



School wellness policy development, implementation and evaluation

May 2008

Research implications for state school boards association leaders

Studies have provided evidence that poor nutrition and limited physical activity among today's children and youth can negatively impact their physical, social and emotional health, as well as their school attendance, learning and achievement. In addition, childhood overweight and obesity put children and youth at risk for chronic diseases in adulthood.

Schools play a critical role in feeding students, providing opportunities for physical activity and contributing to lifetime health habits. Therefore, implementation and evaluation of school nutrition and physical activity policies play a key role in childhood overweight and obesity prevention.



The wellness policy mandate

Congress passed legislation in 2004 requiring all school districts participating in a federal nutrition program to develop a wellness policy starting in 2006–2007. At a minimum, the policy must include:

- nutrition guidelines for all foods available on campus during the day
- goals for nutrition education, physical activity and other school-based activities
- assurance that the district's guidelines for reimbursable school meals will not be less restrictive than federal regulations
- a plan for measuring the implementation of the wellness policy, including the designation of staff responsible for policy implementation

BACKGROUND

The California School Boards Association and California Project LEAN (Leaders Encouraging Activity and Nutrition) commissioned a national research project to gain a better understanding of the school wellness environment in school districts across the country, and to identify challenges districts face and needs they have in order to effectively implement, monitor and evaluate school wellness policies as mandated by federal law. Over 2,900 individuals participated in online surveys, focus groups and key informant interviews.

This research brief is one of a series of three briefs that use the findings from the 2007 research report, *School Wellness Policy Development, Implementation, and Evaluation: Perceptions, Barriers and Opportunities*, to inform action steps tailored to each of the key audiences targeted in the study:

- school board members (SBMs)
- state school boards association leaders (SSBALs)
- state public health nutrition directors (SPHNDs) and school wellness advocates (SWAs)

School board members are elected to provide direction, oversight and accountability for school wellness policy development, implementation, monitoring and evaluation.

State school boards association leaders work in member-driven organizations that support school board members, superintendents and senior administrative staff in their complex leadership role.

State public health nutrition directors reside in state health departments and provide leadership on nutrition policy and programs.

School wellness advocates are Action for Healthy Kids state team members engaged in improving nutrition and physical activity opportunities through a healthy school environment.

METHODOLOGY

This brief highlights key findings from SSBALs. An online survey was fielded to 190 leaders at school boards associations in 50 states and the District of Columbia. The survey yielded 87 responses for a response rate of 46%, representing 48 (94%) of the associations. The survey respondents included executive directors and presidents (46%), policy/government services directors (26%), communications directors (13%) and attorneys, trainers and other association staff (15%). Most respondents (73%) have worked for their state associations for six or more years.

In addition, during a national conference of policy directors from state school boards associations, two focus group meetings were held (total of 10 participants representing nine associations) along with four facilitated roundtable discussions (approximately 50 participants total).

RESULTS

Involvement in school wellness policies

Nearly all (91%) of the SSBALs in the study report some type of involvement with the wellness mandate, primarily by:

- researching the issue (63%)
- disseminating articles and information (51%)
- drafting sample policy language (50%)
- developing resources for districts (38%)

Over a third (37%) have attended a policy training session. SSBALs have assisted districts on wellness

issues by providing ad hoc support to districts (33%), providing district policy development (23%) and conducting policy training sessions (20%).

Perceptions of the school wellness environment

There is a prevailing belief that school wellness policies will have positive impacts, primarily on students' access to healthy foods at schools, healthy eating habits and physical activity levels. However, SSBALs were often the least optimistic among the survey groups regarding the positive impacts of wellness policies. For example, they were the least likely to believe that wellness policies will have "a lot" of positive impact on student academic achievement (12% compared to 23% of SBMs, 30% of SWAs and 35% of SPHNDs). They also were the least likely to believe that wellness policies will have "a lot" of positive impact on the prevalence of student overweight and obesity, improved long-term health status of students (including rates of diabetes, cancer and heart disease), family/parent support for school wellness, and student satisfaction with the school environment.

