

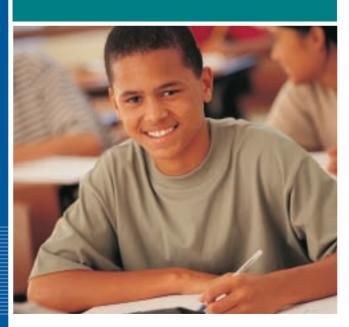




STUDENT WELLNESS: A HEALTHY FOOD AND PHYSICAL ACTIVITY POLICY RESOURCE GUIDE

updated April 2006

Includes local wellness policy resources









Student Wellness: A Healthy Food and Physical Activity Policy Resource Guide

Produced by

California School Boards Association

and

California Project LEAN (Leaders Encouraging Activity and Nutrition)

2006

Copies of the Guide are available for \$20. To order, contact:

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Preface

In 2000, the California School Boards Association entered into a partnership with California Project LEAN (Leaders Encouraging Activity and Nutrition) to educate school board members on the critical link between nutrition, physical activity, health and academic achievement, and to provide districts or school board members with tools and sample policies to support a healthy school environment. The result was the 2003 publication of the "Healthy Food Policy Resource Guide." This "Student Wellness: A Healthy Food and Physical Activity Policy Resource Guide" is a revised and expanded version of the "Healthy Food Policy Resource Guide." It includes new information on local wellness and physical activity resources, sample policies, case studies and fact sheets.

Invaluable to the development of the "Healthy Food Policy Resource Guide" was the participation of CSBA's Children's Health Task Force. The task force was chaired by CSBA Past President Marilyn Buchi, and included the following board members:

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Updates to "Student Wellness: Healthy Food and Physical Activity Policy Resource Guide" can be found at www.csba.org/ps/hf.htm or at www.CaliforniaProjectLEAN.org.





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I. Introduction

The primary responsibility of schools is to foster academic achievement. Schools do this by providing a high-quality instructional program, but also by paying attention to the needs of the whole child that influence academic achievement. Student health has a tremendous impact on student learning. This chapter provides evidence of the link between nutrition, physical activity and academic achievement; presents statistics on student health; and examines the implications of these findings for schools. It is clear that schools can better prepare students to learn by helping them develop and practice healthy eating and physical activity habits.

The Surgeon General's 2001 "Call to Action to Prevent and Decrease Overweight and Obesity" encourages changing the school environment as a key to help address the national health challenge. The report recommends approaches in schools that extend beyond education to include school policy, the school physical and social environment, and links among schools, families and communities.

IMPACT OF NUTRITION ON ACADEMIC ACHIEVEMENT

"Even during difficult budget times, nutrition and fitness should be a priority for all schools and districts. Our schools have an exceptional opportunity to guide our children toward healthier lifestyles."

— Jack O'Connell State Superintendent of Public Instruction

Nutrition is an essential first step toward a student's readiness to learn. Healthy, well-nourished children are more prepared to learn, more likely to attend school and class, and better able to take advantage of educational opportunities. Inadequate nutrition during childhood can have a detrimental effect on children's cognitive development and on productivity in adulthood.² Recent research provides compelling evidence that:

Chronically undernourished children attain lower scores on standardized achievement tests, are more irritable, have difficulty concentrating and have

- lower energy levels. Undernourished students have less ability to resist infection and are more likely to become sick, and therefore miss school, resulting in reduced revenues to schools.³
- ➤ Undernourishment impacts the behavior of children, their school performance and their ability to concentrate and perform complex tasks.⁴
- Children's brain function is diminished by short-term or periodic hunger or malnutrition caused by missing or skipping meals.⁵
- ➤ Inadequate consumption of key food groups deprives children of essential vitamins, minerals, fats and proteins that are necessary for optimal cognitive function.⁶
- ➤ Low protein intake has been associated with lower achievement scores.⁷
- ➤ Iron deficiency is one of the most prevalent nutritional problems of children in the United States. Iron deficiency can increase fatigue, shorten attention span, decrease work capacity, reduce resistance to infection, and impair intellectual performance. Consequently, anemic children tend to do poorly on vocabulary, reading and other tests.⁸

Furthermore, research shows a direct relationship between a nutritious breakfast and educational achievement. Studies have repeatedly demonstrated that breakfast at school not only enhances learning, but also reduces tardiness and improves daily attendance. Some important research findings indicate:

- Students who eat breakfast show a general increase in math grades and reading scores, increased attention, reduced nurse visits and improved behaviors.⁹
- ➤ Children who begin their school day without breakfast pay less attention in the late morning, have a negative attitude toward schoolwork and attain less in class.¹⁰
- ➤ Increases in participation in the School Breakfast
 Program are associated with increases in academic
 test scores, daily attendance, class participation and
 reductions in tardiness and absenteeism.¹¹
- ➤ When children eat a well-balanced meal, such as a school breakfast, they have higher sustained energy levels than children who select foods from only one or two food groups that are often high in sugar or fat.¹²

"The challenge now is to incorporate this new knowledge into programs and policies which improve the nutritional status and cognitive development of our youngsters."

> —Ernesto Pollitt, Ph.D., Professor of Pediatrics, University of California, Davis

IMPACT OF PHYSICAL ACTIVITY ON ACADEMIC ACHIEVEMENT

Physical activity can also have a positive impact on student achievement. Physical activity is important because it plays a role in creating an optimal learning condition for the brain. Studies suggest a connection between physical activity and increased levels of alertness, mental function and learning. Research also indicates that physical activity increases blood flow to the brain, which allows more oxygen and glucose to flow through the brain, and releases endorphins, which have a positive impact on mood. A recent study found that California schools with high percentages of students who do not routinely engage in physical activity and healthy eating habits had smaller gains in test scores than did other schools.¹³ Some additional research indicates that:

- ➤ Schools that offer intense physical activity programs see positive effects on academic achievement. These include increased concentration, improved mathematics, reading and writing test scores, and reduced disruptive behavior, even when time for physical education classes reduces the time for academics.¹⁴
- ➤ Providing more opportunity for physical activity leads to increased test scores. In one program, redirecting 240 minutes per week from class time for academics to physical activity led to higher mathematics scores.¹⁵
- ➤ A review of results from nearly 200 studies including adults and children found that physical activity supports learning.¹⁶
- ➤ Students participating in daily physical education exhibit better attendance, a more positive attitude towards school and superior academic performance.¹⁷
- ➤ Moderate physical activity has a positive effect on immune function. Coupled with good nutrition, it can help prevent colds and the flu, two of the most common childhood ailments.¹⁸

- ➤ Higher achievement is associated with higher levels of fitness for fifth-, seventh- and ninth-graders. Females demonstrated higher achievement levels than males, particularly at higher fitness levels.¹⁹
- ➤ The relationship between academic achievement and fitness is greater in mathematics than in reading, particularly at higher fitness levels.²⁰

"Studies indicate important links between nutrition, physical activity and academic achievement. Healthy kids make better students. School board members are uniquely positioned to take powerful leadership roles in this effort."

—William Potts-Datema, M.S., Director, Partnerships for Children's Health, Harvard School of Public Health

IMPACT ON PHYSICAL, SOCIAL AND EMOTIONAL HEALTH

Chronic Illnesses

"We like to think of ourselves as a youthful nation focused on healthy lifestyles, but behind this image is a troubling reality — a generation of young people that is in large measure inactive, unfit, eating poorly, and at an alarming rate, becoming obese. CDC is committed to working with health partners to foster healthy behaviors to help reduce the burden of obesity in our nation."

—Dr. Julie Gerberding, M.D., M.P.H., Director Centers for Disease Control and Prevention

The general health of children and youth is at risk, in part, due to poor nutrition and inadequate physical activity. For the first time in two centuries, the current generation of children in America may have shorter life expectancies than their parents due to the rapid rise in childhood obesity.²¹ Obesity is associated with 112,000 annual excess adult deaths in the United States.²² Two-thirds of all deaths in California result from four nutrition/fitness-related chronic diseases: heart disease, cancer, stroke and diabetes.

An increase in type 2 diabetes among children has paralleled the rising rates of obesity.²³ As many as 30,000

children have non-insulin-dependent diabetes that was once limited to adults.²⁴ One in three children born in 2000, and half of all children of color, are expected to develop type 2 diabetes during their lifetime.²⁵ Being overweight can trigger or exacerbate a variety of chronic medical conditions in school-aged children, including asthma, joint problems, type 2 diabetes, high blood pressure, high cholesterol, depression/anxiety and sleep apnea.²⁶

Risk factors for chronic diseases often are developed in childhood. For example, approximately 60 percent of obese children ages 5-10 years have at least one risk factor for cardiovascular disease, such as elevated total cholesterol, triglycerides, insulin or blood pressure; 25 percent have two or more risk factors.²⁷

Because chronic illnesses in adulthood result from habits acquired early in life, one of the most effective ways to prevent chronic diseases is to establish policies and programs that encourage children and adolescents to develop and sustain healthy eating and physical activity habits that they can maintain throughout their lives.

Increased Risk for Osteoporosis

When children and adolescents replace milk with soft drinks, they consume fewer valuable nutrients such as calcium and vitamin D, which are needed for bone development and can help to prevent osteoporosis (porous bones). According to the United States Department of Agriculture, per-capita soft drink consumption has increased almost 500 percent over the past 50 years.²⁸ This is important because by the age of 17, approximately 90 percent of children's bone mass has been established.²⁹ Weight-bearing exercise and the consumption of calciumrich foods during childhood and adolescence are critical to ensure peak bone mass and reduce the risk of osteoporosis later in life. Since prevention occurs by reaching optimal bone mass during adolescence, it is not possible to make up any deficiencies later in life.

Dental Caries

More than 51 million hours of school time are lost every year because of dental-related illnesses.³⁰ If left untreated, dental disease in childhood can and does result

in acute infections, dental pain and tooth loss. This not only affects time in class, but also the ability to remain alert and engaged while in a learning environment. Poor oral health has been related to decreased school performance, poor social relationships and less success later in life.³¹

Dental caries affect over 50 percent of youth ages 5-17. Frequent exposure to sugar-sweetened soft drinks and candy increases risk for and severity of tooth decay, according to the American Dental Association. Americans consume the equivalent of 20 to 33 teaspoons of sugar per person per day; about 30 percent of it is in soft drinks. Dental caries are the single most common chronic childhood disease and are five times more common than asthma.³²

Social and Emotional Health

In addition to the health risks associated with overweight and obesity, research also indicates a higher than anticipated impact on self-esteem and quality of life. A recent study reported in the Journal of the American Medical Association found that emotional and social well-being decreases as soon as a child's weight rises above average; the results are not limited to severely obese children.³³

Effects of obesity on emotional health include lower selfesteem, negative body image and depression. Social health impacts include stigma, negative stereotyping, discrimination, teasing and bullying, and social marginalization.³⁴

The psychological stress of social stigmatization imposed on obese children may be just as damaging as the medical morbidities. Severely obese children exhibit a quality of life as bad as that of children undergoing chemotherapy.^{35,36}

EXTENT OF THE PROBLEM

Poor Nutrition

Today's students generally fail to meet the Dietary Guidelines for Americans which recommend that children two years and older eat a diet consisting of nutrient-dense foods. This includes eating foods that are low in fat, sugar and sodium, eating a variety of fruits, vegetables and whole grains, and consuming fat-free or low-fat milk or milk products. Alarming patterns that can harm

- ➤ About 25 percent of the food that adolescents eat is considered to be junk food, such as deep-fried food, desserts, regular soft drinks, candy, cookies, pies and cakes.³⁷
- ➤ Females ages 9-19 do not meet the recommended intake for calcium, with only about one in 10 consuming the recommended number of daily servings of milk products.³⁸
- ➤ Fewer than half of California's children and adolescents (47 and 40 percent, respectively) meet the California Department of Health Services' goal of consuming five or more fruits or vegetables per day.³⁹
- ➤ A California study found that only 2 percent of teenagers met five key diet and physical activity recommendations.⁴⁰
- ➤ Soda consumption has almost doubled in the last 20 years.⁴¹

Declining Physical Activity

Physical inactivity among youth can cause short-term consequences such as high blood pressure, poor self-esteem, increased anxiety, stress and depression.⁴² It is also linked with long-term health consequences including obesity, cardiovascular disease, diabetes and colon cancer.

The 2005 Dietary Guidelines for Americans recommend that children two years and older be physically active at least one hour each day on most, but preferably all days of the week. However, children are less physically active than ever. Research indicates that:

- Only 29 percent of adolescents report getting the recommended minimum of one hour of physical activity per day.⁴³
- ➤ Children ages 9-11 spend an average of 152 minutes over 10 days engaged in physical education versus the California state-mandated 200 minutes.⁴⁴
- ➤ Participation in all types of physical activity declines as age or grade in school increases.⁴⁵ Also see Figure 1.
- ➤ Eight percent of elementary schools, 6 percent of middle/junior high schools and 6 percent of senior high schools across the nation provide daily physical education or its equivalent for the entire school year for students in all grades in the school.⁴⁶

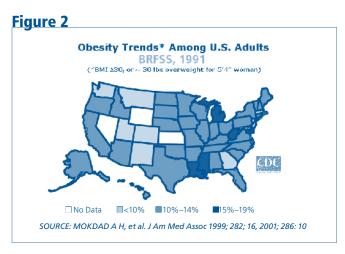
- ➤ Among California children in grades five, seven and nine who were tested with the state's mandated physical fitness test in 2004, 73 percent failed to meet the state's minimum fitness standards for all six areas of the test. Only about half met the minimum standard for aerobic capacity.⁴⁷
- ➤ Nearly 40 percent of California children are not physically fit.⁴⁸
- ➤ Only 63 percent of California adolescents report any vigorous activity in the previous month. Males participate in vigorous physical activities at higher levels than females (70 percent and 56 percent, respectively).⁴⁹

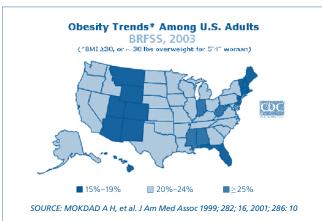
Overweight/Obesity

Figure 2 shows the obesity trends among U.S. adults in 1991 and 2003. In California, 10-14 percent of the population was obese in 1991. In 2003, California obesity rates had risen to 20-24 percent.⁵⁰ Physical inactivity, obesity, and overweight cost California more than \$21.7 billion in medical care.⁵¹

Continuing increases in the number of overweight children and adolescents are of public concern. Nationally, an estimated 16 percent of children and adolescents ages 6-19 years were classified as overweight in 1999-2002, a 45 percent increase over the previous reporting period (11 percent in 1988-1994); another 15 percent are at risk of becoming overweight based on their BMI.^{52,53} Over the past three decades, the childhood obesity rate has more than doubled for preschool children aged 2-5 years and adolescents aged 12-19 years, and it has more than tripled for children aged 6-11 years. Nine million







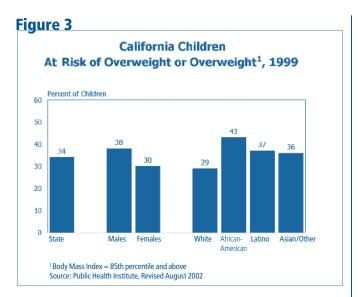
children over the age of 6 were considered obese.54

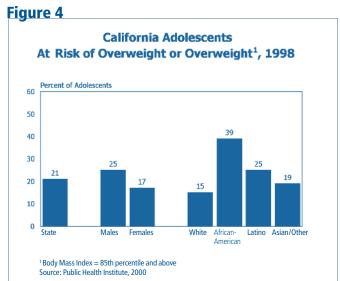
The trend in California is similar. One 2002 study found that more than one quarter of California's children are overweight. ⁵⁵ California Department of Health Services' surveys indicate that as many as 34 percent of children ages 9-11 years and 21 percent of 12-17 year olds are overweight or at risk for overweight (see Figures 3 and 4). ⁵⁶ Other findings indicate:

- ➤ Latino adolescents were most likely to be overweight.

 More than one out of three Latino adolescents in

 California were overweight or at risk for overweight.⁵⁷
- ➤ Approximately one-third of overweight preschool children and about half of overweight school-aged children become overweight adults.⁵⁸
- ➤ Consumption of sugar-sweetened beverages, such as soda and fruit-flavored drinks, is associated with obesity in children.⁵⁹





For a person already meeting his/her caloric need, one regular 20-ounce soda (250 calories) every day can translate into an extra 27 pounds of weight per year. For a 120-pound adolescent who has a healthy diet and exercises regularly, it would take two hours of moderate walking to burn off the extra calories for each soda consumed.

"Decreasing soda consumption is one of the most promising strategies for preventing obesity."

—University California Berkeley, Center for Weight and Health⁶⁰

IMPLICATIONS FOR SCHOOLS

A Field Research Corporation study released in 2004 showed that nearly all Californians (92 percent) believe the problem of childhood obesity is serious. Two out of three Californians surveyed believe the best way to address the crisis is through a community approach, such as improvements in school health environments.61 A report from a national organization, Action for Healthy Kids, states that emerging research suggests an association between weight problems and lower academic achievement are likely due to increased absenteeism. If children miss just one day per month, an average size California school district could potentially lose \$160,000 per year.⁶² To better prepare students to learn, schools should provide education and an environment that give students the skills, opportunities and encouragement they need to adopt healthy lifestyles. This requires more than educating youth on the importance of eating healthy foods and being physically active. Students cannot practice what they learn if they are offered mostly foods and beverages high in fat and sugar, and little opportunity to be physically active. Schools also play a significant role in feeding children and thus contribute to the acquisition of lifetime dietary habits.63

"The prevalence of high-fat and sugary foods in students' lives outside of school doesn't negate the positive effects schools can make. CATCH, Food on the Run, SPARK, and other school-based nutrition and physical activity programs have shown behavior and physiological improvement."

> —Howard Taras, M.D., Chair, Committee on School Health, American Academy of Pediatrics

School Meals

Schools can enhance the quality of students' diets by offering and promoting a nutritious school breakfast. Research suggests that the availability of meal programs in public schools throughout the academic year increases the probability that children will eat breakfast and improve their educational standing.⁶⁴

In 2003-04, about 15 percent of California's nearly 6.3 million school-age students ate a school breakfast. During

the 2003-04 school year, 83 percent of schools in California offered a school breakfast program. The 17 percent of schools that did not offer breakfast represent over 1,283 schools. This equates to 145,656 students who were eligible for free and reduced-price meals who attended schools that did not offer breakfast.⁶⁵

Many schools realize the relationship between breakfast and higher achievement on standardized tests and offer nutritious meals to students on test days. However, nutritious meals served daily can contribute to learning year-round.

Participation in school lunch programs is much higher: More than 2.8 million of California's K-12 students (45 percent) participate in the National School Lunch Program.⁶⁶

The quality of these school meal programs is improving. According to the California Department of Education's 1998-2003 survey on schools' implementation of the United States Dietary Guidelines for Americans, about half of the school menus analyzed met the federal standard that lunches have no more than 30 percent of calories coming from fat.⁶⁷ More meals at school need to meet school meal nutritional standards. Students who eat lunches provided by their schools consume more fruits, vegetables and calcium, and less sugar and soda than other students. Girls from lowincome families who consume a lunch provided by their school are less likely to be overweight than girls who do not eat school lunch.⁶⁸

A La Carte Foods and Beverages

Unfortunately, many students do not eat the school breakfast or lunch and purchase other a la carte foods and beverages, sometimes known as "competitive foods," that are not part of the school meal program and are not required to meet nutrition standards. These competitive foods offered in school vending machines, snack bars, stores, and as fundraisers tend to be high in fat, added sugar and calories, while low in nutrients. These foods may be sold by the food service department, as well as by many different entities including the Associated Student Body, Parent Teacher Association, athletics department, or individuals and teachers.

These unhealthy foods compete with the school meal program, causing schools to lose potential revenues from

federal meal reimbursements as part of the National School Lunch and Breakfast Programs. A study from U.C. Berkeley showed that the greatest meal revenue increases were seen in sites that completely eliminated a la carte food sales, provided that the menu items meet a reasonable standard of quality and appeal.⁶⁹ Additional findings indicate that if reimbursable meals compete with non-food service sales, then food service can still improve revenues significantly provided that: (1) all non-food service venues are compliant with food standards in SB 19 (Chapter 913, Statutes of 2001), (2) a la carte sales are eliminated, (3) menu offerings are appealing, and (4) facilities and time are adequate to meet student meal needs.⁷⁰

Additionally, the readily available access of unhealthy foods conflicts with lessons taught in health and nutrition curricula. It is important to develop a school policy that sets nutrition standards for all foods sold on campus.

The California Fast Food Survey and School Health Policies and Programs Survey found a high prevalence of fast foods versus healthy options offered to students at school outside of the child nutrition program. Ninety-five percent of responding districts reported selling fast food as a la carte items.⁷¹ Additionally, a study by the Public Health Institute found that district beverage contracts contain provisions that limit school district control over the beverages sold at school, directly affecting students' nutritional choices.⁷²

Physical Activity and Physical Education

Schools have a powerful role in influencing students' physical activity behaviors. When developing physical activity programs for youth, physical education curricula should be developmentally appropriate and give students the knowledge, motivation, skills and confidence needed for lifelong physical activity. Children and adolescents should be provided with enjoyable experiences that build self-efficacy; provide significant amounts of physical activity; and promote cognitive learning related to lifelong participation in physical activity. Depending on the intensity of physical activity, a minimum time per day ranges from 15 to 45 minutes, and increasing the frequency, intensity and time of the activity can bring even more health benefits.⁷³

Schools have a unique opportunity to teach students about the value of fitness, while providing them with adequate time, space and facilities to be physically active on a daily basis in physical education classes, recess periods and before- and after-school programs. Schools can provide multiple opportunities for students to practice physical activity through participation not only in physical education class, but through intramural programs, sports and recreation clubs, interscholastic athletics, and links with community-based sports and recreation programs.

Schools can also implement programs and policies to support walking or biking to school. Schools should provide a concrete plan to ensure students' needs for regular physical activity will be met throughout the school year. This plan should ensure that all students in designated grades will participate in the mandated health-related fitness test during the designated testing months.⁷⁴

What Do School Board Members Think?

A California survey found that a majority of school board members believe policies supporting good nutrition on school campuses can contribute to the reduction of student cancer and heart disease risks in the future (70 percent) and the reduction of the number of overweight and obese students (62 percent); while physical activity related policies can contribute to the reduction of student cancer (50 percent), diabetes (68 percent) and heart disease (71 percent) in the future. A majority (75 percent) believed physical activity on a daily basis can contribute to the reduction of overweight and obese students. The most frequently reported barriers to healthier eating at school were student preferences and impact of the food program on the budget, while barriers to physical activity at school were budgets and academic requirements.⁷⁵ School board members support providing healthy food options in schools (i.e., fruits, vegetables, low-fat milk), establishing minimum nutritional standards for fast foods sold in school, and limiting and monitoring food and soda advertisements in school. They were more supportive of banning a la carte food sales and fast food sales in 2004 than in 2001.76

Tracking of school district policies in 2004 by California Project LEAN found that more than 10 percent of California school districts maintaining at least one high school have developed or are developing healthier nutrition policies.⁷⁷ A 2004 national online survey found that schools had taken a number of actions to improve student nutrition, including changing lunch menus/choices (47 percent), changing vending machine selections (30 percent) and reducing access to vending machines (30 percent). Few had removed vending machines (8 percent) or established longer lunch periods (5 percent).⁷⁸ In the same study, schools most frequently reported that they were promoting walking or biking to school (35 percent), making changes in the physical education curriculum (31 percent), increasing sports teams or intramural activities (23 percent), increasing recess time (13 percent) and increasing physical education time (12 percent).⁷⁹

Summary and Recommendations

The Institute of Medicine's Committee on Comprehensive School Health recommends that school meal programs serve as a learning laboratory for developing healthful eating habits and not be placed in a profit-making or competitive situation with other food options in school.80 Schools can model healthy eating by limiting the sale of fast foods and snack foods and encouraging greater consumption of fruits and vegetables. Healthy food choices should be made available to children in all school-related settings, including vending machines, school stores, snack bars, fundraising activities and other school events. School policy must provide adequate time for students to consume meals, pleasant dining room environments with minimal conflicting activities, and supervising adults who are trained in the basic knowledge of nutrition and how to sensitively assist children during mealtime.

IOM also recommends that schools improve the extent and nature of the physical activity opportunities that are offered so that students can attain the recommended amount of daily physical activity while in school. Schools should expand the physical activity opportunities available through school, including intramural and interscholastic sports programs and other physical activity clubs, programs and lessons that meet the needs and interests of all students. Additionally, schools should develop policies and programs that encourage active ways of getting between school and home, such as walking and biking.⁸¹

The American Academy of Pediatrics encourages school administrators to work with pediatricians and others in the community on ways to decrease the availability of foods and beverages with little nutritional value and to decrease the dependence on vending machines, snack bars, and school stores for school revenue. Additionally, AAP recommends a districtwide school policy that restricts the sale of soft drinks to safeguard against health problems as a result of overconsumption.⁸² Regarding physical activity, AAP recommends physical education programs that emphasize and model learning of daily activities for personal fitness (as opposed to physical education limited to a few team sports).⁸³

"Many schools are meeting the challenge.

While remaining financially sound, schools are offering healthy, appealing foods for students.

Many schools have also integrated unique physical activity opportunities for students, such as dancing and martial arts."

— Peggy Agron, M.A., R.D., Chief, California Project LEAN, California Department of Health Services

REFERENCES

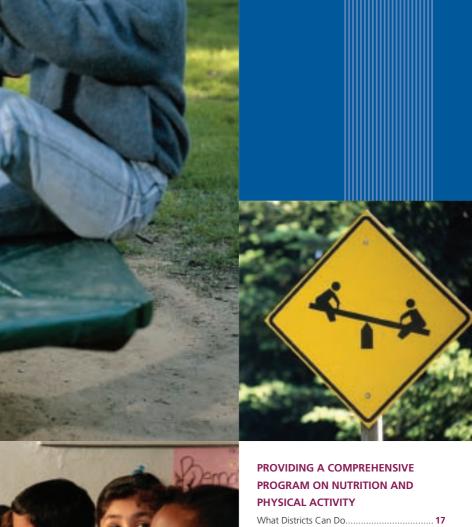
- **1.** "Schools Chief O'Connell issues the Superintendent's Challenge," California Department of Education, Press Release, May 22, 2003.
- **2.** Tufts University, Center on Hunger, Poverty, and Nutrition Policy, *Statement on the Link Between Nutrition and Cognitive Development in Children*, Tufts University, Medford, MA, 1994.
- 3. Position of American Dietetics Association, 2004.
- **4.** Tufts University, Center on Hunger, Poverty, and Nutrition Policy, *Statement on the Link Between Nutrition and Cognitive Development in Children*, Tufts University, Medford, MA, 1994.
- **5.** Pollitt, E., "Does breakfast make a difference in school?" *Journal of the American Dietetic Association*, 1995, 95(10): 1134-1139.
- **6.** Nutrition and Cognitive Development in Children. Policy Statement. Medford, MA: Tufts University of School and Nutrition; 1995. Tufts University, Center on Hunger, Poverty, and Nutrition Policy, Statement on the Link Between Nutrition and Cognitive Development in Children, Tufts University, Medford, MA, 1995.
- **7.** American School Food Service Association (ASFSA). "Impact of hunger and malnutrition on student achievement." *School Board Food Service Research Review* 1989 (1,Spring): 17-21.
- **8.** Troccoli, K.B., "Eat to Learn, Learn to Eat: The Link Between Nutrition and Learning in Children," National Health/Education Consortium, Washington, DC, 1993. A summary appears in: ERIC Clearinghouse on Elementary and Early Childhood Education, "Children's nutrition and learning," *ERIC Digest*, Urbana, IL, ED369579, June 1994. See also Murphy, J., Pagano, M., Nachmani, J., Sperling, P., Kane, S., and Kleinman, R., "The relationship of school breakfast to psychosocial and academic functioning," *Archives of Pediatric Adolescent Medicine*, 1998, 152, 899-907.
- **9.** Minnesota Department of Children, Families and Learning, "School Breakfast Programs Energizing the Classroom," St. Paul, MN:1998.
- **10.** Public Media Center and California Food Policy Advocates, "Breakfast First, Food for Hungry Minds," 1998.
- **11.** Meyers, A.F., et al., "School breakfast program and school performance," American Journal of Diseases of Children, 1989, 143: 1234-1239. See also Powell CA, et al. "Nutrition and Education: A randomized Trial of the Effects of Rural Primary School Children," American Journal of Clinical Nutrition 68(4):873-79. National Governors Association (NGA) Center for Best Practices. "Improving Performance by Meeting Student Health Needs," October 13, 2000, p. 2. Murphy JM, et al. "The relationship of school breakfast to psychosocial and academic functioning: cross-sectional and longitudinal observations in an inner-city school sample," Arch Pediatr Adolesc Med. 1998; 152:899-907. Hanson TL, Austin GA. "Students, health risks, resilience, and the Academic Performance in California," (California Healthy Kids Survey Factsheet 1). WestEd. Los Alamitos, CA: 2002. Kieinman RE, etal. "Diet, breakfast and academic performance in children," Ann Nutrition Metab 2002; 46(suppl 1):24-30. Pollitt, E., "Does breakfast make a difference in school?" Journal of the American Dietetic Association, 1995,

- 95(10): 1134-1139. Minnesota Department of Children, Families and Learning, "School Breakfast Programs Energizing the Classroom," St. Paul, MN: 1998.
- **12.** Child Nutrition and Food Distribution Division, California Department of Education, and Child Nutrition Section, "Better Breakfast, Better Learning," Washington State Office of Superintendent of Public Instruction, 1994.
- **13.** Hanson, T.L. and Austin, G.A. (2003). "Are Student Health Risks and Low Resilience Assets and Impediment to the Academic Progress of Schools?" (California Healthy Kids Survey Fact sheet 3). Los Alamitos, CA: WestEd.
- **14.** Symons, C.W., Cinelli, B., James, T.C., and Groff, P., "Bridging student health risks and academic achievement through comprehensive school health programs," *Journal of School Health* 1997, 67(6): 220-227. See also Kolbe, L.J., Green, L., Foreyt, J., et al., "Appropriate functions of health education in schools: Improving health and cognitive performance," In Krairweer, N., Arasteli, J., and Cataldo, M., Eds., *Child Health Behavior: A Behavioral Pediatrics Perspective*, New York, NY: John Wiley, 1986.
- **15.** Sallis, J.F., et al., "Effects of health-related physical education on academic achievement: Project SPARK," *Research Quarterly for Exercise and Sport*, 1999, 70(2): 127-134. See also Shephard, R.J., "Curricular physical activity and academic performance," *Pediatric Exercise Science*, 1997, 9: 113-126; and Shepard, R.J., Volle, M., Lavallee, H., LaBarre, R., Jequier, J.C., and Rajic, M., "Required physical activity and academic grades: A controlled longitudinal study," *Children and Sport*, Llmarinen and Valimaki, Eds., Springer Verlag, Berlin, 1984, 58-63.
- **16.** Etnier Jl, Salazaw W, Landers DM, Petreuzzello SJ, Han M, Nowell P. "The influence of physical fitness and exercise upon cognitive functioning: a meta-analysis.," *Journal of Sport and Exercise Physiology.* 1997; 19(3):249-77.
- **17.** National Association for Sport and Physical Education/ Council of Physical Education for Children, "Physical education is critical to a complete education." 2001.
- **18.** President's Council on Physical Fitness and Sports, June 2001 *Research Digest*, Series 3, No. 13, " Does Exercise Alter Immune Function and Respiratory Infections?"
- **19.** California Department of Education. April 2005. "California Physical Fitness Test: A Study of the Relationship Between Physical Fitness and Academic Achievement in California Using 2004 Test Results." Sacramento, CA. http://www.cde.ca.gov/ta/tg/pf/documents/2004pftresults.doc.
- **20.** California Department of Education, "The Relationship Between Physical Fitness and Academic Achievement," *2001 PFT/SAT-9 Study*, Sacramento, CA, 2002.
- **21.** Ludwig, D. New England Journal of Medicine. 2005.
- **22.** Flegal KM, Graubard BI, Williamson DF, Gail MH. *Journal of American Medical Association*. 2005; 293:1861-7.
- **23.** Rosenbaum, A.L., Joe, J.R., and Winter, W.R., "Emerging epidemic of type 2 diabetes in youth," *Diabetes Care*, 1999, 2292: 345-354. See also American Diabetic Association, "Type 2 diabetes in children and adolescents," *Diabetes*, March 2000, 23(3): 381-389.

- **24.** Unpublished data from the Centers for Disease Control and Prevention, April 2002.
- **25.** Venkat Narayan KM Boyle JP et al. *Journal of Medical Association*. 2003;290:1884-1890.
- **26.** Must A, Spadano J, Coakley E, Field A, Colditz G, Dietz W. "The disease burden associated with overweight and obesity." *JAMA*. October 1999; 282(16):1523-1529. See also: HIHC-MFoundation 2004. USDHHS 2001.
- **27.** *Journal of American Medical Association.* "Health related quality of life of severely obese children and adolescents." 2003, 289.
- **28.** Ludwig, D.S., Peterson, K.E., and Gortmaker, S., "Relationship between consumption of sugar-sweetened drinks and childhood obesity: A prospective, observational analysis," Lancet, 2001, 357: 505-508.
- **29.** U.S. Department of Health and Human Services, National Institutes of Health, National Institute of Child Health and Human Development, Childhood and Adolescent Nutrition: "Why Milk Matters Now for Children and Teens, Washington, DC, May 1998.
- **30.** "The Oral Health of California's Children: A Neglected Epidemic," www.dentalhealthfoundation.org/topics/children.
- **31.** Ibid.
- **32.** "Report Supports American Dental Association's Stance on Certain School Soft Drink Contracts," American Dental Association, December 2001, www.ada.org.
- **33.** Williams, J., *Journal of the American Medical Association*, January 5, 2005, 293: 70-76.
- **34.** Institute of Medicine, "Preventing Childhood Obesity: Health in the Balance," 2005.
- **35.** American Academy of Pediatrics. "Policy statement on prevention of pediatric overweight and obesity." 2003.
- **36.** *Journal of American Medical Association*. "Health related quality of life of severely obese children and adolescents." 2003, 289.
- **37.** Meredith, C.N., and Dwyer, J.T., "Nutrition and exercise: Effects on adolescent health," *Annual Review of Public Health*, 1991, 12: 309-333.
- **38.** Crane, N.T., "National nutrition objectives and the dietary guidelines for Americans," *Nutrition Today*, March-April 1998.
- **39.** California Department of Health Services, "Health of California's Adults, Adolescents, and Children: Findings from CHIS 2001," Sacramento, May 2004.
- **40.** Foerster, S.B., Fierro, M.P., Gregson, J., Hudes, M., Oppen, M., and Sugerman, S., 1998 "California Teens Eating and Exercise Nutrition Survey."
- **41.** USDA Continuing Survey of Food Intake by Individuals, 1977-1996.
- **42.** Foerster, S.B., Fierro, M.P., Gregson, J., Hudes, J. Oppen, M., and Sugarman, S. 1998 "California Teens Eating and Exercise Nutrition Survey."
- **43.** Ibid. See also "Profiling Body Weight and Tobacco Use-Media Highlights," Public Health Institute, Berkeley, CA, 2000.

