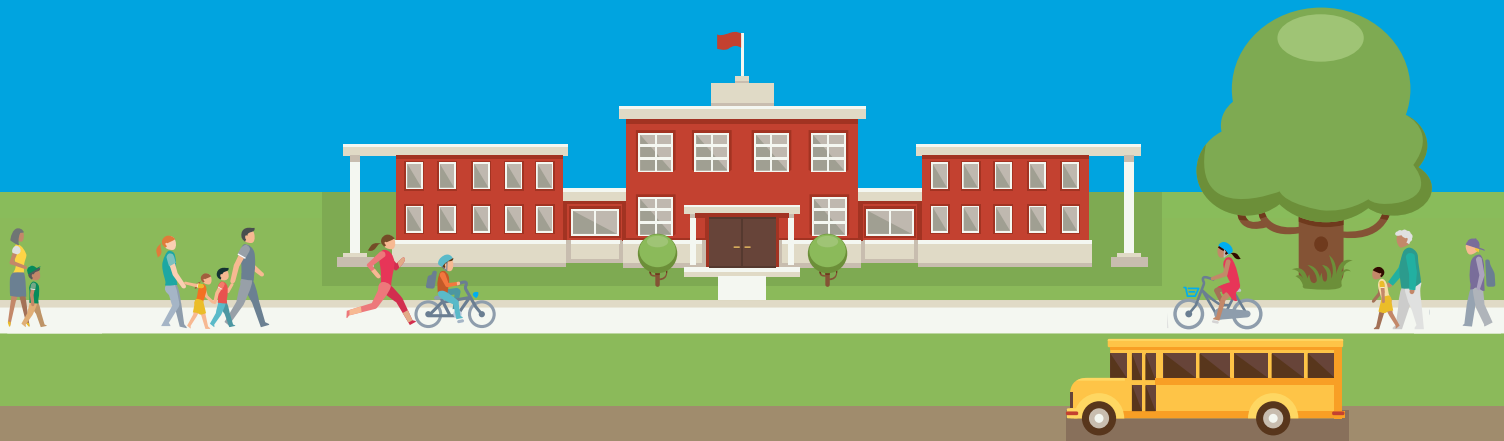




# Parents for Healthy Schools

A Guide for Getting Parents Involved from K–12

November 2015



Centers for Disease Control and Prevention  
National Center for Chronic Disease Prevention and Health Promotion

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For the purposes of this document, the word **parent** is used to refer to the adult primary caregiver(s) of a child's basic needs (e.g., feeding, safety). This includes biological parents; other biological relatives, such as grandparents, aunts, uncles, or siblings; and nonbiological parents, such as adoptive, foster, or stepparents.<sup>9</sup>

In addition, the words **child**, **children**, **adolescents**, and **students** are used interchangeably to refer to students in grades K–12.



## PARENTS FOR HEALTHY SCHOOLS: A GUIDE FOR GETTING PARENTS INVOLVED FROM K-12

### Introduction

Parents play an important role in supporting the health and well-being of children and adolescents at home and at school. When parents are engaged in their children's school activities, their children get better grades, choose healthier behaviors, and have better social skills.<sup>1-6</sup> Parent engagement in school is also associated with helping their children to avoid unhealthy behaviors.<sup>7</sup> Parents can be effective advocates and bring about positive changes in their children's school. Equipping parents with the knowledge and skills to support a healthy school environment is a key strategy for improving their children's overall health and academic success.<sup>8</sup>

The purpose of this guide is to explain how the resources for [Parents for Healthy Schools](#) can be used with and for parents. Resources for [Parents for Healthy Schools](#) are designed to motivate and educate parents to help create healthy school environments and give parents ideas for how they can learn about and help with

- Improving the school nutrition environment and services.
- Increasing opportunities for physical activity in schools (i.e., [comprehensive school physical activity programs](#)).
- Supporting schools in managing chronic health conditions.

### Who can use this guide?

This guide was developed for groups in the school that work with parents (e.g., PTA/PTO, school wellness committees, school health personnel and advisory councils, or an action team for partnerships that is part of the [National Network of Partnership Schools](#)).<sup>9,10</sup>

School groups can use this guide to

- Learn what parents should know about the school nutrition environment and services; physical education and physical activity; and managing chronic health conditions in schools.
- Guide the way they work with parents by using the [parent engagement framework](#)—connect, engage, and sustain.
- Learn how to use and share the resources developed for [Parents for Healthy Schools](#).

Others (e.g., school nutrition directors, school administrators, teachers, parents, and community members or organizations) interested in working with parents and getting them involved in the school can also use this guide.





## What is in this guide?

This guide includes the following:

1. A brief overview of a healthy school environment with a focus on the school nutrition environment and services; physical education and physical activity; and managing chronic health conditions in schools.
2. A brief overview of the framework for engaging parents in school health that is based on the Center for Disease Control and Prevention's (CDC's) [Parent Engagement: Strategies for Involving Parents in School Health](#).
3. Suggestions for how to use the resources for [Parents for Healthy Schools](#) (described here) to engage parents in improving the school health environment.

