	30.8	21.9	5.5
	PE/health teachers	3.6	11.6	18.8	29.0	37.0
Lack of professional, knowledgeable and trained staff						
	Food service professionals	30.8	25.5	23.9	14.2	5.7
	Administrators	16.7	20.5	33.1	22.5	7.3
	PE/health teachers	24.7	23.5	26.8	16.8	16.4
Insufficient number of trained staff						
	Food service professionals	26.2	23.7	25.2	15.6	9.3
	Administrators	15.2	17.9	34.4	27.2	5.3
	PE/health teachers	12.5	16.5	20.5	25.9	24.6

Table 14. "The following are barriers in my school/district to providing quality nutrition services to all students."

Barrier	Respondent group	Strongly Disagree 1	2	3	4	Strongly Agree 5
Inadequate time during the school day						
	Food service professionals	27.0	21.1	18.3	14.9	18.7
	Administrators	25.5	22.2	19.6	20.8	11.8
	PE/health teachers	2.2	5.7	10.0	23.6	58.5

Table 14 (continued). **"The following are barriers in my school/district to providing quality nutrition services to all students."**

This question and the areas identified as barriers yielded a greater degree of response dispersion than other statements in this section of the surveys. The relative "flatness" of response is largely the result of differences associated with small, medium or large districts and schools. For all the barriers listed, respondents from small- and medium-size schools and districts perceived and reported *fewer* deficits in meeting a quality nutrition program as compared to respondents from larger schools and districts.

However, compared to other issues, none of the barriers elicited a particularly strong response. Only the last option concerning having enough time to provide quality nutrition services provoked an agree or strongly agree rating over 75 percent by one of the respondent groups (PE/health teachers).

Table 15 reports the results for the specific barriers provided as options on the two nutrition surveys. Respondents disagree or strongly disagree that the barriers identified impact their ability to deliver a quality nutrition program to all students.

Barrier	Respondent group	Strongly Disagree				Strongly Agree
		1	2	3	4	5
Inadequate equipment						
	Food service professionals	32.1	27.9	21.0	9.8	9.2
	Administrators	34.5	24.3	18.2	17.6	5.4
Inadequate kitchen space/facilities						
	Food service professionals	34.7	25.4	15.6	12.6	11.8
	Administrators	41.7	23.2	17.2	11.3	6.6
Inadequate service space/facilities						
	Food service professionals	32.6	27.2	17.3	10.3	12.5
	Administrators	40.8	23.0	19.7	11.8	4.6
Inadequate dining space/facilities						
	Food service professionals	35.5	28.3	15.8	10.0	10.4
	Administrators	41.4	25.7	19.7	9.2	4.0
Inadequate dining area supervision						
	Food service professionals	24.2	22.2	20.8	13.8	18.8
	Administrators	32.9	31.6	24.3	9.2	2.0
Unappealing dining area atmosphere						
	Food service professionals	36.6	28.0	18.5	8.8	8.0
	Administrators	43.3	26.7	16.7	10.0	3.3

Table 15. "The following are barriers in my school/district to providing quality nutrition services to all students." (nutrition surveys only)

*Percentages total more or less than 100% because of rounding.

Factors Influencing Student Behaviors

The final opinion question asked the two nutrition survey respondent groups (district- and school-level administrators and food service professionals) to agree or disagree with a set of statements concerning what influences the students' eating behaviors at school. Understanding why students make the choices they do is important; successful change will have to consider existing biases.

Of all the issues presented, personal preference, peer influence, the student's home environment, and commercial advertising elicited the strongest agreement as contributing factors (Table 16). Open campus policies and the relatively recent appearance of branded foods in schools were considered of lower concern, even though many consider these changes important contributors to the obesity crisis in children.

Factor	Respondent group	Strongly Disagree 1	2	3	4	Strongly Agree 5
Ability to pay for foods other than the reduced price or free school meals						
	Food service professionals	19.1	16.6	23.3	21.7	19.3
	Administrators	26.2	18.6	19.3	22.8	13.1
A la carte food options available						
	Food service professionals	13.8	11.8	18.3	32.4	23.7
	Administrators	20.3	13.6	20.3	31.4	14.4
Branded foods available (like Pizza Hut pizza, Doritos, etc.)						
	Food service professionals	21.6	15.2	16.1	24.0	23.1
	Administrators	30.0	16.0	24.0	20.0	10.0
Cafeteria environment						
	Food service professionals	14.5	12.8	25.3	25.9	21.5
	Administrators	18.0	20.0	30.7	20.0	11.3
Cultural practices						
	Food service professionals	16.7	16.0	29.2	23.0	15.0
	Administrators	17.9	14.3	28.6	26.4	13.9

Table 16. "The following factors influence students' eating behaviors at school:" (nutrition surveys only)

Factor	Respondent group	Strongly Disagree				Strongly Agree
		1	2	3	4	5
Home environment						
	Food service professionals	3.5	6.2	18.1	28.7	43.5
	Administrators	2.7	5.4	20.3	28.4	43.2
Open campus during lunch period						
	Food service professionals	31.4	9.8	12.2	12.2	34.5
	Administrators	39.1	10.9	10.9	22.8	16.3
Commercial advertising in school						
	Food service professionals	26.1	14.9	31.1	15.5	12.4
	Administrators	39.8	28.6	20.4	9.2	2.0
Commercial advertising outside of school						
	Food service professionals	9.4	7.8	23.9	23.2	35.6
	Administrators	12.0	11.3	24.8	24.8	27.1
Length of time available for meals						
	Food service professionals	12.1	11.3	23.1	24.8	28.8
	Administrators	19.3	20.0	31.3	18.0	11.3
The time of day meals are offered						
	Food service professionals	18.7	18.9	27.2	17.3	17.9
	Administrators	25.3	26.0	30.7	14.0	4.0
Nutrition/health education						
	Food service professionals	5.3	9.3	32.2	29.0	24.3
	Administrators	7.9	13.8	43.3	27.6	7.2
Peer influence						
	Food service professionals	2.03	3.8	16.8	27.4	49.9
	Administrators	6.9	5.2	19.6	39.9	29.4

Table 16 (continued). "The following factors influence students' eating behaviors at school:" (nutrition surveys only)

Table 16 (continued). "The following factors influence students' eating behaviors at school:" (nutrition surveys only)

Factor	Respondent group	Strongly Disagree 1	2	3	4	Strongly Agree 5
Personal preference						
	Food service professionals	1.8	3.2	16.6	34.2	44.1
	Administrators	3.2	3.9	13.0	31.8	48.0

*Percentages total more or less than 100% because of rounding.

STATEWIDE SCHOOL AND DISTRICT POLICIES

NUTRITION POLICIES

The Richard B. Russell National School Lunch Act and the school breakfast program established by Section 4 of the Child Nutrition Act of 1966 provide nutritionally balanced, low-cost or free meals to children across the nation. The program is administered by the United States Department of Agriculture and is instituted by state agencies — usually departments of education — who manage the program (United States General Accounting Office, 2003).

The program works by reimbursing state programs with cash and donated commodities from the USDA. In return, they must serve lunches that comply with the Healthy Meals for Healthy Americans Act (1994), which includes limits on total fat and saturated fat. School meals must also meet one-third the recommended daily allowance for calories and nutrients, such as protein, calcium, iron, Vitamin A and Vitamin C. The lunches are assessed by averaging the nutritional content over the course of a school week. Meals and menus are developed using a variety of food-based or nutrient-based approaches.

Suffice it to say, this is a highly regulated program that works hard to ensure balanced, healthful meals for all children during every school day. At the same time, the regulations permit, at state agency discretion, the sale of what are considered competitive foods — foods sold in competition with meals served during lunch periods. Under regulation, schools must prohibit the sale of foods of minimal nutritional value in the school cafeteria during the meal periods, but not outside the cafeteria any time during the school day.

Respondents were asked to provide information about current nutrition policies in their schools and districts. Issues included how they exercise their discretion concerning vending machines, a la carte food and beverage items, and an open campus policy (Table 17).

Policy	Percent of responding schools/districts
School has vending machines available for use by students	58.8
School has a policy that requires a minimum amount of time for eating breakfast and/or lunch once they are seated	45.2
School food service program offers a la carte items	44.8
Schools allow advertising for vended beverages or foods on school grounds	15.0
District has an "open campus" where secondary students are able to leave the school premises during the lunch period	11.6

Table 17. Current Statewide Public School Nutrition Policies

PHYSICAL ACTIVITY AND PHYSICAL EDUCATION POLICIES

Kansas does not have a statewide physical education requirement for all public school students, nor does the state require a minimum number of minutes of physical activity during school. Therefore, policies encouraging or requiring students to participate in physical activity or physical education vary across the state. Table 18 provides a profile of critical physical activity and physical education policies that impact students' health.

Table 18. Current Statewide Public Physical Education and Physical Activity Policies

Policy	Percent of responding schools/districts*
Physical education curriculum is based on national and/or state education standards	96.8
School provides students with regularly scheduled recess (K–5 only)	96.0
School offers a physical education class that provides students with at least 25 percent of the class time for physical activity	93.4
Physical education program has a written, sequential curriculum that has been updated in the last five years	88.5
Students enrolled in physical education receive age-appropriate fitness testing at least once a year	85.7
School offers structured physical activities during the before-school or after- school program (among schools that have before- or after-school programs)	58.5
School provides an after-school intramural athletic program (6–12 only)	24.0
Students are provided with supervised, structured physical activities during recess (K–5 only)	14.7
School permits recess to be considered equivalent to a physical education class (K–5 only)	6.4

*Grades K–12 unless otherwise noted.

NUTRITION PROGRAM PRACTICES

STRATEGIES TO IMPROVE NUTRITION

Schools can implement a variety of strategies to address childhood obesity and promote better nutrition. To determine what is currently being done in Kansas, respondents were asked to identify strategies their schools have used. The most commonly used strategies involve changing the foods and beverages available to students and their access to these items. About half of all Kansas schools have changed lunch menus/choices, and almost 30 percent have changed the a la carte food and/or beverage choices available to students.

Although the majority of schools have not removed vending machines, almost 31 percent have reduced access, particularly among high schools. About the same percentage — particularly middle and high schools — has also changed the selections available in vending machines. Other strategies, including longer lunch periods, scheduling recess before lunch, and changing food/beverage choices at school events and fund-raisers, have been used by a small percentage of schools. Table 19 summarizes the strategies that have been implemented.

	Sc	Total		
Strategy	Elementary	Middle	High	
	%	%	%	%
Changed lunch menu/choices	50.0	55.2	50.3	51.7
Reduced access to vending machines	24.6	31.2	39.1	30.6
Changed vending machine selections	22.9	33.3	36.6	30.0
Changed a al carte food/beverage choices	23.3	33.3	31.7	28.8
Removed vending machines	10.0	11.5	11.2	10.8
Longer lunch periods	11.2	9.8	5.6	9.2
Moved recess before lunch	12.1	6.0	6.2	8.6
Changed foods/beverages sold at school events/fundraisers	7.5	9.3	5.6	7.5

Table 19. Strategies to Improve Nutrition

Note: Sample size = 584 (240 elementary schools, 183 middle schools, and 161 high schools).

Urban and rural school differences are evident. Overall, urban schools more often report changing lunch menu or food choices, changing a la carte options, changing food and beverage options offered at school events or fund-raisers, and extending the time allowed for lunch periods. For other strategies — such as addressing vending machines (changing items offered, reducing access, removing them) and scheduling recess before lunch — urban and rural schools report very similar responses (Figure 2).

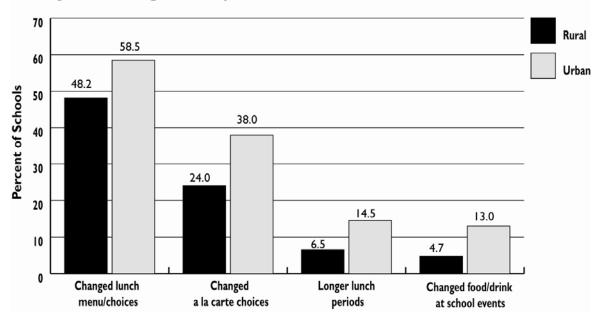


Figure 2. Strategies to Improve Nutrition for Rural and Urban Schools

Differences based on the size of the school district also exist. When compared to small districts, schools from large districts have more often changed their lunch menu or choices. They also more often have longer lunch periods.

Schools from medium-sized districts and large districts are more likely to have changed their a la carte foods/beverages than small districts. Finally, when compared to large districts, schools from medium-sized districts more often reported changing their vending machine selections.

For strategies such as moving recess time, removing or reducing access to vending machines, or changing foods/beverages sold at school events, the schools, regardless of district size, are similar in their strategies (Figure 3).

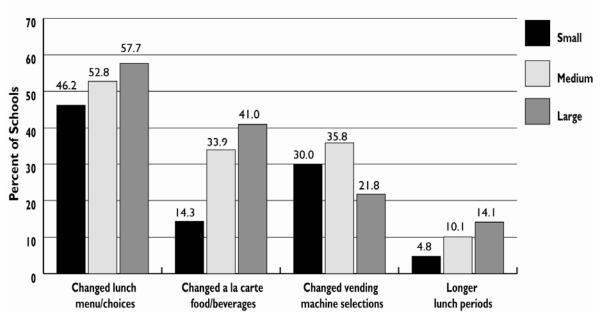


Figure 3. Strategies to Improve Nutrition by Size of School District

Notes:

1) Small district schools = less than 500 students. Medium-sized district schools = 500–1,999 students. Large district schools = 2,000+ students.

MEALS PROVIDED TO STUDENTS

During the weekday, children and youth spend many of their waking hours at school. Public schools are responsible for providing these students with meals, or giving them an option to go off school grounds to eat. The section below describes the meal options available to Kansas students.

Breakfast at School

More than 90 percent of all schools in Kansas offer breakfast to their students (91.7 percent elementary schools, 94.5 percent middle schools, 93.8 percent high schools). Of these schools, almost all offer the USDA school breakfast program. A smaller portion, between 10 and 30 percent, offer a la carte and vending machine items — choices which become increasingly available for older students. Less than 10 percent of schools provide breakfast only when students ask for it, as is mandated by the USDA. They also provide it through items sold in the school store, or to raise funds for student organizations (Table 20).

	Sc	Total		
Breakfast Option	Elementary	Middle	High	
	%	%	%	%
School breakfast program	99.5	98.3	96.7	98.3
A la carte items	11.5	22.1	28.7	19.6
Vended items	9.6	18.0	24.0	16.3
Food items sold to raise funds for student organizations	3.2	5.8	6.7	5.0
Food items available to students only upon request	1.4	2.9	2.0	2.0
Products sold by school store	1.4	1.7	2.7	1.8

Table 20. Breakfast Options Available for Students

Notes:

1) Breakfast options are not mutually exclusive. Schools can use more than one option;

2) Sample size = 540 (218 elementary schools, 172 middle schools and 150 high schools).

Rural schools are more likely to offer breakfast to their students than urban schools (96.6 percent of rural schools versus 86.5 percent of urban schools). The breakfast options available to students, however, are relatively comparable in urban and rural schools. The one exception? Urban schools more often offer a la carte items. The survey indicates 41.6 percent of urban schools offer a la carte items for breakfast, compared to 9.3 percent of rural schools.

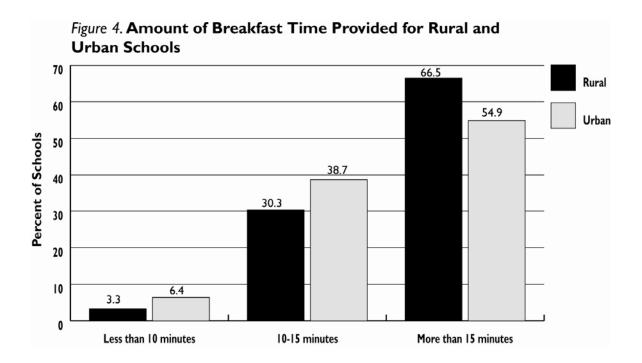
Differences based on the size of the school district reveal that schools from small- and medium-sized districts more often offer breakfast (94.8 percent of small schools, 96.3 percent of medium-sized schools, 86.5 percent of large schools). Schools in large districts are more likely to offer a la carte items — a difference that widens with increasing district size. While 44.8 percent of schools from large districts offer a la carte items, only 16.4 percent of schools from medium-sized districts and 6.0 percent from small districts offer these items for breakfast.

When it comes to vended items, the differences are smaller. At medium-sized schools, 23.2 percent offer vended items, compared to only 11.6 percent of small schools and 12.7 percent of large schools.

Amount of Time Available for Breakfast

Excluding the time spent walking to and from class or waiting in line, 58.7 percent of elementary schools, 62.8 percent of middle schools, and 68.7 percent of high schools give students more than 15 minutes to eat breakfast. Most of the remaining schools provide between 10-15 minutes (36.2 percent elementary schools, 33.1 percent middle schools, and 28.0 percent high schools). These patterns are similar, regardless of the size of the school district.

Urban/rural differences indicate that rural schools more often provide longer breakfast periods for their students (Figure 4).



Challenges in Offering Breakfast

While most Kansas schools provide some type of breakfast for students, there are challenges. At more than one third of the schools, bus arrivals are considered a challenge (39.4 percent elementary schools, 41.9 percent middle schools, and 34.0 percent high schools). The most likely problem stems from late bus arrivals that don't allow time for breakfast before classes begin. Urban and rural schools are relatively comparable in the challenges they face in this area. However, urban schools more often cite bus schedule challenges — 45.1 percent of urban schools compared to 35.7 percent of rural schools.

Schools from different-sized districts face similar challenges in providing breakfast to students. Bus schedules, however, are more often mentioned as a challenge by larger district schools. Compared to only 25.6 percent of small schools, 43.5 percent of medium-sized schools and 50.8 percent of large schools identify bus schedules as a challenge for offering breakfast.

In terms of other challenges, around 10 percent of schools indicate a lack of adequate staff for student supervision (9.2 percent elementary schools, 11.0 percent middle schools, 12.0 percent high schools). Challenges mentioned by less than 10 percent of the schools include limited building hours before school, limited food service staff, cost, and inadequate space/facilities for morning meal service.

The School Lunch

Every day, schools face the challenge of serving quality food to a large group of students; handling that volume often requires dividing meal time into multiple periods. Most Kansas schools (75.2 percent elementary schools, 84.5 percent middle schools, and 88.0 percent high schools) offer between one and four lunch periods, with a small percentage offering five or more periods. For any given lunch period, elementary schools accommodate and feed an average of 95.2 students, middle schools 113.9 students, and high schools 121.6 students.

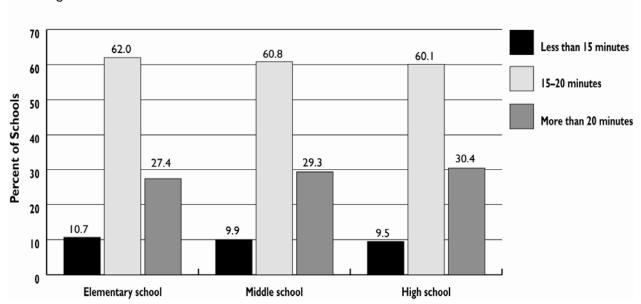
Urban/rural differences are minimal regarding the number of lunch periods offered, with an average of 3.8 periods for urban schools and 3.1 for rural schools. However, for any given lunch period, urban schools handle an average of 136.3 students, while the rural school average is 93.7 students.

Comparisons based on the size of the school district indicate small differences in the number of lunch periods offered (3.0 periods for small schools, 3.1 for medium-sized schools, and 4.1 for large schools). There are, however, differences in the number of students served during any

given lunch period: small schools handle an average of 76.6 students, medium-sized schools 115.1 students, and large schools 142.5 students.

Amount of Time Available for Lunch

Given the large number of students and competing class schedules, the amount of time students have to eat lunch is typically limited — a pattern that is similar regardless of the size of the district or its location. Excluding the amount of time students spend walking to and from class or waiting in food service lines, about 60 percent of schools provide their students with a 15–20 minute lunch period; another 10 percent give them less than 15 minutes. As shown in Figure 5, 30 percent of all schools provide students with more than 20 minutes to sit down and eat their meals.





Setting a Minimum Amount of Time for Meals

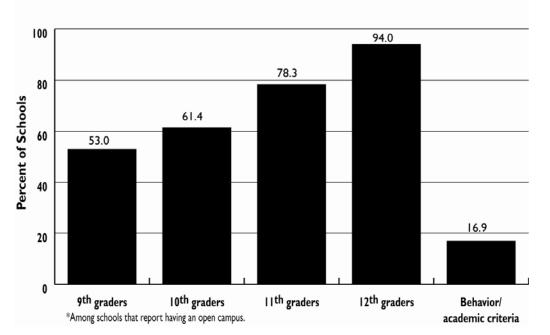
Schools can adopt policies to ensure that students get at least a minimal amount of time to eat. However, in Kansas, half the schools or less have such a policy — 50.8 percent of elementary schools, 42.8 percent of middle schools, and 40.5 percent of high schools.

Urban/rural differences are noted here. Only 21.4 percent of rural schools have a policy requiring a minimum amount of time for meals, compared to 41.0 percent of urban schools.

Differences based on the size of the school district also are noted. Schools from mediumsized districts are most likely to have a policy in place (51.9 percent medium-sized schools, 39.1 percent small schools, and 45.0 percent large schools).

The Open Campus Lunch Option

Some schools have an open campus for their lunch periods, allowing secondary students to leave the school premises during meal time. In Kansas, less than 20 percent of all schools offer this option (15.2 percent of middle schools and 18.8 percent of high schools). For those that do, a little over half offer it to their 9th grade students. By the time students are in 12th grade, however, almost all have the open campus option. Beyond grade level, less than 20 percent of students receive the open campus option based on behavioral or academic achievements (Figure 6).





Respondents representing the school district indicated that their district's open campus policy is influenced by a variety of factors, including students (66.3 percent), district administrators

(51.8 percent), parents (41.0 percent), and community members (26.5 percent). None of the districts indicated that cost is a factor in their open campus policy.

