

Make a Difference at Your School!

CDC Resources Can Help You Implement Strategies
to Prevent Obesity Among Children and Adolescents



SAFER • HEALTHIER • PEOPLE™

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

The Impact of Obesity

Obesity is increasing rapidly in the United States, affecting children, adolescents, and adults of all races, ethnicities, and income levels.

Since 1980, the percentage of obese children aged 6 to 11 has doubled, and the percentage of obese adolescents aged 12 to 19 has tripled. Childhood obesity has both immediate and long-term serious health impacts.

- In some communities, almost half of pediatric diabetes cases are type 2 diabetes, which was once believed to affect only adults.
- In one large study, 61% of obese 5- to 10-year-olds already had risk factors for heart disease, and 26% had two or more risk factors for the disease.
- Obese children have a greater risk of social and psychological problems, such as discrimination and poor self-esteem.
- Obese children have a 70% chance of being overweight or obese as adults—facing higher risks for many diseases, such as heart disease, diabetes, stroke, and several types of cancers.

The costs of treating obesity-related diseases are staggering and rising rapidly. In 2004, direct and indirect health costs associated with obesity were \$98 billion.

Good eating habits and regular physical activity are critical for maintaining a healthy weight. Unfortunately, less than 25% of adolescents eat enough fruits and vegetables each day. Sixty-four percent of high school students don't meet currently recommended levels of physical activity.

The Role of Schools in Preventing Childhood Obesity

Reversing the obesity epidemic requires a long-term, well-coordinated approach to reach young people where they live, learn, and play, and schools have an important role. Working with other public, voluntary, and private sector organizations, schools can play a critical role in reshaping social and physical environments and providing information, tools, and practical strategies to help students adopt healthy lifestyles.

- More than 95% of young people are enrolled in schools.
- Students have the opportunity to eat a large portion of their daily food intake and to be physically active at school.
- Schools are an ideal setting for teaching young people how to adopt and maintain a healthy, active lifestyle.
- Research shows that well-designed, well-implemented school programs can effectively promote physical activity and healthy eating.
- Emerging research documents the connections between physical activity, good nutrition, physical education and nutrition programs, and academic performance.



Ten Strategies for Schools to Promote Physical Activity and Healthy Eating

The Centers for Disease Control and Prevention (CDC) reviews scientific evidence to determine which school-based policies and practices are most likely to improve key health behaviors among young people, including physical activity and healthy eating. Based on these reviews, CDC has identified 10 strategies to help schools prevent obesity by promoting physical activity and healthy eating. CDC and its partners have developed user-friendly tools that help schools effectively implement each of the strategies.

Building the Foundation (Strategies 1–4)

Schools can build a strong foundation that will enable them to effectively promote physical activity and healthy eating as well as other health-enhancing behaviors. The first four strategies help schools develop a tailored approach that meets their specific, local needs and interests; earn the support and commitment of the school community; use the insights gained from scientific research; and emphasize teamwork and collaboration to maximize effectiveness and efficiency.

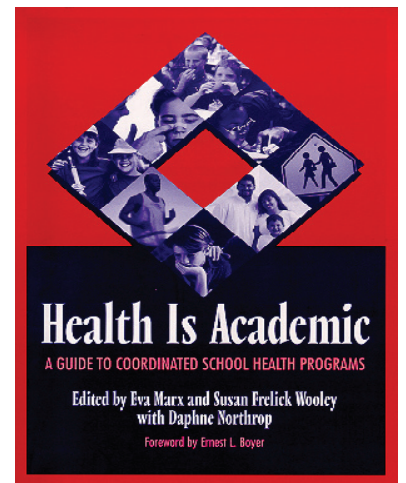
Strategy 1: Address physical activity and nutrition through a Coordinated School Health Program (CSHP).



CSHPs provide a systematic approach to promoting student health and learning. The model promoted by CDC consists of eight components that can strongly influence student health and learning including health education, physical education, and school meals, which are present in most schools. CSHPs focus on improving the quality of each of these components and expanding collaboration among the people responsible for them in the school and in the community. Active coordination is needed to engage school staff, implement district/school priority actions; assess programs and policies; create a plan based on data, sound science, and analysis of gaps and redundancies in school health programming; establish goals; and evaluate efforts. A well-coordinated school health program results in an organized set of courses, services, policies, and interventions that meet the health and safety needs of all students from kindergarten through grade 12.

