



Public Schools of North Carolina
State Board of Education
Department of Public Instruction

Report to the Joint Legislative Education Oversight Committee

A Study of K-12 Physical Education

HB 2431 Studies Act of 2008, sec. 25.1

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The North Carolina State Board of Education was directed to study the current status of K-12 Physical Education in the Public Schools. Most of the requested data is currently collected by the Department of Public Instruction through the Annual Reporting of the Healthy Active Children Policy information submitted by the School Health Advisory Councils (SHAC's) of the Local Education Agencies (LEAs) and through the student reported data from the Youth Risk Behavior Survey.

The findings of the K-12 Physical Education Studies Bill were presented to the Joint Legislative Education Oversight Committee on December 2, 2008. A summary of the findings pertaining to the amount of physical education, average physical education class size, BMI research, and health data and monitoring systems were discussed.

The following tables summarize the findings.

Elementary students attending physical education throughout the school year (HAC)

0-30 minutes	1 day per week	16 %
30 minutes – 1 Hour	1 day per week	21 %
30 minutes – 1 Hour	2 days per week	20 %
30 minutes – 1 Hour	3 days per week	12 %
30 minutes – 1 Hour	4 days per week	8 %
30 minutes – 1 Hour	5 days per week	24 %

Middle School students attending physical education throughout the school year (HAC)

Days per week	<1	1	2	3	4	5
Grade 6	1%	3%	8%	32%	15%	42%
Grade 7	1%	1%	10%	31%	15%	42%
Grade 8	1%	2%	10%	29%	16%	43%

In summary, 45% of our LEAs provide 150 minutes of elementary physical education per week while the others vary tremendously. Education LEAs reported that 47% of our schools provide 225 minutes of Healthful Living, while 24% of our middle schools provide 225 minutes of just physical education. The remaining 29% varied widely.

High School (YRBS)

In NC, the percentage of students who attend Physical Education 5 days in an average week during school (YRBS) decreased from 35.0% to 29.0% from 1993 – 2007. In the 9th Grade approximately 44.4% attended 5 days per week of physical education while Grades 10 (28.7%), 11 (20.0%), and 12 (17.7%) decreased significantly. Furthermore, YRBS data show that nearly 71% of students reported they did not attend Physical Education classes daily.

Overall Trend Data (CDC)

To look at the trend data over the years, the Youth Risk Behavior Survey (YRBS) data shows a statistically significant decrease in North Carolina students receiving middle school physical education classes 5 days per week (35% to 29%) between 1993 and 2007.

Class Size

Class size varied at the elementary levels from 20-45. The larger class size usually occurs when elementary schools send two classes to the gym at one time rather than only one.

At the middle school and high school levels, class size also varied from 29-60. The larger class size often occurs when students are placed in physical education classes so as not to overload the regular classrooms.

Alternative maximum Class Sizes – The State Board of Education, at its discretion, may set higher maximum class sizes and daily teaching loads for classes in music, **physical education**, and other similar subjects, *so long as the effectiveness of the instructional programs in those areas is not thereby impaired.* G.S. 115C-301(e)

Body Mass Index (BMI)

In June 2007, a report from the Expert Committee on the Assessment, Prevention, and Treatment of Child and Adolescent Overweight and Obesity stated that from 1980 to 2004, the percentage of youth who were obese tripled from 7% to 19% in children (6-11 years) and 5% to 17% in adolescents (12 – 19 years) Body Mass Index (BMI) is calculated as a ratio of weight to height squared. Little is known regarding outcomes of BMI measurement programs including the effects on weight related knowledge, attitudes of students and behavior of youth and their families. In 2005, the Institute of Medicine called for the development of guidance for BMI measurement in schools with the help of the Centers for Disease Control and Prevention (CDC) and an expert panel. No consensus exists on BMI's utility for screening young people.

To access the Executive Summary of the CDC report, go to www.cdc.gov/healthyyouth/overweight/BMI.