Compared to their urban counterparts, rural students are more likely to have an open campus option. Of the less than 20 percent of schools that offer open campus, 80.7 percent are rural schools. Small sample sizes for urban schools do not allow for urban/rural comparisons on the groups that are allowed an open campus or the people and factors that influence this option.

The size of the school district does influence open campus policies. Overall, schools from small districts are more likely to offer open campus to their students. Although more schools from medium-sized and large districts allow open campus as students advance in grades, some medium-sized schools do not even allow their 12th graders to leave the school grounds.

Conversely, small schools do not allow students an open campus option based on behavioral or achievement criteria, while both medium-sized and large schools do (Table 21).

	School District Size				
Type of Student	Small	Medium	Large		
	%	%	%		
9 th graders	86.2	33.3	40.0		
10 th graders	86.2	41.0	66.7		
11 th graders	96.6	66.7	73.3		
12 th graders	100.0	87.2	100.0		
Students who meet behavioral/achievement criteria	0.0	25.6	26.7		

Table 21. Students Who are Allowed the Open Campus Option by Size of School District

Notes:

1) Small district schools = less than 500 students. Medium-sized district schools = 500–1,999 students. Large district schools = 2,000+ students;

2) Sample size = 83 (29 small schools, 39 medium-sized schools, 15 large schools).

As illustrated in Figure 7, the people who influence the open campus policy differ according to the size of the school district. Parents and community members play a more influential role in small districts, while administrators and students are major influencers in medium-sized districts.

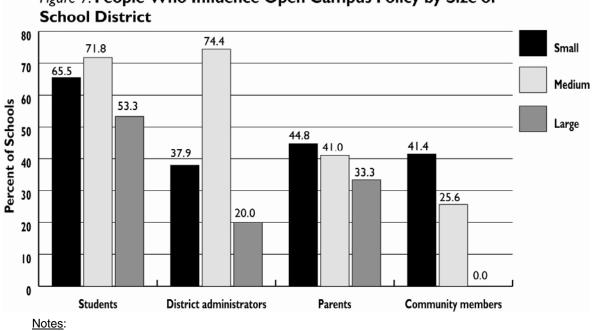


Figure 7. People Who Influence Open Campus Policy by Size of

1) Small district schools = less than 500 students. Medium-sized district schools = 500-1,999 students. Large district schools = 2,000+ students.

Food Serving and Dining Areas

When asked if current facilities provide enough space, chairs and serving lines, 90 percent of elementary, middle, and high schools say their accommodations are adequate. Adequate accommodations are noted regardless of urban/rural status or school district size.

For the few schools that indicated a problem in meeting the dining facility needs of their students (23 elementary schools, 18 middle schools, and 15 high schools), 85.7 percent cite a lack of dining space/seating, while 41.1 percent report classroom scheduling problems.

Differences between urban and rural schools indicate urban schools have more challenges with adequate accommodations. Urban schools more often identify classroom schedules (54.6 percent urban schools, 32.4 percent of rural schools), speed of food service (13.6 percent urban schools, 0.0 percent rural schools), and limited number of cashiers (13.6 percent urban schools, 0.0 percent rural schools) as factors that contribute to accommodation problems.

Differences based on school district size could not be determined due to insufficient sample size.

FOOD OPTIONS AVAILABLE TO STUDENTS: A LA CARTE AND VENDING MACHINES

The availability and accessibility of food options play a critical role in promoting good nutrition for students. Beyond the food and beverages included in the school lunch program, schools often offer a la carte items that are not part of the reimbursable school meals and vending machines options. While these increase the choices for students, they also increase children's access to foods and beverages of limited nutritional value.

Vending machines are most frequently controlled and influenced by school administrators whereas the a la carte program is run by the food service staff. These two optional sources of food and beverage for students are separately run by two different personnel within a school's or district's operation and finance.

A la Carte Offerings

A la carte items can be the sole source of food offered or an addition to the school meal program. For Kansas students, respondents estimated that an average 61.5 percent of students do not eat a la carte items (range = 5-100 percent of students), choosing the reimbursable school meal. Another 25.4 percent of students on average were estimated to eat a la carte items in conjunction with the school meal (range = 0-95 percent), and an average 13.1 percent of students were estimated to eat only a la carte items for lunch (range = 0-75 percent).

Urban and rural schools are relatively comparable on this topic. Differences based on school district size reveal that more students in small-district schools choose only the school meal program lunches. Conversely, larger district schools report more of their students eating a la carte only lunches (Table 22).

	Scl	nool District S	Size
Type of Student	Small	Medium	Large
	Average %	Average %	Average %
Eat only a la carte items during lunch	2.8	15.4	14.0
Eat only a reimbursable lunch	76.0	61.2	58.9
Eat reimbursable lunch and at least one a la carte item	21.2	23.4	27.2

Table 22. Student Selections of a la Carte and Reimbursable Lunches by Size of School District

Notes:

1) Small district schools = less than 500 students. Medium-sized district schools = 500–1,999 students. Large district schools = 2,000+ students;

2) Sample size = 147 (17 small schools, 43 medium-sized schools, 87 large schools). Responses provided by food service professionals.

The Price of a la Carte

Buying a la carte items can be costly. More than half (52.6 percent) of school districts indicate that an a la carte-only meal is more expensive than a school lunch. Another 11.7 percent of districts said the a la carte-only meal is cheaper; the remaining 35.7 percent said the prices are competitive.

Urban school districts more often indicate that a la carte-only lunches cost more than the school lunches (61.0 percent of urban districts vs. 44.2 percent of rural districts). Rural schools more often reported the a la carte-only lunches to be cheaper (19.5 percent of rural districts vs. just 3.9 percent of urban districts). The remaining third of urban and rural districts indicate that a la carte costs are competitive with school lunch prices.

Differences based on school district size reveal that as districts get larger, a la carte-only lunches become more costly than school lunches. Compared to 16.0 percent of schools from small districts, 50.6 percent of schools from medium-sized districts and 74 percent from large districts report an a la carte-only lunch is more expensive. Schools from small compared to larger districts more often report a la carte-only lunches to be comparable to school lunch prices (60.0 percent small schools vs. 36.7 percent of medium-sized schools and 22.0 percent of large schools).

Vending Machines

Many schools provide additional options for students through vending machines filled with beverages, foods or snacks. Although schools may be asked to permit vendors to advertise these items on school grounds (as is the case in 15 percent of Kansas schools), they can put the revenue generated from vended items to use in a variety of ways.

Revenue from Vended Items

Where does the money from the additional food and beverage sales go? **For over half of Kansas school districts, revenue from vending machines and school stores most often goes to sports, or to help student clubs** pay for such items as uniforms and travel. For almost half of school districts, the revenue is used for student incentives (i.e., proms, parties, field trips). In 11 to 15 percent of the districts, revenues are used for teacher/staff incentives, supplies, school operational expenses, and facility improvement (Table 23).

Revenue Use	% of Districts
Sports/clubs (e.g., uniforms, travel)	57.2
Student incentives	45.5
Teacher/staff incentives	14.8
Supplies (e.g., paper, pens, physical education equipment)	12.8
School operational expenses	11.3
Facility improvements	10.9
Supplemental budget/general fund	6.6
Food service program	5.1

Table 23. Use of Revenue from Vending Machines and School Stores

Note: Sample size = 257.

Urban and rural schools are similar in how they use the revenue. However, urban schools more often use the revenue for teacher/staff incentives (21.2 percent urban schools, 11.9 percent rural schools) and facility improvements (16.2 percent urban schools, 8.5 percent rural schools).

Differences based on size reveal that schools from small districts are more likely to use the revenue for student incentives, rather than teacher/staff incentives. In addition, small district

schools are less likely to use the monies for school supplies, operational expenses, facility improvements, supplemental budget/general funds, or the food service program (Table 24).

Table 24. Use of Revenue from Vending Machines and School Stores by Size of School District

	School District Size			
Revenue Use				
	Small	Medium	Large	
	%	%	%	
Sports/clubs (e.g., uniforms, travel)	56.6	55.2	63.0	
Student incentives	47.2	48.6	34.8	
Teacher/staff incentives	9.4	18.1	19.6	
Supplies (e.g., paper, pens, physical education equipment)	7.6	13.3	23.9	
School operational expenses	6.6	7.6	30.4	
Facility improvements	5.7	13.3	17.4	
Supplemental budget/general fund	2.8	6.7	15.2	
Food service program	1.9	4.8	13.0	

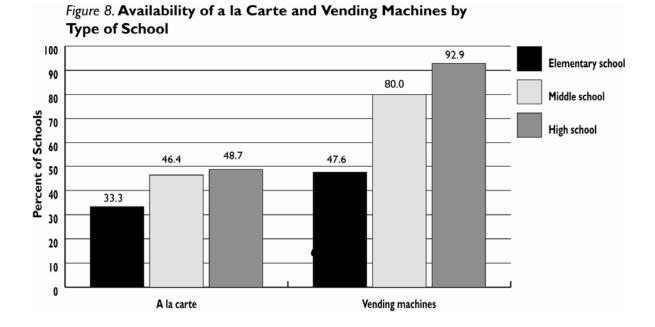
Notes:

1) Small school districts = less than 500 students. Medium-sized school districts = 500–1,999 students. Large school districts = 2,000+ students;

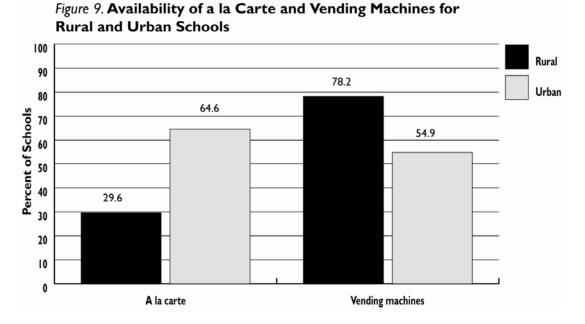
2) Sample size = 257 (106 small districts, 105 medium-sized districts, and 46 large districts).

Availability of a la Carte and Vended Items

Less than half of all schools in Kansas offer a la carte items as part of their food service program — an option that does, however, become more common in middle and high schools. As Figure 8 illustrates, although many schools restrict student access to a la carte options, this option is more available for older students, along with increased access to vending machines.



Rural schools are less likely to offer a la carte food items, but the rural students do have more access to vending machines (Figure 9).



Schools in large districts are most likely to offer a la carte items — a difference that widens as district size increases. Conversely, schools from small districts more often offer vending machines (Figure 10).

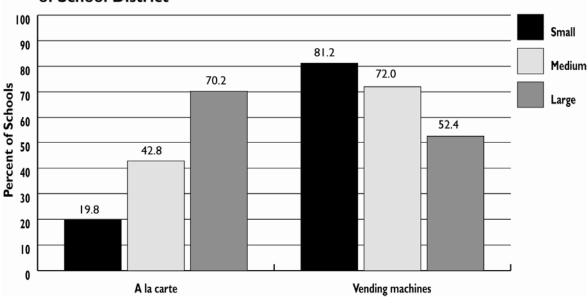


Figure 10. Availability of a la Carte and Vending Machines by Size of School District

Notes:

1) Small district schools = less than 500 students. Medium-sized district schools = 500-1,999 students. Large district schools = 2,000+ students.

Number of Vending Machines Available

In Kansas, schools with vending machines available to students have an average of 3.7 machines for beverages and 1.6 machines for food or snacks. Compared to other schools, high schools have more of both types although elementary schools with vending machines still have an average of 3.4 beverage machines. Urban schools have more machines on average than rural schools; and larger compared to smaller schools have more machines (Table 25).

Group	Food/Snac	Food/Snack Machines		
	Average	Range	Average	Range
Total schools	1.6	1 – 20	3.7	1 – 30
Elementary schools	1.4	1 – 6	3.4	1 – 10
Middle schools	1.4	1 – 6	3.4	1 – 12
High schools	2.0	1 – 20	4.1	1 – 30
Urban schools	2.6	1 – 20	4.9	1 – 30
Rural schools	1.3	1 – 4	3.3	1 – 10

Table 25. Number of Vending Machines Available in Schools

Group	Food/Snac	k Machines	Beverage Machines	
	Average	Range	Average	Range
Small district schools	1.2	1 – 2	2.8	1 – 6
Medium-sized district schools	1.4	1 – 4	3.9	1 – 10
Large district schools	3.1	1 – 20	5.3	1 – 30

Table 25 (continued). Number of Vending Machines Available in Schools

Notes:

1) Small district schools = less than 500 students. Medium-sized district schools = 500–1,999 students. Large district schools = 2,000+ students;

2) Sample size for food/snack machines: 300 total schools, 77 elementary schools, 105 middle schools, 118 high schools, 78 urban schools, 222 rural schools, 136 small district schools, 113 medium-sized district schools, 51 large district schools;

3) Sample size for beverage machines: 390 total schools, 107 elementary schools, 142 middle schools, 141 high schools, 102 urban schools, 288 rural schools, 168 small district schools, 149 medium-sized district schools, 73 large district schools.

When a la Carte and Vended Items are Available

Want to buy lunch from a vending machine? In more than half of Kansas schools, that's an option for students — vending machines are available throughout the entire school day; and about half of schools allow students access to vending machines before and after school. In addition, about 90 percent of those schools also offer a la carte items during lunch periods, and between a third and half of all schools provide a la carte items during the breakfast meal period (Table 26).

	Sc	hool Level		Total
Time of Day Available	Elementary	Middle	High	
	%	%	%	%
A la Carte				
During lunch	89.3	91.6	90.5	90.5
During breakfast meal period	32.0	36.1	51.4	39.7
Before school begins	16.0	19.3	25.7	20.3
After lunch	14.7	12.0	13.5	13.4
Between breakfast and lunch	8.0	4.8	12.2	8.2
Vending Machines				
Throughout school day	56.1	57.0	61.0	58.2
Before school	51.4	47.9	57.4	52.3
After end of school day	51.4	52.1	52.5	52.0
After last lunch period	32.7	31.7	35.5	33.3

Table 26. When a la Carte and Vending Machine Items are Available

Notes: See next page.

Notes: Table 26

1) Sample size for a la carte = 232 (75 elementary schools, 83 middle schools, and 74 high schools);

2) Sample size for vending machines = 390 (107 elementary schools, 142 middle schools, and 141 high schools).

Urban and rural schools differ on when they make their a la carte and vended items available. Urban schools are more likely to offer a la carte items during meal periods, while rural schools offer them after lunch. For vending machines, urban schools more often limit availability to before or after school, while rural schools more often provide access throughout the school day (Table 27).

Table 27. Times of Day a la Carte and Vended Items are Available for Urban and Rural Schools

	School Type			
Time of Day Available	Urban	Rural		
	%	%		
A la Carte				
During lunch	95.2	85.2		
During breakfast meal period	45.2	33.3		
Before school begins	18.6	22.2		
After lunch	7.3	20.4		
Between breakfast and lunch	4.8	12.0		
Vending Machines				
Throughout school day	49.0	61.5		
Before school	62.8	48.6		
After end of school day	60.8	49.0		
After last lunch period	30.4	34.4		

Notes:

1) Sample size for a la carte = 232 (108 rural schools, 124 urban schools);

2) Sample size for vending machines = 390 (288 rural schools, 102 urban schools).

Small, medium, and large district schools also differ in when they make a la carte and vended items available. Compared to schools from larger districts, those from small districts more often offer a la carte items after lunch, and less often before school or during meal periods. Schools from small districts are more likely to make vending machines available after lunch, and less often before or after school (Table 28).

Time of Day Available	Sch	School District Size			
	Small	Medium	Large		
	%	%	%		
A la Carte					
During lunch	65.8	94.4	97.1		
During breakfast meal period	26.8	38.2	46.1		
Before school begins	14.6	24.7	18.6		
After lunch	34.2	12.4	5.9		
Between breakfast and lunch	0.0	14.6	5.9		
Vending Machines					
Throughout school day	53.0	65.8	54.8		
Before school	47.0	53.7	61.6		
After end of school day	50.0	50.0	61.6		
After last lunch period	39.3	28.9	28.8		

Table 28. When a la Carte and Vending Machine Items are Available by Size of School District

Notes:

1) Small district schools = less than 500 students. Medium-sized district schools = 500–1,999 students. Large district schools = 2,000+ students;

2) Sample size for a la carte and for vending machines = 390 (168 small district schools, 149 medium-sized district schools, and 73 large district schools).

Location of a la Carte and Vended Items

To determine if Kansas students have easy and potentially unsupervised access to "junk food," respondents were asked about the location of a la carte items and vending machines. In 75 percent or more of the schools, the a la carte food and beverage items are in the dining area, including food service and eating areas. Between 13 and 21 percent have them in the student commons or other activity area; less than 7 percent have them in kiosks outside the dining area.

Vending machines are mostly found in the student commons area (for 36 to 48 percent of the schools), the faculty lounge (where sometimes students are permitted access), and hallway. Vending machines are at the school entrance and in the cafeteria/lunch room in approximately 25 percent of schools. In a small percentage of schools, vending machines can also be found in gymnasiums and other locations (Table 29).

	Sc	Total		
Location	Elementary	Middle	High	
	%	%	%	%
A la Carte				
Dining area	85.1	80.7	75.3	80.4
Commons or other student activity area	13.5	15.7	20.6	16.5
Kiosks outside dining area	2.7	2.4	6.8	3.9
Vending Machines				
Faculty lounge	47.7	43.0	47.5	45.9
Hallway	42.1	46.5	46.8	45.4
Student commons area	35.5	38.7	45.4	40.3
Cafeteria/lunchroom	23.4	21.8	24.8	23.3
School entry	25.2	21.8	23.4	23.3
Gymnasium	9.4	7.0	8.5	8.2
Outside school	0.9	0.7	1.4	1.0

Table 29. Location of a la Carte and Vending Machine Items

Notes:

Sample size for a la carte = 232 (75 elementary schools, 83 middle schools, and 74 high schools);
 Sample size for vending machines = 390 (107 elementary schools, 142 middle schools, and 141 high schools).

Urban and rural schools provide similar responses to this survey question. However, rural schools are more likely to offer a la carte items in the commons or other student activity areas; 25.9 percent of rural schools versus just 8.2 percent of urban schools. Urban schools more often place vending machines in the faculty lounge; 57.8 percent of urban schools as compared to 41.7 percent of rural schools.

Compared to other schools, those from medium-sized districts are less likely to offer a la carte items in the dining area (74.2 percent medium-sized schools, 87.8 percent small schools, 83.0 percent large schools), and are more likely to provide these items in the commons or other student activity area (25.8 percent medium-sized schools, 12.2 percent small schools, 10.0 percent large schools).

Schools from medium-sized districts are also more likely to have vending machines in the cafeteria/lunchroom (30.2 percent medium-sized schools, 17.9 percent small schools, 21.9 percent large schools) and at the school entrance (31.5 percent medium-sized schools, 19.6

percent small schools, 15.1 percent large schools). Schools from large districts more often report vending machines in the gymnasium (17.8 percent large schools, 5.4 percent small schools, 6.7 percent medium-sized schools), hallway (56.2 percent large schools, 47.0 percent small schools, 38.3 percent medium-sized schools), and faculty lounge (72.6 percent large schools, 33.3 percent small schools, 47.0 percent medium-sized schools).

Limiting Access to Vending Machines

In Kansas, schools that place vending machines with carbonated beverages in the cafeteria/lunchroom are supposed to prevent student access during the lunch period. Of the 51 schools that have machines in their cafeteria/lunchroom, 98 percent restrict access during the lunch period. The most common method of restriction (implemented at 49 percent of the schools) is to limit machine operations with a timer. Locks are another common method, used by a third of schools. A few schools turn the machines off manually (11.8 percent) or have staff supervise them (5.9 percent). None of the schools report using a gate to prevent access to the vending machines in the cafeteria/lunchroom.

TYPES OF FOOD AVAILABLE TO STUDENTS

Since the types of food and beverages available to students play a critical role in promoting quality nutrition, the survey examined the options provided through a la carte and vending machine access.

A la Carte Foods and Beverages

Potato chips, ice cream and juice. **Of the seven a la carte items offered by half or more of the schools in Kansas, three have limited nutritional value.** Chips/snack foods are offered in 71.1 percent of the schools, ice cream in 68.5 percent, and juice in 75 percent. The remaining common items include dairy foods, fruits and vegetables (not french fries), the entrée from the school lunch program, and water. Around 25 percent or more of all schools offer baked french fries, tater tots and onion rings; cold and/or hot sandwiches; and school-prepared desserts. Deep-fried foods, candy, and carbonated beverages are offered by a few schools. Many food items provided through the a la carte option become more available as students age, with high schools more offeren offering the items than elementary schools (Table 30).

	School Level			Total
Type of Food	Elementary	Middle	High	
	%	%	%	%
Dairy foods (e.g., milk, yogurt, cheese)	76.0	80.7	86.5	81.0
Juice	65.3	77.1	82.4	75.0
Water	64.0	72.3	78.4	71.6
Chips/snack foods	58.7	72.3	82.4	71.1
Ice cream	65.3	63.9	77.0	68.5
Entrée from the lunch program	49.3	59.0	60.8	56.5
Fruits/vegetables (not french fries)	49.3	56.6	62.2	56.0
Hamburgers/hot sandwiches	33.3	49.4	56.8	46.6
School-prepared dessert items	40.0	43.4	52.7	45.3
Pre-packaged dessert items	33.3	42.2	47.3	41.0
Cold sandwiches	21.3	34.9	43.2	33.2
Baked french fries, tater tots, onion rings	13.3	27.7	29.7	23.7
Nuts/seeds	13.3	14.5	21.6	16.4
Deep-fat-fried french fries, tater tots, onion rings	8.0	9.6	17.6	11.6
Candy	8.0	13.2	10.8	10.8
Carbonated beverage	0.0	3.6	4.0	2.6

Table 30. Types of Foods and Beverages Routinely Available from a la Carte Items

Note: Sample size = 232 (75 elementary schools, 83 middle schools, and 74 high schools).

Urban and rural schools are similar in the types of foods and beverages available through their a la carte option. However, urban schools more often offer an entrée from the lunch program (63.7 percent of urban schools, 48.2 percent of rural schools); cold sandwiches (40.3 percent urban schools, 25 percent rural schools); and baked french fries, tater tots, and onion rings (31.4 percent urban schools, 14.8 percent rural schools). Rural schools are more likely to offer school-prepared desserts (55.6 percent rural schools, 36.3 percent urban schools).