## Key resources include



### [Parents for Healthy Schools: Making a Difference in Your Child's School PowerPoint Presentation](#)

This presentation makes the case for a healthy school environment, explains what needs to be changed, provides suggestions for improvements, and identifies ways parents can help take action.



### [Ideas for Parents](#)

These one-page documents about the school nutrition environment and services, physical education and physical activity, and managing chronic health conditions suggest key questions and ideas parents should consider for taking action to improve the school health environment.



### [Check-in Questions](#)

These questions can be used to track progress in engaging parents in school health activities.



# OVERVIEW OF A HEALTHY SCHOOL ENVIRONMENT

Schools are an ideal place for students to learn about and practice healthy behaviors. The **Whole School, Whole Community, Whole Child** (WSCC) model, which was developed by ASCD and CDC, provides a framework for addressing school health policies, practices, and programs to ensure that students are healthy and ready to learn.<sup>11</sup> As shown in Figure 1, there are 10 components in this model. Schools should address the policies, processes, and practices across these components to help students be safe, healthy, challenged, supported, and engaged. In addition, this model depicts the need for the school, family, and community to work together to ensure students are healthy and academically successful.

There is evidence to support that healthy students perform better in school. For example, student participation in the United States Department of Agriculture (USDA) School Breakfast Program (SBP) is associated with increased academic grades and standardized test scores, reduced absenteeism, and improved cognitive performance (e.g., memory).<sup>12</sup> Similarly, students who are physically active in school tend to have better grades, school attendance, cognitive performance (e.g., memory), and classroom behaviors (e.g., on-task behavior).<sup>12</sup> Finally, students who have support to manage their chronic health conditions have increased school attendance and do better academically.<sup>13,14</sup> All of these school practices improve educational outcomes and improve the overall health and wellness of students.

Although there are many aspects of a healthy school environment, **Parents for Healthy Schools** focuses on the school nutrition environment and services, physical education and physical activity (i.e., **comprehensive school physical activity programs**), and managing chronic health conditions in schools by providing health services. These three areas are particularly important because of the effect they have on the health of students now and throughout their lives. In addition, all three topics have clear actions that can be taken at home and in school that will help students make healthy choices.

Across these three areas, the goal is for schools to

- a. educate students about healthy nutrition, physical education and physical activity, and managing chronic health conditions;
- b. provide opportunities for students to practice healthy eating and physical activity behaviors; and
- c. provide access to health services for students with chronic health conditions.

Although this is ideal, other priorities, limited resources, or lack of support may keep schools from providing students with these opportunities and services.

Involving parents in school health activities can be an important strategy for getting schools to provide healthy school nutrition environments and services, opportunities for physical activity throughout the school day, and health services and support for students with chronic health conditions. Next, a brief overview is provided of these three topics and how schools and parents can work together to address them.



Figure 1. Whole School, Whole Community, Whole Child Model



## School Nutrition Environment and Services

Schools provide students with opportunities to learn about and practice healthy eating. The school nutrition environment refers to the foods and beverages that are available to students throughout the school day, as well as information and messages about food and nutrition that students encounter on school grounds. A healthy school nutrition environment provides students with access to healthy and appealing foods and beverages, consistent messages about healthy eating, and opportunities to learn about and practice healthy eating.<sup>15, 16</sup>

School nutrition services are an important part of the school nutrition environment and provide meals that meet federal nutrition standards for the National School Lunch Program and School Breakfast Program. Most students also have access to foods and beverages offered or sold outside of school meal programs (i.e., competitive foods).<sup>17,18</sup> In 2013, the USDA created nutrition standards for competitive foods and beverages **sold** during the school day called the **Smart Snacks in School** nutrition standards. Schools are required to meet or exceed these nutrition standards. Although the Smart Snacks standards do not address foods and beverages served for student rewards or school celebrations, some states, school districts, and schools may have additional nutrition standards for these items.

Next are key topics that parents can learn about and encourage schools to include as part of a healthy school nutrition environment and services. The links provided here will take you to the [Ideas for Parents](#), which are one-page documents that provide information about the topic and suggestions for how parents can get involved.

- [Overview of the school nutrition environment and services](#)
- [School meals](#)
- [Smart Snacks in School](#)
- [Healthy fundraisers](#)
- [Healthy student rewards](#)
- [Events and celebrations during the school day](#)
- [Drinking water availability](#)
- [Food marketing in schools](#)

Please see [Glossary of Terms](#) for an explanation of these key topics.





## Physical Education and Physical Activity

To help increase the number of children and adolescents who are physically active for at least 60 minutes each day, a comprehensive, school-wide approach to physical activity is needed to provide opportunities for students to be physically active before, during, and after the school day.<sup>19-22</sup> This approach is called a **Comprehensive School Physical Activity Program**.