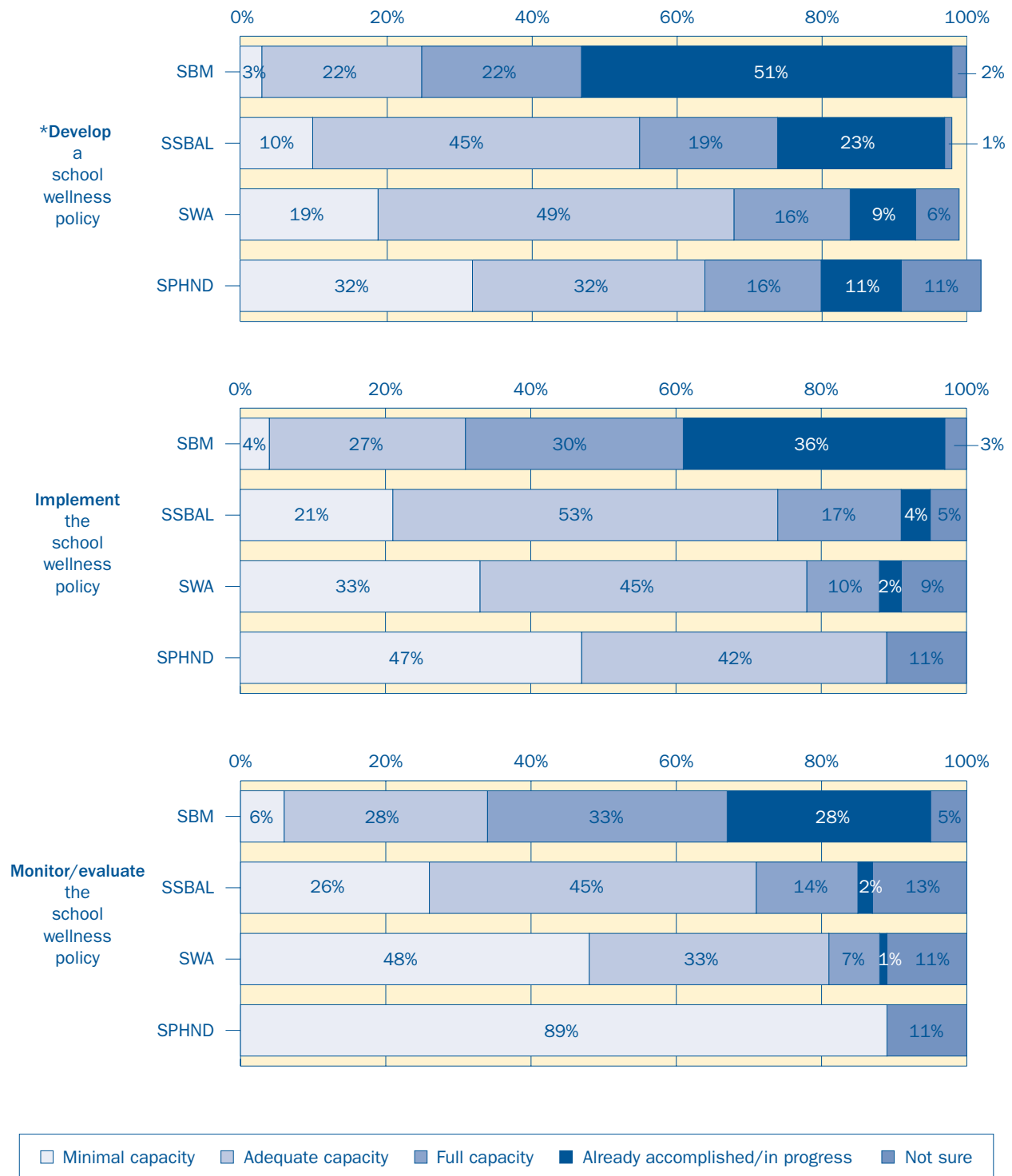
Policy development, implementation and evaluation

Disparities among survey groups were evident in perceptions of policy development, implementation and evaluation. SSBALs were in the middle in terms of their level of confidence that districts' **policy review and development process reflects best practices**: 26% are "very confident" that the process reflects best practices (compared to 46% of SBMs, 12% of SWAs and 5% of SPHNDs).