- **44.** Ibid.
- **45.** U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Physical Activity and Health: "A Report of the Surgeon General, July 1996."
- **46.** "School Health Policies and Programs Study," Centers for Disease and Prevention, 2000.
- **47.** California Department of Education, "State Schools Chief O'Connell announces 2004 physical fitness results for California students," News Release #04-102, November 24, 2004, www. cde.ca.gov.
- **48.** California Center for Public Health Advocacy, "An Epidemic: Overweight and Unfit Children in California Assembly Districts," Davis, CA, 2002.
- **49.** California Department of Health Services, "Health of California's Adults, Adolescents, and Children: Findings from CHIS 2001,"Sacramento, May 2004.
- **50.** Division of Nutrition and Physical Activity, National Center for Chronic Disease Prevention and Health Promotion, 2005.
- **51.** "The Economic Costs of Physical Inactivity, Obesity, and Overweight in California Adults." California Department of Health Services, 2005.
- **52.** Centers for Disease Control and Prevention, National Center for Health Statistics, "Prevalence of Overweight Among Children and Adolescents: United States, 1999-2002."
- **53.** Centers for Disease Control and Prevention, National Center for Health Statistics, "Obesity Still a Major Problem, New Data Show," Press Release, October 6, 2004.
- **54.** Institute of Medicine, "Preventing Childhood Obesity: Health in the Balance, 2005."
- **55.** California Center for Public Health Advocacy, "An Epidemic: Overweight and Unfit Children in California Assembly Districts," Davis, CA, 2002.
- **56.** "A Special Report on Policy Implications from the 1999 California Children's Healthy Eating and Exercise Practices Survey," The California Endowment, Los Angeles, CA, May 2001, revised August 2002; and Foerster, S.B., Fierro, M.P., Gregson, J., Hudes, M., Oppen, M., and Sugerman, S., "1998 California Teens Eating and Exercise Nutrition Survey." See also "Profiling Body Weight and Tobacco Use-Media Highlights," Public Health Institute, Berkeley, CA, 2000.
- **57.** Rodriguez, M., Kane, M., Alonzo-Diaz, L. Flores, G. "One Out of Three Latino Adolescents Overweight or At Risk," Health Policy Fact Sheet, UCLA Center for Health Policy Research, April 2005.
- **58.** National Institute for Healthcare Management. "Obesity in Young Children: Impact and Intervention." August 2004.
- **59.** Ludwig, D.S., Peterson, K.E., and Gortmaker, S., "Relationship between consumption of sugar-sweetened drinks and childhood obesity: A prospective, observational analysis," Lancet, 2001, 357: 505-508.
- **60.** Ritchie, L., Crawford, P., Woodward-Lopez, G., Ivey, S., Masch, M., Ikeda, J. Position Paper, "Prevention of Childhood Overweight What Should Be Done?" U.C. Berkeley, Center for Weight and Health, 2001.

- 61. Field Research Corporation, 2004.
- **62.** The Learning Connection, "The Value of Improving Nutrition and Physical Activity in Our Schools, " Action for Healthy Kids, 2005. www.ActionForHealthyKids.org
- 63. Surgeon General's Report, 2001.
- **64.** Pollitt, E., "Does breakfast make a difference in school?" *Journal of the American Dietetic Association*, October 1995, 95(10): 1134-1139.
- **65.** Reich, J. "The State of the Plate: A School Meal Primer for California." California Food Policy Advocates, 2005.
- **66.** Ibid.
- **67.** California Department of Education, "School Meal Nutrition Analysis Report," Sacramento, CA, October 2005.
- **68.** Ibid.
- **69.** "Linking Education, Activity and Nutrition, Fiscal Impact Report," U.C. Berkeley, 2005.
- **70.** Ibid.
- **71.** Craypo, L., Purcell., Samuels, S., and Agron, P., "Fast Food Sales on High School Campuses: Results from the 2000 California High School Fast Food Survey," Journal of School Health, 2002, 72(2): 78-82. See also "School Health Policies and Programs Survey (SHPPS), " Centers for Disease Control and Prevention, 2000.
- **72.** "Prevalence and Specifics of Districtwide Beverage Contracts in California's Largest School Districts: Findings and Recommendations," Public Health Institute, Berkeley, CA, April 2002.
- **73.** Centers for Disease Control and Prevention, (1997) "Guidelines for School and Community Programs to Promote Lifelong Physical Activity Among Young People.." Atlanta, GA: U.S. Department of Health and Human Services.
- **74.** California State Board of Education Policy #99-03, Physical Education Requirements, June 1999.
- **75.** McCormack-Brown, K.; Pitt Barnes, S., Reyes, L. Berends, V.; Agron, P; "School Board Member Survey Results for Examination of Communication Factors Affecting Policymakers 2004."
- **76.** Ibid.
- **77.** California School Board Nutrition Policy Project "Summary of Work Plan Goals, Activities, and Outcomes." *California Project LEAN*, July 2001 June 2004.
- **78.** The Center for Health and Health Care in Schools, Nutrition, Physical Exercise, and Obesity: "What's Happening in Your School?" Survey Results, 2004.
- **79.** Ibid.
- **80.** Allensworth, D., Lawson, E., Nicholson, L., and Wyche, J., Eds., Schools and Health, Institute of Medicine, National Academy Press, Washington, DC, 1997.
- **81.** Ibid.
- **82.** "Soft Drinks In Schools," Policy Statement, American Academy of Pediatrics, 2004.
- **83.** Prevention of Pediatric Overweight and Obesity, Policy Statement, American Academy of Pediatrics, 2003.



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II. Providing a Comprehensive Program on Nutrition and Physical Activity

Schools alone cannot meet all the nutrition and physical activity-related needs of students. However, because the relationship between health, nutrition, physical activity and learning is so strong, and because young people spend so much of their time at school or at school-related activities, schools can be a vital part of the solution.

A comprehensive school nutrition and physical activity program can help students attain full academic potential and optimal health by providing the skills, social support and environmental reinforcement necessary to adopt lifelong healthy eating and physical activity behaviors. By adopting effective programs, districts and schools ensure that the health of students is a top priority.

This chapter presents eight successful ways to support a healthy school nutrition and physical activity environment. These recommendations have been adapted from the Surgeon General's Prescription for Change, the Centers for Disease Control and Prevention's School Health Index, the United States Department of Agriculture's Changing the Scene and the National Alliance for Nutrition and Activity's Model Local School Wellness Policies on Physical Activity and Nutrition. School districts are encouraged to establish and maintain a Coordinated School Health Program that addresses all components of school health, which are not addressed in this chapter. (See Appendix C: "Coordinated School Health Program.")

The subsequent section looks more closely at the role of school boards in promoting healthy eating and physical activity, and Chapter III provides information to help boards develop effective policies on nutrition and physical activity.

WHAT DISTRICTS CAN DO

To provide a comprehensive nutrition and physical activity program, districts should consider the following steps:

1. Emphasize proper nutrition and physical activity as a priority.

- ➤ Establish a vision and goals for the district's child nutrition and physical education programs.
- Adopt policies that ensure all foods and beverages available on school campuses and at school events and fundraisers contribute toward eating patterns that are, at a minimum, consistent with the school food standards in state and federal law. Extend nutrition standards to apply to middle and high schools where appropriate.
- ➤ Adopt policies that ensure students in grades K-12 have opportunities, support and encouragement to be physically active on a daily basis.
- Retain well-trained food service professionals and certified physical education instructors who reinforce students' adoption of healthy eating and physical activity habits.
- > Ensure that nutrition and physical activity policies are implemented and evaluated annually.

2. Ensure quality school meals.

- > Involve students in the selection, tasting and marketing of healthy foods and beverages that appeal to students.
- Provide a variety of food options, such as fruits, vegetables, whole grains and dairy foods, which are low in fat and added sugars.
- ➤ Offer a variety of healthy choices that appeal to students, including cultural and ethnic favorites.
- Commit all schools to participating in available child nutrition programs, including breakfast, lunch, afterschool snacks, child care and summer food service.
- > Work to eliminate any social stigma attached to, and prevent overidentification of, students who are eligible for free and reduced-price meals.

3. Monitor a la carte food sales.

- ➤ Restrict student access to unhealthy foods in vending machines, school stores and other venues that compete with healthy school meals in all grades, pre-kindergarten through grade 12.
- ➤ Ensure that healthy snacks and foods are provided in vending machines, school stores and other venues within the district's control. These options should cost the same or less than unhealthy alternatives.

4. Provide an environment conducive to good health.

- ➤ Allow an adequate amount of time and space for students to eat school meals, and schedule lunch periods at reasonable hours around midday. Ensure lunch lines are not too long and students have plenty of time to eat their food and socialize in a safe, comfortable and inviting place.
- ➤ Ensure that drinking fountains are operable, clean and convenient for students to use throughout the school day.
- ➤ Make available adequate and safe access to school physical activity facilities before, during and after school, on weekends, and during school vacations where feasible.
- ➤ Allow sufficient time during the day for supervised recess for elementary school students.
- ➤ Offer extracurricular physical activity programs, such as physical activity clubs, intramural programs, or interscholastic athletics.
- ➤ Assess and make needed improvements to make it easier and safer for students to walk and bike to school. Explore funding availability of the federal "safe routes to school" program.

5. Support nutrition education and physical education.

- ➤ Offer adequate time in the curriculum for nutrition education and daily physical education in all grades, pre-kindergarten through grade 12, as part of a sequential, comprehensive, standards-based program. At a minimum, 200 minutes/10 days of physical education are required for elementary students and 400 minutes/10 days are required for middle and high school students.
- ➤ Provide physical education that is consistent with California's Physical Education Model Content Standards for California Public Schools.
- ➤ Ensure that qualified nutrition education and physical education specialists focus on knowledge and skill development so students are able to learn and adopt healthy eating and physical activity behaviors.

- ➤ Offer nutrition education in the school dining area, and in the classroom, with coordination between food service staff and teachers.
- ➤ Assess whether students are engaging in moderate to vigorous physical activity at least 50 percent of physical education class time.

6. Promote healthy eating and physical activity.

- ➤ Discourage the use of unhealthy foods (e.g., soda, candy or high-fat foods) as an incentive or reward for good behavior or academic performance the classroom, and instead encourage non-food alternatives (e.g., inexpensive stickers, pencils or erasers). (See Appendix C: "Constructive Classroom Rewards.")
- Disallow the use of physical activity (e.g., running laps, pushups) or withholding of opportunities for physical activity (recess, physical education) as punishment.
- >> Serve healthy foods such as smoothies, fat-free or low-fat yogurt or salads for class parties.
- ➤ Use a variety of strategies to actively promote healthy eating and physical activity to students, parents, teachers, administrators and the community.
- > Conduct promotional campaigns in the cafeteria and on campus that encourage healthy eating and do not promote less nutritious food choices.
- ➤ Discourage the promotion and advertising of unhealthy foods and beverages. (See Appendix C: "Commercial Activities in Schools.")

7. Explore revenue-generating alternatives.

- > Continually seek other sources of revenue for schools so food service programs, booster clubs, student clubs and Parent Teacher Associations do not have to support their activities through the sale of unhealthy foods in vending machines, snack bars, student stores and other food outlets. (See Appendix C: "Creative School Fundraising Ideas.")
- > Explore how some districts are able to be less reliant on the sale of unhealthy foods and beverages. (See Chapter V: Case Studies and visit CPL's "Bright Ideas" at www.CaliforniaProjectLEAN.org.)

8. Assess the district's nutrition and physical activity program.

- > Visit the school cafeteria for breakfast and lunch and spend time with students and staff to learn what students are eating and drinking.
- ➤ Involve students, parents, school staff, administrators, nutritionists and community leaders in assessing the school's eating and physical activity environment.

 Develop a shared vision and an action plan to achieve it. (See Chapter VI: Resources.)
- ➤ Review successful school-based models. (See Chapter V: Case Studies and visit CPL's "Bright Ideas" at www. CaliforniaProjectLEAN.org.)
- ➤ Access other resources to develop sound policies for other components of a Coordinated School Health program. (See Chapter VI: Resources.)

WHAT SCHOOL BOARDS CAN DO

School boards are elected to govern the community's schools. This involves setting a direction for the district, establishing a structure for action, providing support, holding the system accountable and providing leadership in the community. Thus, the board is in a powerful position to encourage and facilitate programs that enhance student health.

The school board, working closely with the superintendent as a governance team, can enhance good nutrition and physical well-being for students in the following ways:

1. Set a vision for good nutrition and good health.

In a district's vision statement or in its mission and goals statement, a board can emphasize its priority for supporting student health. Goals and objectives of the district can include specific desired outcomes related to healthy eating and physical activity.

2. Become advocates for good health and nutrition.

The board has the responsibility to provide leadership in the schools and the community. Boards can draw attention to the needs of the students and schools and help garner the support necessary to address those needs. The district should consider having a plan to address the nutritional and physical well-being of its students. Because state and federal officials also make decisions that impact children's nutritional health, the board can seek opportunities to influence legislative and regulatory bodies on this issue as well.

3. Adopt policy.

The board sets expectations and provides direction through the adoption of policies on a variety of topics. The board is required to adopt a districtwide wellness policy in accordance with Section 204 of the Federal Child Nutrition and WIC Reauthorization Act of 2004, and can review the district's policy manual to look for other opportunities to promote healthier eating habits and physical activity. (See Chapter III: Policy Development.)

4. Adopt curriculum.

The board adopts guidelines for curricula, and thus can support efforts to teach students about healthy eating and physical activity.

5. Allocate resources to district programs.

The board adopts the district budget and, in so doing, must ensure that budget priorities reflect the goals and priorities set forth in its vision statement. If nutrition education, food programs and physical education are a priority, funds must be allocated to support those activities. These may include funds from foundations and government grants.

6. Ensure program accountability.

The board monitors program outcomes and holds the superintendent accountable. To fulfill this role, the board may want to request periodic information related to students' food choices, nutrition education and physical activity opportunities.

7. Encourage collaborative approaches.

The eating habits and activity patterns of children can be positively influenced by collaboration among agencies and community organizations. As public officials elected to represent the needs of students, school boards are in a powerful position to encourage a coordinated approach within the community.





POLICY DEVELOPMENT

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III. Policy Development

Districts may already have a number of policies in place related to student health, nutrition and physical activity. These may or may not have been developed in a comprehensive manner based on relevant research and putting the needs of children and youth first. It is recommended that districts take a hard look at their existing policies, using the material in this chapter as a starting point, to ensure that district policies are up to date and reflect the board's and community's priority on student health and wellness.

The urgency of adopting a comprehensive approach to improving student health has been increased by a requirement under Section 204 of the Federal Child Nutrition and WIC Reauthorization Act of 2004 that school boards establish local wellness policies by the beginning of the 2006-07 school year. The district is required to include parents, students, school food service professionals, school administrators, board members and members of the public in the development of the policy. At a minimum, the policy must address:

- goals for nutrition education and physical activity that promote wellness in a manner that the district determines is appropriate;
- ➤ nutrition guidelines for all food sold on campus during the day, in efforts to promote health and reduce childhood obesity;
- ➤ assurance that nutrition guidelines for school meals will not be less restrictive than federal policy; and
- ➤ a plan for measuring the effectiveness of the wellness policy, including the designation of at least one person to oversee the activities and ensure that schools meet the local wellness policy.

The information below, and throughout this guide, can assist the board and its stakeholders in the review of these issues and the development of appropriate policy.

THE BOARD'S ROLE IN POLICY

One of the board's most effective tools for establishing its expectations and holding the system accountable is by setting policy. School boards adopt policies to ensure that actions taken by district staff support the district vision for

student learning. Policies are also adopted to communicate the expectations of the board and community regarding the overall climate in schools throughout the district.

Boards want to help, reach out, fix, anticipate and respond to issues present in the school community. To accomplish these goals, it is important to utilize a system that provides equal access, stability and democracy and recognizes the collective nature of a working board's legal authority and responsibility.

There are many reasons that it is important to work through policies:

- ➤ Voting on a policy provides clear direction to the superintendent. Board members may not all agree, but the policy development and adoption process ensures a majority of the board comes to agreement, making it possible to provide coherent rather than fragmented policy messages to the staff.
- By creating policies, boards can initiate action or respond to district stakeholders in an appropriate and systematic way.
- ➤ A policy manual provides a structural framework to guide and organize the district, and helps clarify district philosophy as well as the roles and responsibilities of the board, the superintendent and staff.
- ➤ Policy development, adoption and evaluation are the mechanisms by which district operations remain stable through changes in board members, superintendent or staff.
- ➤ Development of sound policies through an effective process increases public confidence by showing that the district is being governed and operated with a focus on student learning, within the parameters of law, and in accordance with sound business practices.
- ➤ Policies help ensure decisions are made thoughtfully, while keeping in mind the larger policy direction of the district. This process can help districts avoid setting a precedent with individual decisions which may be hastily made without taking into consideration the long-term implications.

The public entrusts school boards with responsibility for making sure the community's public schools do the best

possible job of providing a quality education. Setting policy direction and parameters can be done only by locally elected school boards, that are vested with the authority to make decisions in the public policy arena on behalf of the community.

The policies that are in a district policy manual are often developed and recommended to the board based on a directive from the board or superintendent, a mandate from a new law or a change in existing law. While district staff usually drafts the policy language, the board has the responsibility first to ensure the language clearly reflects the board's policy intent and then to adopt the policy.

Subsequently, the superintendent or assigned staff member drafts administrative regulations based on the policy. The superintendent knows the specific practical and enforceable steps that are needed to make the policy succeed. Regulations and policies are often adopted at the same time or located together so it is clear what actions will result from the adoption of the policy.

POLICY DEVELOPMENT PROCESS

The following Nutrition Policy Development Worksheet and Physical Activity Policy Development Worksheet provide a guide for school boards, superintendents, district staff and others to develop and review related board policies and administrative regulations.

Part I of each worksheet introduces the policy topic and provides a series of questions designed to facilitate the board's discussion and to develop an understanding of this issue and its relationship with student learning and achievement.

Part II uses a series of questions to help boards, administrators, staff and others assess existing board policies and administrative regulations related to nutrition and physical activity in order to determine the need for the development or revision of current policies or regulations.

Part III suggests a policy development process to help school boards, administrators, staff and others determine the necessary actions and responsibilities for collecting data and for making recommendations on the relevant board policies and administrative regulations.

Part IV provides a format for completing policy revisions and developing new board policies and administrative regulations.

A **Workplan and Timeline** form is also provided to assist in the planning of the policy work and to establish deadlines.

The policy review and development process described in this section is resource intensive. As such, it provides the greatest opportunity for a full understanding of the issue and its impact on student learning. However, it is recognized that it is very unlikely that any two districts will follow the same policy development process. What is important is for districts to find what works for them, and then to proceed accordingly.

NUTRITION POLICY DEVELOPMENT WORKSHEET

Part I: Initial Discussion of Topic

Relationship to student learning: The following questions are intended to focus your district's discussion on the relationship between nutrition and student learning.

1. Why is nutrition important to student

	learning?
2.	What does your governance team see as the
	relationship between nutrition and student
	learning in your district?

3. How will policies on nutrition contribute to improved student learning?	➤ What are your community's and board's expectations with regard to the nutritional value of all foods available on school grounds?
	➤ Do the nutritional needs of children differ by student age group?
Policy topic components: Below are the basic components that a board should understand and/or address in policy on student nutrition. Some components are directly related to student learning, and others reflect legal compliance issues that are also important to include in policy or administrative regulations. Component statements are not intended to be policy language. Each component statement is a key concept related to the topic, but not the policy language itself. Each component is intended to frame an issue or identify concerns and interests that your board would want to address in a policy on this topic. Under each component statement are questions that may help guide the board's discussion of the component.	 2. The district's curriculum includes nutrition education at all grade levels. ➤ What are the district's goals for nutrition education?
 The board recognizes that proper nutrition is necessary for maximizing the opportunity for a child to learn. 	
➤ What does research show about the relationship between nutrition and student learning?	> What is currently taught in each grade level?

➤ Does it follow a prescribed scope and sequence?	➤ What courses might be able to incorporate nutrition education?
➤ Is it aligned to the nutritional competencies issued by the California Department of Education?	 3. The district's food services program meets federal and state nutrition standards. > What are the federal and state nutrition standards? Has the board assured that district nutrition guidelines are not less restrictive than federal policy? Are the standards being implemented?
➤ Who teaches nutrition at the various grade levels?	➤ Does the food service program adequately serve all students eligible for the national free and reduced-price school lunch and breakfast programs?
➤ How much time is spent on nutrition education at each grade level? Is this sufficient?	➤ How are foods selected for school menus? Are parents or students involved in the process?

➤ How can the district ensure that other food sales do not impair student participation in the district's food service program?
➤ By what process are specific food items approved for sale in fundraisers or vending machines?
➤ Does the district have contractual obligations that need to be taken into consideration (e.g., contracts with beverage companies)?
➤ What resources are generated by existing arrangements for competitive food/beverage sales? What percentage of the district's budget consists of private-sector contributions, specifically commercial activities pertaining to non-nutritious foods and beverages? What does research show about student purchases of healthier foods and beverages when these items are made available?

 5. Advertisements and other commercial messages at schools do not undermine the district's efforts to promote healthy eating habits. > What does research show about the susceptibility of children and youth to commercial persuasion? 	➤ Do advertisements in schools imply an endorsement of the product by the district? What steps can be taken to clarify that the district is not endorsing a product?
➤ Do existing business partnerships or contracts require the district to advertise as a condition for receiving	➤ Does the district's educational program include instruction in media literacy which helps students to become critically aware consumers?
funds, products, materials or equipment?	6. The district shall regularly evaluate the effectiveness of its nutrition policies and programs.
➤ What criteria should be established regarding the content of advertisements aimed at students? Should the board ban or place any restrictions on advertisements of foods and beverages of minimal nutritional value (e.g., soft drinks, foods high in fat or	➤ Who has the superintendent assigned to oversee the implementation of the district's wellness policy?
sugar)? Should the criteria/restrictions vary depending on the grade levels of the students in the school?	
	What indicators will be used to measure the effectiveness of the district's nutrition policies and programs?
What is the district's current process for reviewing and approving specific requests for advertisements or other commercial activities? To what extent should	
individual school sites be allowed to make their own decisions regarding commercial activities? Under what circumstances, if any, should the superintendent's or board's approval be required?	➤ What type of reports does the board expect to receive, and how often?

As part of your discussion of the above policy components related to nutrition, your board may identify additional related policy components in your district and community. Those components should be listed here (e.g., physical education, school gardens, food safety, etc.):	
	3. Are the administrative regulations consistent with the board policy?
Part II: Assessment of Existing Policy Review your current board policy and administrative regulations related to food service, food sales and nutrition education based on the following questions. The assessment should determine whether your policies include all the policy components identified in Part I.	4. Does district practice comply with policy/ administrative regulations?
the policy components identified in Part I.1. List your board policy or policies related to nutrition.	
2. Does the policy include a focus on student learning? How?	5. Does the policy reflect current legal requirements?

6. As a result of the board discussion in Part I and assessment of policy just completed in Part II, in what areas does your board need	8. Based on your discussion and assessment, do other district documents require future review or revisions?
to develop new policy, or delete or revise current policy?	 Administrative regulations District budget Collective bargaining agreements Strategic plan School improvement plans Employee handbooks Staff development plan Student handbook Other
Note: Items 7 and 8 are intended to identify issues related to, but not directly part of the policy topic under consideration. In addition, items 7 and 8 may identify issues that require further attention to ensure the alignment of policy, other key work of boards and other district documents. 7. Has your board's policy discussion and/or policy assessment raised any policy issues for future review or action?	Part III: Policy Development Process As part of the policy development process, your governance team should determine the data needed to effectively address this policy topic. This includes determining where the data may be available, the appropriate allocation of resources for data collection and analysis, and the assignment of responsibility for data collection, analysis and recommendations. The process also should include opportunities for input from affected parties in the district and the community. 1. What data do you need in order to develop nutrition-related policies? a. Internal data sources:

	b. External data sources:	Part IV: Board Policy Content Directions
		Content decisions: Your board should identify the content components of new or revised policy based on the discussion, assessment, analysis and input in Parts I through III and a review of the following questions:
2.	Who beyond the governance team should be involved in the policy development process (e.g., food service director, food service staff, physical education and health teachers, dietitians, health department, public health and health care professionals, school administrators, parents, students, other interested community members)?	1. Which of the policy components listed in Part I and those recommended by key stakeholders (identified in Part III) does the board want included in a new or revised policy?
	What are the recommendations from the	2. Does the assessment of existing policy
	individuals listed above?	completed in Part II identify any additional content components the board wants in new or revised policy?
4.	What are the recommendations of staff based on an analysis of the data?	

a. Has the board identified any content in existing policy that should not be included in new or revised policy?	the board's intent? In what ways, if any, should the policy be revised to better communicate the board's direction?
4. Do the data and input developed in Part III reveal any additional (or new) content components the board wants in new or revised policy?	
	6. Does public or staff input add any new issues that need to be addressed?
Paviant of duality aligns After the board has	
Review of draft policy: After the board has completed the process described previously, the superintendent, policy committee and/or other appropriate designees should prepare a draft policy, arrange for legal review of the policy, and bring it to the board for consideration at a public board meeting. The following	
questions should be used to guide the board's review of draft policy. If any significant revisions are required, some or all of the questions in Parts I through IV may need to be revisited before the policy is formally adopted.	

/.	What criteria will the governance team use
	to determine whether this policy achieves
	the desired results?
8.	What provisions does the draft policy
8.	What provisions does the draft policy include for periodic review and evaluation?
8.	
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Note: Following adoption of the policy by the board, the superintendent should develop a plan for communicating the policy to interested parties, as well as a plan to implement the policy. The plan could include agreement on the goals, community outreach, key messages to be communicated, the individuals, groups and media organizations to receive the communication, and, when appropriate, strategies that tailor the messages for each of these groups so people receive the information of most use to them. Once a policy has been adopted, it is the board's responsibility to support it by providing the necessary funding when a budget is adopted, considering the policy implications of collective bargaining decisions, and modeling the behavior called for in policy.

NUTRITION POLICY WORKPLAN AND TIMELINE

Activity		Person Responsible	Deadline
Part I:	Introduction of topic and initial board discussion of broad issues		
Part II:	Assessment of existing policy		
Part III:	Data collection and analysis		
	Professional staff analysis and recommendation		
	District and community input		
Part IV:	Board content directions		
	Drafting of recommended policy		
	Legal review		
	First reading: board initial opportunity for public input		
	Drafting of revised policy, if necessary		
	Legal review of revised policy		
	Second reading and adoption		
	Communication of new policy		
	Specifically: (list)		
	Implementation by superintendent and staff		
	Review and evaluation		
	Modify policy based on review and evaluation		



PHYSICAL ACTIVITY POLICY DEVELOPMENT WORKSHEET

Part I: Initial Discussion of Topic

Relationship to student learning: The following questions are intended to focus your district's discussions on the relationship between physical activity and student learning.

1 Why is physical activity important to

	student learning?
2.	What does your governance team see as the relationship between physical activity and student learning in your district?
3.	How will policies on physical activity
	contribute to improved student learning?
coi in rela	Ilicy topic components: The following are the basic imponents that a board should understand and/or address policy on physical activity. Some components are directly ated to student learning, and others reflect legal complicate issues that are also important to include in policies or

regulations. Component statements are not intended to be policy language. Each component statement is a key concept related to the topic, but not the policy language itself. Each component is intended to frame an issue or identify concerns and interests that your board would want to address in a policy on this topic. Under each component statement are questions that may help guide the board's discussion of the component.

- 1. The board recognizes that physical activity is necessary for maximizing the opportunity for a child to learn.
- > What does research show about the relationship between physical activity, health and student learning?
- What are your community's and board's expectations with regard to the schools' responsibility to provide and promote physical activity?
- > What are the district's goals for physical activity?
- ➤ Are different strategies for promoting physical activity needed based on students' ages, gender, socioeconomic status or availability of community resources?
- ➤ How will the district measure the impact of the physical activity program on student learning?

 2. The district's curriculum includes physical education at all grade levels. > What types of physical education are currently taught at each grade level? Do the students find it enjoyable? 	➤ Are appropriate alternative activities provided for students with a physical disability that may restrict excessive physical assertion?
What does research show are the components of a successful physical education program?	➤ What are the qualifications of staff teaching physical education? What is the student/teacher ratio? Is this adequate?
➤ Is the district's curriculum aligned to the state's framework for physical education?	
➤ How much time is spent on physical education at each grade level? Does this meet legal requirements? Is it sufficient? What percentage of class time are students spending on physical activity?	➤ How is students' physical performance assessed and graded? How are these evaluations, plus the results of the annual physical performance testing designated by the State Board of Education, used in program planning and in assisting individual students?
>> Are the physical activities age and culturally appropriate?	
➤ Do marching band classes and similar activities satisfy physical education requirements of the district? Should substitutions for physical education be permitted?	➤ Is the physical education curriculum linked to the district's nutrition and/or health curriculum to provide a comprehensive, coordinated approach to physical fitness topics?
➤ Are some students temporarily or permanently excluded from physical education? Who and why?	➤ Do playgrounds, sports fields and other facilities for physical activities meet or exceed recommended safety standards?

 Interscholastic athletic programs, if any, are integrated with the educational program and promote physical fitness and good sportsmanship. What are the legal requirements and California Interscholastic Federation principles and rules applicable to interscholastic athletic programs? Is the district's program consistent with those laws, principles and rules? 	 4. The district engages in a collaborative effort to promote students' physical activity beyond the school day. ➤ To what extent is physical activity incorporated into any district-operated, after-school programs or child care programs?
➤ How is eligibility for participation in interscholastic athletic programs determined? Are requirements for academic eligibility the same as for other extracurricular/co-curricular activities?	➤ What opportunities are available for schools to promote parent and community involvement in reducing children's sedentary behavior, such as by reducing television viewing? How are parents involved in the physical education programs offered at the various school sites?
➤ Is the district's program free from discrimination? Does it provide equivalent opportunities for both males and females? What does "gender equity" mean in terms of athletic programs?	➤ Is the district currently involved in local partnerships working to provide opportunities for physical activity for children and youth in the community? What other local agencies, organizations, businesses or community leaders might be approached to initiate or expand collaboratives focused on children's health and fitness?
➤ What are the qualifications of coaches in the district?	

> What provisions are necessary to maximize the

equipment available as necessary?

health and safety of student athletes? Is protective

> What types of state and/or federal resources are

does the district current participate?

available? In which federal and/or state programs

 Part II: Assessment of Existing Policy Review your current board policies and administrative regulations related to physical activity based on the following questions. The assessment should determine whether your policies include all the components identified in Part I. 1. List your board policy or policies related to physical activity. 	 5. Does the policy reflect current legal requirements? 6. As a result of the board discussion in Part I and assessment of policy just completed in Part II, in what areas does your board need to develop new policy, or delete or revise current policy?
2. Does the policy include a focus on student learning? How?	 Note: Items 7 and 8 are intended to identify issues related to, but not directly part of the policy topic under consideration. In addition, items 7 and 8 may identify issues that require further attention to ensure the alignment of policy, other key work of boards and other district documents. 7. Has your board's policy discussion and/or policy assessment raised any policy issues for future review or action?
3. Are the administrative regulations consistent with board policy?	8. Based on your discussion and assessment, what other district documents require future review or revisions?
4. Does district practice comply with policy/ administrative regulations?	 □ Administrative regulations □ District budget □ Collective bargaining agreements □ Strategic plan □ School improvement plans □ Staff development plan
	☐ Student handbook ☐ Other

Part III: Policy Development Process

As part of the policy development process, your governance team should determine the data needed to effectively address this policy topic. This includes determining where the data may be available, the appropriate allocation of resources for data collection and analysis, and the assignment of responsibility for data collection, analysis and recommendations. The process also should include opportunities for input from affected parties in the district and the community.

- 1. What data do you need in order to develop policy related to physical activity?
 - a. Internal data sources:
 - b. External data sources:
- 2. Who beyond the governance team should be involved in the policy development process (e.g., physical education and health teachers, health department, public health and health care professionals, parents, students, county/ city parks and recreation representatives, other interested community members)?
- 3. What are the recommendations from the stakeholders listed above?
- 4. What are the recommendations of staff, based on an analysis of the data?

Part IV: Board Policy Content Directions

Content directions: Your board should identify the content components of new or revised policy based on the discussion, assessment, analysis and input in Parts I through III and a review of the following questions.

- 1. Which of the policy components listed in Part I and those recommended by key stakeholders (identified in Part III) does the board want included in a new or revised policy?
- 2. Does the assessment of existing policy completed in Part II identify any additional content components the board wants in new or revised policy?
- 3. Has the board identified any content in existing policy that should not be included in new or revised policy?
- 4. Do the data and input developed in Part III reveal any additional (or new) content components the board wants in new or revised policy?

Review of draft policy: After the board has completed the process described above, the superintendent, policy committee and/or other appropriate designees should prepare a draft policy, arrange for legal review of the policy, and bring it to the board for consideration at a public board meeting. The following questions should be used to guide the board's review of draft policy. If any significant revisions are required, some or all of the questions in Parts I through IV may need to be revisited before the policy is formally adopted.

Note: Following adoption of the policy by the board, the superintendent should develop a plan for communicating the policy to interested parties, as well as a plan to implement the policy. The plan could include agreement on the goals; community outreach; key messages to be communicated; the individuals, groups and media organizations to receive the communication; and, when appropriate, strategies that tailor the messages to each of these groups so people receive the information of most use to them.

Once a policy has been adopted, it's the board's responsibility to support it by providing the necessary funding when a budget is adopted, considering the policy implications of collective bargaining decisions, and modeling the behavior called for in the policy.



PHYSICAL ACTIVITY POLICY WORKPLAN AND TIMELINE

Activity	,	Person Responsible	Deadline
Part I:	Introduction of topic and initial board discussion of broad issues		
Part II:	Assessment of existing policy		
Part III:	Data collection and analysis		
	Professional staff analysis and recommendation		
	District and community input		
Part IV:	Board content directions		
	Drafting of recommended policy		
	Legal review		
	First reading: board initial consideration of draft policy, opportunity for public input		
	Drafting of revised policy, if necessary		
	Legal review of revised policy		
	Second reading and adoption		
	Communication of new policy		
	Specifically: (list)		
	Implementation by superintendent and staff		
	Review and evaluation		
	Modify policy based on review and evaluation		



SAMPLE BOARD POLICIES

BP 0200 Goals for the District	.42
BP 3312 Contracts	44
BP/AR 3550 Food Service/Child Nutrition Program	.48
BP/AR 3553 Free and Reduced-Price Meals	.52
BP/AR 3554 Other Food Sales	.56
BP 5030 Student Wellness	.60
BP/AR 6142.7 Physical Education	.64
BP/AR 6142.8 Comprehensive Health Education	.67

IV. Sample Board Policies

More than 80 percent of the school districts in California rely on CSBA's Policy Services to meet their policy needs. CSBA develops sample policies using the following process:

- CSBA's Policy Review Committee identifies policies for development or revision as a result of new legislation, regulatory changes, judicial or attorney general opinions, education research or best practices, and/or CSBA's philosophy on effective governance and other current topics.
- Background materials are gathered and experts are consulted.
- Drafts are produced and reviewed by CSBA policy staff.
- > Final drafts are reviewed by CSBA's legal counsel.
- > Samples are distributed to client districts for their consideration.

