

OMB No.:0920-0340

Expiration Date: 1/31/95

1994 School Health Policies and Programs Study (SHPPS)

School Physical Education

Lead Teacher Interview

Public reporting burden for this collection of information is estimated to average 1 hour (or 60 minutes) per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to PHS

Reports Clearance Officer; ATTN: PRA; Hubert H. Humphrey Bldg., Rm. 721-B; 200 Independence Ave., SW; Washington, DC 20201, and to the Office of Management and Budget; Paperwork Reduction Project (0920-0340); Washington, DC 20503

CONTENTS

PAGE

I.REQUIRED PHYSICAL EDUCATION	2
II.ELECTIVE COURSES	7
III.FACILITIES AND RESOURCES	9
IV.STUDENT ASSESSMENT	10
V.WRITTEN CURRICULAR MATERIALS	11
VI.PHYSICAL FITNESS AND ACTIVITY	13
VII.COORDINATION AND COLLABORATION	14
VIII.IMPROVING SCHOOL PHYSICAL EDUCATION	16
IX.PROFESSIONAL PREPARATION	17
X.SCHOOL ATHLETICS	20
HANDCARDS	
1.PHYSICAL ACTIVITIES	22
2.REASONS FOR BEING EXEMPTED OR EXCUSED	23
3.HEALTH EDUCATION TOPICS	24
4.PHYSICAL EDUCATION FOR STUDENTS WITH SPECIAL NEEDS	25
5.PHYSICAL EDUCATION FACILITIES	26
6.WRITTEN PHYSICAL EDUCATION CURRICULAR MATERIALS	27
7.TYPES OF GOALS, OBJECTIVES, AND OUTCOMES	28
8.PROMOTING REGULAR PHYSICAL ACTIVITY	29
9.COLLABORATION WITH TEACHERS	30
10.COLLABORATION WITH SCHOOL AND COMMUNITY	31
11.EVALUATION OF PHYSICAL EDUCATION	32

12.IN-SERVICE IN PHYSICAL EDUCATION33

13.SCHOOL ATHLETIC POLICIES34

1. **SAY:** You've been identified as your school's "lead" physical education teacher. How would you describe your primary position here in terms of physical education? **CHECK THE ONE BEST ANSWER (1-8). RECORD (9) OTHER. THEN ASK:** So I could characterize your position as . . . ? **READ BACK ANSWER TO GET RESPONDENT'S AGREEMENT. REVISE, IF NEEDED.**

- 1 Chair of school's physical education department
- 2 School's lead physical education teacher, though not necessarily department chair
- 3 One of several physical education teachers
- 4 School's only physical education teacher
- 5 A teacher of another subject besides physical education (**SPECIFY**):
- 6 Athletic director
- 7 A coach
- 8 A coordinator who does not teach
- 9 Other (**SPECIFY**):

I. REQUIRED PHYSICAL EDUCATION

I'd like to begin by asking about your school's physical education requirements. Let me define some terms first so that we'll be talking about the same things. When I use the term "course," I mean an entire set of classes that a group of students attends throughout a school term. When I use the term "class section," I mean one group of students that meets for a particular course. Do you have any questions about how I'll be using these terms? **IF NEEDED, REVIEW DEFINITIONS.**

2. Is any instruction in physical education required for students in your school? **CHECK THE ONE BEST ANSWER.**

- 1 No--**SKIP TO Q.16 (Section II)**
- 2 Yes

3. How much physical education are students required to take while attending this school? Please count all of a student's physical education requirements. **CHECK THE TYPE OF UNIT (1-6), OR RECORD (7) OTHER. RECORD NUMBER OF UNITS REQUIRED. SAY:** So, your school requires (**READ NUMBER AND UNITS GIVEN**) of physical education. Is that correct? **REVISE, IF NEEDED.**

Number of units required

- 1 Years _____
- 2 Semesters _____
- 3 Trimesters _____
- 4 Quarters _____
- 5 Weeks _____
- 6 Carnegie units _____

7 Other (**SPECIFY UNIT**):_____

4. Now I want to ask about required physical education courses, which are composed mainly of physical education activities. It's my understanding that your school (**SAY "DOES" OR "DOES NOT"**) teach one or more required physical education courses. Is this correct? **CHECK THE ONE BEST ANSWER.**

- 1 Does not teach required physical education courses--**SKIP TO Q.16 (Section II)**
- 2 Does teach required physical education courses

5. I've made a list of the required physical education courses we were told are taught in your school. **SHOW LIST IN GRID TO RESPONDENT.** Please check to see if I've listed all the courses, and tell me what grade of students usually take each course. **REVISE LIST, IF NEEDED. FOR EACH COURSE, CHECK GRADES THAT USUALLY TAKE COURSE.**