When asked the extent to which school districts have the **capacity to develop, implement and monitor/evaluate the wellness policy**, SSBALs again expressed less confidence than SBMs but considerably greater confidence than SWAs and SPHNDs (see Table 1). SSBALs are less concerned about districts' capacity to develop the policy than to implement or evaluate it (10%, 21% and 26% saying the majority of districts in their state have "minimal capacity" to develop, implement and evaluate the policy, respectively).

There are similar patterns in perceptions concerning the likelihood that districts will **actually implement and monitor/evaluate the wellness policy effectively**. Nearly a third of SSBALs (32%) believe that the majority of districts in their state are "very likely" to accomplish the goal of effective implementation (compared to 65% of SBMs, 14% of SWAs and 12% of SPHNDs). Monitoring/evaluation was perceived as more problematic, with 19% of SSBALs believing that the majority of districts are "very likely" to effectively monitor/evaluate the wellness policy (compared to 55% of SBMs, 6% of SWAs and 6% of SPHNDs).

Table 1: Perception of school district capacity



SBM = School board members
 SSBAL = State school boards association leaders
 SWA = School wellness advocates
 SPHND = State public health nutrition directors

Note: School board members answered on behalf of their districts; all others answered on behalf of "the majority of districts in the state."

**Due to rounding, the percentages may equal more than 100%.*

Perceived barriers

SSBALs and SBMs were asked to rank barriers to effective policy development, implementation and monitoring/evaluation on a scale of 1 to 5, with 1 = Not a Challenge and 5 = Major Challenge. The results showed general agreement on the conditions that represent barriers. However, in almost all cases, the magnitude of the challenge was viewed as more daunting by SSBALs than by SBMs.

The four most significant barriers identified by both groups included:

- 1. Inadequate funding.** Funding was the number one concern cited by SSBALs and SBMs (average rankings of 4.4 and 3.4, respectively). Fiscal concerns include the need for additional staff and facilities to carry out the wellness plan, as well as the loss of funding or increased costs as a result of healthier vending, improving food options generally and fundraising policies.
- 2. Competing priorities/lack of time.** Ranked 4.2 by SSBALs and 3.4 by SBMs, the second most significant concern involves competition with other priorities and mandates, teacher contract restrictions and inadequate time for physical education classes.
- 3. Lack of support from students, parents and community.** Both SSBALs and SBMs cited the need to educate and gain the support of students (rankings of 3.5 and 3.1, respectively), parents/caregivers (3.3 and 2.9) and the community (3.1 and 2.6). It was considered less of a problem to gain the support of school board members, district administrators, school administrators or school staff.
- 4. Need for tools and training.** There is a perceived need for additional tools and training to support those responsible for policy development (ranked 3.1 by SSBALs and 2.8 by SBMs) and those responsible for compliance or policy implementation (3.4 and 2.6).

Training/support for school board members

The data reveal clear opportunities for providing support to districts on wellness-related topics. SBMs expressed interest in training topics related to:

- developing, implementing and monitoring/evaluating the policy
- communicating the policy and building partnerships
- providing staff development and support
- setting nutrition/physical education (PE) standards
- maintaining a school health council/school wellness committee

The topics that rated slightly more valuable than others were:

- mobilizing parent/caregiver involvement
- mobilizing student involvement
- exploring revenue-generating alternatives to the sale of unhealthy foods and beverages
- increasing the understanding of the link between good nutrition, physical activity and student achievement

SBMs prefer in-district workshops as the most favorable format to receive support and training (cited by 78%), followed by printed materials (67%), workshops at state conferences (60%) and online training (51%) (see Table 2).