Several differences based on the size of the school district are noted in the a la carte offerings (Table 31). In essence, students in larger districts receive a greater variety of choices, with greater variation in nutritional quality. Schools from small districts less often offer food with limited nutritional value such as chips or snack foods, ice cream, pre-packaged and school-prepared desserts, and deep-fat-fried foods. They are also less likely to offer the school lunch entrée, hamburgers/hot sandwiches, fruits/vegetables, baked goods (e.g., french fries, tater tots and onion rings), and juice and water.

	School District Size			
Type of Food	Small	Medium	Large	
	%	%	%	
Dairy foods (e.g., milk, yogurt, cheese)	87.8	79.8	79.4	
Juice	51.2	84.3	76.5	
Water	51.2	80.9	71.6	
Chips/snack foods	46.3	83.2	70.6	
Ice cream	56.1	73.0	69.6	
Entrée from the lunch program	41.5	50.1	67.6	
Fruits/vegetables (not french fries)	29.3	55.1	67.6	
Hamburgers/hot sandwiches	22.0	57.3	47.1	
School-prepared dessert items	36.6	50.6	44.1	
Pre-packaged dessert items	24.4	40.4	48.0	
Cold sandwiches	4.9	37.1	41.2	
Baked french fries, tater tots, onion rings	22.0	11.2	35.3	
Nuts/seeds	22.0	16.8	13.7	
Deep-fat-fried french fries, tater tots, onion rings	2.4	11.2	15.7	
Candy	17.1	9.0	9.8	
Carbonated beverage	0.0	1.1	4.9	

Table 31. Types of Foods and Beverages Routinely Available from a la Carte Items by Size of School District

Notes:

 Small district schools = less than 500 students. Medium-sized district schools = 500–1,999 students. Large district schools = 2,000+ students;

2) Sample size = 232 (41 small schools, 89 medium-sized schools, and 102 large schools).

Vending Machine Foods and Beverages

Vending machines contain fewer nutritious options than a la carte items. In schools where vending machines are available, four out of the six vending machine items included on the survey have limited nutritional value (carbonated beverages are found in 89.2 percent of the schools, juice in 76.9 percent, chips/snack foods in 74.4 percent, and candy in 70.8 percent of schools). Pre-packaged desserts, another "junk food" option, are carried in more than 40 percent of the schools with vending machines.

Unlike a la carte items, the availability of vending machine/school store items does not change consistently with the age of the student. Chips, candy, and pre-packaged desserts, however, do still show an increase by age; these items are more available to high school students than to elementary school students. Overall, vending machines and a la carte options provide similar types of foods. When considering the differences between the two, vending machines — which are more prevalent in Kansas schools and are much more likely to offer items such as carbonated beverages and candy — give students a significantly greater opportunity to add sugar and other refined carbohydrates to their diets (Table 32).

	S	chool Level		Total
Type of Food	Elementary	Middle	High	
	%	%	%	%
Carbonated beverage	89.7	85.9	92.2	89.2
Water	86.0	87.3	92.9	89.0
Juice	76.6	77.5	76.6	76.9
Chips/snack foods	68.2	70.4	83.0	74.4
Candy	67.3	67.6	76.6	70.8
Nuts/seeds	49.5	50.7	62.4	54.6
Pre-packaged dessert items	36.4	42.2	46.1	42.0
Dairy foods (e.g., milk, yogurt, cheese)	14.0	17.6	19.2	17.2
Ice cream	0.0	1.4	3.6	1.8
Deep-fat-fried french fries, tater tots, onion rings	0.9	0.7	1.4	1.0

Table 32. Types of Foods and Beverages Routinely Available from Vending Machines and School Stores

Note: Sample size = 232 (75 elementary schools, 83 middle schools, and 74 high schools).

In most respects, urban and rural schools offer similar types of foods and beverages in their vending machines and school stores. Urban schools, however, more often offer pre-packaged desserts (52.9 percent of urban schools, 38.2 percent of rural schools). Rural schools more often offer candy (74.0 percent rural schools, 61.8 percent urban schools) and carbonated beverages (92.4 percent rural schools, 80.4 percent urban schools).

There are differences based on the size of the school district for several of the vending machine and school store items offered. Compared to schools from larger districts, those from small districts are more likely to offer items of limited nutrition value in their vending machines and school stores. Overall, as Table 33 illustrates, the smaller districts offer a greater variety of vended/school store items.

Table 33. Types of Foods and Beverages Routinely Available from Vending Machines and School Stores by Size of School

	Sc	hool District Siz	e
Type of Food	Small	Medium	Large
	%	%	%
Carbonated beverage	96.4	86.6	78.1
Water	91.1	89.9	82.2
Juice	78.6	81.2	64.4
Chips/snack foods	77.4	75.2	65.8
Candy	76.8	70.5	57.5
Nuts/seeds	57.1	56.4	45.2
Pre-packaged dessert items	36.9	47.6	42.5
Dairy foods (e.g., milk, yogurt, cheese)	8.9	25.5	19.2
Fruits/vegetables (not french fries)	4.2	5.4	2.7
Baked french fries, tater tots, onion rings	2.4	4.7	1.4
Ice cream	1.8	0.7	4.1
Deep-fat-fried french fries, tater tots, onion rings	1.8	0.0	1.4

Notes:

1) Small district schools = less than 500 students. Medium-sized district schools = 500–1,999 students. Large district schools = 2,000+ students;

2) Sample size = 390 (168 small schools, 149 medium-sized schools, and 73 large schools).

Selection of Vending Machine Items

Who is responsible for selecting the items sold in the vending machines? **Survey results indicate vendors are about as likely as school administrators to make the nutritional decision** — and students do have a say. Common parties identified included school administrators (in 20–34 percent of all schools), the student organization (in 25–30 percent of schools), and the vendor (in 22–30 percent of schools). Less than five percent of all schools identified the food service managers/directors, parents or parent organizations, and a civic group.

While urban and rural schools have similar answers to the selection question, the food service manager/director is more likely to select items for vending machines in urban schools (13.7 percent urban schools, 1.1 percent rural schools). Student organizations are more likely to select the items for rural than urban schools (33.4 percent rural schools, 10.8 percent urban schools).

Small, medium, and large district schools are also similar in the selection process. Schools from medium-sized and large districts, however, more often have their school administrators select items (36.3 percent medium-sized schools, 35.6 percent large schools, 26.4 percent small schools). Schools from small districts more often have student organizations select items (41.3 percent of small schools, 24 percent medium-sized schools, and 2.7 percent large schools).

PHYSICAL EDUCATION AND PHYSICAL ACTIVITY

Efforts to address childhood obesity require attention to both nutrition and physical activity. This section reviews information on the policies and practices used in Kansas schools to promote physical education and activity among youth. The discussion includes, among other things, strategies to promote physical activity, the types of programs available, and stumbling blocks inhibiting improvements.

STRATEGIES FOR PHYSICAL ACTIVITY

In the two-pronged approach to addressing childhood obesity, there are a variety of options available for using physical activity for prevention. When education professionals in Kansas were asked to identify the strategies their schools have used to improve physical activity, the most common reply was the promotion of walking and/or biking to school, particularly for elementary schools. Some schools, particularly high schools, also changed their PE curriculum, and increased their sports teams/intramural activities and PE time. Few schools increased the amount of time available for recess (Table 34).

	Sc	hool Level		Total
Strategy	Elementary	Middle	High	
	%	%	%	%
Promoted walking/biking to school	24.7	15.7	10.4	20.9
Changed PE curriculum	15.8	18.0	25.0	17.7
Increased sports teams, intramural activities	14.4	13.5	8.3	15.0
Increased PE time	11.0	13.5	8.3	12.3
Increased recess time	4.1	3.4	4.2	3.6

Table 34. Strategies to Improve Physical Activity

Note: Sample size = 283 (146 elementary schools, 89 middle schools, and 48 high schools).

QUALITY OF STAFF AND PROGRAM

To promote student health through physical education and activity, Kansas needs qualified people to provide quality education on a regular basis. Overall, Kansas schools provide qualified staff who follow national or state standards for meeting the physical education needs of the students.

Professionals Who Teach Physical Education

Every school that responded to the survey has physical education teachers teaching the PE classes. Another 9 percent of schools also have health education teachers who handle PE. For almost all schools (96.5 percent), the professionals providing PE instruction are certified PE teachers; 8 percent of schools have teachers with at least one college-level course in PE.

Curriculum for Physical Education in Kansas

Almost all Kansas schools (96.8 percent) have a physical education curriculum based on national and/or state physical education standards. This curriculum is written, sequential, and has been updated in the last five years (for 88.5 percent of the schools). The large majority of schools (83.9 percent) uses a state or nationally validated program (i.e., Physical Focus, Physical Dimensions, CATCH or SPARK). As part of their curricula, PE students at 85.7 percent of schools must go through age-appropriate fitness testing at least once per year.

Urban and rural schools are similar for annual fitness testing practices. They are also similar for standards-based physical education curriculum. However, there are differences relative to other aspects of the PE curriculum. Urban schools more often use a written, sequential curriculum, updated in the last five years (92.2 percent of urban schools versus 81.6 percent of rural schools). They are also more likely to use a program such as Essentials, Focus, Dimensions, or SPARK (87.5 percent of urban schools versus 77.2 percent of rural schools).

EXPOSURE TO PHYSICAL EDUCATION AND ACTIVITY

Requirements for Physical Education

Do schools in Kansas offer physical education and activity for students? Absolutely. Are the students actually involved in these classes and activities? Not always. The large majority of schools in Kansas (93.4 percent) offer a PE class that includes at least 25 percent of time for physical activity. However, as students age, their exposure to PE drops — they are no longer required to take PE classes.

Between 85.8 and 93.6 percent of schools require their K–5 students to take PE. By the time students reach middle school, however, the requirement begins to drop (between 72.8 to 79.0

percent of schools require PE for grades 6–8). And, as Figure 11 graphically demonstrates, by the time students reach high school, most have stopped taking PE (10.6 to 25.5 percent of 10^{th} through 12^{th} graders).

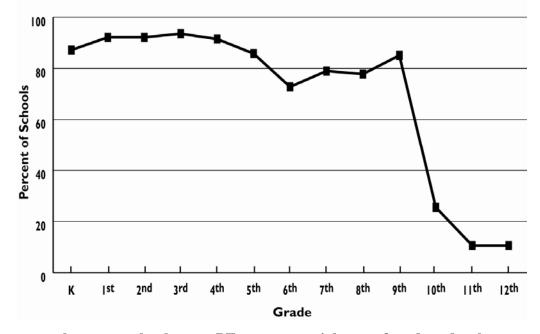


Figure 11. Requirement for Students to Take PE by Grade

It appears that most schools treat PE as an essential part of student development, but only for young children — despite the important role it can play in establishing healthy lifestyles. By the time students reach the middle school years, PE begins to lose its place in the promotion of healthy student development and eventually becomes a "luxury" for a minority of students. By dropping the PE requirement, an important aspect of healthy development is ignored for a significant number of older students.

Differences between urban and rural schools are evident. Although both urban and rural schools show an overall decline in the requirement for PE as students age, urban schools show the decline sooner than rural schools. Urban and rural schools are very similar in their PE requirements for elementary and high school students. In the middle school and early high school years, however, more rural compared to urban schools require PE. For example, compared to the 77.3 percent of rural schools that require 6th graders to take PE, only 67.6 percent of urban

schools have such a requirement. This 10 percent difference in rural and urban schools remains relatively stable during the middle and early high school years (Figure 12).

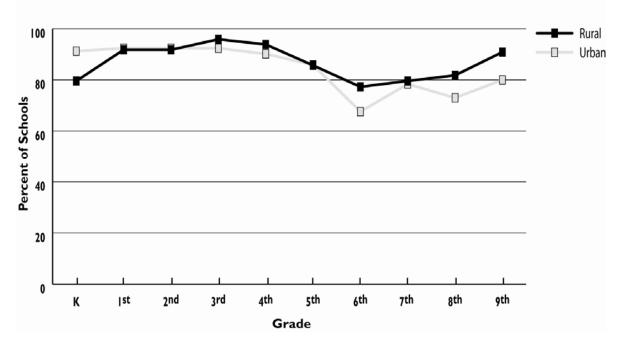


Figure 12. PE Requirements for Rural and Urban Schools

Frequency of Participation in Physical Education

School professionals were asked to indicate how often PE is offered, how many students participate weekly, and how long the PE class period lasts.

Weekly Participation

Almost all schools in Kansas (97.5 to 98.4 percent of schools) start their elementary grade students out with weekly exposure to PE, having most of their students (76 percent or more of their students) participate in PE on a weekly basis. After students leave elementary school, however, a steep decline occurs in weekly participation. For 7th through 9th grades, only 64.3 to 73.2 percent of schools have most of their students in weekly PE; for 10th through 12th grades, only 6.7 to 12.5 percent of schools have most of their students participate in weekly PE (Figure 13).

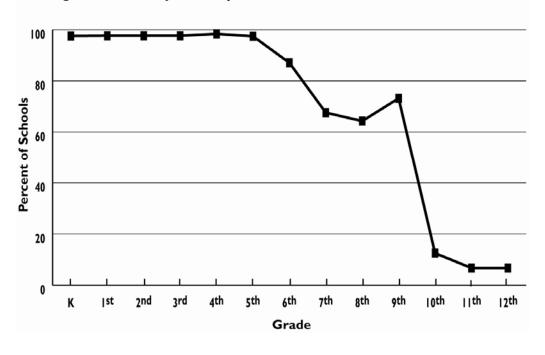
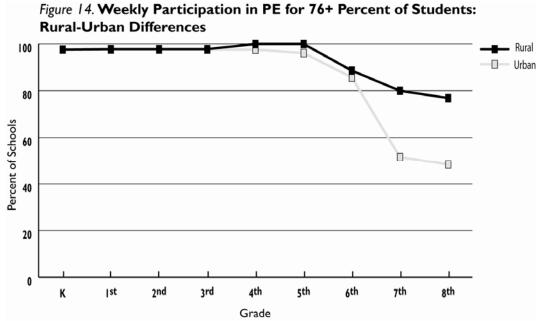


Figure 13. Weekly Participation in PE for 76+ Percent of Students

As Figure 14 illustrates, differences between urban and rural schools are again found for weekly participation in PE. Similar to the urban-rural difference for schools requiring PE, these differences start in the middle school years. For K–5, more than 95 percent of urban and rural schools have most of their students (76 percent or more) participating in weekly PE. For 6th grade, fewer but still comparable levels of urban and rural schools have most of their students participating in weekly PE (85.7 urban schools, 88.6 rural schools). By 7th grade, however, 80 percent of rural schools versus 51.6 percent of urban schools have most of their students in the weekly classes. By 8th grade, the difference widens from 76.9 percent of rural schools compared to 48.4 percent of urban schools. (Information beyond 8th grade could not be presented due to small sample sizes.)



Number of Days Participating in Physical Education

The majority of elementary schools in Kansas (65.1 to 74.2 percent of schools) have K–5 students participate in PE two to three days per week. This two to three day-per-week participation is also the norm for middle and high schools (50 to 62.4 percent of schools for 6th to 8th graders, 53.6 to 61 percent for 9th through 12th graders). For schools that do not have students in PE two to three days per week, almost all of them have their students in PE four to five days per week (Figure 15).

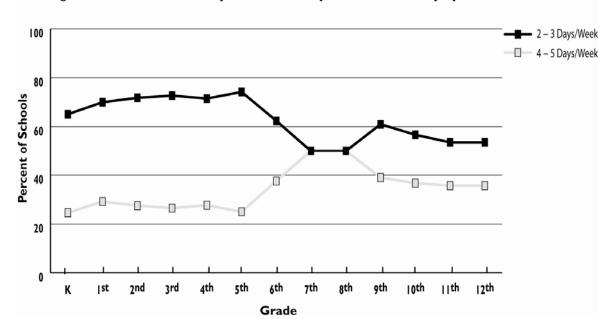
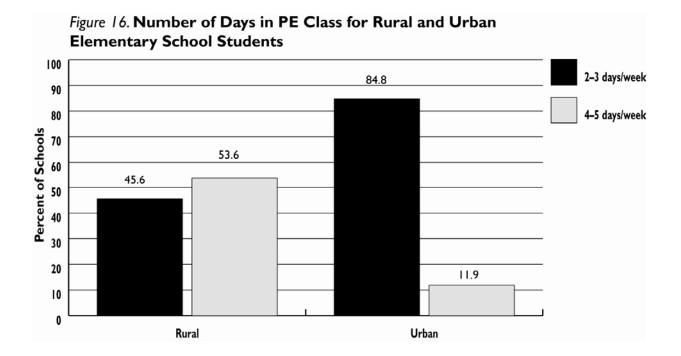


Figure 15. Student Participation in PE by Number of Days per Week

Students from rural schools generally get more PE than those in urban schools. With the exception of the middle school years, the majority of rural schools have students participate in PE four to five days per week, while the majority of urban school students are in PE two to three days per week.

For rural elementary schools, 53.6 percent have their students in PE four to five days per week (Figure 16). Almost all the rest (45.6 percent) have them in PE two to three days per week. For urban elementary schools, only 11.9 percent have their students in PE four to five days per week, while 84.8 percent have them in PE two to three days per week.



When students reach middle school, urban-rural differences decrease, as Figure 17 shows. The majority of both urban and rural schools have middle school students in PE two to three days per week, with the remaining schools having students in PE four to five days per week.

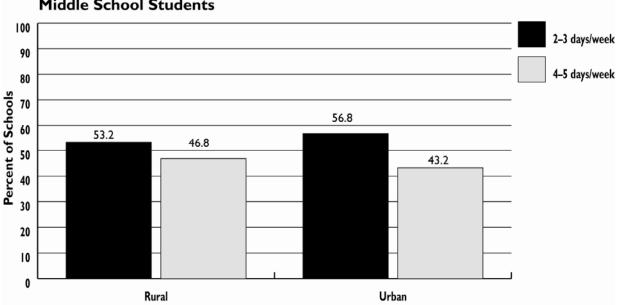


Figure 17. Number of Days in PE Class for Rural and Urban Middle School Students

By high school, the urban-rural differences return (Figure 18). Almost 60 percent of rural schools have students in PE four to five days per week, while 40.4 percent have them in PE two to three days per week. For urban high schools, only 21 percent have their students in PE four to five days per week, while 56.1 percent have them in PE two to three days per week.

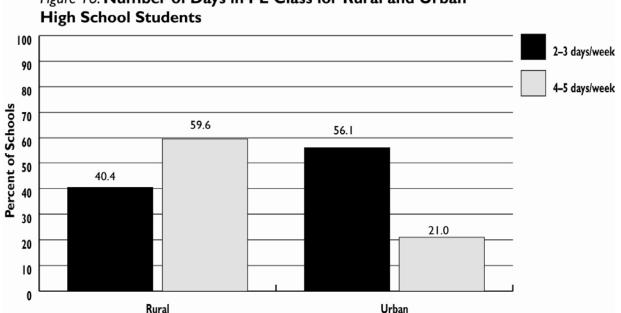


Figure 18. Number of Days in PE Class for Rural and Urban

THE NATURE OF A PHYSICAL EDUCATION CLASS

Amount of Time in Class

In almost half of Kansas schools (48.6 percent), the duration of PE classes is between 20 and 30 minutes. In 40.6 percent of the schools, they are over 40 minutes in duration. Although somewhat uncommon, almost one in five schools (17.4 percent) experienced a decrease over the past three years in the amount of time available for PE. For most of these schools (75.7 percent), this change was prompted by the need for more classroom time to meet state and federal education requirements. None of the schools indicated that limited funds or staff available to cover responsibilities prompted the decrease in PE class time. Urban and rural schools are similar in the amount of time available for PE class.

Physical Movement in Class

Less than half of Kansas schools (48.6 percent) have students physically active for over three-quarters of the class time (76 percent or more time); another 42.9 percent have students physically active for between one-half to three quarters of the class.

Actual physical movement in PE class declines as students get older. For K–5 students, between 59.2 and 62.5 percent of schools have students engaged in physical movement for more than three-quarters of the class time. By middle school (6th through 8th grades), only 27.1 to 34.9 of the schools have students moving for most of the PE period (Figure 19).

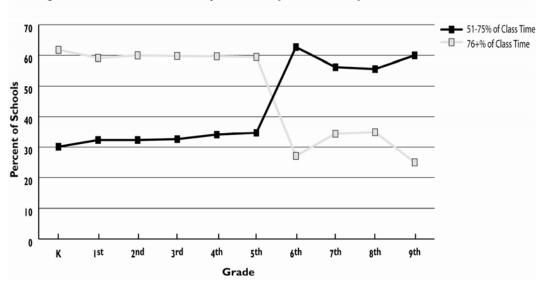


Figure 19. Time in PE Class Spent on Physical Activity

Although schools start out treating PE as an essential component to student development, this approach changes as students get older. Not only are older students less likely to be required to take PE, but when they do, they are less likely to engage in it weekly or daily, and less likely to engage in physical activity when they do take the class.

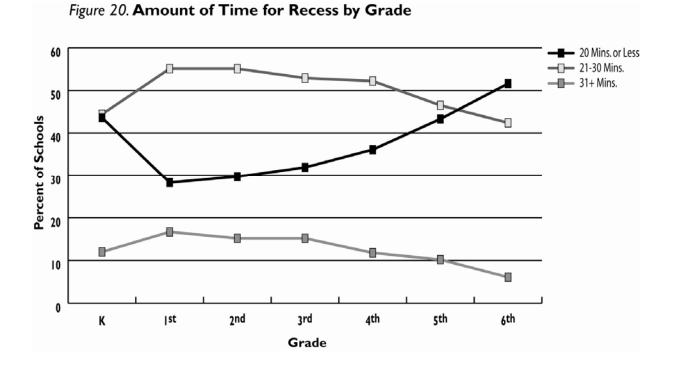
RECESS

Along with their time in PE classes, elementary school students have an opportunity for physical activity through recess. Eight out of every 10 elementary schools in Kansas (84.2 percent) offer recess to their students; 71.2 percent offer it regularly. For these students, recess is typically offered immediately following lunch periods. Locations that schools use for recess include: the classroom (for 74.5 percent of schools), the playground (70.7 percent), the gymnasium (38.2 percent), the multipurpose room (11.5 percent), and the cafeteria (9.6 percent).