GRADE

REQUIRED PHYSICAL EDUCATION COURSE TITLES	No usual grade	6	7	8	9	10	11	12

6. **HANDCARD #1.** Now I'd like to ask which physical education activities are taught in any of the required physical education courses that we've listed. Looking at Handcard #1, which is in alphabetical order, please give me the numbers of the activities your school teaches at some time in required physical education. **CIRCLE THE NUMBERS OF ALL THAT APPLY (1-86).**
THEN ASK: Are there any other activities taught in required physical education that aren't listed. **RECORD (87) OTHER.**

CIRCLE TOPIC NUMBERS:

123456789101112

131415161718192021222324

252627282930313233343536

373839404142434445464748

495051525354555657585960

616263646566676869707172

737475767778798081828384

858687 Other (**SPECIFY**):

7. Are students sometimes allowed to choose the content of their required physical education courses?
CHECK THE ONE BEST ANSWER.

- 1 No
- 2 Yes

8. During required physical education courses, how many days per week do students attend class? **DO NOT READ LIST. CHECK THE ONE BEST ANSWER (1-7). IF BOXES 1-6 ARE CHECKED, SKIP TO Q.10. IF BOX 7 IS CHECKED, GO ON TO NEXT QUESTION.**

- 1 One day** **IF BOXES 1-6**
- 2 Two days***ARE CHECKED, SKIP TO Q.10**
- 3 Two days one week/three days the next (alternating)*
- 4 Three days*
- 5 Four days*
- 6 Five days*
- 7 Differs by grade--**GO ON TO NEXT QUESTION**

9. How many days per week do students attend required physical education courses by grade in your school? **CHECK BOX (1-7), AND RECORD NUMBER OF DAYS FOR EACH GRADE THAT TAKES REQUIRED PHYSICAL EDUCATION.**

Days per week

- 1 6th grade _____
- 2 7th _____
- 3 8th _____
- 4 9th _____
- 5 10th _____
- 6 11th _____
- 7 12th _____

10. **HANDCARD #2.** Look at Handcard #2. Can students be exempted or excused from required physical education for any of these reasons? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** For which reasons? **CHECK ALL THAT APPLY ((2-13). RECORD (14) OTHER.**

- 1 No, cannot be exempted or excused
- 2 Parental request
- 3 Student request
- 4 Competency testing
- 5 Cognitive disability
- 6 Physical disability
- 7 Other physical education courses (**SPECIFY**):
- 8 Other academic subjects (**SPECIFY**):
- 9 School activities or clubs (band, chorus, cheerleading, etc.)
- 10 Interscholastic sports practice or training
- 11 Vocational training
- 12 Community service
- 13 Mandated remedial tutoring
- 14 Other (**SPECIFY**):

11. How many students are usually scheduled into a class section of a required physical education course? **RECORD NUMBER OF STUDENTS.**

Number of students per class section: _____

12. **DO NOT ASK THIS QUESTION IF SINGLE-GENDER SCHOOL. CHECK BOX 1, AND SKIP TO Q.14.** In your school's required physical education courses, are boys and girls taught separately or together (coed classes)? **CHECK ALL THAT APPLY (2-3).**

- 1 Not applicable (single-gender school)--**SKIP TO Q.14**

- 2 Taught separately
- 3 Taught together (coed classes)

13. Are any physical education activities taught separately to boys and girls OR taught only to boys or only to girls? **CHECK ALL THAT APPLY (2-4).**

- 1 No
- 2 Yes, topics are taught separately to boys and girls
- 3 Yes, topics are taught only to boys
- 4 Yes, topics are taught only to girls

14. **HANDCARD #3.** Look at Handcard #3. Do any of your required physical education courses include planned lessons on health education topics, such as these, as part of required physical education? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** Which topics are taught? **CHECK ALL THAT APPLY (2-23).** **THEN ASK:** Are other health education topics taught as part of required physical education that aren't listed? **RECORD (24) OTHER.**

- 1 No health education topics are taught
- 2 Alcohol and other drug use prevention
- 3 Community health
- 4 Conflict resolution/Violence prevention
- 5 Consumer health
- 6 C.P.R.
- 7 Death and dying
- 8 Dental and oral health
- 9 Dietary behaviors and nutrition
- 10 Disease prevention and control
- 11 Emotional and mental health
- 12 Environmental health
- 13 First aid
- 14 Growth and development
- 15 HIV prevention
- 16 Human sexuality
- 17 Injury prevention and safety
- 18 Personal health
- 19 Physical activity and fitness
- 20 Pregnancy prevention
- 21 Sexually transmitted disease (STD) prevention
- 22 Suicide prevention
- 23 Tobacco use prevention
- 24 Other (**SPECIFY**):