SBMs also rated the usefulness of policy-related tools in helping school districts. They consider the most useful to be model nutrition standards (cited by 78%), sample board policies (75%), model PE standards (74%), youth engagement tool kit (67%), case studies (62%), communications tool kit (60%), action planning guide (59%), strategies for addressing implementation and monitoring/evaluation challenges (58% each), and partnership/alliance-building guidelines (50%). SSBALs agree that sample board policies, model nutrition standards and model PE standards are useful policy-related tools for helping districts, but have less interest in case studies and communications tools for engaging key audiences.

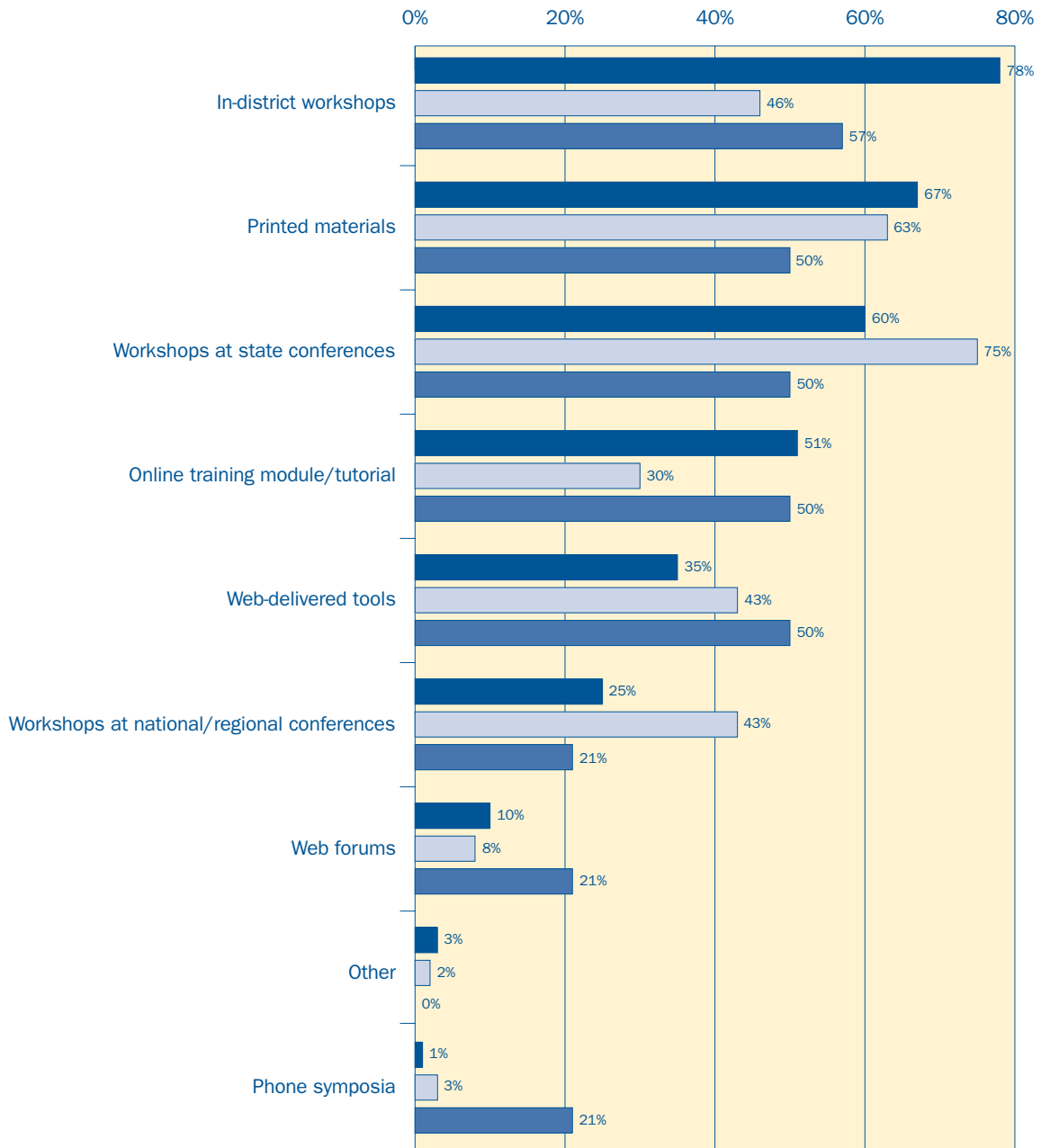
Training/support for state school boards association leaders

