



# The Challenge

A Publication of the U.S. Department of Education's Office of Safe and Drug-Free Schools

## Keeping Students Healthy, Physically Fit, and Learning

### *Schools Play Key Role in Teaching Good Habits for a Lifetime*

Research tells us that children's nutrition and physical activity have a direct impact on their health, energy levels, and positive behaviors. Yet, new statistics on the health of our nation's youth indicate that more and more children are adopting unhealthy eating habits and inactive lifestyles. To deal with this growing problem, schools, teachers, parents, and community members across the country are providing students with the knowledge and skills they need to stay healthy and fit.

#### **Childhood Overweight: A National Crisis**

In the past 20 years, the percentage of overweight children in the United States has doubled. According to the Center for Disease Control and Prevention's (CDC) 1999-2000 National Health and Nutrition Survey, 15% of children and adolescents between the ages of 6 and 19 (almost 9 million) are overweight. This represents a 4% increase from the overweight estimates of the previous Survey.

The long-term health consequences of childhood overweight and sedentary

lifestyles are great. According to a report by the Surgeon General, overweight children have a 70% chance of becoming overweight or obese adults. This increases to 80% if one or more parent is overweight or obese. Overweight and obesity are associated with heart disease, certain types of cancer, type 2 diabetes, stroke, arthritis, and other health problems.<sup>1</sup>

The number of young people being diagnosed with type 2 diabetes is of particular concern. Two decades ago, type 2 diabetes was considered an adult disease. Today, however, children and adolescents are

being diagnosed with it at a distressing rate.<sup>2</sup>

"Americans need to understand that overweight and obesity are literally killing us," U.S. Secretary of Health and Human Services Tommy G. Thompson said when launching a new research strategy and national education campaign against overweight and obesity. "To know that poor eating habits and inactivity are on the verge of surpassing tobacco use as the leading cause of preventable death in America should motivate all Americans to take action to protect their health. We need to tackle America's weight issues as aggressively as we are addressing smoking and tobacco."

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### Why Should Schools Be Concerned About Physical Fitness?

In addition to health and wellness, preliminary research suggests a direct link between physical activity and improved academic performance. Studies have found that participation in physical activity increases adolescents' self esteem, as well as their physical and mental health. They are also less likely to be regular or heavy smokers or use drugs or alcohol, and more likely to stay in school, have good conduct, and experience high academic achievement. Studies also show that good nutrition also enhances school achievement.<sup>3</sup> For these reasons, schools must be concerned with students' health and fitness.

### What Can Schools Do?

Deborah Price, Deputy Under Secretary for Safe and Drug-Free Schools (OSDFS), encourages schools to develop comprehensive school health and fitness programs that foster healthy lifestyles.

"A comprehensive physical education program does more than require children to exert themselves for an hour. It helps students understand what the physical and mental benefits of exercise are and how good nutrition is related to a healthy lifestyle," Ms. Price commented. "When I was in school, PE focused on competition. Today, PE is evolving to bring children together to focus on physical activity, nutrition, and team-building. The students learn together and challenge one another to be their best."

In order to support such comprehensive PE programs, OSDFS administers the Carol M. White Physical Education Program, which provides funds for local education agencies and community-based organizations to implement research-based programs that address the physical, dietary, cognitive, and social aspects of physical fitness. (See related article, page 3.)

"The statistics on obesity show us just how important comprehensive PE programs are," Ms. Price remarked. "Problems related to being overweight can cause challenges in the classroom and also have health and disease

consequences. That's why all of us—parents, teachers, school administrators, and the entire community—need to get involved to teach students the skills they need to make healthy choices for the rest of their lives."

<sup>1</sup> U.S. Department of Health and Human Services. The Surgeon General's call to action to prevent and decrease overweight and obesity. Rockville, MD: U.S. Department of Health and Human Services, Public Health Service, Office of the Surgeon General. 2001; p. 8.

