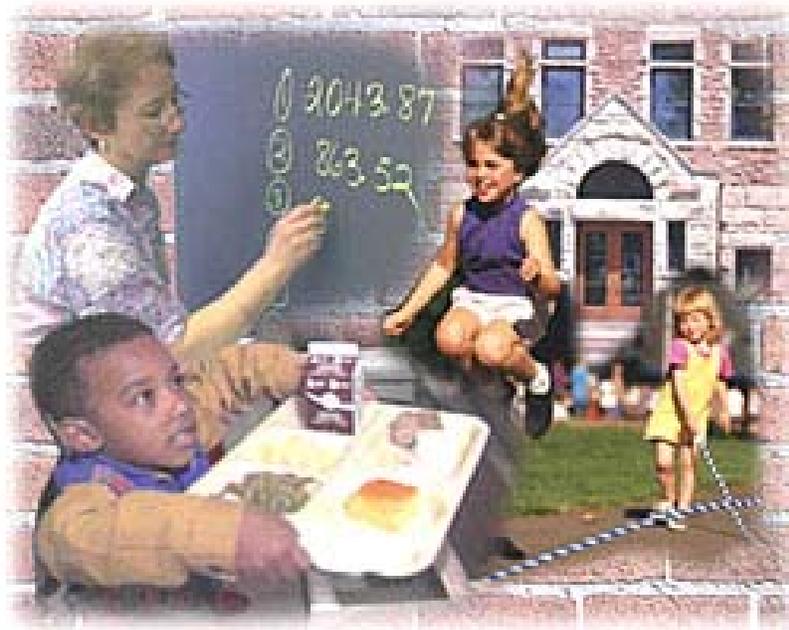


FINAL REPORT

COMMITTEE MEETING SEPTEMBER 7, 2004

Joint Committee of the Board of Education and Board of Health



Contents:

Report with Recommendations	page 1
Appendix A: Body Mass Index Growth Charts	page 12
Appendix B: USDA Nutrition Standards for School Meals	page 13
Appendix C: Local Physical Activity and Nutrition Initiatives	page 14
Appendix D: Annual Fitness Assessment	page 35
Appendix E: Nutrition Standards-Virginia Action for Healthy Kids	page 37
Appendix F: Suggested Snack Items.....	page 43

Report from the Joint Committee of the Board of Education and the Board of Health

TASK: to study the feasibility of developing an education curriculum for proper nutrition and exercise for students in grades K-12, and to examine a series of broader issues pertaining to the nutrition and physical activity levels of K-12 students.

JOINT COMMITTEE MEMBERS:

CURRENT MEMBERS:

Board of Education –

- Scott Goodman
- David Johnson

Board of Health-

- Julie Beales, MD.
- Dick Grinnan, MD
- Craig Reed, DVM

PAST MEMBERS

Board of Education –

- Susan Genovese

Board of Health-

- Sheila Elliott, Pharm D
- Hunter Gaunt, Jr. MD

BACKGROUND:

- 1) **Obesity and Overweight Among Children** – The prevalence of childhood obesity, a preventable condition, has been documented in the medical literature and is becoming an increasingly frequent public policy issue. Obesity in children is measured using the Body Mass Index (BMI), a calculation of weight based on a child's height, age, and gender. In children, BMI is plotted on a growth chart (Appendix A) that compares an individual's BMI against all other children of the same gender and age. The term 'obese' is usually, not used for children. Instead, children with a BMI at or above the 95th percentile are defined as 'overweight.' Children with a BMI from the 85th to 95th percentile for gender and age are defined as 'at-risk for overweight.' Recent research by the Center for Disease Control and Prevention (CDC) indicates that 15 percent of children and adolescents age 6 – 19 are overweight (i.e., 'obese'). Childhood rates for overweight and at-risk for overweight have nearly tripled in the past thirty years and are continuing to rise. It is estimated that more than 300,000 Virginia children and adolescents, between the ages of 6 and 19, are either overweight or at-risk for overweight. This problem has severe implications for the health and well-being of children and youth living in Virginia. For example, being overweight or obese increases a child's risk of developing coronary artery disease, Type 2 diabetes, and other chronic conditions (even in childhood). If the trend of increasing obesity is not reversed, the gains in life expectancy and quality of life resulting from modern medicine's advances on disease will erode, and more health-related costs will burden the nation's health care system. One recent study has estimated the annual obesity-attributable medical expenses in the U.S. to be \$75 billion, with approximately one-half of those expenses financed by Medicare and Medicaid. This same study estimated Virginia's annual obesity attributable medical expenses to be \$1.6 billion, with \$374 million incurred by the Medicaid population (*Obesity Research*, Vol. 12, No. 1, January 2004). Science and medical professionals now suggest that this may be the first generation in history where parents outlive their children.

Fundamentally, obesity represents an imbalance between energy intake (e.g., caloric intake) and energy output (expended both as physical activity and metabolic activity). According to a March 2004 report by the U.S. Food and Drug Administration (FDA), "For maintenance of a healthy body weight it is the consumption and expenditure of calories that is most important." In other words, to maintain a constant body weight over time, "energy in" from food must equal "energy out" as a result of resting metabolism plus physical activity.

Physically active children have a greater chance of being healthy for a lifetime. The lack of physical activity and appropriate nutrition in children has serious consequences. A school environment that focuses on nutrition education, good nutrition and physical education provides the opportunity for students to make personal choices from healthy food options in the school dining area and throughout the school and for physical activity that is fun. By providing these opportunities, lifestyle choices are taught not only in the classroom, but also in the environment students experience each school day.

In 2003, the Virginia Commission on Youth (COY) published a report on childhood obesity. This report addressed the problem of obesity among children and adolescents in Virginia. In it, they concluded "Because young people spend the majority of their time in schools, educational institutions have a unique opportunity to encourage, motivate and promote healthy choices among school-age children." The COY report further stated, "An investment in health is an investment in better academic performance. When children's basic

nutritional and fitness needs are met, they have the cognitive energy to learn and achieve.” Since the greatest portion of a child’s day is spent in the school environment, schools are in a strong position to impact children’s nutritional and physical activity habits and reduce the proliferation of childhood obesity.

As the recent FDA report stated, the problem of obesity has no single cause. Rather, it is the result of numerous factors acting together over time. Similarly, there will be no single solution; obesity will be brought under control only as a result of numerous, coordinated, complementary efforts from a variety of sectors of society, including the health care system and the educational system. Nor can this problem be solved quickly. Any long-lasting reversal of this phenomenon will itself be a long-term process.

Many national organizations including the National Governors Association (NGA), the U.S. Surgeon General, the Centers for Disease Control and Prevention (CDC), the U.S. Department of Agriculture (USDA), the U.S Food and Drug Administration (FDA), the National Academy of State Health Policy, and the National Association of State Boards of Education have recently examined issues surrounding obesity and overweight, and have offered numerous recommendations and best practices for state policymakers.