CSBA's materials are samples. Districts are encouraged to tailor the policies to fit their own needs and circumstances. CSBA strongly recommends that district staff reflect on the need for each sample policy provided, gather additional research if necessary, make any necessary changes to the samples in order to reflect local circumstances, and, finally, take the draft policies to the board for consideration, deliberation and adoption.

The following sample board policies and administrative regulations relating to student health and nutrition are included in this guide:

BP 0200	Goals for the School District
BP 3312	Contracts
BP/AR 3550	Food Service/Child Nutrition Program
BP/AR 3553	Free and Reduced-price Meals
BP/AR 3554	Other Food Sales
BP 5030	Student Wellness
BP/AR 6142.7	Physical Education
BP/AR 6142.8	Comprehensive Health Education

Note: CSBA's sample policies and administrative regulations are regularly reviewed and revised. Please check with CSBA's Policy Services to ensure you have the most recent version by calling (800) 266-3382. Revisions to the above-referenced policies and administrative regulations will be posted at www.csba.org/ps/hf.htm.

To learn more about CSBA's Policy Services visit us at www.CSBA.org/ps.

Philosophy-Goals-Objectives and Comprehensive Plans BP 0200

GOALS FOR THE SCHOOL DISTRICT

The Governing Board shall adopt long-term goals for achieving the district's overall vision for its schools as well as clear performance standards and benchmarks which can be used to determine if the district is meeting these goals. Goals shall be limited in number so as to be reasonably achievable within established timelines.

- (cf. 0000 Vision)
- (cf. 0100 Philosophy)
- (cf. 0500 Accountability)
- (cf. 6010 Goals and Objectives)
- (cf. 9000 Role of the Board)

The Superintendent or designee may establish short-term, interim objectives and comprehensive plans to ensure adequate, regular progress toward the district's long-term goals.

(cf. 0400 - Comprehensive Plans)

Note: Districts are encouraged to replace the list of goals below with their own locally developed goals.

The district's goals are to:

- Maintain safe and orderly campuses which promote learning
- (cf. 0450 Comprehensive Safety Plan)
- (cf. 5144 Discipline)
- 2. Provide appropriate instruction to meet the varied academic and career goals of students by identifying and responding to individual student needs
- (cf. 6000 Concepts and Roles)
- (cf. 6030 Integrated Academic and Vocational Instruction)
- 3. Ensure that all students achieve academic proficiency in essential areas of skill and knowledge
- (cf. 6011 Academic Standards)
- (cf. 6146.1 High School Graduation Requirements)
- (cf. 6146.5 Elementary/Middle School Graduation Requirements)
- 4. Provide for the specialized needs of identified groups of students

- (cf. 6164.4 Identification of Individuals for Special Education)
- (cf. 6164.6 Identification and Education under Section 504)
- (cf. 6171 Title I Programs)
- (cf. 6172 Gifted and Talented Student Program)
- (cf. 6174 Education for English Language Learners)
- (cf. 6175 Migrant Education Program)
- 5. Promote student health and nutrition in order to enhance readiness for learning
- (cf. 3550 Food Service/Child Nutrition Program)
- (cf. 3553 Free and Reduced-price Meals)
- (cf. 3554 Other Food Sales)
- (cf. 6142.7 Physical Education)
- (cf. 6142.8 Comprehensive Health Education)
- (cf. 6145.2 Athletic Competition)
- 6. Develop each student's self-respect, respect for others, appreciation for diversity and sense of personal responsibility
- (cf. 5137 Positive School Climate)
- (cf. 6141.6 Multicultural Education)
- 7. Provide time and resources for collaboration, planning and professional development for all staff
- (cf. 4131 Staff Development)
- (cf. 4231 Staff Development)
- (cf. 4331 Staff Development)
- 8. Maintain fiscal integrity for the district
- (cf. 3100 Budget)
- (cf. 3400 Management of District Assets/Accounts)
- (cf. 3460 Financial Reports and Accountability)
- 9. Improve the organization, management and decisionmaking structure and capabilities of the district to better support the education of students
- (cf. 0420.5 School-Based Decision Making)
- (cf. 2000 Concepts and Roles)
- 10. Employ technology in ways that enhance learning, teaching and noninstructional operations
- (cf. 0440 District Technology Plan)
- (cf. 4040 Employee Use of Technology)
- (cf. 6162.7 Use of Technology in Instruction)
- (cf. 6163.4 Student Use of Technology)

- 11. Provide and maintain facilities to meet the needs of present and future students
- (cf. 7000 Concepts and Roles)
- (cf. 7110 Facilities Master Plan)
- 12. Maintain positive relations with parents/guardians and the community, emphasizing communication and inviting participation in the schools
- (cf. 1220 Citizen Advisory Committees)
- (cf. 1240 Volunteer Assistance)
- (cf. 1700 Relations between Private Industry and the Schools)
- (cf. 6020 Parent Involvement)
- 13. Collaborate with other public agencies and private organizations to ensure that children's physical, social and emotional needs are met
- (cf. 1020 Youth Services)
- (cf. 1400 Relations between Other Governmental Agencies and the Schools)
- 14. Provide a system of shared accountability for student achievement with clear performance standards and consequences
- (cf. 0500 Accountability)
- (cf. 0510 School Accountability Report Card)
- (cf. 2140 Evaluation of the Superintendent)
- (cf. 4115 Evaluation/Supervision)
- (cf. 4215 Evaluation/Supervision)
- (cf. 4315 Evaluation/Supervision)
- (cf. 6162.5 Student Assessment)
- (cf. 9400 Board Self-Evaluation)

Legal Reference:

EDUCATION CODE

51002 Local development of programs based on stated philosophy and goals 51020 Definition of goal 51021 Definition of objective

Management Resources:

CSBA PUBLICATIONS

Healthy Food Policy Resource Guide, 2003 Maximizing School Board Leadership: Vision, 1996

WEB SITES

CSBA: http://www.csba.org

(10/95 2/98) 3/03

Policy Reference UPDATE Service

Business and Noninstructional Operations BP 3312

CONTRACTS

Note: Education Code 17604 authorizes the Governing Board to delegate authority to enter into contracts to the Superintendent wherever the Board is invested with the power to contract. A contract made under this delegation is not valid until it is approved and/or ratified by the Board. The following paragraph may be revised to specify any desired limits to this delegation of authority.

Whenever state law invests the Governing Board with the power to enter into contracts on behalf of the district, the Board may, by a majority vote, delegate this power to the Superintendent or designee. To be valid or to constitute an enforceable obligation against the district, all contracts must be approved and/or ratified by the Board. (Education Code 17604)

(cf. 3300 - Expenditures/Expending Authority)

(cf. 3314 - Payment for Goods and Services)

(cf. 3400 - Management of District Assets/Accounts)

Note: Pursuant to Public Contract Code 20104.50, the text or a summary of Public Contract Code 20104.50 must be included in all construction contracts. There are also other sections of law that must be included in construction contracts under certain circumstances. It is recommended that district legal counsel review construction contracts to ensure compliance with law.

All contracts between the district and outside agencies shall conform to standards required by law and shall be prepared under the direction of the Superintendent or designee.

(cf. 2121- Superintendent's Contract)

(cf. 4312.1 - Contracts)

(cf. 9124 - Attorney)

When required by law, contracts and subcontracts made by the district for public works or for goods or services shall contain a nondiscrimination clause prohibiting discrimination by contractors or subcontractors. The nondiscrimination clause shall contain a provision requiring contractors and subcontractors to give written notice of their obligations to labor organizations with which they have a collective bargaining or other agreement. (Government Code 12990)

(cf. 0410 - Nondiscrimination in District Programs and Activities)

The district shall not enter into a contract that prohibits a school employee from disparaging the goods or services of the contracting party. (Education Code 35182.5)

Contracts for Non-Nutritious Foods or Beverages

Note: SB 12 (Ch. 235, Statutes of 2005) amended Education Code 49431, which specifies nutritional standards for foods that may be sold at elementary schools, and added Education Code 49431.2 to specify nutritional standards for middle, junior high, and high schools, effective July 1, 2007; see AR 3550 - Food Service/Child Nutrition Program.

If the Board wishes to implement the standards prior to July 1, 2007, it should modify the following paragraph accordingly.

Effective July 1, 2007, the district or a district school shall not enter into or renew a contract for the sale of foods that do not meet the nutritional standards specified in Education Code 49431 or 49431.2 unless the contract specifies that such sales will occur later than one-half hour after the end of the school day and/or off school premises. (Education Code 49431,49431.2)

(cf. 3554 - Other Food Sales)

Note: Education Code 49431.5, as amended by SB 965 (Ch. 237, Statutes of 2005), contains beverage standards for all grade levels. Beverage standards for elementary, middle, and junior high schools are effective January 1, 2006. For high schools, the standards will be phased in so that 50 percent of beverages sold beginning July 1, 2007, and all beverages sold beginning July 1, 2009, meet these standards. Vending machines, student stores, and cafeterias in middle schools, junior high schools, and high schools will be able to sell beverages that do not meet these standards only if the sales occur later than one-half hour after the end of the school day or off school premises; see AR 3554 - Other Food Sales. If the Board wishes to implement the standards at high schools prior to July 1, 2007, it may modify the following paragraph to specify the applicable date.

In accordance with the dates specified in law, the district or a district school shall not enter into or renew a contract for the sale of beverages that do not meet the nutritional standards in Education Code 49431.5 unless the contract specifies that such sales will occur later than one-half hour after the end of the school day and/or off school premises.

Note: Education Code 35182.5 mandates that the Board not enter into a contract that grants exclusive sales or advertising for carbonated beverages, non-nutritious beverages, or non-nutritious food unless it has adopted a policy, at a public hearing, ensuring that the district has internal controls in place to protect the integrity of public funds, that the funds raised will benefit public education, and that the contracts are entered into on a competitive basis. Contracts entered into by districts prior to January 1, 2004, remain in effect; however, these contracts may not be renewed if they conflict with Education Code 35182.5.

Before the district or a district school enters into or renews a contract that grants exclusive or nonexclusive advertising or sale of carbonated beverages, non-nutritious beverages, or non-nutritious food as defined in law, the Board shall ensure that the district has sufficient internal controls in place to protect the integrity of public funds and to ensure that funds raised as a result of the contract benefit public education. (Education Code 35182.5)

Note: Education Code 35182.5 does not define the term "internal controls." Items #1-2 below are based on suggested "internal controls" as recommended by the California Association of School Business Officials (CASBO), and should be modified to reflect the specific internal controls developed by the district.

The Superintendent or designee shall develop the district's internal control procedures to protect the integrity of public funds. Such internal controls may include but not be limited to the following:

- Control procedures that produce accurate and reliable financial statements and, at the same time, safeguard the assets, financial resources, and integrity of every employee responsible for handling money or property. Control systems shall be systematically evaluated and revised to keep pace with the changing responsibilities of management.
- (cf. 3100 Budget)
- (cf. 3400 Management of District Assets/Accounts)
- (cf. 3460 Financial Reports and Accountability)
- 2. Procedures to ensure that district personnel do not handle cash or product at the school site. The contract shall specify that the vendor stock the machines and shall provide cash accounting, along with a check, for district proceeds directly to the control office.

In addition, the contract may specify whether contractor logos are permitted on district facilities, including but not limited to scoreboards and other equipment. If such logos are permitted, the contractor shall present the equipment to the Board as a gift. The gift may be accepted by the Board in accordance with Board policy and administrative regulation.

(cf. 3290 - Gifts, Grants and Bequest)

Note: Optional items #1-4 below are not required by law, but present additional factors for the Board to consider to help ensure that the funds raised benefit public education in accordance with Education Code 35182.5. The following list should be modified to reflect district practice.

To ensure that funds raised by the contract benefit district schools and students:

 The Superintendent or designee may involve parents/ guardians, students, staff, and interested community members to make recommendations regarding the contract, including recommendations as to how the funds will be spent in a manner that benefits public education.

(cf. 1220 - Citizen Advisory Committees)

- 2. Prior to ratifying the contract, the Board shall designate the specific programs and activities that will be funded by the proceeds of the contract and consider how the contract reflects the district's vision and goals.
- (cf. 0000 Vision) (cf. 0100 - Philosophy) (cf. 0200 - Goals for the School District)
- 3. The contract shall specify that the contractor report, on a quarterly basis, to the Superintendent or designee the number of food items or beverages sold within the district and the amount of money raised by the sales. The Superintendent or designee shall report these amounts to the Board on a regular basis.
- 4. The Superintendent or designee shall ensure that the contract does not limit the ability of student and parent organizations to plan and operate fund-raising activities.
- (cf. 1230 School-Connected Organizations)
- (cf. 1321 Solicitation of Funds from and by Students)

Note: Education Code 35182.5 mandates that Board policy ensure that the contract is entered into on a competitive basis pursuant to Public Contract Code 20111 or through the issuance of a Request for Proposal. Public Contract Code 20111 requires districts to seek competitive bids through advertisements for contracts for services exceeding an amount specified in law. For a detailed procedure for the bidding of contracts, see AR 3311 - Bids.

The contract shall be entered into on a competitive bid basis pursuant to Public Contract Code 20111 or through the issuance of a Request for Proposal. (Education Code 35182.5)

(cf. 3311 - Bids)

Note: Pursuant to Education Code 35182.5, the Board may satisfy the public hearing requirement described in the following paragraph by either (1) a review of the contract at a public hearing by a Child Nutrition and Physical Activity Advisory Committee established pursuant to Education Code 49433 that has contract review authority for the sale of food and beverages, or (2) an annual public hearing to review and discuss existing and potential contracts for the sale of food and beverages on campuses, including food and beverages sold as full meals, as fundraisers, through competitive sales, and through vending machines. The following paragraph may be revised to reflect district practice.

The Board shall not enter into or renew a contract that grants exclusive or nonexclusive advertising or sale of carbonated beverages, non-nutritious beverages, or non-nutritious food until parents/guardians, students, and members of the public have had an opportunity to comment on the contract at a public hearing held during a regularly scheduled board meeting or as otherwise authorized by Education Code 35182.5. The Board shall clearly, and in a manner recognizable to the general public, identify in the agenda the contract to be discussed at the meeting. (Education Code 35182.5)

(cf. 9322 - Agendas/Meeting Materials) (cf. 9323 - Meeting Conduct)

The public hearing shall include but not be limited to a discussion of the nutritional value of food and beverages sold within the district; the availability of fresh fruit, vegetables, and grains in school meals and snacks, including locally grown and organic produce; the amount of fat, sugar, and additives in the food and beverages discussed; and barriers to student participation in school breakfast and lunch programs. (Education 35182.5)

(cf. 5030 - Student Wellness)

The contract shall be accessible to the public and may not include a confidentiality clause that would prevent the district or a district school from making any part of the contract public. (Education Code 35182.5)

(cf. 1340 - Access to District Records)

Contracts for Electronic Products or Services

Note: Education Code 35182.5 prohibits districts or schools from entering into contracts for electronic products or services that require dissemination of advertising to students, unless the following conditions are satisfied. This section should be modified to reflect any additional requirements added by the district.

The Board shall not enter into a contract for electronic products or services that requires the dissemination of advertising to students, unless the Board: (Education Code 35182.5)

1. Enters into the contract at a noticed, public hearing of the Board.

(cf. 9320 - Meetings and Notices)

2. Makes a finding that the electronic product or service is or would be an integral component of the education of students.

(cf. 0440 - District Technology Plan) (cf. 6162.7 - Use of Technology in Instruction)

3. Makes a finding that the district cannot afford to provide the electronic product or service unless it contracts to permit dissemination of advertising to students.

(cf. 1325 - Advertising and Promotion)

- 4. As part of the district's normal, ongoing communication to parents/guardians, provides written notice that the advertising will be used in the classroom or other learning center.
- 5. Offers parents/guardians the opportunity to request in writing that their child not be exposed to the program that contains the advertising. Any request shall be honored for the school year in which it is submitted, or longer if specified, but may be withdrawn by the parents/guardians at any time.

Legal Reference:

EDUCATION CODE

200-262.4 Prohibition of discrimination on the basis of

ser

14505 Provisions required in contracts for audits

17595-17606 Contracts

35182.5 Contract prohibitions

45103.5 Contracts for management consulting service

related to food service

49431-49431.5 Nutritional standards

CODE OF CIVIL PROCEDURE

685.010 Rate of interest

GOVERNMENT CODE

12990 Nondiscrimination and compliance employment programs

53260 Contract provision re maximum cash settlement

53262 Ratification of contracts with administrative of-

ficers

LABOR CODE

1775 Penalties for violations

1810-1813 Working hours

PUBLIC CONTRACT CODE

4100-4114 Subletting and subcontracting fair practices

7104 Contracts for excavations; discovery of hazardous

waste

7106 Noncollusion affidavit

20111 Contracts over \$50,000; contracts for construc-

tion; award to lowest responsible bidder

20104.50 Construction Progress Payments

22300 Performance retentions

UNITED STATES CODE, TITLE 20

1681-1688 Title IX, discrimination

Management Resources:

CSBA PUBLICATIONS

Student Wellness: A Healthy Food and Physical Activity

Policy Resource Guide, rev. 2005

WEB SITES

CSBA: http://www.csba.org

California Association of School Business Officials: http://

www.casbo.org

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Policy Reference UPDATE Service

Business and Noninstructional Operations BP 3550

FOOD SERVICE/CHILD NUTRITION PROGRAM

Note: The following policy may be revised as desired to reflect district practice. For food sales outside the district's food service program (e.g., by student and adult organizations, through vending machines, or at student stores), see BP/AR 3554 - Other Food Sales.

The Governing Board recognizes that students need adequate, nourishing food in order to grow, learn, and maintain good health. Foods and beverages available through the district's food service program shall:

1. Be carefully selected so as to contribute to students' nutritional well-being and the prevention of disease

Note: The Federal Child Nutrition and Women, Infants and Children (WIC) Reauthorization Act of 2004 (42 USC 1751 Note) mandates any district participating in the National School Lunch Program (42 USC 1751-1769) or the Child Nutrition Act of 1966 (42 USC 1771-1791), including the School Breakfast Program, to adopt a districtwide student wellness policy by the beginning of the school year after July 2006; see BP 5030 - Student Wellness for language fulfilling this mandate.

- 2. Meet or exceed nutritional standards specified in law and administrative regulation
- 3. Be prepared in ways that will appeal to students, retain nutritive quality, and foster lifelong healthful eating habits
- 4. Be served in age-appropriate portions
- 5. Be sold at reasonable prices
- (cf. 3312 Contracts)
- (cf. 3551 Food Service Operations/Cafeteria Fund)
- (cf. 3553 Free and Reduced Price Meals)
- (cf. 3554 Other Food Sales)
- (cf. 5030 Student Wellness)
- (cf. 5141.32 Health Screening for School Entry)
- (cf. 6142.8 Comprehensive Health Education)

Note: Pursuant to 7 CFR 210.12, districts participating in the National School Lunch Program are encouraged to promote activities to involve students and parents/guardians in the program. The following optional paragraph reflects this intent and should be revised to reflect district practice.

The Superintendent or designee shall develop strategies designed to encourage the participation of students and parents/guardians in the selection of foods of good nutritional quality for school menus.

The Board desires to provide students with adequate time and space to eat meals. To the extent possible, school and transportation schedules shall be designed to encourage participation in school meal programs.

The Superintendent or designee shall periodically review the adequacy of school facilities for cafeteria eating and food preparation. School cafeterias shall comply with the sanitation and safety requirements of the California Uniform Retail Food Facilities Law as set forth in Health and Safety Code 113700-114455.

(cf. 1312.4 - Williams Uniform Complaint Procedures)

(cf. 3517- Facilities Inspection)

(cf. 7110 - Facilities Master Plan)

Professional development for food service personnel shall include nutrition education and safe food handling.

(cf. 4231 - Staff Development)

Note: The following optional paragraph reflects legislative intent expressed in Education Code 49431 and 49431.2, as amended and added by SB 12 (Ch. 235, Statutes of 2005), that the Board annually review the district's compliance with nutrition standards.

The Superintendent or designee shall annually report to the Board regarding the district's compliance with state and federal nutrition standards for foods and beverages.

Legal Reference:

EDUCATION CODE

38080-38103 Cafeteria, establishment and use

45103.5 Contracts for management consulting services;

restrictions

49430-49436 Pupil Nutrition, Health, and Achievement Act

of 2001

49490-49493 School breakfast and lunch programs

49500-49505 School meals

49510-49520 Nutrition

49530-49536 Child Nutrition Act

49540-49546 Child care food program

49547-49548.3 Comprehensive nutrition services

49550-49560 Meals for needy students

49565-49565.8 California Fresh Start pilot program

49570 National School Lunch Act

HEALTH AND SAFETY CODE

113700-114455 California Uniform Retail Food Facilities Law

CODE OF REGULATIONS, TITLE 5

15510 Mandatory meals for needy students

15530-15535 Nutrition education

15550-15565 School lunch and breakfast programs

UNITED STATES CODE, TITLE 42

1751-1769h School lunch programs, including:

1751 Note Local wellness policy

1771-1791 Child nutrition, especially:

1773 School breakfast program

U.S. CODE OF FEDERAL REGULATIONS, TITLE 7

210.1-210.31 National School Lunch Program

220.1-220.21 National School Breakfast Program

Management Resources:

CSBA POLICY BRIEFS

The New Nutrition Standards: Implications for Student Wellness

Policies, November 2005

CSBA PUBLICATIONS

Student Wellness: A Healthy Food and Physical Activity Policy

Resource Guide, rev. 2005

CENTERS FOR DISEASE CONTROL PUBLICATIONS

School Health Index for Physical Activity and Healthy Eating: A

Self-Assessment and Planning Guide for Elementary and Middle/

High Schools, 2004

NATIONAL ASSOCIATION OF STATE BOARDS OF

EDUCATION PUBLICATIONS

Fit, Healthy and Ready to Learn, 2000

U.S. DEPARTMENT OF AGRICULTURE PUBLICATIONS

Dietary Guidelines for Americans, 2005

Team Nutrition, Food and Nutrition Services, Changing the

Scene, Improving the School Nutrition Environment: A Guide to

Local Action, 2000

WEB SITES

CSBA: http://www.csba.org

California Department of Education, Nutrition Services Division:

http://www.cde.ca.gov/ls/nu

California Healthy Kids Resource Center: http://www.california-

healthykids.org

California Project LEAN (Leaders Encouraging Activity and

Nutrition): http://www.CaliforniaProjectLEAN.org

Centers for Disease Control and Prevention: http://www.cdc.gov

Dairy Council of California: http://www.dairycouncilofca.org National Association of State Boards of Education: http://www.

nasbe.org

National School Boards Association: http://www.nsba.org

School Nutrition Association: http://www.schoolnutrition.org

 $U.S.\ Dept.\ of\ Agriculture,\ Food\ and\ Nutrition\ Information\ Center$

(FNIC): http://www.nal.usda.gov/fnic

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Policy Reference UPDATE Service

CSBA Sample Administrative Regulation

Business and Noninstructional Operations AR 3550

FOOD SERVICE/CHILD NUTRITION PROGRAM

Note: The following administrative regulation applies to food sales through the district's food service program. For food sales outside the district's food service program (e.g., by student and adult organizations, through vending machines, or at student stores), see BP/AR 3554 - Other Food Sales.

Nutritional Standards for Foods

Note: The following paragraph is for use by districts that participate in the National School Lunch or School Breakfast Program pursuant to 42 USC 1757 and 1773. If desired, such districts may choose to revise the following paragraph to apply at all district schools, even those that do not participate in the federal meal program(s).

Schools participating in the National School Lunch Program or School Breakfast Program pursuant to 42 USC 1751-1769h and 1771-1791 shall meet the nutritional standards, as well as the nutrient and calorie levels for students of each age or grade group, required by 7 CFR 210.10 and 220.8. (42 USC 1758, 1773)

(cf. 3533 - Free and Reduced Price Meals)

Note: The following paragraph is for use by all districts. The nutritional standards contained in Education Code 38085 are applicable until July 1, 2007, at which time they will be replaced by the nutritional standards in Education Code 49431 and 49431.2, as amended and added by SB 12 (Ch. 235, Statutes of 2005). At their discretion, districts may choose to adopt the standards in Education Code 49431 and 49431.2 prior to July 1, 2007; such districts should modify the following section to reflect district practice.

Districts that do not participate in the National School Lunch Program (42 USC 1751-1769) or the Child Nutrition Act of 1966 (42 USC 1771-1791), including the School Breakfast Program, may delete the reference to federally reimbursable meal programs in the following paragraph.

Until July 1, 2007, for foods not reimbursed through the federally reimbursable meal programs, a minimum of 50 percent of the food sold by the district on school grounds during regular school hours shall be from the nutritious foods listed in Education Code 38085. (Education Code 38085)

(cf. 3554 - Other Food Sales) (cf. 5030 - Student Wellness)

Note: Items #1-4 below are for use by districts maintaining elementary schools. Education Code 49431, as amended by SB 12 (Ch. 235, Statutes of 2005), establishes nutritional standards for foods sold at elementary schools, effective July 1, 2007. On that date, these standards will supersede the requirements of Education Code 38085.

Beginning July 1, 2007, the only foods that may be sold to a student at an elementary school during the school day are full meals and individually sold portions of nuts, nut butters, seeds, eggs, cheese packaged for individual sale, fruit, vegetables that have not been deep fried, and legumes. An individually sold dairy or whole grain food item may be sold if it meets all of the following criteria: (Education Code 49431)

- 1. Not more than 35 percent of its total calories is from fat.
- 2. Not more than 10 percent of its total calories is from saturated fat.
- 3. Not more than 35 percent of its total weight is composed of sugar, including naturally occurring and added sugar.
- 4. Its total calories do not exceed 175 calories.

Note: Items #1-2 below are for use by districts maintaining middle, junior high, or high schools and should be revised to reflect the type(s) of schools maintained. Education Code 49431.2, as added by SB 12 (Ch. 235, Statutes of 2005), establishes standards which will supersede the requirements of Education Code 38085 effective July 1, 2007.

Beginning July 1, 2007, foods sold to students in middle schools, junior high schools, and high schools, except foods served as part of a federally reimbursable meal program, shall meet the following standards: (Education Code 49430, 49431.2)

- 1. Each entree item shall:
 - a. Not exceed 400 calories
 - b. Contain no more than four grams of fat per 100 calories
 - c. Be categorized as an entree item in the National School Lunch or School Breakfast program

- 2. For each snack item that supplements a meal:
 - a. Not more than 35 percent of its total calories shall be from fat, excluding nuts, nut butters, seeds, eggs, cheese packaged for individual sale, fruits, vegetables that have not been deep fried, or legumes.
 - b. Not more than 10 percent of its total calories shall be from saturated fat, excluding eggs or cheese packaged for individual sale.
 - c. Not more than 35 percent of its total weight shall be composed of sugar, including naturally occurring and added sugar, excluding fruits or vegetables that have not been deep fried.
 - d. Its total calories shall not exceed 250 calories.

Note: The following optional paragraph reflects the purposes of the California Fresh Start Pilot Program, Education Code 49565-49565.8, added by SB 281 (Ch. 236, Statutes of 2005), but may also but used or adapted by districts that do not participate in the program. The program promotes the consumption of nutritious fruits and vegetables by school-age children and provides reimbursement funds to encourage schools to provide K-12 students with fruits and vegetables that have not been deep fried.

The district's food service program shall give priority to serving unprocessed foods and ingredients and fresh fruits and vegetables that have not been deep fried.

Nutritional Standards for Beverages

Note: Education Code 49431.5, as amended by SB 965 (Ch. 237, Statutes of 2005), establishes nutritional standards for beverages for all grade levels.

Items #1-4 below are for use by districts maintaining elementary schools.

The only beverages that may be sold to elementary students, regardless of the time of day, are: (Education Code 49431.5)

- 1. Fruit-based drinks that are composed of no less than 50 percent fruit juice and have no added sweetener
- 2. Vegetable-based drinks that are composed of no less than 50 percent vegetable juice and have no added sweetener
- 3. Drinking water with no added sweetener
- 4. Milk that is 1-percent fat, 2-percent fat, or nonfat; soy milk, rice milk, or other similar nondairy milk

Note: Items #1-5 below are for use by districts that maintain middle schools or junior high schools.

The only beverages that may be sold to middle school or junior high school students from one-half hour before the start of the school day until one-half hour after the end of the school day are: (Education Code 49431.5)

- 1. Fruit-based drinks that are composed of no less than 50 percent fruit juice and have no added sweetener
- 2. Vegetable-based drinks that are composed of no less than 50 percent vegetable juice and have no added sweetener
- 3. Drinking water with no added sweetener
- 4. Milk that is 1-percent fat, 2-percent fat, or nonfat; soy milk, rice milk, or other similar nondairy milk
- 5. Electrolyte replacement beverages that contain no more than 42 grams of added sweetener per 20-ounce serving

Note: As amended by SB 965 (Ch. 237, Statutes of 2005), Education Code 49431.5 restricts the types of beverages that may be sold at high schools. These requirements are phased in beginning July 1, 2007 through July 1, 2009. If the district chooses to implement these standards prior to these dates, it should modify the following paragraph accordingly.

Beginning July 1, 2007, at least 50 percent of the beverages sold to high school students from one-half hour before the start of the school day until one-half hour after the end of the school day shall be those specified in items #1-5 above. Beginning July 1, 2009, all of the beverages sold to high school students from one-half hour before the start of the school day until one-half hour after the end of the school day shall meet the standards specified in items #1-5 above. (Education Code 49431.5)

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Policy Reference UPDATE Service

Business and Noninstructional Operations BP 3553

FREE AND REDUCED-PRICE MEALS

Note: Education Code 49550-49560 require the district to provide at least one nutritionally adequate meal during each school day to students who meet federal eligibility criteria for free and reduced price meals. The district may seek state reimbursement pursuant to Education Code 49490-49494 and federal reimbursement via the National School Lunch or School Breakfast Programs pursuant to 42 USC 1757 and 1773.

The Governing Board recognizes that adequate nutrition is essential to child development and learning and that some families may be unable to provide breakfast and lunch for their children. In accordance with law, the district shall provide nutritionally adequate free and reduced price meals for students whose families meet federal eligibility criteria.

The Superintendent or designee shall recommend for Board approval a plan that ensures that students eligible to receive free or reduced price meals and milk are not treated differently from other students or easily identified by their peers.

(cf. 0410 - Nondiscrimination in District Programs and Activities) (cf. 5145.3 - Nondiscrimination/Harassment)

Upon approval of the Board, this plan shall be submitted to the California Department of Education for approval. (Education Code 49557)

All applications and records related to eligibility for the free or reduced price meal program shall be confidential except as provided by law. (Education Code 49558)

Note: Education Code 49558 authorizes Boards to allow district employees to use the name and eligibility status of students participating in the free and reduced price meal program for the purpose of disaggregation of academic achievement data. However, in accordance with federal guidelines, free and reduced price meal records may be shared for this purpose only when it is in connection with either Title I, including elements of the No Child Left Behind Act (NCLB), or the National Assessment of Educational Progress (NAEP). As amended by AB 1636 (Ch. 321, Statutes of 2004), Education Code 49558 also allows districts with schools in program improvement, pursuant to 20 USC 6316 (No Child Left Behind Act), to use this information to identify students eligible for school choice and supplemental educational services. See BP/AR 0520.2 - Title I Program Improvement Schools. Only the name and meal eligibility status of a student may be shared for this purpose. Information regarding a student's participation in the program (e.g., household size and income, the record of meals served to that student) is confidential.

Districts wishing to use free and reduced price meal records for these purposes are mandated to adopt a policy authorizing employee access. See the accompanying administrative regulation for additional language implementing this mandate.

In accordance with law, the Board authorizes designated employees to use individual records pertaining to student eligibility for any free and reduced price meal program for the purpose of: (Education Code 49558)

- 1. Disaggregation of academic achievement data
- 2. Identification of students eligible for school choice and supplemental educational services in any school identified for program improvement

(cf. 0520.2 -Title I Program Improvement Schools)

(cf. 5125 - Student Records)

(cf. 6162.51 - Standardized Testing and Reporting Program)

(cf. 6171 - Title I Programs)

(cf. 6190 - Evaluation of the Instructional Program)

Note: Pursuant to Education Code 49558, districts may release information on the School Lunch Program application to the local agency that determines eligibility under the Medi-Cal program under the conditions described below.

The Board further authorizes the release of information on the school lunch program application to the local agency that determines Medi-Cal program eligibility, provided that the student is approved for free meals and the parent/guardian consents to the sharing of information as provided by Education Code 49557.2.

(cf. 5141.6 - Student Health and Social Services)

Legal Reference:

EDUCATION CODE

48980 Notice at beginning of term

49490-49494 School breakfast and lunch programs

49500-49505 School meals

49510-49520 Nutrition

49530-49536 Child Nutrition Act of 1974

49547-49548.3 Comprehensive nutrition service

49550-49560 Meals for needy students

CODE OF REGULATIONS, TITLE 5

15510 Mandatory meals for needy students

15530-15535 Nutrition education

15550-15565 School lunch and breakfast programs

UNITED STATES CODE, TITLE 20

1232g Federal Educational Rights and Privacy Act 6301-6514 Title I programs

UNITED STATES CODE, TITLE 42

1751-1769 National lunch programs

1771-1791 Child nutrition

CODE OF FEDERAL REGULATIONS, TITLE 7

245.1-245.13 Determination of eligibility for free and reduced price meals

Management Resources:

CDE LEGAL ADVISORIES

0325.98 Education Code Section 49558 LO: 1-98

CSBA PUBLICATIONS

Healthy Food Policy Resource Guide, 2003

USDA PUBLICATIONS

Team Nutrition, Food and Nutrition Services, Changing the Scene, Improving the School Nutrition Environment: A Guide to Local Action, 2000

WEB SITES

CSBA: http://www.csba.org

California Department of Education, Nutrition Division:

http://www.cde.ca.gov/ls/nu

 ${\it California\ Healthy\ Kids\ Resource\ Center:\ http://www.}$

californiahealthykids.org

California Project LEAN: http://www.CaliforniaPro-

jectLEAN.org

U.S. Department of Agriculture, Food and Nutrition Ser-

vice: http://www.fns.usda.gov/cnd

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Policy Reference UPDATE Service

CSBA Sample Administrative Regulation

Business and Noninstructional Operations AR 3553

FREE AND REDUCED-PRICE MEALS

The district's plan for students receiving free or reduced-price meals shall ensure the following: (Education Code 49557)

- The names of the students shall not be published, posted, or announced in any manner, or used for any purpose other than the National School Lunch and School Breakfast Programs, unless otherwise provided by law.
- 2. There shall be no overt identification of any of the students by the use of special tokens or tickets or by any other means.
- 3. The students shall not be required to work for their meals or for milk.
- 4. The students shall not be required to use a separate dining area, go through a separate entrance, or consume their meals or milk at a different time.