<sup>2</sup> Bloomgarden Z.T. Type 2 diabetes in the young: the evolving epidemic. *Diabetes Care*. 2004 Apr; 27(4):998-1010.

<sup>3</sup> Benton D and Parker PY. Breakfast, blood glucose, and cognition. *American Journal of Clinical Nutrition*. 1998; 67(4)(suppl):772S-778S. See also: Murphy J, Pagano M, Nachmani J, Sperling P, Kane S, and Kleinman RE. The relationship of school breakfast to psychosocial and academic functioning. *Archives of Pediatrics and Adolescent Medicine*. 1998; 152:899-907. Meyers AF, Sampson AE, Weitzman M, Rogers BL, and Kayne H. School breakfast program and school performance. *American Journal of Disease of Children*. 1989; 143:1234-39. ♣

## Exercising Character

### California Schools Use PE to Build Character

Lennox School District, in the Los Angeles metro area, is using physical education to help teach students the CHARACTER COUNTS!<sup>SM</sup> program's Six Pillars of Character: trustworthiness, respect, responsibility, fairness, caring, and citizenship.

With the help of a Partnerships in Character Education grant from the U.S. Department of Education, the school district has designed a character education program that revolves around physical

education classes. Each unit of study has a dual base: one teaching a new physical skill and one emphasizing a character trait.

Reaching all 7,200 K-8 students in the district, the Lennox CHARACTER COUNTS!<sup>SM</sup> Program is a family-focused initiative, with the goal of extending the lessons outside of the classroom and into the home, where parents can learn about positive values along with their children.

# ED Supports Students' Lifelong Health, Wellness

## Carol M. White Physical Education Program

Many school districts recognize that their students need to increase their physical activity and improve their nutrition, but they lack the resources to help students acquire the knowledge, attitudes, and skills they need to enjoy fit and healthy lives.

The U.S. Department of Education's Carol M. White Physical Education Program (PEP) assists local educational agencies and community-based organizations by providing grants to initiate, expand, or improve their physical education (PE) programs.

Administered by the Office of Safe and Drug-Free Schools (OSDFS), the program supports high quality, research-based approaches to physical education, involving such efforts as teacher training, curriculum development, nutrition education, and fitness assessment.

This year, OSDFS awarded a total of 237 new PEP grants worth nearly \$69 million. While these new grantees are just getting started, others have been using PEP funds to improve their PE programs for the past few years. Across the country, school districts and organizations report that these funds have made a lifelong difference for the students involved.

### Redwood Falls, Minnesota

In Minnesota, Independent School District #2897 created a wellness program to teach students to monitor their personal fitness and align the program with state and national PE standards.

Using PEP grant funds, the district purchased new technology to help students develop their own personal fitness plans. The technology included TriFIT hardware and software, hand-held computers for PE instructors, heart monitors, and pedometers.

Students in grades 4-10 were taught how to track their fitness progress by collecting data from their pedometers and heart rate monitors and entering it into personal Health Risk Appraisals. Rather than compete against each other, the students learned to improve and maintain their own personal fitness levels.

Middle school PE teacher Polly Bowen, who oversaw the program, observed that parents were particularly pleased with the fitness reports they received at home. "The response was wonderful," she said. "Parents would call us and say, 'This helps us understand what we should be doing, not only for our children, but also for ourselves.'"

## Defining Overweight and Obesity

### What's the Difference?

Although often used interchangeably, the terms overweight and obesity actually have two different meanings:

- **Overweight** refers to increased body weight in relation to height, when compared to a medical standard of acceptable weight.
- **Obesity** is defined as an excessively high amount of body fat in relation to lean body mass.

Body mass index (BMI), expressed as  $\text{weight}/\text{height}^2$ , is used to classify overweight and obesity among adults. Adults with a BMI of 25 to 29.9 are considered overweight, while adults with a BMI of 30 or more are considered obese.