The Child Nutrition and WIC Reauthorization Act of 2004, signed into law on June 30, 2004 (PL 108-265) includes important steps to promote comprehensive solutions to child health and nutrition, including provisions to promote nutritional education and physical activity at the State and local level. Section 204 of this public law requires Local Education Agencies (LEA) participating in the school meals programs to establish local wellness policies by 2006 with: (1) goals for nutrition education, physical activity, and other school-based activities; (2) nutrition guidelines for all foods sold on school campus during the school day in order to promote health and reduce obesity; (3) a plan to ensure policy implementation, including designating persons with operational responsibility; (4) involvement of parents, students, and representatives of the local school, school board, school administrators, and public.

- 2) ***Curriculum Development*** – A well-designed, effective nutrition and physical education educational program of studies is one means of addressing childhood obesity in the schools. Curriculum development for all subject areas has always been the responsibility of local school divisions. To assist school divisions with curriculum development, the Virginia Department of Education (VDOE) provides guidance in the form of Technical Assistance Guides, such as the ones developed for the Physical Education and Health Education Standards of Learning. Additionally, other organizations such as Virginia Action for Healthy Kids (VAHK), USDA Team Nutrition, Produce for Better Health, and others have developed resources to assist schools in developing specific lesson plans and curriculum related to nutrition, health education and physical education. With the number of resources available, local school divisions have the tools necessary to develop curriculum that promote effective instruction in nutrition and physical education. Many school divisions already have developed such curriculum. Furthermore, the VDOE and Virginia Department of Health (VDH) are also developing a web-based central database of nutrition, health, and physical education resources, educational materials and/or links to the appropriate web sites to serve as a clearinghouse of teaching resources. This central database, preserves precious instructional time that would be lost if teachers needed to search for the resources to plan meaningful lessons on nutrition, health or physical education.

- 3) **Impact of Health Issues on Academic Achievement** – Nutrition and Physical Activity are essential for students to achieve their full academic potential. A healthy school environment is one where nutrition and physical activity are taught and supported in the classroom, the dining room, and throughout the school. This environment provides positive messages that help students develop healthy eating and physical activity habits.

a) **Physical Activity**

Physical activity helps students acquire the knowledge, processes, and skills needed to engage in meaningful physical activity for a lifetime. Participating regularly in physical activity will lead to personal enjoyment, challenge, satisfaction, and health-enhancing level of personal fitness. Physical activity has numerous health benefits including: building and maintaining healthy bones, muscles, and joints; helping to control weight; building lean muscle and reducing fat; preventing or delaying the development of high blood pressure; and reducing the risk of dying from heart disease, colon cancer, and diabetes.

In accordance with the Code of Virginia 22.1-207 Health and Physical Education (H & PE) “...shall be emphasized throughout the public school curriculum by lessons, drills and physical exercise, and all pupils in the public elementary, middle and high school shall receive as part of the educational program such health instruction and physical training as shall be prescribed by the Board of Education and approved by the State Board of Health”

The basic standards for H & PE instruction outlined in § 22.1-253.13.1 state that “Local school boards shall develop and implement a program of instruction for grades K through 12 that emphasizes reading, writing, speaking, mathematical concepts and computations... **health and physical education...**”

The Code of Virginia and the Virginia Administrative Code (VAC) specifically address the requirements for Health and Physical Education and outlines the Board of Education’s Standards of Accreditation (SOA).

- **Elementary grades** --H & PE is required to be taught in the elementary grades of every public school (§ 22.1-200). “Each elementary school shall provide each student a program of instruction which corresponds to the Standards of Learning (SOLs) for English, Math... and **physical education and health**, and shall provide students with a daily recess during the regular school day...” (8VAC 20-131-80)
- **Middle schools** -- “The middle school shall provide each student a program of instruction which corresponds to the SOL for English, Math... In addition each school shall provide instruction in art, music...**physical education and health**, and... (8VAC20-131.90). H & PE is one of four elective courses eighth grade students may take to meet their eight course minimum requirements.
- **High School** – High school students are required to complete two H&PE credits for graduation. (8 VAC 20-131-50)

In Virginia’s public schools, the Physical Education SOLs identify concepts, processes, and skills for physical education in kindergarten through tenth grade (K-10). The intent of physical education is to help students learn the skills necessary for performing a variety of physical activities and understand the benefits of achieving and maintaining a physically active lifestyle. The five strands for physical education SOLs are (1) Skillful Movement, (2) Movement Principles and Concepts, (3) Personal Fitness, (4) Responsible Behaviors, and (5) Physically Active Lifestyle. Standards of Learning in each strand are taught in progression from grade level to grade level.

To achieve the “personal fitness” strand of the SOL, the VDOE has developed protocols for PE teachers to use in fitness testing of students. These protocols are outlined in the Virginia Wellness-Related Fitness Testing (VWRFT) program manual (available on the VDOE web site). The VWRFT is designed to evaluate and provide baseline fitness data for Virginia’s students. The fitness assessment can then be used as a basis for designing a personal, individualized fitness development program for each student. The four major components of the wellness-related fitness test are (1) aerobic capacity (cardio-respiratory endurance), (2) muscular strength and endurance, (3) flexibility, and (4) body composition (i.e. skin fold measurements, or calculation of Body Mass Index [BMI] using a student’s height and weight).

Prior to 1998, the VWRFT was mandatory for all local school divisions. However, as a result of Superintendent’s Memo No. 22 dated May 15, 1998, administration of the VWRFT was made voluntary. Nevertheless, local school divisions have continued to administer the VWRFT as part of their physical education program of study. Although body composition is a vital component of wellness-related fitness, this is not required in the VWRFT due to the sensitive assessment issues surrounding this component. The analysis of body composition is a local option. Students in the 11th and/or 12th grades who elect to take a physical education course will participate in the VWRFT and be tested accordingly.

Until 1998, VDOE collected aggregate physical fitness data from each school. This data was reported on the Outcome Accountability Project (OAP), the precursor of today’s School Performance Report Card. When the new School Performance Report Card was approved by the BOE and implemented (1998), it did not include fitness data. The requirement to report this information to the VDOE was eliminated at that time, however, many schools (~50-60%) continue to voluntarily collect and report this data.

The VDOE has developed a web-based application that is being pilot tested by several local school divisions. This web site allows schools to enter the VWRFT data, generate aggregate data for school fitness profiles, and has the capability of providing a student with an individualized personal fitness assessment along with general educational guidance for improving or enhancing the fitness level. Additionally, this site will also provide aggregate data for the overall school division. A secure password protected system maintains student confidentiality. (See Appendix D).

b) Nutrition

Proper nutrition has a major impact on children’s health, their ability to learn, and their potential for becoming healthy and productive adults. The School Nutrition Programs [National School Lunch Program (NSLP), the School Breakfast Program (SBP), and the Afterschool Snack Program (ASP)] are a crucial part of the educational system. Since the inception of the National School Lunch Program in 1946, its primary goal has been to “... *Safeguard the health and well-being of our nation’s children*” School meals make an important contribution to the nutrition of school-aged children.