15.HANDCARD #4. Does your school provide physical education for students with special needs? By special needs, I mean students who have cognitive or physical disabilities or temporary physical limitations. **IF NO, CHECK BOX 1 OR 2 AT TOP OF GRID, AND GO ON TO NEXT QUESTION. IF YES, ASK:** Looking at Handcard #4, please tell me the ways in which physical education is provided for students with (cognitive disabilities, physical disabilities, temporary physical limitations). **WORK ACROSS GRID FOR EACH TYPE OF SPECIAL NEED, AND CHECK ALL THAT APPLY (COLUMNS 1-4) OR (5) DON'T KNOW.** **THEN ASK:** Are there other types of special needs students that receive physical education that aren't listed? **RECORD OTHER, AND CHECK CORRESPONDING COLUMN(S).**

- 1 No students with special needs
- 2 No physical education provided for students with special needs

SPECIAL NEEDS	(1) Separate, adapted classes	(2) Main- streamed into regular classes	(3) One-on-one assistance	(4) Individual therapist or specialist	(5) Don't know
Cognitive disabilities					
Physical disabilities					
Temporary physical limitations					
Other (SPECIFY):					

II.ELECTIVE COURSES

16.Now, I'd like to ask about elective physical education courses. By electives, I mean additional, separate physical education courses that students may choose to take. These courses are not required for graduation or completing school. Does your school teach any elective physical education courses? **CHECK THE ONE BEST ANSWER.**

- 1 No--**SKIP TO Q.20 (Section III)**
- 2 Yes

858687 Other (**SPECIFY**):

19. During the past 12 months, approximately what percent of students took any elective physical education course? **IF NEEDED, SAY:** Please estimate as best you can, but let me know if you feel you can't estimate. **CHECK BOX 1, AND RECORD PERCENTAGE, OR CHECK (2) CAN'T ESTIMATE.**

- 1 Percent of students who took any elective physical education course: _____
- 2 Can't estimate

III. FACILITIES AND RESOURCES

20. **HANDCARD #5.** Now I'd like to ask about your facilities and resources for physical education. Look at the top of Handcard #5, labeled "indoor physical education." What facilities does your school use for indoor physical education? **DO NOT READ LIST. CHECK ALL THAT APPLY (1-9). THEN ASK:** Does your school use other indoor facilities for physical education that aren't listed? **RECORD (10) OTHER.**

- 1 Regular classrooms
- 2 Gymnasium
- 3 Multi-purpose room
- 4 Lunchroom/cafeteria
- 5 Auditorium
- 6 Field house
- 7 Indoor pool
- 8 Weight room
- 9 Wrestling room
- 10 Other (**SPECIFY**):

21. **HANDCARD #5.** Look at the bottom of Handcard #5, labeled "outdoor physical education." What facilities does your school use for outdoor physical education? **DO NOT READ LIST. CHECK ALL THAT APPLY (1-6). THEN ASK:** Does your school use other outdoor facilities for physical education that aren't listed? **RECORD (7) OTHER.**

- 1 Playing field
- 2 Hard top/hard surface area
- 3 Public park
- 4 Pool
- 5 Tennis court
- 6 Track
- 7 Other (**SPECIFY**):

22. Do academic areas in your school have their own yearly budget? **CHECK THE ONE BEST ANSWER (1-3).**

- 1 No
- 2 Yes
- 3 Don't know

23. Does physical education have its own yearly budget? **CHECK THE ONE BEST ANSWER (1-3).**

- 1 No
- 2 Yes
- 3 Don't know

24. What physical education materials and equipment do you need or need more of that you don't currently have? **IF NOTHING, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF MATERIALS AND EQUIPMENT ARE NEEDED, CHECK BOX 2, AND RECORD RESPONSE.**

- 1 Nothing
- 2 Materials and equipment (**SPECIFY**):

IV. STUDENT ASSESSMENT

DO NOT ASK THIS QUESTION IF SCHOOL HAS NO REQUIRED PHYSICAL EDUCATION COURSES. CHECK BOX 1, AND SKIP TO SECTION V. OTHERWISE, SAY: I'd like to ask you a few questions about student assessment.

25. Do students in this school receive a grade in required physical education courses? **CHECK THE ONE BEST ANSWER (1-3).**

- 1 Not applicable--no required physical education courses--**SKIP TO SECTION V**
- 2 No--**SKIP TO SECTION V**
- 3 Yes

26. What type of grading scale is used for required physical education courses? **DO NOT READ LIST. CHECK ALL THAT APPLY (1-5), SINCE DIFFERENT TYPES OF GRADING MAY BE USED IN DIFFERENT COURSES. RECORD (6) OTHER.**

- 1 Numerical averages (based on 100%)
- 2 A, B, C, D, F
- 3 4-point scale (1, 2, 3, 4)
- 4 O, S, N (outstanding, satisfactory, nonsatisfactory)
- 5 Pass/fail

6 Other (**SPECIFY**):

27. Compared to other academic subjects such as math or English, how are students' grades in required physical education counted for academic recognition programs, such as honor role or class rank?
DO NOT READ LIST. CHECK THE ONE BEST ANSWER (1-4). RECORD (5) OTHER OR (6) DON'T KNOW.