In children and teens, body

mass index is used differently than it is for adults. Children's body fatness changes over the years as they grow. Also, girls and boys differ in their body fatness as they mature. Therefore, BMI for children is gender and age specific. Children with a BMI for age and sex at or above the 95th percentile are considered overweight.

Because they are still growing and developing, children are not referred to as obese. Children can be overweight or at risk of being overweight, while adults can be overweight, at risk of being overweight, or obese.

Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, "Overweight and Obesity," [www.cdc.gov/nccdphp/dnpa/obesity](http://www.cdc.gov/nccdphp/dnpa/obesity).

The district also purchased fun and challenging new equipment, including cross country skis and an indoor climbing wall.

According to Bowen, the skis in particular were a great hit with the students, many of whom had never skied before. "At first the students were sliding everywhere, but by the next fall their improvement was tremendous. They could jump on their skis and go!"

As a result of the program:

- 75 percent of the middle school students reported that outside of PE class they engage in fitness activities at

least three to five times per week, for at least 30 minutes.

- 53 percent of the middle school students reported that using the new technology helped them to better understand the importance of being physically fit.
- 53 percent of the middle school students reported that they think they have enough knowledge to implement a fitness plan five years later.

### Salt Lake City, Utah

In Salt Lake City, the Granite School District's Creating Opportunities for Physical

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# Deborah A. Price Named to Head Office of Safe and Drug-Free Schools

*New Deputy Under Secretary Focuses on “Positives” of School Life*



Deborah A. Price, Deputy Under Secretary, Office of Safe and Drug-Free Schools

In February 2004, U.S. Secretary of Education Rod Paige announced the appointment of Deborah A. Price as deputy under secretary in charge of the Office of Safe and Drug-Free Schools (OSDFS). In this capacity, Ms. Price oversees the Department's activities related to safe schools, crisis response, alcohol and other drug abuse prevention, health and well-being of students, and building strong character and citizenship. She also leads the Department's homeland security efforts.

Prior to her appointment, Ms. Price was chief of staff at the Department's Office of Federal Student Aid, a \$60 billion-a-year operation that delivers student financial aid to more than nine million students and families. Prior to this, she was executive director of the Secretary's Commission on Opportunity in Athletics, the blue-ribbon panel charged with examining Title IX, and a senior adviser to the deputy secretary of education.

"Debbie's public service experience in policy issues at the legislative and executive levels makes her an ideal candidate to lead our safe and drug-free schools efforts, and I know the Department will benefit from her leadership," Secretary Paige said.

Recently, *The Challenge* had the opportunity to speak with Ms. Price about her work to create safer, healthier school environments for all children.

**The Challenge:** You've had an interesting path to your position with the Office of Safe and Drug-Free Schools—tell us about it.

**Ms. Price:** Prior to my work at the Department, I worked in the Senate for 16 years—6 of those in the assistant majority leader's office. Education and safe and drug-free schools were among the key legislative issues I covered, so I've been involved with this topic for many years.

When I came over to the U.S. Department of Education, I was excited to work in the Office of

Federal Student Aid because that office truly touches individuals' lives. Every day, we gave a check to an individual that allowed him or her to go to school. That work directly impacts people's lives in such a significant way.

When I moved over to OSDFS, I knew it would be a great fit. The subject matter is of great importance to me because the work directly affects all students. Our work is the preface for everything else the Department does. All of the work we do to make schools safe and healthy provides the right atmosphere for education to happen. If a school isn't safe, children can't learn, at least not to the



extent they could in a safe environment.

**The Challenge:** What is your vision for the Office? Where would you like to see the field of safe and drug-free schools heading?

**Ms. Price:** The Office of Safe and Drug-Free Schools focuses on so many things that could be perceived as the “negatives” of school life: alcohol abuse, drug use, bullying, violence, and other crises. However, we also focus on so many positives such as character education, civic engagement, and mentoring. In the best of all possible worlds, I hope we will eventually get to a place where all schools are safe and drug-free and there is no need to focus on the negatives, but I think there will always be a need for us to be engaged in the positives.