For schools that offer recess, 95.4 to 97.1 percent offer it to K–6 students four to five days per week. Structured activities aren't usually part of recess, but in the 25 schools that do provide structured physical activities, classroom teachers, physical education teachers, and paraprofessionals plan and supervise them.

Amount of Time for Recess

Similar to the patterns observed for PE, the amount of time for recess declines as students age. For example, only 28.3 percent of schools limit recess time to 20 minutes or less per day for 1^{st} graders. By 6^{th} grade, however, 51.6 percent of schools limit recess time (Figure 20).



As Table 35 illustrates, rural schools provide longer recess periods for their students in K–5 than urban schools. For 1^{st} through 4th grades, at least 10 percent more rural schools than urban schools provide longer recess periods. These differences start to even out in 5^{th} grade, and in 6^{th} grade, more urban schools offer longer recess periods than rural schools.

Table 35. Amount of 1	Time Available for Re	cess for Urba	in and Rural	Schools
	5–20 m	inutes	21+ mi	nutes
	Urban	Rural	Urban	Rural
Grade	%	%	%	%
Kindergarten	49.4	33.3	50.6	66.7
1 st Grade	32.6	20.4	67.4	79.6
2 nd Grade	33.7	22.4	66.3	77.6
3 [™] Grade	37.1	22.4	62.9	77.6
4 th Grade	43.0	24.0	57.0	76.0
5 th Grade	45.8	38.6	54.2	61.4
6 th Grade	45.4	63.6	54.6	36.4

Note: Sample size = 148 (49 rural schools, 89 urban schools).

Decrease in Recess Time

Over the past three years, one in four schools cut the amount of time available for recess. Like schools that decreased PE time, the reason often came down to competing educational requirements. Of the schools that decreased recess time, 93.6 percent pointed to the need for more classroom time to meet state and federal education requirements.

Recess as a Substitute for Physical Education Class

Schools that have decreased PE class time may look to recess to fill that gap. However, for the large majority of schools (94.3 percent), recess is not considered the equivalent of a PE class, nor does it substitute for PE on days that PE is not offered (82.1 percent).

Urban and rural schools report similar views of uses for recess. Of the 5.3 percent that do consider recess to be equivalent to a physical education class, elementary schools and urban schools are more likely to make such a substitution. In these few elementary schools, 11.7 to 12.7 percent consider recess to be equivalent to a physical education class for K–5 students. In the few schools that consider recess to be equivalent to PE, 35 out of 46 are urban schools.

OPPORTUNITY FOR OUT-OF-SCHOOL ENRICHMENT

Many schools offer programs for students outside regular school hours that can potentially offer additional opportunities for physical activity. In Kansas, 43.6 percent of schools offer an after-school program and another 17.7 percent offer both before- and after-school programs. Structured physical activities are included in 58.4 percent of these programs. At the vast majority — 96.4 percent of the schools — these activities are not based on a physical activity or health curriculum developed by a non-school-based organization (i.e., YMCA), but are usually planned and supervised by the PE teacher, classroom teacher, and paraprofessionals.

DISCREPANCIES BETWEEN DISTRICTS AND THEIR SCHOOLS

School districts often set the stage for what schools in their jurisdiction will do. Policies and procedures established at the district level are often followed by the schools in that district. Sometimes, however, schools deviate from their districts on how they carry out their mission, while still delivering the expected result. This section summarizes how schools may or may not mirror their districts in the strategies, policies, and procedures they have developed and implemented to assure quality nutrition for their students.

Disagreement between districts and their schools reflect a few possibilities. First, a school has the flexibility of either following or not following its district's lead — some choose to follow, others don't. Second a district may be changing its policies/procedures, and the changes have not yet been implemented at the school level. Third, the district representative who responded to the survey may not have up-to-date information on what the school(s) is doing. Finally, because not all schools in a given district were sampled for this study, it is possible that the level of disagreement between districts and their schools fluctuates depending on which schools are sampled. Although the specific reason for disagreement between districts and their schools goes beyond the scope of this study, they are presented to enhance interpretation of the findings.

To determine whether districts and schools mirrored/agreed with one another, each school in the study was paired with its district. In some cases, multiple schools were associated with a given district, although no more than two schools in a district responded to the survey. In other cases, schools did not have a corresponding district survey response, so were dropped from the analysis. Calculations then determined what percentage of the district-school pairs gave the same answers on the various survey questions.

STRATEGIES FOR ADDRESSING CHILDHOOD OBESITY THROUGH BETTER NUTRITION

Most districts and their schools agree on four strategies for improving nutrition: providing longer lunch periods, moving recess before the lunch period, removing vending machines from schools, and changing the foods/beverages sold at school events and fund-raisers. If districts indicate that they have tried a given strategy, the schools in their jurisdiction also indicate that.

Likewise, if districts indicate they have not tried a strategy, their schools report not having attempted it. For more than 80 percent of the districts and their schools, this agreement is found for the four strategies described above. For the remaining strategies (changing the lunch menu/choices, a la carte foods/beverages, changing vending machine selections, and reducing access to vending machines), 52.4 to 61.1 percent of district-school pairs agree with one another. When districts and schools disagree, the district is likely to indicate that the strategy has been tried when the school indicates it has not (Table 36).

Strategy	District-School Pairs that Agree
	%
Changed foods/beverages sold at school events/fundraisers	83.9
Moved recess before lunch	83.6
Longer lunch periods	82.7
Removed vending machines	81.0
Changed a la carte foods/beverages	61.1
Reduced access to vending machines	59.6
Changed vending machine selection	56.5
Changed lunch menu/choices	52.4

Table 36. Strategies to Improve Nutrition by District-School Agreement

Notes:

1) Percentages represent the percentage of district-school pairs;

2) Sample size = 347–348 district-school pairs.

MEALS PROVIDED TO STUDENTS

More than 70 percent of districts and their schools agree on whether or not breakfast is offered, whether an open campus lunch option exists, and whether food serving/dining facilities adequately accommodate students. Fewer districts and schools agree on how much time is allocated for the lunch meal, and whether or not existing policies establish a minimum amount of meal time for students (Table 37).

Procedure/Policy	District-School Pairs that Agree
	%
Whether or not breakfast school meal is offered	80.2
Whether food serving/dining facilities adequately accommodate students	77.1
Whether open campus lunch is offered	71.6
Existence of policy for minimum amount of meal time	53.5
Amount of time schools provide for lunch	48.1

Table 37. District-School Agreement on Procedures and Policies for School Meals

Disagreement between districts and their schools can occur when schools have the prerogative to develop policies or procedures. For example, in 29.4 percent of district-school pairs, the school has a policy that establishes a minimum amount of time for meals when the district does not set a standard policy for all of its schools. In 12.4 percent of district-school pairs, the school offers breakfast to students even though the district says its schools do not offer breakfast; and in 34.6 percent of the district-school pairs, the school allocates more time for school meals than the district says is required.

District-school disagreement also occurs when districts have policies/procedures in place, but their school(s) do not. For example, in 25 percent of district-school pairs, districts that allow students an open campus option for lunch have school(s) that do not allow an open campus. In 17.1 percent of district-school pairs, districts have a policy for minimum meal time for students, but their school(s) do not. In 7.7 percent of district-school pairs, districts think the food serving and dining facilities adequately accommodate students in terms of space, chairs and serving lines when their school(s) do not; and in 7.4 percent of district-school pairs, districts report offering breakfast to students when their school(s) do not.

FOOD OPTIONS AVAILABLE TO STUDENTS: A LA CARTE AND VENDING MACHINES

Between 63.0 and 79.7 percent of districts and their schools agree on whether specific a la carte items are provided to students (percentages vary based on the item). Districts that say "no" have school(s) that say "no" and vise versa. For 10.1 to 26 percent of district-school pairs, schools offer a la carte items when the districts say their school(s) do not; and for 10.2 to 12.2

percent of district-school pairs, schools do not offer a la carte items, even though their districts report that their schools do.

Between 34.2 and 62.4 percent of districts and their schools report similar practices and policies of offering specific vending machine items to students. Districts that say "no" have school(s) that say "no" and vise versa. For 5.4 to 28.2 percent of district-school pairs, schools offer a la carte items when their districts say their school(s) do not; and for 9.4 to 60.4 percent of district-school pairs, schools do not offer a la carte items, even though their districts report that their schools do.

SUMMARY AND RECOMMENDATIONS

At present, approximately nine million American children over the age of six are considered obese (Institute of Medicine, 2005). Given the scope of the problem, effective public policy is needed (Dietz, et.al., 2002), but addressing this problem strategically is complex. Obesity has most often been treated by encouraging behavior change, and for most individuals, such change is hard to come by. Even though we generally think of youth as malleable and able to adjust or respond to change relatively quickly, their food consumption behaviors and physical activity habits, even at the kindergarten level, make such interventions in the context of the school environment very challenging.

Most experts recognize that change is required at multiple levels, and that it will take concerted efforts among parents, schools, communities and governments to adequately address this problem.

School food services have received substantial attention in the last few years as an area ripe for policy and legislative action. Policymakers recognize that improving the health of school children is multi-faceted and must involve both diet and exercise, and many different approaches have been introduced. On a national level, one of the most recent initiatives is a bill introduced in the U.S. Senate (S. 2592) by Sen. Harkin (Iowa) and co-sponsored by six other senators (with a complementary bill introduced in the House of Representatives) that calls on the Secretary of Agriculture to update nutritional standards for foods sold in schools.

The current USDA standards are nearly 30 years old, and they address the school lunch and breakfast program offerings — not the competitive, appealing foods and vending machine options now available to children. In some ways, these dated standards appear capricious or illogical when viewed through the lens of human nutrition. For example, currently allowable foods and beverages that can be served in a cafeteria that also provides a school lunch program meal include french fries, ice cream, candy bars and doughnuts; disallowed items include seltzer water, carbonated beverages, popsicles (without fruit or fruit juice), jelly beans, and other items that are primarily made of sugar, like lollipops, marshmallows and cotton candy. A review and revision of the standards appears called for to provide a more rational, science-based set of

criteria in determining the kinds of foods that best contribute to a healthy diet for children in school.

Another national initiative that will curb exposure to a contributing factor to childhood and adolescent obesity comes from the American Beverage Association. Announced in May 2006, a voluntary industry agreement by the nation's three largest beverage companies will limit portion sizes and reduce the number of calories available from bottled beverages to children during the school day within three years. Beverage selection will vary at the elementary, middle and high school levels and the guidelines are voluntary, but the ABA strongly has stated its preference for all affiliates to join in the agreement.

If Kansas waits for national leadership, federal policy and/or industry-motivated change, rather than acting on issues that impact overweight and obesity in children and adolescents, it will be costly. The good news is that Kansas is ahead of many states in meeting the Institute of Medicine's call to mobilize an effort to describe policies and interventions that support childhood obesity prevention goals (Institute of Medicine, 2006). This project is an example of that vision, and the results presented here can allow policymakers, program planners and other interested stakeholders to approach the issue with knowledge to inform their decision-making.

So, when it comes to creating policies that can stop and ultimately reverse the trend of childhood obesity, what has this project taught us?

1. Kansas state policymakers must develop a comprehensive, statewide strategy for addressing student health, including childhood and adolescent overweight.

The best research available indicates only a comprehensive effort — one that involves schools, government at all levels, public health, the business community, providers and families — can be successful. Evidence-based interventions that are evaluated for their effectiveness, coupled with partnerships that stretch across the entire community, must be encouraged if Kansas is going to address the current crisis and help its children lead healthier lives.

2. Progress and improvement using the school wellness guidelines should be required in all Kansas public K–12 schools.

The reauthorization of the federal Child Nutrition Programs requires that schools participating in the school meal program establish a local "school wellness policy" that, at a minimum, includes nutrition guidelines for all foods available on the school campus during the school day; includes goals for nutrition education, physical activity and other school-based activities designed to promote student wellness; establishes a plan for measuring implementation; and involves parents, students, the school nutrition program staff, the school board, school administration, and the public.

Kansas passed a complementary law, SB 154, in 2006 that directs KSDE to provide guidelines to assist schools in developing their local wellness policies. All school districts complied and developed wellness policies and, by July 2006, each district's wellness policy was incorporated into its School Nutrition Program renewal agreement with KSDE (Kansas State Department of Education, 2006b). While having wellness policies in place represents great progress, current federal and state law does not require setting goals for improvement or monitoring progress at the school, district or state levels. The current guidelines in Kansas provide specific goals, from "basic" (minimum requirements) to "advanced" and "exemplary" levels. However, schools are only required to review their wellness guidelines, not institute changes to progressively improve their school environments. Schools and school districts should be required to demonstrate improvement using the school wellness policy model guidelines, and state resources should be committed to ensure that progress is tracked at the state level.

3. As recommended by the Institute of Medicine, all food and beverages sold or served to students in school should be healthful and meet an accepted nutritional content standard.

In some Kansas public schools, food and beverages available to students during school hours are limited to healthy options, while in others, students are permitted choices that

are less than healthful. The prerogative to offer "junk food" to children should at least be coupled with the responsibility to offer healthy alternatives at competitive prices, together with appropriate education and guidance regarding good nutrition. If given the option to receive funds equal in amount to the cash generated by vending machines and a la carte programs, one could predict that few schools would continue their current policies regarding competitive foods.

4. School vending and soda contracts should be made public and available for review.

Coca-Cola, PepsiCo and 18 other companies that comprise approximately 85 percent of school vending beverage sales announced a voluntary implementation of changes that will be adopted over the next three years. Under the new policy, the beverage industry will provide:

- a. Elementary schools only with water and 100 percent juice;
- b. Middle schools only nutritious and/or lower calorie beverages, such as water, 100 percent juice, sports drinks, no-calorie soft drinks, and low-calorie juice drinks. No full-calorie soft drinks or full-calorie juice drinks with five percent or less juice until after school; and
- c. High schools with a variety of beverage choices, such as bottled water, 100 percent juice, sports drinks, and juice drinks. No more than 50 percent of the vending selections will be soft drinks.

Some view this as recognition by soft drink producers and distributors that they are part of the environment that is producing the current overweight and obesity crisis, and that they are doing their fair share to help improve student health and seek common-sense solutions. Others see it as a way for the beverage industry to maintain its market share by continuing to profit from the contracts they have with schools and school districts. Furthermore, as this study shows, the highest level of exposure to these products is in Kansas high schools, where the voluntary standards and changes will have arguably the least noticeable impact. Regardless of industry-initiated reforms, Kansans deserve to know the nature of the contracts with public schools and school districts including pouring rights, advertising rights and profit-sharing arrangements. The Oregon Public Health Institute has provided a list of suggestions in its report "School Beverages — Time to Pop Open Your Soda Contract" (Pinson and Pinkas, 2006). An informed community will enhance the best decision-making process regarding if and how these contracts can be modified to improve the health of public school students.

5. An in-depth review should be conducted of how the school lunch program is financed at the local level.

A recent U.S. General Accounting Office report identified that barriers to providing nutritious meals and encouraging healthy eating included budget pressures and competing time demands (United States General Accounting Office, 2003). These findings also are reflected in the data presented in this study. When healthier foods are introduced, the school lunch program takes the risk that students will buy fewer lunches, resulting in a loss of needed revenue.

Furthermore, this study clearly identifies that Kansas schools do not use revenue from vending machines and other competitive food sales conducted outside the food services program to help offset costs of the school breakfast and lunch program. Rather, those funds are used for student clubs, student incentives and other generally non-academic costs unrelated to the school food services program. Competitive food and beverage availability to students places the school food service program in an untenable position — it either offers allowable foods that students may or may not purchase in their cafeterias or it tries to compete head-to-head with competitive food and beverage sales. In some cases, food service staffs have actually moved outside their cafeterias to student lounges or hallways to provide foods of minimal nutritional values for the financial benefit it accrues to the school lunch program they run. Setting these staff up to compete with vending machines and kiosks that cater to student preferences for low nutrient value foods compromises their ability to provide healthful choices to all children.

6. State policymakers should institute more comprehensive physical education requirements in Kansas public middle and high schools.

This recommendation is straightforward — Kansas needs to recognize that physical education and physical activity are important to all school children of all grades. Currently, there is an emphasis on physical activity from K–5. To encourage a lifelong pursuit of physical activity and health, this emphasis should be extended through grade 12. A model state for reference is Illinois, now leading the nation by requiring daily physical education for students (with minimum duration standards) for all grades. Physical education classes may be offered and even required in Kansas schools, but if students do not participate regularly — or if only a handful of students get such exposure — the benefit of PE on student health is compromised. Because many schools in Kansas do not require older students to take PE, do not provide PE weekly for them, and/or offer the class just a few days a week, Kansas may be wasting an opportunity to impact the healthy development of its youth.

7. Kansas lacks basic information on the extent of overweight and obesity among children. A place to begin addressing this problem is to collect height and weight data to calculate the body mass index (BMI) of public school students.

Prevention and intervention efforts to improve student health by reducing the risks associated with overweight and obesity depend on knowing the prevalence of these conditions in the population. Currently, there is no reliable, routinely available source of information about the levels of overweight among school-age children. To know if interventions we introduce are improving the health of our children, we need to be able to monitor BMI as an indicator over time. A logical place to collect that information and to share it while respecting student privacy is through the public school system. Many schools already collect height and weight data, so the central challenge, and one easily met, is to provide schools a secure online capability to share these data for statewide health surveillance purposes. 8. Kansas can be a leader among states by adding a focus on physical fitness among public school children and adolescents to its approach to combat childhood overweight and obesity.

What we know is that the issues of overweight and obesity will require both food and eating behavior change *and* activity behavior change; one without the other will not be sufficient to improve health. Kansas has the chance to distinguish itself by moving this understanding into policy. As important as BMI can be as a surveillance tool, it provides only half the "picture" of health status for our state's children. Kansas policymakers should couple both BMI and fitness measures as a way to truly view health improvement at the local, regional and state level. Cardiorespiratory fitness measures for children can be as low cost and as easy to collect as heights and weights. When fitness is linked to height-for-weight assessment, the state will be able to monitor and identify trends, programs and practices yielding the most promising results in health improvement.

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APPENDIX A

Recent State-by-State Legislative Action

I	4-1. 2005 Enact	ed State Le	Table A-1. 2005 Enacted State Legislation for School Nutrition	ol Nuti	ition	
State	e Number	Subject	Topic	Year	Abstract	Status
Hawaii Hawaii	HR21	Nutrition	Education, Nutrition, Fruits and Vegetables, School	2005	Encourages Dept of Education, Board of Education and HI Association of Independent School to consider policies that permit edible school gardens and implementing them into the school nutrition curriculum.	Enacted
Hawaii	SR7	Nutrition	Education, Nutrition, Fruits and Vegetables, School	2005	Requests that the Department of Education, Board of Education and Association of Independent Schools consider policies that permit edible gardens at schools and that they be part of the school curriculum.	Enacted
Kentucky	у НВ90	Nutrition, Physical Activity	Education, Nutrition, Education, Physical, Policy, School, Wellness	2005	Requires the department of education, local school boards, and schools to implement local school district wellness programs to increase physical activity and encourage healthy choices.	Enacted
Oklahoma	la SB312	Nutrition, Physical Activity	Education, Nutrition, Education, Physical, Policy, School, Wellness	2005	Regarding the 2006–07 school year. State board of education shall require, as a condition of accreditation, that public elementary schools provide instruction for students in full-day kindergarten and grades 1–5 the following: physical education for a minimum of 90 minutes each week taught by certified health and physical education teacher, health education for minimum of 60 minutes taught by class teacher, nurse, physical education teacher. Health topics shall include nutrition, wellness, tobacco-use prevention, injury prevention and other topics as recommended by Health and Fit School advisory committee.	Enacted
C South C Sout	HB3499	Nutrition, Physical Activity	Education, Nutrition, Education, Physical, School	2005	Sets forth an amendment to current code of laws by adding Chapter 10, entitled Physical Education, School Health Services, and Nutritional Standards in an effort to establish physical education, school health services and nutritional standards in elementary schools. Provides for the amount of physical education for K–5 and teacher-student ratio. Provides for a measure of effectiveness of physical education program in public schools. Provides for physical activity director.	Enacted

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Kansas Health Institute

Table A-2.	2005 Dead	Table A-2. 2005 Dead State Legislation	n for School Nutrition			
State	Number	Subject	Topic	Year	Abstract	Status
Georgia	HB497	Nutrition, Physical Activity	Obesity/Overweight, School	2005	Each local school system shall include in each student grade report a statement of the student's body mass index and whether such student's body mass index is below, within, or above the normal range according to a body mass index value table approved by the county health department. Such statement shall be included two times per each school year, once during the first half of the school year and once during the second half. (b) Each local school system shall weigh each student's privacy. This shall be conducted two times per year, once during the first half of the school year and once during the first half of the school year and once during the student's body mass index in a manner designed to respect the student's privacy. This shall be conducted two times per year, once during the second half. (c) Each local school system is required to provide to the parent or legal guardian of any student who has a body mass index above the normal range and obesity, diabetes, and other health problems.	Dead
Maine	LD134	Nutrition, Physical Activity	Assistance Programs, Fruits and Vegetables, Funding, Obesity/Overweight	2005	Establishes Maine Obesity Prevention Fund. Fund may be used for school health programs, increasing availability of F&V in schools, promotion of healthy eating and physical activity through media, and assessing BMI of students. Determine if F&V purchasing can be obtained from EBT card use, and if this information can be used by Dirigo Health plan "Healthy ME Rewards."	Dead

Kansas Health Institute

Table A-2 (i	continued).	2005 Dead State	Table A-2 (continued). 2005 Dead State Legislation for School Nutrition	I Nutrit	on	
State	Number	Subject	Topic	Year	Abstract	Status
Virginia	SB747	Nutrition, Physical Activity	Education, Nutrition, Education, Physical, Policy, School, Wellness	2005	Requires the board of education, in cooperation with the state health department to promulgate regulations establishing standards to ameliorate childhood obesity in public schools. Regulations shall include statewide nutritional standards for school breakfast and lunch programs, requirements for appropriate recreational and physical fitness activities and guidelines for establishing nutritionally acceptable alternatives to accommodate various health conditions and cultural backgrounds. Division superintendents shall complete instruction in causes and health consequences of overweight and obesity to include good nutrition, lifelong physical fitness, exercise and recreation, and relationship between nutrition, health, and learning.	Dead