The foundation of a **Comprehensive School Physical Activity Program** is for schools to have physical education classes that help students to gain the knowledge and skills needed to establish and maintain a physically active lifestyle throughout childhood and adolescence and into adulthood.<sup>21</sup> Other aspects of a Comprehensive School Physical Activity Program include physical activity during school, which includes recess and classroom physical activity, physical activity before and after school, staff involvement, and family and community engagement.<sup>21</sup> Schools are encouraged to join **Let's Move! Active Schools**, the national physical activity and physical education solution, to help create comprehensive active learning environments and ensure 60 minutes of physical activity for their students. In addition, schools can be a part of the **Presidential Youth Fitness Program (PYFP)**, which provides a model for fitness education within a comprehensive physical education program.

Below are key topics that parents can learn about and encourage schools to include as part of a comprehensive approach to physical activity. The links provided here will take you to the **Ideas for Parents**, which are one-page documents that provide information about the topic and suggestions for how parents can get involved.

- [Overview of physical education and physical activity](#)
- [Physical education](#)
- [Student fitness assessment](#)
- [Recess](#)
- [Classroom physical activity](#)
- [Before and after-school physical activity](#)
- [Staff Involvement](#)

Please see **Glossary of Terms** for an explanation of these key topics.



## Managing Chronic Health Conditions

The percentage of children and adolescents in the United States with chronic health conditions increased from 1.8% in the 1960s to more than 25% in 2007.<sup>23</sup> School nurses play

a key role in managing chronic health conditions at school. The school nurse coordinates and conducts assessment, planning, and implementation of individualized health care plans for safe and effective management of students with chronic health conditions during the school day.

School health services staff support students with chronic health conditions by providing day-to-day, comprehensive health care management for all students, many of whom would not otherwise have access to health care. They can assist students with health concerns, including first aid, emergency care, and managing chronic health conditions, such as asthma or diabetes. They also promote prevention and wellness through vaccines, encouraging proper nutrition and physical activity, and providing health education for both students and parents. These services are also designed to facilitate access or referrals to community health care providers. Health services connect school staff, students, families, community, and health care providers to promote the health care of students in a healthy and safe school environment.<sup>11</sup> Parents should be aware of the school health services available and how they can benefit their children; in schools where services are minimal

or lacking, parents can advocate for increased nursing and health services.

Next are key topics that parents can learn about and encourage schools to include to help students manage chronic health conditions. The links provided will take you to the *Ideas for Parents*, which are one-page documents that provide information about the topic and suggestions for how parents can get involved.

- [Overview of chronic health conditions](#)
- [Health services](#)
- [Supporting healthy weight](#)
- [Asthma](#)
- [Food allergies](#)
- [Diabetes](#)
- [Seizure disorders](#)
- [Oral health](#)

Please see [Glossary of Terms](#) for an explanation of these key topics.



# OVERVIEW OF THE PARENT ENGAGEMENT FRAMEWORK

In 2012, CDC released *Parent Engagement: Strategies for Involving Parents in School Health*, which defines and describes engagement between parents and school staff and identifies specific strategies and actions that schools can take to increase parent engagement in schools' health promotion activities.<sup>8</sup> The document describes all three aspects of parent engagement in schools (Figure 2):

- **Connecting** with parents
- **Engaging** parents in school health activities
- **Sustaining** parent engagement in school health

School districts and staff need to **connect** and build positive relationships with parents before they can effectively engage parents in school health activities. Schools should offer a variety of options for parents to **engage** in school health activities. In addition, schools need to identify ways to **sustain** parent engagement by overcoming challenges that keep parents from being connected and engaged in school health activities.



Figure 2. Parent Engagement Framework




## Check-In Questions for Connecting with Parents

Take a moment to review what is currently in place. If your school does not already have an active parent engagement team, work with the school leadership to develop one. How does the school solicit parent input? How are parents involved in decision making? Are they included in school activities?

Here are some sample questions that can be used for assessment:

- ✓ **Activities:** Does the school invite parents to participate in and contribute to school nutrition, physical activity, or health services-related activities and programs? For example, does the school encourage parents to eat breakfast or lunch through the school meals program in the cafeteria, or volunteer to help with the walk/bike to school program? How are these opportunities communicated?
- ✓ **Input:** What opportunities exist for parents to give feedback about how they would like to be involved in school health activities? How is that input received from the school (i.e., are parents who have given feedback valued, or is it viewed as critical)?
- ✓ **Decision making:** Does the school have a dedicated committee of teachers, administrators, and parents who helps plan, implement, and continually improve outreach to parents and the quality of parent engagement activities?
- ✓ **Access:** How does the school connect with parents who have nontraditional work hours? With parents who speak English as a second language? (Or with non-native English speakers?)





## Check-In Questions for the Parents for Healthy Schools PowerPoint Presentation

Provide a **short survey** after the presentation to ask parents what they liked or did not like. Then use the data you collect to adjust your next presentation. Observations and existing administrative records can also be used to help assess the presentation.

### ✓ Numbers

- How many people attended the presentation?
- How long was the presentation?

### ✓ Observations

- Did participants ask questions? Were they mostly positive? Critical? Seeking clarification?
- Did people stay and chat afterwards, or leave right away?
- Did parents provide feedback to the presenter about what they could do differently?

