

### **3 Resources for NJAHPERD Workshop: A Team Approach to School Wellness**

- 1. Description of School Wellness Councils**
- 2. Model School Wellness Policy from Alliance for a Healthier Generation**
- 3. Excerpt from New Jersey's Task Force on the Impact of Health & Wellness on Student Achievement**



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# COMPREHENSIVE SCHOOL HEALTH

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# CREATING SCHOOL ENVIRONMENTS AND CULTURES THAT SUPPORT NOURISHED ACTIVE STUDENTS

Comprehensive School Wellness policies

School Wellness Councils  
District  
Schools



# WELLNESS COUNCILS



# CORE TEAM THAT BUILDS AND IMPLEMENTS WELLNESS STRATEGY

## District Level:

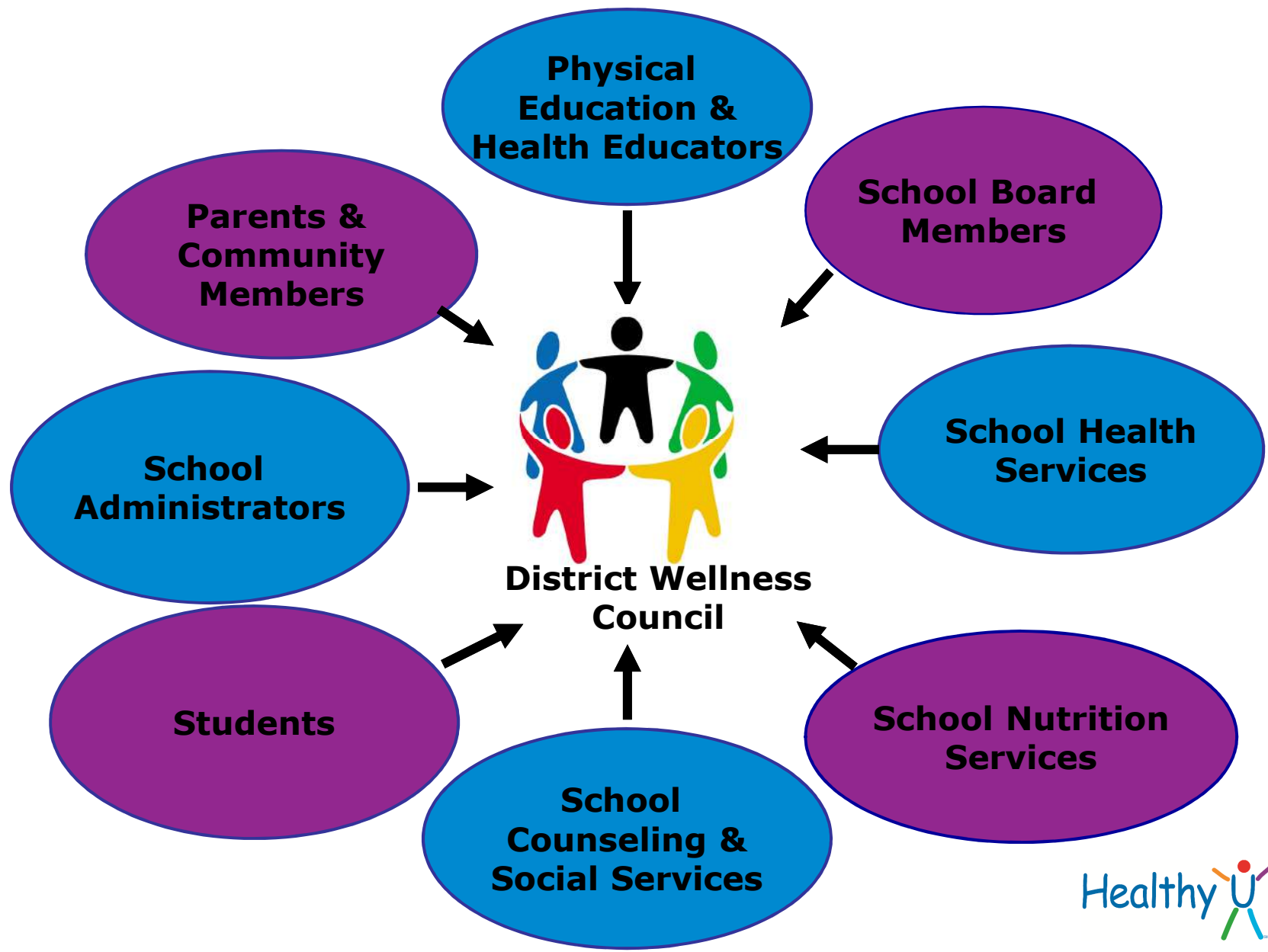
- recommend and assess policy & programs
- Identify gaps
- seek out resources to address them

*Assess the school health environment, the programs and policies in place and identify ways to strengthen these to improve the health of students and staff*

## School Level:

- Focus on the needs of the students & staff in a specific school building.
- Implement the programs to meet the district goals





# LOCAL SCHOOL LEVEL



# THE DISTRICT & SCHOOL WELLNESS COMMITTEE

AN ACTION-ORIENTED GROUP THAT MAKES THE IMPLEMENTATION OF THE DISTRICT WELLNESS POLICY AND OTHER HEALTH-RELATED PRIORITIES POSSIBLE

## District Council

representative of all schools

reflects the community

## School Level Committee

oversight and leads School level issues in coordination with district

identifies and recommends policies that are specific to school

All meets 4-6 times per year

establish goals, implementation plan

review and update progress





# SCHOOL WELLNESS COUNCIL ROLE

- Support the school in developing a healthier school environment
- Create the vision and goals
- Assist with policy development or revision
- Promote parent, community, and professional involvement in
- Advocate for health programs and policies within the broader school community
- Tap into funding and leverage resources
- Plan and implement programs for students and staff
- Evaluate program and policy efforts
- Provide feedback to the district regularly regarding progress on the implementation of the wellness policy



# ON THE GROUND—IN NJ SCHOOLS

## New Jersey Partnership for Healthy Kids

### Healthy U Program-

Elementary School Wellness committee (behavioral & environmental change)

NJ Department of Health Healthy School Grant (Environmental & Policy change)

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[www.njymca.org](http://www.njymca.org)





# THANK YOU

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## **[*School District*] Wellness Policy**

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## **[School District] Wellness Policy**

*[Note: This “Basic” district-level wellness policy template meets the minimum Federal standards for local school wellness policy implementation under the Healthy, Hunger-Free Kids Act of 2010, the Alliance for a Healthier Generation Healthy Schools Program “Bronze”-level recognition criteria, and minimum best practice standards accepted in the education and public health fields. Where appropriate, the template includes optional policy language school districts can use to establish a stronger policy that meets the Healthy Schools Program “Silver” or “Gold” levels. School districts should choose policy language that meets their current needs and also supports growth over time.]*

### **Preamble**

**[Insert School District name]** (hereto referred to as the District) is committed to the optimal development of every student. The District believes that for students to have the opportunity to achieve personal, academic, developmental, and social success, we need to create positive, safe, and health-promoting learning environments at every level, in every setting, throughout the school year.