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(continued).
A-2

Table A-3.	2005 Pend	ing State Legislati	Table A-3. 2005 Pending State Legislation for School Nutrition	uc		
State	Number	Subject	Topic	Year	Abstract	Status
Alaska	SB162	Nutrition, Physical Activity	Obesity/Overweight, School	2005	Relates to monitoring and reporting of student discipline and safety, of student health pertaining to height, nutrition, and physical activity. Requires reporting of BMI, body mass index that exceeds 25.0, and of state vending machine profits.	Pending
Arkansas	SB166	Nutrition, Physical Activity	Obesity/Overweight, School	2005	Set forth to repeal the requirement that schools include body mass index as a part of a student health report to parents. Also repeals that schools annually provide parents with an explanation of the possible health effects of body mass index, nutrition, and physical activity.	Pending
California	AB1056	Nutrition	Cafeteria/Meals/Food service, Policy, School	2005	School districts must provide professional development training to all school food service personnel in public schools, as defined.	Pending
California	AB1385	Nutrition	Assistance Programs, Authorization/Mandate, Cafeteria/Meals/Food service, School	2005	Require the State Department of Education to develop and implement a data matching system that would directly certify students that are eligible for the National School Lunch and Breakfast Program.	Pending
California	AB1392	Nutrition	Assistance Programs, Cafeteria/Meals/Food service, School	2005	Not require free or reduced-priced meals for students during summer school if 2 of the following 4 conditions exist. 1. Summer session is less than 4 hours long. 2. <10% of eligible students are in attendance >3 hours a day. 3. Summer Food Service Program exists within specified distance. 4. That compliance with the requirement would result in a financial loss.	Pending

A-6	Table A-3 (co	ntinued).	2005 Pending State	Table A-3 (continued). 2005 Pending State Legislation for School Nutrition	ool Nu	trition	
Kano	State	Number	Subject	Topic	Year	Abstract	Status
sas School Heal	California	AB334	Nutrition	Authorization/Mandate, Education, Nutrition, Funding, School	2005	The development, with the Department of Food and Agriculture, to give state and federal funds for competitive grants to school districts and county offices of education to implement the instructional school garden program.	Pending
th	California	AB443	Nutrition	Authorization/Mandate, Cafeteria/Meals/Food service, Policy, School	2005	Allow governing board of school district to permit the sales of food by student organizations K–12 when specific requirements are met. Eliminates the requirement that the State Board of Education develops policy and regulations for the sale of food by student organizations.	Pending
	California	AB444	Nutrition	Cafeteria/Meals/Food service, Policy, School, Vending	2005	Requires that the State Department of Education develops and maintains guidelines for school meals and all foods/beverages sold on school grounds. Specific nutrition guidelines including sugar, fat, and cholesterol are to be included.	Pending
	California	AB569	Nutrition	Authorization/Mandate, Contract, School, Vending	2005	Require competitive food vendors for schools to provide nutritional information on all foods sold to schools, and schools must post/provide this information when requested. If the vendor fails to comply, the contract may be revoked if contract was entered after January 1, 2007.	Pending
Kansas Healtl	California	AB622	Nutrition	Cafeteria/Meals/Food service, Policy, School, Vending	2005	Delete the provision in existing law regulating the sale of beverages in schools. This includes existing law prohibiting sales of certain beverages at elementary schools, and at certain times in middle school, junior high schools and at certain school events.	Pending

	Status	Pending	Pending	Pending	Pending	Pending
itrition	Abstract	Revise current laws that prohibit the sales of certain foods and beverages at public schools beginning July 1, 2007. Provisions would be revised to include portion size restrictions.	Establish a 2 year pilot program providing free fresh and dried fruits and fresh vegetables to 25 eligible elementary and secondary schools.	Restrict the sales of certain beverages to students in high school at specific times by imposing state-mandated local program- including new duties to school districts.	Require the State Department of Education to include specified exercises and activities related to nutrition and physical activity into reading, English language arts/development, history/social science, and math. To be issued on or before December 1, 2007.	Regarding the assessment of beverage outlets for unredeemed monies collected as can and bottle deposits for use towards financial incentives for school districts to adopt nutrition and physical activity standards. Funds could be distributed over a three-year period as a grant to schools who implement standards and establish fundraising mechanisms. Examples of standards include rewards/ incentives other than fun, eliminate practice of denying physical activity or recess as punishment and adoption of K-12 curriculum that promotes health eating and physical activity to name a few.
iool Nu	Year	2005	2005	2005	2005	2005
State Legislation for School Nutrition	Topic	Cafeteria/Meals/Food service, Policy, School, Vending	Cafeteria/Meals/Food service, Policy, School	Authorization/Mandate, Cafeteria/Meals/Food service, Policy, School, Vending	Authorization/Mandate, Education, Nutrition, Education, Physical, School	Education, Nutrition, Education, Physical, Funding, School
Table A-3 (continued). 2005 Pending Sta	Subject	Nutrition	Nutrition	Nutrition	Nutrition, Physical Activity	Nutrition, Physical Activity
sontinued).	Number	SB12	SB281	SB965	AB689	SB165
Table A-3 (c	State	California	California	California	California	Connecticut
Von		ealth Institut				Kancas School

Table A-3 ((continued).	2005 Pending Sta	Table A-3 (continued). 2005 Pending State Legislation for School Nutrition	hool Nu	trition	
State	Number	Subject	Topic	Year	Abstract	Status
Connecticut	HB6631	Nutrition, Physical Activity	Obesity/Overweight, Recreation	2005	Act to reduce incidence of obesity in children and adolescents by establishing a childhood obesity program that at a minimum, incorporates childhood obesity prevention and reduction strategies into food assistance, health and recreation programs in conjunction with Commissioners of Social Services and Children and Families and other public agencies. Addresses conferences or meetings where experts on nutrition, exercise, public health, mental health, education media, food marketing, food security, agriculture, community planning and other disciplines to examine solutions to the problem and issue guidelines.	Pending
Connecticut	SB1174	Nutrition, Physical Activity	Education, Nutrition, Education, Physical, School, Taskforce/Committee	2005	Local and regional boards of education will establish a School Wellness Committee for the purposes of monitoring and implementing nutrition and physical activity policies required by the Child Nutrition and WIC Acts of 2004. Includes establishing a nutrition education curriculum and promoting physical activity. Same as CT SB1309	Pending
Connecticut	SB837	Nutrition, Physical Activity	Obesity/Overweight, School	2005	Addresses childhood obesity and improving the balance of activities during the school day by increasing the number of opportunities for physical activity.	Pending

Table A-3	(continued).	Table A-3 (continued). 2005 Pending Stat	ate Legislation for School Nutrition	ool Nu	trition	
State	Number	Subject	Topic	Year	Abstract	Status
Georgia	HB280	Nutrition, Physical Activity	Education, Nutrition, Education, Physical, School	2005	The State Board of Education shall prescribe a course of study in health and physical education for all grades and grade levels in the public schools and shall establish minimum time requirements and standards for its administration. The course shall require that students in K–7 participate in a physical education class each day of the school week. The course shall also include a developmentally planned and sequential curriculum that fosters the development of movement skills, enhances health related fitness, increases students for a nealth related fitness, increases students and encourages healthy habits and attitudes for a healthy lifestyle. A physical education course of study shall provide students with an opportunity for an appropriate amount of daily physical activity.	Pending
Hawaii	HB377	Nutrition	Cafeteria/Meals/Food service, Education, Nutrition, Policy, School	2005	Establishes standards for public school nutrition and requirements for food service employee nutrition training. Encourages schools to provide nutrition education.	Pending
Hawaii	HB1003	Nutrition, Physical Activity	Health Care, School, Taskforce/Committee	2005	Establishes a school-based student health services program that promotes a comprehensive approach to healthy development of all students through a student health system that integrates and complements school and community programs and resources. Convenes a joint planning committee to develop and plan implementation of the program.	Pending

	{ (continued).	Table A-3 (continued). 2005 Pending Sta	tate Legislation for School Nutrition	N loor	trition	
State	Number	Subject	Topic	Year	Abstract	Status
Hancas School Health	SB1517	Nutrition, Physical Activity	Health Care, School, Taskforce/Committee	2005	Establishes a school-based student health services program promoting a comprehensive approach to healthy development of students through a student health system that integrates and complements school and community programs and resources. Convenes a joint planning committee to develop and plan implementation of the program.	Pending
Indiana	HB1343	Nutrition, Physical Activity	Education, Physical, Policy, Taskforce/Committee, Vending	2005	School boards establish a child nutrition and physical activity advisory committee to develop a local wellness policy that complies with federal requirements. Requirement for food and beverages to be sold to students outside federal school meal programs and must meet certain requirements. Requirements do not apply to after school hours. Sets forth requirement for daily physical activity for elementary school students in public schools. Allows schools to continue vending machine contracts in existence before May 15, 2005	Pending
Kancas Health Institu	HB71	Nutrition, Physical Activity	Education, Nutrition, Education, Physical, Policy, School	2005	Requires board of education to promulgate administrative regulations for school year 2005– 2006 with regard to minimum requirements for high school graduation, completion of physical activity requirements, and for students entering 9th grade: two credits of health and nutrition instruction. Requires plans and activities for incorporating physical activity into school day, encourage schools to develop physical education plans with assistance of certified physical education specialist, clarify required physical activity is part of the instructional day. Requires school council to include 45 minutes (or 225 weekly) physical activity for students and for K–8 45 minutes per week (or 180 month) health and nutrition instruction.	Pending

Table A-3 (cor	ntinued). 2 0	Table A-3 (continued). 2005 Pending State	ate Legislation for School Nutrition	ol Nutri	ion	
State	Number	Subject	Topic	Year	Abstract	Status
Kentucky	SB172	Nutrition, Physical Activity	Cafeteria/Meals/Food service, Education, Nutrition, Education, Physical, Vending	2005	Requires board of education to issue minimum nutritional standards for food and beverages sold outside of the Nutritional School Breakfast and National School lunch programs. Addresses time limitations for the sale of competitive foods. Sets forth penalties for violations of sales. Requires development of wellness policy for K–5 that permits physical activity as part of the instructional day but not to exceed 30 minutes per day or 150 minutes per week. Also, sets requirements for food service personnel training and annual assessments of school districts' nutrition and physical activity environment with tool forthcoming.	Pending
Maine	PD796	Nutrition, Physical Activity	Cafeteria/Meals/Food service, Education, Physical, School	2005	Bill set forth to implement the recommendations of the Commission To Study Public Health That Concern Schools, Children and Nutrition. Includes BMI assessments for children in grades 1, 3, 5, 7, and 9. Nutritional standards for school food. Physical activity for elementary-middle school for 150 minutes per week and for high school 220 minutes per week. Also sets forth Physical education consultant.	Pending
Massachusetts	SB108	Nutrition, Physical Activity	Obesity/Overweight, School	2005	Sets forth for diabetes screening using non- invasive techniques for students whose body mass index-to-age is at or above the 95th percentile as determined by the national center for disease control or other nationally recognized indicators.	Pending

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Table A-3	(continued).	2005 Pending Stat	Table A-3 (continued). 2005 Pending State Legislation for School Nutrition	ol Nutri	tion	
State	Number	Subject	Topic	Year	Abstract	Status
New Jersey	A3503	Nutrition, Physical Activity	Obesity/Overweight, School	2005	Requires that the medical inspector of a public school district or school nurse shall annually measure the body mass index of each pupil and provide a confidential body mass index report to the parent or guardian of the pupil. The report shall include the pupil's body mass index percentile by age and gender, a plain language explanation of what the body mass index means, and information on the possible health effects of obesity, nutrition and physical activity. A pupil shall be exempt from measurement upon written request of the pupil's parent or guardian.	Pending
New York	S1805	Nutrition	Cafeteria/Meals/Food service, Farmers Market, Fruits and Vegetables, School	2005	Requires Commissioners of education and health to promote increased consumption of fruits and vegetables in schools through promotion, availability, and appeal of F&V by promoting school gardens and collaborating with farmers' markets.	Pending
New York	A05763	Nutrition, Physical Activity	Obesity/Overweight, School	2005	Requires schools to implement a method to measure, report, and analyze the body mass index of its students.	Pending
New York	S0472	Nutrition, Physical Activity	Obesity/Overweight, School	2005	Requires body mass index percentile screenings as part of the school medical screenings for vision, hearing, and scoliosis within six months of initial entry to school and during the first, third, seventh and tenth grade years.	Pending
North Carolina	HB694	Nutrition, Physical Activity	Obesity/Overweight, School	2005	Requires local administrative agencies to collect and report data on an annual basis on the body mass index (BMI) of school children in certain grades as recommended by a study committee for childhood overweight/obesity.	Pending

n, Physical n, Physical n, Physical	Table A-3 (continued). 2005 Pending State Legislation for School Nutrition	nool Nutri	ion	
ma SB535 Nutrition, Physical Activity ma SB699 Nutrition, Physical Activity HB2329 Nutrition, Physical E	Subject Topic	Year	Abstract	Status
ma SB699 Nutrition, Physical Activity HB2329 Nutrition, Physical	utrition, Physical Cafeteria/Meals/Food ctivity Bervice, Education, Nutrition, Education, Physical, School, Taskforce/Committee, Vending	2005	Regarding the Healthy Kids Act. Requires the department of education to report on and if necessary, survey all public schools regarding the description and frequency of physical education programs at all grade levels. In addition to survey healthy food plans as well as the use and content of vending machines. Requires the department to hold at least one public hearing accepting testimony from schools are undertaking to ensure proper nutrition for students.	Pending
HB2329 Nutrition, Physical Activity	utrition, Physical Education, Nutrition, ctivity Education, Physical, Policy, School	2005	Regarding 2006–07 school year. State board of education shall require that public elementary schools provide instruction by a certified health and physical education teacher for students in K–5 for a minimum of 30 minutes each day, 3 days per week for physical activity and a minimum of 30 minutes each day for two days a week for health education that is aligned with the Priority Academic Student Skills as adopted by the board.	Pending
	Nutrition, Physical Obesity/Overweight, Activity School	2005	Requires Department of Education to develop and implement pilot project to measure body mass index of students in selected schools and to send health status report cards to parents of students whose body mass index was measured. Sponsor: Joint Interim Committee on Human Services	Pending

Table A-	3 (continued).	2005 Pending Sta	Table A-3 (continued). 2005 Pending State Legislation for School Nutrition	ool Nutri	tion	
State	Number	Subject	Topic	Year	Abstract	Status
Oregon	SB559	Nutrition, Physical Activity	Obesity/Overweight, School	2005	Requires Department of Education to develop and implement pilot project to measure body mass index of students in selected schools and to send health status report cards to parents of students whose body mass index was measured.	Pending
South Carolina	HB3346	Nutrition, Physical Activity	Cafeteria/Meals/Food service, Education, Nutrition, Education, Physical, Obesity/Overweight, School, Taskforce/Committee	2005	Call for nutrition and physical activity standards and recommendations to be implemented by the department of education. Provides for certain health and nutrition specialists to be employed by the department of health and environmental control. Also sets forth that these two departments are responsible for reporting to legislature on implementation of this measure. Requires school districts to convene nutrition and physical activity advisory committees; requires student and school report cards to contain certain health data.	Pending
South Carolina	SB500	Nutrition, Physical Activity	Cafeteria/Meals/Food service, Education, Nutrition, Education, Physical, School	2005	Sets forth an amendment to current code of laws by adding Chapter 10, entitled Physical Education, School Health Services, and Nutritional Standards in an effort to establish physical education, school health services and nutritional standards in elementary schools. Provides for the amount of physical education for K–5 and teacher-student ratio. Provides for a measure of effectiveness of physical education program in public schools.	Pending

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Table A-3 (continued).	2005 Pending Sta	Table A-3 (continued). 2005 Pending State Legislation for School Nutrition	ool Nutri	tion	
State	Number	Subject	Topic	Year	Abstract	Status
Tennessee	HB1719	Nutrition, Physical Activity	Obesity/Overweight, School	2005	Encourages LEA to annually record and measure each student's height and weight, to annually perform a body mass index calculation, and to analyze and track such information in order to promote student health and wellness.	Pending
Tennessee	SB0949	Nutrition, Physical Activity	Obesity/Overweight, School	2005	Encourages LEA to annually record and measure each student's height and weight, to annually perform a body mass index calculation, and to analyze and track such information in order to promote student health and wellness.	Pending
Texas	HB3283	Nutrition, Physical Activity	Community, Obesity/Overweight, School	2005	The department shall develop and administer community-based and school-based childhood obesity prevention programs. The programs must: encourage children to: A)increase their physical activities and decrease their sedentary activities; and(B) increase their consumption of nutritious foods and decrease their consumption of minimally nutritive foods; (2) educate children and parents regarding nutrition; and (3)identify and implement other methods of preventing childhood obesity and related illnesses. (b)A community-based program must include media campaigns, including public service announcements or other means, to disseminate nutrition information for and promote increased physical activity by children. (c)The childhood obesity prevention program account is an account in the general revenue fund.	Pending

Table A-3 ((continued).	. 2005 Pending Sta	Table A-3 (continued). 2005 Pending State Legislation for School Nutrition	ool Nutri	tion	
State	Number	Subject	Topic	Year	Abstract	Status
Virginia	HB2610	Nutrition, Physical Activity	Education, Nutrition, Education, Physical, Obesity/Overweight, School	2005	Regarding the updating and strengthening of requirements for health and physical education in order to address the problem of obesity. Requires comprehensive health and physical education program for K–12 grades and that the board of education prescribe program in its Standards for Learning for Health and for Physical Education. Board however is not required to evaluate student achievement on objectives. School boards are required to emphasize good nutrition and physical education programs in the middle and high school grades as well as in elementary school.	Pending

Kans	Table A-4. 2	004 Enact	Table A-4. 2004 Enacted State Legislatic	tion for School Nutrition			
sas H	State	Number	Subject	Topic	Year	Abstract	Status
lealth Institute	Colorado	SB103	Nutrition	Cafeteria/Meals/Food service, Contract, Obesity/Overweight, School, Vending	2004	Defines healthful food/beverage and directs school district boards to adopt policies to phase in healthful vending choices to at least 50%. Prohibits new/renewed vending contracts under specified conditions. Authorizes enforcement and directs use of fines collected.	Enacted
	Connecticut	HB5344	Nutrition, Physical Activity	Cafeteria/Meals/Food service, Recreation, School	2004	Requirement of minimum time limits for school recess and lunch breaks. Requires schools to make healthy food available to students.	Enacted
	Florida	S0354	Nutrition, Physical Activity	Education, Physical, Policy, School, Wellness	2004	Requires school boards to address student health and fitness. Requires school boards to develop physical education programs.	Enacted
	Illinois	SB2940	Nutrition	Obesity/Overweight, School	2004	Health examinations given to school children under the Department of Public Health should include the collection of data relating to obesity. The Department of Public Health will collect and maintain this data from the State School Board.	Enacted
	New Mexico	HM28	Nutrition, Physical Activity	Cafeteria/Meals/Food service, Education, Physical, Obesity/Overweight, School	2004	Regards to the Legislative Education Study Committee create a working group to study in relation to vending machines the following: lack of physical education and nutrition in schools. Provides for funding.	Enacted
Kansas S	North Carolina	HB1414	Nutrition	Education, Nutrition, Funding, School	2004	An appropriations bill from the General Fund of the State, designating amounts for institutes, agencies, including school nutrition.	Enacted
School Health A	North Carolina	S01152	Nutrition, Physical Activity	Authorization/Mandate, School, Taskforce/Committee	2004	As part of the "Healthy Studies Act of 2004", the Joint Legislative Education Oversight Committee may study school nutrition and opportunities for physical activity to keep children healthy.	Enacted
<u> 4-17</u>							

I	le A-4 (ct	ontinued).	2004 Enacted Stat	Table A-4 (continued). 2004 Enacted State Legislation for School Nutrition	ol Nutri	tion	
	State	Number	Subject	Topic	Year	Abstract	Status
nsas School Health	Rhode Island	HB7900	Nutrition, Physical Activity	Education, Nutrition, Education, Physical, School	2004	Regarding cognitive testing as an assessment of health and fitness education. Removes requirement that commissioner makes annual report to governor on administration of health education, alcohol, and substance abuse programs for elementary and secondary schools.	Enacted
Rhod	Rhode Island	S2625	Nutrition, Physical Activity	Education, Nutrition, School	2004	Requires commissioner of elementary and secondary education to assess health education, alcohol and substance abuse curriculum in areas of health, fitness, and alcohol and substance abuse.	Enacted
Tenn	Tennessee	SB2743	Nutrition	Cafeteria/Meals/Food service, School, Vending	2004	Restricts the types of food items sold before school, during school hours and at least 30 minutes after school to students in public schools with kindergarten through eighth grade students from vending machines and student sales.	Enacted
Tenn	Tennessee	HB2783	Nutrition	Fruits and Vegetables, School, Vending, Vitamins/minerals	2004	Restricts the type of food items sold before school, during school and at least 30 minutes after school in public schools with kindergarten to eighth grade students from vending machines and student sales.	Enacted
Kansas Healt	Jont	HJR48	Nutrition, Physical Activity	Community, Education, Nutrition, School, Wellness	2004	Requests schools engage communities in developing nutrition and fitness programs, and schools and communities work with organizations to understand childhood wellness and develop programs, activities, and policies to address inactivity and poor nutrition.	Enacted