Meals planned under the NSLP and SBP must meet the nutrition standards established by the federal government. These standards are based on the scientifically established Recommended Dietary Allowances (RDA) for calories and key nutrients (protein, calcium, iron, vitamins A & C) for specific age groups and the Dietary Guidelines for Americans.

Studies show that students who eat a school lunch exceed the RDAs for key nutrients, at both lunch and over 24 hours; have substantially lower intakes of added sugars; are more likely to consume vegetables, milk and milk products, meat and other protein-rich foods, and also consume less soda and/or fruit drinks. Students who eat school breakfast have higher intakes of food energy, calcium, phosphorous, and vitamin C. Studies confirm what parents and teachers have said for years - hungry children cannot learn.

Appendix B summarizes the Nutrition Standards for School Meals. These nutrient standards are meant to apply to the overall diet and menu plan over a period of time, not just one food or meal.

All foods and beverages available at school should make a positive contribution to the overall diets of children. Nutritious and appealing foods should be available whenever and wherever food is sold or otherwise offered at school.

Food or beverage items sold in the school cafeteria that are not part of the meals that qualify for federal reimbursement under the NSLP or SBP, are referred to as “a la carte” items. These may be individual menu items (i.e., grilled chicken sandwich) or “snack” items (i.e. cookies). A la carte items must comply with minimum nutrition standards established by state and federal regulations. States may develop standards that exceed the federal standards. In Virginia, a la carte food or beverage items must be a recognized component of the planned menu, or must contain a minimum of 5% of the Reference Daily Intake (RDI), per serving or per 100 calories, of one of eight essential nutrients. The eight nutrients are: iron, protein, calcium, vitamin A, vitamin C, niacin, thiamine or riboflavin. Food and beverage items that do not meet these minimum nutrition standards are considered foods of minimal nutritional value (FMNV) and may not be sold in the cafeteria during the operation of the NSLP and/or SBP.

Foods or beverages sold or otherwise offered to students outside the operation of the NSLP or the SBP are considered “competitive foods” as defined in the federal regulations. (7CFR 210). These include foods and beverages offered in school stores, vending machines, school fundraisers, classroom parties, etc. Currently, no federal or Virginia-specific nutrition standards apply to these items.

Although there are no established nutrition standards covering foods and beverages offered outside of the NSLP or SBP, Virginia regulations do prohibit the sale of FMNV, anywhere in a school from 6:00 A.M. until the end of the scheduled breakfast period and from the beginning of the first scheduled lunch period to the end of the last scheduled lunch period.

Schools influence children’s lifelong eating habits. Establishing nutrition standards for foods and beverages available anywhere on the school campus provides students with a consistent message about healthy eating.

INFORMATION GATHERING: Staff from VDOE and VDH, as well as from local school divisions and local health departments, made a series of presentations during meetings held from January to March. The presentations addressed childhood obesity as a public health concern, and how it can be prevented; federal and state regulations governing the NSLP and SBP; school nutrition standards in Virginia and other states; the curriculum resource development process; current efforts of local school divisions to promote healthy eating and increased physical activity; children’s books with positive food and nutrition messages; regulations for health and physical education programs; and physical education staff development.

Many school divisions already acknowledge the importance of proactively addressing nutrition and physical activity and have begun many local initiatives. Appendix C describes local initiatives from a small sampling of school divisions. The Joint Committee was cognizant of these local efforts to promote proper nutrition and physical activity as it developed its own recommendations.

From April to July 2004 the committee met monthly to formulate recommendations and to develop and review this report.

COMMITTEE RECOMMENDATIONS: The information gathered during committee meetings serves as the basis for the recommendations of this committee. A draft report was written, reviewed and revised by the Joint Committee during April through July 2004. This report provides an overview and synopsis of recommendations. Following review and final approval of the Joint Committee’s report by the Board of Health (BOH) and Board of Education (BOE), detailed strategies, implementation plans, and timelines will be developed. Recommendations would be presented to school divisions as “Guidelines” for use in developing their local Wellness policies.

The joint committee recognizes and acknowledges that educating students in the sound principles of nutrition, health and physical activity at an early age is essential for them to develop life-long healthful habits that will assist them in becoming productive, self-reliant and healthy citizens. As described in the report from the Virginia Commission on Youth “...*Because young people spend the majority of their time in schools, educational institutions have a unique opportunity to encourage, motivate and promote healthy choices among school-age children*”. While food consumption and physical activity at school is only one component of a student’s overall dietary intake and physical activity, schools should be the educational model to set the best possible example for children to learn about healthy choices and proper physical activity.

The joint committee’s recommendations are as follows:

- 1) **Developing Curriculum** for proper nutrition and physical education should continue to be the responsibility of local school divisions with guidance and technical assistance provided by VDOE with consultation from VDH.
- 2) **Establish State Guidelines** for school divisions to use in developing a Nutrition and Physical Activity Policy at the local level. These state guidelines would establish the following goals for school divisions:
 - a) Integrate nutrition, health and physical education concepts into core curriculum areas such as math, science, history/social studies, and language arts. These concepts would

emphasize physical activities and skills that can be utilized over an individual's lifespan. This would provide students with the foundation upon which to develop lifelong healthy eating and physical activity behaviors.

- b) Strive to provide daily health and physical education.
- c) Evenly divide the percentage of instructional time between health instruction and physical education for all health and physical education courses.
- d) Incorporate physical activity during recess and strive for 30 minutes of daily recess. Recess should not to be taken away for disciplinary action.
- e) Incorporate agricultural education programs in schools, within the current SOL framework, such as the USDA funded Farm to School program and school gardening programs.
- f) As part of their role advising school divisions on all facets of coordinated school health, encourage the existing School Health Advisory Boards (SHABs) to establish and report on benchmarks to improve nutrition, health education, and physical activity in their school divisions.
- g) Include and recognize the school nutrition staff as part of the education team and include them in decision-making that affects the school nutrition environment.
- h) Encourage all schools to participate in the federally funded National School Lunch Program (NSLP), the School Breakfast Program (SBP) and the Afterschool Snack Program. (Note: only 1.5% the schools do not participate in the NSLP/SBP representing 6% of the School Divisions)
- i) Schedule all meal periods at appropriate times, and provide adequate time for students to eat meals after having received their food.
- j) Limit fund raising activities to non-food items (or only those food items that meet the established nutrition standards).
- k) Educate family members through active involvement with the Parent-Teacher Associations (PTA), about the role of nutrition and physical activity on student academic achievement. Encourage parents to make a positive contribution by providing healthy food choices for lunches brought from home, and for celebrations and parties.
- l) Encourage school staff to use non-food items as a reward for students.
- m) Actively market and promote healthy eating and physical activity to students, parents, teachers, administrators, and the community with positive, motivating messages throughout the school setting.
- n) Recommend the BOE evaluate the feasibility of requiring physical education daily.