SSBALs are interested in providing technical assistance to districts on a variety of wellness-related topics, but most feel they have capacity to train in only one area: development of the wellness policy. The majority said they are interested in but have “limited or no capacity” to provide assistance related to:

- other school-based wellness initiatives, such as staff wellness initiatives or after-school programs (63%)
- increasing understanding of the link between good nutrition, physical activity and student achievement (60%)
- nutrition standards for all foods and beverages available on campus (59%)
- implementing the wellness policy (58%)
- monitoring/evaluating the wellness policy (58%)
- nutrition education (58%)
- physical education/physical activity (56%)
- the development of a school health advisory council or other wellness committee (53%)

Table 2: Preferred training formats

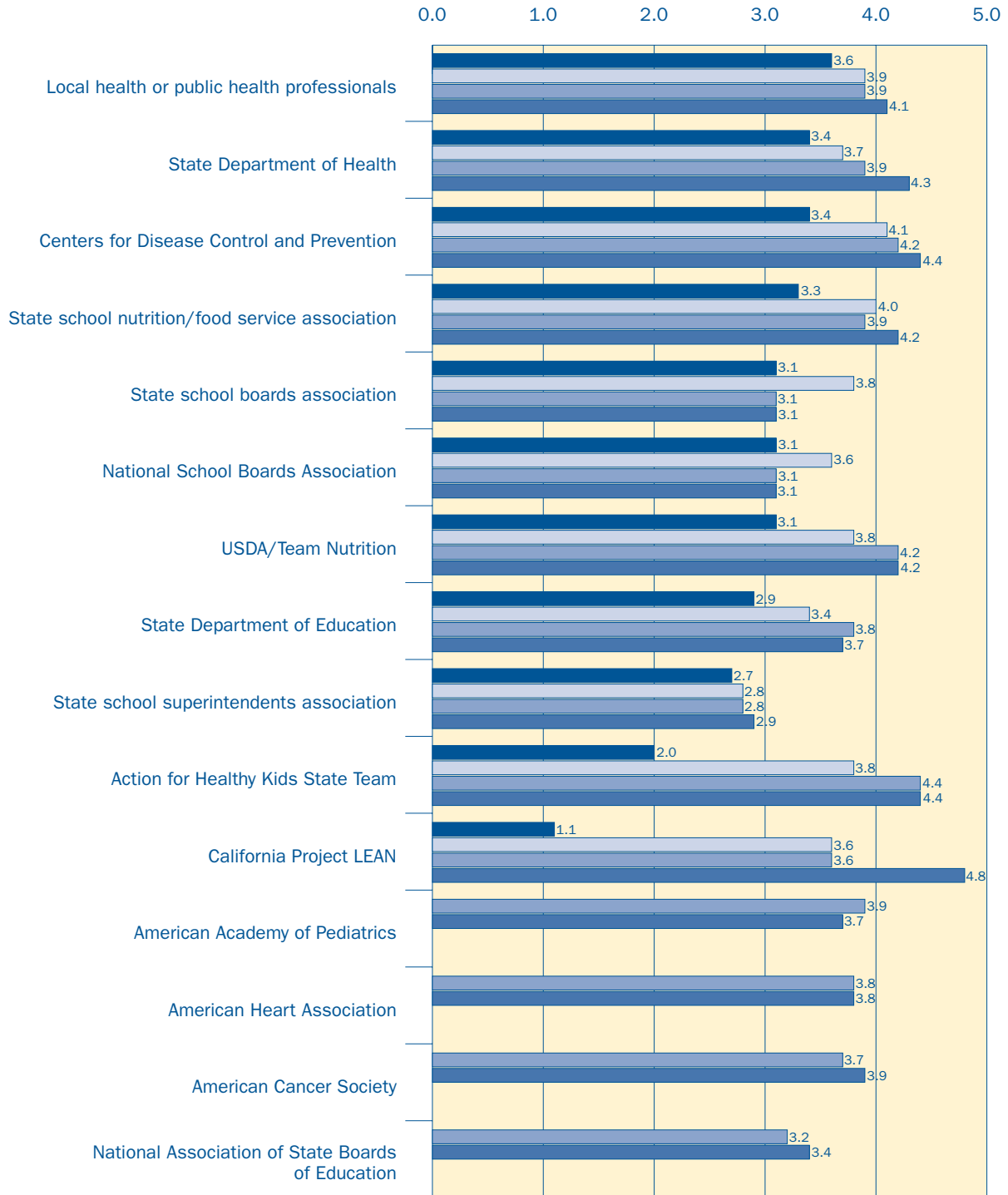
Percentages represent respondents who prefer the training format