When more than one lunch, breakfast, or type of milk is offered, the students shall have the same choice of meals or milk as is available to those students who pay the full price. (Education Code 49557: 7 CFR 245.8)

(cf. 0410 - Nondiscrimination in District Programs and Activities) (cf. 5145.3 - Nondiscrimination/Harassment)

Applications

An application form for free or reduced-price meals shall be distributed to all parents/guardians at the beginning of each school year, together with information about eligibility standards, application procedures, and appeal procedures. This form and information shall also be provided whenever a new student is enrolled. (Education Code 49520, 48980; 7 CFR 245.5)

(cf. 5145.6 - Parental Notifications)

Applications for free or reduced-price meal programs shall be available to students at all times during the regular school day and shall contain the following statements: (Education Code 49557; 7 CFR 245.5)

- 1. Applications for free or reduced-price meals may be submitted at any time during a school day.
- 2. Students participating in the National School Lunch and School Breakfast Programs will not be overtly identified by the use of special tokens, special tickets, special serving lines, separate entrances, separate dining areas, or by any other means.

Note: Items #1-6 below are optional and should be deleted or revised to reflect district practice. Education Code 49557.2 authorizes, but does not require, districts to incorporate the following information into the School Lunch Program application packet or notification of eligibility.

The application packet also shall contain:

- A notification that, if a student qualifies for free or reduced-price meals, then he/she may qualify for free or reduced-cost health insurance coverage
- 2. A request for the applicant's consent for the student, if eligible for free school lunches, to participate in the Medi-Cal program and to have the information on the school lunch application shared with the local agency that determines eligibility under the Medi-Cal program
- 3. A notification that the district will not forward the application to the agency that determines Medi-Cal eligibility without the parent/guardian's consent
- 4. A notification that the application is confidential and, with the exception of forwarding the information for use in health program enrollment, will not be shared with any other governmental agency for any purpose other than the administration of the Medi-Cal program
- 5. A notification that the application information will be used only by the state and local agencies that administer the Medi-Cal program and will not be shared with other government agencies, including the federal Department of Homeland Security and the Social Security Administration, except as necessary to verify information provided by the applicant
- 6. Information regarding the Medi-Cal program, including available services, program requirements, rights and responsibilities, and privacy and confidentiality requirements

(cf. 5141.6 - Student Health and Social Services)

Confidentiality/Release of Records

Note: The following section is for use by districts that have adopted a policy, pursuant to Education Code 49558, allowing district employees to use individual records of students eligible for the free and reduced-price meal program for the purpose of disaggregation of academic achievement data and, as amended by AB 1636 (Ch. 321, Statutes of 2004), for the identification of students eligible for public school choice and supplemental educational services, as required for districts with schools in program improvement pursuant to 20 USC 6316, the No Child Left Behind Act. See the accompanying Board policy and BP/AR 0520.2 - Title I Program Improvement Schools.

In Legal Advisory LO: 1-98 (0325.98), the California Department of Education recommends that the Board designate by name or job title the employee(s) authorized to use records for these purposes. Districts should identify the specific title of the designated employee(s) in the space provided below, such as Test Site Coordinator or Title I Coordinator.

The Governing Board designates the following district employee to use individual records pertaining to student participation in the free or reduced-price meal program for the purpose of disaggregation of academic achievement data or for the identification of students in any program improvement school eligible for school choice and supplemental educational services pursuant to 20 USC 6316:

(title or position)

In using the records for such purposes, the following conditions shall be satisfied: (Education Code 49558)

1. No individual indicators of participation in the free or reduced-price meal program shall be maintained in the permanent records of any student if not otherwise allowed by law.

(cf. 5125 - Student Records)

2. Information regarding individual student participation in the free or reduced-price meal program shall not be publicly released.

(cf. 4119.23/4219.23/4319.23 - Unauthorized Release of Confidential/Privileged Information)

3. All other confidentiality provisions required by law shall be met.

Note: AB 1636 (Ch. 321, Statutes of 2004) amended Education Code 49558 to require the following additional confidentiality provision.

4. Information collected regarding individual students certified to participate in the free or reduced-price meal program shall be destroyed when no longer needed for its intended purpose.

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Policy Reference UPDATE Service

Business and Noninstructional Operations BP 3554

OTHER FOOD SALES

Note: The following policy addresses food and beverage sales outside of the district's food service/cafeteria program, including the use of vending machines and student stores as well as food sales on school premises by student and/or adult organizations. Pursuant to 7 CFR 210.11 and 220.12, districts participating in the National School Lunch or School Breakfast Programs are mandated to establish rules or regulations to control the sale of food in competition with the breakfast or lunch programs. In addition, the Federal Child Nutrition and Women, Infants and Children (WIC) Reauthorization Act of 2004 (42 USC 1751 Note) mandates that each district participating in the National School Lunch program (42 USC 1751-1769) or the Child Nutrition Act of 1966 (42 USC 1771-1791), including the School Breakfast program, adopt, by the beginning of the school year after July 2006, a districtwide student wellness policy. See BP 5030 - Student Wellness for language fulfilling the student wellness mandate.. For policy addressing sales by food service or cafeteria programs, see BP/AR 3550 - Food Service/Child Nutrition Program.

5 CCR 15500 and 15501 require the Board to approve the sale of food items by student organizations. The Board may delegate this authority to the Superintendent or designee as provided in the following paragraph. Other conditions regarding the nutritional quality of foods and beverages, the number of items sold, and the preparation of the food must also be satisfied; see the accompanying administrative regulation.

The Governing Board believes that foods and beverages sold to students on school campuses during the school day should promote student health and reduce childhood obesity. Any food sales conducted outside the district's food service program shall meet nutritional standards specified in law, Board policy, and administrative regulations and shall not reduce student participation in the district's food service program.

(cf. 5030 - Student Wellness)

The Board authorizes the Superintendent or designee to approve the sale of foods and beverages outside the district's food service program, including sales by student or adult organizations, sales through vending machines, and/or sales at secondary school student stores for fundraising purposes.

(cf. 3550 - Food Service/Child Nutrition Program)

(cf. 3551 - Food Service Operations/Cafeteria Fund)

(cf. 3553 - Free and Reduced Price Meals)

Food sales are prohibited during school hours, and within one hour before and after school hours, unless the organization is legally organized as a nonpartisan, charitable organization, the purpose of the solicitation is nonpartisan and charitable, and the solicitation has been approved in accordance with Board policy. (Education Code 51520)

(cf. 1230 - School-Connected Organizations) (cf. 1321 - Solicitations of Funds from and by Students)

When vending machines are sponsored by the district or a student or adult organization, the Superintendent or designee shall determine how and where vending machines may be placed at school sites, district offices, or other school facilities.

(cf. 3312 - Contracts)

Legal Reference:

EDUCATION CODE

38085 Sale of specified food items

48931 Authorization and sale of food

49430-49436 Pupil Nutrition, Health, and Achievement Act of 2001

51520 School premises; prohibited solicitations

CODE OF REGULATIONS, TITLE 5

15500 Food sales in elementary schools

15501 Sales in high schools and junior high schools

HEALTH AND SAFETY CODE

113700-114455 California Uniform Retail Food Facilities Law, including:

114200-114245 Vending machines

UNITED STATES CODE, TITLE 42

1751-1769h National School Lunch Act, including:

1751 Note Local wellness policy

1771-1791 Child nutrition

CODE OF FEDERAL REGULATIONS, TITLE 7

210.1-210.31 National School Lunch Program

220.1-220.21 National School Breakfast Program

Management Resources:

CSBA POLICY BRIEFS

The New Nutrition Standards: Implications for Student Wellness Policies. November 2005

CSBA PUBLICATIONS

Student Wellness: A Healthy Food and Physical Activity Policy

Resource Guide, rev. 2005

CENTERS FOR DISEASE CONTROL PUBLICATIONS

School Health Index for Physical Activity and Healthy Eating: A Self-Assessment and Planning Guide for Elementary and Middle/ High Schools, 2000

FISCAL CRISIS AND MANAGEMENT ASSISTANCE

TEAM PUBLICATIONS

Associated Student Body Accounting Manual and Desk Reference, 2002

NATIONAL ASSOCIATION OF STATE BOARDS OF EDU-

CATION PUBLICATIONS

Fit, Healthy and Ready to Learn, 2000

U.S. DEPARTMENT OF AGRICULTURE PUBLICATIONS

Team Nutrition, Food and Nutrition Services, Changing the

Scene, Improving the School Nutrition Environment: A Guide to Local Action, 2000

WEB SITES

CSBA: http://www.csba.org

California Association of School Business Officials: http://www.casbo.org

California Department of Education, Nutrition Services Division: http://www.cde.ca.gov/ls/nu

California Healthy Kids Resource Center: http://www.californiahealthykids.org

California Project LEAN (Leaders Encouraging Activity and

Nutrition): http://www.CaliforniaProjectLEAN.org

Dairy Council of California: http://www.dairycouncilofca.org Fiscal Crisis and Management Assistance Team: http://www. fcmat.org

National Association of State Boards of Education (NASBE): http://www.nasbe.org

National School Boards Association: http://www.nsba.org U.S. Dept. of Agriculture, Food and Nutrition Information Center (FNIC): http://www.nal.usda.gov/fnic

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Policy Reference UPDATE Service

CSBA Sample Administrative Regulation

Business and Noninstructional Operations AR 3554

OTHER FOOD SALES

Nutritional Standards for Foods and Beverages

Note: Nutritional standards for food items currently in effect are contained in Education Code 38085. However, beginning July 1, 2007, these standards will be replaced by the standards specified in Education Code 49431 for elementary schools and Education Code 49431.2 for middle, junior high, and high schools, as amended and added by SB 12 (Ch. 235, Statutes of 2005). Education Code 49431, as amended, no longer makes compliance with the standards contingent upon state funding.

Nutritional standards for beverages sold to students are contained in Education Code 49431.5. SB 965 (Ch. 237, Statutes of 2005) amended Education Code 49431.5 to modify the list of allowable beverages and to establish standards for high schools which will be phased in between July 1, 2007 and July 1, 2009.

At their discretion, districts may choose to adopt the nutrition standards for foods or beverages in Education Code 49431, 49431.2, and 49431.5 prior to July 1, 2007. Such districts should modify the following section to reflect district practice.

See AR 3550 - Food Service/Child Nutrition Program for further information regarding these standards.

Food sales outside the district's food service program shall comply with the nutritional standards specified in Education Code 38085. Beginning July 1, 2007, food sales outside the district's food service program shall comply with the standards described in Education Code 49431 for elementary schools and Education Code 49431.2 for middle schools, junior high schools, and high schools. (Education Code 38085, 49431, 49431.2)

Beverage sales shall be subject to the nutritional standards specified in Education Code 49431.5. (Education Code 49431.5)

- (cf. 1230 School-Connected Organizations)
- (cf. 1321 Solicitations of Funds from and by Students)
- (cf. 3550 Food Service/Child Nutrition Program)
- (cf. 5030 Student Wellness)

Note: Items #1-2 below are for use by districts maintaining elementary schools.

When the food and beverage standards in Education Code 49431 and 49431.5 are effective, the sale of foods or beverages that do not comply with those standards may be permitted at an elementary school, as part of a fundraising event, only when the items are sold by students of the school and the sale meets one of the following conditions: (Education Code 49431, 49431.5)

- 1. It takes place off and away from school premises.
- 2. It takes place at least one-half hour after the end of the school day.

Note: The remainder of this section is for use by districts maintaining middle schools, junior high schools, and/or high schools and should be revised as necessary to reflect the type(s) of schools in the district. Education Code 49431.2, as added by SB 12 (Ch. 235, Statutes of 2005), specifies circumstances under which food sales that do not meet nutritional standards may be permitted, as provided in the following paragraph.

The sale of food items that do not comply with the nutritional standards in Education Code 49431.2, when effective, may be permitted at a middle school, junior high school, or high school in any of the following circumstances: (Education Code 49431.2)

- 1. The sale takes place off and away from school premises.
- 2. The sale takes place on school premises at least one-half hour after the end of the school day.
- 3. The sale occurs during a school-sponsored student activity after the end of the school day.

Beverage sales that do not comply with the nutritional standards in law may be permitted at a middle school or junior high school as part of a school event under the following circumstances: (Education Code 49431.5)

- 1. The sale occurs during a school-sponsored event and takes place at the location of the event at least one-half hour after the end of the school day.
- 2. Vending machines, student stores, and cafeterias are used later than one-half hour after the end of the school day.

Additional Requirements for Schools Participating in the National School Lunch or Breakfast Program

Note: In addition to the requirements in the previous section, schools participating in the National School Lunch or Breakfast Programs, pursuant to 42 USC 1757 and 1773, are subject to the requirements described below. This section may be adapted for use by districts not participating in the federal meal programs at their discretion.

The sale of foods during meal periods in food service areas shall be allowed only if all income from the sale, including the sale of approved foods or drinks from vending machines, accrues to the benefit of the school, the school food service program, or the student organization(s) sponsoring the sale. (7 CFR 210.11, 220.12)

Note: 7 CFR 210.11 and 7 CFR 220.12 mandate that district rules and regulations prohibit the sale of foods of minimal nutritional value, as listed in Appendix B, Part 210, or Appendix B, Part 220, of the Code of Federal Regulations, in food service areas during breakfast and lunch periods.

No foods of minimal nutritional value, as listed in 7 CFR 210, Appendix B, and 7 CFR 220, Appendix B, shall be sold in food service areas during breakfast and lunch periods. (7 CFR 210.11, 220.12)

Note: Items #1-7 below are for use by districts that maintain any of grades K-8.

The Superintendent or designee shall not permit the sale of foods by student organizations in a school with any of grades K-8 that is participating in the National School Breakfast or Lunch Program, except when all of the following conditions are met: (5 CCR 15500)

- 1. The student organization may sell one food item per sale.
- 2. The specific nutritious food item is approved by the Superintendent or designee.
- 3. The sale does not begin until after the close of the regularly scheduled midday food service period.
- 4. The sale during the regular school day is not of food items prepared on the premises.
- 5. There are no more than four such sales per year per school.
- 6. The food sold is a dessert-type food, such as pastry, ice cream, or fruit.

7. The food sold is not one sold in the district's food service program at that school during that school day.

(cf. 3553 - Free and Reduced Price Meals)

Note: Items #1-4 below are for use by districts that maintain high schools or junior high schools.

In high schools and junior high schools, a student organization may be approved to sell food items during or after the school day if all of the following conditions are met: (5 CCR 15501)

- Only one student organization conducts a food sale on a given school day and the organization sells no more than three types of food or beverage items, except that up to four days during the school year may be designated on which any number of organizations may conduct the sale of any food items.
- 2. The specific nutritious food items are approved by the Superintendent or designee.
- 3. Food items sold during the regular school day are not prepared on the premises.
- 4. The food items sold are not those sold in the district's food service program at that school during that school day.

(3/03 11/03) 11/05

Policy Reference UPDATE Service

Students BP 5030

STUDENT WELLNESS

Note: The Federal Child Nutrition and Women, Infants and Children (WIC) Reauthorization Act of 2004 (42 USC 1751 Note, added by P.L. 108-265, Section 204) mandates each district participating in the National School Lunch Program (42 USC 1751-1769) or the Child Nutrition Act of 1966 (42 USC 1771-1791), including the School Breakfast Program, to adopt a districtwide school wellness policy with specified components by the beginning of the school year after July 2006. The following policy fulfills this mandate and should be revised to reflect district practice. Districts should consider reviewing other related policies for consistency, including BP 3312 - Contracts, BP/AR 3550 - Food Service/ Child Nutrition Program, BP/AR 3553 - Free and Reduced Price Meals, BP/AR 3554 - Other Food Sales, BP/AR 6142.7 - Physical Education, and BP/AR 6142.8 - Comprehensive Health Education.

CSBA's Student Wellness: A Healthy Food and Physical Activity Policy Resource Guide summarizes research on the relationship between nutrition and physical activity and student achievement, provides worksheets for policy development, and contains other resources that may be useful in the development of the wellness policy. In addition, the Note in 42 USC 1751 requires the U.S. Secretary of Agriculture to provide information and technical assistance through the Centers for Disease Control and Prevention (CDC).

The following paragraph links student wellness with the components of a coordinated school health approach recommended in the California Department of Education's (CDE) Health Framework for California Public Schools, and may be revised to reflect district practice.

The Governing Board recognizes the link between student health and learning and desires to provide a comprehensive program promoting healthy eating and physical activity for district students. The Superintendent or designee shall build a coordinated school health system that supports and reinforces health literacy through health education, physical education, health services, nutrition services, psychological and counseling services, health promotion for staff, a safe and healthy school environment, and parent/guardian and community involvement.

- (cf. 0000 Vision)
- (cf. 0200 Goals for the School District)
- (cf. 3513.3 Tobacco-Free Schools)
- (cf. 3514 Environmental Safety)
- (cf. 5131.6 Alcohol and Other Drugs)
- (cf. 5131.61 Drug Testing)
- (cf. 5131.62 Tobacco)
- (cf. 5131.63 Steroids)
- (cf. 5141 Health Care and Emergencies)
- (cf. 5141.23 Infectious Disease Prevention)
- (cf. 5141.3 Health Examinations)
- (*cf.* 5141.31 *Immunizations*)
- (cf. 5141.32 Health Screening for School Entry)
- (cf. 5141.6 Student Health and Social Services)
- (cf. 5142 Safety)
- (cf. 5146 Married/Pregnant/Parenting Students)
- (cf. 6142.1 Sexual Health and HIV/AIDS Prevention Education)
- (cf. 6164.2 Guidance/Counseling Services)

School Health Council/Committee

Note: Pursuant to the Note in 42 USC 1751, the district wellness policy must be developed with the involvement of parents/guardians, students, school food service professionals, school administrators, Board representatives, and members of the public.

The Board's policy related to student wellness shall be developed with the involvement of parents/guardians, students, school food service professionals, school administrators, Board representatives, and members of the public. (42 USC 1751 Note)

Note: One method to achieve involvement of those groups could be through the creation of a school health council, as recommended in the CDE's Health Framework for California Public Schools. Pursuant to Government Code 54952, committees appointed by the Board are subject to open meeting laws (the Brown Act); see AR 1220 - Citizen Advisory Committees. In general, advisory committees that are created by the Superintendent or designee are not required to comply with the Brown Act but must comply with other, less complex procedural requirements. The following two paragraphs are optional and may be revised to reflect district practice.

The Superintendent or designee may appoint a school health council or other committee consisting of representatives of the above groups. The council or committee may also include district administrators, health professionals, school nurses, health educators, physical education teachers, counselors, and/or others interested in school health issues.

(cf. 1220 - Citizen Advisory Committees) (cf. 9140 - Board Representatives)

The school health council or committee shall assist with policy development and advise the district on health-related issues, activities, policies, and programs. At the discretion of the Superintendent or designee, the council's charges may include planning and implementing activities to promote health within the school or community.

Nutrition Education and Physical Activity Goals

Note: The Note in 42 USC 1751 mandates that the district's wellness policy include goals for nutrition and physical activity, as specified below.

The Board shall adopt goals for nutrition education, physical activity, and other school-based activities that are designed to promote student wellness in a manner that the district determines appropriate. (42 USC 1751 Note)

Note: The remainder of this section details policy language to address this mandated topic and should be revised to reflect district practice.

The district's nutrition education and physical education programs shall be based on research, consistent with the expectations established in the state's curriculum frameworks, and designed to build the skills and knowledge that all students need to maintain a healthy lifestyle.

(cf. 6010 - Goals and Objectives)

(cf. 6011 - Academic Standards)

(cf. 6143 - Courses of Study)

Nutrition education shall be provided as part of the health education program in grades K-12 and, as appropriate, shall be integrated into core academic subjects and offered through before- and after-school programs.

(cf. 6142.8 - Comprehensive Health Education)

All students in grades K-12 shall be provided opportunities to be physically active on a regular basis. Opportunities for moderate to vigorous physical activity shall be provided through physical education, recess, school athletic programs, extracurricular programs, before- and after-school programs, and other structured and unstructured activities.

(cf. 6142.7 - Physical Education)

(cf. 6145 - Extracurricular and Cocurricular Activities)

(cf. 6145.2 - Athletic Competition)

The Superintendent or designee shall encourage staff to serve as positive role models. He/she shall promote and may provide opportunities for regular physical activity among employees.

Professional development shall include instructional strategies that assess health knowledge and skills and promote healthy behaviors.

(cf. 4131- Staff Development)

(cf. 4331- Staff Development)

To encourage consistent health messages between the home and school environment, the Superintendent or designee may disseminate health information to parents/guardians through district or school newsletters, handouts, parent/guardian meetings, the district or school web site, and other communications. Outreach to parents/guardians shall emphasize the relationship between student health and academic performance.

(cf. 1113 - District and School Web Sites) (cf. 6020 - Parent Involvement)

The Board prohibits the marketing and advertising of non-nutritious foods and beverages through signage, vending machine fronts, logos, scoreboards, school supplies, advertisements in school publications, coupon or incentive programs, or other means.

(cf. 1325 - Advertising and Promotion)

Nutrition Guidelines for Foods Available at School

Note: The Note in 42 USC 1751 mandates that the district's wellness policy include nutrition guidelines, as specified below.

The Board shall adopt nutrition guidelines selected by the district for all foods available on each campus during the school day, with the objectives of promoting student health and reducing childhood obesity. (42 USC 1751 Note)

Note: The remainder of this section details policy language to address this mandated topic and should be revised to reflect district practice.

The Board believes that foods and beverages available to students at district schools should support the health curriculum and promote optimal health. Nutrition standards adopted by the district for all foods and beverages sold to students, including foods and beverages provided through the district's food service program, student stores, vending machines, fundraisers, or other venues, shall meet or exceed state and federal nutrition standards.

(cf. 3312 - Contracts)

(cf. 3550 - Food Service/Child Nutrition Program)

(cf. 3554 - Other Food Sales)

(cf. 5148 - Child Care and Development)

(cf. 6300 - Preschool/Early Childhood Education)

The Superintendent or designee shall encourage school organizations to use healthy food items or non-food items for fundraising purposes. He/she also shall encourage school staff to avoid the use of non-nutritious foods as a reward for students' academic performance, accomplishments, or classroom behavior.

(cf. 1230 - School-Connected Organizations)

School staff shall encourage parents/guardians or other volunteers to support the district's nutrition education program by considering nutritional quality when selecting any snacks which they may donate for occasional class parties and by limiting foods or beverages that do not meet nutritional standards to no more than one food or beverage per party. Class parties or celebrations shall be held after the lunch period when possible.

Guidelines for Reimbursable Meals

Note: The Note in 42 USC 1751 mandates that the district's wellness policy include guidelines for reimbursable meals, as specified below.

Foods and beverages provided through federally reimbursable school meal programs shall meet or exceed federal regulations and guidance issued pursuant to 42 USC 1758(f)(1), 1766(a), and 1779(a) and (b), as they apply to schools. (42 USC 1751 Note)

Note: The remainder of this section details policy language to address this mandated topic and should be revised to reflect district practice.

In order to maximize the district's ability to provide nutritious meals and snacks, all district schools shall participate in available federal school nutrition programs, including the National School Lunch and School Breakfast Programs, to the extent possible.

(cf. 3553 - Free and Reduced Price Meals)

Program Implementation and Evaluation

Note: The Note in 42 USC 1751 mandates that the district's wellness policy establish a plan for measuring the implementation of the policy, including designating persons who will monitor implementation of the district's wellness policy, as provided in the following paragraph.

The Board shall establish a plan for measuring implementation of the policy. The Superintendent shall designate at least one person within the district and at each school who is charged with operational responsibility for ensuring that the school sites implement the district's wellness policy. (42 USC 1751 Note)

(cf. 0500 - Accountability)

Note: The remainder of this section details policy language to address this mandated topic and should be revised to reflect district practice.

The Superintendent or designee shall recommend for Board approval specific quality indicators that will be used to measure the implementation of the policy districtwide and at each district school. These measures shall include, but not be limited to, an analysis of the nutritional content of meals served; student participation rates in school meal programs; any sales of non-nutritious foods and beverages in fundraisers or other venues outside the district's meal programs; and feedback from food service personnel, school administrators, the school health council, parents/guardians, students, and other appropriate persons.

The Superintendent or designee shall report to the Board at least every two years on the implementation of this policy and any other Board policies related to nutrition and physical activity.

Posting Requirements

Each school shall post the district's policies and regulations on nutrition and physical activity in public view within all school cafeterias or in other central eating areas. (Education Code 49432)

Note: Education Code 49432 authorizes but does not require public schools to post a summary of nutrition and physical activity laws and regulations. The following paragraph is optional.

Each school shall also post a summary of nutrition and physical activity laws and regulations prepared by the California Department of Education.

Legal Reference:

EDUCATION CODE

49430-49436 Pupil Nutrition, Health, and Achievement

Act of 2001

49490-49493 School breakfast and lunch programs

49500-49505 School meals

49510-49520 Nutrition

49530-49536 Child Nutrition Act

49540-49546 Child care food program

49547-49548.3 Comprehensive nutrition services

49550-49560 Meals for needy students

49565-49565.8 California Fresh Start pilot program

49570 National School Lunch Act

51222 Physical education

51223 Physical education, elementary schools

CODE OF REGULATIONS, TITLE 5

15500-15501 Food sales by student organizations

15510 Mandatory meals for needy students

15530-15535 Nutrition education

15550-15565 School lunch and breakfast programs

UNITED STATES CODE, TITLE 42

1751-1769 National School Lunch Program, especially:

1751 Note Local wellness policy

1771-1791 Child Nutrition Act, including:

1773 School Breakfast Program

1779 Rules and regulations, Child Nutrition Act

CODE OF FEDERAL REGULATIONS, TITLE 7

210.1-210.31 National School Lunch Program

220.1-220.21 National School Breakfast Program

Management Resources:

CSBA POLICY BRIEFS

The New Nutrition Standards: Implications for Student Wellness

Policies, November 2005

CSBA PUBLICATIONS

Student Wellness: A Healthy Food and Physical Activity Policy

Resource Guide, rev. 2005

<u>CALIFORNIA DEPARTMENT OF EDUCATION</u>

PUBLICATIONS

Healthy Children Ready to Learn, January 2005

Health Framework for California Public Schools, Kindergarten

Through Grade Twelve, 2003

Physical Education Framework for California Public Schools,

Kindergarten Through Grade 12, 1994

CENTERS FOR DISEASE CONTROL PUBLICATIONS

School Health Index for Physical Activity and Healthy Eating: A Self-Assessment and Planning Guide for Elementary and Middle/

High Schools, 2004

NATIONAL ASSOCIATION OF STATE BOARDS OF EDU-

CATION (NASBE) PUBLICATIONS

Fit, Healthy and Ready to Learn, 2000

U.S. DEPARTMENT OF AGRICULTURE PUBLICATIONS

Dietary Guidelines for Americans, 2005

Team Nutrition, Food and Nutrition Services, Changing the Scene, Improving the School Nutrition Environment: A Guide to

Local Action, 2000

WEB SITES

CSBA: http://www.csba.org

California Department of Education, Nutrition Services Division:

http://www.cde.ca.gov/ls/nu

California Department of Health Services:

http://www.dhs.ca.gov

California Healthy Kids Resource Center: http://www.

californiahealthykids.org

California Project LEAN (Leaders Encouraging Activity and

Nutrition): http://www.CaliforniaProjectLEAN.org

Centers for Disease Control and Prevention (CDC):

http://www.cdc.gov

Dairy Council of California: http://www.dairycouncilofca.org

National Alliance for Nutrition and Activity: http://www.

cspinet.org/nutritionpolicy/nana.html

National Association of State Boards of Education:

http://www.nasbe.org

National School Boards Association: http://www.nsba.org

School Nutrition Association: http://www.schoolnutrition.org

Society for Nutrition Education: http://www.sne.org

U.S. Department of Agriculture: http://www.fns.usda.gov/tn/

Healthy/wellnesspolicy_steps.html

(3/05) 11/05

Policy Reference UPDATE Service

Instruction BP 6142.7

PHYSICAL EDUCATION

The Governing Board recognizes the positive benefits of physical activity for student health and academic achievement. The Board desires to provide a physical education program that builds interest and proficiency in movement skills and encourages students' lifelong fitness through physical activity. Besides promoting high levels of personal achievement and a positive self-image, physical education activities should teach students how to cooperate in the achievement of common goals.

(cf. 5121 - Grades/Evaluation of Student Achievement)

(cf. 6142.8 - Comprehensive Health Education)

(cf. 6145.2 - Athletic Competition)

(cf. 6146.1 - High School Graduation Requirements)

(cf. 6190 - Evaluation of the Instructional Program)

Note: The California Department of Education's Physical Education Framework describes components of a comprehensive physical education program. An Attorney General opinion (53 Ops.Cal.Atty.Gen. 230 (1970)) allows marching band classes to be included as part of the physical education program provided that the entire program substantially meets the objectives and criteria of Education Code 51220, adequately prepares students for state physical education performance tests, and is taught by a teacher holding a physical education credential. In its memorandum of April 18, 1989, the CDE did not concur with this opinion, which has not been tested in court. If the district classifies marching band or similar activities as part of the physical education program, the Board should ensure that the program in its entirety meets legally required objectives and criteria.

The Board shall approve the components of the physical education program. The district's program shall include a variety of kinesthetic activities, including team and individual sports, as well as aesthetic movement forms, such as dance.

(cf. 6143 - Courses of Study)

An appropriate alternative activity shall be provided for students with a physical disability that may restrict excessive physical exertion.

(cf. 6164.6 - Identification and Education Under Section 504)

Physical education staff shall appropriately limit the amount or type of physical exercise required of students during air pollution episodes, hot weather or other inclement conditions.

(cf. 3516 - Emergencies and Disaster Preparedness Plan)

Exemptions

Note: State law authorizes the Board to grant temporary or permanent exemptions from physical education to students who meet specified criteria. The Board may delete the following section or may select the paragraphs below that reflect the grade levels offered by the district and the exemptions the Board wishes to grant.

The Superintendent or designee may grant temporary exemption from physical education under any of the following conditions:

- 1. The student is ill or injured and a modified program to meet his/her needs cannot be provided. (Education Code 51241)
- 2. The student is enrolled for one-half time or less. (Education Code 51241)
- 3. The student in grades 10-12 is excused for up to 24 clock hours in order to participate in automobile driver training. (Education Code 51222)

Note: SB 78 (Ch. 459, Statutes of 2003) amended Education Code 51241 to delay until July 1, 2007 a requirement that a student in grades 10-12 pass the ninth-grade physical performance test as a condition of receiving the exemption described in the following paragraph.

The Superintendent or designee may exempt students, with their consent, from any two years of physical education courses during grades 10-12. (Education Code 51241)

The Superintendent or designee may excuse any student in grades 10-12 who attends a regional occupational center or program from attending physical education courses if such attendance results in hardship because of the travel time involved. (Education Code 52316)

The Superintendent or designee may exempt a high school student from physical education if he/she is engaged in a regular school-sponsored interscholastic athletic program carried on wholly or partially after regular school hours. (Education Code 51242)

(cf. 6145.2 - Athletic Competition) (cf. 6146.11 - Alternative Credits Toward Graduation) The Superintendent or designee may grant permanent exemptions from physical education to a student who is either: (Education Code 51241)

- 1. Age 16 years or older and has been enrolled in grade 10 for one or more academic years
- 2. Enrolled as a postgraduate student
- 3. Enrolled in a juvenile home, ranch, camp or forestry camp school with scheduled recreation and exercise

Legal Reference:

EDUCATION CODE

33350 CDE responsibilities re: physical education

49066 Grades; physical education class

51210 Course of study, grades 1-6

51220 Course of study, grades 7-12

51222 Physical education

51223 Physical education, elementary schools

51241 Temporary or permanent exemption from physical education

51242 Exemption from physical education for athletic program participants

52316 Excuse from attending physical education classes 60800 Physical performance test

CODE OF REGULATIONS, TITLE 5

1041-1046 Physical performance test

3051.5 Adapted physical education for individuals with exceptional needs

10060 Criteria for high school physical education programs

UNITED STATES CODE, TITLE 29

794 Rehabilitation Act of 1973, Section 504

ATTORNEY GENERAL OPINIONS

53 Ops.Cal.Atty.Gen. 230 (1970)

Management Resources:

CSBA PUBLICATIONS

Healthy Food Policy Resource Guide, 2003

CDE PUBLICATIONS

Physical Education Framework for California Public Schools: Kindergarten Through Grade 12, 1996

CDE PROGRAM ADVISORIES

0418.89 Physical Education, April 18, 1989

CDHS PUBLICATIONS

Jump Start Teens, 1997 Playing the Policy Game, 1999

School Idea and Resource Mini Kit, 2000

CDC PUBLICATIONS

School Health Index for Physical Activity and Healthy Eating: A Self-Assessment and Planning Guide for Elementary and Middle/High Schools, 2000

NASBE PUBLICATIONS

Fit, Healthy and Ready to Learn, 2000

WEB SITES

CSBA: http://www.csba.org

CDE, Nutrition Services Division/SHAPE California:

http://www.cde.ca.gov/nsd

California Department of Health Services, School Health

Connections: http://www. dhs.ca.gov/ schoolhealth

California Project LEAN (Leaders Encouraging Activity

and Nutrition): http://www. CaliforniaProjectLEAN.org

California Healthy Kids Resource Center:

http://www.californiahealthykids.org

National School Boards Association:

http://www.schoolhealth@nsba.org

National Association of State Boards of Education

(NASBE): http://www.boards@nasbe.org

Centers for Disease Control and Prevention

(CDC):http://www.cdc.gov

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Policy Reference UPDATE Service

CSBA Sample Administrative Regulation

Instruction AR 6142.7

PHYSICAL EDUCATION

Note: Education Code 51210 requires the adopted course of study for grades 1-6 to include instruction in physical education for at least 200 minutes each 10 school days, exclusive of recesses and the lunch period. For grades 7-12, Education Code 51222 provides that all students, except students excused or exempted pursuant to Education Code 51241, be required to attend courses of physical education for at least 400 minutes each 10 school days. However, pursuant to Education Code 51223, elementary school districts maintaining grades 1-8 shall provide instruction in physical education for students in grades 7-8 that matches the requirement for other elementary schools of not less than 200 minutes each 10 school days, exclusive of recesses and the lunch period.

The following options should be modified to reflect grade levels offered by the district.

OPTION 1: (Elementary Districts with Any of Grades 1-8)

Instruction in physical education shall be provided for a total period of time of not less than 200 minutes each 10 school days. (Education Code 51210, 51223)

OPTION 2: (High School Districts)

Instruction in physical education shall be provided for a total period of time of not less than 400 minutes each 10 school days. (Education Code 51222)

OPTION 3: (Unified School Districts)

Instruction in physical education shall be provided for a total period of time of not less than 200 minutes each 10 school days for students in grades 1-6 and not less than 400 minutes each 10 school days for students in grades 7-12. (Education Code 51210, 51222)

Note: The remainder of this section is for use by districts that maintain high schools.