The unfunded mandate to screen North Carolina students was estimated at a cost ranging from \$3-10 Million. Currently the North Carolina Alliance for Athletics, health, Physical Education, Recreation and Dance (NCAAHPERD) has been funded by the Kate B. Reynolds Charitable Trust Fund to conduct BMI screening through the In-school Prevention of Obesity and Disease (IsPOD) program. All North Carolina students will be screened during the program roll out over the next four year period.

More evaluation is needed to determine whether BMI screening programs are a promising approach for addressing obesity among children and adolescents.

Health Assessment and Monitoring Sources

North Carolina has a thorough health assessment and monitoring system in place. An overview of the system and types of data collected is described below.

To fully view all data and summary reports, please go to www.nchealthyschools.org

CHAMP**Child Health Assessment and Monitoring Program***Parents*

CHAMP, by collecting data for young children, will contribute to a seamless health data system for all North Carolina citizens from birth to old age. Questions on the CHAMP survey pertain to a wide variety of health-related topics, including breast feeding, early childhood development, access to health care, oral health, mental health, physical health, nutrition, physical activity, family involvement, and parent opinion on topics such as tobacco and childhood obesity. Collected annually, the CHAMP survey data will help monitor child health status and identify child health problems; will help evaluate child health programs and services; will help health professionals make evidence-based decisions, policies and plans; and will help monitor progress towards selected health targets such as Healthy Carolinians 2010.

YRBSS**Youth Risk Behavior Surveillance System***Students*

The YRBSS monitors priority health-risk behaviors and the prevalence of obesity and asthma among youth and young adults. The YRBSS includes a national school-based survey conducted by the Centers for Disease Control and Prevention (CDC) and state, territorial, tribal, and local surveys conducted by state, territorial, and local education and health agencies and tribal governments.

Profiles**School Health Profiles Report***Principles/
Lead Health
Teachers*

The School Health Profiles Survey (Profiles) is a system of survey assessing school health policies and programs in states and large urban school districts. Profiles surveys are conducted biennially by state and local education and health agencies among middle and high school principals and lead health education teachers.

BRFSS**The Behavioral Risk Factor Surveillance System***Adults*

The Behavioral Risk Factor Surveillance System (BRFSS) is the world's largest, on-going telephone health survey system, tracking health conditions and risk behaviors in the United States yearly since 1984.

Former US Senator William Cohen (Maine) once commented that "It is clear that children must be healthy to be educated and they must be educated to be healthy". North Carolina Public Schools continue to work to address the obesity epidemic through a variety of health and physical education interventions as part of a coordinated School Health Program (CSHP) effort.

HB 2431 – Studies Bill

PART XXV. STATE BOARD OF EDUCATION TO STUDY K-12 PHYSICAL EDUCATION IN THE PUBLIC SCHOOLS (H.B. 2592 – Bell)

SECTION 25.1. The State Board of Education shall study the current status of K-12 physical education in North Carolina. Each local school administrative unit shall collect baseline data at the individual school level and report the baseline data to the Department of Public Instruction for analysis. At a minimum, the baseline data shall include:

- (1) Minutes in physical education on a weekly basis throughout the school year for every school.
- (2) Number of physical education classes per week throughout the school year for every school.
- (3) Average physical education class size for every school.
- (4) Student Body Mass Index (BMI) data for a statistically valid random sample of students of various ages from all 100 counties.
- (5) Nutrition and physical activity knowledge and behaviors of the same random sample of students.

The baseline BMI data shall not be self-reported by students or parents but shall be collected by a trained professional such as a school nurse or physical education teacher. The data shall be compiled in a single, statewide, publicly accessible database hosted by an entity approved by the Department of Public Instruction. Ideally, the data will be made available in a manner that can be sorted by individual school, local school administrative unit, and county. Local school administrative units shall seek guidance from the Department of Public Instruction in determining the appropriate sample size for the BMI data.

The State Board of Education shall report the findings of the study to the Joint Legislative Education Oversight Committee on or before December 1, 2008.