- o) Recommend the aggregate fitness data currently collected by each school be reported to VDOE and incorporated into the School Performance Report Card. The data collection process would follow the Virginia Wellness-Related Fitness Testing protocols already being used in Virginia Public schools as described on page 4. Recommend that measurements of heights and weights be added to this data collection process. (now optional for local schools)
- p) Encourage School Divisions to use the nutrition guidelines as outlined below to develop their local “wellness” policies as required by Public Law 108-265, Section 204 (the Child Nutrition and WIC Reauthorization Act of 2004- see page 2). Alternatively, the nutrition guidelines developed by Virginia Action for Healthy Kids (VAFHK) and previously sent to the Superintendents by Lisa Collis, the First Lady and the honorary chair of VAFHK (Appendix E), may also be used as a template for school divisions to incorporate into their wellness policies.

The nutrition standards should apply to all foods and beverages available anywhere on the school campus. These nutrition standards are intended to supplement federal policies governing the school meals programs (NSLP SBP and ASP) defined by the USDA’s Food and Nutrition Services. The USDA nutrition standards for school meals are grade and age specific, and are explained in detailed in Appendix B.

The nutrition standards should include, as a minimum the following:

- ◆ A variety of nutritious, appealing, and culturally appropriate foods and beverages shall be available to all students. Offering items with lower calorie, fat, and sugar content will contribute to a healthier diet for students in K-12. High calorie, low nutrient items shall be limited by access and/or portion size. Schools shall follow the Dietary Guidelines for Americans (DGA);
 - (1) Offer whole and enriched grain products that are high in fiber, low in added fats and sugars, and served in appropriate portion sizes that are consistent with the current USDA standards.
 - (2) Offer fresh, frozen, canned, or dried fruits and vegetables using healthy food preparation techniques.
 - (3) Offer nonfat, low-fat plain, and/or flavored dairy products (milk, yogurt, cheese) consistent with the current USDA standards.
 - (4) Beverages should contain at least 25% fruit juice with no added sweeteners; soft drinks, sport drinks, punch, other juice drinks containing less than 25% real fruit juice and beverages that contain caffeine (except chocolate milk) and carbonated beverages (including flavored and unflavored sparkling waters) should not be available to students during the school day (6AM until the end of the last instructional period).
 - (5) Snack items and sweets should be limited to those with no more than 300 kcal per item, less than 30% of total calories from fat and 10% of calories from saturated fat (except nuts and seeds); or more than 35% of sugar by weight (except fresh, dried, or canned fruits and vegetables without additional sweeteners).
- ◆ Appendix F contains suggestions for items to be used for snacks
- ◆ Nutrition standards shall apply to all schools, including those schools that do not participate in the National School Lunch or School Breakfast Programs.
- ◆ Responsibility for monitoring compliance with the nutrition standards shall be established

- 3) **Establish a Mechanism for State Level Evaluations and Technical Assistance.** Technical assistance, training and guidance for local school divisions are essential. Monitoring and assessing successful implementation and success in achieving behavioral changes is also important. While the VDOE provides technical assistance and monitoring on a regular basis, strategies for this recommendation must include at a minimum:
- a) Technical Assistance
 - ◆ DOE, in collaboration and consultation with VDH, shall provide guidance to all school divisions regarding the implementation of the guidelines provided.
 - ◆ Develop a Web-based curricula resource for nutrition, health education and physical education to provide a central database to assist teachers. This would offer the same quality of curricula support as is provided for the core instructional subjects.
 - ◆ Review and revise, as needed, the Virginia School Health Guidelines to enhance the nutrition and physical activity components. The revised guidelines would continue to reflect the components of the Coordinated School Health Model to ensure a multidisciplinary approach.
 - b) Assessment
 - ◆ Recommend that the Department of Medical Assistance Services analyze Virginia Medicaid data regularly to better estimate Virginia-specific obesity-related health care costs.
 - ◆ VDOE, with consultation from VDH, will survey schools twelve months after the issuance of state guidelines (via a Joint Memorandum from the Superintendent of Public Instruction and the State Health Commissioner) to monitor progress toward implementation. The survey will be developed and administered pursuant to an assessment plan to be developed by VDOE with consultation from VDH. Survey findings will be reported to the BOE and BOH within one year of when the recommendations and policies are published and disseminated to the schools. The findings will help determine the next course of action (i.e., policy development, regulatory changes, legislative changes, etc.).
- 4) **Continue Collaboration between the Departments of Education and Health** on issues concerning the health of the school age population, with a focus on developing school-based strategies for preventing childhood obesity. Many of the issues surrounding the nutrition and physical fitness of Virginia's public school students are rather complex, and potentially affect numerous influential stakeholders. The Boards of Health and Education have worked collaboratively in the past. For example, in 1987 the Secretary of Health and Human Resources' Task Force on the Health Needs of School-Age Children recommended that the Board of Health and Board of Education should hold an annual meeting to discuss school health services. The BOH and BOE look forward to continuing to have a close relationship to better the lives of Virginia's children. Collaboration among state agencies is crucial to prevent duplication of efforts and to assure efficient and effective use of limited resources toward a common goal. Collaboration among all disciplines at the local level is also essential.

The following Statewide and local collaborative efforts are recommended:

- a) Continue the Joint Committee beyond 2004 to address ongoing issues related to the health and well being of Virginia's children.

- b) Recommend the establishment of a Governor’s Council on Physical Fitness and Sports with an emphasis on encouraging better eating habits and physical activity. The council should incorporate a recognition or incentive program for schools and other community groups that demonstrate best practices in promoting healthy lifestyle changes and obesity prevention.
- c) Encourage schools to consult with local health departments as an additional resource on issues related to nutrition, health education and physical activity.
- d) Encourage schools to collaborate within the school itself to establish multidisciplinary teams and enroll in USDA’s ‘Team Nutrition’ program.

FUTURE ACTIVITIES –The Joint Committee will forward this final report to the full membership of their respective Boards for review and further action.