Students in grades 10-12 who are exempted from physical education pursuant to Education Code 51241(b)(1) or (c) shall not be permitted to attend fewer total hours of courses and classes than they would have attended if enrolled in a physical education course. Students in a regional occupational program or center who are exempted from physical education pursuant to Education Code 52316 shall have a minimum school day of 180 minutes. (Education Code 51241, 52316)

Physical Performance Testing

Note: The following paragraph should be modified to reflect grade levels offered by the district. Pursuant to Education Code 51241, the district may also choose to administer the ninth-grade physical performance test to students in grades 10-12. Districts that choose to do so should modify the following paragraph accordingly.

During the month of February, March, April or May, students in grades 5, 7 and 9 shall undergo the physical performance testing designated by the State Board of Education. Students with a physical disability and students who are physically unable to take all of the test shall undergo as much of the test as their physical condition will permit. (Education Code 60800)

(cf. 6162.5 - Student Assessment)

Note: Education Code 60800, as amended by SB 78 (Ch. 459, Statutes of 2003), authorizes districts to provide students with their test results orally as students complete the testing.

Students shall be provided with their individual results after completing the physical performance testing. The test results may be provided orally as the student completes the testing. (Education Code 60800)

Each student's scores on the physical performance test shall be included in his/her cumulative record. (5 CCR 1044)

(cf. 5125 - Student Records)

(6/96 3/03) 11/03

Policy Reference UPDATE Service

Instruction BP 6142.8

COMPREHENSIVE HEALTH EDUCATION

Note: The following optional policy reflects four "unifying ideas of health literacy" that should be emphasized throughout the health curriculum according to the California Department of Education's Health Framework for California Public Schools.

The Governing Board believes that health education should foster the knowledge, skills, and behaviors that students need in order to lead healthy, productive lives. The district's health education program shall teach personal responsibility for one's own lifelong health, respect for and promotion of the health of others, the process of growth and development, and informed use of health-related information, products, and services.

Note: The Federal Child Nutrition and Women, Infants and Children (WIC) Reauthorization Act of 2004 (42 USC 1751 Note, added by P.L. 108-265, Section 204) requires each district participating in the National School Lunch program (42 USC 1751-1769) or the Child Nutrition Act of 1966 including the School Breakfast Program (42 USC 1771-1791) to develop and adopt a districtwide school wellness policy by the beginning of the school year after July 2006, through a process that involves specified stakeholders. As part of the student wellness policy, the district must establish goals for nutrition education and physical education. See BP 5030 - Student Wellness for language fulfilling this mandate.

Goals for the district's health education program shall be designed to promote student wellness and shall be developed in accordance with Board policy. Such goals shall include, but not be limited to, goals for nutrition education and physical activity.

(cf. 5030 - Student Wellness)

(cf. 6011 - Academic Standards)

(cf. 6142.1 - Sexual Health and HIV/AIDS Prevention Education)

(cf. 6142.7 - Physical Education)

Note: The following optional paragraph should be revised as necessary to reflect grade levels offered by the district. Education Code 51210 requires that the adopted course of study for grades 1-6 include instruction in health, including instruction in the principles and practices of individual, family, and community health. In addition, Education Code 51202 requires that certain health-related topics be addressed at the appropriate elementary and secondary grade levels, as determined by the district. Education Code 51934 requires that students be provided HIV/AIDS prevention instruction at least once in middle school or junior high school and at least once in high school. See AR 6143 - Courses of Study and BP/AR 6142.1 - Sexual Health and HIV/AIDS Prevention Instruction.

Topics to be addressed in a comprehensive health education program are detailed in both Education Code 51890 and the CDE's Health Framework; see the accompanying administrative regulation.

The district shall provide a planned, sequential, research-based, and age-appropriate health education curriculum for students in grades K-12. The content of health instruction shall be offered in accordance with law, Board policy, administrative regulation, and shall be aligned with state curriculum frameworks.

(cf. 6143 - Courses of Study)

The Board intends for health education to be part of a coordinated school health system that links district, school, and community programs and services to promote the health and well-being of students.

(cf. 1020 - Youth Services)

(cf. 3513.3 - Tobacco-Free Schools)

(cf. 3514 - Environmental Safety)

(cf. 3550 - Food Service/Child Nutrition Program)

(cf. 3554 - Other Food Sales)

(cf. 4020 - Drug and Alcohol-Free Workplace)

(cf. 5131.6 - Alcohol and Other Drugs)

(cf. 5131.63 - Steroids)

(cf. 5141.23 - Infectious Disease Prevention)

(cf. 5141.3 - Health Examinations)

(cf. 5141.32 - Health Screening for School Entry)

(cf. 5141.4 - Child Abuse Prevention and Reporting)

(cf. 5141.6 - Student Health and Social Services)

(cf. 5142 - Safety)

(cf. 5146 - Married/Pregnant/Parenting Students)

(cf. 6164.2 - Guidance/Counseling Services)

The Superintendent or designee shall provide periodic reports to the Board regarding the implementation and effectiveness of the district's health education program.

(cf. 0500 - Accountability)

Legal Reference:

EDUCATION CODE

8850.5 Family relationships and parenting education

35183.5 Sun protection

49413 First aid training

49430-49436 Pupil Nutrition, Health and Achievement

Act of 2001

49490-49493 School breakfast and lunch programs

49500-49505 School meals

51202 Instruction in personal and public health and safety

51203 Instruction on alcohol, narcotics and dangerous drugs

51210 Areas of study

51220.5 Parenting skills; areas of instruction

51260-51269 Drug education

51265 Gang violence and drug and alcohol abuse prevention inservice

51513 Personal beliefs

51890-51891 Comprehensive health education programs

51913 District health education plan

51920 Inservice training, health education

51930-51939 Comprehensive sexual health and HIV/

AIDS prevention education

CODE OF REGULATIONS, TITLE 5

11800-11801 District health education plan

Management Resources:

CSBA PUBLICATIONS

Student Wellness: A Healthy Food and Physical Activity Policy Resource Guide, rev. 2005

CALIFORNIA DEPARTMENT OF EDUCATION PUBLICATIONS

Health Framework for California Public Schools: Kindergarten Through Grade Twelve, 2003

CALIFORNIA DEPARTMENT OF HEALTH PUBLICATIONS

Jump Start Teens, 1997

WEB SITES

CSBA: http://www.csba.org

California Department of Education, Health Education:

http://www.cde.ca.gov/ci/he

California Department of Health, School Health Connections: http://www.mch.dhs.ca.gov/programs/shc/shc.htm

California Healthy Kids Resource Center: http://www.

californiahealthykids.org

California Project LEAN (Leaders Encouraging Activity and Nutrition): http://www.CaliforniaProjectLEAN.org

Centers for Disease Control and Prevention:

http://www.cdc.gov

 $National\ Hearing\ Conservation\ Association:\ http://www.$

hearingconservation.org

(3/03 11/03) 11/05

Policy Reference UPDATE Service

Instruction AR 6142.8

COMPREHENSIVE HEALTH EDUCATION

Content of Instruction

Note: Items #1-10 below reflect components of a comprehensive health education program specified in Education Code 51890. These components are required for districts seeking state reimbursement for related staff development pursuant to Education Code 51920. The California Department of Education's Health Framework for California Public Schools also describes major content areas of health education that are substantially similar to the components specified in Education Code 51890. The district may revise or expand the following list to reflect the topics to be addressed in the district's program.

AB 689 (Ch. 645, Statutes of 2005) added Education Code 51210.8 to require the State Board of Education, contingent upon funding, to adopt content standards in health education on or before March 1, 2008.

The district's health education program shall include instruction to aid students in making decisions in matters of personal, family and community health, including the following topics: (Education Code 51890)

- 1. The use of health care services and products
- (cf. 1020 Youth Services)
- (cf. 5141.6 Student Health and Social Services)
- 2. Mental and emotional health and development
- 3. Use and misuse of drugs, including tobacco and alcohol
- (cf. 3513.3 Tobacco-Free Schools)
- (cf. 5131.6 Alcohol and Other Drugs)
- (cf. 5131.63 Steroids)
- 4. Family health and child development, including the legal and financial aspects and responsibilities of marriage and parenthood
- (cf. 5146 Married/Pregnant/Parenting Students)
- 5. Oral health, vision, and hearing
- 6. Nutrition, which may include related topics such as obesity and diabetes prevention
- (cf. 5030 Student Wellness)

- 7. Exercise, rest, and posture
- (cf. 6142.7 Physical Education)
- 8. Diseases and disorders, including sickle cell anemia and related genetic diseases and disorders
- (cf. 5141.23 Infectious Disease Prevention)
- 9. Environmental health and safety
- 10. Community health

Note: Although Education Code 51890 does not specifically list injury prevention as a topic to be included in a comprehensive health education program, injury prevention is included in the CDE's Health Framework as a major content area. In addition, pursuant to Education Code 51940, districts may, on a voluntary basis, use curricula distributed by the California Healthy Kids Resource Center that focuses on prevention of brain and spinal cord injuries. The following optional paragraph may be revised to reflect district practice.

Instruction also shall include injury prevention and safety, which may include but not be limited to prevention of brain and spinal cord injuries, hearing conservation, and avoidance of overexposure to sun.

(cf. 5142 - Safety)

Exemption from Health Instruction

Note: AB 2525 (Ch. 896, Statutes of 2004) added Education Code 51240 to authorize a parent/guardian to excuse his/her child from health education when the instruction conflicts with his/her religious beliefs.

Upon written request from a parent/guardian, a student shall be excused from any part of the school's health instruction that conflicts with his/her religious training and beliefs, including personal moral convictions. (Education Code 51240)

(cf. 5020 - Parent Rights and Responsibilities) (cf. 6142.1 - Sexual Health and HIV/AIDS Prevention Education)

Students so excused shall be given an alternative educational activity.

Involvement of Health Professionals

The district's health education program shall be designed to actively involve the community, including professional health and safety personnel, in course evaluation. (Education Code 51913)

Health care professionals also shall be involved in the development and implementation of the district's health education plan and in course evaluation. Such professionals shall represent, at the district's option, the varied fields of health care, including voluntary collaborations with managed health care and health care providers; local public and private health, safety, and community service agencies; and other appropriate community resources. (Education Code 51913)

Health care professionals, health care service plans, health care providers, and other entities participating in a voluntary initiative with the district are prohibited from communicating about a product or service in a way that is intended to encourage persons to purchase or use the product or service. However, the following activities may be allowed: (Education Code 51890)

- Health care or health education information provided in a brochure or pamphlet that contains the logo or name of a health care service plan or health care organization, if provided in coordination with the voluntary initiative
- 2. Outreach, application assistance, and enrollment activities relating to federal, state, or county-sponsored health care insurance programs

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CASE STUDIES

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V. Case Studies

CAPISTRANO UNIFIED SCHOOL DISTRICT: BAN ON SOFT DRINKS AND JUNK FOOD



Region: Orange County

Demographics:

- ➤ Third largest school district in Orange County with more than 49,745 students enrolled
- ➤ 16 percent of students qualify for free and reducedprice meals
- Student ethnicity: 73 percent Caucasian; 18 percent Hispanic; 5 percent Asian; 2 percent African American; 1 percent Filipino; 1 percent Multiple, American Indian/Alaska Native or Pacific Islander
- ➤ Closed campus

Background

Capistrano Unified School District's beverage contract with Pepsi Bottling Company was expiring and the district was preparing to go out to bid again when the school food service directors started talking with the purchasing department about offering only healthy foods in vending machines per food standards in SB 19 (Chapter 913, Statutes of 2001).

"We knew about the law and of the obesity problem in our nation, so we met with the secondary education representative and provided him with statistics and information on these topics," said Dawn Davey, co-coordinator of Food and Nutrition Services.

Davey said she and her co-coordinator, Christina Sangster, both have the same philosophy that "we're educators, part of an education system, and we need to set an example of what a healthy, balanced meal is."

Because the vending machines at CUSD were only at secondary schools, the food service coordinators met with high school representatives, who then met with high school principals who used the school vending machines as a fundraiser for extracurricular activities. The principals were supportive of the idea. The food service coordinators, in conjunction with the purchasing director, then presented their intent and justification to the school board, which was receptive and unanimously approved the resolution. That resolution banned all soda in vending machines, which now offer only water, juices, fruit drinks and sports drinks that meet food and beverage standards in SB 19 (Chapter 913, Statutes of 2001). This resolution was passed prior to SB 677 (Ch. 415, Statutes of 2003), and was stricter than the law in that it banned soda in middle and high schools during the entire school day.

Additionally, as of August 2004, the only snacks available in the school vending machines are those that meet the SB 19 food standards (Chapter 913, Statutes of 2001).

Challenges and Solutions

Davey, who characterizes CUSD as "very progressive in its thinking," said, "We thought this would be more of a challenge than it really was. We were pleasantly surprised."

"I think the lesson to be learned is that when you feel strong about an issue and share your feelings, you will be surprised to find how many people agree with you," said Davey. "When you are going out on a limb, be armed with information and statistics that support your position."

"We're not perfect yet, but pretty darn close," said Davey.

Results

"The students have been very positive about the changes that have occurred," Davey said. "I think they are thirsty and they will buy whatever is in the vending machines," she said. "Water has become very popular now. Our district has closed campuses so this may have been easier to implement than other districts with open campuses."

There was an initial decrease in revenues, but now vending commissions are equal to what they were before the changes were made.

CUSD's efforts to promote healthy foods go beyond the vending machines.

"We're looking at all foods sold through the district. We're working on the Parent Teacher Association. We're trying to provide the PTA with different alternatives to fundraising. When we hear about them wanting to sell Krispy Kremes, we talk to them about what we're trying to do and make suggestions about other alternatives that could raise money."

— Dawn Davey Co-Coordinator of Food and Nutrition Services Capistrano Unified School District

For more information, contact:

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EASTSIDE UNION HIGH SCHOOL DISTRICT: COMPETITIVE FOOD SALES AND PHYSICAL ACTIVITY OPPORTUNITIES



Region: Santa Clara County

Demographics:

- ➤ More than 24,000 students enrolled in grades 9-12
- > 26 percent of students qualify for free or reducedpriced meals
- Student ethnicity: 42.2 percent Hispanic; 26.8 percent Asian; 15.2 percent Caucasian; 9.7 percent Filipino;
 4.6 percent African American; 1 percent Pacific Islander; and 0.4 percent American Indian.
- ➤ Closed campus

Background

Driven by a grass-roots effort that was championed by board member Patricia Martinez-Roach, and involved students, parents, staff, health partners and Child Nutrition Services staff, the Eastside Union High School District passed a policy during the 2003-2004 academic year that limited competitive food sales and decreased the amount of junk food sold at fundraising activities.

Working with Martinez-Roach, the district's Student Board Relations Committee (Committee) conducted and reviewed surveys of students, staff and parents. A draft policy was developed, reviewed, and modified by school site councils, district advisory committees, staff, student councils, PTA and student groups and health partners. ESUHSD also set policy for the school breakfast and free and reduced-price lunch programs to be prepared according to state and federal nutrition guidelines. To alleviate the stigma of receiving free or reduced-priced meals, the Committee implemented an electronic meal card system. The district then offered free lunches for one week, and thereafter priced them competitively at \$2.50.

Besides addressing nutrition policy, the district also drafted a physical activity policy that integrates innovative and self-competitive concepts into the Physical Education program to provide opportunities for students to be physically active outside of P.E. classes. It requires students to maintain lifetime physical fitness plans and record their progress toward realizing their physical fitness goals. The district also developed a P.E. curriculum that incorporated all of the state's standards for P.E. instruction.

Challenges and Solutions

"Addressing nutrition and physical activity within a context of so many other issues that school districts face can pose a big challenge," said Martinez-Roach. "Competing issues include limited resources, crime, drugs, alcohol, mental health, teen pregnancy, abuse and poverty." Martinez-Roach said it's important to have the support of the community when trying to pass policy that addresses issues such as nutrition and physical activity.

Results

Because of its efforts to improve the nutrition and physical activity environment in its school district, the ESUHSD was named a Superintendent Challenge Winner in 2004. Below are some of the results of the new policies that came from the work of the Committee:

- ➤ After the district revamped its a la carte menu, healthier food offerings like yogurt, bagels and fresh fruit increased by 76 percent and foods of minimal nutritional value were eliminated.
- ➤ The healthy foods offered in district vending machines increased by 65 percent as the district added items like pretzels and granola bars to the machines.

- ➤ The average number of school lunches sold grew by 47 percent.
- Soda availability was reduced by 40 percent in spite of a contract with Pepsi that was approved under a previous administration. Soda has been replaced with drinks that meet the standards in SB 19 (Chapter 913, Statutes of 2001) (e.g., water, juices, fruit drinks and sports drinks).
- > Students' Fitnessgram scores increased.
- ➤ ESUHSD applied for and received a Carol M.

 White Physical Education Grant and piloted a

 Physical Activity/Education Policy in five of its 11

 comprehensive high schools.

"As a policymaker, it is my job to ensure students' rights and needs are met. We must include policies which address our cultural diversity and language. These policies should include healthy food, safer campuses and most importantly, equal access for student learning."

— Patricia Martinez-Roach, School Board Member Eastside Union High School District

For more information, contact:

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EUREKA CITY UNIFIED SCHOOL DISTRICT: NUTRITIONAL STANDARDS FOR ALL FOODS SOLD ON CAMPUS



Region: Humboldt County

Demographics:

- Largest school district in Humboldt County with approximately 5,000 students
- >> 54 percent of students qualify for free or reducedpriced meals
- Student ethnicity: 3 percent African American; 14 percent American Indian/Alaska Native; 7 percent Asian; 63 percent Caucasian; 1 percent Filipino; 10 percent Hispanic; 1 percent Other; 1 percent Pacific Islander.
- ➤ Open campuses

Background

With awareness of the growing obesity problem at an all-time high and a dramatic increase in vending machine junk food, soda and candy sales on its school campuses, the Eureka City Unified School District appointed a districtwide School Nutrition Committee (Committee) to develop a nutrition policy that was adopted in July 2003.

"We'd been lamenting the fact that we hadn't acted on improving food services and the nutritional value of lunches and breakfast," said Superintendent James Scott.
"We finally decided enough talking, let's start doing."

The nutrition policy moved forward after students and nutrition advocates presented an assessment of the school nutrition environment at ECUSD. The students presented their findings to the school board and requested that healthier food options be sold on all campuses.

"Current research is clear that improving students' nutritional status has a positive and immediate impact on academic performance," said Trustee Joyce Hayes, R.D. "Students who are well nourished are more likely to attend school and more prepared and motivated to learn. As a board member and member of the Committee, these statistics were the driving force behind the desire to create change in our district food service system."

Superintendent Scott said the district really wanted to serve as a good nutritional role model. "It's not that much different from modeling the no-smoking curriculum or wanting to be a good role model in terms of recycling," he added.

ECUSD's nutrition policy incorporated SB 19 nutrition standards for all foods sold at schools. The policy also established a nutrition advisory committee comprised of students, parents, community members and school staff to ensure that the new policy was being implemented.

"Having an evaluation component written into our policy is really an important part to ensure things are being implemented as planned," said Melissa Martin, co-chair of the Eureka City School Nutrition Committee. "We have a very progressive and open-minded school district. They understand the link between nutrition and academic success."

The ECUSD policy calls for only healthy beverages to be sold on campus during school hours: water, milk, 100 percent fruit juices, and sport drinks or fruit-based drinks that are composed of no less than 50 percent fruit juice (or 35 percent for nectars) and have no added sweeteners. Additionally, the policy requires that students be involved in the selection of the foods sold at schools and specifically notes that students' ethnic and cultural favorites should be offered.

Recently, the district received bond money which it used to hire a consultant to help determine how to prepare more foods from scratch and reduce dependence on processed foods. "They've decided to go with a centralized kitchen that is a state-of-the-art facility," Martin said. "It's just being completed and utilized. Now, food service is making most of their food from scratch."

Challenges and Solutions

While the policy was adopted without much controversy, Martin said the soda industry went on record opposing the policy. "The soda companies came to testify against the policy, but it had no impact on the board's decision," Martin said. Student groups that raised funds also voiced concerns about the policy.

While the school board is concerned about fundraising challenges, it believes there are alternative fundraisers that do not involve the sale of junk food and soda to students. For example, one business class that has historically run a student store that had the "best selection of candy in Eureka" no longer sells food and is exploring alternative fundraisers.

"The service clubs that relied on the sale of those products are only limited by their own creativity in regard to fundraising," said Superintendent Scott. "The entrepreneurial spirit of Americans always finds a new way to do things."

Martin said that one of the district's biggest challenges is the need for ongoing communication about the policy — especially at the high school level as student clubs are so used to selling food to raise money. Martin said the Committee has discussed how best to work with the student groups to bring the high schools into total compliance with the policy. "There just need to be more ongoing conversations with the clubs about the policy," she added.

Results

Trustee Hayes said the policy has provided the direction and united the district around the issues of vending machine sales, quality of food served to students, access to food choices, and the inclusion of a nutrition curriculum throughout all grade levels.

Another welcome result is that the school food service department has increased its sales dramatically since it began selling only foods that meet SB 19 standards (*Chapter 913, Statutes of 2001*).

"Everyone is feeling so good about what's going on," said Martin, who, with the rest of the Committee, recently completed its evaluation of how the policy has been implemented. Superintendent Scott said the district's next steps are to fine-tune the policy, incorporate nutrition throughout the curriculum, and address physical education with a "renewed commitment."

"How can you argue against what are good nutritional practices and the fact that obesity is a national crisis? I'm pretty proud of the people who have worked so hard on this."

> — Dr. James Scott, Superintendent Eureka City Unified School District

For more information, contact:

Nancy Kinziger, RD Eureka City Schools Nutrition Committee North Coast Project LEAN Phone: (707) 445-5326 nkinziger@co.humboldt.ca.us

www.eurekacityschools.org

FOLSOM CORDOVA UNIFIED SCHOOL DISTRICT: HEALTHIER SCHOOL MEALS



Region: Sacramento County

Demographics:

- ➤ Suburban school district with over 19,000 students enrolled
- > 33 percent of students qualify for free or reducedprice meals
- Student ethnicity: 70 percent Caucasian; 11 percent Hispanic; 9 percent African American; 7 percent Asian; 2 percent Filipino; 1 percent Other
- ➤ Closed campus

Background

For several years, the Folsom Cordova Unified School District Food Service Department (FSD) was relying on high-fat and sugar-laden fast foods, frozen foods, snack items and vending machine contracts to feed students in the district. The department was operating in the red and failing to provide students with nutritious foods. A new food service director, Al Schieder, stepped in and made the most radical changes in the department's history. Determined to steer school nutrition programs through changes necessary to promote the health of children in the district, the department adopted a new philosophy, adapted to cultural changes and sought to maintain nutritional integrity and fiscal viability.

Challenges and Solutions

Prior to the changes, students eligible for free or reduced-price lunch stood in one line to receive their meal while others lined up separately to choose among items such as burgers, fries and pizza. At Cordova High, one of the lower-income high schools in the district, only 125 of the 500 students eligible for free or reduced-price lunch were eating it because it was demeaning to stand in the line, clearly identified for the needy.

"When schools make needy students stand in a separate line or sell Domino's pizza that they can't afford, they discriminate against poor kids," said Schieder. "I believe if we humiliate a teenager on school grounds, the child is scarred for life."

The FSD eliminated junk food, soda and a la carte sales in the cafeteria. A variety of fresh school meals were provided that met USDA nutrition standards, including a variety of lunch salads, lower fat pepperoni and cheese pizza, sandwiches, homemade pasta, wraps, teriyaki chicken rice bowls, sushi rolls and noodle bowls.

One of the older high school cafeterias was renovated to create food stations by investing in stainless steel carts with red awnings at a cost of \$50,000. The business department gave the FSD a loan that was paid back in five years. Palmsized computerized keypads were installed where students could punch in their ID numbers and pay for their lunch. Some students prepaid for their lunch and it was deducted out of their account, while others got a free lunch anonymously. Students have a choice of an entree, a piece of fruit, and low-fat or non-fat flavored milk for \$2.50.

Results

Cordova High School used to sell 125 entrees daily to its 1,850 students and now sells 800. Folsom High School used to sell 85 entrees to its 2,100 students and now sells 700. Point of sale locations have been increased and offer only reimbursable school meals to make sure students can eat lunch without having to wait in long lines.

Prior to the changes, the FSD was losing \$200,000 annually. Currently, the FSD has a \$400,000 reserve, and the annual budget has gone from \$1.75 million in 1995 to \$3.5 million in 2002 due to increased revenues.

"We see kids as our customers. They will always complain but I try to apply their criticism constructively, by giving them healthy, tasty foods that they will eat."

"Sometimes we close our eyes to the simple and obvious solutions. We need to learn how to put food back into the center of our operation."

— Al Schieder, Food Service Director Folsom Cordova Unified School District

For more information, contact:

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LOS ANGELES UNIFIED SCHOOL DISTRICT: BAN ON SOFT DRINK AND JUNK FOOD SALES, IMPROVING PHYSICAL EDUCATION



Region: Los Angeles County **Demographics:**

- Second largest school district in the nation with more than 735,000 students enrolled
- > 75 percent of students are eligible for free or reduced-price meals
- ➤ Student ethnicity: 71 percent Hispanic, 12 percent African American, 10 percent Caucasian, 4 percent Asian, 2 percent Filipino, 1 percent Pacific Islander, American Indian/Alaskan Native
- ➤ Closed campus

Background

Principals in the Los Angeles Unified School District were entering into contracts with soft drink companies to provide beverages for sale in vending machines in an effort to raise money for their schools. Health advocates, including students and parents, voiced strong concern over this practice and met one-on-one with school board members and testified at school board meetings to outline their concerns. School board members authored a motion to ban sodas and other sugary drinks from all

LAUSD campuses. After a lengthy discussion on the pros and cons of the soda ban, the school board unanimously voted to ban all soda and sugary drink sales from all LAUSD campuses before, during and until one-half hour after the end of the school day starting in January 2004.

In 2003, an Obesity Prevention Motion was passed which banned the sale of junk food on campus and called for the expansion of salad bars to all schools, phasing out all contracts with branded fast food companies. The motion also called for unlimited fruit and vegetable offerings and whole grain bread in the cafeteria, a soy milk pilot, and an increased emphasis on nutrition education and physical education. The policy called for the creation of an enforcement mechanism to monitor compliance and alternative fundraising information for schools to counteract an anticipated drop in revenue.

Challenges and Issues

Some school officials and parents feared losing needed funding for schools if soda was banned. Schools received larger commissions from soft drink sales. The soda motion's authors countered this by reassuring concerned individuals that schools would make money selling healthier drinks such as water, milk and no less than 50 percent fruit juices with no added sweeteners.

"If people are thirsty at a football game, they'll buy what you have," said board member Genethia Hayes. "They're not going to sit at a game and be thirsty. Mainly, people were worried about a loss of revenue without understanding that people will buy what's available."

Board member Marlene Canter said she also argued that the issue of soda sales in schools was a health, not an economics, issue. "Otherwise, we'd be saying that it's OK to sell unhealthy things as long as they made money for our schools."

With regards to the Obesity Prevention Motion, there are challenges to effectively communicating the policy to all school community members including parents and student clubs who fundraise through the sale of unhealthy foods and beverages. An additional challenge has been the development of a "black market" with the unauthorized sale of banned food items at school.

A final challenge has been the dip in sales and revenue. The dip has been greater for snacks than beverages, but as anticipated, sales are slowly bouncing back. However, an innovative partnership was formed with the business manager and Associated Student Body to issue a request for proposal for a districtwide central healthy beverage contract. This central contract will leverage power in numbers and negotiate to lower prices and increase profit margins for schools in the district. It will bring in a sizeable signing bonus that may cover all revenues lost since the implementation of the policies. To increase revenues and access to fresh healthy foods in all communities, farmers' markets are being piloted on eight high school campuses.

Results

The board established a work group to review current food policies and enforcement of such policies, develop procedures for competitive food sales, and develop programs in the areas of physical education and nutrition education for both students and parents. This work group will also provide a plan to address any revenue issues.

A central physical education advisor has been hired to develop an instructional guide. The advisor is working to increase professional development for physical activity educators, improve the administration and passage rate of the Fitnessgram and lower class size for physical education classes.

The district is looking for ways to ensure all students have sufficient time to eat and to increase participation in the school meal program; this is especially challenging in large, overcrowded high schools. Participation in the school meal program has more than doubled at the secondary level in recent years. Food Service is working to get healthier food in the cafeteria. Lastly, the district is partnering with local business schools and engaging student body leaders and health classes in selecting and promoting healthy foods.

"Los Angeles is on the cutting edge in terms of our progressive nutrition policies — ensuring only healthy food is sold on campus and promoting nutrition and physical education were the first steps — partnering with the state and federal governments to improve the nutritional quality of the cafeteria food and expanding access to healthy food for all communities are the next frontier."

Marlene Canter, School Board Member
 Los Angeles Unified School District

For more information, contact:

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For LAUSD Healthy Beverage Resolution and Obesity Prevention Motion visit www.csba.org

OAKLAND UNIFIED SCHOOL DISTRICT: BAN ON SOFT DRINKS AND JUNK FOOD SALES



Region: Alameda County **Demographics:**

- ➤ Sixth largest school district in California, with more than 53,000 students enrolled
- ➤ 51 percent of students qualify for free or reducedprice meals
- ➤ Student ethnicity: 45 percent African American, 30 percent Hispanic, 16 percent Asian, 6 percent Caucasian, 2 percent Pacific Islander, 1 percent Native American
- ➤ Open campus

Background

Oakland Unified School District's business services deputy superintendent introduced the concept of consolidating beverage sales at the district level to have more control and hopefully generate more revenue for the district. It was unclear how many vending machines were on school campuses, who owned these machines, and what revenue they generated. It appeared that a districtwide contract was going to be signed until a small but vocal group of parents, community leaders and local health advocates raised concerns about how soda sales on campus were contribut-

ing to poor student health, including childhood obesity, type 2 diabetes and tooth decay. Community outcry led to the creation of an official task force, the Nutrition Advisory Board (NAB), which included school board members, health specialists, community activists and educators.

After more than a year of public discussion, meetings and intensive research by the NAB, the school board decided to reject Pepsi's \$3.2 million offer and instead approved a comprehensive nutrition policy that banned the sale of carbonated soft drinks (including soda) and high-sugar beverages, candy and "similar products" in cafeterias, in vending machines, at athletic events and for on-site school fundraisers. The nutrition policy adopted by the board contains six goals and principles: (1) insure that no OUSD student goes hungry; (2) improve the nutritional quality of all food served to OUSD students; (3) serve enjoyable foods from diverse cultures; (4) improve the quality of food service jobs; (5) integrate nutrition into the district's education program; and (6) establish a Nutrition Advisory Board.

Challenges and Issues

With the sheer number of schools and groups affected, the biggest challenge is developing a procedure to put this policy into action. The NAB is discussing how to determine which schools are following the policy and how to approach those in violation of the policy. The advisory board will continue to seek community and staff input, and report back to the school board as the policy is implemented.

Funding also continues to be a major factor, especially in a district that is in a deficit and cannot subsidize food service if it continues to lose money. Opponents of the school board's decision fear that school programs will lose money under the new policy. However, school groups are seeking revenue-generating alternatives so they don't have to rely on the sale of unhealthy foods to support school activities.

In an effort to continue offering a healthier selection of foods, the OUSD has tried to implement salad bars at elementary schools; however, funding and lack of proper facilities have been obstacles. Food Services does not have the necessary equipment or funding to purchase new equipment. Various options are being explored in order to obtain the needed funds, including local business sponsorships or other general funds. Labor is also an issue so initially the salad bars will be operated by students and parents until sales can support labor costs.

Results

Adopted in December 2001, this policy is the first of its kind in the state and among the strictest in the nation. Unlike some school regulations that allow sales of unhealthy foods and beverages after school, this policy completely bans caffeinated drinks and some high-sugar sports drinks. OUSD's policy expands nutritional standards to apply to all foods served on campus and extends the policy to middle and high schools.

The district is beginning to add healthier foods to the a la carte program and will continue to identify vendors that offer healthier options. The first step was to eliminate carbonated beverages and reduce portion sizes of products such as chips. Healthy foods offered as a la carte foods include fruit, shaker salads, 1 percent flavored milk and drinks with 50 percent or more juice. In 2003, all fryers were removed from the schools. Now all traditionally fried items are baked, such as french fries and chicken nuggets. Also, all Hostess products were eliminated from a la carte sales. A vegetarian option is available daily on the K-12 lunch menu and at least one fruit and/or vegetable is available on the lunch menu daily. During the next four years, the OUSD will be piloting the SB 19 (Chapter 913, Statutes 2001) compliant food sales in nine schools as part of a grant awarded by the California Endowment.

"Adopting a nutrition policy furthers our goals of improving the health of our students. Students experience life through adult hypocrisy. Everything we do teaches. If we tell them that we are concerned about their health and at the same time we make money by selling unhealthy foods, then the message is clear that we care more about making money than good health."

— Dan Siegel, School Board Member Oakland Unified School District

For more information, contact:

Jennifer LeBarre, Food Service Director Oakland Unified School District (510) 879-8344 jennifer.lebarre@ousd.k12.ca.us www.ousd.k12.ca.us

For OUSD Nutrition Policy visit www.csba.org

SAN FRANCISCO UNIFIED SCHOOL DISTRICT: COMPREHENSIVE NUTRITION POLICY



Region: San Francisco County

Demographics:

- ➤ More than 58,000 students enrolled
- > 52 percent of students qualify for free or reducedpriced meals
- ➤ Student ethnicity: 31 percent Chinese; 24 percent Latino; 15 percent African American; 12 percent Other Non-white/Asian; 10 percent Caucasian; 6.6 percent Filipino; 0.9 percent Japanese; 0.9 percent Korean; 0.6 percent American Indian
- > The district has some closed and some open high school campuses. The decision to be an open or closed campus is left to each school to decide.

Background

With a motto of "No Empty Calories," the San Francisco Unified School District's Board of Education unanimously approved a districtwide policy that set a bold new standard for foods served at school. The policy, passed in 2003, also serves as an impetus for expanding and improving opportunities for physical activity in SFUSD schools.

"We believe it is our role to set a standard," said Board of Education Commissioner Jill Wynns. "A school should never send the message that eating unhealthy foods is good."

SFUSD's nutrition standards are more stringent than nutrition standards outlined in SB 19 (Chapter 913, Statutes 2001). SFUSD's nutrition standards not only set maximum levels for fat and sugar but also require minimum levels of nutrients in all foods sold at every school – elementary through high school.

Baked chips, for example, have less fat than regular chips, but contain no more vitamins or minerals than their high-calorie counterparts so they are not sold in SFUSD schools. "It was not enough that the foods not be bad for kids," said Dana Woldow, a parent who helped write SFUSD's nutrition policy. "We wanted all of the food to actually be good for them. Our schools will not profit from selling nutritionally empty foods."

School board members Wynns and Dr. Dan Kelly cosponsored the policy resolution to address childhood obesity and lack of physical fitness among youth.

Besides addressing the nutritional content of foods, the policy also reduces portion sizes and limits the types of beverages that can be sold to water, milk, and 100 percent fruit juice. No beverages containing sweeteners – natural or artificial – may be sold. This rules out sports drinks, most flavored and "vitamin" waters, and soft-drink companies' lines of milk blends.