Research shows that two components, good nutrition and physical activity before, during, and after the school day, are strongly correlated with positive student outcomes. For example, student participation in the U.S. Department of Agriculture’s (USDA) School Breakfast Program is associated with higher grades and standardized test scores, lower absenteeism, and better performance on cognitive tasks.<sup>1,2,3,4,5,6,7</sup> Conversely, less-than-adequate consumption of specific foods including fruits, vegetables, and dairy products, is associated with lower grades among students.<sup>8,9,10</sup> In addition, students who are physically active through active transport to and from school, recess, physical activity breaks, high-quality physical education, and extracurricular activities – do better academically.<sup>11,12,13,14</sup>

This policy outlines the District’s approach to ensuring environments and opportunities for all students to practice healthy eating and physical activity behaviors throughout the school day while minimizing commercial distractions. Specifically, this policy establishes goals and procedures to ensure that:

- Students in the District have access to healthy foods throughout the school day—both through reimbursable school meals and other foods available throughout the school campus—in accordance with Federal and state nutrition standards;
- Students receive quality nutrition education that helps them develop lifelong healthy eating behaviors;
- Students have opportunities to be physically active before, during, and after school;
- Schools engage in nutrition and physical activity promotion and other activities that promote student wellness;
- School staff are encouraged and supported to practice healthy nutrition and physical activity behaviors in and out of school;
- The community is engaged in supporting the work of the District in creating continuity between school and other settings for students and staff to practice lifelong healthy habits; and

- The District establishes and maintains an infrastructure for management, oversight, implementation, communication about, and monitoring of the policy and its established goals and objectives.

This policy applies to all students, staff, and schools in the District.

*[Recommended Optional language includes:*

- *The District will coordinate the wellness policy with other aspects of school management, including the District's School Improvement Plan, when appropriate.*
- *NOTE: Will also include any relevant data or statistics from state or local sources supporting the need for establishing and achieving the goals in this policy.]*

## **I. School Wellness Committee**

### ***Committee Role and Membership***

The District will convene a representative district wellness committee (hereto referred to as the DWC or work within an existing school health committee) that meets at least **four** times per year **[or specify frequency of meetings, with a minimum of four meetings per year]** to establish goals for and oversee school health and safety policies and programs, including development, implementation, and periodic review and update of this district-level wellness policy (heretofore referred as "wellness policy").

The DWC membership will represent all school levels (elementary and secondary schools) and include (to the extent possible), but not be limited to: parents and caregivers; students; representatives of the school nutrition program (ex., school nutrition director); physical education teachers; health education teachers; school health professionals (ex., health education teachers, school health services staff [i.e., nurses, physicians, dentists, health educators, and other allied health personnel who provide school health services], and mental health and social services staff [i.e., school counselors, psychologists, social workers, or psychiatrists]; school administrators (ex., superintendent, principal, vice principal), school board members; health professionals (ex., dietitians, doctors, nurses, dentists); and the general public. To the extent possible, the DWC will include representatives from each school building and reflect the diversity of the community.

*[Optional additional policy language:*

- *Each school within the District will establish an ongoing School Wellness Committee (SWC) that convenes to review school-level issues, in coordination with the DWC.]*

### ***Leadership***

The Superintendent or designee(s) will convene the DWC and facilitate development of and updates to the wellness policy, and will ensure each school's compliance with the policy.

**The name(s), title(s), and contact information (email address is sufficient) of this/these individual(s) is:**

## ALLIANCE FOR A HEALTHIER GENERATION MODEL WELLNESS POLICY

Name	Title	Email address	Role

Each school will designate a school wellness policy coordinator, who will ensure compliance with the policy. Refer to Appendix A for a list of school level wellness policy coordinators.

### **II. Wellness Policy Implementation, Monitoring, Accountability, and Community Engagement**

#### ***Implementation Plan***

The District will develop and maintain a plan for implementation to manage and coordinate the execution of this wellness policy. The plan delineates roles, responsibilities, actions, and timelines specific to each school, and includes information about who will be responsible to make what change, by how much, where, and when, as well as specific goals and objectives for nutrition standards for all foods and beverages available on the school campus, food and beverage marketing, nutrition promotion and education, physical activity, physical education, and other school-based activities that promote student wellness. It is recommended that the school use the [Healthy Schools Program online tools](#) to complete a school level assessment based on the Centers for Disease Control and Prevention's School Health Index, create an action plan that fosters implementation, and generate an annual progress report.

This wellness policy and the progress reports can be found at: **INSERT URL for DISTRICT's WEBSITE.**

#### ***Recordkeeping***

The District will retain records to document compliance with the requirements of the wellness policy at **[District's Administrative Offices, Room #]** and/or on **[District's central computer network]**. Documentation maintained in this location will include but will not be limited to:

- The written wellness policy;
- Documentation demonstrating compliance with community involvement requirements, including (1) Efforts to actively solicit DWC membership from the required stakeholder groups; and (2) These groups' participation in the development, implementation, and periodic review and update of the wellness policy;
- Documentation of annual policy progress reports for each school under its jurisdiction; and
- Documentation of the triennial assessment\* of the policy for each school under its jurisdiction;

- Documentation demonstrating compliance with public notification requirements, including: (1) Methods by which the wellness policy, annual progress reports, and triennial assessments are made available to the public; and (2) Efforts to actively notify families about the availability of wellness policy.

### **Annual Progress Reports**

The District will compile and publish an annual report to share basic information about the wellness policy and report on the progress of the schools within the district in meeting wellness goals. This annual report will be published around the same time each year [in MONTH], and will include information from each school within the District. This report will include, but is not limited to:

- The website address for the wellness policy and/or how the public can receive/access a copy of the wellness policy;
- A description of each school's progress in meeting the wellness policy goals;
- A summary of each school's events or activities related to wellness policy implementation;
- The name, position title, and contact information of the designated District policy leader(s) identified in Section I; and
- Information on how individuals and the public can get involved with the DWC or SWC.

The annual report will be available in [insert appropriate language(s) spoken in District].

The District [and ideally also, insert: "and individual schools"] will actively notify households/families of the availability of the annual report.

The DWC, [if appropriate, insert: "in collaboration with individual schools/SWCs"] will establish and monitor goals and objectives for the District's schools, specific and appropriate for each instructional unit (elementary or secondary OR elementary, middle, and high school, as appropriate), for each of the content-specific components listed in Sections III-V of this policy.

[Optional additional policy language includes:

- *The District will track, analyze, and report on any correlations between improvements in health-promoting environments with education outcomes, such as absenteeism, disciplinary referrals, test scores, average grades, or health measures such as consumption of whole grains, fruits, or vegetables through the school meal programs or BMI, or psycho-social measures such as self-reported "connectedness," or other school climate measures. The District is encouraged to collaborate with local research institutions and universities.*
- *The District will also track and annually report other related information, such as findings from food safety inspections, aggregate participation in school meals programs, income reported from competitive food sales, fundraising revenues, and other such information, as feasible.]*

### **Triennial Progress Assessments**

At least once every three years, the District will evaluate compliance with the wellness policy to assess the implementation of the policy and include:

- The extent to which schools under the jurisdiction of the District are in compliance with the wellness policy;



- The extent to which the District's wellness policy compares to the Alliance for a Healthier Generation's model wellness policy; and
- A description of the progress made in attaining the goals of the District's wellness policy.

The position/person responsible for managing the triennial assessment and contact information is \_\_\_\_\_ *(list the person responsible here, their title, and their contact information)*.

The DWC, in collaboration with individual schools, will monitor schools' compliance with this wellness policy.

The District *[or school]* will actively notify households/families of the availability of the triennial progress report.