Table A-4 (i	continued).	2004 Enacted Sta	Table A-4 (continued). 2004 Enacted State Legislation for School Nutrition	ool Nutri	tion	
State	Number	Subject	Topic	Year	Abstract	Status
Virginia	HJ260	Nutrition, Physical Activity	Education, Nutrition, Education, Physical, School	2004	School divisions to provide age-appropriate nutrition and physical activity education to develop knowledge, attitudes, skills and behaviors necessary for students to adopt healthy eating habits and physically active lifestyles.	Enacted
Washington	SB5436	Nutrition, Physical Activity	Cafeteria/Meals/Food service, Education, Nutrition, Education, Physical, Obesity/Overweight, Policy, School, Taskforce/Committee	2004	Requires state school directors convene advisory committee to develop model policy on: access nutritious foods and development, appropriate exercise. Policy to address nutritional content of foods and beverages and the availability and quality of health, nutrition, and physical education curricula.	Enacted

APPENDIX B

State-by-State Physical Activity Regulations and Policies

erscholastic Athletics: No state policy. cess: No state policy. erscholastic Athletics: Statute <u>14.18.040</u> (1981) requires equal opportunity for th sexes in athletics and recreation. Separate school-sponsored teams may be ovided for each sex, however, equipment and supplies, services, and portunities shall be provided to both teams with no disparities. cess: No state policy. <u>1186</u> (2001) appropriates \$75,000 to the department of health services to ablish and administer a grant for school programs that promote children's using activities with profession to proposale that include at least 2 days a
th sexes in athletics and recreation. Separate school-sponsored teams may be by by ded for each sex, however, equipment and supplies, services, and bortunities shall be provided to both teams with no disparities. <i>cess</i> : No state policy. 1186 (2001) appropriates \$75,000 to the department of health services to ablish and administer a grant for school programs that promote children's
ablish and administer a grant for school programs that promote children's
vsical activities with preference to proposals that include at least 2 days a ek of physical activity for all children in grades K–8 to participate. <i>erscholastic Athletics:</i> ARS <u>15-705</u> (no date available) requires each governing and to adopt policies and procedures including minimum statewide guirements regarding pupil participation in extracurricular activities for pupils in ade 6–12. ARS <u>15-348</u> (no date available) allows common school students to rticipate in practice sessions of noncontact sports with secondary school dents. ARS <u>15-347</u> (no date available) requires a governing board to take into nsideration the cultural traditions of pupils when establishing rules regarding boil participation in extracurricular school activities. <i>ccess:</i> No state policy.
erscholastic Athletics: No state policy. cess: No state policy.
<i>ucation Code</i> §49432 allows every public school to post a summary of trition and physical activity laws and regulations, and requires the posting of a districts policies in all school cafeterias or other central eating area in public w. <i>erscholastic Athletics: Education Code</i> §33350 (no date available) encourages tricts to provide extra-curricular physical activity and fitness programs and bs and encourages use of school facility for physical activity and programs onsored by the school and/or the community. The <i>Education Code</i> also ablishes the California Department of Education as the authority over erscholastic athletics.
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State	Policy					
Colorado	Statute <u>22-32-136</u> (2005) encourages local districts to adopt a policy ensuring that every student has access to daily physical activity. <i>Interscholastic Athletics:</i> No state policy. <i>Recess:</i> No state policy.					
Connecticut	The State Board of Education's <u>Position Statement on Nutrition and Physical</u> <u>Activity</u> (2005) states that local school boards should establish policies and procedures that, "help schools promote regular physical activity." Local boards should also "require schools to allow time in the curriculum for physical activity and to incorporate these concepts throughout all subjects". Physical activity goals should also be incorporated into school improvement plans. Public Act <u>No. 04-224</u> (2004) requires each local board of education to include in a regular K–5 school day a period of physical exercise with the exception of those students requiring special education and related services. <i>Interscholastic Athletics:</i> No state policy. <i>Recess:</i> No state policy.					
Delaware	Interscholastic Athletics: Administrative Code <u>14:1001</u> (2002) states, "Local school districts shall establish their own academic eligibility criteria for participation in extra-curricular activities for all extra-curricular activities except for interscholastic athletics", which are defined in Administrative Codes <u>14:1008</u> and <u>14:1009</u> (2004). <i>Recess</i> : No state policy.					
Florida	 Interscholastic Athletics: Statute 1000.05 (2004) prohibits the exclusion of students from participating in any interscholastic, club, or intramural athletics offered by a public K–20 educational institution based on gender. The Statute further requires equal athletic opportunity for both genders. Statute 1002.20 (2004) mandates that all students first enrolling in a school be eligible to participate in high school athletic competition. The Statute also specifies that students who meet academic and conduct requirements shall be eligible to participate in extra-curricular activities. Statute 1006.15 (2002) outlines the eligibility requirements for participation in interscholastic activities as a minimum of a 2.0 GPA in the previous semester; fulfillment of the requirements laid out in an academic performance contract if the student's GPA falls below a 2.0; have a 2.0 cumulative GPA; and the maintenance of satisfactory conduct. Statute 1006.20 (2003) designates the Florida High School Athletic Association as the governing nonprofit organization of athletics in Florida public schools. If the Association fails to meet the provisions of the Statute, the Commissioner of Education has the authority to designate another nonprofit organization to govern athletics with State Board of Education approval. 					

Table B-1 (cont.) State-by-State Physical Activity Regulations and Policies

Table B-1 (cont.) State-by-State Physical Activity Regulations and Policies

State	Policy				
Georgia	Interscholastic Athletics: SBOE Rule <u>160-5-119</u> (1997) requires each local school board to adopt a policy regulating competitive interscholastic activities for grades 6–12. Student eligibility and physical examination requirements are outlined in the rule.				
	Recess: No state policy.				
Hawaii	Interscholastic Athletics: BOE <u>4520</u> (1997) requires students to have at least an overall GPA of 2.0 in order to participate in co-curricular activities.				
	Recess: No state policy.				
Idaho	Interscholastic Athletics: No state policy.				
	Recess: No state policy.				
Illinois	<u>105 ICLS 5/2.137(2005)</u> requires the State Board of Education to establish a program that recognizes schools that have implemented programs that increase the physical activity of students and have adopted policies/programs to promote healthy nutritional choices.				
	Interscholastic Athletics: No state policy.				
	Recess: <u>105 ICLS 5/2.137</u> (2005) requires the State Board of Education to set a goal that all school districts have a wellness policy consistent with CDC recommendations. The Department of Health, Department of Human Services and the State Board must convene an interagency working group to publish model wellness policies and programs. Further, a School Wellness Policy Taskforce must be created to identify barriers to implementing wellness policies, recommend how to reduce the barriers, recommend statewide nutrition standards, and evaluate the effectiveness of the wellness policies.				
Indiana	Interscholastic Athletics: No state policy.				
	<i>Recess</i> : <u>IAC 20-30-5-7.5</u> (2006) requires school corporations to provide daily physical activity for students in elementary school consisting of curriculum and programs and may include the use of recess beginning in the 2006-07 school year.				
Iowa	SF 2124 (2006) creates and implements a grant program distributed by the department of education to increase physical activity and fruit and vegetable consumption of targeted youth of elementary school age.				
	Interscholastic Athletics: 281 IAC 36.14 (2002) prescribes rules for participation in interscholastic athletic competition. 281 IAC 36.15 (2002) prescribes the eligibility requirements. Code 280.13 (2005) does not allow a public school to participate in any extracurricular interscholastic athletic contest unless the organization is registered with the department of education.				
	<i>Recess</i> : The model Wellness Policy (2005), put forth by the State Board, recommends district wellness policies include a physical activity component. Specifically, at least 20 minutes a day of recess are recommended, preferably outdoors, that encourages moderate vigorous activity and discourages more than two hours of inactivity a day. The policy also recommends withholding recess should not be used as a tool for punishment.				

Table B-1 (cont.) State-by-State Physical Activity Regulations and Policies

State	Policy
Kansas	Interscholastic Athletics: <u>Regulation 91-31-23</u> (1996) does not allow any student below sixth grade to participate in interscholastic athletics and specifies when practice for some students may be held and whether athletic practice can be counted for credit.
	Recess: No state policy.
Kentucky	Interscholastic Athletics: 702 KAR 7:065 (2004) designates the KY High School Athletic Association as the agent to manage interscholastic athletics at the high school level.
	<u>702 KAR 6:090</u> (2006) requires the local superintendent to evaluate and provide recommendations for the student physical activity environment and submit the report to the Department of Education by May 1, 2006 and on May 1st each succeeding year.
	Recess: No state policy.
Louisiana	Interscholastic Athletics: RS <u>17:176</u> (1997) require the superintendent of each school system to review all cocurricular and extracurricular activities and programs and urge principals and faculty of middle, junior high, and high schools to appropriately upgrade the standards of student athletes. The statute allows the right to film, videotape or otherwise record an extracurricular event so long as it does not cause significant disruption or distraction to the participants in the activity. <i>Recess:</i> No state policy.
Maine	Interscholastic Athletics: No state policy.
	Recess: No state policy.
Maryland	<i>Interscholastic Athletics:</i> Regulation <u>13A.06.03.02</u> (1994) sets the eligibility requirements for student participation in interscholastic athletics at the high school level.
	Recess: No state policy.
Massachusetts	The Massachusetts Governor's Committee on Physical Fitness and Sports (MGCPF) in partnership with the Department of Education created the <u>"Every</u> <u>Body Move!"</u> grant program which award up to \$7500 to approximately 25 schools during the 2006–07 academic school year to develop or sustain before, during or after school physical activity programs for children between the ages of 8 and 14.
	Interscholastic Athletics: No state policy.
	Recess: No state policy.

Table B-1 (cont.) State-by-State Physical Activity Regulations and Policies

State	Policy
Michigan	Interscholastic Athletics: No state policy.
	<i>Recess:</i> The Michigan State Board of Education's <u>Policies for Creating Effective</u> <u>Learning Environments</u> (2000) states that public schools must offer daily recess or physical activity periods for elementary and middle school students, and offer physical education programs at all grade levels with accommodations for students who need them. The <u>Model Local Wellness Policy</u> (2005) recommends districts adopt policies for implementing programs that are conducive to physical activity. Further, the Board assigns public schools the duty to help students and families make good, lifelong, and beneficial health choices. Recess is also recommended in the state board's <u>Policy on Quality Physical Education</u> (2003).
Minnesota	Interscholastic Athletics: Statute <u>121A.04</u> (2003) requires each educational institution to provide equal opportunities for both sexes to participate in its athletic program. Recess: No state policy.
Mississippi	The 1998 kindergarten guidelines require 45 minutes of physical activity for kindergarten students.
	Interscholastic Athletics: None specified.
	Recess: None specified.
Missouri	Interscholastic Athletics: No state policy.
	Recess: No state policy.
Montana	Senate Joint Resolution No. 2 (2003) urges districts to provide opportunities for physical activity whenever possible.
	Interscholastic Athletics: No state policy.
	Recess: No state policy.
Nebraska	Interscholastic Athletics: Statute <u>79-2,116</u> (no date available) declares it unfair and discriminatory to deny comparable opportunity for interscholastic and intramural athletic programs for both genders. <i>Recess</i> : No state policy.
Nevada	Interscholastic Athletics: No state policy.
Nevada	Recess: No state policy.
New Hampshire	Interscholastic Athletics: No state policy.
	<i>Recess:</i> Rule Ed <u>310.04</u> (2005) requires the developmentally appropriate daily physical activity policy to "encourage physical activity recess periods."
New Jersey	Interscholastic Athletics: No state policy.
	Recess: No state policy.

State	Policy
New Mexico	<u>6.12.6</u> NMAC (2006) requires local school districts to adopt wellness policies that address student and school employee wellness through a coordinated school health approach that include guidelines to provide physical activity opportunities for students before, during, and/or after school.
	Interscholastic Athletics: <u>6.13.2.9</u> NMAC (2000) states that interscholastic activities are an integral and essential component of the curricula within New Mexico schools. These activities must be fair, open and consistent and organized, supervised, and regulated by both the State Board of Education and the New Mexico Activities Association. <u>6.13.3.8</u> NMAC (2000) sets the eligibility requirements for student participation in interscholastic student activities. <u>6.13.4.8</u> NMAC (2000) requires local school boards to comparable athletic opportunities for both sexes. <i>Recess</i> : No state policy.
New York	Interscholastic Athletics: No state policy.
New TOIK	Recess: No state policy.
North Carolina	Interscholastic Athletics: <u>16 NCAC 06E .0202</u> (2000) only allows students in grades 7–12 to participate in interscholastic athletic competition. Requirements to qualify for participation are outlined in the code.
	<i>Recess:</i> Board Policy <u>HSP-S-000</u> (2005) prohibits structured/unstructured recess or other physical activity to be taken away as a form of punishment or to be used as a form of punishment. Instead, appropriate amounts of physical activity shall be provided for students. This involves physical exertion of at least moderate intensity level for a duration that provides significant health benefit to students. A minimum of 30 minutes of moderate to vigorous physical activity shall be given to all K–8 students daily through regular physical education, physical activities, recess, dance, classroom energizers, or other curriculum based physical education activity program.
North Dakota	Interscholastic Athletics: No state policy. Recess: No state policy.
Ohio	Interscholastic Athletics: No state policy. Recess: No state policy.
Oklahoma	Interscholastic Athletics: No state policy. Recess: No state policy.
Oregon	Interscholastic Athletics: OAR <u>581-022-1680</u> (1996) states that school districts may only allow those organizations to administer interscholastic activities which have been approved by the state board. <i>Recess</i> : No state policy.
Pennsylvania	Interscholastic Athletics: <u>022 PA Code §4.27</u> (1999) requires students of both sexes to have equal access in interscholastic and intramural programs. <i>Recess:</i> No state policy.
Source: National As	sociation of School Boards of Education

Table B-1 (cont.) State-by-State Physical Activity Regulations and Policies

State	Policy
Rhode Island	Interscholastic Athletics: No state policy.
	Recess: No state policy.
	Statute §16-2-9(a)(25) (no date available) and Statute §16-21-28 (no date available) require that the school committee of each school district establish a school health and wellness subcommittee. This subcommittee is charged with making recommendations regarding health education curriculum and instruction, physical education curriculum and instruction, and nutrition and physical activity policies. This subcommittee is to be chaired by a member of the school committee, and consist of a majority of non-school employees, including at least one parent. Statute §16-7.1-2(h) (no date available) requires that all district strategic plans include strategies to decrease obesity, and improve the health and wellness of students and staff through nutrition, physical activity, health education, and physical education.
South Carolina	Code <u>59-10-10</u> (2005) mandates that students in grades K–5 must be provided with at least 150 minutes of physical activity per week beginning in the 2006–07 school year. Code <u>59-10-330</u> (2005) requires each school district, with the CSHAC, to develop a school health improvement plan that addresses strategies for improving student physical activity and must be included in the district's strategic plan.
	Interscholastic Athletics: Regulation R 43-244 (1980) prohibits schools serving grades 1–6 from providing competitive sports "of a varsity pattern with scheduled league games and championships." Regulation R 43-244.1 (1988) and Code 59-39-160 (no date available) outline the academic requirements for students in grades 9–12 to participate in interscholastic activities. Recess: No state policy.
South Dakota	Interscholastic Athletics: Statute <u>13-36-4</u> (2003) gives the school board power to delegate the control, supervision, and regulation of any high school interscholastic activities to any voluntary, non-profit association Statute <u>13-36-7</u> (2003) deems any student enrolled in a public school district eligible to participate in any interscholastic activity sponsored by the SD High School Activities Association. <i>Recess:</i> No state policy.
	The Department of Education's Develop Activity Delicy (2005) requires the significant
Tennessee	The Department of Education's <u>Physical Activity Policy</u> (2005) requires, beginning July 1, 2006, that each LEA implement the Physical Education and Other Physical Activity Programs Module of the CDC's School Health Index to assess the school's learning environment.
	learning environment.
	Interscholastic Athletics: No state policy.

Table B-1 (cor	t.) State-by	y-State Physic	al Activity R	Regulations a	and Policies
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Table B-1 (cont.) State-by-State Physical Activity Regulations and Policies

State	Policy
Texas	Interscholastic Athletics: TAC <u>§76.1001</u> (2003) states that an extracurricular activity is an activity sponsored by the school district that is not necessarily directly related to instruction of the essential knowledge and skills but may have an indirect relation to some areas of the curriculum. Further provisions of extracurricular activities are provided in the code. <i>Recess:</i> No state policy.
Utah	Interscholastic Athletics: No state policy. Recess: No state policy.
Vermont	Interscholastic Athletics: No state policy. Recess: No state policy.
Virginia	Interscholastic Athletics: Code §22.1-276.3 (2005) requires any organization governing interscholastic activities among public high schools to develop, implement, and enforce rules stating that any school athletic team member determined to have used anabolic steroids during the training period to be ineligible for 2 years to compete in interscholastic athletic competition unless prescribed by a licensed physician for a medical condition.
	<i>Recess:</i> <u>8VAC20-131-80</u> (2000) requires elementary schools to provide students with daily recess during the school year as determined appropriate by the school.
Washington	Interscholastic Athletics: WAC <u>180-43-015</u> (2002) states, "All rules and policies applied by the Washington interscholastic activities association and any other voluntary nonprofit entities which have been delegated powers by a school district and which govern student participation in any interschool activity, shall be written and subject to the annual review and approval of the state board of education".
	Recess: No state policy.
West Virginia	Interscholastic Athletics: Board Policy <u>2436.10</u> (1984) outlines the requirement the requirements for participating in nonacademic activities in grades 7–12. Recess: No state policy.
Wisconsin	Interscholastic Athletics: No state policy.
	Recess: Administrative Code PI 8.01 (2004) allows no more than 30 minutes of the school day to be accounted for recess.
Wyoming	Interscholastic Athletics: No state policy. Recess: No state policy.

APPENDIX C

School-Level Nutrition Survey, District-Level Nutrition Survey and Physical Activity and Physical Education Survey



Questions marked with a * are required

2006 Kansas School Nutrition Survey - School Level

Welcome to the Kansas School Nutrition Survey!

The Kansas State Department of Education (KSDE) needs your help to respond to the Kansas Legislature. Your participation in this survey is essential to assure that the legislature has an accurate picture of nutrition practices and policies in Kansas public school districts.

As you know, there is a growing concern that increasing numbers of Kansas children and youth are overweight, physically inactive, and showing signs of weight-related illnesses. The Kansas Legislature has asked KSDE to provide information on the current environment in schools related to the health, nutrition, and physical fitness needs of students.

The survey consists of the following three parts:

- A. Respondent Profile
- B. Your Opinions Matter
- C. Policies and Practices

The information and opinions you provide in this survey are strictly confidential. Because the information will be reported in terms of group patterns, no individual schools or respondents will be publicly identified.

The Kansas Health Institute (an independent nonprofit health policy and research organization based in Topeka) is working with KSDE to collect, analyze, and report the information provided in this survey. If you have questions or concerns regarding this survey, you may contact Dr. Kim Kimminau at the Kansas Health Institute (785-233-5443).

Thank you for participating! We estimate that it will take less than 15 minutes to complete the survey. You may stop at anytime while completing the survey and return later. Your answers will be automatically saved; so you can easily pick up where you left off. Once you complete the last question in each section, your survey answers will be automatically submitted.

You must submit your answers by no later than FRIDAY, February 3, 2006.

You may stop the survey at the end of any page, and return to finish the survey later. Simply click the "Save survey and continue later" button at the end of the page. You will given an opportunity to enter an email address, so that you can receive a link to continue the survey where you left off.

Part A: Respondent Profile

Please answer the following questions for the school building where you are employed. If you serve more than one school, please think about the school with the largest number of enrolled students and answer the questions based on that specific school. Please answer all questions as completely as possible. All information will be kept confidential.

1. What is your Unified School District (USD) number?
 Please fill-in below the school or schools that you serve, along with the city or town in which the school resides. (For example: Washburn Middle School - Topeka)
3. What is the grade level of the students in the building(s) where you serve? Check all that apply.
Elementary school
Middle school/junior high
High school
4. Which of the following best describes your position?
Select one or fill-in.
© Food Service Director
C Food Service Site Manager
O Other (fill-in)
5. How many years have you served in your current position?
 6. Including your current position, how many total years of related experience do you have?
Part B. YOUR OPINIONS MATTER

Please indicate how much you agree with the following statements and answer all questions as completely as possible. The opinions expressed should represent your personal views as a professional. A specific school's information and your personal answers will be kept confidential.

Please answer the following questions thinking about the school building where you are employed. If you serve more than one school, please think about the school with the largest number of enrolled students, and answer the questions based on that specific school.

7. Please indicate your level of agreement with the following statements:

	Strongly Disagree	2	3	Δ	Strongly Agree 5
Overweight and obesity among children and adolescents are of concern to me.	C	Õ	Õ	\odot	Õ
The availability of "junk" food and soft drinks in my district are of concern to me.	C	\odot	\odot	\odot	C
Schools have a responsibility to promote healthy choices (such as healthful foods and physical activity) among children and adolescents.	O	C	O	O	O

8. Please indicate your level of agreement with the following statements:

The following are barriers in my school to providing quality nutrition services to all students:

	Strongly Disagree 1	2	3	4	Strongly Not Applicable Agree 5
Insufficient funding	igodot	\odot	O	\odot	\odot \odot
Lack of policies	\odot	\odot	\bigcirc	\odot	\circ \circ
Lack of professional, knowledgeable and trained staff	igodot	\bigcirc	\odot	\odot	o o
Insufficient number of trained staff	\odot	\odot	\mathbf{C}	\odot	\circ \circ
Inadequate time during the school day for meals	\odot	\odot	\odot	\odot	\circ \circ
Inadequate equipment	igodot	\odot	C	\mathbf{O}	\odot \odot
Inadequate kitchen space/facilities	\odot	\odot	igodot	igodot	\circ \circ
Inadequate serving space/facilities	\odot	\odot	\bigcirc	\odot	\circ \circ
Inadequate dining space/facilities	C	\odot	\bigcirc	\odot	\circ \circ
Inadequate dining area supervision	igodot	\odot	\mathbf{C}	\odot	0 0
Unappealing dining area atmosphere	\odot	igodot	O	\odot	© ©

9. Please indicate your level of agreement with the following statement:

	Strongly Disagree	0	2		Strongly Agree	Not Applicable
	1	2	3	4	5	
Students should be considered customers and be given the food choices they want.	\odot	igodot	igodot	\bigcirc	\odot	\odot

10. Please indicate your level of agreement with the following statements:

The following factors influence students' eating behaviors at school:

	Strongly Disagree				Strongly Not Applicable
	1	2	3	4	Agree 5
Ability to pay for foods other than the reduced price or free school meals	C	igodot	igodot	igodot	0 0
A la carte food options available	\odot	\odot	\odot	\odot	\odot \odot
Branded foods available (like Pizza Hut pizza, Doritos, etc.)	C	\odot	$igodoldsymbol{\circ}$	igodot	0 0

Cafeteria environment	\odot	\odot	\odot	\odot	\odot	\odot
Cultural practices	\odot	\odot	\odot	igodot	\odot	igodot
Home environment	\mathbf{O}	\odot	C	igodot	$\overline{\mathbf{O}}$	\mathbf{O}
Open campus during lunch period	\mathbf{O}	\odot	C	igodot	$\overline{\mathbf{O}}$	igodot
Commercial advertising in school	\mathbf{O}	\odot	C	igodot	$\overline{\mathbf{O}}$	igodot
Commercial advertising outside of school	\odot	\odot	\odot	\mathbf{C}	igodot	\mathbf{O}
Length of time available for meals	\mathbf{O}	\odot	C	igodot	$\overline{\mathbf{O}}$	\mathbf{O}
The time of the day meals are offered	\mathbf{O}	\odot	C	igodot	$\overline{\mathbf{O}}$	igodot
Nutrition/health education	\mathbf{O}	\odot	C	igodot	$\overline{\mathbf{O}}$	igodot
Peer influence	\mathbf{O}	\odot	C	igodot	$\overline{\mathbf{O}}$	igodot
Personal preference	\odot	\odot	C	\odot	\odot	\odot

Part C. POLICIES and PRACTICES

Please answer the following questions for the school building where you are employed. If you serve more than one school, please think about the school with the largest number of enrolled students, and answer the questions based on that specific school. Please answer all questions as completely as possible. Your school's information and your personal answers will be kept confidential.