### ✓ Follow-up

- How many follow-up questions or comments did your group receive from parents in the week or 2 after the presentation?
- Have you seen an increase in attendance at meetings since the presentation?



## PROCESS OF ENGAGING PARENTS IN THE SCHOOL HEALTH ENVIRONMENT

How can the parent engagement framework (e.g., connect, engage, and sustain) be applied to improve the school environment for nutrition, physical activity, and managing chronic health conditions?

### Connect with parents by:

1. Asking parents how they would like to be involved in school activities for nutrition, physical activity, and managing chronic health conditions.
2. Having a clear vision and mission statement about school nutrition, physical activity, and managing chronic health conditions that includes parent engagement.
3. Creating a welcoming, trusting, and inclusive school environment where parents feel comfortable in participating in school activities for nutrition, physical activity, and chronic health conditions, as well as valued and able to offer their expertise.
4. Sending communications (e.g., school newsletter, e-mails) to parents to promote the school meal programs, healthy fundraisers, healthy celebrations and events, physical education program, and other opportunities to be physically active.
5. Providing staff development for how to engage parents in school activities for nutrition, physical activity, and managing chronic health conditions.

**Offer a variety of opportunities to *engage* parents in school activities for nutrition, physical activity, and managing chronic health conditions by doing the following:**

1. **Motivating parents to support a healthy school environment.** School groups can use the [\*Parents for Healthy Schools: Making a Difference in Your Child's School PowerPoint Presentation\*](#) to motivate and educate parents about how they can take an active role in changing their child's school health environment for nutrition, physical activity, and managing chronic health conditions. This [PowerPoint presentation](#) educates parents about why addressing health in school is important; what are some of the challenges schools are facing related to nutrition, physical activity, and managing chronic health conditions; and how they can help schools improve the school nutrition environment

and services, increase opportunities for students to be physically active, and provide services for students who have chronic health conditions.

**2. Educating parents about what they can do to support a healthy school environment for nutrition, physical activity, and managing chronic health conditions.** School groups can use *Ideas for Parents* to make parents aware of all the different topics that need to be addressed to improve the school nutrition environment and services, increase opportunities for students to be physically active at school, and help students manage their chronic health conditions at school. *Ideas for Parents* are designed specifically for parents and give them a quick understanding of the health topic, key questions they should ask their children’s school, and ideas for actions they can take to support that topic. Ways to share the *Ideas for Parents* include the following:

- Giving them to parents at school events, meetings, or parent/teacher conferences.
- Adding them to students’ work or teacher and parent communication folders.
- Adding them to school websites, newsletters, or e-mail lists.
- Making them available in the parent resource room.

**3. Getting parents to take action.** School groups can encourage parents to make a difference in their child’s school health environment by putting recommendations from the *Parents for Healthy Schools: Making a Difference in Your Child’s School PowerPoint Presentation* and *Ideas for Parents* into practice. Parents and schools can work together to prioritize a list of school health activities and events. Some ideas include

- Attending a workshop or training by the school about health and safety.
- Being involved in the decision-making groups for school nutrition, local wellness policies, and other wellness activities (e.g., district or school wellness committee, school health advisory council, or PTA).
- Working with community organizations or groups to organize events with healthy foods and beverages (e.g., healthy fundraisers or taste tests with students).



### Check-In Questions for Engaging Parents with Ideas for Parents

- ✓ Track which *Ideas for Parents* documents are given out, distribution dates, and the number of copies shared.
  - If *Ideas for Parents* are handed out at school meetings, the sign-in sheets can provide a sense of how many parents received the handouts.
  - If *Ideas for Parents* are available on the website, web metrics can track
    - How many are downloaded?
    - Which *Ideas for Parents* are downloaded most often? Least often?
- ✓ **Follow-up**
  - Ask parents who received the *Ideas for Parents*, if they found them useful, and if there are any other topics they might be interested in learning more about?



### Check-In Questions to Track How Parents Are Taking Action

- ✓ Track what you do, and look for changes. What happens 1 week after you launch parent engagement activities (e.g., sharing the power point at an open house)? 1 month after? 3 months after?
- ✓ Each *Ideas for Parents* provides parents a list of questions to ask and actions to take. **Listen** for the questions, and **look for the actions mentioned** on the *Ideas for Parents* that you have shared.

*continued on next page*

- ✓ Simple tracking forms or worksheets can be developed to collect this information. For example, if you are planning to share the [Ideas for Parents](#) focused on chronic health conditions, consider tracking the number of parents on the school health advisory council or PTA who have children with chronic health conditions. Does this number increase following the implementation of your parent engagement activities?



### Check-In Questions to Sustain Parent Engagement



Review your current activities to assess where your group stands.

- ✓ How many parent engagement activities include strategies to address barriers to parent engagement? See [Parent Engagement: Strategies for Involving Parents in School Health](#).
- ✓ As you implement health-related parent engagement activities designed to encourage parents to be involved, observe the following:
  - Are the numbers of parents engaged in school nutrition, physical activity, or health services-related events or activities higher than before? Lower? About the same?
  - How many are contributing to school efforts for the first time?
  - To what extent do the parents involved in school groups represent the diversity of the student body?