### ***Revisions and Updating the Policy***

The DWC will update or modify the wellness policy based on the results of the annual progress reports and triennial assessments, and/or as District priorities change; community needs change; wellness goals are met; new health science, information, and technology emerges; and new Federal or state guidance or standards are issued. **The wellness policy will be assessed and updated as indicated at least every three years, following the triennial assessment.**

### ***Community Involvement, Outreach, and Communications***

The District is committed to being responsive to community input, which begins with awareness of the wellness policy. The District will actively communicate ways in which representatives of DWC and others can participate in the development, implementation, and periodic review and update of the wellness policy through a variety of means appropriate for that district. The District will also inform parents of the improvements that have been made to school meals and compliance with school meal standards, availability of child nutrition programs and how to apply, and a description of and compliance with Smart Snacks in School nutrition standards. The District will use electronic mechanisms, such as email or displaying notices on the district's website, as well as non-electronic mechanisms, such as newsletters, presentations to parents, or sending information home to parents, to ensure that all families are actively notified of the content of, implementation of, and updates to the wellness policy, as well as how to get involved and support the policy. The District will ensure that communications are culturally and linguistically appropriate to the community, and accomplished through means similar to other ways that the district and individual schools are communicating other important school information with parents.

The District will actively notify the public about the content of or any updates to the wellness policy annually, at a minimum. The District will also use these mechanisms to inform the community about the availability of the annual and triennial reports.

## **III. Nutrition**

### ***School Meals***

Our school district is committed to serving healthy meals to children, with plenty of fruits, vegetables, whole grains, and fat-free and low-fat milk; moderate in sodium, low in saturated fat, and zero grams *trans* fat per serving (nutrition label or manufacturer's specification); and to meet the nutrition needs of school children within their calorie requirements. The school meal programs

aim to improve the diet and health of school children, help mitigate childhood obesity, model healthy eating to support the development of lifelong healthy eating patterns, and support healthy choices while accommodating cultural food preferences and special dietary needs.

All schools within the District participate in USDA child nutrition programs, including the National School Lunch Program (NSLP), the School Breakfast Program (SBP), and *[include here any additional Federal child nutrition programs in which the district participates, possibly including the Fresh Fruit & Vegetable Program (FFVP), Special Milk Program (SMP), Summer Food Service Program (SFSP), Supper programs, or others]*. The District also operates additional nutrition-related programs and activities including *[if applicable, insert here a list of other programs such as Farm to School programs, school gardens, Breakfast in the Classroom, Mobile Breakfast carts, Grab 'n' Go Breakfast, or others]*. All schools within the District are committed to offering school meals through the NSLP and SBP programs, and other applicable Federal child nutrition programs, that:

- Are accessible to all students;
- Are appealing and attractive to children;
- Are served in clean and pleasant settings;
- Meet or exceed current nutrition requirements established by local, state, and Federal statutes and regulations. (The District offers reimbursable school meals that meet [USDA nutrition standards](#).)
- Promote healthy food and beverage choices using at least ten of the following [Smarter Lunchroom techniques](#):
  - Whole fruit options are displayed in attractive bowls or baskets (instead of chaffing dishes or hotel pans)
  - Sliced or cut fruit is available daily
  - Daily fruit options are displayed in a location in the line of sight and reach of students
  - All available vegetable options have been given creative or descriptive names
  - Daily vegetable options are bundled into all grab and go meals available to students
  - All staff members, especially those serving, have been trained to politely prompt students to select and consume the daily vegetable options with their meal
  - White milk is placed in front of other beverages in all coolers
  - Alternative entrée options (e.g., salad bar, yogurt parfaits, etc.) are highlighted on posters or signs within all service and dining areas
  - A reimbursable meal can be created in any service area available to students (e.g., salad bars, snack rooms, etc.)
  - Student surveys and taste testing opportunities are used to inform menu development, dining space decor, and promotional ideas
  - Student artwork is displayed in the service and/or dining areas
  - Daily announcements are used to promote and market menu options

*[Optional additional policy language includes:*

- *Menus will be posted on the District website or individual school websites, and will include nutrient content and ingredients.*
- *Menus will be created/reviewed by a Registered Dietitian or other certified nutrition professional.*
- *School meals are administered by a team of child nutrition professionals.*
- *The District child nutrition program will accommodate students with special dietary needs.*
- *Students will be allowed at least 10 minutes to eat breakfast and at least 20 minutes to eat lunch, counting from the time they have received their meal and are seated (meets HSP Gold level). Students are served lunch at a reasonable and appropriate time of day.*
- *Lunch will follow the recess period to better support learning and healthy eating.*

- *Participation in Federal child nutrition programs will be promoted among students and families to help ensure that families know what programs are available in their children's school.*
- *The District will implement at least four of the following five Farm to School activities (meets HSP Gold level; mark/circle the four activities the District plans to do):*
  - *Local and/or regional products are incorporated into the school meal program;*
  - *Messages about agriculture and nutrition are reinforced throughout the learning environment;*
  - *School hosts a school garden;*
  - *School hosts field trips to local farms; and*
  - *School utilizes promotions or special events, such as tastings, that highlight the local/regional products.]*

### **Staff Qualifications and Professional Development**

All school nutrition program directors, managers, and staff will meet or exceed hiring and annual continuing education/training requirements in the [USDA professional standards for child nutrition professionals](#). These school nutrition personnel will refer to [USDA's Professional Standards for School Nutrition Standards website](#) to search for training that meets their learning needs.

### **Water**

To promote hydration, free, safe, unflavored drinking water will be available to all students throughout the school day\* and throughout every school campus\* ("school campus" and "school day" are defined in the glossary). The District will make drinking water available where school meals are served during mealtimes. In addition, students will be allowed to bring and carry (approved) water bottles filled with only water with them throughout the day.

*[Optional additional policy language may include:*

- *Water cups/jugs will be available in the cafeteria if a drinking fountain is not present.*
- *All water sources and containers will be maintained on a regular basis to ensure good hygiene standards. Such sources and containers may include drinking fountains, water jugs, hydration stations, water jets, and other methods for delivering drinking water.]*

### **Competitive Foods and Beverages**

The District is committed to ensuring that all foods and beverages available to students on the school campus\* during the school day\* support healthy eating. The foods and beverages sold and served outside of the school meal programs (i.e., "competitive" foods and beverages) will meet the USDA Smart Snacks in School nutrition standards, at a minimum. Smart Snacks aim to improve student health and well-being, increase consumption of healthful foods during the school day, and create an environment that reinforces the development of healthy eating habits. A summary of the standards and information are available at:

<http://www.fns.usda.gov/healthierschoolday/tools-schools-smart-snacks>. The Alliance for a Healthier Generation provides a set of tools to assist with implementation of Smart Snacks available at [www.healthiergeneration.org/smartsnacks](http://www.healthiergeneration.org/smartsnacks).

*[NOTE: In some cases, states have passed more stringent nutrition standards for competitive foods and beverages in addition to the USDA Smart Snacks in School nutrition standards. In these states, districts and schools must also comply with their state standards.]*

To support healthy food choices and improve student health and well-being, all foods and beverages outside the reimbursable school meal programs that are sold to students on the school campus during the school day\* *[and ideally, the extended school day\*]* will meet or exceed the USDA Smart Snacks nutrition standards *[or, if the state policy is stronger, “will meet or exceed state nutrition standards”]*. These standards will apply in all locations and through all services where foods and beverages are sold, which may include, but are not limited to, a la carte options in cafeterias, vending machines, school stores, and snack or food carts.