- 1 School has no academic recognition programs
- 2 Not counted
- 3 Counted the same as other subjects
 - 4 Counted less than other subjects
 - 5 Other (**SPECIFY**):
 - 6 Don't know

28. If students fail a required physical education course, are they usually required to take the course again? **CHECK THE ONE BEST ANSWER (1-2). RECORD (3) OTHER OR (4) DON'T KNOW.**

- 1 No
 - 2 Yes
- 3 Other (**SPECIFY**):
- 4 Don't know

V. WRITTEN CURRICULAR MATERIALS

Next, I'll be asking about written curricular materials your school uses for physical education. If it will be helpful, please refer to any materials you have available while we talk. **DO NOT PRESS FOR WRITTEN MATERIALS. FOLLOW RESPONDENT'S LEAD TO REFER TO MATERIALS BROUGHT TO INTERVIEW.**

29. Does your school have any written curricular materials in physical education? By written curricular materials, I mean materials such as a curriculum, guidelines, or a framework. **IF NO, CHECK BOX 1, AND SKIP TO Q.35. IF YES, ASK: Who developed the materials your school has? CHECK ALL THAT APPLY (2-4). RECORD (5) OTHER OR (6) DON'T KNOW.**

- 1 No written curricular materials--**SKIP TO Q.35 (Section VI)**
- 2 State
- 3 District/diocese
- 4 School
- 5 Other (**SPECIFY**):
- 6 Don't know

30.**HANDCARD #6.** Look at Handcard #6. Which of these items are included in any of your written curricular physical education materials? **DO NOT READ LIST. CHECK ALL THAT APPLY (1-8). THEN ASK:** Is anything else included in your materials that's not listed? **RECORD (9) OTHER. IF BOX 1 IS CHECKED, GO ON TO NEXT QUESTION. OTHERWISE, SKIP TO Q.32.**

- 1 Goals, objectives, or outcomes--**GO ON TO NEXT QUESTION**
- 2 Scope and sequence chart*
- 3 Subject matter content*
- 4 Lesson plans** **IF BOX 1 IS NOT**
- 5 Learning activities***CHECKED, SKIP TO Q.32**
- 6 Resources*
- 7 Student assessment plans*
- 8 Curriculum evaluation plans*
- 9 Other (**SPECIFY**):*

31.**HANDCARD #7.** I'd like to ask about the type of physical education goals, objectives, or outcomes in your written curricular materials. Looking at Handcard #7, which of these, if any, are included? **CHECK ALL THAT APPLY (1-5). THEN ASK:** Does your school have any other types of written goals, objectives, or outcomes in physical education that aren't listed? **RECORD (6) OTHER.**

- 1 Knowledge about physical activity and the benefits of physical activity
- 2 Positive attitudes toward physical activity
- 3 Skills in sports, games, and other physical activities
- 4 Participation in physical activity
- 5 Fitness levels
- 6 Other (**SPECIFY**):

32.Are teachers expected to use the written curricular materials to plan their daily lessons? **IF NO, CHECK BOX 1, AND SKIP TO Q.35 (Section VI). IF YES, ASK:** Are teachers expected to follow the materials closely or to use them as a guide? **CHECK THE ONE BEST ANSWER (2-3). RECORD (4) OTHER.**

- 1 Not expected to use materials--**SKIP TO Q.35 (Section VI)**
- 2 Yes, follow closely
- 3 Yes, use as a guide
- 4 Other (**SPECIFY**):

33. During the past two years, has anyone followed up with teachers to find out how they are using the written materials? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** Who followed up with the teachers? **DO NOT READ LIST. CHECK ALL THAT APPLY (2-4). RECORD (5) OTHER.**

- 1 No follow-up
- 2 School staff (**SPECIFY**):
- 3 District or diocese education staff
- 4 State education staff
- 5 Other (**SPECIFY**):

34. Do all physical education teachers in your school have their own copy of the materials they are expected to use? **CHECK THE ONE BEST ANSWER (1-3).**

- 1 No
- 2 Yes
- 3 Don't know

VI. PHYSICAL FITNESS AND ACTIVITY

35. Now I'd like to ask about physical fitness and activity. Does your school conduct fitness testing in physical education? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** How many times a year does your school usually test students for fitness? **DO NOT READ LIST. CHECK THE ONE BEST ANSWER (2-5). RECORD (6) OTHER.**