11. The following strategies have been suggested as appropriate school responses to the growing obesity problem among children. Please mark any that are being implemented in your school to improve nutrition during this school year (2005-2006).

Check all that apply.

- Longer lunch periods
- Moved recess before lunch
- Changed lunch menu/choices
- Changed a la carte foods and/or beverages
- Removed vending machines
- Reduced access to vending machines
- Changed vending machine selections
- Changed foods and/or beverages sold at school events and/or as fundraisers
- None of the above

Breakfast

12. Does your school offer food to students in the morning?

- O Yes
- No

13. What are your school's regularly-offered breakfast food options?

School	Breakfast	Program
0011001	Dioditidot	riogram

A la carte items

- Vended items
- Products sold by school store
- Food items sold to raise funds for student organizations
- Food items available to students only upon request

14. How long do students have to eat breakfast, not including time spent walking to/from class or waiting in line?

- C Less than 10 minutes
- 10 15 minutes
 10 15 minutes
- More than 15 minutes

15. Which of the following present challenges to your school in offering breakfast?

Check all that apply.

- Bus arrival schedule
- Limited building hours before school
- Limited food service staff
- Lack of adequate staff for student supervision
- Cost
- Inadequate space and/or facilities for morning meal service
- None of the above

Lunch

16. How many lunch periods are there for students at your school?

17. On average, how many students are in each lunch period?

18. How long do students have to eat lunch, not including time spent walking to/from class or waiting in line?

Select one.

- C Less than 15 minutes
- 15 20 minutes
- O More than 20 minutes

19. Does your school have a policy that requires a minimum amount of time students will be given to eat breakfast and/or lunch once they are seated?

- O Yes
- No

20. Do the current food serving and dining facilities adequately accommodate the student population (i.e., enough space,

chair:	s, serving lines, etc.)?
igodot	Yes
igodot	No
21. W	/hich factors below prevent students from being adequately accommodated in the food service and/or dining area?
Chec *	k all that apply.
	Not enough serving lines
	Not enough cashiers
	Speed of food service
	Not enough food service staff
	Lack of dining space and/or seating
	Classroom schedules
	Other (fill-in)
22. D their	oes your district have an "open campus" where secondary students are able to leave the school premises during lunch period?
igodot	Yes
igodot	No
\mathbf{O}	Not applicable
23. W	/hich of the factors below have influenced your district's open campus policy?
Chec *	k all that apply
	Parents
	Students
	Community members
	District administrator(s)
	Financial issues
	Don't Know
\Box	Other (fill-in)
24. V	/hich of the grades/groups below are allowed an open campus during the lunch period?
Chec *	k all that apply
	Grade 9
	Grade 10
	Grade 11
	Grade 12
	Students who meet specific behavioral/achievement criteria

A La Carte

25. Does your school's food service program offer a la carte items (i.e. foods that are not part of the reimbursable school meals) for sale to students?

- No
- O Not applicable

26. When are a la carte items offered?

Check all that apply.

\square	Before	school	begins
-----------	--------	--------	--------

- During the breakfast meal period
- Between breakfast and lunchtime
- During the lunch meal period
- After lunch
- Other

27. Where are a la carte items offered?

Check all that apply.

- Dining area
- Kiosks outside the dining area
- Commons or other student activity area
- Other

28. Based on your observation, what percent of the students who eat at school:

Fill in numbers below between 1 and 100.

Eat ONLY a la carte items during lunch?

Eat ONLY a reimbursable lunch?

Eat a reimbursable lunch and at least one a la carte item?

Values must add up to 100 Current Total: 0

29. Which of the following items are routinely available to students as a la carte selections?

Check all that apply.

- An entrée from the lunch program
- Hamburgers or other hot sandwiches
- Cold sandwiches
- Fruits or vegetables (other than French fries)
- Dairy foods (such as milk, yogurt, cheese)

Γ		
Γ		

- Ice cream
- Candy
- Nuts and/or seeds
- Chips and snack foods
- School-prepared dessert items
- Pre-packaged dessert items
- Baked French fries, tater tots, onion rings
- Deep-fat fried French fries, tater tots, onion rings
- Water
- Juice
- Carbonated beverages

Vending and School Stores

30. Does your school have vending machines available for use by students?

- O Yes
- No
- 31. How many beverage vending machines are there in your school?
- 32. How many food/snack vending machines are there in your school?

33. Which of the following items are routinely available to students in vending machines and/or school stores?

Check all that apply.

- Fruits or vegetables (other than French fries)
- Dairy foods (such as milk, yogurt, cheese)
- Ice cream
- Candy
- Nuts and/or seeds
- Chips and/or snack foods
- Prepackaged dessert items
- Baked French fries, tater tots, onion rings
- Deep-fat fried French fries, tater tots, onion rings
- Water
- Juice

Carbonated beverages

34. Are there advertisements for vended beverages or foods on school grounds?

- \bigcirc Yes
- \bigcirc No
- \mathbf{O} Don't Know

35. Where are vending machines located?

Check a	ll that	apply
---------	---------	-------

- \square Cafeteria/lunchroom
- \square Student commons area
- School entry
- Gymnasium
- \Box Hallway
- Outside school
- Faculty lounge

36. When are vending machines available to students?

Check all that apply

 \Box Before school

- \square Throughout the school day
- \square After the last lunch period
- \square After the end of the school day

37. If machines with carbonated beverages are located in the food service area, how is student access prevented during the food service period?

vending machines?

Chec *	k all that apply.
	Timer
	Lock
	Gate
	Does not apply
	Other (fill-in)
38. V	/ho selects the items available for sale in
Chec *	k all that apply.
	School food service manager or director

- School administrator
- Parents or PTO/PTA

Civic group
Student organization
Vendor
Don't Know
Other (fill-in)
Please contact mckeithen@bellsouth.net if you have any problems accessing this survey.

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Questions marked with a * are required

2006 Kansas School Nutrition Survey - District Level

Welcome to the Kansas School Nutrition Survey!

The Kansas State Department of Education (KSDE) needs your help to respond to the Kansas Legislature. Your participation in this survey is essential to assure that the legislature has an accurate picture of nutrition practices and policies in Kansas public school districts.

As you know, there is growing concern that increasing numbers of Kansas children and youth are overweight, physically inactive and showing signs of weight-related illnesses. The Kansas Legislature has asked KSDE to provide information on the current environment in schools related to the health, nutrition and physical fitness needs of students.

The survey consists of three parts:

- A. Respondent Profile
- B. Your Opinions Matter
- C. Policies and Practices

The information and opinions you provide in this survey are strictly confidential. Because the information will be reported in terms of group patterns, no individual schools or respondents will be publicly identified.

The Kansas Health Institute (an independent nonprofit health policy and research organization based in Topeka) is working with KSDE to collect, analyze and report the information provided in this survey. If you have questions or concerns regarding this survey, you may contact Dr. Kim Kimminau at the Kansas Health Institute (785-233-5443).

Thank you for participating! We estimate that it will take less than 20 minutes to complete the survey. You may stop at anytime while completing the survey and return later. Your answers will be automatically saved; so you can easily pick up where you left off. Once you complete the last question in each section, your survey answers will be automatically submitted. You must submit your answers by no later than FRIDAY, February 3, 2006.

You may stop the survey at the end of any page, and return to finish the survey later. Simply click the "Save survey and continue later" button at the end of the page. You will given an opportunity to enter an email address, so that you can receive a link to continue the survey where you left off.

1. What is your Unified School District (USD) number?

*					
 Which of the following best describes you 	ur position?				
© Superintendent					
C Food Service Director					
C Business Manager					
C Principal					
C Board Clerk or Secretary					
© Building Secretary					
O Other (fill-in)					
 3. How many years have you served in you * 4. Including your current position, how many 		experience	do you have?		
Part B. YOUR OPINIONS MATTER	٦				
*					
Please indicate how much you agree with the as completely as possible. The opinions explosition and your personal answers.	pressed should repres	ent your per	to your school dis sonal views as a p	trict. Answer professional.	all questions A specific
5. Please indicate your level of agreement	with the following state	ments:			
	Strongly Disagree 1	2	3	4	Strongly Agree 5
Overweight and obesity among children and adolescents are of concern to me.	•	0	°	4	°.
The availability of "junk" food and soft drink my district are of concern to me.	s in 🕜	\odot	C	\odot	\odot

6. Please indicate your level of agreement with the following statement:

	Strongly Disagree				Strongly Agree	Don't Know
	1	2	3	4	5	
Our district would have to make significant cutbacks in student programs and/or services if we did not have vending machine revenue and/or food-related fundraising.	C	\odot	C	C	C	O

7. Please indicate your level of agreement with the following statements:

Classroom teachers are challenged to provide health education and nutrition education instruction because they lack adequate:

Strongly Disagree				Strongly Don't			
	1	2	3	4	Agree Kno 5	wc	
Time due to competing instructional demands	igodot	\odot	\odot	\mathbf{O}	00		
Professional training in health content areas	\odot	\odot	\odot	\odot	00		
Tools such as curricula and related resources	\odot	\odot	\odot	\odot	0 0		
8. Please indicate your level of agreement with the following statements:							
	Strongly Disagree				Strongly Agree	Don't Know	
	1	2	3	4	5		
Schools have a responsibility to promote healthy choices (such as healthful foods and physical activity) among children and adolescents.	C	C	O	O	\odot	O	
Keeping children physically active during the school day is as important as good nutrition.	\odot	C	O	O	O	\odot	

9. Please indicate your level of agreement with the following statement:

My district needs the following to promote healthier students:

	Strongly Disagree 1	2	3	4	Strongly Agree 5	Don't Know
More funding	\odot	\odot	\odot	\odot	\odot	\odot
Written policies	\odot	\odot	\odot	\odot	O	\bigcirc
Leadership that supports efforts to create a healthy school environment	\odot	O	igodot	\odot	C	$igodoldsymbol{\circ}$
Staff/faculty training	\odot	\odot	\odot	\odot	\circ	\bigcirc
Healthier and/or more appealing food choices	\odot	\odot	igodot	\odot	\odot	$igodoldsymbol{\circ}$
More health education required of students	\odot	\odot	\odot	\odot	\odot	\odot
More physical education and physical activity required of students	\odot	\odot	igodot	\odot	igodot	$igodoldsymbol{\circ}$
Integration of nutrition education into existing curricula (science, math, social studies, health education, etc.)	C	igodot	O	C	O	igodoldoldoldoldoldoldoldoldoldoldoldoldol
Less dependence on vended foods and beverages	igodol	igodot	igodot	\odot	\bigcirc	\bigcirc
Less dependence on selling foods and beverages to raise funds for school organizations	C	igodot	O	O	C	igodot
Student involvement	\odot	\circ	\odot	\odot	O	\bigcirc
Community, family and parent support	igodot	\mathbf{O}	\odot	\odot	igodot	$igodoldsymbol{eta}$
Other	\odot	igodot	\odot	\odot	\odot	$igodoldsymbol{\circ}$

▼

Please list any additional resources that your district needs to promote healthier students..

11. Please indicate your level of agreement with the following statements:

^{10.}

	Strongly Disagree	0	2		Strongly Agree	Don't Know
	1	2	3	4	5	
"No Child Left Behind" requirements	\odot	\odot	\odot	\odot	\odot	\odot
State standardized testing	\odot	\mathbf{O}	\odot	\odot	\odot	\odot
Local school board policy	\odot	\odot	\bigcirc	\odot	\odot	\odot
State and federal laws, regulations, policies and guidelines	C	\odot	O	\odot	\odot	\odot
Budget considerations and funding	\odot	\odot	\odot	\odot	igodot	\mathbf{O}
Knowledge of links between health and academic performance	C	\odot	igodot	\odot	\odot	\odot
Media	\odot	\mathbf{C}	\odot	\odot	\mathbf{O}	\mathbf{O}
Community opinions	\odot	\odot	igodot	\odot	\odot	\odot
Parents or PTO/PTA opinions or requests	C	C	\odot	igodol	\odot	\odot
Student or student organization opinions or requests	\bigcirc	\odot	igodot	\odot	\odot	\bigcirc
Superintendent and/or school principal opinions or requests	C	C	C	\odot	O	\odot

The following factors influence my district's decisions regarding student wellness, nutrition and physical activity::

12. Please indicate your level of agreement with the following statements:

The following are barriers in my district to providing quality nutrition services to all students:

	Strongly Disagree 1	2	3	4	Strongly Agree 5	Not Applicable
Insufficient funding	\odot	\odot	igodot	\odot	\odot	\odot
Lack of policies	\mathbf{O}	igodot	\odot	$\overline{\mathbf{O}}$	\odot	\odot
Lack of professional, knowledgeable and trained staff	C	igodot	C	$igodoldsymbol{\circ}$	\odot	\odot
Insufficient number of trained staff	\odot	\odot	\odot	\circ	\odot	\odot
Inadequate time during the school day for meals	\odot	\odot	igodot	\odot	\odot	\odot
Inadequate equipment	\odot	\odot	\bigcirc	\odot	\odot	\odot
Inadequate kitchen space/facilities	\odot	\mathbf{O}	igodot	\odot	\odot	\odot
Inadequate serving space/facilities	\odot	\mathbf{O}	\odot	igodot	\odot	\odot
Inadequate dining space/facilities	\odot	igodot	\odot	$\overline{\mathbf{O}}$	\odot	\odot
Inadequate dining area supervision	\mathbf{O}	igodot	\odot	\mathbf{O}	\odot	\odot
Unappealing dining area atmosphere	O	\odot	\odot	\odot	\odot	\odot

13. Please indicate your level of agreement with the following statements:

	Strongly Disagree 1	2	3	4	Strongly Agree 5	Not Applicable
Students should be considered customers and be given the food choices they want.	igodot	O	C	C	O	\odot

14. Please indicate your level of agreement with the following statement:

The following factors influence students' eating behaviors at school:

	Strongly Disagree 1	2	3	4	Strongly Agree 5	Not Applicable
Ability to pay for foods other than the reduced price or free school meals	O	Ō	C	C	Õ	C
A la carte food options available	\odot	\odot	\odot	\odot	igodot	\odot
Branded foods available (like Pizza Hut pizza, Doritos, etc.)	igodot	igodot	C	\odot	igodol	C
Cafeteria environment	\mathbf{O}	\odot	\odot	\odot	\odot	\odot
Cultural practices	\odot	\mathbf{C}	O	\odot	\odot	\odot
Home environment	lacksquare	\mathbf{O}	\odot	\odot	\odot	\odot
Open campus during lunch period	\odot	\odot	\odot	\odot	\odot	\odot
Commercial advertising in school	$\overline{\mathbf{O}}$	\odot	\odot	\mathbf{O}	\odot	\odot
Commercial advertising outside of school	igodot	C	C	igodot	\odot	C
Length of time available for meals	\odot	\odot	\bigcirc	\odot	igodot	\odot
The time of the day meals are offered	\odot	\mathbf{C}	igodot	\odot	\odot	\odot
Nutrition/health education	\odot	$oldsymbol{\circ}$	igodot	\odot	\odot	\odot
Peer influence	\odot	\mathbf{C}	igodot	\odot	\odot	\odot
Personal preference	\odot	\odot	\mathbf{C}	\odot	\odot	\odot

15. Most Kansas schools measure students' heights and weights to determine their level of growth and development. Do you favor sharing this information with parents to identify children who may be overweight or underweight for their age?

O Yes

No

Part C. POLICIES and PRACTICES

Please answer all questions as completely as possible. Your district's information and your personal answers will be kept confidential.

16. The following strategies have been suggested as appropriate school responses to the growing obesity problem among children. Please mark any that are being implemented in your district to improve nutrition during this school year (2005-2006).

Check all that apply.

- Longer lunch periods
- Moved recess before lunch
- Changed lunch menu/choices
- Changed a la carte foods and/or beverages
- Removed vending machines
- Reduced access to vending machines
- Changed vending machine selections

Changed foods and/or beverages sold at school events and/or as fundraisers

Brea	kfast
-------------	-------

17. Does your district offer food to students in the morning?

- O Yes
- No

18. What are your district's regularly-offered breakfast food options?

Check all that apply.

- School Breakfast Program
- A la carte items

Vended items

- Products sold by school store
- Food items sold to raise funds for student organizations
- Food items available to students only upon request

19. How long do students have to eat breakfast, not including time spent walking to/from class or waiting in line?

- Less than 10 minutes
- 10 15 minutes
- O More than 15 minutes

20. Which of the following constraints are faced by your district in offering breakfast?

Check all that apply.

- Bus arrival schedule
- Limited building hours before school
- Limited food service staff
- Lack of adequate staff for student supervision
- Cost
- □ Inadequate space and/or facilities for morning meal service
- □ None of the above

Lunch

21. On average, how long do students have to eat lunch, not including time spent walking to/from class or waiting in line?

Choose 1 answer.

- C Less than 15 minutes
- ① 15 20 minutes

C More than 20 minutes

22. Does your district have a policy that requires a minimum amount of time students will be given to eat breakfast and/or lunch once they are seated?

- O Yes
- No

23. Overall, do the current food serving and dining facilities adequately accommodate the student population (i.e., enough space, chairs, serving lines, etc.)?

- O Yes
- No

24. Which factors below prevent students from being adequately accommodated in the food service and/or dining area?

Check all that apply.

\square	Not enough	serving	lines
-----------	------------	---------	-------

- Not enough cashiers
- Speed of food service
- Not enough food service staff
- Lack of dining space and/or seating
- Classroom schedules
- Other (fill-in)

25. Does your district have an "open campus" where secondary students are able to leave the school premises during their lunch period?

- O Yes
- No
- O Not applicable

26. Which of the factors below have influenced your district's open campus policy?

Check all that apply.

- Parents
- Students
- Community members
- District administrator(s)
- Financial issues
- Don't Know

27. Which of the grades/groups below are allowed an open campus during the lunch period?

Check all that apply.

Grade 9

- Grade 10
- Grade 11
- Grade 12
- Students who meet specific behavioral/achievement criteria

A La Carte

28. Does your district's food service program offer a la carte items (i.e. foods that are not part of the reimbursable school meals) for sale to students at <u>any</u> of the following grade levels?

	Yes	No	Not Applicable				
Elementary	igodot	\odot	Õ				
Middle School / Junior High	\odot	\odot	O				
High School	$igodoldsymbol{\circ}$	\odot	C				
29. When are a la carte item	s offered	1?					
Check all that apply. *							
Before school begins							
During the breakfast meal period							
Between breakfast and	d lunchtir	me					
During the lunch meal	period						
After lunch		_					
Other (fill-in)							
30. Where are a la carte iten	ns offere	d?					
Check all that apply. *							
Dining area							
Kiosks outside the din	ing area						
Commons or other stu	dent acti	ivity area	ea				
Other							
31. Which of the following best describes your district's pricing of a lunch consisting of only a la carte items?							
C Lower than the school	lunch pr	ice					
C Competitive with the s	chool lur	nch price	e .				
C Higher than the schoo	l lunch p	rice					
32. Which of the following ite	ms are <u>r</u>	outinely	y available to students as a la carte selections?				
Check all that apply.							
			Elem MS HS				
An entrée from the lunch pro	ogram						

Hamburgers or other hot sandwiches

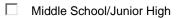
Cold sandwiches		
Fruits or vegetables (other than French fries)	\Box	
Dairy foods (such as milk, yogurt, cheese)	\Box	
Ice cream	\Box	
Candy	\Box	
Nuts and/or seeds		
Chips and/or snack foods		
School-prepared dessert items		
Pre-packaged dessert items		
Baked French fries, tater tots, onion rings		
Deep-fat fried French fries, tater tots, onion rings		
Water		
Juice		
Carbonated beverages		

Vending and School Stores

33. For which of the following building levels does your district have vending machines available for use by students?

Check all that apply.

Elementary



High School

None of the above

34. How many beverage vending machines are there in your district?

35. How many food/snack vending machines are there in your district?

*

36. Does your district have an exclusive contract for beverages such as soft drinks, juices, sports drinks, and water?

- O Yes
- No

37. Are there advertisements for vended beverages or foods on school grounds?

- O Yes
- No
- C Don't Know
- 38. Where are vending machines located?