### ***Celebrations and Rewards***

All foods offered on the school campus will meet or exceed the USDA Smart Snacks in School nutrition standards *[or, if the state policy is stronger, “will meet or exceed state nutrition standards”]*, including through:

1. Celebrations and parties. The district will provide a list of healthy party ideas to parents and teachers, including non-food celebration ideas. Healthy party ideas from the [Alliance for a Healthier Generation](#) and from the [USDA](#).
2. Classroom snacks brought by parents. The District will provide to parents a [list of foods and beverages that meet Smart Snacks](#) nutrition standards; and
3. Rewards and incentives. The District will provide teachers and other relevant school staff a [list of alternative ways to reward children](#). Foods and beverages will not be used as a reward, or withheld as punishment for any reason, such as for performance or behavior.  
*[Meets HSP Silver]*

### ***Fundraising***

Foods and beverages that meet or exceed the USDA Smart Snacks in Schools nutrition standards may be sold through fundraisers on the school campus\* during the school day\*. The District will make available to parents and teachers a list of healthy fundraising ideas *[examples from the [Alliance for a Healthier Generation](#) and the [USDA](#)]*.

*[Given the pervasiveness of food fundraisers in many schools and the wide availability of profitable, healthy fundraising options, additional policy language is encouraged:*

- *Schools will use only non-food fundraisers, and encourage those promoting physical activity (such as walk-a-thons, jump rope for heart, fun runs, etc.).*
- *Fundraising during and outside school hours will sell only non-food items or foods and beverages that meet or exceed the Smart Snacks nutrition standards. This may include but is not limited to, donation nights at restaurants, cookie dough, candy and pizza sales, market days, etc. (Meets HSP Gold)]*

### ***Nutrition Promotion***

Nutrition promotion and education positively influence lifelong eating behaviors by using evidence-based techniques and nutrition messages, and by creating food environments that encourage healthy nutrition choices and encourage participation in school meal programs. Students and staff will receive consistent nutrition messages throughout schools, classrooms, gymnasiums, and cafeterias. Nutrition promotion also includes marketing and advertising nutritious foods and beverages to students and is most effective when implemented consistently through a comprehensive and multi-channel approach by school staff and teachers, parents, students, and the community.

The District will promote healthy food and beverage choices for all students throughout the school campus, as well as encourage participation in school meal programs. This promotion will occur through at least:

- Implementing evidence-based healthy food promotion techniques through the school meal programs using [Smarter Lunchroom techniques](#); and
- Promoting foods and beverages that meet the USDA Smart Snacks in School nutrition standards. Additional possible promotion techniques that the District and individual schools may use are available at [www.healthiergeneration.org/smartsnacks](http://www.healthiergeneration.org/smartsnacks).

### **Nutrition Education**

The District aims to teach, model, encourage, and support healthy eating by students. Schools will provide nutrition education and engage in nutrition promotion that:

- Is designed to provide students with the knowledge and skills necessary to promote and protect their health;
- Is part of not only health education classes, but also integrated into other classroom instruction through subjects such as math, science, language arts, social sciences, and elective subjects;
- Include enjoyable, developmentally-appropriate, culturally-relevant, and participatory activities, such as cooking demonstrations or lessons, promotions, taste-testing, farm visits, and school gardens;
- Promote fruits, vegetables, whole-grain products, low-fat and fat-free dairy products, and healthy food preparation methods;
- Emphasize caloric balance between food intake and energy expenditure (promotes physical activity/exercise);
- Link with school meal programs, cafeteria nutrition promotion activities, school gardens, Farm to School programs, other school foods, and nutrition-related community services;
- Teach media literacy with an emphasis on food and beverage marketing; and
- Include nutrition education training for teachers and other staff.

*[Optional additional policy language includes:*

- *In elementary schools, nutrition education will be offered at each grade level as part of a sequential, comprehensive, standards-based health education curriculum that meets state and national standards (meets HSP Silver/Gold level).*
- *All health education teachers will provide opportunities for students to practice or rehearse the skills taught through the health education curricula (meets HSP Silver/Gold level).]*

### **Essential Healthy Eating Topics in Health Education**

The District will include in the health education curriculum the following essential topics on healthy eating:

- The relationship between healthy eating and personal health and disease prevention
- Food guidance from [MyPlate](#)
- Reading and using USDA's food labels
- Eating a variety of foods every day
- Balancing food intake and physical activity
- Eating more fruits, vegetables, and whole grain products
- Choosing foods that are low in fat, saturated fat, and cholesterol and do not contain *trans* fat

- Choosing foods and beverages with little added sugars
- Eating more calcium-rich foods
- Preparing healthy meals and snacks
- Risks of unhealthy weight control practices
- Accepting body size differences
- Food safety
- Importance of water consumption
- Importance of eating breakfast
- Making healthy choices when eating at restaurants
- Eating disorders
- The Dietary Guidelines for Americans
- Reducing sodium intake
- Social influences on healthy eating, including media, family, peers, and culture
- How to find valid information or services related to nutrition and dietary behavior
- How to develop a plan and track progress toward achieving a personal goal to eat healthfully
- Resisting peer pressure related to unhealthy dietary behavior
- Influencing, supporting, or advocating for others' healthy dietary behavior

[USDA's Team Nutrition](#) provides free nutrition education and promotion materials, including standards-based nutrition education curricula and lesson plans, posters, interactive games, menu graphics, and more.

### ***Food and Beverage Marketing in Schools***

The District is committed to providing a school environment that ensures opportunities for all students to practice healthy eating and physical activity behaviors throughout the school day while minimizing commercial distractions. The District strives to teach students how to make informed choices about nutrition, health, and physical activity. These efforts will be weakened if students are subjected to advertising on District property that contains messages inconsistent with the health information the District is imparting through nutrition education and health promotion efforts. It is the intent of the District to protect and promote student's health by permitting advertising and marketing for only those foods and beverages that are permitted to be sold on the school campus, consistent with the District's wellness policy.

Any foods and beverages marketed or promoted to students on the school campus\* during the school day\* will meet or exceed the USDA Smart Snacks in School nutrition standards *[or, if stronger, "state nutrition standards"]*, such that only those foods that comply with or exceed those nutrition standards are permitted to be marketed or promoted to students.

Food advertising and marketing is defined<sup>15</sup> as an oral, written, or graphic statements made for the purpose of promoting the sale of a food or beverage product made by the producer, manufacturer, seller, or any other entity with a commercial interest in the product. This term includes, but is not limited to the following:

- Brand names, trademarks, logos or tags, except when placed on a physically present food or beverage product or its container.
- Displays, such as on vending machine exteriors.
- Corporate brand, logo, name, or trademark on school equipment, such as marquees, message boards, scoreboards, or backboards (Note: immediate replacement of these items



are not required; however, districts will consider replacing or updating scoreboards or other durable equipment over time so that decisions about the replacement include compliance with the marketing policy.)

- Corporate brand, logo, name, or trademark on cups used for beverage dispensing, menu boards, coolers, trash cans, and other food service equipment; as well as on posters, book covers, pupil assignment books, or school supplies displayed, distributed, offered, or sold by the District.
- Advertisements in school publications or school mailings.
- Free product samples, taste tests, or coupons of a product, or free samples displaying advertising of a product.

