

Local School Wellness Collaborative Survey

An Assessment of Local School Wellness Policy Implementation and Practice
in California Public Elementary, Middle, and High Schools

Key Findings Summary

August 2015



Introduction & Background

The Local School Wellness Policy (LSWP) requirement was established by the Child Nutrition and WIC Reauthorization Act of 2004 in an effort to help develop health promotion initiatives in public schools participating in the National School Lunch Program (NSLP) and/or School Breakfast Program. The Healthy, Hunger-Free Kids Act of 2010 strengthened LSWP requirements, thus allowing for enhanced implementation, assessment, evaluation, and community engagement efforts. A final federal rule is expected in the coming months, which will likely include more stringent implementation and reporting requirements—especially at the school level.

Schools play a crucial role in promoting student health and wellness. Local School Wellness Policies aim to address growing concerns about childhood obesity, physical inactivity, and poor nutrition. In order to provide better guidance and support to local schools as they work to develop and implement customized wellness policies, it is necessary to obtain information on current practices. In an effort to do so, California Project LEAN, working with the California School Boards Association (CSBA), the Association of California School Administrators (ACSA), the California Department of Education (CDE), and the Dairy Council of California, administered an online survey to California public school principals and school/district administrators. The survey, which was part of the evaluation work of the California Local School Wellness Policy Collaborative, aimed to determine existing practices, policies, and needs regarding school wellness, nutrition, and physical education/activity as well as barriers, opportunities, and successes associated with LSWP implementation. This brief summarizes key findings in a number of important areas related to school wellness.

Methodology

In May 2015, an online survey was sent to approximately 6570 California public school principals and school/district administrators with e-mail addresses obtained from the ACSA membership list. The survey yielded 366 responses for a response rate of about 6%.

What school and district administrators are saying about LSWPs*



"It is important that wellness is part of an educational program, but it's often something that gets placed on the back burner or forgotten."

"It's very difficult to implement all of the programs we would like to implement without funding. Many restrictions need to be put in place, but there is no funding or time to extend practices into students' homes where many poor choices take place."

"...physical, emotional, and mental health and well-being is one of our top priorities, and it is founded in a firm belief that maximum academic achievement is only possible when students are healthy in body and mind."

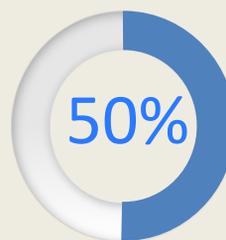
"I love that our state and ACSA are dedicated to school wellness. I have seen such a positive impact from the implementation of wellness practices at our school..."

*Comments from individual survey responses

The survey data included responses from principals and administrators affiliated with individual schools or school districts. The sample consisted of 347 school principals/school administrators (school principals: n=229; school administrators: n=118) and 19 district administrators, some of whom represented a combination of various school levels. Participation in the survey was voluntary, answers were confidential, and respondents were allowed to remain anonymous if they so desired. While identification of school district was optional and omitted by approximately 75% of respondents, at least 137 school districts were represented. Data analysis was completed using SAS. In an effort to improve accuracy, District Administrator responses were excluded from analyses by school level.

Key Findings

1. Wellness Policies, Committees, and Priorities: Approximately half of respondents reported having a fully active wellness committee at either the school or district level. Almost 40% reported having no wellness committee at all. Thirty-nine percent (39%) said that their wellness policy was updated in 2014 or 2015. The highest priorities for school wellness efforts were mental health followed by nutrition, bullying, physical education/physical activity, and violence prevention.



Approximately half of respondents reported having a fully active wellness committee.

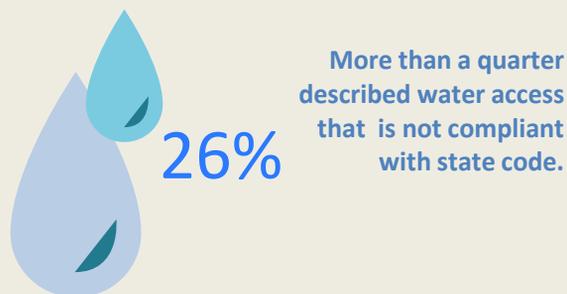
2. Nutrition Education: Almost half of survey respondents reported having no nutrition education curriculum. Fourteen percent (14%) said that it is taught in every grade, every year.

Mental Health was listed as the top priority for school health and wellness.



3. Physical Education and Physical Activity: Physical Education was reported as increasing slightly over the past five years in one of every four schools, and physical activity increased in four of every ten schools. Decreases were uncommon: 3% and 6%, respectively. About 12% of respondents reported having a waiver from state physical education requirements.

4. Nutrition and Product Marketing: Six out of ten respondents reported that they don't allow marketing or promotion of any food or drinks; one out of three restrict marketing of unhealthy products. Four percent (4%) of respondents reported that regular soda is sold on campus during school hours. Eighteen percent (18%) sell sports drinks and 70% sell flavored milk.

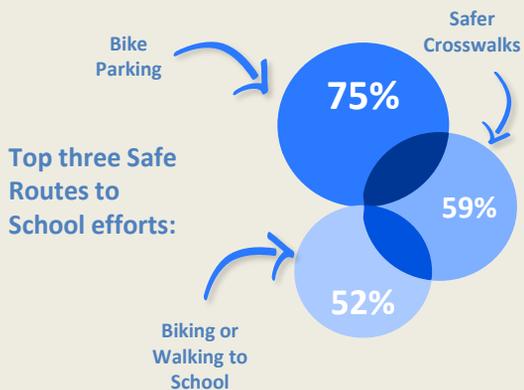


More than a quarter described water access that is not compliant with state code.