- 1 No fitness testing
- 2 Individual teachers determine their own testing
 - 3 Once
 - 4 Twice
- 5 Don't know
 - 6 Other (**SPECIFY**):

36. During the past 12 months, did your school participate in fitness activities, such as "Jump Rope for Heart" to assist voluntary health organizations? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** Which activities did your school participate in? **READ 2-4 IF NEEDED FOR EXAMPLES. CHECK ALL THAT APPLY (2-4). RECORD (5) OTHER OR (6) DON'T KNOW.**

- 1 No
- 2 Jump Rope for Heart
- 3 March of Dimes Walkathon
- 4 Cystic Fibrosis Bikeathon
- 5 Other (**SPECIFY**):

6 Don't know

37.**HANDCARD #8.** Look at the top of Handcard #8, labeled "at school." During the past 12 months, did your school promote regular physical activity for students at school in ways such as these? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** Which did your school provide? **CHECK ALL THAT APPLY (2-5). THEN ASK:** Did your school promote regular physical activity at school in ways that aren't listed? **RECORD (6) OTHER.**

- 1 None of these at school
- 2 Physical education classes which include continuous exercise lasting 20 or more minutes at least three times per week
- 3 Periodic, in-classroom fitness breaks during the day
- 4 Opportunities for intramural and/or interscholastic sports for all students
- 5 Opportunities for a total of 30 minutes of physical activity from all sources daily
- 6 Other (**SPECIFY**):

38.**HANDCARD #8.** Look at the bottom of Handcard #8, labeled "outside school." During the past 12 months, did your school promote regular physical activity for students outside of school in ways such as these? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** Which did your school provide? **CHECK ALL THAT APPLY (2-4). THAN ASK:** Did your school promote regular physical activity outside of school in ways that aren't listed? **RECORD (5) OTHER.**

- 1 None of these outside school
- 2 Youth sports programs
- 3 Family physical fitness activities after school or on weekends, such as fun runs
- 4 Information on community activity programs
- 5 Other (**SPECIFY**):

VII.COORDINATION AND COLLABORATION

39.Do you have any other school responsibilities besides teaching or coordinating physical education? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** What are your other responsibilities? **DO NOT READ LIST. CHECK ALL THAT APPLY (2-7). RECORD (8) OTHER.**

- 1 No other responsibilities
- 2 Health education teacher
- 3 Teacher in other curricular areas (**SPECIFY**):
- 4 Athletic director
- 5 Coach
- 6 Sponsor of school clubs or student organizations
- 7 Driver's education teacher
- 8 Other (**SPECIFY**):

40.**HANDCARD #9.** Look at Handcard #9. During the past 12 months, have physical education teachers in this school met to coordinate physical education instruction with any of these groups of teachers? For this question, don't count in-service meetings unless they were scheduled specifically for coordinating physical education instruction. **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** Which ones? **CHECK ALL THAT APPLY (2-4). RECORD (5) OTHER.**

- 1 None of these groups
- 2 Yes, other physical education teachers in this school
- 3 Yes, teachers of other subjects in this school
- 4 Yes, physical education teachers from other schools
- 5 Other (**SPECIFY**):

41.**HANDCARD #10.** Look at the top of Handcard #10, labeled "school." During the past two years, have your school's physical education teachers organized physical education-related activities or projects with any of these groups in your school? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-7). THEN ASK:** Were other groups in your school involved that aren't listed? **RECORD (8) OTHER.**

- 1 None of these groups
 - 2 Health education
- 3 School food service
- 4 School health services
- 5 School counseling/psychology
- 6 Parent/teacher or parent/teacher/student organizations
- 7 Other academic classes (**SPECIFY**):
- 8 Other (**SPECIFY**):

42.**HANDCARD #10.** Look at the bottom of Handcard #10, labeled "community." During the past two years, have your school's physical education teachers organized physical education-related activities or projects with any of these groups in your community? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-4). THEN ASK:** Were other groups in your community involved that aren't listed? **RECORD (5) OTHER.**

- 1 None of these groups
- 2 Local health department
- 3 Local hospital
- 4 Voluntary health organizations (ACS, AHA, ALA)(**SPECIFY**):
- 5 Other (**SPECIFY**):

VIII.IMPROVING SCHOOL PHYSICAL EDUCATION

43.**HANDCARD #11.** Look at Handcard #11. During the past two years, has your school evaluated physical education in any of these areas? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-5). THEN ASK:** Did your school evaluate any other areas of physical education that aren't listed? **RECORD (6) OTHER.**

- 1 No evaluation
- 2 School physical education policies
- 3 Written goals, objectives, or outcomes in physical education
- 4 Physical education curriculum
- 5 Staff development/in-service training in physical education
- 6 Other (**SPECIFY**):

44.What would you like to DO, if anything, in physical education that you have NOT been able to do?
IF NOTHING, CHECK BOX 1, AND SKIP TO Q.46. IF WOULD LIKE TO DO, CHECK BOX 2, AND RECORD RESPONSE.