#### **IV. Physical Activity**

Children and adolescents should participate in 60 minutes of physical activity every day. A substantial percentage of students' physical activity can be provided through a comprehensive, school-based physical activity program (CSPAP) that includes these components: physical education, recess, classroom-based physical activity, walk and bicycle to school, and out-of-school time activities and the district is committed to providing these opportunities. Schools will ensure that these varied opportunities are in addition to, and not as a substitute for, physical education (addressed in "Physical Education" subsection). All schools in the district will be encouraged to participate in *Let's Move! Active Schools* ([www.letsmoveschools.org](http://www.letsmoveschools.org)) in order to successfully address all CSPAP areas.

Physical activity during the school day (including but not limited to recess, physical activity breaks, or physical education) **will not be withheld** as punishment for any reason *[insert if appropriate: "This does not include participation on sports teams that have specific academic requirements"]*. The district will provide teachers and other school staff with a [list of ideas](#) for alternative ways to discipline students.

To the extent practicable, the District will ensure that its grounds and facilities are safe and that equipment is available to students to be active. The District will conduct necessary inspections and repairs.

*[Optional additional policy language:*

- *Through a formal joint or shared use agreements indoor and outdoor physical activity facilities will be open to students, their families, and the community outside of school hours (meets HSP Gold). [Change Lab Solutions](#) provides guidance regarding joint or shared use agreements.*
- *The District will work with schools to ensure that inventories of physical activity supplies are known and, when necessary, will work with community partners to ensure sufficient quantities of equipment are available to encourage activity for as many students as possible.]*

#### **Physical Education**

The District will provide students with physical education, using an age-appropriate, sequential physical education curriculum consistent with national and state standards for physical education. The physical education curriculum will promote the benefits of a physically active lifestyle and will help students develop skills to engage in lifelong healthy habits, as well as incorporate essential

health education concepts (discussed in the “*Essential Physical Activity Topics in Health Education*” subsection).

All students will be provided equal opportunity to participate in physical education classes. The District will make appropriate accommodations to allow for equitable participation for all students and will adapt physical education classes and equipment as necessary.

All District **elementary students** in each grade will receive physical education for at least 60-89 minutes per week throughout the school year. *[NOTE: Additional optional policy language substitutions include: All [District] elementary students in each grade will receive physical education for at least 90-149 minutes per week throughout the school year (Meets HSP Silver level). OR All [District] elementary students in each grade will receive physical education for at least 150 minutes per week throughout the school year (meets HSP Gold level).]*

All [District] **secondary students** (middle and high school) are required to take the equivalent of one academic year of physical education.

*[NOTE: For additional rigor, optional language substitutions include: All [District] secondary students (middle and high school) are required to take more than one academic year of physical education (meets HSP Silver level). OR All [District] secondary students (middle and high school) are required to take physical education throughout all secondary school years (meets HSP Gold level).]*

The District physical education program will promote student physical fitness through individualized fitness and activity assessments (via the [Presidential Youth Fitness Program](#) or other appropriate assessment tool) and will use criterion-based reporting for each student.

*[Additional policy language includes:*

- *Students will be moderately to vigorously active for at least 50% of class time during most or all physical education class sessions (meets HSP Silver level).*
- *All physical education teachers in [District] will be required to participate in at least once a year professional development in education (meets HSP Silver level).*
- *All physical education classes in [District] are taught by licensed teachers who are certified or endorsed to teach physical education (meets HSP Gold level).*
- *Waivers, exemptions, or substitutions for physical education classes are not granted.*

### ***Essential Physical Activity Topics in Health Education***

The District will include in the health education curriculum the following essential topics on physical activity: *[insert: when health education is taught OR semesters when student is enrolled in health or physical education OR in all year(s) of school.]*

- The physical, psychological, or social benefits of physical activity
- How physical activity can contribute to a healthy weight
- How physical activity can contribute to the academic learning process
- How an inactive lifestyle contributes to chronic disease
- Health-related fitness, that is, cardiovascular endurance, muscular endurance, muscular strength, flexibility, and body composition
- Differences between physical activity, exercise, and fitness
- Phases of an exercise session, that is, warm up, workout, and cool down
- Overcoming barriers to physical activity



- Decreasing sedentary activities, such as TV watching
- Opportunities for physical activity in the community
- Preventing injury during physical activity
- Weather-related safety, for example, avoiding heat stroke, hypothermia, and sunburn while being physically active
- How much physical activity is enough, that is, determining frequency, intensity, time, and type of physical activity
- Developing an individualized physical activity and fitness plan
- Monitoring progress toward reaching goals in an individualized physical activity plan
- Dangers of using performance-enhancing drugs, such as steroids
- Social influences on physical activity, including media, family, peers, and culture
- How to find valid information or services related to physical activity and fitness
- How to influence, support, or advocate for others to engage in physical activity
- How to resist peer pressure that discourages physical activity

### ***Recess (Elementary)***

All elementary schools will offer at least **20 minutes of recess** on all or most days during the school year (Insert as appropriate any language such as: *This policy may be waived on early dismissal or late arrival days*). If recess is offered before lunch, schools will have appropriate hand-washing facilities and/or hand-sanitizing mechanisms located just inside/outside the cafeteria to ensure proper hygiene prior to eating and students are required to use these mechanisms before eating. Hand-washing time, as well as time to put away coats/hats/gloves, will be built in to the recess transition period/timeframe before students enter the cafeteria.

**Outdoor recess** will be offered when weather is feasible for outdoor play. *[Depending on regions or weather conditions, districts may insert weather guidelines or guidelines for outside play here. OR District could create new ones such as: “Students will be allowed outside for recess except when outdoor temperature is above/below District-set temperature, inclusive of wind chill factors, during “code orange” or “code red” days, during storms with lightening or thunder, or at the discretion of the building administrator based on his/her best judgment of safety conditions.”]*

In the event that the school or district must conduct **indoor recess**, teachers and staff will follow the indoor recess guidelines that promote physical activity for students, to the extent practicable. *[District can insert indoor recess guidelines here, which might delineate a minimum amount of time for activity opportunities during indoor recess. If these guidelines do not yet exist, the DWC will create them or facilitate their development on a school-by-school basis and include them here.] [If District opts for school-by-school indoor recess guidelines, insert: Each school will maintain and enforce its own indoor recess guidelines.]*

Recess will complement, not substitute, physical education class. Recess monitors or teachers will encourage students to be active, and will serve as role models by being physically active alongside the students whenever feasible.

### ***Physical Activity Breaks (Elementary and Secondary)***

The District recognizes that students are more attentive and ready to learn if provided with periodic breaks when they can be physically active or stretch. Thus, students will be offered **periodic opportunities** to be active or to stretch throughout the day on all or most days during a typical school week. The District recommends teachers provide short (3-5 minute) physical activity breaks to students during and between classroom time. These physical activity breaks will complement, not substitute, for physical education class, recess, and class transition periods.

The District will provide resources and links to resources, tools, and technology with ideas for physical activity breaks. Resources and ideas are available through [USDA](#) and the [Alliance for a Healthier Generation](#).

### ***Active Academics***

Teachers will incorporate movement and kinesthetic learning approaches into “core” subject instruction when possible (e.g., science, math, language arts, social studies, and others) and do their part to limit sedentary behavior during the school day.

The District will support classroom teachers incorporating physical activity and employing kinesthetic learning approaches into core subjects by providing annual professional development opportunities and resources, including information on leading activities, activity options, as well as making available background material on the connections between learning and movement.