5. Water: Approximately 26% of respondents described water access that would not meet state requirements of 1 fountain per 150 students, and almost half reported less than one fountain per 100 students. The most common barriers to assuring access to drinking water were lack of funds for additional water fountains and/or maintenance and bad-tasting water.

6. School Garden Key Findings: About half of all respondents reported that their schools have active gardens.

7. Safe Routes to School: More than half of respondents are currently working on efforts to promote walking or biking to school. Seventy-five percent (75%) of respondents have bike parking at their schools. The top three SRTS efforts are bike parking, safer crosswalks, and promoting walking or biking to school.

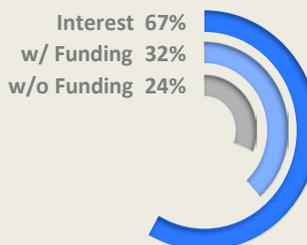


8. Local Control and Accountability Plan (LCAP): Two-thirds of respondents reported that there was an interest in including wellness activities in their LCAP; one-third reported that they were actually included with funding in their LCAP.



Nearly half of all respondents reported having active school gardens.

9. Wellness Policy Successes, Concerns, and Observations: While over 50 respondents listed a number of concerns regarding health and wellness, more than 80 provided information about successful wellness activities or experiences at their school.



67% reported interest in including wellness in LCAP; 32% did so with funding and 24% without funding.

10. Technical Assistance: More than half of respondents indicated that training and resources for parent engagement on wellness and training or resources on mental health issues would be most useful. Half would value teacher training to lead quality physical activity.

General Conclusions

Much progress has been made in rolling out wellness policies in California schools. Noticeable improvements have occurred in areas such as school gardens, physical education, and the marketing and sale of unhealthy food and beverages. However, implementation of Local School Wellness Policies is still far from complete. A substantial amount of work remains to ensure that LSWPs are developed and implemented in all California school districts. New and updated requirements, which will create additional demands on school districts, are expected from the United States Department of Agriculture (USDA) soon. Schools and administrators should get a head start on planning for more stringent guidelines and monitoring. On a positive note, survey results demonstrated the feasibility of designing and implementing desired changes and needed measures, which are now in place in a number of districts across the state. Findings show that it is possible to successfully incorporate health and wellness into school culture, policy, and planning.

Recommendations

The survey findings suggest a number of action steps that California schools can take to properly and efficiently develop and implement LSWPs:

- 1. Wellness Committees:** Schools and districts that do not have active wellness committees should establish them immediately to engage stakeholders in wellness policy updating and implementation.
- 2. Mental Health:** Staffing, support, education, and models for mental health, including prevention of bullying in schools must be strengthened as a top priority for school and district administrators.
- 3. Supports Desired by Schools to Advance School Wellness:** Areas identified by administrators as key needs for assistance include parent engagement, mental health, physical education, physical activity, and nutrition. Materials and assistance on improving the school environment in relation to these topics should be created and disseminated.
- 4. Nutrition Education and School Gardens:** All schools should have a nutrition education curriculum and make funding and implementing it a priority. Active school gardens are on the rise. Efforts to expand this practice to all California schools and integrate their use into school food and nutrition education curricula should be made.
- 5. Nutrition and Product Marketing:** The majority of administrators reported that marketing or promotion of food or drinks in school or on campus is prohibited, indicating that this is a feasible practice for California schools that should be extended to all schools. The small percentage of schools that reported still selling regular soda on campus during school hours

(a violation of new federal rules) should correct that practice. Schools should remain vigilant about reducing products with added sugar.

6. Physical Education and Activity: The schools that reported having waivers for state physical education requirements should seek to remedy this situation. Additionally, resources should be expanded, for hiring credentialed physical education specialists and training teachers to lead physical activity.

7. Water Access and Intake: Efforts to make water available to students should be increased. Whenever possible, water fountains should be added, repaired, and maintained. Innovative practices should be encouraged including water stations on the lunch line, classroom water coolers, and dispensers for filling water bottles.

8. Safe Routes to School: Schools should continue their work regarding Safe Routes to School, especially those efforts that encourage students to walk, bike, or take public transportation. Schools should work with local transportation agencies to seek active transportation program funding opportunities.

9. LCAPs: Priorities related to student health and wellness should be incorporated into Local Control and Accountability Plans (LCAPs). Support and models as to how this can be achieved should be explored and developed.

10. Forums for Sharing Success: Many lessons can be learned from the progress that has already been achieved regarding wellness initiatives in schools. Forums for sharing successes and challenges should be provided and promoted to increase learning opportunities.

Resources

For additional information regarding the Local School Wellness Collaborative Study, please contact :

Public Health Institute
c/o California Project LEAN
1825 Bell Street, Suite 102-A
Sacramento, CA 95825
www.CaliforniaProjectLEAN.org



California School Boards Association
3251 Beacon Blvd.
West Sacramento, CA 95691
www.csba.org



For school wellness policy development, implementation, monitoring, and evaluation tools and resources, visit www.CaliforniaProjectLEAN.org and www.csba.org

California Project LEAN was supported in this work by funds from The California Endowment and the Public Health Institute.