Health Is Academic: A Guide to Coordinated School Health Programs

Developed by the Education Development Center with support from CDC and in collaboration with more than 70 national organizations, this book describes how the eight components of a CSHP can work together to support students and help them acquire the knowledge and skills they need to become healthy, productive adults. It includes



CSHP implementation action steps for schools, districts, state agencies, national organizations, colleges, and universities. Search on the American School Association's website.

www.ashaweb.org/store/products/

Strategy 2: Maintain an active school health council and designate a school health coordinator.

Establishing a school health council (SHC) is an effective way to achieve an enduring focus on promoting physical activity and healthy eating. SHCs can help schools meet the federal law passed in 2004 that requires all school districts that participate in federally funded school meal programs to establish a local school wellness policy through a process that involves parents, students, school representatives, and the public.

Comprising representatives from the home, school, and community, SHCs establish goals for the school health program and facilitate health programming in the school and between the school and community. Guided by the SHC's vision, a school health coordinator manages

and coordinates all school health policies, programs, activities, and resources. SHCs have helped create lasting changes in school environments, such as the adoption of nutrition standards, establishment of student and staff walking programs, the provision of adequate class time for physical education and health education, and the opening of school facilities for after-school physical activity programs.

Promoting Healthy Youth, Schools, and Communities: A Guide to Community-School Health Councils

This how-to manual offers a practical, five-step approach to planning, developing, maintaining, and evaluating SHCs. It was developed by a number of CDC partners—originally produced by the Iowa Department of Public Health, it was adapted for use by the American Cancer Society in collaboration with the American School Health Association, American Academy of Pediatrics, and National Center for Health Education.

www.cancer.org/schoolhealthcouncil

Effective School Health Advisory Councils: Moving from Policy to Action

This guide was developed by CDC's partners at the North Carolina Department of Public Instruction to help school district personnel and others develop new SHCs or strengthen existing ones that can effectively support school health policies and programs.

www.nhealthyschools.org/docs/resources/tools/shacmanual.pdf

Strategy 3: Assess the school's health policies and programs and develop a plan for improvement.

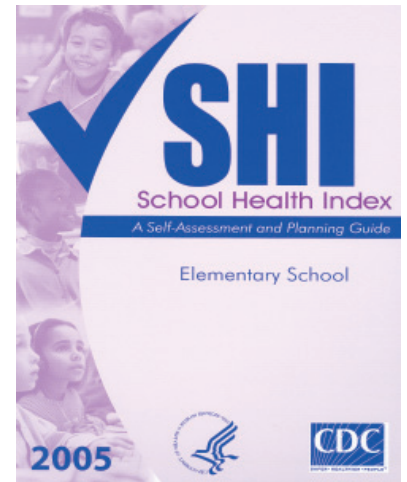
Self-assessment and planning provide structure to a coordinated school health program in the way that a map provides guidance to a driver. The self-assessment describes where the program is now, and the plan provides the destination and directions to make improvements. A school health plan is most likely to be effective when it is based on a systematic analysis of existing policies and practices, guided by insights from research, and developed by an SHC that includes teachers, parents, school administrators, students, and the community.

CDC's School Health Index (SHI): A Self-Assessment Planning Guide

This easy-to-use self-assessment and planning tool enables SHCs and others to analyze the strengths and weaknesses of their school health policies, curricula, and services. The SHI features eight self-assessment modules, each corresponding to one of the CSHP components. Based on their self-assessment, school health teams identify goals and create an action plan tailored for their school.

Many schools are incorporating these plans into their overall educational improvement plans. The SHI can be completed using a paper or online version.

www.cdc.gov/HealthyYouth/SHI

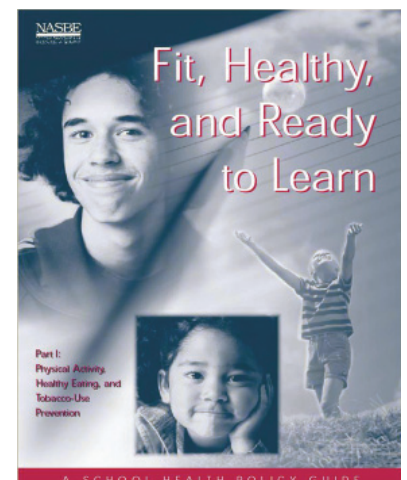


Strategy 4: Strengthen the school's nutrition and physical activity policies.