Teachers will serve as role models by being physically active alongside the students whenever feasible.

### ***Before and After School Activities***

The District offers opportunities for students to participate in physical activity either before and/or after the school day (or both) through a variety of methods. The District will encourage students to be physically active before and after school by: *[District should choose appropriate and reasonable options such as clubs, physical activity in aftercare, intramurals, or varsity sports, and insert approaches here.]*

### ***Active Transport***

The District will support active transport to and from school, such as walking or biking. The District will encourage this behavior by engaging in *six or more* of the activities below; including but not limited to: *[District will select from the list below and insert them here as policy].*

- Designation of safe or preferred routes to school
- Promotional activities such as participation in International Walk to School Week, National Walk and Bike to School Week
- Secure storage facilities for bicycles and helmets (e.g., shed, cage, fenced area)
- Instruction on walking/bicycling safety provided to students
- Promotion of safe routes program to students, staff, and parents via newsletters, websites, local newspaper
- Crossing guards are used
- Crosswalks exist on streets leading to schools
- Walking school buses are used
- Documentation of number of children walking and or biking to and from school
- Creation and distribution of maps of school environment (e.g., sidewalks, crosswalks, roads, pathways, bike racks, etc.)

## **V. Other Activities that Promote Student Wellness**

The District will integrate wellness activities across the entire school setting, not just in the cafeteria, other food and beverage venues, and physical activity facilities. The District will coordinate and integrate other initiatives related to physical activity, physical education, nutrition, and other wellness components so all efforts are complementary, not duplicative, and work

towards the same set of goals and objectives promoting student well-being, optimal development, and strong educational outcomes.

Schools in the District are encouraged to [Optional language: Schools in the District will...] coordinate content across curricular areas that promote student health, such as teaching nutrition concepts in mathematics, with consultation provided by either the school or the District's curriculum experts.

All efforts related to obtaining federal, state, or association recognition for efforts, or grants/funding opportunities for healthy school environments will be coordinated with and complementary of the wellness policy, including but not limited to ensuring the involvement of the DWC/SWC.

All school-sponsored events will adhere to the wellness policy. All school-sponsored wellness events will include physical activity opportunities.

### ***Community Partnerships***

The District will [insert as appropriate to current efforts: develop, enhance, or continue] relationships with community partners (i.e. hospitals, universities/colleges, local businesses, etc.) in support of this wellness policy's implementation. Existing and new community partnerships and sponsorships will be evaluated to ensure that they are consistent with the wellness policy and its goals.

### ***Community Health Promotion and Engagement***

The District will promote to parents/caregivers, families, and the general community the benefits of and approaches for healthy eating and physical activity throughout the school year. Families will be informed and invited to participate in school-sponsored activities and will receive information about health promotion efforts.

As described in the "Community Involvement, Outreach, and Communications" subsection, the District will use electronic mechanisms (such as email or displaying notices on the district's website), as well as non-electronic mechanisms, (such as newsletters, presentations to parents, or sending information home to parents), to ensure that all families are actively notified of opportunities to participate in school-sponsored activities and receive information about health promotion efforts.

### ***Staff Wellness and Health Promotion***

The DWC will have a staff wellness subcommittee that focuses on staff wellness issues, identifies and disseminates wellness resources, and performs other functions that support staff wellness in coordination with human resources staff. The subcommittee leader's name is \_\_\_\_\_ (list here).

Schools in the District will implement strategies to support staff in actively promoting and modeling healthy eating and physical activity behaviors. Examples of strategies schools will use, as well as specific actions staff members can take, include \_\_\_\_\_ (list 3-4 strategies here). The District promotes staff member participation in health promotion programs and will support programs for staff members on healthy eating/weight management that are accessible and free or low-cost.

*[Optional language includes:*

- *The District will use a healthy meeting policy for all events with available food options, created by the SWC/DWC or one that currently exists that optimizes healthy food options with a variety of choices and selections of healthy foods for a variety of dietary needs.]*

***Professional Learning***

When feasible, the District will offer annual professional learning opportunities and resources for staff to increase knowledge and skills about promoting healthy behaviors in the classroom and school (e.g., increasing the use of kinesthetic teaching approaches or incorporating nutrition lessons into math class). Professional learning will help District staff understand the connections between academics and health and the ways in which health and wellness are integrated into ongoing district reform or academic improvement plans/efforts.

*Glossary:*

**Extended School Day** - time during before and afterschool activities that includes clubs, intramural sports, band and choir practice, drama rehearsals, etc.

**School Campus** - areas that are owned or leased by the school and used at any time for school-related activities such as the school building or on the school campus, including on the outside of the school building, school buses or other vehicles used to transport students, athletic fields, and stadiums (e.g. on scoreboards, coolers, cups, and water bottles), or parking lots.

**School Day** - midnight the night before to 30 minutes after the end of the instructional day.

**Triennial** – recurring every three years.

## Appendix A: School Level Contacts

School	Name	Title	Email Address	Role

<sup>1</sup> Bradley, B, Green, AC. Do Health and Education Agencies in the United States Share Responsibility for Academic Achievement and Health? A Review of 25 years of Evidence About the Relationship of Adolescents' Academic Achievement and Health Behaviors, *Journal of Adolescent Health*. 2013; 52(5):523–532.

<sup>2</sup> Meyers AF, Sampson AE, Weitzman M, Rogers BL, Kayne H. School breakfast program and school performance. *American Journal of Diseases of Children*. 1989;143(10):1234–1239.

<sup>3</sup> Murphy JM. Breakfast and learning: an updated review. *Current Nutrition & Food Science*. 2007; 3:3–36.

<sup>4</sup> Murphy JM, Pagano ME, Nachmani J, Sperling P, Kane S, Kleinman RE. 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(9):899–907.

<sup>5</sup> Pollitt E, Mathews R. Breakfast and cognition: an integrative summary. *American Journal of Clinical Nutrition*. 1998; 67(4), 804S–813S.

<sup>6</sup> Rampersaud GC, Pereira MA, Girard BL, Adams J, Metz J. Breakfast habits, nutritional status, body weight, and academic performance in children and adolescents. *Journal of the American Dietetic Association*. 2005;105(5):743–760, quiz 761–762.

<sup>7</sup> Taras, H. Nutrition and student performance at school. *Journal of School Health*. 2005;75(6):199–213.

<sup>8</sup> MacLellan D, Taylor J, Wood K. Food intake and academic performance among adolescents. *Canadian Journal of Dietetic Practice and Research*. 2008;69(3):141–144.

<sup>9</sup> Neumark-Sztainer D, Story M, Dixon LB, Resnick MD, Blum RW. Correlates of inadequate consumption of dairy products among adolescents. *Journal of Nutrition Education*. 1997;29(1):12–20.

<sup>10</sup> Neumark-Sztainer D, Story M, Resnick MD, Blum RW. Correlates of inadequate fruit and vegetable consumption among adolescents. *Preventive Medicine*. 1996;25(5):497–505.

<sup>11</sup> Centers for Disease Control and Prevention. *The association between school-based physical activity, including physical education, and academic performance*. Atlanta, GA: US Department of Health and Human Services, 2010.

<sup>12</sup> Singh A, Uijtdewilligne L, Twisk J, van Mechelen W, Chinapaw M. *Physical activity and performance at school: A systematic review of the literature including a methodological quality assessment*. *Arch Pediatr Adolesc Med*, 2012; 166(1):49–55.