■ School board members
 ■ State school boards association leaders
 ■ State public health nutrition directors

Table 3: Credibility of wellness-related technical assistance providers

(1 = Least credible; 5 = Most credible)



SSBALs indicated that the most valuable topic for their own training and/or resources would be monitoring/evaluation of the wellness policy (cited by 67%), followed by other school-based wellness initiatives (56%) and implementation of the wellness policy (50%).

As shown in Table 2, SSBALs prefer to receive training or support through workshops at state conferences (cited by 75%), printed materials (63%), workshops at national or regional conferences (43%) and Web-delivered tools (43%).

Credibility of technical assistance providers

State school boards associations are viewed as credible providers of wellness-related technical assistance by SBMs, SWAs and SPHNDs (see Table 3). On a scale of 1 to 5 (with 1 being the least credible and 5 being the most), all three groups gave an average rating of 3.1 to both the state school boards association and the National School Boards Association. Only slightly higher ranked by SBMs were local health or public health professionals, the state Department of Health, Centers for Disease Control and Prevention and state school nutrition/food service association (ratings from 3.3 to 3.6). These same assistance providers received high rankings from SSBALs, along with USDA/Team Nutrition, Action for Healthy Kids state team, California Project LEAN and the State Department of Education.

ACTION STEPS

The findings of this national study suggest a number of action steps that SSBALs can take to support the school boards in their states:

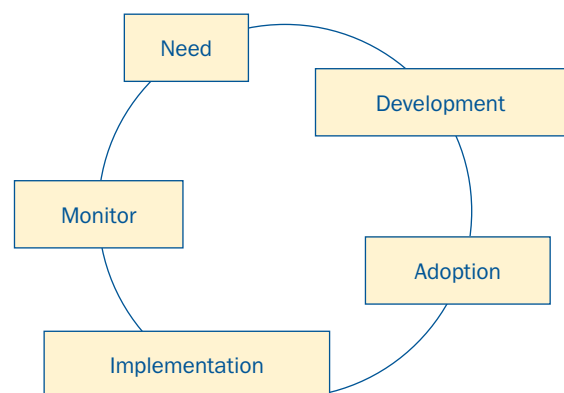
1. Collaborate with credible partners identified by SBMs, including but not limited to federal, state and local public health agencies and state school nutrition/food service associations.
2. Build the association's capacity to provide assistance to districts on wellness issues, particularly the link between nutrition, physical activity and student learning; school-based wellness initiatives; and strategies for implementing and monitoring/evaluating wellness policies.
3. Provide and regularly update sample board policies and administrative regulations to reflect the components of the federal school wellness mandate as well as any state requirements, best practices, and indicators for measuring the implementation and effectiveness of the policy.