APPENDIX B: Overview of Federal Nutrition Standards for School Meals

Federal Regulation 7 CFR 210.10 Establishes specific nutritional goals for breakfast and lunches

1. Establishes targets for calories and specific nutrients by age group.
 - Federal Nutrient standards set target goal for: Calories, Protein, Calcium, Iron, Vitamin A, and Vitamin C.
 - School Lunch meal must meet $\frac{1}{3}$ of the RDA for the specified nutrients
 - School Breakfast must meet $\frac{1}{4}$ of the RDAs
 - Must comply with the Dietary Guidelines for Americans

Required Grade Calorie and Nutrient Levels for School Lunch (school week averages)

	Preschool	Grades K-6	Grades 7-12	Option Grades K-3
Energy Allowances (calories)	517	664	825	633
Total fat (g) ³	17 ¹	22 ¹	28 ¹	21 ¹
Total saturated fat (g) ³	6 ²	7 ²	9 ²	7 ²
Protein (g)	7	10	16	9
Calcium (mg)	267	286	400	267
Iron (mg)	3.3	3.5	4.5	3.3
Vitamin A (RE)	150	224	300	200
Vitamin C (mg)	14	15	18	15

¹Total fat not to exceed 30 percent over a school week. ²Saturated fat not to exceed 10 percent over a school week. ³The grams of fat will vary depending on actual level of calories offered.

Required Grade Calorie and Nutrient Levels for School Breakfast (school week averages)

	Preschool	Grades K-12	Option Grades 7-12
Energy Allowances (calories)	388	554	618
Total fat (g) ³	13 ¹	18 ¹	21 ¹
Total saturated fat (g) ³	4 ²	6 ²	7 ²
Protein (g)	5	10	12
Calcium (mg)	200	257	300
Iron (mg)	2.5	3.0	3.4
Vitamin A (RE)	113	197	225
Vitamin C (mg)	11	13	14

¹Total fat not to exceed 30 percent over a school week. ²Saturated fat not to exceed 10 percent over a school week. ³The grams of fat will vary depending on actual level of calories offered.

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Albemarle County

Physical Activity Initiatives

Cycling: Greer Elementary, Baker-Butler Elementary. Both schools received a set of grant-funded bicycles, helmets, and storage shed to incorporate cycling and bike safety into the PE curriculum.

Individual Fitness: Greer Elementary conducted a series of exercise challenges throughout the school year including Families in Training (FIT) for students/families and Jump Rope for Heart. The same school conducted a bike safety awareness and bike rodeo coordinated by PE teachers.

Pedometers: B.F. Yancey Elementary School implemented an exercise challenge using pedometers. The entire school population walked and monitored accumulated mileage during PE class every Friday - the class that accumulated the highest number of miles each week received incentives. Overall, students walked a total 1045 miles, increasing their average mileage by 6% between November and February.

This school year, Agnor-Hurt Elementary PE teachers have students wear their pedometers during select activities and record the number of steps they take. Their goal is to increase average number of steps taken by an average of 10% over their baseline.

Nutrition Initiatives

Fruits & Vegetables. B.F. Yancey Elementary School held a 5-month long fruit and vegetable snack challenge during which 91% of the student body participated. 50% of students ate a fresh fruit or vegetable snack at least two-thirds of the school days over the five-month period. To support effort, the school division's Child Nutrition Program sold fresh fruit and bags of mini-carrots for \$.25, a price that is less than other snack items for sale.

At Greer Elementary School, 28% of the student body participated in the school-wide "5-a-Day" challenge. Among participants, 81% met the goal of eating five daily servings of fruit, vegetables or 100% fruit juice for at least ten out of 17 days. To support efforts, the school division's Child Nutrition Program offered free samples of different fresh fruits and vegetables in the cafeteria. Fresh fruits and bags of mini-carrots were sold at cost on the a la carte line (i.e., \$.25 each or lower cost than other snack items). A large percentage of students receive free and reduced lunches.

Low-Fat Milk. Virginia L. Murray Elementary, B.F. Yancey Elementary, Stone-Robinson Elementary, & Agnor-Hurt Elementary. Low-fat milk challenges have been conducted in four elementary schools. All schools preceded their milk challenges with a milk promotions, e.g. students participated in "blind" milk taste-tests; students and faculty had their "milk moustache" photos posted in the cafeteria.

Virginia L. Murray Elementary School saw an overall decline in the percentage of whole and 2% milk units sold from 27.9% in May 2002 to 15.2% in May 2003 and an increase in skim/1% (unflavored) milk from 15.8% in May 2002 to 28% in May 2003.

B.F. Yancey Elementary School saw a decline in the percentage of whole/2% milk units sold from 48.7% in May 2002 to 35.4% in May 2003 and an increase in sales of skim/1% (unflavored) milk from 0% to 14.2%.

Data for Stone-Robinson and Agnor-Hurt Elementary Schools is still being collected; challenges are being implemented this school year.

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Vending machines. System-wide approach. A representative of the Childhood Obesity Task Force was appointed to a committee to develop guidelines for vending machine contents accessible to high school students. The final recommendations were to:

- 1) Limit vending sales of soda and foods of minimal nutritive value (i.e., candies) until after the last class period;
- 2) Competitively price all vending fruit drinks so that those with less fruit juice content cost more;
- 3) Make bottled water available all hours of the day.

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Alexandria City

Physical Activity Initiatives

After school walking clubs. Two elementary schools were funded to create after school walking clubs. One school's club, Fitness Finders, ran for 8 weeks with over 100 students consistently attended. The average mileage per day was 1 mile. One school's, Feelin' Good Mileage Club, attracted around 50 students for two 8 week periods (Fall and Spring). They expanded the club to include recess time after lunch. The hallway to the cafeteria was lined with posters where each classroom could chart their progress.

Contact: Rachael Kennedy
Alexandria Health District
rachael.kennedy@vdh.virginia.gov
(703) 838-4400 X271

Cycling. Bike Smart Hammond! training for 6-8th graders. In 2002-2003, over 300 6th-8th-grade students received the 3-week training at one school. This year the program is being expanded to include the other middle school, the ninth grade center and high school.

Contact: Rachael Kennedy
Alexandria Health District
rachael.kennedy@vdh.virginia.gov
(703) 838-4400 X271

Pedometers: John Adams Elementary 4th Grade. Use Pedometers to create the 4th grade "Stepping into Health, Stepping into Virginia" pedometer challenge integrated with Virginia Studies SOLs. The basics of the challenge are:

- each student puts on a pedometer at the beginning of P.E. class
- students participate in planned physical activities
- at the end of the class, they note the step count on their pedometers and report their count to their group leaders (the students are in groups of 4-5)
- group leaders then use calculators and a conversion formula to determine the total number of steps and then the total number of "miles" (1 actual mile = 10 "map" miles).

The goal of the challenge is twofold. First, it gives students a tangible fitness goal. Second, as they accumulate "map" miles, they travel around the state of Virginia on a predetermined route, which takes them through such

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

historic and important stops as Richmond, Jamestown, Winchester, Arlington and Alexander. As they reach each stop on the route, they must correctly answer questions related to that stop before they can move forward.

Between May, 2002 and May, 2003, 4th grade Virginia Studies SOL test scores went from 48% passing to 90% passing. We are convinced that support outside the "regular" classroom like Ms. Rodgers's Pedometer Challenge has helped us reach that accreditation goal.

3rd Grade. Use pedometers to incorporate skills into the P.E. lessons with numbers and measurement.