School policies can dictate how often students attend physical education, which items go into school vending machines, which topics and skills are taught in health education, which foods are served in the cafeteria, and much more. School policies directly affect students' opportunities for physical activity and healthy eating and can support the implementation of all other strategies listed in this document.

Fit, Healthy, and Ready to Learn: A School Health Policy Guide (FHRTL)

Developed by the National Association of State Boards of Education (NASBE) with CDC support, this practical guide helps schools and local school districts establish strong policies on physical activity,



nutrition, and other health issues in the context of a CSHP. FHRTL features sample policies that reflect best practice and can be adapted to fit local circumstances; it also includes explanations of the points addressed in the sample policies and excerpts of actual state and local policies.

www.nasbe.org/HealthySchools/fithealthy.html

NASBE also maintains a database of state school health policies that can serve as models for new policy development.

www.nasbe.org/HealthySchools/States/State_Policy.asp

Wellness Policy Guidance

Developed in collaboration with CDC and the U.S. Department of Education, this U.S. Department of Agriculture (USDA) website provides information on how to create, implement, and evaluate wellness policies that meet the requirements of federal law.

www.fns.usda.gov/tn/Healthy/wellnesspolicy.html

Wellness Policy Development Tool

Developed by Action for Healthy Kids in partnership with CDC and USDA, this searchable online database consists of existing or model nutrition and physical activity policies from states and districts around the country. Schools can easily use language from policies in the database to build local wellness policies.

www.actionforhealthykids.org/resources_wp.php

Taking Action (Strategies 5–10)

With a strong foundation in place, schools can work on improving programs and activities that serve both students and staff members. Strategies 5 through 10 are derived from CDC's research-based guidelines that identify school practices that promote lifelong physical activity and healthy eating.

Strategy 5: Implement a high-quality health promotion program for school staff.

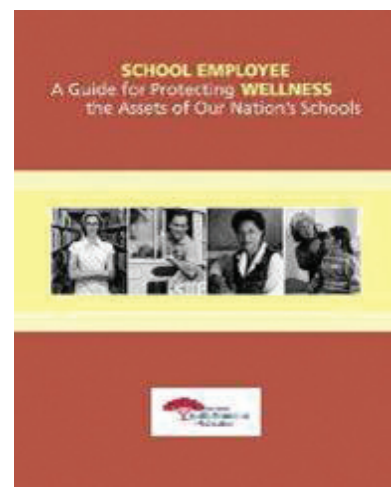
Staff wellness programs provide opportunities for school staff members to participate in health assessments, nutrition classes, physical activity programs, and other health promotion activities. These opportunities can contribute to improvements in physical and mental health outcomes; increases in morale, productivity, and positive role modeling; and decreases in absenteeism and health insurance costs.

School Employee Wellness: A Guide for Protecting the Assets of Our Nation's Schools

Developed by the Directors of Health Promotion and Education (DHPE) with CDC support, *School Employee Wellness: A Guide for Protecting the Assets of Our Nation's Schools*, is designed to help schools, districts, and states develop comprehensive school employee wellness

programs. This resource provides guidance for obtaining program support, developing a school employee wellness team, using existing data to optimize a new or existing program, and implementing policies and practices to support employee wellness.

www.schoolempwell.org

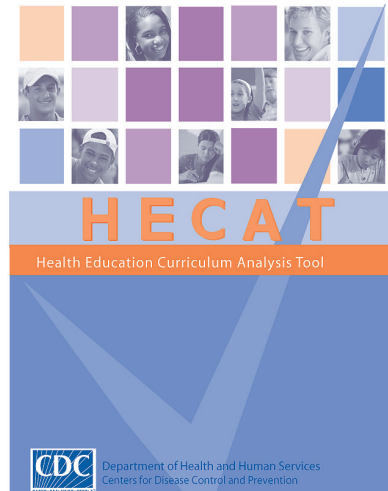


Strategy 6: Implement a high-quality course of study in health education.

Health education provides formal opportunities for students to acquire knowledge and learn essential life skills that can foster healthy behaviors, such as physical activity and healthy eating. Taught by qualified teachers, quality health education includes instruction on essential topics and skills that protect and promote physical, social, and emotional health and safety and provides students with ample opportunities to practice health-enhancing behaviors. State-of-the-art health education features a sequential curriculum consistent with state or national standards, adequate instructional time, and assessment to improve students' knowledge and skills.