- 1 Nothing--**SKIP TO Q.46 (Section IX)**
- 2 Would like to do (**SPECIFY**):

45.What needs to happen so that you can do these things? **RECORD RESPONSE.**

IX. PROFESSIONAL PREPARATION

My next questions are about your own professional background.

46. How many years, counting this year as a full year, have you been teaching and/or coordinating physical education? **RECORD NUMBER OF YEARS.**

Years: _____

47. How many years, counting this year as a full year, have you been teaching and/or coordinating physical education in this school? **RECORD NUMBER OF YEARS.**

Years: _____

48. Do you currently teach and/or coordinate physical education in any other schools? **CHECK THE ONE BEST ANSWER. IF YES, ASK:** How many other schools? **RECORD NUMBER OF SCHOOLS FOR (2) YES.**

1 No

2 Yes--**NUMBER OF OTHER SCHOOLS:** _____

49. I'd like to ask about your education background and certification or endorsement. **WORK ACROSS COLUMNS 1-4 AT THE TOP OF THE GRID. ASK ABOUT EACH TYPE OF DEGREE OR CERTIFICATION/ENDORSEMENT ONE AT A TIME.** **ASK:** Do you have (a college major, a college minor, a graduate degree or 30 graduate credits, state education agency certification or endorsement)? **IF NO, CHECK "NO" OR "NOT AVAILABLE" IN CORRESPONDING COLUMNS. IF YES, ASK:** In what area(s)? **DO NOT READ LIST. CHECK ALL THAT APPLY IN EACH COLUMN. RECORD OTHER, AND CHECK CORRESPONDING COLUMNS.**

DEGREE OR CERTIFICATION	(1) College major	(2) College minor	(3) Graduate degree or 30 graduate credits	(4) SEA certification or endorsement
	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No <input type="checkbox"/> Not available
Health education <u>AND</u> physical education				
Health education				
Physical education				
Exercise science				
Biology or other science				
Kinesiology				
Recreation				
Social studies				
Public health				
Administration				
Nursing				
Home economics				
Nutrition				
Counseling				
Other (SPECIFY):				

50. **DO NOT ASK THIS QUESTION IF RESPONDENT HAS NO SEA CERTIFICATION/ENDORSEMENT (Q.49, COLUMN 4). GO ON TO NEXT QUESTION. OTHERWISE, ASK:** What levels and grades are you certified or endorsed to teach? **DO NOT READ LIST. SELECT THE ONE BEST ANSWER (1-3). RECORD (4) OTHER.**

- 1 K-12
- 2 Elementary school (SPECIFY GRADES):
- 3 Secondary school (SPECIFY GRADES):
- 4 Other (SPECIFY):

51. **HANDCARD #12.** Look at Handcard #12. During the past two years, have you received four or more hours (at least a half-day) of in-service training on any of these topics? **DO NOT READ LIST. IF NO, CHECK "NO" IN COLUMN 1 IN GRID. OTHERWISE, CHECK COLUMN 1 FOR ALL TOPICS THAT APPLY (1-7). NEXT, ASK:** Which of these topics, if any, would you select as your top three priorities to receive in-service training? These could be different topics or some of the same ones you selected before. **IF NO TOPICS, CHECK "NO" IN COLUMN 2 IN GRID. OTHERWISE, CHECK COLUMN 2 FOR ALL TOPICS THAT APPLY (1-7). THEN ASK:** Are there other topics on which you've received training during the past two years or would like to receive in-service training? **IF YES, RECORD (8) OTHER, AND CHECK COLUMNS 1 AND/OR 2.**

TOPIC	(1) Received training	(2) Would like training
	<input type="checkbox"/> No	<input type="checkbox"/> No
1 Teaching sports or activities		
2 Developing individualized fitness programs		
3 Fitness testing--administration and use		
4 Increasing students' physical activity in physical education class		
5 Increasing students' physical activity outside physical education class		
6 Involving families in physical activity		
7 Staff wellness		
8 Other (SPECIFY):		

52.I'd like your opinion about teaching physical education today. Would you recommend it to teachers starting out? Why or why not? **RECORD RESPONSE.**

X.SCHOOL ATHLETICS

53.Now I'd like to ask about school athletics. Does your school have an intramural sports program? By intramural, I mean sports that are played only among students who attend your school. **CHECK THE ONE BEST ANSWER.**