1st Grade. Integrates P.E. instruction with math and science. For example, students acted out large geometric forms when they were studying shapes.

Kindergarten. Inclusive P.E. program for kindergarten students with developmental delays. Students now have better comprehension of direction and are able to follow specific verbal tasks. They can participate and feel proud of their achievements.

Role Model for Staff & Parents. Encourages exercise by providing workshops, movement ideas from brain research, cross-curricular activities for teacher, and ideas to foster families to be more active at home.

Contact: April Rodgers, PE
Stacy Hoeflich, 4th Grade Teacher
Stacey Smouse, 3rd Grade Teacher
Hilari Hinnant, 1st Grade Teacher
Cynthia Wynne, Kindergarten Teacher

Safe Routes To School. The health department and volunteers conducted 118 walking audits around all public schools during June-July 2003, a multi-agency steering committee created a plan to address crosswalk and sidewalk concerns. A resource book for teachers was created and funds for pedestrian/bicycling safety education will be given to five schools. A community coalition is in place. Due to work in this arena, the city has agreed to engage in a pedestrian safety media campaign along with other DC area governments.

Contact: Rachael Kennedy
Alexandria Health District
rachael.kennedy@vdh.virginia.gov
(703) 838-4400 X271

Walk to School. A one hour pedestrian and bicycle safety assembly was held the day before the walk. Students learned safety songs/poems in class and presented at assembly. Others performed safety skits.

Walk to School Day hosted by St. Mary's Catholic School. Safety assembly held with all 4th and 5th graders during P.E. class, followed by walking audits conducted around the school area.

Contact: Rachael Kennedy
Alexandria Health District
rachael.kennedy@vdh.virginia.gov
(703) 838-4400 X271

Nutrition Initiatives

Eat Smart, Play Hard! In 2002-3003 Food service managers attended a Childhood Obesity Workshop and from that created plans for addressing the issue. Changes to a la carte offering were made, recipes were changed to decrease fat, cafeteria's developed nutrition education centers, new posters & health messages were placed in cafeterias & nurses offices, nutrition messages were placed on send home menus, literature was mailed to parents of

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

children participating in the school lunch program, food service staff attended workshop on heart health (worksite wellness). Currently in 2003-04 Breakfast menu has been altered to remove less nutritious items, vegetarian items have been added to lunch menus, schools are only ordering 2% white & chocolate milk (no whole milk), & a greater variety of fruits are being offered along with taste testings.

Contact: Rachael Kennedy
Alexandria Health District
rachael.kennedy@vdh.virginia.gov
(703) 838-4400 X271

Combined Physical Activity & Nutrition Initiative

Health education. Health educators have partnered with one elementary school and two community organizations to conduct nutrition and physical fitness classes during after school sessions with students. In 2002-03, 11 classes were taught affecting around 70 students ranging from elementary to high school.

Contact: Rachael Kennedy
Alexandria Health District
rachael.kennedy@vdh.virginia.gov
(703) 838-4400 X271

Arlington County

Physical Activity Initiatives

Walk Smart, Virginia! Students in K-12 participated in this pedometer program to encourage students to be more physically active.

Contact: Deborah DeFranco
ddefranc@arlington.k12.va.us

Nutrition Initiatives

Developed Guidelines for Healthy Food Choices listing healthy, nutritious snacks for children and adults.

Food Services held taste tests for various groups to determine students' reaction to new food items incorporating healthier foods.

Developed and displayed posters of staff eating healthy foods to model good behavior.

Contact: Deborah DeFranco
ddefranc@arlington.k12.va.us

Combined Physical Activity & Nutrition Initiatives

Are revising Health & Physical Education curriculum to align with the Virginia Health & Physical Education Standards of Learning.

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Conducted Healthy Eating-Healthy Activity workshops with County Council PTAs, Student Advisory Board, and Teen Network.

Contact: Deborah DeFranco
ddefranc@arlington.k12.va.us

Augusta County

Combined Physical Activity & Nutrition Initiatives

Healthy Eating & Fitness Program Targeting Fourth and Fifth Graders. In school year 2004-2005, approximately 1400 fourth and fifth grade students at three elementary schools in Augusta County will participate in a six week in-school program focused on increasing physical activity and promoting health foods choices.

Students will be given a pedometer that will measure the number of steps taken each day. Data will be obtained from these pedometers to verify increases in activity. A pre and post survey related to eating and fitness habits will be administered to students to assess changes in these behaviors.

Contact: Melissa Janes, Nutrition Program Supervisor
Central Shenandoah Health District
Melissa.Janes@vdh.virginia.gov

Buchanan County

Physical Activity Initiatives

Health Department program targets 4 & 5 grade students to promote importance of staying physically active outside of school. Goal is to increase physical activity 15 minutes a day, 6 days a week. Participants receive small incentives to participate and information is shared with families.

Contact: Toby Cook, Nurse Manager
Lenowisco Health District
toby.cook@vdh.virginia.gov

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Charlottesville City

Physical Activity Initiatives

After-School Physical Activities. Buford Middle. We also began organized physical activities after school. The after-school activities are well attended and buses provide a ride home. The result is a happier, healthier, less stressed academic environment. All of our test scores went up this year, and I believe that these changes had a part in it.

Contact: Tim Flynn, Principal
(434) 245-2411

Cycling: Multiple elementary schools. Grant funds were used to acquire a set of bicycles, helmets, and a mobile storage unit. All elementary PE teachers received bike safety training to assure that cycling is incorporated into the PE curriculum in all Charlottesville City elementary schools.

Contact: Peggy Paviour
Thomas Jefferson Health District
peggy.paviour@vdh.virginia.gov

Pedometers Charlottesville's Walker Upper Elementary students wear pedometers during their circuit training every other week in PE; students record number of steps taken with a goal of increasing number of steps by an average of 10% over their baseline.

Contact: Peggy Paviour
Thomas Jefferson Health District
peggy.paviour@vdh.virginia.gov

Safe Routes to School: Greenbrier Elementary piloted a program to encourage walking/cycling to school in spring 2003 and resulted in several students walking or cycling to school every Wednesday. This year, the school continues its emphasis on walking to school and walking in general using pedometers.

Burnley-Moran Elementary school celebrated International Walk to School Day in October 2003 resulting in the decision to hold school-wide Walking Fridays held once a month. On those days, children either walk to school or take a walk around the track once they arrive at school in the morning. They receive a fruit snack when they get to class.

Contact: Peggy Paviour
Thomas Jefferson Health District
peggy.paviour@vdh.virginia.gov

Scheduling Changes to Increase Physical Activity. Buford Middle. Last year's schedule was also changed to include a mid-morning activity break and the gym was opened up for free physical activity during both lunch periods-a longer lunch with activity time included. Most kids are active; there are many choices with more to come.

Contact: Tim Flynn, Principal
(434) 245-2411

Walking Challenge: Greenbrier Elementary. The Physical Education teacher challenged students and staff to walk around the track during recess and gym class. Classes that completed laps earned stars that were recorded on a large poster.