- Preparing healthy snacks at home with your child to bring to classroom celebrations and school activities.
- Volunteering to help with physical education class, recess, or before or after-school physical activity programs.
- Communicating with the physical education teacher about how you can support your child, set physical goals, and prepare for the Presidential Youth Fitness Program.
- Signing up to join the school's [Let's Move! Active Schools](#) team, and support the implementation of an active learning environment.
- Maintaining communication with health care providers and school staff, including the school nurse, teachers, and counselors, for a care plan and medication, if your child has a chronic health condition.

**Identify ways to sustain parent engagement by overcoming challenges that keep parents from being connected and engaged in school health activities.** Some strategies schools can use to sustain parent engagement include the following:

1. Appointing a dedicated team or committee that oversees parent engagement. This could be through the PTA, school wellness committee, [action team for partnerships](#), or other school groups. A variety of parents who represent the school demographics should be members of the team.
2. Identifying challenges that keep parents from being connected and engaged, and working with parents to tailor school events and activities to address these challenges.





## CONCLUSION

This action guide outlines a framework and key materials that school groups working with parents can use to engage parents in supporting a healthy school environment. Every school will be at a different starting place with this work. If the school you are working with does not already do a lot of parent engagement work, you will want to encourage the school to develop a plan for parent engagement (see CDC’s [Promoting Parent Engagement in School Health: A Facilitator’s Guide for Staff Development](#) to help you develop this plan). This plan should include opportunities for parents to help create a supportive environment for nutrition, physical activity, and chronic health conditions. Together, schools and parents can ensure that all students have access to opportunities to learn about and practice healthy behaviors at school.



## GLOSSARY OF TERMS



### School Nutrition Environment and Services

**School nutrition environment:** The school nutrition environment refers to the foods and beverages that are available to students throughout the school day, as well as information and messages about food and nutrition that students encounter on school grounds.<sup>16,24</sup>

**School nutrition services:** School nutrition services are part of the school nutrition environment. School nutrition services provide meals that meet federal nutrition standards for the National School Lunch Program and School Breakfast Program, accommodate the health and nutrition needs of all students, and help ensure that foods and beverages sold outside of the school meal programs (i.e., competitive foods) meet Smart Snacks in School nutrition standards.<sup>24</sup>

**School meals:** School meals are the lunches and breakfasts served through the National School Lunch Program and School Breakfast Program.<sup>19,25</sup> These meals must meet nutrition standards, which were updated in the [Healthy Hunger Free Kids Act of 2010](#).<sup>26</sup> All students can participate in the school meal programs, and some students are eligible to receive free or reduced-price meals.<sup>19,27</sup>

**Water availability:** Schools participating in the National School Lunch Program must make plain drinking water available to students at no cost during the lunch meal periods and when breakfast is served in the cafeteria.<sup>28</sup> Schools can further increase access to drinking water and support adequate hydration by ensuring that drinking fountains are clean and maintained, and by allowing students to carry water bottles with them.<sup>29</sup>

**Marketing and promotion:** Food and beverage marketing occurs in schools in many forms, including posters, vending machine fronts, in-school television advertisements, textbook covers, sports equipment, scoreboards, and other locations.<sup>18,30</sup>

**Competitive foods:** Competitive foods refers to foods sold or made available to students outside of the school meals program during the school day.<sup>18,19,31,32</sup> As of the 2014–2015 School Year, competitive foods and beverages *sold* during the school day have to meet Smart Snacks in School nutrition standards, which include limits on fat, salt, and calorie content.<sup>33</sup> The following are all considered competitive foods:

- **Fundraising activities:** Schools and school groups often pursue fundraising activities to raise money for school-led extracurricular activities. The majority of schools across the country allow food and beverages to be sold for fundraising purposes.<sup>34</sup> In the past, candy, cookies, and pastries have ranked among the



most popular fundraising foods.<sup>34</sup> Fundraisers held on school grounds during the school day must meet Smart Snacks in School standards.<sup>33</sup> State agencies that administer the school meal programs have the authority to allow a select number of fundraisers each year to be exempt from Smart Snacks standards.

- **A la carte in cafeteria:** Most schools offer students the option to purchase foods and beverages in the cafeteria that are not a complete school meal. These *a la carte* items may be an entrée or side item from a school meal (e.g., a vegetable side dish) or other items that are not part of the school meal (e.g., chips). All *a la carte* foods must meet Smart Snack in School standards.<sup>33</sup>
- **Vending machines:** The majority of middle schools and high schools and some of elementary schools have vending machines with foods and beverages that students can purchase.<sup>32</sup> Vending machines may be available in the cafeteria or in other locations in the school. The Smart Snacks in School standards address *what* is sold in vending machines during the school day.
- **School stores and snack bars:** Some schools have school stores or snack bars where students can purchase foods and beverages. These are less widespread than vending machines or *a la carte* sales.<sup>32</sup> Similar to vending machines, these stores and snack bars may be located within the cafeteria as well as other locations on the school grounds. Foods and beverages sold in school stores and snack bars during the school day must meet Smart Snacks in School standards.<sup>33</sup>
- **Student rewards:** In some schools, teachers, school staff, and parent groups give students food or coupons to use at restaurants as rewards for academic achievement or positive classroom behavior. The Institute of Medicine recommends that schools prohibit the use of foods and beverages as rewards or punishment.<sup>18</sup>
- **Classroom parties:** In some schools, students have foods and beverages made available to them during classroom parties. These items are not sold to students, but rather offered to students by teachers or parents (e.g., birthday cupcakes, apples and dip). Classroom celebrations can contribute additional

opportunities for children to consume food and beverages, including many high-calorie foods.<sup>35</sup>