Check all that apply.
Cafeteria/lunchroom
Student commons area
School entry
Gymnasium
Hallway
Outside school
Faculty lounge
39. When are vending machines available to students?
Check all that apply.
Elem MS HS
Before school
Throughout the school day
After the last lunch period
After the end of the school day
40. If machines with carbonated beverages are located in the food service area, how is student access prevented during the food service period? <i>Check all that apply.</i>
Does not apply
Other (fill-in)
41. Who selects the items available for sale in vending machines?
Check all that apply.
School food service manager or director
School administrator
Parents or PTO/PTA
Civic group
Student organization
Vendor
Other
42. How is the revenue from vending or school stores used?

Check all that apply.

\Box	Supplies	(such a	is paper,	pens,	physical	education	equipment)
--------	----------	---------	-----------	-------	----------	-----------	------------

- Sports/clubs (such as uniforms, travel, etc.)
- Student incentives
- Teacher/staff incentives
- Facility improvements
- School operational expenses
- Supplemental budget/general fund
- Food service program
- Other

43. Which of the following items are routinely available to students in vending machines and/or school stores?

Check all that apply.

- Fruits or vegetables (other than French fries)
- Dairy foods (such as milk, yogurt, cheese)
- Ice cream
- Candy
- Nuts and/or seeds
- Chips and/or snack foods
- Prepackaged dessert items
- Baked French fries, tater tots, onion rings
- Deep-fat fried French fries, tater tots, onion rings
- Water
- Juice
- Carbonated beverages

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Questions marked with a * are required

2006 Kansas School Physical Activity Survey

Welcome to the Kansas School Physical Activity Survey!

The Kansas State Department of Education (KSDE) needs your help to respond to the Kansas Legislature. Your participation in this survey is essential to assure that the legislature has an accurate picture of nutrition practices and policies in Kansas public school districts.

As you know, there is a growing concern that increasing numbers of Kansas children and youth are overweight, physically inactive, and showing signs of weight-related illnesses. The Kansas Legislature has asked KSDE to provide information on the current environment in schools related to the health, nutrition, and physical fitness needs of students.

The survey consists of the following four parts:

- A. Respondent Profile
- B. Your Opinions Matter
- C. Physical Education
- D. Physical Activity

The information and opinions you provide in this survey are strictly confidential. Because the information will be reported in terms of group patterns, no individual schools or respondents will be publicly identified.

The Kansas Health Institute (an independent nonprofit health policy and research organization based in Topeka) is working with KSDE to collect, analyze, and report the information provided in this survey. If you have questions or concerns regarding this survey, you may contact Dr. Kim Kimminau at the Kansas Health Institute (785-233-5443).

Thank you for participating! We estimate that it will take less than 20 minutes to complete the survey. You may stop at anytime while completing the survey and return later. Your answers will be automatically saved; so you can easily pick up where you left off. Once you complete the last question in each section, your survey answers will be automatically submitted.

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receive a link to continue the survey where you left off.

Part A: Respondent Profile

Please answer the following questions for the school building where you are employed. If you serve more than one school, please think about the school with the largest number of enrolled students and answer the questions based on that specific school. Please answer all questions as completely as possible. All information will be kept confidential.

ŀ	1. What is your Unified School District (USD) number?
	*

2. Please list the school or schools that you serve, along with the city or town in which the school resides. *(for example: Washburn Middle School - Topeka)*



3. What is the grade level of the students in the building(s) where you serve?

Check	all	that	apply	1

- Elementary school
- Middle school/junior high
- High school
- 4. Which of the following best describes your position?
- C Administrator
- C School nurse
- O Physical Education Teacher
- C Health education teacher
- C Family and Consumer Science (FACS) teacher
- C Paraprofessional
- Other (fill-in)

5. How many years have you served in your current position?

6. Including your current position, how many total years of related experience do you have?

Part B. YOUR OPINIONS MATTER

Please indicate how much you agree with the following statements and answer all questions as completely as possible. The opinions expressed should represent your personal views as a professional. A specific school's information and your personal answers will be kept confidential.

Please answer the following questions thinking about the school building where you are employed. If you serve more than one school, please think about the school with the largest number of enrolled students, and answer the questions based on that specific school.

7. Please indicate your level of agreement with the for	ollowing statements:
---	----------------------

	Strongly Disagree				Strongly Agree
	1 1	2	3	4	5
Overweight and obesity among children and adolescents are of concern to me.	\odot	igodot	\odot	\bigcirc	igodot
The availability of "junk" food and soft drinks in my district are of concern to me.	\odot	C	O	\odot	C

8. Please indicate your level of agreement with the following statements:

Classroom teachers find it challenging to provide health education and nutrition education instruction because they lack adequate:

	Strongly Disagree				Strongly Don't
L	1 1	2	3	4	Agree Know 5
Time due to competing instructional demands	\odot	\odot	\odot	\odot	\odot \odot
Professional training in health content areas	\odot	\odot	\bigcirc	\odot	\odot \odot
Tools such as curricula and related resources	\odot	\odot	\bigcirc	\odot	\circ \circ

9. Please indicate your level of agreement with the following statements:

Classroom teachers find it challenging to provide physical education and increase students' physical activity levels because they lack adequate:

	Strongly Disagree				Strongl Agree	
	1	2	3	4	ັ5	Know
Time due to competing instructional demands	\odot	igodot	\mathbf{O}	O	\odot	igodot
Tools such as curricula and related resources	\odot	\odot	\odot	\odot	\odot	\odot
Professional training in health content areas	\odot	\odot	\odot	\odot	\odot	\odot
10. Please indicate your level of agreement with	th the follov	ving stateme	ents:			
		Strongly Disagree				Strongly Agree
		1	2	3	4	5
Schools have a responsibility to promote health (such as healthful foods and physical activity) a children and adolescents.		Ō	O	\odot	O	O
Keeping children physically active during the s is as important as good nutrition.	chool day	\odot	\odot	\odot	igodot	igodot
The lack of a State required minimum number physical education minutes per week for stude concern to me.		igodot	O	C	C	C
11. Please indicate your level of agreement with the following statements:						

My school needs the following to promote healthier students:

Strongly

Strongly Don't

	Disagree 1	2	3	4	Agree 5	Know
More funding	igodot	\odot	\odot	$\overline{\mathbf{O}}$	$\overline{\mathbf{O}}$	igodoldoldoldoldoldoldoldoldoldoldoldoldol
Written policies	\odot	\odot	\odot	\mathbf{O}	\odot	igodoldoldoldoldoldoldoldoldoldoldoldoldol
Leadership that supports efforts to create a healthy school environment	\odot	\odot	O	\odot	\odot	\odot
Staff/faculty training	\odot	\odot	\odot	\mathbf{O}	\circ	\odot
Healthier and/or more appealing food choices	\odot	\odot	igodot	\mathbf{O}	\odot	\odot
More health education required of students	\odot	\odot	\odot	\odot	\odot	igodot
More physical education and physical activity required of students	\odot	C	C	igodot	C	\odot
Integration of nutrition education into existing curricula (science, math, social studies, health education, etc.)	C	\bigcirc	O	C	C	\bigcirc
Less dependence on vended foods and beverages	\odot	\odot	\odot	\odot	\odot	$igodoldsymbol{\circ}$
Less dependence on selling foods and beverages to raise funds for school organizations	O	igodot	C	C	C	igodot
Student involvement	\odot	\mathbf{O}	\odot	\odot	\odot	igodoldoldoldoldoldoldoldoldoldoldoldoldol
Community, family and parent support	igodot	igodot	\odot	\mathbf{O}	\odot	igodoldoldoldoldoldoldoldoldoldoldoldoldol
Other	\odot	igodot	C	Ō	igodot	\odot

12. On the previous question, you answered "Other". What else does your school need to promote healthier students? (Fill-in)



13. Please indicate your level of agreement with the following statements:

The following factors influence my district's decisions regarding student wellness, nutrition and physical activity:

	Strongly Disagree	0	0		Strongly Agree	Don't Know
	1	2	3	4	5	-
"No Child Left Behind" requirements	\odot	\odot	O	\odot	\odot	\odot
State standardized testing	igodot	igodot	C	\odot	igodol	\odot
Local school board policy	\odot	\odot	\odot	\odot	igodot	\odot
State and federal laws, regulations, policies and guidelines	igodot	\odot	igodot	\odot	\odot	\odot
Budget considerations and funding	\odot	\odot	\odot	\odot	\odot	\odot
Knowledge of links between health and academic performance	C	\bigcirc	igodot	\odot	$igodoldsymbol{\circ}$	\odot
Media	\odot	igodot	\odot	\odot	igodot	\mathbf{O}
Community opinions	igodot	\mathbf{O}	\odot	\odot	$oldsymbol{\circ}$	\odot
Parents or PTO/PTA opinions or requests	C	O	C	igodoldoldoldoldoldoldoldoldoldoldoldoldol	\odot	igodot
Student or student organization opinions or requests	\odot	\odot	\odot	\odot	\odot	\odot
Superintendent and/or school principal	\odot	\odot	igodot	\odot	$igodoldsymbol{\circ}$	$igodoldsymbol{\circ}$

opinions or requests Other O O O O O

14. You answered "Other" on the previous question. Please fill-in any other factors that influence your school's decisions regarding student wellness, nutrition and physical activity:



15. Please indicate your level of agreement with the following statement:

The following are barriers in my school to providing quality health related services to all students:

	Strongly Disagree				Strongl Agree	y Don't
	1	2	3	4	5	Know
Insufficient funding	\bigcirc	\odot	\odot	\mathbf{O}	\circ	\odot
Lack of policies	\odot	\odot	\odot	\odot	\odot	\odot
Lack of professional, knowledgeable and trained staff	\odot	\odot	igodot	\odot	\odot	\odot
Insufficient number of trained staff	\bigcirc	\mathbf{O}	\odot	\mathbf{O}	\circ	\mathbf{O}
Inadequate time during the school day	\odot	\odot	\odot	\odot	\odot	\odot
Inadequate curricula, resource materials and equipment	\odot	\odot	igodot	\odot	\odot	\odot
Inadequate space/facilities	\odot	\circ	\odot	\odot	\circ	\mathbf{O}
Other	igodot	\odot	\odot	\odot	\odot	\mathbf{O}

16. You answered "Other" on the previous question. Please fill-in any <u>other</u> barriers that exist in your school to providing quality health-related services to all students? (fill-in)



17. Please indicate your level of agreement with the following statements:

The following factors, if addressed, would make physical education and physical activity a higher priority in my school:

	Strongly Disagree 1	2	3	4	Strongly Agree 5	Don't Know
Ability of students/families to pay for fees, uniforms, etc.	C	\odot	O	igodot	igodot	C
Allocation of funds to the physical education program	\odot	\odot	O	\odot	igodot	\bigcirc
Availability of before- or after-school physical activity programs	O	O	O	C	C	\odot
Availability of open space physical activity programs	O	O	O	C	C	\odot
Availability of trained physical education instructors, coaches or support staff	C	\odot	O	igodot	igodot	C
Availability of age-appropriate equipment	\mathbf{O}	\odot	\odot	\mathbf{O}	\mathbf{O}	\mathbf{O}
Amount of time allowed for physical activity during physical education class (or recess for elementary school students)	C	O	C	igodot	C	O

18. Most Kansas schools measure students' heights and weights to determine their level of growth and development. Do you favor sharing this information with parents to identify children who may be overweight or underweight for their age?

- O Yes
- No

Part C. PHYSICAL EDUCATION

This section is about physical education in your school, taught as a separate class or as part of other classes. Please answer all questions as completely as possible. Individual school's information and your personal answers will be kept confidential.

Please answer the following questions for the school building where you are employed. If you serve more than one school, please think about the school with the largest number of enrolled students, and answer the questions based on that specific school. Please answer all questions as completely as possible. Your school's information and your personal answers will be kept confidential.

Please review the following definitions.

Physical Education: A class that devotes at least 25 percent of the class time to physical activity for the students.

Physical Activity: Bodily movement of any type including recreational, fitness and sport activities such as jumping playing soccer, lifting weights; and daily activities such as walking or climbing stairs.

19. Does your school offer a physical education class that provides students with at least 25% of the class time for physical activity?

- O Yes
- No

20. What percent of physical education class time are students engaged in physical movement?

Select one. *

- C Less than 25%
- 25 50%
- 51 75%
- C 76 100%

21. Check each grade for which physical education is required for students in your school.

Check all that apply. *

- Pre K
- Grade K
- Grade 1
- Grade 2
- Grade 3
- Grade 4
- Grade 5
- Grade 6
- Grade 7

- Grade 8
- Grade 9
- Grade 10
- Grade 11
- Grade 12

22. What percentage of students in your school participates in physical education on a weekly basis?

	Less than 25%	25 – 50%	51 – 75%	76 – 100%
Pre K	\odot	\odot	\odot	\odot
Grade K	\odot	\odot	\odot	\odot
Grade 1	\odot	\odot	\odot	\odot
Grade 2	\odot	\odot	\odot	\odot
Grade 3	\odot	\odot	\odot	\odot
Grade 4	\odot	\odot	\odot	\odot
Grade 5	\odot	\odot	\odot	\odot
Grade 6	\odot	\odot	\odot	\odot
Grade 7	\odot	\odot	\odot	\odot
Grade 8	\odot	\odot	\odot	\odot
Grade 9	\odot	\odot	\odot	\odot
Grade 10) 🔿	\odot	\odot	\odot
Grade 11	\odot	O	\odot	\odot
Grade 12	2 🔿	O	O	\odot

Select one choice for each grade in your building.

23. On average, how many days a week do students in your school participate in a physical education class?

	Less than 1 day/week	1 day/week	2-3 days/week	4-5 days/week
Pre K	\odot	\odot	\odot	\odot
Grade K	\odot	\odot	\odot	\bigcirc
Grade 1	\odot	\odot	\odot	\bigcirc
Grade 2	\odot	\odot	\odot	\odot
Grade 3	\odot	\odot	\odot	igodot
Grade 4	\odot	\odot	\odot	\bigcirc
Grade 5	\odot	\odot	\odot	\odot
Grade 6	\odot	\odot	\odot	O
Grade 7	\odot	\odot	\odot	\odot
Grade 8	\odot	\odot	\odot	\odot
Grade 9	\odot	\odot	\odot	\odot
Grade 10	0 0	\odot	\odot	igodot
Grade 1	1 0	\odot	\odot	\odot

Grade 12	\bigcirc	\bigcirc
		C

 \bigcirc

 \bigcirc

24. How long is a physical education class period?

Choose One.

- C Less than 20 minutes
- C 20-30 minutes
- 31-40 minutes
- O 41-50 minutes
- More than 50 minutes

25. In your school, is recess considered equivalent to a physical education class?

- O Yes
- No

26. In your school, does recess substitute for physical education on the days that physical education is not offered?

- Yes
- No

27. Has the average number of physical education minutes offered to students in your school changed in the past three years?

Choose One.

- Yes, minutes have decreased
- C Yes, minutes have increased
- O No, minutes have not changed

28. If time spent on physical education has decreased at your school, what is the primary reason this occurred?

Choose ONLY ONE, the best answer or fill-in.

- No staff available to cover recess related responsibilities
- C Lack of funds (to purchase safe equipment for students, etc.)
- © More classroom time was needed to meet state and federal education requirements
- O Other

29. Who teaches physical education?

Check all that apply or fill-in.

- Physical education teacher
- Science teacher
- Classroom teacher
- School nurse
- Health education teacher
- Family and Consumer Science (FACS) teacher

	Paraprofessional
	Other
30. W schoo	/hat is the physical education training of the person who provides the most physical education instruction in the ol?
Checi *	k all that apply or fill-in.
	At least one college-level course in physical education
	Professional Development Credits related to physical education
	No professional training in physical education
	Certified physical education teacher
	Other (fill-in)
31. D	o students enrolled in physical education receive age-appropriate fitness testing at least once a year?
igodot	Yes
\odot	No
igodot	Don't Know
32. Do years	oes the physical education program have a written, sequential curriculum that has been updated in the last five ?
igodot	Yes
\odot	No
\odot	Don't Know
33. D(*	oes the physical education curriculum use a program such as Essentials, Focus, Dimensions, SPARK, etc.?
igodot	Yes
\odot	No
\odot	Don't Know
34. Is	the physical education curriculum based on national and/or state physical education standards?
igodot	Yes
\odot	No
\odot	Don't Know
Par	t D. PHYSICAL ACTIVITY
35. Do *	oes your school provide students with regularly scheduled recess?

- O Yes
- No

36. During an average day, what is the total minutes of recess provided to students in your school?

Choose 1 for each grade level where recess is provided.

	5-10 mins.	11-15 mins.	16-20 mins.	21-25 mins.	26-30 mins.	31+ mins.	Not provided for this grade
Pre K	\bigcirc	\odot	\odot	igodot	\odot	\mathbf{O}	\odot
Grade k	< O	\odot	\odot	\odot	\odot	\odot	igodot
Grade 1	\odot	\odot	\odot	\odot	\odot	\odot	igodot
Grade 2	2 0	\odot	\odot	\odot	\odot	\odot	igodot
Grade 3	6	\odot	\mathbf{O}	\odot	igodot	\odot	igodot
Grade 4	\mathbf{O}	\odot	\odot	\odot	igodot	\odot	igodot
Grade 5	Ō	\odot	\mathbf{O}	\odot	igodot	\odot	igodot
Grade 6	6	\odot	\odot	igodot	\odot	igodot	\odot

37. In an average week, how many days of the week is recess provided for students?

Choose 1 for each grade level where recess is provided.

	Less that 1 day		2 days	3 days	4 days	5 days
Pre K	\odot	\odot	\odot	\mathbf{O}	\odot	\odot
Grade K	\odot	igodot	\odot	$igodoldsymbol{\circ}$	igodoldoldoldoldoldoldoldoldoldoldoldoldol	\odot
Grade 1	\odot	igodot	\odot	$igodoldsymbol{\circ}$	igodoldoldoldoldoldoldoldoldoldoldoldoldol	\odot
Grade 2	\odot	igodot	\odot	$igodoldsymbol{\circ}$	igodoldoldoldoldoldoldoldoldoldoldoldoldol	\odot
Grade 3	\odot	igodot	\odot	$igodoldsymbol{\circ}$	igodoldoldoldoldoldoldoldoldoldoldoldoldol	\odot
Grade 4	\odot	igodot	\odot	$igodoldsymbol{\circ}$	igodoldoldoldoldoldoldoldoldoldoldoldoldol	\odot
Grade 5	\odot	igodot	\odot	$igodoldsymbol{\circ}$	igodoldoldoldoldoldoldoldoldoldoldoldoldol	\odot
Grade 6	\odot	igodoldoldoldoldoldoldoldoldoldoldoldoldol	igodoldoldoldoldoldoldoldoldoldoldoldoldol	$igodoldsymbol{igodoldsymbol{eta}}$	$igodoldsymbol{\circ}$	\bigcirc

38. Has the average number of recess minutes offered to students in your school changed in the past three years?

Select One.

- Yes, minutes have decreased
- C Yes, minutes have increased
- O No, minutes have not changed
- O Don't know

39. If time spent on recess has decreased at your school, what is the primary reason this occurred?

Choose only one, the BEST answer, or fill-in.

- C No staff available to cover recess related responsibilities
- C Lack of funds (to purchase safe equipment for students, etc.)
- O More classroom time was needed to meet state and federal education requirements
- Other (fill-in)

40. When is recess offered in your school?

Check all that apply.

Immediately preceding lunch periods

	Immediately following lunch periods
	Other times during the school day
41. V	Vhat facilities does your school have available for recess (including during inclement weather)?
Chec *	k all that apply.
	Gymnasium
	Playground
	Multipurpose room
	Classroom
	Cafeteria
	Other (fill-in)
42. A *	re students in your school provided with supervised, structured physical activities during recess?
igodot	Yes
igodot	No
	On average, what percent of recess time at your school is spent on structured physical activity?
44. V	Vho plans the structured physical activities during recess at school?
Chec *	sk all that apply.
	Physical education teacher
	Science teacher
	Classroom teacher
	School nurse
	Health education teacher
	Family and Consumer Science (FACS) teacher
	Paraprofessional
	Other (fill-in)
45. V	Vho supervises the structured physical activities during recess at school?
Chec *	k all that apply.
	Physical education teacher
	Science teacher
	Classroom teacher
	School nurse
	Health education teacher
	Family and Consumer Science (FACS) teacher

	Paraprofessional
	Other (fill-in)
46. T	The following strategies have been suggested as appropriate school responses to the growing obesity problem ing children. Please mark any that are being implemented during this school year (2005-2006).
Chec *	ck all that apply.
	Increased recess time
	Changed PE curriculum
	Increased PE time
	Promoting walking/biking to school
	Increased sports teams, intramural activities
	None of the above
Be	fore- and After-School Educational Enrichment Programs
47. D *	to students have access to a before-school or after-school program?
igodot	Before-school Only
igodot	After-school Only
igodot	Both
\mathbf{O}	Neither
48. A *	re structured physical activities offered during the before-school or after-school program?
igodot	Yes
\mathbf{O}	No
49. V	Vho plans the structured physical activities during the before-school or after-school program?
Chec	sk all that apply.
	Physical education teacher
	Science teacher
	Classroom teacher
	School nurse
	Health education teacher
	Family and Consumer Science (FACS) teacher
	Paraprofessional
	Other (fill-in)
50 ₩	Vho supervises the structured physical activities during the before-school or after-school program?
	sk all that apply.
*	

Physical education teacher

	Science teach	er			
	Classroom teacher				
	School nurse				
	Health educat	ion te	eacher		
	Family and Co	onsur	ner Science (FACS) teacher		
	Paraprofessio	nal			
	Other (fill-in)				
			ol or after-school program use a physica (such as the CATCH or SPARK program		
igodot	Yes				
igodot	No				
\bigcirc	Don't Know				
52. D	-	ol pro Yes	vide an after-school intramural athletic pr No	ogram for:	
Boys	only	\mathbf{O}	0		

alth curriculum developed by another

igodot	Yes		
igodot	No		
igodoldoldoldoldoldoldoldoldoldoldoldoldol	Don't Know		
52. D	oes your scho	ol pro Yes	vide an after-school intramural athletic program
Boys	only	igodot	0
Girls only		\odot	0
Both boys and girls (igodol	0

Please contact <u>mckeithen@bellsouth.net</u> if you have any problems accessing this survey.

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