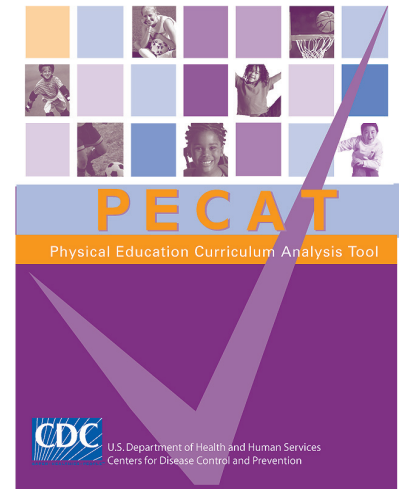
Health Education Curriculum Analyses Tool (HECAT)

This tool enables schools or school districts to choose or develop health education curricula that meet local needs and interests and are likely to be effective in improving students' knowledge, skills, and health behaviors. The HECAT is based on rigorous reviews of research evidence and is closely aligned with the *National Health Education Standards*. It allows educators to evaluate curricula based on the extent to which they contain elements of effective health education: those characteristics that are common to effective programs and most likely account for their positive outcomes. This edition of the HECAT covers physical activity, nutrition, and tobacco, along with alcohol and other drugs. Available in early 2008. www.cdc.gov/HealthyYouth



CDC's Physical Education Curriculum Analysis Tool (PECAT)

This tool enables educators to evaluate physical education curricula based on the extent to which the curricula align with national standards, guidelines, and best practices for quality physical education programs. The PECAT can be used to identify where revisions might be needed in a locally developed curriculum or to compare strengths and weaknesses of published physical education curricula being considered for adoption. For those schools without a physical education curriculum, the PECAT provides a vision of what should be included in a high-quality written physical education curriculum. www.cdc.gov/HealthyYouth/PECAT



School Health Education Resources

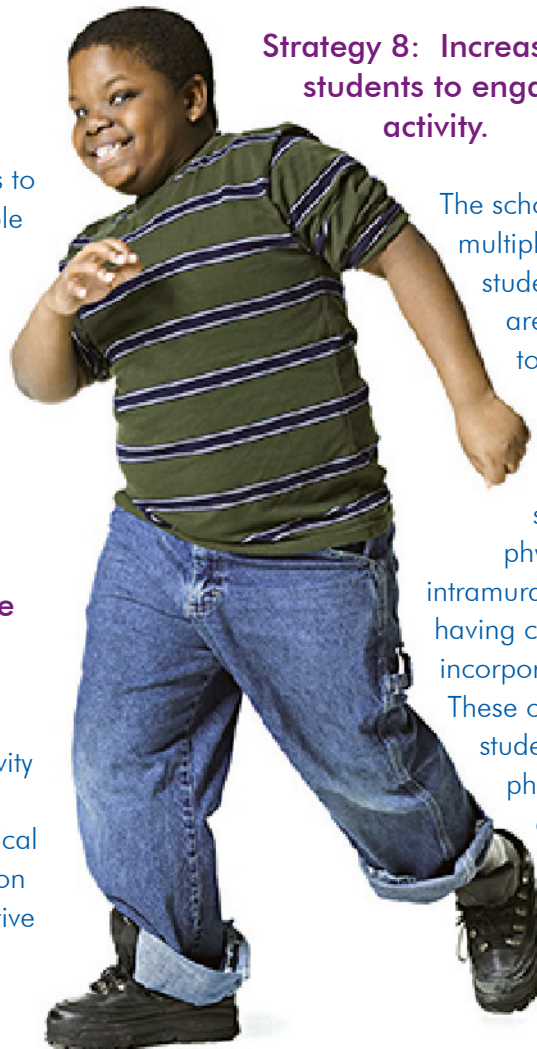
This searchable website provides user-friendly access to the myriad school health education offerings available from CDC, including curricula and lessons, fact sheets, and other instructional materials for use by teachers and students. The curricular resources are aligned with the characteristics of an effective health education curriculum and the updated *National Health Education Standards*, which can be accessed from the website. www.cdc.gov/HealthyYouth/SHER

Strategy 7: Implement a high-quality course of study in physical education.

Physical education is the cornerstone of a comprehensive approach to promoting physical activity through schools. All students, from pre-kindergarten through grade 12, should participate in quality physical education classes every school day. Physical education not only provides opportunities for students to be active during the school day, but also helps them develop the knowledge, attitudes, skills, behaviors, and confidence needed to be physically active for life.