Contact: Peggy Paviour
Thomas Jefferson Health District
peggy.paviour@vdh.virginia.gov

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Nutrition Initiatives

Healthy Snack Pyramid Handouts: System-wide program. Healthy Snack Pyramid handouts created for K-10 were distributed to parents of all students in grades K-6 and to students through health classes in grades 7-10 in all Charlottesville City Schools.

Contact: Peggy Paviour
Thomas Jefferson Health District
peggy.paviour@vdh.virginia.gov

Nutrition Education: Multiple schools. Volunteer community nutritionists and health educators provided nutrition education to all sixth graders at Walker Elementary School in Charlottesville during their Physical Education periods.

Buford Middle School in Charlottesville provided an after-school cooking/conversion class by the Home and Life Studies teacher during which snacks and favorite meals were recreated in low-fat, low-calorie versions.

Several schools have taken advantage of the Virginia Cooperative Extension's *Smart Choices* nutrition program, facilitated by a trained extension agent, to teach elementary school students basic nutrition concepts.

Contact: Peggy Paviour
Thomas Jefferson Health District
peggy.paviour@vdh.virginia.gov

Salad Bar. Buford Middle. Alicia Cost, our new Nutrition Services Director, has done an incredible job of changing lunches, including a salad bar that is more popular than they imagined. I truly believe that the collaborative effort with the COTF, which increased community support, was a key factor in the results.

Contact: Tim Flynn, Principal
(434) 245-2411

Snack Bars. Buford Middle. The school snack bar has been revamped to include baked and healthier choices and a "Buy Baked" campaign at the end of the year resulted in the local Childhood Obesity Task Force buying students a climbing wall that was installed. The COTF also purchased equipment for our students to play with during lunchtime.

Contact: Tim Flynn, Principal
(434) 245-2411

Combined Physical Activity & Nutrition Initiative

Working with Overweight Children: Burnley-Moran Elementary & Walker Upper Elementary. Schools established clubs to encourage identified overweight children to learn about and practice healthy eating and physical activity. Guidance counselors lead both groups of students with support and technical assistance from the Childhood Obesity Task Force nutritionists.

Contact: Peggy Paviour
Thomas Jefferson Health District
peggy.paviour@vdh.virginia.gov

Assessment

Assessment. System-wide. Using the CDC's "School Health Index," the School Health Advisory Board is assessing physical education and policies that impact physical activity in all Charlottesville City schools. Results of the assessment are being used to generate recommendations to be presented to the School Board.

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Contact: Peggy Paviour
Thomas Jefferson Health District
peggy.paviour@vdh.virginia.gov

Chesterfield County

Physical Activity Initiatives

Cycling. Implemented a grant-funded biking unit with her students.

Contact: Lynne Bennett
Chesterfield County Public Schools
lynne_bennett@ccpsnet.net

Family Fitness. Chesterfield County has approx. 20-25 schools that organize a family fitness night for the families in their schools. This initiative is sponsored by Chesterfield County PTA organizations. The event themes and opportunities vary depending on location. The goal of family fitness nights is to increase awareness of the importance of an active, healthy lifestyle for Chesterfield county families.

Contact: Lynn Bennett
System-wide
lynne_bennett@ccpsnet.net

5-Day P.E. Five-day a week P.E. program for 5th grade classes. Found a correlation between this program and increased test scores.

Contact: Lynne Bennett
Chesterfield County Public Schools
lynne_bennett@ccpsnet.net

Inclusion. Designed fitness testing strategies and materials for children with varying degrees of disabilities. One program last year included a trip to the Richmond Raceway to see qualifiers for the NASCAR race.

Contact: Shawn Martin
Salem Middle School
(804) 768-6225

Running Clubs. Many of elementary PE teachers organize running clubs either before or after school to give students an opportunity for achievement, increased activity, and increased self-esteem. Before school running club, mile club, gymnastics. Special clubs, teams, enrichment activities during PE classes - jump rope club, mile club, gymnastics team, enrichment classes in gymnastics; hoop it up, bike for the bay day, jump rope for heart, movement to music, & bike safety lessons

Contact: Lynn Bennett
System-wide
lynne_bennett@ccpsnet.net

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Assessment

Data Collection. Provide height/weight screening including the calculation of Body Mass Index-for-age on students in kindergarten, third, seventh and tenth grade. Ht/wt screening is incorporated with health screenings. Screening program includes a parent referral process where parents of students with abnormal results are notified. Parent referral process includes the provision of educational information on nutrition, physical activity, and health risks of not maintaining a healthy weight. Program has served to provide education and increase community awareness of childhood overweight, as well as establish a baseline at the local level of the prevalence of overweight and at risk of overweight.

Contact: Jody Enoch
Chesterfield County Health Department
jody.enoch@vdh.virginia.gov

Community-Based Initiatives

Community Collaborations. Chesterfield Coalition for Active Children (COACH), a community partnership, is focusing on improving children's health by encouraging better nutrition and increased physical activity. Membership includes individuals from public and private organizations representing health, education, fitness and nutrition professionals, concerned parents and community and business leaders. In April, 2004 sponsored and organized a very successful activity fair, Spring into Action Family Festival at a local elementary school.

Contact: Lynne Bennett
Chesterfield County Public Schools
lynne_bennett@ccpsnet.net

Danville City

Physical Activity Initiatives

Cardiovascular Health Course: E.A. Gibson Middle. Developed 22-hour "Heart Smart" cardiovascular health course for 6th graders taught during schools hours. Includes a family component.

Contact: Kathryn Plumb,
Nurse Manager, Pittsylvania/Danville Health District
(434) 799-5190

Dickinson County

Physical Activity Initiatives

Health Department program targets 4 & 5 grade students to promote importance of staying physically active outside of school. Goal is to increase physical activity 15 minutes a day, 6 days a week. Participants receive small incentives to participate and information is shared with families.

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Contact: Toby Cook, Nurse Manager
Lenowisco Health District
toby.cook@vdh.virginia.gov

Fairfax County

Combined Physical Activity & Nutrition Initiatives

Fitness Challenge. Classroom activities include nutrition facts, finding your way to fitness, popular forms of exercise, puzzles, exercise pyramid, exercise log. K-6 lesson plans were developed and taught simultaneously with the Fitness Challenge on the following topics: Give me Five! Colors that Jive!; Healthy Snacks; Food Guide and EZ Bear Exercise Pyramid; Food Labels; and Kids Cooking. Each lesson linked the nutrition messages to the physical activity challenge.

Contact: Penny McConnell
Director, School Nutrition Programs
Penny.mcconnell@fcps.edu

Fauquier County

Physical Activity Initiatives

Activity for Life. Purchased climbing wall with school & PTA funds.