While schools may keep vending machines on campuses, the machines must be stocked with foods that meet the new standards. Vended snacks include cold cereal, yogurt, tuna or chicken salad kits, bags of cashews or almonds, soy crisps, boxes of dried cherries, fruit and grain bars, beef jerky, pretzels and animal crackers, which meet district standards.

Wynns said that prior to the passage of the nutrition policy, junk foods sold as a la carte items and in school vending machines accounted for half of the food sold throughout the district. Since the policy passed, the food service department saw a slight dip in revenue for the first couple of months, and then sales went back

up, Wynns said. Additionally, participation in the school lunch program has increased. School officials note that this is a positive change as the school lunch program has decreased the amount of fat, sugar, and salt in its foods.

"We stopped super-sizing our products," said Wynns.
"For instance, the hamburger products were getting bigger and bigger and we set limits on them. We also banned French fries and instead serve baked potato 'coins,' which are little rounds of potato. The kids in our schools are now saying, 'I like our food. I want to eat it.'"

Challenges and Solutions

One major challenge SFUSD faces is a growing food service deficit. "But it's not because we're serving healthy foods," said Wynns. "It's because food costs, in general, have increased and we have one of the highest-paid food service work forces in the state. We're in the process of figuring out how to deal with that, but we're not looking at serving less healthy foods. We're not going to start violating our policy."

Another challenge SFUSD must address is the school clubs' reliance on selling junk food to fund their activities.

"We do have some push back from students on this issue," said Wynns. "It's not that they want junk food put back in the schools, but it's the issue of school clubs that are in the habit of selling foods to fund their activities." She added that the district has established an advisory committee that has developed a list of ideas for fundraisers that do not involve the sale of unhealthy foods or beverages.

"Through investigation, we found out that most of these clubs were selling foods so they could have a banquet at the end of the year," Wynns said. "Our experience is you have to look deeply into these issues. It's not that they weren't able to pay for the choir. The funds raised went toward an end-of-the-year banquet."

Wynns said that even coaches who were funding their teams by selling sodas are pretty much on board with the nutrition policy.

"I think we've changed the culture of our schools by selling healthy foods," she said. "Now, coaches are selling other things and they're going to the school site councils seeking other funds. People had been convinced that the only way they could get money was to sell junk food and now we've gone a long way to prove that it's not true."

Results

"I think the most important thing is that the nutrition policy is a key part of our educational plan," said Wynns. "We think making healthier kids makes smarter kids."

And, indeed, the district has seen the largest gains in student test scores in schools that piloted the nutrition policy first within the district. "We've got some great statistics," she added.

Physical activity is another topic that the district will soon address. "There have been no P.E. teachers in our elementary schools for 30 years," Wynns said. But that will change with the passage of Proposition H, which provides \$20 million in city funding for enrichment of San Francisco's public schools – including sports, libraries, preschool and the arts. "We'll have P.E. teachers back in our elementary schools," Wynns said. "This is how we save the future"

"If selling junk food to kids is a way to support our budget goals, then we have to balance this against the harm we're doing to kids in terms of health risks. The fundamental issue is that we want kids to be healthy and develop in healthy environments, so nutrition needs to be a part of the learning environment. It used to be that teachers helped provide basic lessons to kids—like learning about the importance of good dental hygiene in school. Now, we undermine their ability to do this with vending machines that sell junk food and other commercial messages."

— Dr. Dan Kelly, Member, SFUSD Board of Education

For more information contact:

Jill Wynns, Board Member San Francisco Unified School District 415-241-6427 jwynns@muse.sfusd.edu http://portal.sfusd.edu

VISTA UNIFIED SCHOOL DISTRICT: HEALTHIER FOODS AND BEVERAGES IN VENDING MACHINES



Region: San Diego County

Demographics:

- ➤ Large school district with 25,000 students enrolled
- ➤ 49 percent of students qualify for free or reducedprice meals
- ➤ Student ethnicity: 43 percent Hispanic, 42 percent Caucasian, 7 percent African American, 3 percent Asian, 2 percent Filipino, 1 percent Pacific Islander, 2 percent Other
- ➤ The district has some closed and some open high school campuses.

Background

High-fat and sugar-laden foods such as candy, chips and soda were being sold to students outside of the reimbursable school meal program in the Vista Unified School District. The Child Nutrition Services (CNS) program was trying to compete with these foods, while keeping fiscally sound and striving to become the first "junk food-free" school district in the San Diego area. The assistant superintendent of business services and the director of CNS consolidated district vending sales and began to manage

the contracts from other school groups. Contracts were taken over by CNS as they expired. Student interviews, taste tests and market availability determined what new, healthier products were offered.

CNS piloted the program at Vista High School by purchasing and placing 17 vending machines on campus to serve the 3,500 students during one 33-minute lunch period. This helped feed those students who could not get through the long lunch lines.

When CNS had control over the foods sold, they offered healthier options, such as bagels and cream cheese, yogurt and granola, salads, fresh fruit, trail mix, cheese and crackers, nuts, dried fruit, lower fat ice cream bars and fruit bars. Sodas were still offered but only in about 20 percent of the vending slots compared to 66 percent previously. This resulted in a decrease in soda sales. Water and sport drinks accounted for 68 percent of the beverage sales; 100 percent juice, milk and smoothies were 20 percent; and sodas were only 12 percent.

The school was offered a contract with CNS that included many of the perks and a commission similar to what it previously received with private vendors. The first year the school generated \$200,000 more in sales than the previous year. The school received nearly \$15,000 in commissions versus \$9,000 under the old contract.

Recently, CNS started the vending program at the district's second comprehensive high school. It is experiencing the same success as the vending program at Vista High School.

Challenges and Issues

The main challenge has been overcoming concern from school officials who fear losing money for school programs as a result of the changes. However, the pilot school provided evidence that more funds can be generated while selling healthier options. Owning the vending machines did become expensive and required a fair amount of maintenance. To make the operation even more efficient, machines are now being supplied by an independent vending company which allows CNS to control the types of food and beverages offered. The vendor provides the security enclosures and the vending machines from preferred manufacturers. This allows a

district that wants to "self operate" a vending program to get started without the huge initial capital outlay.

Another challenge was the initial opposition by students who fought to keep sodas on campus. However, the reduction in soft drink sales indicates that students will buy healthier options.

Results

One of the keys to this success was keeping prices lower than the local stores. Food items cost between 75 cents and \$1.50, ice cream products cost 50-55 cents, and all beverages sell for \$1.00. This success prompted support for CNS to operate the student store, which went from losing money when it was managed by the students to making a profit of \$700 a day with the new, healthier options.

The new vending partnerships have improved the services offered, pricing and selections available. Now the CNS department fills the machines and has complete control over product selection and price. The vendor can be used to secure mobile food service equipment which eliminates injuries associated with transporting heavy carts around campus and it gives CNS more service stations.

"The arrangement has been rewarding for all parties — the schools and vending company are making more money, the students are eating and drinking healthier foods, and food services is able to instill healthy eating habits that will last a lifetime."

— Enid Hohn, R.D., Director, Child Nutrition Services

Vista Unified School District

For more information, contact:

Enid Hohn, R.D., Director of Child Nutrition Services Vista Unified School District (760) 726-2170 ext. 2217 ehohn@vusd.k12.ca.us www.vusd.k12.ca.us/cns







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VI. Resources

Following are a variety of resources for information on nutrition, physical activity and student learning. Readers are encouraged to visit CSBA's Web site at www.csba.org for updates on this resource list.

Action for Healthy Kids

Headquarters
Action for Healthy Kids
4711 West Golf Rd., Ste.806
Skokie, IL 60076
(800)-416-5136

Action for Healthy Kids

Washington, DC Office
One Massachusetts Ave., NW Ste. 800
Washington, D.C. 20001
www.actionforhealthykids.org

"The Learning Connection: The Value of Improving Nutrition and Physical Activity in Our Schools" examines the impact of the root causes of childhood obesity.

American Association for the Child's Right to Play

220 Hofstra University Hempstead, NY 11549 (516) 463-5176 Fax: (516) 463-6275 www.ipausa.org

American Association for Health Education

1900 Association Dr. Reston, VA 20191-1598 (800) 213-7193 ext 437 Fax: (703) 476-6638 www.aahperd.org/aahe

American Cancer Society

National Office 1599 Clifton Rd., NE Atlanta, GA 30329 (800) 227-2345 or (404) 320-3333 www.cancer.org

American Cancer Society California Division Office

1710 Webster St.
Oakland, CA 94612
(800) 227-2345 or (510) 893-7900
Fax: (510) 835-8656
www.cancer.org

American Diabetes Association

National Service Center 1701 North Beauregard St. Alexandria, VA 22311 (800) 342-2383 or (703) 549-1500 Fax: (703) 549-6995 www.diabetes.org

American Diabetes Association

Western Division 2720 Gateway Oaks Dr., Ste. 110 Sacramento, CA 95833-4304 (800) DIABETES or (916) 924-3232 Fax: (916) 924-0529 www.diabetes.org

American Dietetic Association

Headquarters

120 South Riverside Plaza, Ste. 2000 Chicago, IL 60606-6995 (800) 877-1600 Fax: (312) 899-4739 (800) 366-1655 (Consumer Nutrition Hotline)

Washington, DC Office

1120 Connecticut Ave., NW, Ste. 480 Washington, DC 20036 (800) 877-0877 Fax: (202) 775-8284 www.eatright.org

American Heart Association National Center

7272 Greenville Ave.
Dallas, TX 75231-4596
(800) 242-8721
Fax: (650) 259-6891
www.americanheart.org

American School Health Association

7263 State Route 43

P.O. Box 708

Kent. OH 44240

(330) 678-1601

Fax: (330) 678-4526

www.ashaweb.org

California Adolescent Nutrition and Fitness Program

2140 Shattuck Ave., Ste. 610

Berkeley, CA 94704

(510) 644-1533

Fax: (510) 644-1535

www.canfit.org

"Recipes for Success: Nutrition and Physical Activity Programs for Youth" provides case studies of nutrition and physical activity outreach programs in schools and communities.

California Association for Health, Physical Education, Recreation and Dance

1501 El Camino Ave., Ste. 3

Sacramento, CA 95815-2748

(916) 922-3596

Fax: (916) 922-0133

www.cahperd.org

California Center for Public Health Advocacy

P.O. Box 2309

Davis, CA 95617

(530) 297-6000

Fax: (530) 297-6200

www.publichealthadvocacy.org

"School Food Standards," (1999) provides recommendations for competitive food standards.

"An Epidemic: Overweight and Unfit Children in California Assembly Districts," (2002) provides data on overweight and unfit children.

California Department of Education

1430 N St.

Sacramento, CA 95814

(916) 319-0791

Fax: (916) 319-0100

www.cde.ca.gov

"California's Physical Education Model Content Standards for California Public Schools"

provides a framework for programs that a school may offer in the instruction of physical education. Sets forth key skills and knowledge at each grade level.

"School Nutrition...By Design!" represents an overview of a healthy nutrition environment and suggests strategies schools and districts can use to model healthy eating habits for their students.

Nutrition Services Division

1430 N St., Rm. 1500

Sacramento, CA 95814

(800) 952-5609

Fax: (916) 327-0503

www.cde.ca.gov/ls/nu/

SHAPE California

(Shaping Health As Partners in Education)

Nutrition Services Division

560 J St., Rm. 270

Sacramento, CA 95814

(916) 323-7311 or (800) 952-5609

Fax: (916) 327-0503

www.cde.ca.gov/nsd/ls/nu/he/shape.asp

"Strategies For Success, Parts I and II" showcase sustainable strategies to improve the health and academic success of California children by providing consistent nutrition messages in child nutrition programs, classrooms, and throughout the school environment

"Eat Well, Learn Well" provides practical ideas, resources, and specific actions for integrating nutrition services into a coordinated school health system.



"Better Breakfast Better Learning" provides specific actions school board members, superintendents, and site administrators can take to offer a successful school breakfast program.

School Health Connections

1430 N St., Ste. 6408 Sacramento, CA 95814 (916) 319-0914

Fax: (916) 445-7367

wvvw.cde.ca.gov/cyfsbranch/isp/health

"The Health Framework for California's Public Schools" (2004)," "The Health Framework Addendum" (2002) and "The Physical Education Framework for California's Public Schools" (1994), adopted by the State Board of Education, provide content recommendations used by districts in the development of curriculum and programs.

California Healthy Kids Resource Center

313 W. Winton Ave. Hayward, CA 94544 (510) 670-4583 Fax: (510) 670-4582 www.californiahealthykids.org

California Department of Health Services

P.O. Box 997413 Sacramento, CA 95899-7413 (916) 440-7400 wvvw.dhs.ca.gov

California Diabetes Prevention and Control Program

P.O. Box 997413, MS. 7211 Sacramento, CA 95899-7413 (916) 552-9888 Fax: (916) 552-9988 www.caldiabetes.org

California Nutrition Network and California 5-a-Day-Power Play!

Cancer Prevention and Nutrition Section P.O. Box 997413, MS 7204 Sacramento, CA 94234-7320 (916) 449-5400 Fax: (916) 449-5414 www.dhs.ca.gov/ps/cdic/cpns

"School Idea and Resource Mini Kit" is a tested curriculum to increase fruit and vegetable consumption and physical activity levels among fourth- and fifth-grade children.

"California Teen Eating, Exercise and Nutrition Survey" (CalTEENS) and the "California Children's Healthy Eating and Exercise Practices Survey" (CalCHEEPS)" provide data on California children's eating and physical activity habits.

California Obesity Prevention Initiative

P.O. Box 997413, MS. 7211 Sacramento, CA 95899-7413 (916) 552-9889 Fax: (916) 552-9912

www.dhs.ca.gov/ps/cdic/copi/

California Project LEAN (Leaders Encouraging Activity and Nutrition)

P.O. Box 997413, MS. 7211 Sacramento, CA 95899-7413 (916) 552-9907 Fax: (916) 552-9909 www.CaliforniaProjectLEAN.org

"A Guide to Implement Local Wellness Policies: Putting Nutrition and Physical Activity Policies to Practice" serves as a roadmap for implementing local school wellness policies to achieve a healthy school environment.

"Jump Start Teens" provides interactive and crosscurricular lessons encouraging students to eat healthy, keep moving and take action.

"Playing the Policy Game" is a booklet that highlights nutrition and physical activity policies that teens can pursue with adult guidance.

"Food on the Run Parent Brochure" provides information on healthy eating and physical activity for teenagers.

"Food Standards Calculator" calculates if foods meet nutritional standards in SB19 (Chapter 235).

"California High School Fast Food Survey: Findings and Recommendations" examines the prevalence of fast foods on California high school campuses and student access to healthy foods at school.

"2001 Prevalence and Specifics of Districtwide
Beverage Contracts in California's Largest School
Districts: Findings & Recommendations" presents an
analysis of exclusive beverage contracts in California schools.

"Food and Beverage Marketing on California High School Campuses Survey" presents the types and quantities of food and beverage marketing and promotion on school campuses.

"Taking the Fizz Out of Soda Contracts" provides resources that can be utilized when discussing school district policy on soda and other sugary drinks with parents, students, community members and school decision-makers.

"California's Obesity Crisis: Focus on Solutions, What Schools Can Do," Policy Briefs provide a quick reference for high-profile subjects in the school nutrition/ physical activity environment.

"Student Wellness: A Healthy Food and Physical Activity Policy Resource Guide" provides school governance leaders with a step-by-step approach to enhance the school environment so students can develop and practice healthy eating habits. The Guide outlines the link between nutrition, physical activity and learning; addresses the health status of children and youth; highlights school districts that successfully offer healthy foods and beverages; offers recommendations for a comprehensive nutrition and physical activity policy; and provides sample policies and resources.

"Captive Kids: Selling Obesity and Schools" addresses the issues of marketing unhealthy foods and beverages on school campuses. The tool kit includes information on marketing to children and youth through schools, key steps to develop policy, answers to legal questions, and talking points, case studies, fact sheets and additional resources.

California Center for Physical Activity - Safe Routes to School Initiative

P.O. Box 997413, MS. 7211 Sacramento, CA 95899-7413 (916) 324-2233 or (888) 393-0353

Fax: (916) 552-9939 www.caphysicalactivity.org www.dhs.ca.gov/epic/sr2s/

School Health Connections

Maternal and Child Health Branch 714 P St., Rm. 750 Sacramento, CA 95814 (916) 653-7746 or 657-1347

Fax: (916) 651-9709 www.mch.dhs.ca.gov/schoolhealth

California Dietetic Association

7740 W. Manchester Ave., Ste. 102 Playa Del Rey, CA 90293-8499 (310) 822-0177 Fax: (310) 823-0264 www.dietician.org

California Elected Women's Association for Education and Research

6000 J St., Foley Hall #205 Sacramento, CA 95819-6100 (916) 278-3870 Fax: (916) 278-3872

www.caelectedwomen.org

"Healthy Education Alternatives" is a tool for building innovative and cost-effective nutrition and physical activity programs.

California Food Policy Advocates

116 New Montgomery St., Ste. 530 San Francisco, CA 94105 (415) 777-4422

Fax: (415) 777-4466 www.cfpa.net

> "Improving Meal Quality in California's Schools: A Best Practices Guide for Healthy School Food

Service" highlights a few of the innovative approaches used by food service directors to provide healthy and appealing food choices.

"The State of the Plate - A School Meal Primer for California" provides information on all aspects of school meals--from nutrition to funding to paperwork.

California Parent Teacher Association

930 Georgia St. Los Angeles, CA 90015 (213) 620-1100

Fax: (213) 620-1411 www.capta.org

California Research Bureau

Library and Courts Building II 900 N St., Rm. 300 Sacramento, CA 95814 (916) 653-7843

Fax: (916) 654-5829 www.library.ca.gov

"Overweight Kids: Why Should We Care?" describes the underlying factors that contribute to weight problems among children and adolescents, and examines the effects that being overweight and obese have on child and adolescent health and on healthcare costs.

California School Boards Association

3100 Beacon Blvd. West Sacramento, CA 95691 (916) 371-4691

Fax: (916) 669-3351 www.csba.org

"Maximizing School Board Governance: Policy Development and Adoption" explores the core roles and responsibilities of the board.

"Collaborations for Kids: The School Board's Role" looks at the board's role in encouraging and facilitating collaborations among children's services providers in the community.

"Student Wellness: A Healthy Food & Physical Activity Policy Resource Guide" provides school governance leaders with a step-by-step approach to enhance the school environment so students can develop and practice healthy eating habits. The Guide outlines the link between nutrition, physical activity and

learning; addresses the health status of children and youth; highlights school districts that successfully offer healthy foods and beverages; offers recommendations for a comprehensive nutrition and physical activity policy; and provides sample policies and resources.

"School-based Marketing of Foods and Beverages: Policy Implications for Schools" provides background information on commercial activities and highlights critical policy considerations.

"The New Nutrition Standards. Implications for Student Wellness" explains new state standards for food and beverages provided at school and suggests issues that boards should consider as they renew proposed policies.

California School Nutrition Association

1804 W. Burbank Blvd. Burbank, CA 91506 (818) 842-3040 Fax: (818) 843-7423 www.csfsa.org

California State Parks and Recreation Society

7971 Freeport Blvd. Sacramento, CA 95832-9701 (916) 665-2777 Fax: (916) 655-9149

Center for Health Improvement Policy Matters

1330 21st St., Ste. 100 Sacramento, CA 95814 (916) 930-9200 Fax: (916) 930-9010 www.healthpolicycoach.org

Center for Science in the Public Interest

1875 Connecticut Ave., NW., Ste. 300 Washington, D.C. 20009-5728 (202) 332-9110

Fax: (202) 265-4954 www.cspinet.org

> "Pestering Parents: How Food Companies Market Obesity to Children" outlines children's exposure to food marketing, the types of venues

and techniques used to market food to children, the effect of that marketing on children's food choices, and recommendations for schools to reduce the marketing of low-nutrition foods to children.

National Alliance for Nutrition and Activity,
"Model Local School Wellness Policies on Physical
Activity and Nutrition" provides model policies to meet
the Child Nutrition and WIC Reauthorization Act of 2004.

Center for Weight and Health

University of California Berkeley College of Natural Resources 3 Giannini Hall, #3100 Berkeley, CA 94720-3100 (510) 642-2915

Fax: (510) 642-4612

www.cnr.berkeley.edu/cwh

"Children and Weight: What Schools and Communities Can Do About It" is a "how-to" kit designed to facilitate local-level action by empowering and mobilizing communities to create opportunities for young people to eat healthy and be physically active.

"Linking Education, Activity and Food: Fiscal Impact Report" provides an evaluation of the fiscal impacts of the implementation of SB 19 (Chapter 913, Statutes of 2001) standards in piloted middle and high schools.

Centers for Disease Control and Prevention

Division of Adolescent and School Health 1600 Clifton Rd. Atlanta, GA 30333 (404) 639-3311

Fax: (404) 639-3111

www.cdc.gov/nccdphp/dash

"School Health Index for Physical Activity and Healthy Eating: A Self-Assessment and Planning Guide," enables schools to identify the strengths and weaknesses of their physical activity and nutrition policies and programs, develop an action plan and involve teachers, parents, students and the community in improving school services.

"Guidelines for School Health Programs to Promote Lifelong Healthy Eating and Physical Activity" provides recommendations for strategies most likely to be effective in promoting healthy eating and physical activity among youth.

Council of Chief State School Officers

One Massachusetts Ave., NW, Ste. 700 Washington, DC 20001-1431 (202) 408-5505 Fax: (202) 408-8072

Dairy Council of California

www.ccsso.org

Main Office 1101 National Dr., Ste. B Sacramento CA 95834-1901 (916) 263-3560 or (866) 572-1359 Fax: (916) 263-3566 www.dairycouncilofca.org

Food Research and Action Center

1875 Connecticut Ave., NW, Ste. 540 Washington, DC 20009 (202) 986-2200 Fax: (202) 986-2525 www.frac.org

Institute of Medicine

500 Fifth St., NW Washington DC, 2001 (202) 334-2352 Fax: (202) 334-1412 www.iom.edu

"Preventing Childhood Obesity: Health in the

Balance," 2005, responds to Congress' charge to the IOM to present an action plan to decrease the number of obese children and youth in the United States.

National Association of State Boards of Education

277 South Washington St., Ste. 100 Alexandria, VA 22314 (703) 684-4000 Fax: (703) 836-2313 www.nasbe.org **"Fit, Healthy and Ready to Learn"** provides an excellent tool for the development of school policies in the areas of physical activity, healthy eating and tobacco use prevention.

National Coalition for Parent Involvement in Education

3929 Old Lee Highway, Ste. 91A Fairfax, VA, 22030 (703) 359-8973

Fax: (703) 359-0972 www.ncpie.org

National 5-A-Day Program

National Cancer Institute 6130 Executive Blvd., EPN 4050, MSC 7332 Bethesda, MD 20892-7332

(301) 496-8520 Fax: (301) 496-6637 www.5aday.gov

National Food Service Management Institute

The University of Mississippi 6 Jeanette Phillips Dr.

P.O. Drawer 188

University, MS 38677-0188

(800) 321-3054

Fax: (800) 321-3061

www.olemiss.edu/depts/nfsmi or www.nfsmi.org

National Heart, Lung, and Blood Institute

Information Center P.O. Box 30105

Bethesda, MD 208-24-0105

(240) 629-3255

Fax: (240) 629-3246 www.nhlbi.nih.gov

National School Boards Association

1680 Duke St.

Alexandria, VA 22314

(703) 838-6722

Fax: (703) 683-7590 www.nsba.org

Nutrition.gov

Nutrition.gov is a portal to nutrition information across the federal government agencies. It allows for online access to federal government information on nutrition. www.nutrition.gov

President's Council on Physical Fitness and Sports

200 Independence Ave., SW, Rm. 738H Washington, DC 20201-0004 (202) 690-9000 Fax: (202) 690-5211

Public Health Institute

www.fitness.gov

555 - 12th St., 10th Floor Oakland, CA 94607 (510) 285-5500 Fax: (510) 285-5501 www.phi.org

School Nutrition Association

700 South Washington St., Ste. 30 Alexandria, VA 22314 (703) 739-3900 Fax: (703) 739-3915 www.schoolnutrition.org

Society for Nutrition Education

7150 Winton Dr., Ste. 300 Indianapolis, IN 46268 (317) 328-4627 or (800) 235-6690 Fax: (317) 280-8527

Society of State Directors of Health, Physical Education and Recreation

1900 Association Dr., Ste. 100 Reston, VA 20191-1599 (703) 390-4599 Fax: (703) 476-0988

www.thesociety.org

www.sne.org

Strategic Alliance for Healthy Food and Activity Environments

c/o Prevention Institute 265 29th St.

Oakland, CA 94611 (510) 444-7738

Fax: (510) 663-1280

www.preventioninstitute.org/strategic.html

"Environmental Nutrition and Activity Strategies Tool" (ENACT) provides a menu of strategies designed to improve nutrition and activity environments on a local level.

Tufts University Nutrition Navigator

Gerald J. and Dorothy R. Friedman School of Nutrition Science and Policy 150 Harrison Ave. Boston, MA 02111 (617) 636-3223

Fax: (617) 636-3737 www.nutrition.tufts.edu

United States Department of Agriculture

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For information on local wellness policies on physical activity and nutrition to meet the Child Nutrition and WIC Reauthorization Act of 2004, visit www.fns. usda.gov/tn/Healthy/wellnesspolicy.html.

"Changing the Scene, Improving the School Nutrition Environment: A Guide to Local

Action" is an action kit to help parents, teachers, school administrators, school food service professionals and the community look at their school nutrition environment and identify areas needing improvement. The kit can be ordered online at www.fns. usda.gov/tn

"Making it Happen: School Nutrition Success

Stories" tells the stories of 32 schools and school districts across the United States to implement innovative strategies to improve the nutritional quality of foods and beverages sold outside of federal meal programs.







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APPENDIX A: SPECIAL RECOGNITION

CSBA and California Project LEAN extend their appreciation to the following partners for extensive collaboration, review and feedback in the development of the "Healthy Food Policy Resource Guide" as well as this Guide:

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APPENDIX B: GLOSSARY

A la carte - the sale of individual food items in snack bars, school stores and vending machines that compete with school meals for students' appetites, time and money.

Anemia - a condition in which the blood is deficient in red blood cells, in hemoglobin or in total volume.

Bone Mass - the amount of calcium in a given amount of bone.

Body Mass Index (BMI) - a ratio of children's heights and weights plotted for age and sex, and compared against historic population references. Children are defined as overweight with a BMI for age at or above the 95th percentile of the Centers for Disease Control Growth Charts, and are considered at risk if they are between the 85th and 95th percentiles.

Cardiovascular Disease - a disease of the heart or blood vessels.

Cholesterol - a waxy substance made by the liver and also supplied in the diet through animal products such as meats, poultry, fish and dairy products. High cholesterol is a leading risk factor for coronary heart disease. Excess cholesterol in the bloodstream can form plaque (a thick, hard deposit) in artery walls. The cholesterol or plaque build-up causes arteries to become thicker, harder and less flexible, slowing down and sometimes blocking blood flow to the heart.

Cognitive Development - the development of intelligence, conscious thought and problem-solving ability that begins in infancy.

Competitive Foods - foods sold in competition with the National School Lunch Program and the School Breakfast Program during the school's designated lunch or breakfast periods, including foods of minimal nutritional value (FMNV) such as soda and certain candy.

Coordinated School Health - Centers for Disease Control model in which schools provide a critical facility where many agencies work together to maintain the well-being of young people. The following are the eight components of a coordinated school health program: 1) health education; 2) physical education; 3) health services; 4) nutrition services; 5) health

promotion for staff; 6) counseling and psychological services; 7) health school environment; and 8) parent/community involvement.

Dental Caries - formation of cavities in the teeth by the action of bacteria; tooth decay.

Dietary Guidelines for Americans - describe a healthy diet as one that:

- > Emphasizes fruits, vegetables, whole grains, and fat-free or low-fat milk and milk products;
- ➤ Includes lean meats, poultry, fish, beans, eggs and nuts;
- ➤ Is low in saturated fats, trans fats, cholesterol, salt (sodium) and added sugars.

Extracurricular activities – refers to school-sponsored voluntary programs that supplement regular education and contribute to the educational objectives of the school.

Food Guide Pyramid – revised by the U.S. Department of Agriculture in 2005, the Food Guide Pyramid renamed "My Pyramid, Steps to a Healthier You," includes dietary recommendations for the general public over 2 years of age. It includes the recommended daily servings of grains, fruits, vegetables, milk, meats, beans, fats, sugars, salt and physical activity.

Intramurals – refers to physical activity programs that provide opportunities for all students to participate in sport, fitness and recreational activities within their own school.

Interscholastic athletics – refers to organized individual and team sports that involve more than one school.

Junk Food - foods that provide calories primarily through fats or added sugars and have minimal amounts of vitamins and minerals.

Foods of Minimal Nutritional Value (FMNV) - food items providing less than 5 percent of the U.S. Recommended Daily Allowances for eight specified nutrients per serving. Regulations prohibit the sale of these items (such as carbonated beverages, chewing gum, water ices and most hard candies) in the food service area while school meals are being served. These regulations do not restrict the sale of chips, noncarbonated drinks and most candy bars in the food service area

or the sale of any food in other areas of the school building or campus at any time. USDA requires schools to set policies, that at a minimum, prohibit the sale of FMNV in the food service area during meal time.

National School Lunch Program/School Meal Program

- designed "to help safeguard the health and well-being of the nation's children by assisting the states in providing an adequate supply of foods" (P.L. 79-396, the National School Lunch Act of 1946) for all children at moderate cost. Additional assistance is provided for children determined by local school officials to be unable to pay the "full established" price for lunches. Like the Food Stamp program, the National School Lunch Program is administered by the Food and Nutrition Service of the U.S. Department of Agriculture through state educational agencies or through regional USDA nutrition services for some nonprofit private schools.

Nutrition Standards – federal, state or local guidelines for the nutritional content of foods and beverages. Nutrition standards for the National School Lunch Program were enhanced in 1995. In accordance with the U.S. Dietary Guidelines, schools began offering healthier meals that were lower in fat and sodium and offered more fruits and vegetables. (Guidelines for fat limit it to providing no more than 30 percent of the total calories with saturated fat providing less than 10 percent of the total calories.) School breakfasts and lunches must be planned to provide one fourth and one third of the RDAs, respectively, for protein, vitamins A and C, iron, calcium and energy when analyzed over one week. State law limits food that may be sold outside of the federal nutrition program by requiring that 50 percent of any food sold must come from a list of nutritious options, however, there are no nutrition standards for the foods on the list. Additionally, state law bans soda and other non-nutritious beverages from being sold anywhere on elementary school campuses at any time and anywhere on middle school campuses during the school day.

Obesity – a high amount of body fat. A person is considered obese if he or she has a body mass index (BMI) of 30 kg/m2 or greater.

Osteoporosis – porous bones. Weight-bearing exercise and the consumption of calcium-rich foods during childhood

and adolescence are critical to ensure peak bone mass and reduce the risk of osteoporosis later in life. Since prevention occurs by reaching optimal bone mass during adolescence, it is not possible to make up any deficiencies later in life.

Overweight – condition of being too heavy for one's height. It is defined as a body mass index of 25 to 30 kg/m2. Body weight comes from fat, muscle, bone and body water. Overweight does not always mean over-fat.

Sleep Apnea - Literally means "without breath." People with untreated sleep apnea stop breathing repeatedly during their sleep, sometimes hundreds of times during the night and often for a minute or longer. Untreated, sleep apnea can cause high blood pressure and other cardiovascular disease, memory problems, weight gain, impotency, and headaches.

Soft Drink – includes soda, fruit-flavored and part-juice drinks and sports drinks.

Type 2 Diabetes – previously known as "noninsulindependent diabetes mellitus" or "adult-onset diabetes." Type 2 diabetes is the most common form of diabetes mellitus. About 90 to 95 percent of people who have diabetes have type 2 diabetes. People with type 2 diabetes produce insulin, but either do not make enough insulin or their bodies do not use the insulin they make. Most of the people who have this type of diabetes are overweight. Therefore, people with type 2 diabetes may be able to control their condition by losing weight through diet and exercise. They may also need to inject insulin or take medicine along with continuing to follow a healthy program of diet and exercise. Although type 2 diabetes commonly occurs in adults, an increasing number of children and adolescents who are overweight are also developing type 2 diabetes.

Undernourishment – the state of inadequate nutrition resulting from lack of food or failure of the body to absorb or assimilate nutrients properly. Under-nutrition can result in delays in cognitive development and problem-solving abilities.

Vigorous Physical Activity – activities that bring about sweating and hard breathing.

Well Nourished – being properly nourished.



Nutrition, Physical Activity and Academic Achievement

Nutrition

Improved nutritional status has a positive and direct impact on academic achievement. When children's basic nutritional and fitness needs are met, they have the cognitive energy to learn and achieve. Schools continue to be a core place for students to learn and practice healthy eating habits.¹

Research shows that healthy, well-nourished children are more prepared to learn, more likely to attend school and class, and able to take advantage of educational opportunities. Studies demonstrate:

- ➤ Chronically undernourished children attain lower scores on standardized achievement tests, are more irritable, have difficulty concentrating, and have lower energy levels. Undernourished students have less ability to resist infection and are more likely to become sick, and therefore miss school, resulting in reduced revenues to schools.²
- ➤ Undernourishment impacts the behavior of children, their school performance and their ability to concentrate and perform complex tasks.³
- Children's brain function is diminished by short-term or periodic hunger or malnutrition caused by missing or skipping meals.⁴
- ➤ Inadequate consumption of key food groups deprives children of essential vitamins, minerals, fats and proteins that are necessary for optimal cognitive function.⁵
- ➤ Iron deficiency is one of the most prevalent nutritional problems of children in the United States. Iron deficiency can increase fatigue, shorten attention span, decrease work capacity, reduce resistance to infection, and impair intellectual performance. Consequently, anemic children tend to do poorly on vocabulary, reading and other tests.⁶

School Breakfast

Research shows a direct relationship between a nutritious breakfast and educational achievement.

> Students who eat breakfast show a general increase in math grades and reading scores, increased attention,

- reduced nurse visits and improved behaviors.7
- ➤ Children who begin their school day without breakfast pay less attention in the late morning, have a negative attitude toward schoolwork, and attain less in class.⁸
- ➤ Increases in participation in the School Breakfast
 Program is associated with increases in academic test
 scores, daily attendance and class participation, and
 reductions in absenteeism and tardiness.⁹

Physical Activity

Studies suggest a connection between physical activity and increased levels of alertness, mental function and learning. Research indicates that:

- ➤ Schools that offer intense physical activity programs see positive effects on academic achievement.