- 1 No--**SKIP TO Q.55**
2 Yes

54.Approximately, what percentage of boys and what percentage of girls participate in your school's intramural sports program in at least one sport? **RECORD % OF BOYS AND % OF GIRLS, OR CHECK DON'T KNOW.**

Boys: _____% Don't know
Girls: _____% Don't know

55.Does your school have an interscholastic sports program? By interscholastic, I mean sports your students play against students from other schools. **CHECK THE ONE BEST ANSWER.**

- 1 No--**SKIP TO Q.58**
2 Yes

56.Approximately what percentage of boys and what percentage of girls participate in your school's interscholastic sports program in at least one sport? **RECORD % OF BOYS AND % OF GIRLS, OR CHECK DON'T KNOW.**

Boys: _____% Don't know
Girls: _____% Don't know

57.**SHOW HANDCARD #13.** Look at Handcard #13. Does your school have a policy on any of these? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-5). THEN ASK:** Are there other policies such as these your school has developed or adopted? **RECORD (6) OTHER.**

- 1 No policies
- 2 Use of tobacco products by athletes and coaches during school-sponsored sporting events
- 3 Use of steroids by athletes
- 4 Use of alcohol and other drugs by athletes
- 5 Unhealthy weight loss practices by athletes
- 6 Other (**SPECIFY**):

58.Are your school's physical education facilities available beyond regular school hours to students and to the general community? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** Are your facilities available to all students, only students involved in interscholastic sports, and/or the general community? **CHECK ALL THAT APPLY (2-4).**

- 1 No
- 2 Yes, to all students
- 3 Yes, only to students involved in interscholastic sports
- 4 Yes, to the general community

AT END OF INTERVIEW, SAY: Thank you so much for your time talking with me! Your answers will really help us get a feel for what schools like yours are doing and what they need!

HANDCARD #1
PHYSICAL ACTIVITIES

- 1 Archery
- 2 Badminton
- 3 Baseball/softball
- 4 Basketball
- 5 Bicycling
- 6 Bowling/duckpins
- 7 Boxing
- 8 Cageball/crab soccer
- 9 Calisthenics/exercises
- 10 Canoeing/kayaking
- 11 Cheerleading/pom squad
- 12 Climbing ropes/monkey bars
- 13 Croquet/miniature golf

Dance

- 14 Aerobic dance
- 15 Ballet, jazz, or modern dance
- 16 Ballroom (cotillion) dance
- 17 Disco or popular music
- 18 Folk or square dance
- 19 Other vigorous dance

- 20 Diving
- 21 Dodge ball/bombardment
- 22 Fencing
- 23 Field hockey/street hockey
- 24 Fishing
- 25 Football (tackle)
- 26 Football (touch or flag)
- 27 Four-square
- 28 Frisbee
- 29 Golf

Gymnastics

- 30 Apparatus (with equipment)
- 31 Free exercise
- 32 Rhythmic
- 33 Tumbling

- 34 Handball
- 35 Hang gliding
- 36 Hiking/backpacking/camping
- 37 Hopscotch
- 38 Horseback riding

- 39 Horseshoes
- 40 Hunting
- 41 Ice hockey
- 42 Ice skating
- 43 Jogging (distance running)
- 44 Jumping or skipping rope
- 45 Karate/judo/martial arts
- 46 Kickball
- 47 King of the hill/capture the flag
- 48 Lacrosse
- 49 Marching/drills/band
- 50 Marco polo/underwater games
- 51 Paddleball
- 52 Ping pong (table tennis)
- 53 Punchball
- 54 Racquetball
- 55 Red Rover
- 56 Relays
- 57 Riflery/shooting sports
- 58 Rock climbing
- 59 Rollerskating/rollerblading
- 60 Rowing/crew
- 61 Rugby
- 62 Running sprints
- 63 Sailing
- 64 Scuba diving/snorkeling
- 65 Skateboarding
- 66 Skiing (cross country)
- 67 Skiing (downhill)
- 68 Sledding
- 69 Soccer
- 70 Spud
- 71 Squash
- 72 Stickball/whiffleball
- 73 Surfing
- 74 Swimming
- 75 Tag
- 76 Tennis
- 77 Tetherball
- 78 Track and field (not running)
- 79 Tug-of-war
- 80 Volleyball
- 81 Walking quickly
- 82 Water polo
- 83 Waterskiing
- 84 Weightlifting or training
- 85 Wrestling