- Events and celebrations during the school day: Some schools have special events and celebrations during the school day that include foods and beverages.<sup>31</sup>



## Physical Education and Physical Activity

### Comprehensive School Physical

#### Activity Program: A Comprehensive School Physical Activity Program

(CSPAP) is a multicomponent approach by which school districts and schools use all opportunities for students to be physically active, meet the nationally recommended 60 minutes of physical activity each day, and develop the knowledge, skills, and confidence to be physically active for a lifetime.<sup>22</sup> A CSPAP includes 5 components: physical education as the foundation, physical activity during school (i.e., recess, classroom physical activity breaks), physical activity before and after school, staff involvement, and family and community engagement.<sup>22</sup>

**Physical education:** Physical education is an academic subject characterized by a planned, sequential K–12 curriculum (course of study) that is based on the national standards for physical education.<sup>19</sup> Physical education provides cognitive content and instruction designed to develop motor skills, knowledge, and behaviors for healthy active living, physical fitness, sportsmanship, self-efficacy, and emotional intelligence.

**Student fitness assessment:** Student fitness assessments are used to determine students' current level of health-related fitness, which is linked to various health outcomes<sup>36</sup> and should be part of a physical education program.<sup>19</sup> Components of a health-related fitness assessment include aerobic capacity, muscular strength, muscular endurance, flexibility, and body composition.<sup>36</sup>

**Recess:** Recess is planned time within the school day for play and supervised physical activity.<sup>20</sup> Recess is an important part of a student's school experience because it provides opportunities to practice life skills (e.g., cooperation, following rules, and communication).<sup>19,20</sup>

**Classroom physical activity:** Classroom physical activity includes any physical activity performed in

the classroom during the school day.<sup>19,20,21</sup> It can last from 5–15 minutes and can be done all at one time or several times during the school day.<sup>21</sup> Teachers can include physical activity into their planned academic lessons or provide short breaks in class.<sup>20,21</sup>

**Before and after school physical activity:** Before and after school physical activity could include walking and biking to school programs, physical activity clubs, intramural programs (i.e., organized sports by the school or community that any child can participate in if they want), informal play on school grounds, physical activity in school-based child care programs, and interscholastic sports (i.e., sports offered to students at school).<sup>21</sup>

**Staff involvement:** School employees play an integral role in a healthy school environment. When school staff commit to good health practices, they are positive role models for students and may show increased support for student participation in physical activity. Support for school employee wellness and leadership training contributes to the overall culture of physical activity at a school.

**Family and community engagement:** Family engagement is families and school staff working together to support and improve the learning, development, and health of children and adolescents through physical education and physical activity. Community engagement allows maximum use of school and community resources and creates a connection between school and community-based physical activity opportunities.



## Managing Chronic Health Conditions in Schools

**Health services:** School health services include treatment and management of chronic and acute conditions, preventive services, emergency care, health promotion, counseling and health education, and referrals and care coordination.<sup>37</sup>

**School health services staff:** This may include registered nurses, nurse practitioners, dentists, health educators, physicians, physician assistants, or other allied health personnel.

**Overweight and obesity:** *Overweight* is defined as having excess body weight for a particular height from fat, muscle, bone, water, or a combination of these factors.<sup>38</sup> *Obesity* is defined as having excess body

fat.<sup>38</sup> Overweight and obesity are the result of *caloric imbalance*—too few calories expended for the amount of calories consumed—and are affected by various genetic, behavioral, and environmental factors.

**Asthma:** Asthma affects the airways in the lungs and can cause episodes of chest tightness, wheezing, difficulty breathing, and coughing, and can be life-threatening.<sup>39</sup>

**Food allergies:** Food allergies can occur when the body has a specific and reproducible immune response (i.e., reaction) to certain foods. The body can have a severe and life-threatening immune response called anaphylaxis.<sup>40</sup>

**Diabetes:** Diabetes can result in a buildup of glucose (the body's main source of fuel) in the blood, which during many years can cause damage to the eyes, kidneys, heart, nerves, and blood vessels.<sup>41</sup> Abnormally high or low glucose levels can be life threatening and require immediate attention and evaluation by qualified health professionals.