<sup>13</sup> Haapala E, Poikkeus A-M, Kukkonen-Harjula K, Tompuri T, Lintu N, Väistö J, Leppänen P, Laaksonen D, Lindi V, Lakka T. *Association of physical activity and sedentary behavior with academic skills – A follow-up study among primary school children*. *PLoS ONE*, 2014; 9(9): e107031.

<sup>14</sup> Hillman C, Pontifex M, Castelli D, Khan N, Raine L, Scudder M, Drollette E, Moore R, Wu C-T, Kamijo K. *Effects of the FITKids randomized control trial on executive control and brain function*. *Pediatrics* 2014; 134(4): e1063–1071.

<sup>15</sup> Change Lab Solutions. (2014). *District Policy Restricting the Advertising of Food and Beverages Not Permitted to be Sold on School Grounds*. Retrieved from <http://changelabsolutions.org/publications/district-policy-school-food-ads>.





New Jersey School Boards Association



Task Force on the  
Impact of Health and  
Wellness on Student  
Achievement

**2014-2015**

**Final Report  
August 27, 2015**

**New Jersey School Boards Association**

**Task Force on the Impact of Health and Wellness  
on Student Achievement**

**2014-2015**



**Final Report**  
**August 27, 2015**



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# New Jersey School Boards Association

413 West State Street • Trenton, NJ 08618 • Telephone: 609.695.7600 • Toll-Free: 888.88NJSBA • Fax: 609.695.0413

## **MEMORANDUM**

TO: Donald Webster, Jr., President  
Lawrence S. Feinsod, Ed.D., Executive Director

FROM: Patrice Maillet, Director of Business Development  
Vincent DeLucia, Director of Training & Professional Development/Educator-in-Residence  
Sharon Seyler, Legislative Advocate  
*Co-chairs, Task Force on the Impact of Health and Wellness on Student Achievement*

SUBJECT: Final Report—Task Force on the Impact of Health and Wellness on Student Achievement

DATE: August 27, 2015

We are pleased to submit to you the Final Report of the New Jersey School Boards Association's Task Force on the Impact of Health and Wellness on Student Achievement. The National School Boards Association Board of Directors requested that NJSBA lead this research project to provide information and direction not only to New Jersey's school districts, but for state school boards associations nationwide.

The NJSBA Health and Wellness Task Force began its work in November 2014 and met on a monthly basis to deliberate over research; to consult with professionals in the areas of nutrition, physical fitness, school climate and education; and to identify goals, strategies and best practices. Fifty-six representatives of education and public health organizations participated in the study. The support and expertise of NJSBA staff members were also instrumental in this project.

In all, the task force has recommended 125 actions for consideration by local school districts, the state and federal governments, and the New Jersey School Boards Association. As its core recommendation, the task force calls on all school districts to implement Coordinated School Health programs, as defined by the U.S. Centers for Disease Control.

The report includes a section on research, identified by the Regional Education Laboratory (REL) Mid-Atlantic, a component of the U.S. Department of Education's Institute of Education Sciences, which supports the link between student health and wellness and academic achievement. Also of note is a section on health and wellness success stories in local school districts.

We are confident that the Final Report of the Task Force on the Impact of Health and Wellness on Student Achievement will provide a course of action to promote student health and wellness, healthy school climate and academic success and will serve as a resource for local school districts in New Jersey and throughout the nation.

## **Executive Summary**

### **The Task Force and Its Work**

In 2013, the National School Boards Association Board of Directors requested that the New Jersey School Boards Association (NJSBA) lead a research project on student health and wellness and school climate and how they relate to student achievement. Because of NJSBA's involvement in major studies on special education and school security, both of which encompass topics such as student achievement and school climate, then-President John Bulina agreed to engage the Association in a multi-agency project on health and wellness, including a review of relevant government policy, identification of best practices, and development of recommended action at the federal, state and local levels.

The Task Force was formed in 2014 and completed its work during the first half of 2015 under the leadership of Donald Webster, Jr., NJSBA president, and Lawrence S. Feinsod, Ed.D., executive director.

The charge to the NJSBA Task force on the Impact of Health and Wellness on Student Achievement was to:

- Investigate all areas associated with health and wellness, social-emotional learning, and school/organizational climate as they relate to student achievement;
- Develop recommendations for consideration by local boards of education;
- Produce a white paper, detailing the issue of student health and wellness and its impact on student achievement, identifying best practices, and listing recommendations that state school boards associations can adopt and share with local school districts;
- Produce a user-friendly video on ways in which health and wellness best practices improve student achievement for dissemination to local school boards for sharing with their members and the community.

(See Appendix A for the complete charge to the Task Force.)

The task force met each month at NJSBA headquarters in Trenton from February to June 2015. Members, attending the meetings in person and by telephone, listened to presentations or reviewed materials regarding a wide variety of health and wellness issues facing schools in New Jersey and throughout the country, and discussed potential findings and recommendations. In the process, the Task Force reviewed:

- National and state laws and policies covering child and adolescent health in schools;
- NJSBA policy on the subject;
- The current state of health and wellness in New Jersey schools;
- Recent research on the link between health/wellness and student achievement, and
- Success stories demonstrating the feasibility and value of improving school health and wellness.

## Task Force Findings

Based on its deliberations, the Task Force issued a series of findings in the areas of nutrition, physical activity, school climate, and related local school district policy.

### Nutrition

- There is firm evidence linking healthy eating and physical activity to academic achievement.
- School breakfast programs are associated with increased academic grades and standardized test scores, reduced absenteeism, and improved cognitive behavior.
- Skipping breakfast is associated with decreased cognitive performance: alertness, attention, memory, processing of complex visual display, and problem-solving.
- Lack of certain foods, such as fruits, vegetables and dairy products, is associated with lower grades.
- Lack of specific nutrients, like vitamins A, B6m and B12 and foliate, iron, zinc and calcium, is associated with lower grades and higher rates of absenteeism and tardiness.
- Hunger due to insufficient food intake is associated with lower grades, absenteeism, repeating a grade, and inability to focus.

### Physical Activity

- Physically active students tend to have better grades, school attendance, cognitive performance, and classroom behaviors.
- Higher levels of physical activity and physical fitness levels are associated with improved cognitive performance, including concentration and memory.
- Time spent in physical education classes and recess improves student well-being.
- Brief breaks in classrooms are associated with improved cognitive performance.
- Extracurricular physical activity, such as interscholastic sports, is associated with higher GPAs, lower dropout rates, and fewer disciplinary problems.
- Middle school and high school students involved in interscholastic athletics would benefit academically if, during their season, they received physical education (PE) credit for their participation in the sports program in lieu of attending gym class. Such an option would provide them with time for remediation, enrichment and/or homework, which they miss due to after-school practices.

### School Climate

- Comprehensive needs assessments of school climate, including school engagement, school safety, and the school environment, are essential to provide schools with the data needed to pursue strategies that improve school climate.
- The strong and positive relationships that students forge with adults — and observe among adults — in the school setting are critical to developing social competencies that enable them to confront challenges and learn.
- Social and emotional learning is important to enable individuals to learn to understand and manage their emotions and relationships, and to make good decisions. Social-emotional learning can help individuals stop and think before they react, control their response to stress, develop supportive and caring relationships, persist through challenge, seek help, and pay attention to theirs and others' needs and feelings.