HANDCARD #2

REASONS FOR BEING EXEMPTED OR EXCUSED

1 Cannot be exempted or excused

2 Parental request

3 Student request

4 Competency testing

5 Cognitive disability

6 Physical disability

7 Other physical education courses

8 Other academic subjects

9 School activities or clubs (band, chorus, cheerleading, etc.)

10 Interscholastic sports practice or training

11 Vocational training

12 Community service

13 Mandated remedial tutoring

HANDCARD #3

HEALTH EDUCATION TOPICS

- 1 No health education topics are taught
- 2 Alcohol and other drug use prevention
- 3 Community health
- 4 Conflict resolution/Violence prevention
- 5 Consumer health
- 6 C.P.R.
- 7 Death and dying
- 8 Dental and oral health
- 9 Dietary behaviors and nutrition
- 10 Disease prevention and control
- 11 Emotional and mental health
- 12 Environmental health
- 13 First aid
- 14 Growth and development
- 15 HIV prevention
- 16 Human sexuality
- 17 Injury prevention and safety
- 18 Personal health
- 19 Physical activity and fitness
- 20 Pregnancy prevention
- 21 Sexually transmitted disease (STD) prevention
- 22 Suicide prevention
- 23 Tobacco use prevention

HANDCARD #4

PHYSICAL EDUCATION FOR STUDENTS WITH SPECIAL NEEDS

SPECIAL NEEDS

1Cognitive disabilities

-Learning disabled

-Developmentally disabled

-Behavior disordered

2Physical disabilities

3Temporary physical limitations

PHYSICAL EDUCATION

1Separate, adapted classes

2Mainstreamed into regular classes

3One-on-one assistance

4Individual therapist or specialist

HANDCARD #5

PHYSICAL EDUCATION FACILITIES

INDOOR PHYSICAL EDUCATION:

- 1 Regular classrooms
 - 2 Gymnasium
 - 3 Multi-purpose room
 - 4 Lunchroom/cafeateria
 - 5 Auditorium
 - 6 Field house
 - 7 Indoor pool
 - 8 Weight room
 - 9 Wrestling room
-

OUTDOOR PHYSICAL EDUCATION:

- 1 Playing field
- 2 Hard top/hard surface area
- 3 Public park
- 4 Pool
- 5 Tennis court
- 6 Track

HANDCARD #6

WRITTEN PHYSICAL EDUCATION CURRICULAR MATERIALS

1Goals, objectives, or outcomes

2Scope and sequence chart

3Subject matter content

4Lesson plans

5Learning activities

6Resources

7Student assessment plans

8Curriculum evaluation plans

HANDCARD #7

TYPES OF GOALS, OBJECTIVES, AND OUTCOMES

- 1 Knowledge about physical activity and the benefits of physical activity
- 2 Positive attitudes toward physical activity
- 3 Skills in sports, games, and other physical activities
- 4 Participation in physical activity
- 5 Fitness levels

HANDCARD #8

PROMOTING REGULAR PHYSICAL ACTIVITY

AT SCHOOL:

- 1None of these at school
 - 2Physical education classes which include continuous exercise lasting 20 or more minutes at least three times per week
 - 3Periodic, in-classroom fitness breaks during the day
 - 4Opportunities for intramural and/or interscholastic sports for all students
 - 5Opportunities for a total of 30 minutes of physical activity from all sources daily
-

OUTSIDE SCHOOL:

- 1None of these outside school
- 2Youth sports programs
- 3Family physical fitness activities after school or on weekends, such as fun runs
- 4Information on community activity programs

HANDCARD #9

COLLABORATION WITH TEACHERS

1 None of these groups

2 Yes, other physical education teachers in this school

3 Yes, teachers of other subjects in this school

4 Yes, physical education teachers from other schools

HANDCARD #10

COLLABORATION WITH SCHOOL AND COMMUNITY

SCHOOL:

1None of these groups

2Health education

3School food service

4School health services

5School counseling/psychology

6Parent/teacher or parent/teacher/student organizations

7Other academic classes

COMMUNITY:

1None of these groups

2Local health department

3Local hospital

4Voluntary health organizations, such as the American Cancer Society,
American Heart Association, or American Lung Association

HANDCARD #11

EVALUATION OF PHYSICAL EDUCATION

1 No evaluation

2 School physical education policies

3 Written goals, objectives, or outcomes in physical education

4 Physical education curriculum

5 Staff development/in-service training in physical education

HANDCARD #12

IN-SERVICE IN PHYSICAL EDUCATION

1 Teaching sports or activities

2 Developing individualized fitness programs

3 Fitness testing--administration and use

4 Increasing students' physical activity in physical education class

5 Increasing students' physical activity outside physical education class

6 Involving families in physical activity

7 Staff wellness

HANDCARD #13

SCHOOL ATHLETIC POLICIES

1 No policies

2 Use of tobacco products by athletes and coaches during school-sponsored sporting events

3 Use of steroids by athletes

4 Use of alcohol and other drugs by athletes

5 Unhealthy weight loss practices among athletes