Character education and civic engagement provide the groundwork for children to understand who we are as a people, and who we are as U.S. citizens. They need that background so when they are confronted with a difficult choice, such as to engage in drugs or violence, they have the tools they need to make good decisions and a strong sense of who they want to be. Our job is to give them those tools so that they can learn and grow to have the most joyful and fulfilling lives that they can.

**The Challenge:** As the former

executive director of the Secretary’s Commission on Opportunity in Athletics, what role do you think physical education plays in creating safer and healthier school environments?

**Ms. Price:** I believe it plays an extremely important role, particularly as we look to the research on the nationwide problem of overweight among children. It would be irresponsible of us to ignore the connection between physical activity and healthy weight. If we’re going to have boys and girls who are healthy and physically active throughout their lives, we’re going to have to help them develop those skills early on. In addition, while at this time we don’t have conclusive research that connects physical activity to academic achievement, there is suggestive evidence that points to such a connection. Hopefully, over the next few years, we’ll see more research in this area and be able to build the case for how physical activity helps children succeed academically.

All of this just goes to show that we at the Office of Safe and Drug-Free Schools have our work cut out for us. Not only are we engaged in the important work of emergency preparedness, crisis management, and school security, but every day we’re working to give students the tools they need to live safer and healthier lives. 🐾

*Wellness continued from page 3*

Education (COPE) project was developed to offer quality, developmentally appropriate physical activities for elementary students and training for classroom teachers. Sixteen elementary schools—one quarter of the elementary schools in the district—participated in the project.

The district used PEP funds to purchase heart rate monitors, pedometers, balls, and parachutes for each of the participating schools. In addition, circuit training centers with 20 fitness stations were established at 10 of the 16 schools. Aerobic steps and exercise bands were provided to the remaining six schools.

A 2-day training was provided to 200 classroom teachers. The teachers learned about the impact of physical activity on academic performance, ideas for age-appropriate PE activities, and how to integrate PE into other academic areas. Monthly follow-up training sessions were also offered.

Project Director Frank Wojtech noted that the training was one of the most successful elements of the project. “In our district, elementary school classroom teachers are responsible for physical education. However, some of our teachers have had one PE class during college, and the majority have had none,” he explained. “The evaluation comments we received from teachers

were so positive that we decided to conduct another training for 100 teachers the next year.”

In addition to the training, the school district developed Healthy Habits, a standards-based PE and nutrition curriculum. The PE activities in Healthy Habits were designed to help elementary students develop speed, strength, agility, coordination, and other skills.

As a result of the COPE project:

- ▶ 56.1% of program students increased their Presidential Fitness Score for curl-ups;
- ▶ 64.6% of program students increased their Presidential Fitness Score for push-ups; and
- ▶ 63.1% of program students increased their Presidential Fitness Score for the pacer test. 🐾



To learn more about what school districts and community-based organizations across the country have done to expand and improve physical fitness for students under the Carol M. White Physical Education Program, visit [www.thechallenge.org](http://www.thechallenge.org).

# Understanding the Lists of Effective Programs

## SAMHSA's National Registry of Effective Programs and Practices

*Over the past decade, the federal government has sponsored the creation of several lists of research-based substance abuse and violence prevention programs that have proven to be effective. What is the difference between these lists? Why is a program included on one list and not another?*

*As part of an ongoing series on effective prevention programs, The Challenge will take a closer look at the lists and help explain how programs are nominated and selected for inclusion. In this issue, we begin with the Substance Abuse and Mental Health Services Administration's (SAMHSA) National Registry of Effective Programs and Practices (NREPP).*

The U.S. Department of Health and Human Services' SAMHSA is the nation's lead agency focusing on the prevention and treatment of substance abuse and mental health disorders. SAMHSA created NREPP to help local communities understand and implement prevention and treatment programs that have proven to be effective.