 These include increased concentration, improved mathematics, reading and writing test scores, and reduced disruptive behavior, even when time for physical education classes reduces the time for academics.¹0
- ➤ A review of results from nearly 200 studies including adults and children found that physical activity supports learning.¹¹
- > Students participating in daily physical education exhibit better attendance, a more positive attitude towards school, and superior academic performance.¹²
- ➤ Moderate physical activity has a positive effect on immune function. Coupled with good nutrition, it can help prevent colds and the flu, two of the most common childhood ailments.¹³
- Higher achievement is associated with higher levels of fitness for fifth-, seventh- and ninth-graders. Females demonstrated higher achievement levels than males, particularly at higher fitness levels.¹⁴

For more information, contact
California Project LEAN
www.CaliforniaProjectLEAN.org

References

- **1.** Bogden, J.F., "Fit, Healthy, and Ready to Learn: A School Health Policy Guide," National Association of State Boards of Education, Alexandria, VA, 2000.
- 2. Position of American Dietetics Association, 2004.
- **3.** Tufts University, Center on Hunger, Poverty, and Nutrition Policy, "Statement on the Link Between Nutrition and Cognitive Development in Children," Tufts University, Medford, MA, 1994.
- **4.** Pollitt, E., "Does breakfast make a difference in school?" *Journal of the American Dietetic Association*, 1995, 95(10): 1134-1139.
- 5. Nutrition and Cognitive Development in Children. Policy Statement. Medford, MA: Tufts University of School and Nutrition; 1995. Tufts University, Center on Hunger, Poverty, and Nutrition Policy, "Statement on the Link Between Nutrition and Cognitive Development in Children," Tufts University, Medford, MA, 1995.
- 6. Troccoli, K.B., "Eat to Learn, Learn to Eat: The Link Between Nutrition and Learning in Children," National Health/Education Consortium, Washington, DC, 1993. A summary appears in: ERIC Clearinghouse on Elementary and Early Childhood Education, "Children's nutrition and learning," ERIC Digest, Urbana, IL, ED369579, June 1994. See also Murphy, J., Pagano, M., Nachmani, J., Sperling, P., Kane, S., and Kleinman, R., "The relationship of school breakfast to psychosocial and academic functioning," Archives of Pediatric Adolescent Medicine, 1998, 152, 899-907.
- **7.** Minnesota Department of Children, Families and Learning, "School Breakfast Programs Energizing the Classroom," St. Paul, MN: 1998.
- **8.** Public Media Center and California Food Policy Advocates, "Breakfast First, Food for Hungry Minds," 1998.
- **9.** Meyers, A.F., et al., "School breakfast program and school performance," American Journal of Diseases of Children, 1989, 143: 1234-1239. See also Powell C.A., et al., "Nutrition and Education: A Randomized Trial of the Effects of Rural Primary School Children." American Journal of Clinical Nutrition 68(4):873-79. National Governors Association (NGA) Center for Best Practices. "Improving Academic Performance by Meeting Student Health Needs." October 13,2000, p. 2. Murphy J.M., et al. The relationship of school breakfast to psychosocial and academic functioning: cross-sectional and longitudinal observations in an inner-city school sample. Archives of Pediatrics and Adolescent Medicine 1998; 152:899-907. Hanson TL, Austin GA. "Students health risks, resilience, and the Academic Performance in California" (California Healthy Kids Survey Factsheet 1). WestEd. Los Alamitos, CA: 2002. Kieinman, R.E., et al. "Diet, breakfast and academic performance in children." Ann Nutrition Metab 2002; 46(suppl 1):24-30. Pollitt, E., "Does breakfast make a difference in school?" Journal of the American Dietetic Association, 1995, 95(10): 1134-1139. Minnesota Department of Children, Families and Learning, "School Breakfast Programs Energizing the Classroom," St. Paul, MN: 1998.

- **10.** Symons, C.W., Cinelli, B., James, T.C., and Groff, P., "Bridging student health risks and academic achievement through comprehensive school health programs," *Journal of School Health* 1997, 67(6): 220-227. See also Kolbe, L.J., Green, L., Foreyt, J., et al., "Appropriate functions of health education in schools: Improving health and cognitive performance," In Krairweer, N., Arasteli, J., and Cataldo, M., Eds., *Child Health Behavior: A Behavioral Pediatrics Perspective*, New York, NY: John Wiley, 1986.
- **11.** Etnier J.I., Salazaw, W., Landers, D.M., Petreuzzello, S.J., Han, M., & Nowell, P. "The influence of physical fitness and exercise upon cognitive functioning: a meta-analysis." *Journal of Sport and Exercise Physiology.* 1997; 19(3):249-77.
- **12.** National Association for Sport and Physical Education/ Council of Physical Education for Children. "Physical education is critical to a complete education." 2001.
- **13.** President's Council on Physical Fitness and Sports, June 2001 *Research Digest*, Series 3, No. 13 "Does Exercise Alter Immune Function and Respiratory Infections?"
- **14.** California Department of Education. April 2005. "California Physical Fitness Test: A Study of the Relationship Between Physical Fitness and Academic Achievement in California Using 2004 Test Results." Sacramento, CA. http://www.cde.ca.gov/ta/tg/pf/documents/ 2004pftresults.doc.

Nutrition and Youth Health Statistics

Consumption Habits

- ➤ American children obtain 50 percent of their calories from added fat and sugar (35 percent and 15 percent, respectively), and only 1 percent eat diets that resemble the Food Guide Pyramid.¹
- ➤ About 25 percent of what adolescents eat is considered junk food, such as deep-fried foods, desserts, regular soft drinks, candy, cookies, pies and cakes.²
- ➤ Only 2 percent of teenagers in California met five key diet and physical activity recommendations.³

Overweight and Obesity

- ➤ Physical inactivity, obesity, and overweight costs

 California more than \$21.7 billion in medical care.⁴
- ➤ Obesity is associated with 112,000 annual excess adult deaths in the United States.⁵
- ➤ Nationally, an estimated 16 percent of children and adolescents ages 6-19 years were classified as overweight in 1999-2002, a 45 percent increase over the previous reporting period (11 percent in 1988-1994); another 15 percent are at risk of becoming overweight based on their BMI.^{6,7}
- ➤ Over the past three decades, the childhood obesity rate has more than doubled for preschool children aged 2-5 years and adolescents aged 12-19, and it has more than tripled for children aged 6-11 years.⁸
- More than one quarter of California's children are overweight.⁹
- ➤ Latino adolescents were most likely to be overweight.

 More than one out of three Latino adolescents in

 California were overweight or at risk for overweight.¹¹0
- ➤ Approximately one-third of overweight preschool children and about half of overweight school-aged children become overweight adults.¹¹
- Consumption of sugar-sweetened beverages, such as soda and fruit-flavored drinks, is associated with obesity in children.¹²

Diabetes

- ➤ An increase in type 2 diabetes among children has paralleled the rising rates of obesity.¹³ As many as 30,000 children have non-insulin-dependent diabetes that was once limited to adults.¹⁴
- ➤ One in three children born in 2000, and half of all children of color, are expected to develop type 2 diabetes during their lifetime.¹⁵

Osteoporosis

- ➤ Female adolescents and young adult women (ages 9-19) do not meet the recommended intake for calcium, with only about 1 in 10 consuming the recommended number of daily servings of milk products.¹⁶
- ➤ Soda consumption has almost doubled in the last 20 years.¹⁷ When children and adolescents replace milk with soft drinks, they consume fewer valuable nutrients such as calcium and vitamin D, which are needed for bone development and can help to prevent osteoporosis (porous bones). Since prevention occurs by reaching optimal bone mass during adolescence, it is not possible to make up any deficiencies later in life.

Dental Caries

- ➤ Dental caries affect over 50 percent of youths ages 5-17. More than 51 million hours of school time are lost every year because of dental-related illnesses.¹⁸
- ➤ Frequent exposure to sugar-sweetened soft drinks and candy increases risk for and severity of tooth decay.¹⁹
- ➤ Poor oral health has been related to decreased school performance, poor social relationships and less success later in life.²⁰

For more information, contact California Project LEAN www.CaliforniaProjectLEAN.org

References

- **1.** Munoz, K.A., Krebs-Smith, S.M., Ballard-Barbash, R., and Cleveland, L.E., "Food intakes of US children and adolescents compared with recommendations," *Pediatrics*, 1997, 100: 323-329.
- **2.** Meredith, C.N., and Dwyer, J.T., "Nutrition and exercise: Effects on adolescent health," *Annual Review of Public Health*, 1991, 12: 309-333.
- **3.** Foerster, S.B., Fierro, M.P., Gregson, J., Hudes, M., Oppen, M., and Sugerman, S., 1998 "California Teens Eating and Exercise Nutrition Survey."
- **4.** "The Economic Costs of Physical Inactivity, Obesity, and Overweight in California Adults." California Department of Health Services, 2005.
- Flegal, K.M., Graubard, B.I., Williamson, D.F., & Gail, M.H. Journal of American Medical Association. 2005; 293:1861-7.
- **6.** Centers for Disease Control and Prevention, National Center for Health Statistics, "Prevalence of Overweight Among Children and Adolescents: United States, 1999-2002."
- 7. Centers for Disease Control and Prevention, National Center for Health Statistics, "Obesity Still a Major Problem, New Data Show," Press Release, October 6, 2004.
- **8.** Institute of Medicine, "Preventing Childhood Obesity: Health in the Balance," 2005.
- **9.** California Center for Public Health Advocacy, "An Epidemic: Overweight and Unfit Children in California Assembly Districts," Davis, CA, 2002.
- **10.** Rodriguez, M., Kane, M., Alonzo-Diaz, L., & Flores, G. "One Out of Three Latino Adolescents Overweight or At Risk," Health Policy Fact Sheet, UCLA Center for Health Policy Research, April 2005.
- **11.** National Institute for Healthcare Management. "Obesity in Young Children: Impact and Intervention." August 2004.
- **12.** Ludwig, D.S., Peterson, K.E., and Gortmaker, S., "Relationship between consumption of sugar-sweetened drinks and childhood obesity: A prospective, observational analysis," Lancet, 2001, 357: 505-508.
- **13.** Rosenbaum, A.L., Joe, J.R., and Winter, W.R., "Emerging epidemic of type 2 diabetes in youth," Diabetes Care, 1999, 2292: 345-354. American Diabetes Association, "Type 2 Diabetes in Children and Adolescents," *Diabetes*, March 2000, 23(3): 381-389.
- **14.** Unpublished data from the Centers for Disease Control and Prevention, April 2002.
- **15.** Venkat Narayan ,K.M., Boyle, J.P., et al. *Journal of Medical Association*. 2003; 290:1884-1890.
- **16.** Crane, N.T., "National nutrition objectives and the Dietary Guidelines for Americans," *Nutrition Today*, March-April 1998.
- **17.** "Continuing Survey of Food Intake by Individuals," USDA 1977-1996.

- **24.** Gift, H.C., Reisine, S.T., and Larach, D.C., "The social impact of dental problems and visits," *American Journal of Public Health*, 1992, 82(12): 163-168.
- **19.** "Report supporting American Dental Association's stance on certain school soft drink contracts," American Dental Association, www.ada.org.
- **20.** "The Oral Health of California's Children: A Neglected Epidemic,"www.dentalhealthfoundation.org/topics/children.

Physical Activity and Youth Health Statistics

Physical Fitness

- ➤ Nearly 40 percent of California children are not physically fit.¹
- ➤ Among California children in grades five, seven and nine who were tested with the state's mandated physical fitness test in 2004, 73 percent failed to meet the state's minimum fitness standards for all six areas of the test. Only about half met the minimum standard for aerobic capacity.²

Physical Activity Rates

- ➤ Only 29 percent of adolescents report getting the recommended minimum of one hour of physical activity per day.³
- ➤ Children ages 9-11 spend an average of 152 minutes over 10 days engaged in physical education versus the California state-mandated 200 minutes.⁴
- ➤ Participation in all types of physical activity declines as age or grade in school increases.⁵
- ➤ Only 63 percent of California adolescents report any vigorous activity in the previous month. Males participate in vigorous physical activities at higher levels than females (70 percent and 56 percent, respectively).⁶

Overweight/Obesity

- ➤ Physical inactivity, obesity, and overweight cost California more than \$21.7 billion in medical care.⁷
- ➤ Obesity is associated with 112,000 annual excess adult deaths in the United States.⁸
- ➤ Nationally, an estimated 16 percent of children and adolescents ages 6-19 years were classified as overweight in 1999-2002, a 45 percent increase over the previous reporting period (11 percent in 1988-1994); another 15 percent are at risk of becoming overweight based on their BMI.⁹

- ➤ Over the past three decades, the childhood obesity rate has more than doubled for preschool children aged 2-5 years and adolescents aged 12-19, and it has more than tripled for children aged 6-11 years.¹⁰
- ➤ More than one quarter of California's children are overweight.¹¹
- ➤ Latino adolescents were most likely to be overweight.

 More than one out of three Latino adolescents in

 California were overweight or at risk for overweight.¹²
- ➤ Approximately one-third of overweight preschool children and about half of overweight school-aged children become overweight adults.¹³

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- California Center for Public Health Advocacy. "An Epidemic: Overweight and Unfit Children in California Assembly Districts," Davis, CA, 2002.
- 2. California Department of Education. "State Schools Chief O'Connell announces 2004 physical fitness results for California students," News Release #04-102. November 24, 2004, www.cde.ca.gov.
- **3.** Foerster, S.B., Fierro, M.P., Gregson, J., Hudes, J. Oppen, M., and Sugarman, S. 1998 California Teens Eating and Exercise Nutrition Survey. See also Profiling Body Weight and Tobacco Use-Media Highlights. Public Health Institute, Berkeley, CA, 2000.
- **4.** Ibid.
- **5.** U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. "Physical Activity and Health: A Report of the Surgeon General." July 1996.
- **6.** California Department of Health Services, Health of California's Adults, Adolescents, and Children: Findings from CHIS 2001, Sacramento, May 2004.
- **7.** California Department of Health Services. 2005. "The Economic Costs of Physical Inactivity, Obesity, and Overweight in California Adults." Sacramento, CA.
- **8.** Flegal KM, Graubard BI, Williamson DF, Gail MH. *Journal of American Medical Association*. 2005; 293:1861-7.
- **9.** Centers for Disease Control and Prevention, National Center for Health Statistics, "Prevalence of Overweight Among Children and Adolescents: United States, 1999-2002." See also Centers for Disease Control and Prevention, National Center for Health Statistics, "Obesity Still a Major Problem, New Data Show," Press Release, October 6, 2004.
- **10.** Institute of Medicine, *Preventing Childhood Obesity: Health in the Balance*, 2005.
- **11.** California Center for Public Health Advocacy, *An Epidemic: Overweight and Unfit Children in California Assembly Districts*, Davis, CA, 2002.
- **12.** Flegal Rodriguez, M., Kane, M., Alonzo-Diaz, L. Flores, G. "One Out of Three Latino Adolescents Overweight or At Risk," *Health Policy Fact Sheet*, UCLA Center for Health Policy Research, April 2005.
- **13.** National Institute for Healthcare Management. "Obesity in Young Children: Impact and Intervention." August 2004.

In-School Marketing to Children and Youth

- Childhood obesity is a major public health problem in the United States (US), yet US children are targeted as never before with marketing for foods high in sugar, fat, salt, and calories.
- There is strong evidence that marketing of foods and beverages to children influences their preferences, requests, purchases and diets.
- Food accounts for over half (54.5 percent) of total requests made by children, representing snack foods (23.9 percent), candy (16.8 percent), cereal (6.8 percent), fast foods (3.6 percent), and fruit and vegetables (3.4 percent).
- Overall, in the period 1994-2004, products high in total calories, sugar, or fat and low in nutrients dominated the profile of new foods and beverages targeted to children and youth.
- Studies suggest that food advertising and marketing is associated with more favorable attitudes, preferences, and behaviors among children toward the advertised food product.
- From 1992-1997 the amount spent marketing to children shot from \$6.2 billion to \$12 billion. Today marketers spend at least \$15 billion a year targeting children. And, the food industry spends an estimated \$10 billion per year marketing foods and beverages to children and youth in America.
- Each year the purchase influence of children increases with age: \$15 billion for 3-5 year olds, \$45 billion for 6-8 year olds, \$65 billion for 9-11 year olds, \$80 billion for 12-14 year olds, and \$90 billion for 15-17 year olds.
- Children determine parental spending in two ways:
 direct and indirect influence. Direct influence describes
 children's requests, hints, and demands. Indirect
 influence, which accounted for as much as \$300 billion
 of the nearly \$500 billion in 1997 household spending
 determined by children, is when parents know and
 buy the products and brands that their children prefer
 without being asked or told.

- Studies have shown that labeling and signage on school campuses have an effect on student's food selections at school.
- Advertising and marketing less healthful food products to students and using food as a reward can encourage overconsumption and relatively unhealthy dietary choices.
- Marketing to children in schools is especially problematic because in schools children are a captive audience and are asked to believe that what they are taught in school will be in their best interest.
- Candy and snack food manufacturers, soft drink bottlers, and fast food restaurants, are among the companies that market most heavily in schools.
- Among California high schools:
 - Nearly 72 percent allow advertising for fast food and beverages on campus, while only 13 percent prohibit such advertising.
 - The most common fast food or beverage advertisements are on vending machines (48 percent), scoreboards or signs (31 percent), and posters (23 percent).
- Channel One, in more than 12,000 schools, regularly shows ads for soda, candy, fast food, and chips to eight million students nationwide.
- A review of 77 corporate-sponsored classroom kits and materials found nearly 80 percent to be biased or incomplete, "promoting a viewpoint that favors consumption of the sponsor's product or service or a position that favors the company or its economic agenda."
- Marketing exploits children's developmental vulnerabilities.
 - Until the age of about eight children do not understand advertising's persuasive intent.
 - Very young children can't distinguish between commercials and program content. Even older children sometimes fail to recognize product placement as advertising.

 Marketers often use older children's desire to fit in with their peers and a tendency to rebel against authority figures as selling points for their products.

03/06

References

- **1.** Linn, Susan E. (2004). Food Marketing to Children in the Context of a Marketing Maelstrom. Journal of Public Health Policy: Public Health Advocacy Institute Special Section, Legal Approaches to the Obesity Epidemic, 25 Numbers 3/4: 24-35.
- **2.** "Food Marketing to Children and Youth: Threat or Opportunity?" The National Academies Press, (Washington, DC), Institute of Medicine National Academies of Science, 2006.
- **3.** Kraak, Vivica and Pelletier, David L. (1998). The Influence of Commercialism on the Food Purchasing Behavior of Children and Teenage Youth. Family Economics and Nutrition Review, 11(3): 15-24.
- **4.** "Food Marketing to Children and Youth: Threat or Opportunity?" The National Academies Press, (Washington, DC), Institute of Medicine National Academies of Science, 2006.
- **5.** American Public Health Association. (2003). Food Marketing and Advertising Directed at Children and Adolescents: Implications for Overweight. Policy Statement. Association News. Available at http://www.apha.org/legislative/policy/2003/2003-017.pdf
- **6.** Ogden, C.L., Flegal, K.M., Carroll, M.D. & Johnson, C.L. (2002). Prevalence and trends in overweight among US children and adolescents, 1999-2000. Journal of the American Medical Association, 288: 1728-32.
- **7.** "Food Marketing to Children and Youth: Threat or Opportunity?" The National Academies Press, (Washington, DC), Institute of Medicine National Academies of Science, 2006.
- **8.** Kraak, Vivica and Pelletier, David L. (1998). The Influence of Commercialism on the Food Purchasing Behavior of Children and Teenage Youth. Family Economics and Nutrition Review, 11(3): 15-24.
- **9.** McNeal, James U. (1998, April). Tapping the Three Kids' Market. American Demographics, 20 (4).
- **10.** "Does Food Promotion Influence Children? A Systematic Review of the Evidence." 2004; G. Hastings; Food Standards Agency; University of Strathclyde Centre for Social Marketing.
- **11.** US Department of Health and Human Services. Health Resources and Services Administration. Maternal and Child Health Bureau. Health, Mental Health, and Safety Guidelines for Schools. Available at http://www.nationalguidelines.org/guideline.cfm?quideNum=5-10
- **12.** Molnar, Alex. (2003, June). School Commercialism, Student Health, and the Pressure To Do More With Less. Commercialism in Education Research Unit (CERU). Education Policy Studies Laboratory. College of Education. Division of Educational Leadership and Policy Studies. Arizona State University.

- **13.** Molnar, Alex. (2003, June). School Commercialism, Student Health, and the Pressure To Do More With Less. Commercialism in Education Research Unit (CERU). Education Policy Studies Laboratory. College of Education. Division of Educational Leadership and Policy Studies. Arizona State University.
- **14.** Craypo, L., Purcell, A., Samuels, S., and Agron P., Fast Food Sales on High School Campuses: Results from the 2000 California High School Fast Food Survey," Journal of School Health, 2002, 72(2): 78-82.
- **15.** Reid, L. and Gedissman, A. (2000, November). Required TV program in schools encourages poor lifestyle choices. AAP News. American Academy of Pediatrics Available at: http://www.aap.org/advocacy/reid1100.htm
- **16.** Consumers Union. (1998), Captive Kids: a report on commercial pressure on kids in school. Washington, DC: Consumers Union 3.
- **17.** US Department of Health and Human Services. (2001). Overweight and obesity: A major public health issue. Prevention Report, 16.
- **18.** Institute of Medicine of the National Academies. (2004). Preventing Childhood Obesity: Health in the Balance. Washington DC: Institute of Medicine.
- **19.** Campaign for a Commercial Free Childhood, Marketing to Children: An Overview, www.commericalfreechildhood.org

California High School Fast Food Survey

Research and Methods:

The Public Health Institute commissioned Samuels & Associates to work with California Project LEAN (Leaders Encouraging Activity and Nutrition) on both the 2000 and 2003 "California High School Fast Food Surveys." The purpose of the 2003 survey was to gather information that described the forces that shape the environment in which California high school students make food choices. The primary research objectives were to (1) determine the extent of fast food sales on high school campuses, and (2) identify new issues that were not described by the initial "2000 California High School Fast Food Survey." The following findings and recommendations are based on responses from both of the surveys.

Findings:

- ➤ 95 percent of responding school districts reported selling fast foods as a la carte items.
- ➤ The two primary reasons that school districts report selling fast foods are: 1) students like fast foods (65 percent) and 2) fast foods keep food service out of the red (29 percent).
- ➤ 63 percent reported that a la carte items such as pizza, chips, and soda generated up to 60 percent of their food service operating budgets.
- ➤ Fast food profits are used to support a variety of school operations including food service (70 percent), facilities and equipment improvements (30 percent), extracurricular activities (20 percent), and athletic programs (17 percent).
- ➤ The most frequent a la carte items sold on high school campuses were chips (75 percent), pizza (73 percent), cookies (72 percent), burritos (71 percent), and soda (71 percent).
- ➤ The most frequently reported brands of foods and beverages sold through food service were Coke (36 percent), Pepsi (32 percent), Taco Bell (26 percent), Domino's Pizza (25 percent), and school district brands (24 percent).

- ➤ 18 percent reported contracting promotion rights to fast food or beverage companies.
- ➤ 67 percent reported that overall student participation rates in the National School Lunch Program are below 50 percent.

Recommendations:

- > Explore new opportunities to generate support and revenue that are not based on the sale of unhealthy foods.
- ➤ Eliminate the sale of foods and beverages that do not meet state nutrient standards.
- > Examine the use of schools as a channel for food and beverage company promotions.
- ➤ Eliminate exclusive contracts with food and beverage vendors in order to decrease unhealthy food and beverage advertising at school, which will in turn give school districts more control over the types of foods and beverages they can sell.
- Give food service control over all food sales on campus to decrease competition.

Full Reports:

Visit www.CaliforniaProjectLEAN.org and search for Fast Food Survey.

For more information, contact California Project LEAN.

Prevalence and Specifics of Districtwide Beverage Contracts in California's Largest School Districts

Research and Method

The California Endowment commissioned the Public Health Institute and Samuels & Associates to work with California Project LEAN (Leaders Encouraging Activity and Nutrition) to conduct a comprehensive study to better understand how soda consumption and sales are affecting the landscape of California's public school system and children's health. The study, conducted in 2001, surveyed the state's 25 largest school districts with a combined enrollment representing one-third of the state's 6 million student population.

Of the 25 districts, 20 completed the questionnaire for an 80 percent response rate. All districts indicated that soda was available to students within the district through various mechanisms, such as districtwide contracts, school-controlled contracts and soda sales agreements. In 15 cases, school districts delegate responsibility for soda availability to individual school site administrators. Five districts utilize districtwide contracts to manage soda sales to students. Because of the high-profile nature of and the large dollar sums involved in districtwide contracts, this report looks closely at the five districtwide contracts and seeks to explain provisions that could have ramifications for children's health.

Findings

- ➤ Soda is available to students in all of the school districts that responded through district-level and school-level contracting.
- > Soft drink companies use a variety of tactics to incorporate soda sales onto the school setting.
- ➤ Although the study found the same soda company holds four of the five districtwide contracts, the contracts varied in terms of sales and advertising characteristics. These contracts are not governed by comprehensive statewide policies or by a general consensus among district administrators.
- ➤ The district beverage contracts examined in this report contain provisions that limit school district

- control over the beverages sold at school, directly affecting students' nutritional choices.
- ➤ Only one of the five contracts examined included a nutrient analysis of the products available to students.
- ➤ Soda companies advertise to students through various mediums dictated by contracts including, but not limited to, product donations, software programs, scoreboards and marquees, signage, clothing, and school supplies.
- ➤ Some soda companies mandate, through their contracts, the number of vending machines required per student population, the location, hours of operation and inventory to be stocked at all times. Some contracts contain language that can limit the amount of information that can be legally disclosed to the public.
- ➤ Because both the school district and soda company income are tied directly to the volume of beverages sold on campus, the more beverages sold, the greater the revenue for the district and the soda company.

Recommendations

Financial Factors

- > Fund schools and student activities adequately so they do not have to rely on children's soft drink consumption to fund educational and extracurricular needs.
- >> Set lower prices for healthy beverages like 100 percent fruit juice, water and low-fat milk.
- ➤ When fundraisers are utilized, ensure that the money provided by students, families and community members overwhelmingly goes to the school.

 Minimize the amount given back to outside businesses and organizations.

Advertising and Promotion

- >> Set school district policies that ensure students have more access to healthy beverages than to unhealthy ones.
- > Eliminate school advertising and promotional events that promote unhealthy beverages.

> Educate school personnel and students that water provides adequate re-hydration for most student athletes.

School District Control

- Establish autonomous school district control, not soda company control, over all aspects of beverage sales and advertising at school.
- > Widely publicize and solicit public comment before entering into a beverage contract at individual schools and school districts.
- ➤ Eliminate confidentiality clauses that prohibit school districts from sharing with the general public all facts associated with their beverage contracts.
- >> Set contract provisions that allow for yearly public review of the contract, including changes or cancellation of the contract to meet student health needs.

Beverage Contract Administration

- Establish a committee of school personnel, students, parents and community health professionals to evaluate and improve school district beverage policy.
- Administer beverage contracts as a part of the school district's overall child nutrition program

Full Reports:

Visit www.CaliforniaProjectLEAN.org and search for soda study.

For more information, contact California Project LEAN

Food and Beverage Marketing on California High School Campuses Survey: Finding and Recommendations

Survey Goal

 To identify the types of food and beverage marketing and advertising present on high school campuses.

Survey Tool

- The survey tool was developed and utilized to assess the following types of food and beverage marketing on high school campuses:
- Advertisements displayed on school facilities including walls, scoreboards and sports arenas
- Advertising on vending machines
- Advertising or logos on equipment or accessories such as: physical education equipment (including beverage coolers), sports/band uniforms, cups, napkins, book covers and other school supplies
- Electronic advertising on Channel One, school radio stations and school Web sites
- Print advertising in newsletters, school papers and yearbooks
- Food and beverage marketing events such as product give-aways, coupons and taste tests
- Market research activities such as surveys, focus groups and tasting panels
- Presence of corporate-sponsored curriculum
- Corporate incentive programs
- Descriptions of types of food and beverages advertised in each location

Key Findings

 More than half (60%) of the posters and signage for food and beverage products were for "discouraged products" – food and beverages like candy, soda and chips.

- Less than 28 percent of all posters and signage for food and beverage products were for "encouraged products."
- Nearly two out of three (65%) of the vending ads were for soda, sweetened beverages or sports drinks.
- Seventy-one percent of the logos displayed on equipment were for sweetened beverages such as soda and sports drinks while only eight percent of the logos displayed on equipment were for brand-name water.
- Ninety-four percent of the marketing activities reported were conducted by companies associated with high fat, high sugar foods.

School Board Policies

 Forty-five percent of the schools reported a district policy that addressed marketing, but none of these policies explicitly limited or banned marketing of unhealthy foods and beverages.

About the Survey

 The survey assessed 20 public high schools representing a variety of ethnic and economic backgrounds in 13 counties throughout California.

Full Reports:

Visit www.CaliforniaProjectLEAN.org and search for marketing study.

For more information, contact California Project LEAN

References

- **1.** Discouraged products include foods that children should eat less of, are high in fat, saturated fat, trans fat, sugar and sodium, and are low in nutrients. Examples include: chips, candy, cookies, soda, sports drinks and other sweetened beverages.
- **2.** Encouraged products include foods that children should eat more of, are low in fat, saturated fat, trans fat, sugar and sodium, and are high in nutrients. Examples include: fruits, vegetables, whole grains, low-fat dairy and water.

School Health Policies and Program Study

Research

SHPPS is a national survey periodically conducted to assess the school health policies and programs at the state, district, school and classroom levels. Following are results from the SHPPS conducted in 2000.

Food Services

- ➤ Among schools in which food is ordered at the school level, on average 62.8 percent of all milk ordered by these schools in a typical week is either 2 percent or whole milk.
- ➤ The foods and beverages most commonly offered a la carte are fruits or vegetables (73.6 percent of schools); 100 percent fruit or vegetable juice (62.9 percent); baked goods that are not low in fat (59.2 percent); and pizza, hamburgers, or sandwiches (56.2 percent).
- ➤ 19.7 percent of schools usually give students less than 20 minutes to eat lunch once they are seated.
- ➤ During the 12 months preceding the study, 54.9 percent collected suggestions from students about the school food service program, 40.5 percent provided students with information on the nutrition and caloric content of foods available, and 34.7 percent conducted taste tests with students.
- ➤ 20.8 percent of schools require fruits or vegetables to be offered at settings outside the cafeteria, such as student parties, after-school programs, and concession stands; 12.4 percent of schools prohibit junk food (i.e., food that provides calories primarily through fats or added sugars and have minimal amounts of vitamins and minerals) in these settings.
- ➤ 43.0 percent of elementary, 73.9 percent of middle/ junior high, and 98.2 percent of senior high schools have either a vending machine or a school store, canteen or snack bar where students can purchase food or beverages — most commonly soft drinks, sports drinks, or fruit juices that are not 100 percent juice; salty snacks that are not low in fat; and cookies and other baked goods that are not low in fat.
- ➤ Among teachers of required health education, elementary school teachers who provided nutrition

education spent a median of five hours per school year teaching the topic, middle/junior high school teachers spent a median of four hours, and senior high school teachers spent a median of five hours.

Physical Education/ Physical Activity

- ➤ 8 percent of elementary schools (excluding kindergarten, which has requirements that are consistently lower than those for grades 1 through 5), 6.4 percent of middle/junior high schools, and 5.8 percent of senior high schools provide daily physical education or its equivalent (150 minutes per week for elementary schools; 225 minutes per week for middle/junior and senior high schools) for the entire school year for students in all grades in the school.
- ➤ 16.7 percent of elementary schools exempt students from required physical education courses for one or more of the following reasons: high physical competency test scores, participation in other school activities, participation in community sports activities, and participation in community service activities.
- ➤ 25.3 percent of middle/junior high schools and 40 percent of senior high schools exempt students from required physical education courses for one or more of the following reasons: high physical competency test scores, participation in other school activities, participation in community sports activities, participation in community service activities, enrollment in other school courses, participation in school sports, and participation in vocational training.
- ➤ Physical activity facilities are used for communitysponsored sports teams, classes, "open gym," or unsupervised programs for children in 71.6 percent of schools and for adults in 56.6 percent of schools during one or more of the following times: before school, after school, evenings, weekends, or during school vacations.

For more information visit the Centers for Disease Control and Prevention at www.cdc.gov/shpps

Creative School Fundraising Ideas

Things to do

- Gift wrapping, such as gift wrapping for donations at bookstore during holidays
- > Fun runs; walk-a-thon (pre-kindergarten: each child gets sponsorship for each lap walked up to 8 laps/\$1 per lap); bike-a-thon; jump-rope-a-thon; sled-a-thon
- >> 3-on-3 basketball tournament (charge a team \$40 for entrance; local businesses donate prizes)
- Car wash (pre-sell tickets as gifts, ask for pledges per car in advance, operate a food stand with coffee, bagels and juice)
- "Chuck a puck at the rink" (A hockey team plays this game between the 2nd and 3rd periods of the hockey game. Each puck is numbered and sold for \$1. Everyone throws them on the ice and the one closest to the center gets half of the money sold.)
- ➤ Singing telegrams
- Talent shows/recital/lip-sync contest (local businesses donate items for raffle)
- > Read-a-thon; spelling bees; science fairs
- ➤ Carnivals (Halloween, Easter)
- > Dances (kids, father/daughter, family, Sadie Hawkins)
- > Bowling night/bowl-a-thon
- ➤ Skate night/skate-a-thon
- > Raffles (teachers do a silly activity)
- ➤ Magic show
- > Family/glamour portraits
- ➤ Penny wars (pennies +1 point, nickels +5, quarters +25, team with most points wins)
- ➤ Raffle (movie passes, theme bags, theme baskets assembled by students). Check your local laws governing raffles.
- ➤ T-shirts/caps
- > Students volunteer for odd jobs to raise money, end of "work" day dinner and dance held for volunteers
- > School event planners (includes all school event dates)

Things that involve the community

- Catering (district food service department caters events)
- > Workshop/class
- ➤ Conference
- > Treasure hunt/scavenger hunt
- > Tennis/horseshoe competition
- > Recycling cans/bottles/paper/Christmas trees
- ➤ Golf tournament
- >> Rent-a-teen-helper (rake leaves, water gardens, mow lawns, wash dog)
- ➤ Auction or money jars for students to place money in (teacher does something for kids at set increments, e.g. dress as a cheerleader, do cheers, act out a scene from a play)
- Dinner fundraiser with a live or silent auction (goods, services and talents)
- > Community job fair (charge an exhibit fee)
- > Bricks with engraved donor names
- ➤ Candles/crafts/books/plant sales
- ➤ Halloween insurance (\$1 insurance sold for guaranteed cleanup the day after Halloween. Usually minimal clean ups and volunteers tipped.)
- > Sell seat cushions at sporting events (sell advertisements on cushions for local businesses)
- >> School clothing or rummage sale
- >> Bingo nights (parents with kids in sports or involved in organizations man the tables)

For more information, contact California Project LEAN

Ideas excerpted from Shasta County Public Health Department

Constructive Classroom Rewards: Promoting Good Habits

While Protecting Children's Health

Rewarding children in the classroom need not involve candy and other foods that can undermine children's diets and health and reinforce unhealthful eating habits. A wide variety of alternative rewards can be used to provide positive reinforcement for children's behavior and academic performance. The best policy is not to use food to reward children for good behavior or academic performance. At a minimum, children should not be rewarded using foods of poor nutritional quality, including at classroom parties.