Strategy 8: Increase opportunities for students to engage in physical activity.

The school setting offers multiple opportunities for all students, not just those who are athletically inclined, to enjoy physical activity outside of physical education classes: walking to and from school; enjoying recess; physical activity clubs, and intramural sports programs; and having classroom lessons that incorporate physical activities. These opportunities help students learn how to weave physical activity into their daily routines.



KidsWalk-to-School

This manual provides guidance for schools and communities on how to create an environment that supports safe walking and bicycling to school.

It includes educational materials to help promote walking to school and suggests strategies for communities to overcome barriers to walking to school.

www.cdc.gov/nccdphp/dnpa/kidswalk

Strategy 9: Implement a quality school meals program.

Each school day, millions of students eat one or two meals provided as part of the federally funded school meals program. These meals have a substantial impact on the nutritional quality of students' overall dietary intake and provide a valuable opportunity for students to learn about good nutrition. CDC supports USDA efforts to ensure that meals served through the National School Lunch Program and School Breakfast Program are safe, nutritious, and balanced.

Changing the Scene: Improving the School Nutrition Environment

This USDA Team Nutrition tool kit, developed with technical assistance from CDC, provides guidance and ready-to-use resources designed to help schools implement a comprehensive and consistent approach to promoting healthy eating among students. The kit addresses the entire school nutrition environment and includes guidance on serving and marketing quality school meals in a pleasant eating environment. Many other school meal guidance tools are available from the Team Nutrition website.

www.fns.usda.gov/TN/resources/changing.html

Strategy 10: Ensure that students have appealing, healthy choices in foods and beverages offered outside of the school meals program.

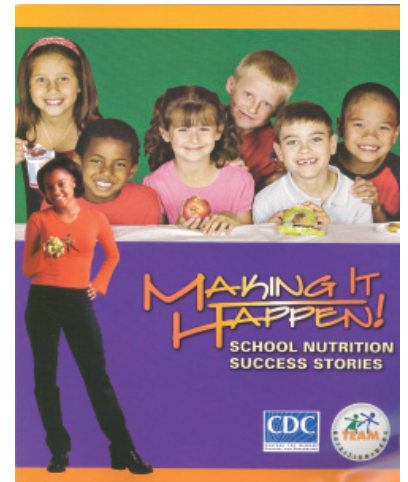
Most schools offer foods and beverages to students through a variety of channels outside of the federally regulated school meals program: vending machines, school stores, concession stands, after-school programs, fundraising campaigns, and class parties. These offerings have dramatically increased student access to high-fat or high-sodium snacks and non-nutritious high-

calorie beverages. Although federal regulations on these foods and beverages are limited, many states, school districts, and schools are establishing strong policies and innovative marketing practices to promote the sale of healthier foods and beverages.

Making It Happen: School Nutrition Success Stories

This resource, developed by CDC and the USDA's Team Nutrition with support from the U.S. Department of Education, describes six strategies that schools have implemented to improve the nutritional quality of foods and beverages offered on campus. It also tells the stories of 32 schools and school districts across the country that have successfully implemented these strategies.

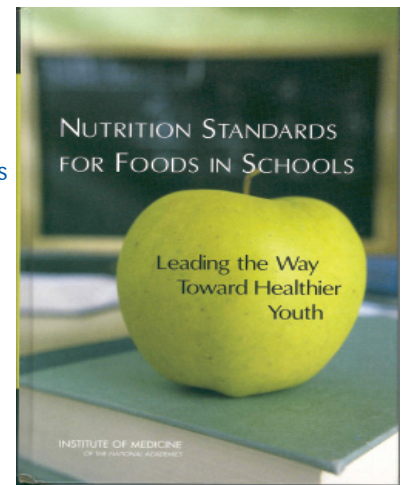
www.cdc.gov/HealthyYouth/nutrition/Making-It-Happen/download.htm



Nutrition Standards for Food in Schools: Leading the Way Toward Healthier Youth

This report, from the Institute of Medicine, makes recommendations about appropriate nutritional standards for the availability, sale, content, and consumption of foods and beverages at school, with particular emphasis on those sold outside of school meals.

www.iom.edu/CMS/3788/30181/42502.aspx





For more information on the role of schools
in preventing childhood obesity, please visit CDC's website:

www.cdc.gov/HealthyYouth/KeyStrategies