**Seizure disorders:** Seizures occur when a disturbance in brain function produces changes in awareness or sensation, involuntary body movements, or changes in behavior generally lasting from a few seconds to a few minutes.<sup>42</sup>

**Oral health:** Oral health is an important part of a child's overall well-being. Untreated tooth decay causes pain and infections, which may lead to problems with eating, speaking, and playing.<sup>43</sup>





## RESOURCES

[Centers for Disease Control and Prevention. Parent Engagement in Schools](#)

[Centers for Disease Control and Prevention. School health guidelines to promote healthy eating and physical activity](#)

[Centers for Disease Control and Prevention. Health and Academics](#)

[Centers for Disease Control and Prevention. Positive Parenting](#)

[Centers for Disease Control and Prevention. Voluntary Guidelines for Managing Food Allergies in Schools and Early Care and Education Programs](#)

[Action for Healthy Kids. Parents for Healthy Kids](#)

[National Parent Teacher Association](#)

[National Association of School Nurses](#)

[Education Nation Parent Toolkit](#)

[SHAPE America. Essential Components of Physical Education](#)

[Step It Up! The Surgeon General's Call to Action to Promote Walking and Walkable Communities](#)

[United States Department of Agriculture Team Nutrition Materials for Parents](#)

[United States Department of Agriculture School Nutrition Environment and Wellness Resources](#)

[United States Department of Agriculture Smart Snacks in School Nutrition Standards](#)

[Yale Rudd Center. Rudd Roots](#)



## REFERENCES

1. Fan X, Chen M. Parental involvement and students' academic achievement: a meta-analysis. *Educ Psychol Rev.* 2001;13(1):1-22.
2. Jeynes WH. The relationship between parental involvement and urban secondary school student academic achievement: a meta-analysis. *Urban Educ.* 2007;42:82-110.
3. Epstein JL. *School, Family, and Community Partnerships: Preparing Educators and Improving Schools.* 2nd ed. Boulder, CO: Westview Press; 2011.
4. Ornelas LJ, Perreira KM, Ayala GX. Parental influences on adolescent physical activity: a longitudinal study. *Int J Behav Nutr Phys Act.* 2007;4(3):1-10.
5. Haerens L, De Bourdeaudhuij I, Maes L. School-based randomized controlled trial of a physical activity intervention among adolescents. *J Adolesc Health.* 2007;40(3):258-265.
6. El Nokali NE, Bachman HJ, Votruba-Drzal E. Parent involvement and children's academic and social development in elementary school. *Child Dev.* 2010;81(3):988-1005.
7. Guilamo-Ramos V, Jaccard J, Dittus P, Gonzalez B, Bouris A, Banspach S. The Linking Lives health education program: a randomized clinical trial of a parent-based tobacco use prevention program for African-American and Latino youths. *Am J Public Health.* 2010;100(9):1641-1647.
8. Centers for Disease Control and Prevention. *Parent Engagement: Strategies for Involving Parents in School Health.* Atlanta, GA: US Dept of Health and Human Services; 2012.
9. Epstein JL, et al. *School, Family, and Community Partnerships: Your Handbook for Action.* 3rd ed. Thousand Oaks, CA: Corwin; 2009.
10. Greenfield MD, Epstein JL. *Sampler: Improve Students' Health with Family and Community Involvement.* Baltimore: Center on School, Family, and Community Partnerships at Johns Hopkins University; 2013.
11. *Whole School, Whole Community, Whole Child: A Collaborative Approach to Learning and Health.* Association for Supervision and Curriculum Development and the Centers for Disease Control and Prevention. <http://www.ascd.org/ASCD/pdf/siteASCD/publications/wholechild/wsc-a-collaborative-approach.pdf>. Accessed August 28, 2015.
12. Centers for Disease Control and Prevention. *Health and Academic Achievement.* Atlanta, GA: US Dept of Health and Human Services; 2014.
13. Taras H, Potts-Datema W. Chronic health conditions and student performance at school. *J Sch Health.* 2005;75(7):255-266.
14. Basch CE. *Healthier Students Are Better Learners: A Missing Link in Efforts to Close the Achievement Gap.* New York, NY: Columbia University; 2010.
15. Centers for Disease Control and Prevention and Bridging the Gap Research Program. *Strategies for Creating Supportive School Nutrition Environments.* Atlanta, GA: US Dept of Health and Human Services; 2014.
16. *Changing the Scene: Improving the School Nutrition Environment Presentation Script.* Food and Nutrition Service. US Dept of Agriculture. <http://www.fns.usda.gov/sites/default/files/script.pdf>. Accessed August 28, 2015.
17. Fox MK, Condon E. *School Nutrition Dietary Assessment Study-IV: Summary of Findings.* Alexandria, VA: US Dept of Agriculture; 2012.
18. Institute of Medicine. *Nutrition Standards for Foods in Schools: Leading the Way Toward Healthier Youth.* Washington, DC: Institute of Medicine of the National Academies; 2007.
19. Centers for Disease Control and Prevention. School health guidelines to promote healthy eating and physical activity. *MMWR Morb Mortal Wkly Rep.* 2011;60(RR05):1-76.
20. Institute of Medicine. *Educating the Student Body: Taking Physical Activity and Physical Education to School.* Washington, DC: The National Academies Press, 2013.
21. Centers for Disease Control and Prevention. *A Guide for Developing Comprehensive School Physical Activity Programs.* Atlanta, GA: US Dept of Health and Human Services; 2013.
22. Physical Activity Guidelines for Americans Midcourse Report Subcommittee of the President's Council on Fitness, Sports & Nutrition. *Physical activity guidelines for Americans midcourse report: strategies to increase physical activity among youth.* Washington, DC: US Dept of Health and Human Services, 2012.
23. Van Cleave J, Gortmaker SL, Perrin JM. Dynamics of obesity and chronic health conditions among children and youth. *JAMA.* 2010;303(7):623-630.
24. Whole School Whole Community Whole Child. Nutrition Environment and Services. Centers for Disease Control and Prevention. <http://www.cdc.gov/healthyyouth/wsc/components.htm#NutritionEnvironmentandServices>. Accessed August 28, 2015.
25. School Meals. Child Nutrition Programs. US Dept of Agriculture. <http://www.fns.usda.gov/school-meals/child-nutrition-programs>. Accessed August 28, 2015.