Begun as a function of SAMHSA's Center for Substance Abuse Prevention, NREPP initially reviewed and identified programs focusing solely on substance abuse prevention. Today, the expanded registry covers programs consistent with all of the core areas of SAMHSA's mission: substance abuse prevention and treatment, as well as the prevention and treatment of mental health disorders and co-occurring substance abuse and mental health disorders.

### Identifying Effective Programs

NREPP's first function is to identify effective programs. How are such programs found? According to NREPP Project Manager Traci Schwinn, programs come to the attention of NREPP from a number of different sources. Some programs are identified in scholarly scientific journals. Others are brought to the attention of NREPP by expert reviewers who have their finger on the pulse of what's happening in the field.

But more recently, many of the programs submitted for review are submitted by the program developers themselves. NREPP encourages developers to submit information about their successful prevention efforts because programs developed by practitioners in the field are apt to reflect the everyday realities of life in a school or community setting in a manner that is not always possible in academic settings.

### The Review Process

What happens after a program is submitted for review?

According to Ms. Schwinn, each program is first assessed by the NREPP team to ensure that everything is in order for a complete review. Developers may not simply submit a narrative description of their program, but must offer scientific data supporting their claims.

Once the submission packet is complete, the program is assigned to a review team of experts. Reviewers independently review and rate the program on a number of factors and assess both its integrity and its utility.

"Integrity refers to the overall level of confidence that the reviewer can place in project findings based on research design and implementation," explains SAMHSA's Science to Service Coordinator Kevin Hennessy. "A high score means that the reviewer believes that the research findings are sound."

"Utility refers to the overall usefulness of project findings for informing prevention theory and practice," he continued. "For example, a program may be very well-designed in terms of research, but have very little overall value to the community."

Programs are rated according to a five point scale:

► *Effective programs* are those with a score of 4.0–5.0 on

both integrity and utility. Effective programs are those that are found to be well-implemented, well-evaluated, and to produce a consistent pattern of positive results.

► *Promising programs* are those with a score of 3.33–3.99 on both integrity and utility. Promising programs are those that have been implemented and evaluated sufficiently and have demonstrated positive outcomes. However, they have not yet been shown to have sufficient rigor and/or consistently positive outcomes required for effective program status.

► *Insufficient Current Support* is the designation used for programs with a score of 1.0–3.32 on integrity and utility.

### Model Programs

Once a program has been identified as an effective program by reviewers, it is invited to be recognized as a SAMHSA model program.

A model program is an effective program that can be taken to scale for national dissemination. The program's developers have agreed to participate in SAMHSA's dissemination efforts and are able to provide supporting materials, training, and technical assistance to others.

As Ms. Schwinn explains, "Every model program has

been designated an effective program, but not every effective program achieves model program status. Some developers simply aren't in the position to disseminate their program nationwide. Perhaps they have moved on to a different area of scientific research, or their office is not equipped to handle a large number of calls. In order to be recognized as a model program, developers need to be able to provide intensive technical assistance. It can be quite demanding."

Model programs receive promotional support from SAMHSA in the form of fact sheets, recognition on the model programs Web site, and invitations to present at national conferences.

### How Is NREPP Unique?

Frequently, those who work in the field of substance abuse and violence prevention ask, what's the difference between this list of promising, effective, and model programs and others? The NREPP team noted that there are several key distinctions.

"NREPP is an active list rather than a one-time process," explained Ms. Schwinn. "You can submit your program and its evaluation results on a rolling basis, you can appeal a decision, you can ask questions during the process, and you can resubmit with additional data later. In addition, developers receive feedback from the reviewers rather than a simple 'yes' or 'no' answer. This feedback helps them

improve their program for future submission."

"NREPP is not static," Dr. Hennessy noted. "One of our longer term goals is to periodically re-review programs within a five-year time frame to account for the continual evolution of science."