4. Provide assistance to districts using in-district workshops, printed materials, workshops at state conferences and online trainings. Focus efforts on priority topics which include:
 - strategies to mobilize student and parent involvement
 - revenue-generating alternatives to the sale of unhealthy foods and beverages
 - information about the link between nutrition, physical activity and student achievement
 - information on the fiscal impact and lessons learned by districts that are implementing wellness initiatives
 - state or federal funding opportunities for additional teachers and staff to carry out the district's wellness plan
5. Provide wellness policy-related tools for:
 - engaging youth
 - highlighting case studies of other districts
 - communicating with key community stakeholders (e.g., sample articles, newsletters, policy briefs)
 - implementing and evaluating wellness policies
 - guiding partnerships and building alliances

LESSONS LEARNED: BUILDING EFFECTIVE PARTNERSHIPS

School boards provide direction, oversight and accountability for school wellness policy development, implementation and monitoring/evaluation. Their role is critical to maintaining momentum and producing effective outcomes. As such, they are an essential stakeholder that needs to be engaged to ensure that the full impact of wellness policies on student health and achievement are realized.

Policy development cycle



CSBA and CPL have a long history of working together through their *Successful Students through Food and Fitness Policies* campaign to increase the adoption and implementation of school nutrition and physical activity policies in California. The strength and role of each organization were pivotal to the success of their efforts. State school boards associations are seen as credible providers of policy expertise, while local and state health departments are seen as content experts on wellness-related issues. The following summarizes lessons learned:

- Partnering with a diverse group of health, education and community stakeholders promotes positive policy and environmental change.
- Mobilizing community efforts results in state policy action.
- Promoting the link between nutrition, physical activity and learning builds school board support.
- Identifying ways to advocate for stronger federal, state and local nutritional standards and increased requirements for physical education and/or health education continues to improve children's and youth's eating and physical activity habits.
- Collaborating on funding proposals adds value.
- Providing opportunities for stakeholders to share successes and challenges increases learning and confidence in adopting similar successes.

RESOURCES

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

Resources available from CSBA include:

Student Wellness: A Healthy Food and Physical Activity Policy Resource Guide offers a step-by-step approach for creating a healthy school environment so students can practice healthy eating and physical activity habits while at school. A joint publication of CSBA and CPL.

Monitoring for Success: Student Wellness Policy Implementation Monitoring Report and Guide addresses the board's responsibility to monitor the implementation of the district's wellness policy.

Nutrition Standards for Schools: Implications for Student Wellness provides information about federal and state nutritional standards and actions that boards can take to support healthy eating in schools.

Physical Education and California Schools describes the board's role in ensuring that students have access to high-quality physical education programs.

Resources available from CPL include:

Reaching School Board Members Guide helps community groups create win-win situations when working with school districts on nutrition and physical activity issues. Available in English and Spanish.

Playing the Policy Game highlights nutrition and physical activity policies in the school and community that teens can pursue with adult guidance. Available in English and Spanish.

Food on the Run: Lessons Learned from a Youth Nutrition and Physical Activity Campaign provides examples of how to work with youth advocates to make healthy eating and physical activity easier to do at their schools.

Captive Kids: Selling Obesity at Schools addresses the issue of marketing unhealthy foods and beverages on school campuses.

Policy in Action: A Guide to Implementing Your Local School Wellness Policy serves as a roadmap for implementing school nutrition and physical activity policies.

FOR FURTHER INFORMATION

The full results of the study are available at:



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www.csba.org

and



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