26. School Meals: Nutrition Standards for School Meals. US Dept of Agriculture. <http://www.fns.usda.gov/school-meals/nutrition-standards-school-meals>. Accessed August 28, 2015.
27. School Meals: Income Eligibility Guidelines. US Dept of Agriculture. <http://www.fns.usda.gov/school-meals/income-eligibility-guidelines>. Accessed August 28, 2015.
28. National School Lunch Program and School Breakfast Program: Nutrition Standards for All Foods Sold in School as Required by the Healthy, Hunger-Free Kids Act of 2010, 7 CFR § 210.10(a)(1). [http://www.fns.usda.gov/sites/default/files/2013-15249\\_0.pdf](http://www.fns.usda.gov/sites/default/files/2013-15249_0.pdf). Accessed August 28, 2015.
29. Water Access in Schools. Centers for Disease Control and Prevention. <http://www.cdc.gov/healthyyouth/npao/wateraccess.htm>. Accessed August 30, 2015.
30. Terry-McElrath YM, Turner L, Sandoval A, Johnston LD, Chaloupka FJ. Commercialism in US elementary and secondary school nutrition environments: trends from 2007 to 2012. *JAMA Pediatr.* 2014;168(3):234-242.
31. Competitive Foods and Beverages in U.S. Schools: A State Policy Analysis. Centers for Disease Control and Prevention. US Dept of Health and Human Services. <http://www.cdc.gov/healthyyouth/nutrition/pdf/compfoodsbooklet.pdf>. Accessed August 30, 2015.
32. School Nutrition Dietary Assessment Study IV: Summary of Findings. US Dept of Agriculture. [http://www.fns.usda.gov/sites/default/files/SNDA-IV\\_Findings\\_0.pdf](http://www.fns.usda.gov/sites/default/files/SNDA-IV_Findings_0.pdf). Accessed August 30, 2015.
33. Tools for Schools: Focusing on Smart Snacks. US Dept of Agriculture. <http://www.fns.usda.gov/healthierschoolday/tools-schools-focusing-smart-snacks>. Accessed September 1, 2015.
34. O'Toole TP, Anderson S, Miller C, Guthrie J. Nutrition services and foods and beverages available at school: results from the School Health Policies and Programs Study 2006. *J Sch Health.* 2007;77:500-521.
35. Isoldi KK, Dalton S. Calories in the classroom: celebration foods offered and consumed during classroom parties at an elementary school in a low-income, urban community. *Childhood Obes.* 2012;8(4):378-383. doi:10.1089/chi.2012.0002.
36. Institute of Medicine. *Fitness Measures and Health Outcomes in Youth*. Washington, DC: The National Academies Press; 2012.
37. DeStigter L, Guinn-Jones M, Murray S, Shattuck R. *School Health Services Improvement Guidebook*. Chicago, IL: American Academy of Pediatrics; 2014.
38. US Dept of Health and Human Services, National Institutes of Health, National Heart, Lung, and Blood Institute. *Overweight and Obesity*. Bethesda, MD: National Institutes of Health; 2011.
39. Asthma prevalence in the United States—2010. Centers for Disease Control and Prevention. <http://www.cdc.gov/asthma/asthmadata.htm>. Accessed September 2, 2015.
40. Centers for Disease Control and Prevention. *Voluntary Guidelines for Managing Food Allergies in Schools and Early Care and Education Programs*. Washington, DC: US Dept of Health and Human Services; 2013.
41. Basics about diabetes. Centers for Disease Control and Prevention. <http://www.cdc.gov/diabetes/basics/diabetes.html>. Accessed September 2, 2015.
42. Hirtz D, Thurman DJ, Gwinn-Hardy K, Mohamed M, et al. How common are the “common” neurologic disorders? *Neurology.* 2007;68(5):326-337.
43. US Dept of Health and Human Services. *Oral Health in America: A Report of the Surgeon General*. Rockville, MD: US Dept of Health and Human Services, National Institute of Dental and Craniofacial Research, National Institutes of Health, 2000.

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