The harm in using food to reward children

Providing food based on performance or behavior connects food to mood. This practice can encourage children to eat treats even when they are not hungry and can instill lifetime habits of rewarding or comforting themselves with food behaviors associated with unhealthy eating or obesity.

Physical activity and food should not be linked to punishment

Punishing children by taking away recess or physical education classes reduces their already-scarce opportunities for physical activity. Another counter-productive punishment is forcing children to do physical activity such as running laps or pushups. Children often learn to dislike things that are used as punishments. Thus, penalizing children with physical activity might lead them to avoid activities that are important for maintaining wellness and a healthy body weight. In addition, food should not be withheld as a means of punishing children. The U.S. Department of Agriculture prohibits withholding meals as a punishment for any child enrolled in a school participating in the school meal programs.

Examples of Beneficial — and Inexpensive — Rewards for Children

1. Social rewards

"Social rewards" involve attention, praise, or thanks and are often more highly valued by children than a toy or food. Simple gestures like pats on the shoulder, verbal praise (including in front of others), nods, or smiles can mean a lot. These types of social rewards affirm a child's worth as a person.

2. Recognition

- ➤ Trophy, plaque, ribbon, or certificate in recognition of achievement or a sticker with an affirming message (e.g., "Great job")
- > Recognizing a child's achievement on the school-wide morning announcements and/or the school's website
- > A photo recognition board in a prominent location in the school
- ➤ A phone call, email, or letter sent home to parents or guardians commending a child's accomplishment
- ➤ A note from the teacher to the student commending his or her achievement

3. Privileges

- ➤ Going first
- > Choosing a class activity
- > Helping the teacher
- > Having an extra few minutes of recess with a friend
- ➤ "No homework" pass
- > Teaching the class
- > Playing an educational computer or other game
- > Reading to a younger class
- > Reading the school-wide morning announcements
- > Helping in another classroom
- > Eating lunch with a teacher or principal
- > Listening with a headset to a book on tape or CD
- > Going to the library to select a book to read
- > Taking a walk with the principal or teacher
- > Designing a class or hall bulletin board
- > Writing or drawing on the blackboard/whiteboard
- > Taking care of the class animal for a day

➤ Allowing a child to choose an extra recess activity for the class on his/her birthday

4. Rewards for a class

- ➤ Extra recess
- ➤ Eating lunch outdoors
- ➤ Going to the lunchroom first
- ➤ Reading outdoors
- ➤ Holding class outdoors
- > Extra art, music, PE, or reading time
- > Listening to music while working
- ➤ Dancing to music
- > Playing a game or doing a puzzle together
- > "Free choice" time at the end of the day
- > A book read aloud to the class by the teacher

5. School supplies

- > Pencils: colored, with logos, or other decorations
- ➤ Pens
- ➤ Erasers
- ➤ Notepads/notebooks
- ➤ Boxes of crayons
- ➤ Stencils
- ➤ Stamps
- ➤ Plastic scissors
- ➤ Bookmarks
- ➤ Highlighters
- ➤ Chalk (e.g., sidewalk chalk)
- ➤ Markers
- ➤ Coloring books

Excerpted from the Center for Science in the Public Interest www.cspinet.org

Coordinated School Health Program

The coordinated school health aproach embraces the link between health and education. It contains eight essential components, with the ultimate goal being to fulfill young people's over-all health* needs so that students can be in the classroom and learning. The eight-component model involves the entire school system, home and community working in a coordinated way to support the health of young people in a school setting and to eliminate duplication and gaps. Resources and energy are strengthened in this coordinated, concentrated effort.

The result is a cohesive team that has a sum greater than its parts, working to benefit the health and well-being of students.

* The term "health" is used in the broadest sense. Health is much more than simply the absence of disease; health involves optimal physical, mental, social, and emotional functioning and well-being.

-World Health Organization, 1996

The 8 components of coordinated health

- **1** Health education
 - Classroom instruction that addresses the physical, mental, emotional and social dimensions of health.
- 2 Family and community involvement
 Partnerships among schools, parents and
 community groups to maximize resources
 and expertise in supporting the health of
 young people.
- The school's physical, emotional and social climate, providing a safe physical plant and a healthy, supportive environ-
- 4 Physical education

ment for learning.

School-based instructional program that provides students with the skills, knowledge, attitudes and confidence to be physically active for life.

- **5** Nutrition services
 - Reinforcement of classroom-based nutrition education, promotion of healthy eating behaviors and integration of nutritious, affordable and appealing meals.
- 6 Health promotion for staff
 Assessment, education and wellness activities for school faculty and staff.
- **7** Health services

Preventive services, education, emergency care, referral and management of acute and chronic health conditions to ensure health of students.

8 Psychological and counseling services

Activities that focus on cognitive, emotional, behavioral and social needs in the school and home.

School Health Councils

School health councils are useful in addressing all eight areas of coordinated school health. A school health council, sometimes called a school health advisory council, is an advisory group of individuals who represent segments of the school and community. The group acts collectively to provide advice to the school district on health-related issues, programs and activities.

The concept of school health councils has been supported by a number of leadership organizations, most notably the American Cancer Society. Recently, school health councils have been a recommended approach for developing wellness policies required by the Child Nutrition and WIC Reauthorization Act of 2004.

Generally, the members of a school health council are appointed by the school district. Ideally, members represent the varying components of coordinated school health and include public health and community-based professionals and volunteers, school nurses, health educators, school administrators, nutrition services staff, physical education teachers, counseling and psychological services, parents, students, and others interested in and concerned about school health.

Examples of roles that are commonly assigned to school health councils include, but are not limited to:

- > program planning;
- ➤ advocacy;
- ➤ fiscal planning;
- > liaison with district, county and state agencies;
- > direct intervention and policy implementation; and
- > evaluation, accountability, and quality control.

School board members are called upon to address many health issues. Given that many health and social issues are interrelated, school health councils are a useful forum for schools and community members to support optimum health and academic achievement of children and youth.

Sources:

Health Framework for California Public Schools: Kindergarten Through Grade Twelve – Adopted by the California State Board of Education (2003)

"Improving School Health: A Guide to School Health Councils," American Cancer Society

For more information, contact School Health Connections California Department of Health Services www.dhs.ca.gov/schoolhealth

The new nutrition standards: Implications for student wellness

As part of a larger state and national effort to curb childhood obesity, improve children's health, and enhance student learning, new state legislation creates stronger standards for foods and beverages sold at schools. SB 12 (Ch. 235) and SB 965 (Ch. 237), both authored by Senator Escutia, impact all districts, all schools, and all students in grades K-12. The provisions do not aply to charter schools and private schools.

Board members, district staff, and school health councils need to be knowledgeable about the new requirements, some of which are effective beginning January 1, 2006, and others beginning July 1, 2007. Boards must ensure that board policies meet or exceed the standards.

If the district participates in the National School Lunch Program, School Breakfast Program, or other programs authorized by the federal Child Nutrition Act, nutrition guidelines for all foods available on each campus during the school day must be incorporated into a "student wellness" policy as described below. These nutrition guidelines are one component of a comprehensive, coordinated approach to encouraging healthy eating practices and physical activity.

This policy brief explains the new state standards for foods and beverages provided at schools, and suggests issues that boards should consider as they review proposed policies. CSBA is reissuing (November 2005) several sample board policies and administrative regulations to provide further guidance and sample language that fulfills the federal mandate for a wellness policy, and recently updated its publication *Student Wellness: A Healthy Food and Physical Activity Policy Resource Guide* which summarizes relevant research and provides worksheets and other resources for policy development.

Background: Federal Mandate for Wellness Policy

The Federal Child Nutrition and Women, Infants and Children (WIC) Reauthorization Act of 2004 (Note in 42 USC 1751) mandates that any district participating in a federal nutrition program adopt a policy on student wellness that, at a minimum:

- **1.** Includes goals for nutrition education, physical activity, and other school-based activities that are designed to promote student wellness in a manner that the district determines is appropriate.
- **2.** Includes nutrition guidelines selected by the district for all foods available on each campus during the school day, with the objectives of promoting student health and reducing childhood obesity.
- **3.** Provides an assurance that the district's guidelines for reimbursable school meals will not be less restrictive than federal regulations and guidance issued pursuant to 42 USC 1758(f)(1), 1766(a) and 1799(a) and (b), as they apply to schools.
- **4.** Establishes a plan for measuring implementation of the policy, including the designation of one or more persons in the district or at each school charged with operational responsibility for ensuring that this policy is implemented. This policy brief focuses on component #2 pertaining to nutrition guidelines for foods and beverages sold at schools, including foods and beverages available through school cafeterias, as well as other food sales through vending machines, student stores, fundraisers, or other venues.

Required to be in place by the beginning of the 2006-07 school year, the wellness policy must be developed through an inclusive process involving, at a minimum, parents/guardians, students, school food service professionals, school administrators, board representatives, and members of the public. Districts need to allow sufficient time for the school health council or other committee to research the issues and build consensus around recommended policy. Sufficient time must also be allowed for public hearing and adequate review by the board. Thus,

in order to meet the deadline established by federal law, districts should already be engaged in the policy development process or at least have established the process and timelines they will follow. The school health council/committee charged with recommending the wellness policy must be informed about the changes in state nutritional standards so that district policies can be aligned.

Nutritional Standards for Foods

What are the current standards?

Federal regulations establish nutritional standards, nutrient levels and calorie levels for meals provided by schools under the National School Lunch Program or School Breakfast Program. These detailed standards are contained in 7 CFR 210.10 and 220.8.

For foods that are not reimbursed through the federal meal programs, the standards listed in Education Code 38085 are effective until July 1, 2007. In accordance with these standards, a minimum of 50 percent of the food sold on school grounds during regular school hours must be from the nutritious foods listed in Education Code 38085.

What changes are coming, and when?

Beginning July 1, 2007, the food standards in Education Code 38085 for non-reimbursable meals will be replaced by the standards established by SB 12 in Education Code 49431 and 49431.2. SB 12 also eliminated the provision that compliance with the standards was contingent upon appropriations in the state budget for nutrition policy development grants, support and technical assistance to school districts, and increased meal reimbursements. Once the new standards go into effect, the only foods that may be sold to a student at an elementary school during the school day are full meals and individually sold portions of nuts, nut butters, seeds, eggs, cheese packaged for individual sale, fruit, vegetables that have not been deep fried and legumes. An individually sold dairy or whole grain food item may be sold if it meets all of the following criteria:

- **1.** Not more than 35 percent of its total calories is from fat.
- **2.** Not more than 10 percent of its total calories is from saturated fat.

- **3.** Not more than 35 percent of its total weight is composed of sugar, including naturally occurring and added sugar.
- 4. Its total calories do not exceed 175 calories.

Food standards for middle, junior high, and high schools, effective July 1, 2007, require that each entree item sold outside the reimbursable meal program must meet the following criteria:

- 1. Its total calories do not exceed 400 calories.
- **2.** It contains no more than four grams of fat per 100 calories.
- **3.** It is categorized as an entree item in the National School Lunch or School Breakfast program.

Middle, junior high, and high schools also must ensure that each snack item that supplements a meal meets the following criteria:

- **1.** Not more than 35 percent of its total calories is from fat, excluding nuts, nut butters, seeds, eggs, cheese packaged for individual sale, fruits, vegetables that have not been deep fried, or legumes.
- **2.** Not more than 10 percent of its total calories is from saturated fat, excluding eggs or cheese packaged for individual sale.
- **3.** Not more than 35 percent of its total weight is composed of sugar, including naturally occurring and added sugar, excluding fruits or vegetables that have not been deep fried.
- **4.** Its total calories do not exceed 250 calories.

At their discretion, districts may choose to adopt the above standards prior to July 1, 2007, and/or may adopt standards that exceed those required by state law, in order to provide the maximum benefit to students.

Nutritional Standards for Beverages

What are the current standards?

Current standards for beverages, in effect since July 1, 2004, apply only to elementary, middle, and junior high schools (Education Code 49431.5). Allowable beverages include water, any kind of milk, fruit juices, and fruit-based drinks that are at least 50 percent fruit juice with no added sweetener. In addition, middle and junior high schools may offer an electrolyte replacement beverage.

What changes are coming, and when?

SB 965 revised the standards for beverages in Education Code 49431.5 for elementary, middle, and junior high schools, effective January 1, 2006. Changes include the addition of vegetable-based drinks and a limitation on the types of milk that may be provided, emphasizing nonfat and low-fat products.

These standards apply to beverages sold to elementary students regardless of the time of day, and to middle or junior high school students from one-half hour before the start of the school day until one-half hour after the end of the school day. Under these standards, the only beverages that may be sold at school are:

- **1.** Fruit-based drinks that are composed of no less than 50 percent fruit juice and have no added sweetener.
- Vegetable-based drinks that are composed of no less than 50 percent vegetable juice and have no added sweetener.
- **3.** Drinking water with no added sweetener.
- **4.** Milk that is 1-percent fat, 2-percent fat, or nonfat; soy milk, rice milk, or other similar nondairy milk.
- **5.** For middle and junior high schools, electrolyte replacement beverages that contain no more than 42 grams of added sweetener per 20-ounce serving.

SB 965 also extends these standards to high schools beginning July 1, 2007. The standards will be phased in so that, beginning July 1, 2007, at least 50 percent of the beverages sold to high school students from one-half hour before the start of the school day until one-half hour after the end of the school day must be those specified in items #1-5 above. Beginning July 1, 2009, 100 percent of

the beverages sold to high school students from one-half hour before the start of the school day until one-half hour after the end of the school day must meet these standards. When feasible, districts may choose to implement the standards prior to these dates.

Outside Food Sales

Food sales outside of the district's food service program (e.g., through school organizations, vending machines, student stores) generally must comply with the same nutritional standards applicable to the food service program. State law (as amended by SB 12 and SB 965) does allow some sales of foods and beverages that do not comply with the state nutritional standards, but only if such sales occur outside the school or outside the normal school day. When foods or beverages are sold by students at any grade level as a fundraising event, it is not necessary that they comply with state nutritional standards if the sale takes place off and away from school premises, or takes place at least one-half hour after the end of the school day. In addition, a food sale at a middle, junior high or high school need not meet nutritional standards if the sale occurs during a school-sponsored student activity after the end of the school day. Middle and junior high schools cannot sell non-nutritious beverages in vending machines, student stores, and cafeterias until later than one-half hour after the end of the school day.

Districts that have contracts with a third party for the sale of food or beverages in vending machines may need to examine those contracts and begin negotiations in order make sure that foods and beverages sold in vending machines comply with the nutritional standards within the timelines specified in law. If a contract provision is in conflict with the new requirements, district legal counsel should be consulted.

Policy Considerations for Boards

Boards need to ensure that existing district policies containing nutritional guidelines are reviewed and updated for alignment with new law, on or before the dates that those standards become effective. Even when the policy is developed with the involvement of a school health council or other committee, the board is ultimately responsible for the content of the policy and must ensure compliance with law. CSBA's sample board policies and administrative regulations

have been updated to reflect the new nutritional standards. It is recommended that the board and school health council/committee look at the "big picture" for improving student health, rather than reviewing nutritional standards in isolation. As noted above, for those districts participating in federal meal programs, these nutritional guidelines should be incorporated into the district's "wellness" policy. However, even though the district may have an overarching wellness policy, it is likely that related concepts will appear in multiple district policies. Districts are encouraged to review the following materials and tailor them to meet local needs and goals:

BP 3312 - Contracts
BP/AR 3550 - Food Service/Child Nutrition Program
BP/AR 3554 - Other Food Sales
BP 5030 - Student Wellness
BP/AR 6142.7 - Physical Education
BP/AR 6142.8 - Comprehensive Health Education

The above referenced policies are available at www.csba.org/ps/nutrition_phys_resources.cfm. When developing or updating policy related to nutritional standards, or reviewing policy recommendations from the school health council/committee, the board might consider the following questions:

- Has the district established clear goals or expectations for the work of the school health council/committee?
- Have adequate resources and information been made available to the school health council/committee to research student wellness issues and develop recommendations on behalf of the district?
- Has the district sought input from parents/guardians, students, school food service professionals, school administrators, board representatives, and members of the public in the development of policies pertaining to nutritional standards, as required by federal law for districts participating in federally reimbursed meal programs? Are there others who should be involved because of their expertise or diverse perspectives (e.g., district administrators, health professionals, school nurses, health educators, physical education teachers, counselors, and/or others interested in school health issues)?
- Do the standards recommended by the school health council/committee align with applicable state standards?

- Do they exceed state standards? If so, in what way(s)?
- Does recommended policy ensure that new state standards will be implemented within the time frames required by law? Can or should the district implement the standards sooner?
- Does the district have contract obligations that need to be taken into consideration (e.g., contracts with beverage companies)? When will those contracts expire?
- How are foods currently selected for school menus? Are parents/guardians or students involved in the process?
- Are all district schools participating in available child nutrition programs, including breakfast, lunch, afterschool snacks, child care food service, and summer food service? If not, why not?
- Do district schools currently have vending machines, student stores, or other venues for food and beverage sales? What foods and beverages are sold to students through these venues? Do they offer healthy snacks?
- Are nutritional standards perceived as part of a broader, more comprehensive approach to student health? In what ways are linkages accomplished?
- Is the district reviewing and updating all its policies related to student nutrition (BP 3312 - Contracts, BP/AR 3550 - Food Service/Child Nutrition, BP/AR 3554 - Other Food Sales, BP 5030 - Student Wellness), as well as policies related to comprehensive health education (BP/ AR 6142.8) and physical education (BP/AR 6142.7)?
- Has the school health council/committee or district staff identified potential challenges to implementing the nutritional standards? Has it recommended strategies to communicate with students and parents/guardians regarding the district's wellness policy? Will staff development be provided to food services staff and others to assist in implementation of the wellness policy?
- Has the superintendent identified persons at the district and school site levels to monitor implementation of the district's wellness policy?

Other Board Actions

In addition to adopting policy to improve the nutritional content of foods and beverages available at schools, the board can support and reinforce its policy in the following ways:

- 1. In setting the vision and goals for the district, emphasize the board's priority on supporting student health, including specific desired outcomes related to healthy eating.
- 2. Ensure that the district's budget supports the priority on student nutrition. If the district will not be renewing contracts for non-nutritious foods or beverages, track the impact on the budget and explore alternative funding sources that do not compromise student health.
- 3. Become advocates for good health and nutrition.

 Encourage employees to serve as positive role models for students through their own behaviors and by avoiding the use of non-nutritious foods as classroom rewards.

 Encourage parents/guardians to provide healthy snacks for class parties and to reinforce healthy eating practices at home. Encourage school organizations to use non-food items for fundraisers. As community leaders, collaborate with other agencies and organizations to develop coordinated approaches to student health.
- **4.** Ensure accountability for the implementation and evaluation of the district's wellness policy. Work with the superintendent and/or school health council/committee to identify desired outcomes that can be clearly measured, and schedule periodic reports to the board on the district's progress.

Additional Resources

CSBA

Student Wellness: A Healthy Food and Physical Activity Policy Resource Guide, rev. 2006 www.csba.org/ps/nutrition_phys_resources.cfm

California Department of Education

Healthy Children Ready to Learn, January 2005 Health Framework for California Public Schools, Kindergarten Through Grade Twelve, 2003 www.cde.ca.gov/ls/nu

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Health Framework for California Public Schools, Kindergarten Through Grade Twelve, 2003 www.cde.ca.gov/ls/nu

California Project LEAN

Food Standards Calculator www.CaliforniaProjectLEAN.org

Centers for Disease Control and Prevention

School Health Index for Physical Activity and Healthy
Eating: A Self-Assessment and Planning Guide for Elementary and Middle/High Schools, 2004
www.cdc.gov
CDC National Alliance for Nutrition and Activity

CDC National Alliance for Nutrition and Activity www.cspinet.org/nutritionpolicy/nana.html

Dairy Council of California

www.dairycouncilofca.org

National Association of State Boards of Education (NASBE)

Fit, Healthy and Ready to Learn, 2000 www.nasbe.org

National School Boards Association

www.nsba.org

School Nutrition Association

www.schoolnutrition.org

Society for Nutrition Education

www.sne.org

U.S. Department of Agriculture

Dietary Guidelines for Americans, 2005
Team Nutrition, Food and Nutrition Services, Changing the Scene, Improving the School Nutrition Environment:
A Guide to Local Action, 2000
www.fns.usda.gov/tn/healthy/wellnesspolicy_steps.html see also: www.teamnutrition.usda.gov

Action for Healthy Kids

www.actionforhealthykids.org

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School-based marketing of food and beverages: Policy implications for school boards

As school districts face budgetary constraints and seek ways to enhance their resources, many turn to commercial sources of funding. Advertisements on school buses or scoreboards, use of corporation-sponsored educational materials, sales through vending machines, branded fast food, exclusive contracts with beverage corporations and similar activities provide supplementary cash, products, or services to schools.

Increasingly, however, commercial activities in schools are coming under scrutiny from parents, teachers, advocacy groups, and others. When the product is a food or beverage of minimal nutritional value, school boards have a responsibility to consider the impact of such marketing on student health and well-being, and whether marketing the product presents a message that is inconsistent with the district's nutrition education program.

The California School Boards Association, as part of its partnership with California Project LEAN (Leaders Encouraging Activity and Nutrition) in the Successful Students Through Healthy Food Policies campaign, encourages school boards and superintendents to engage in thoughtful discussions with their communities on the pros and cons of commercial activities and to review related board policies. This policy brief is intended to provide background information for such discussion and to highlight critical policy considerations.

Marketing to children and youth

Companies recognize the tremendous value of marketing to children and youth. Youth have considerable spending power, with estimates varying between \$25 to \$140 billion a year nationally. They also influence \$500 billion of family purchases per year. Perhaps most important to marketers, building brand awareness and brand loyalty among children influences their buying habits in adulthood.

While all children and youth are subject to the persuasive influence of advertising, younger children, especially those under 8 years, appear to be uniquely vulnerable to commercial promotion because they lack the skills to understand the

difference between information and advertising.² A study of primary school children found that exposure to advertising influenced which foods children claimed to like.³ Another study showed that labeling and signage on a vending machine had an effect on what was bought by secondary school students.⁴

Thus, it may not be surprising that food and beverage advertisers spend \$10 billion to \$12 billion a year to reach children and youth. Of that, more than \$1 billion is spent on media advertising to children that reaches them primarily through television; more than \$4.5 billion is spent on youth-targeted promotions such as premiums, coupons, sweep-stakes, and contests; \$2 billion is spent on youth-targeted public relations; and \$3 billion is spent on packaging designed for children. More than half of television advertisements directed at children promote food and beverages such as candy, fast food, snack foods, soft drinks, and sweetened breakfast cereals that are high in calories and fat, and low in fiber and other essential nutrients.

Commercial activities in schools

Marketing through schools adds credibility to marketing activities by associating the company's name and product with trusted schools or teachers.⁶ Commercial dollars constitute a small fraction of the money that goes to public schools, usually less than one percent.⁷ However, in 2000, a U.S. Government Accountability Office report found that commercial activities in schools had increased in visibility in the previous decade.⁸

Commercial activities in schools include:

- product sales through vending machines, exclusive contracts with soft drink companies, branded fast food, and fundraisers
- direct advertising, such as food and beverage advertisements through school publications, scoreboards, and posters
- indirect advertising, such as corporate-sponsored educational programs, sports sponsorships, and incentive programs using contests and coupons

 market research through student surveys, sampling, and taste tests

Most commercial activities occur in high schools (e.g., vending machines, display of corporate advertising), although coupon redemption programs are largely an elementary school enterprise.⁹

Product sales: competitive food and beverages

Food and beverages served or sold outside the school's meal programs represent a significant share of the available foods that students purchase and consume at school: 98.2 percent of senior high schools, 73.9 percent of middle/junior high schools and 43 percent of elementary schools have either a vending machine or a school store, canteen or snack bar where students can purchase food or beverages. Most commonly these include soft drinks, sports drinks, fruit juices that are not 100 percent juice, and salty snacks or baked goods that are not low in fat.¹⁰

Of all product sales in schools, exclusive soft drink contracts are the fastest growing venture.¹¹ A national survey¹² found that 71.9 percent of high schools, 50.4 percent of middle/junior high schools, and 38.2 percent of elementary schools have a contract with a company to sell soft drinks. Of those schools with soft drink contracts:

- 91.7 percent receive a specific percentage of soft drink sales receipts
- 37.6 percent allow advertising by the company in the school building
- 27.7 percent allow advertising by the company on school grounds
- 2.2 percent allow advertising by the company on school buses

In a survey of California school board members and superintendents, 32 percent of responding board members and 41 percent of superintendents reported that beverage vendors had an exclusive contract with their district; 48 percent of board members and 64 percent of superintendents reported that vendors had an exclusive contract with *at least one school* in their district.¹³ However, in the same survey, a minority of board members (26 percent) and superintendents (44 percent)

agreed with the practice of having exclusive beverage vendors. In a followup survey, 22 percent of school board members said they had rejected a soda contract offer in the last three years, and 21 percent said their school board decided not to renew any soda contracts. Furthermore, 13 percent said their school board had decided to terminate any soda contracts. ¹⁴

This same survey reported that a majority of school board members supported banning fast food sales in elementary schools (65 percent) and requiring that at least 50 percent of the food and beverages sold in vending machines meet national nutritional guidelines (81 percent). ¹⁵

Currently, food sales outside the school's meal programs must meet the nutritional standards specified in Education Code 38085. Beginning July 1, 2007, these standards will be replaced by the standards contained in Education Code 49431 for elementary schools and Education Code 49431.2 for middle, junior high and high schools, as amended and added by SB 12 (2005).

Beverage standards are contained in Education Code 49431.5. SB 965 (2005) amended Education Code 49431.5 to modify the list of allowable beverages and to establish standards for high schools which will be phased in between July 1, 2007, and July 1, 2009.

These laws establish conditions under which food or beverages that do not meet the nutritional standards may be sold. In general, these laws provide that sales of such food or beverages (including sales through vending machines, student stores and cafeterias) need to occur off school premises or at least one-half hour after the end of the school day.

Advertising

Research shows that, among California high schools: 16

- Nearly 72 percent allow advertising for fast food and beverages on campus, while only 13 percent prohibit such advertising.
- The most common fast food or beverage advertisements are on vending machines (48 percent), scoreboards or signs (31 percent), and posters (23 percent).

Among schools in a national survey: 17

- 23.3 percent allow promotion of candy, fast foods, and soft drinks through coupons
- 14.3 percent allow promotion of these products through sponsorship of school events
- 7.7 percent allow promotion of these products through school publications
- 24.8 percent prohibit or discourage faculty and staff from using these items as rewards

The large majority of California board members (80 percent) responding to a survey support limiting and monitoring food and soda advertisements in schools, and significant percentages (57 percent) would even go so far as to ban such advertisements. ¹⁸

Policy issues

California law places some restrictions on certain types of commercial activities in schools, such as exposure to brand names, products, or company logos in instructional materials. In addition, any food sales conducted outside the district's food services program must meet nutritional standards specified in law, as discussed above.

However, school districts have considerable discretion to make decisions regarding many commercial activities. Will the district approve vending machines on some or all campuses, and if so, what restrictions should be placed on the food or beverages sold? Should the district allow or prohibit advertisements on district facilities, equipment and buses? Should these activities be decided on a case-by-case basis depending on the product being promoted, the age of the students being exposed to the advertisement, and other considerations?

As the district's policymakers, the board has a responsibility to determine the extent to which commercial activities will be allowed, as well as the criteria and circumstances under which specific activities will be approved. The superintendent and district staff should establish clear review and approval processes consistent with board policy. These processes need to be clearly communicated to and adhered to by staff. Boards must also ensure their own adherence to established policies when they approve and ratify contracts with corporations.

CSBA provides sample board policies and administrative regulations related to advertising (BP/AR 1325 Advertising and Promotion), competitive food sales (BP/AR 3554 Other Food Sales), and contracts as they pertain to non-nutritious food and beverages (BP 3312 Contracts). However, districts are strongly encouraged to tailor policies to meet local needs and values. Policy development on these issues should be done in close cooperation with the superintendent and provide ample opportunities for input from staff, parents, community members and students.

When reviewing, revising or developing policy related to commercial activities, the board might consider the following questions:

- Do the district's existing policies and regulations permit advertising, product sales, and/or other commercial activities? Do they specify acceptable forms of commercial activity or establish any restrictions? Are commercial advertisements for foods and beverages restricted in any way?
- What is the district's existing process for reviewing and approving specific requests for advertisements or other commercial activities? Has the board established criteria for approval? Who screens proposed ads and other material?
- What criteria and processes are in place to evaluate classroom instructional materials to determine whether such materials endorse specific products or brand names? Are donated materials held to the same standards as other curriculum materials?
- Do commercial activities vary across schools in the district? Is student age/grade a consideration?
- What contractual arrangements are currently in place with corporations/businesses to sell products to students, including agreements to sell soft drinks, fast foods, or other food/beverages of minimal nutritional value? Do these arrangements conflict with the educational program and/or student well-being?
- Do product sales imply an endorsement of the product by the district? Does the implied endorsement encourage consumption of unhealthy food and/or beverages?

- Do existing school-business partnerships require the district to advertise as a condition for receiving funds, products, materials or equipment?
- What resources are generated by existing arrangements? What percentage of the district's budget consists of private-sector contributions? In what other ways might the district finance its programs?
- What changes will need to be made to comply with new nutritional standards for sales of food and beverages?
- If the board decides to accept advertisements or company logos, what restrictions should be established (e.g., use of logos for identification purposes only)? If the board decides that advertising should not be used in instruction, what reasonable exceptions should be established (e.g., newspapers and magazines)?
- Does the district's curriculum include instruction in media literacy which helps students become critically aware consumers?
- How can the board and staff develop positive relationships with the private sector in a way that supports educational objectives? What can the district offer to private businesses in lieu of advertising aimed at students?
- What are the board's, staff's, and community's values with regard to commercial activities? Are some types of advertisement viewed as acceptable while others are not (e.g., yearbook ads vs. ads on school buses)?
- In developing or revising policy on these issues, what ethical, legal, and educational issues must be addressed? How can the board ensure that students' best interests are the top priority?

Resources

A comprehensive discussion of policy development pertaining to nutrition and physical activity is presented in the *Student Wellness: A Healthy Food and Physical Activity Policy Resource Guide* published by CSBA and California Project LEAN, 2003, revised 2006. Also see www.csba. org and www.CaliforniaProjectLEAN.org.

Further information may be found through the following resources:

Association for Supervision and Curriculum Development, *Supporting Students or Selling Access?*, Infobrief Issue No. 15, November 1998, www.ascd.org/publications/infobrief/issue15.html.

California Project LEAN, *Captive Kids: Selling Obesity at Schools, 2006.* Food and Marketing on California High School Campuses Survey: Findings and Recommendations 2006, www.CaliforniaProjectLEAN.org.

Campaign for a Commercial-Free Childhood, a national coalition of individuals fighting against marketing to children, www.commercialexploitation.com.

Center for Science in the Public Interest, *Guidelines for Responsible Marketing to Children*, Washington, DC, January 2005.

Commercialism in Education Research Unit, Arizona State University, www.asu.edu/educ/epsl/ceru.htm (formerly Center for the Analysis of Commercialism in Education located at the University of Wisconsin-Milwaukee). Publications include annual reports on schoolhouse commercialism trends.

Consumers Union, Captive Kids: A Report on Commercial Pressures on Kids at School, 1998, www.consumersunion.org.

Public Health Institute, www.phi.org. Produces a number of related policy briefs in its series *California's Obesity Crisis: Focus on Solutions*.

U.S. Government Accountability Office, Commercial Activities in Schools: Use of Student Data Is Limited and Additional Dissemination of Guidance Could Help Districts Develop Policies, August 2004 (www.gao.gov/new.items/d04810.pdf), and Public Education: Commercial Activities in Schools, September 2000 (www.gao.gov/new.items/he00156.pdf).

References

- **1.** McNeal, J., "Tapping the three kids' markets," *American Demographics*, 1998, 20: 37-41; and *Strasburger*, V.C., "Children and TV advertising: Nowhere to run, nowhere to hide," *Journal of Developmental Behavioral Pediatrics*, 2001, 22: 185-187. Reported in Public Health Institute, *California's Obesity Crisis: Focus on Solutions, What Schools Can Do*, Policy Brief, March 2004.
- **2.** Report of the American Psychological Association Task Force on Advertising and Children, February 20, 2004.
- **3.** Hastings, G., "Does food promotion influence children? A systematic review of the evidence," Food Standards Agency, University of Strathclyde Centre for Social Marketing.
- 4. Ibid.
- **5.** Institute of Medicine, "Advertising, Marketing and the Media: Improving Messages," Fact Sheet, In *Preventing Childhood Obesity: Health in the Balance*, September 2004.
- **6.** Pestering Parents: How Food Companies Market Obesity to Children, November 2003, Center for Science in the Public Interest, www.cspinet.org, cited in Public Health Institute, Food Advertising and Marketing to Children and Youth: Do They Influence Unhealthy Food Purchases?, Policy Brief, March 2004.
- **7.** Association for Supervision and Curriculum Development, Supporting Students or Selling Access?, Infobrief Issue No. 15, November 1998.
- **8.** U.S. Government Accountability Office, *Public Education: Commercial Activities in Schools*, September 2000.
- **9.** U.S. Government Accountability Office, *Commercial Activities in Schools: Use of Student Data Is Limited and Additional Dissemination of Guidance Could Help Districts Develop Policies*, August 2004.
- **10.** Centers for Disease Control and Prevention, School Health Policies and Programs Study 2000, *Journal of School Health*, 71, September 2001.
- **11.** *U.S. Public Education: Commercial Activities in Schools.* Report to Congressional requesters. U.S. General Accounting Office, GAO/HEHS-00-156, 2000.
- **12.** Wechsler et al., 2001, as reported in Institute of Medicine, "Schools can play a role in preventing childhood obesity," Fact Sheet, *Preventing Childhood Obesity: Health in the Balance*, September 2004.

- **13.** McCormack Brown, K., Akintobi, T.H., and Pitt, S., School Board Member and Superintendent Survey Results for the Examination of Communication Factors Affecting Policymakers, California Project LEAN, August 2001.
- **14.** McCormack Brown, K., Pitt, S. and Reyes, L., *School Board Member Survey Results: Nutrition and Physical Activity for the Examination of Communication Factors Affecting Policymakers*, California Project LEAN, November 2004.
- **15.** Ibid.
- **16.** Samuels & Associates and Public Health Institute, *California High School Fast Food Survey*, 2000, www.phi.org. Reported in Public Health Institute, "California's Obesity Crisis: Focus on Solutions, What Schools Can Do," Policy Brief, March 2004.
- **17.** Wechsler et al., 2001, as reported in Institute of Medicine, "Schools can play a role in preventing childhood obesity," Fact Sheet, *Preventing Childhood Obesity: Health in the Balance*, September 2004.
- **18.** McCormack Brown, K., Akintobi, T.H., and Pitt, S., *School Board Member and Superintendent Survey Results for the Examination of Communication Factors Affecting Policymakers*, California Project LEAN, August 2001.