"SAMHSA's vision is that NREPP serve as the leading national resource for practical, contemporary, and reliable information on effective interventions to prevent and/or treat mental and addictive disorders," he continued. "SAMHSA has made a firm commitment to promoting the current programs and to assisting new and emerging programs to move up the ladder of scientific evidence."

### Using NREPP

Before selecting any science-based program or strategy, schools and other community groups must always first assess the needs of their school and community, examine what resources are available, and consider the training that is required to properly deliver a particular program with fidelity to the model.

How can educators use NREPP to assist in this process? SAMHSA's Model Programs Web site ([www.modelprograms.samhsa.gov](http://www.modelprograms.samhsa.gov)) offers a number of tools to help communities identify and select programs that best meet the needs of the problems or target populations they have identified. These include:

- ▶ A programs-at-a-glance



chart that allows users to compare Model Programs by target population addressed, target setting, cost, and other factors;

- ▶ Fact sheets that describe each Model Program in detail;
- ▶ A list of Frequently Asked Questions about the NREPP process; and
- ▶ Links to potential funding resources.

To learn more about NREPP or to obtain detailed information about the SAMHSA Model Programs, visit [www.modelprograms.samhsa.gov](http://www.modelprograms.samhsa.gov) or call 866-43NREPP. ➤



At least ten different lists of effective and promising interventions for drug and violence prevention have been sponsored by the federal government. These lists identify programs that meet certain standards of effectiveness, and provide key elements of prevention programs, references and resources, and program comparisons.

To learn more and for links to the lists, visit our Web site at [www.thechallenge.org](http://www.thechallenge.org).

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The Challenge provides critical information and resources to assist schools in creating safe and healthy environments for young people. It is published by Learning Systems Group under a grant from the U.S. Department of Education's Office of Safe and Drug-Free Schools.

The Office of Safe and Drug-Free Schools supports efforts to create safe schools, respond to crises, prevent drug and alcohol abuse, ensure the health and well being of students, and teach students good citizenship and character. OSDFS coordinates ED's efforts in these areas with other federal agencies and also leads ED's Homeland Security efforts. Visit them online at www.ed.gov/about/offices/list/osdfs.

Expressions of opinion in this newsletter do not necessarily represent the official views of the U.S. Department of Education or Learning Systems Group.

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The Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity.

This document outlines America's growing obesity problem and provides suggestions to help children deal with their weight healthily. To order a copy, call 1-866-512-1800, or download the document at: www.surgeongeneral.gov/topics/obesity/default.htm.

Healthier U.S.

The President's Healthier U.S. initiative helps Americans take steps to improve personal health and fitness and encourages all Americans to be physically active every day, eat a nutritious diet, get preventive screenings, and make healthy choices. For information, visit www.healthierus.gov.



Guidelines for School and Community Programs to Promote Lifelong Physical Activity Among Young People.

This document identifies strategies most likely to be effective in helping young people adopt and maintain a physically active lifestyle. The guidelines were developed by the CDC in collaboration with experts from other federal agencies, state agencies, universities, national organizations, and professional associations. Visit: www.cdc.gov/HealthyYouth/physicalactivity/guidelines.

Promoting Better Health for Young People Through Physical Activity and Sports.

This 2000 report, written by the Secretary of Education and the Secretary of Health and Human Services and released by the White House, outlines 10 strategies to promote health through lifelong participation in enjoyable and safe physical activity and sports. Visit: www.cdc.gov/HealthyYouth/physicalactivity/promoting\_health.

Action for Healthy Kids.

Action for Healthy Kids is an initiative that works to improve nutrition and physical education in schools. To view fact sheets on student health and the relationship between nutrition, physical activity, and student achievement, visit www.actionforhealthykids.org.

Want to learn more about the topics in this issue? Look for the icon pointing to exclusive online-only content. For access to these additional articles and resources, visit www.thechallenge.org.

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Keeping Students Healthy and Physically Fit

ED's Carol M. White Physical Education Program

Interview with OSDFS's Deborah Price