- The research of Dr. Maurice Elias of Rutgers University shows that a systemic framework that links academics with service learning, character education and violence prevention has a positive impact on students, including improved attitudes about self, others, and school; positive classroom behavior; higher achievement test scores; and less aggressive behavior and emotional distress.
- Practices that engage students and contribute to social-emotional character development include meaningful, participatory student government; service learning; opportunities for students, staff and the community to provide feedback; open forums for school problem-solving; student input to staff committees; and engagement of students of all backgrounds in leadership and school activities.

### Policy

- Improving school health and wellness is a valuable, child-centered means of advancing student achievement.
- The history of school policy on the subject of health and wellness has been one of compliance with federal and state requirements, rather than proactive adoption of policy to drive change.

### **Task Force Recommendations**

Based on its deliberations, the Task Force makes the core recommendation that all school districts implement Coordinated School Health (CSH) programs, as defined and described by the U.S. Centers for Disease Control (CDC). (See <http://www.cdc.gov/healthyyouth/cshp/faq.htm> and <http://www.cdc.gov/healthyyouth/cshp/components.htm>.)

CSH is a systematic approach to improving the health and well-being of all students so they can fully participate and be successful in school. The process involves bringing together school administrators, teachers, other staff, students, families, and community members to assess health needs; set priorities; and plan, implement, and evaluate all health-related activities. CSH typically integrates health promotion efforts across eight interrelated components that already exist to some extent in most schools.

**Health Education:** Health education provides students with opportunities to acquire the knowledge, attitudes, and skills necessary for making health-promoting decisions, achieving health literacy, adopting health-enhancing behaviors, and promoting the health of others. Comprehensive school health education includes courses of study (curricula) for students in pre-K through grade 12 that address a variety of topics such as alcohol and other drug use and abuse, healthy eating/nutrition, mental and emotional health, personal health and wellness, physical activity, safety and injury prevention, sexual health, tobacco use, and violence prevention. Health education curricula should address the National Health Education Standards (NHES) and incorporate the characteristics of an effective health education curriculum. Health education assists students in living healthier lives. Qualified, trained teachers teach health education.

**Physical Education:** Physical education is a school-based instructional opportunity for students to gain the necessary skills and knowledge for lifelong participation in physical activity. Physical education is characterized by a planned, sequential K-12 curriculum (course of study) that provides cognitive content and learning experiences in a variety of activity areas. Quality physical education programs assist students in achieving the national standards for K-12 physical education. The outcome of a quality physical education program is a physically educated person who has the knowledge, skills, and confidence to enjoy a lifetime of healthful physical activity. Qualified, trained teachers teach physical education.

**Health Services:** These services are designed to ensure access and/or referral to primary health care services, to foster appropriate use of primary health care services, to prevent and control communicable disease and other health problems, to provide emergency care for illness or injury, to promote and provide optimum sanitary conditions for a safe school facility and school environment, and to provide educational and counseling opportunities for promoting and maintaining individual, family and community health. Qualified professionals such as physicians, nurses, dentists, health educators, and other allied health personnel provide these services.

**Nutrition Services:** Schools should provide access to a variety of nutritious and appealing meals that accommodate the health and nutrition needs of all students. School nutrition programs reflect the U.S. Dietary Guidelines for Americans and other criteria to achieve nutrition integrity. The school nutrition services offer students a learning laboratory for classroom nutrition and health education, and serve as a resource for linkages with nutrition-related community services. Qualified child nutrition professionals provide these services.

**Counseling, Psychological, and Social Services:** These services are provided to improve students' mental, emotional, and social health and include individual and group assessments, interventions, and referrals. Organizational assessment and consultation skills of counselors and psychologists contribute not only to the health of students but also to the health of the school environment. Professionals such as certified school counselors, psychologists, and social workers provide these services.

**Healthy and Safe School Environment:** A healthy and safe school environment includes the physical and aesthetic surroundings and the psychosocial climate and culture of the school. Factors that influence the physical environment include the school building and the area surrounding it, any biological or chemical agents that are detrimental to health, and physical conditions such as temperature, noise, and lighting. The psychosocial environment includes the physical, emotional, and social conditions that affect the well-being of students and staff.

**Health Promotion for Staff:** Schools can provide opportunities for school staff members to improve their health status through activities such as health assessments, health education, and health-related fitness activities. These opportunities encourage staff members to pursue a healthy lifestyle that contributes to their improved health status, improved morale, and a greater personal commitment to the school's overall coordinated health program. This personal commitment often transfers into greater commitment to the health of students and creates positive role modeling. Health promotion activities have improved productivity, decreased absenteeism, and reduced health insurance costs.

**Family/Community Involvement:** An integrated school, parent, and community approach can enhance the health and well-being of students. School health advisory councils, coalitions, and broad-based constituencies for school health can build support for school efforts. Schools actively solicit parent involvement and engage community resources and services to respond more effectively to the health-related needs of students.

In addition to the implementation of CSH programs, the Task Force also recommends (a) school district consideration of a number of practices to support and amplify coordinated school health programs, based upon local circumstances and needs, and (b) action by the state and federal governments and the New Jersey School Boards Association. (These 125 specific recommendations are found on pages 19 through 33 of this report.)

### **Implementing a Coordinated School Health Program**

The Task Force endorses these general strategies to implement a coordinated approach to improve school health policies and programs, as recommended by the U.S. Centers for Disease Control (<http://www.cdc.gov/healthyyouth/cshp/schools.htm>):

1. Secure and maintain administrative support and commitment.
2. Establish a school health council or team.
3. Identify a school health coordinator.
4. Develop a plan.
5. Implement multiple strategies through multiple components.
6. Focus on students.
7. Address priority health-enhancing and health-risk behaviors.
8. Provide professional development for staff.

### **Resources to Help LEAs Implement or Strengthen Coordinated School Health Programs**

Finally, the Task Force identified a large variety of resources to help school districts study, implement, or strengthen coordinated school health programs, including those of the U.S. Centers for Disease Control, other federal agencies, the New Jersey School Boards Association, other national and state organizations, and websites of relevant professional organizations.





# New Jersey School Boards Association

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### **Definitions of “health and wellness” and “student achievement”**

The Task Force defines “health and wellness” as the condition of good physical, mental and emotional health, especially when maintained by an appropriate diet, exercise, and other lifestyle modifications.

The Task Force defines “student achievement” as student academic performance (class grades, standardized tests and graduation rates), education behavior (attendance, dropout rates and behavioral problems), and students’ cognitive skills and attitudes (concentration, memory and mood).

The Task Force agrees with the Centers for Disease Control (CDC) that the academic achievement of America’s youth is strongly linked with their health:

Healthy Students Are Better Learners. Health-related factors such as hunger, physical and emotional abuse, and chronic illness can lead to poor school performance. Health-risk behaviors such as early sexual initiation, violence, unhealthy eating, and physical inactivity are consistently linked to poor grades, test scores, and lower educational attainment. Leading national education organizations recognize the close relationship between health and education, as well as the need to foster health and well-being within the educational environment for all students.

Schools Are the Right Place for a Healthy Start. Scientific reviews have documented that school health programs can have positive effects on academic outcomes, as well as on health-risk behaviors and health outcomes. Similarly, programs that are primarily designed to improve academic achievement are increasingly recognized as important public health interventions. [[http://www.cdc.gov/HealthyYouth/health\\_and\\_academics/](http://www.cdc.gov/HealthyYouth/health_and_academics/)]