Contact: Rodney Madden, H&PE Teacher
Grace Miller Elementary School

Franklin County

Combined Physical Activity & Nutrition Initiatives

5th Walk for Life. 5th grade students at Burnt Chimney Elementary School participated in a walking program using pedometers. Students are 'walking' across the United States. Also promoted making healthy snack choices at home and school. Cafeteria staff replaced cookies, ice cream, and high sugar fruit drinks with healthier choices including yogurt, 100% fruit drinks, fruit choices, carrots, and other healthier choices.

Staff Wellness Burnt Chimney Elementary School gave pedometers to all staff members. Twenty staff members participated in a weight loss program that stressed change of diet and increased physical activity. Over a two-month period, the group lost 225 pounds.

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Contact: Jason Guilliams
jguilliams@frco.k12.va.us

Goochland County

Physical Activity Initiatives

Physical Education Classes: Goochland High School. Developed new P.E. electives:

- 1) Outdoor Games
- 2) Women's Health & Fitness

Contact: Wes Farkas, PE Teacher
Amy Henneberger, PE Teacher

Nutrition Initiatives

A la Carte Lines. System-wide. Offer whole grain items and healthier options in the a la carte lines.

Contact: David Price, Food Service Director

Breakfast. Celebrated National School Breakfast Week. (Christy)

Contact: Christy Mason
Christy.mason@vdh.virginia.gov

5 a Day. Promoted during National School Lunch Week. (2nd week in October)

Contact: Christy Mason
Christy.mason@vdh.virginia.gov

Vending Machines. Removed all "snack" vending machines. Changed beverage vending machines to include water and 100% juice choices.

Contact: Christy Mason
Christy.mason@vdh.virginia.gov

Staff Wellness

Staff Wellness: System-wide. Implemented staff wellness program. 5 A Day Challenge. Walking event during National Employee Health & Fitness day.

Contact: Christy Mason
Christy.mason@vdh.virginia.gov

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Hampton City

Physical Activity Initiatives

Pedometers. Incorporated Digwalkers into PE classes.

Contact: Judy Lucas
Hampton High School

Hanover County

Physical Activity Initiatives

Running. Cool Spring Elementary. Competition between 3rd, 4th, & 5th grade Social Studies classes. 3rd grade students study Greece and Rome; 4th grade students study Virginia geography and history; & 5th grade students study U.S. geography and history. To increase cardio-respiratory endurance, students jogged or ran a quarter mile track. For every lap, students were awarded one mile toward their destination. Greece and Rome, Virginia, and U.S. maps were displayed on foam board. Destinations and mileage were listed. Each class had their own flag. At the end of the week, the classroom teacher e-mailed the total number of laps that the class ran or jogged and each class flag was moved toward the final destination. Students were so excited they decided not only to run to their destination but back!

Contact: Renee Blackwell

Walking Program. Person's Corner Elementary. The PTA sponsored a Family Fitness Night that included a presentation from the health department and the physical education teacher at the school along with activities for children and adults. A walking challenge with incentives was introduced. Educational materials and tracking forms for the walking program were distributed to families.

Contact: Lauri Savage
Hanover County Health Department
lauri.savage@vdh.virginia.gov

Assessment

Data Collection. Hanover's Cardiovascular Health Project is collaborating with the School Health Advisory Board to compile data on students' body mass index. Students in grades K, 3, 5, 7 and 10 participated in height/weight screenings. The BMI information will be presented in aggregate form to establish baseline data, identify areas of greatest need and suggest future programming.

Contact: Lauri Savage
Hanover County Health Department
lauri.savage@vdh.virginia.gov

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Henrico County

Physical Activity Initiatives

Activity for Life. Curriculum for fishing, walking poles, cooperatives, and bouldering wall. Also includes mountain biking, rollerblading, and fishing trips.

Contact: Bonnie Conner-Gray
Brookland Middle School

Adaptive P.E. Special program for adaptive students in summer H/P.E. 9, 10 to take students nightly (twice weekly for two hours) to the Tuckahoe YMCA to individualize swimming exercise and conditioning as a part of course completion for medically restricted students needing the physical education component of H/P.E.

Contact: Bonnie Conner-Gray
Pocahontas Middle School

Advanced P.E. Advanced PE class at Hermitage High School for juniors & seniors. Course began 3 years ago with about 40 students. This year, over 130 students signed up to take it. Over the past four years, 25 students from this class have received athletic scholarships in sports. The course covers general fitness concepts, muscular anatomy, fundamental strength training, biomechanical sport analysis, sports nutrition, and advanced strength training. The goal is to teach the students in the class the "why" and "how" of fitness and strength training.

Contact: Kelly Guempel
ksguemp@henrico.k12.va.us
Hermitage High School

Aquatics. The system-wide 5th grade aquatics program through the schools and YMCA is a great success story. We now have 30 of the 43 elementary schools completing this curriculum, which culminates in a day-long field trip to area YMCAs.

Contact: Bonnie Conner-Gray
System-wide

Pedometers. Pedometers will be distributed to all middle and high school H/P.E. sites in Henrico schools to be used by classroom teachers as well as P.E. classes to promote daily increases in physical activity. Elementary students in grades 4,5 use them as well.

Contact: Bonnie Conner-Gray
System-wide

Program for Overweight Students. Uses Nordic Walking Poles and a fitness club targeting overweight kids who walk in the mornings before school and meet to discuss healthy topics.

Contact: Bonnie Conner-Gray
Johnson Elementary
Crestview Elementary

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Walking Program. Highland-Springs Elementary School started an after school walking club for overweight 5th grade girls. The program uses pedometers, aerobics, healthy snacks, and making wise lifestyle choices.

Contact: Lucy Trott
lhtrott@henrico.k12.va.us

Community-Based Initiatives

Marathon. The Richmond Sports Backers, Times Dispatch, Hanover, Chesterfield, and Henrico schools will promote the .02 mile run event at the Richmond Marathon finish line on Nov.15. Students participate in accumulating 26 daily physical activities charted on a form that leads them to the marathon 26 mile run event date. Schools helped to design the chart which students may use in P.E. or at home to accumulate the physical activity days and option to sign up for the .02 run event.

Contact: Bonnie Conner-Gray

Lee County

Physical Activity & Nutrition Initiatives

Heart Healthy Choice. Collaborated with Virginia Cooperative Extension and the Department of Health to provide themed activities to support healthy life style changes through nutrition and physical activity. The cafeteria staff offered a variety of healthy choices for meal items including foods that were baked or broiled, not fried, vegetables, fruits, salad bar, water, and juice. St. Charles Elementary School integrated nutritional curricula in science, health, and PE classes.

Contact: Margaret Martin Fred Marion, School Nutrition
mmartin@leectysch.com fmarion@leectysch.com

Montgomery County

Community Event

Family Fun and Fitness Night. Provided a variety of physical activity events to participants. Parents, teachers, and students moved from activity to activity and received points to participate. During the event, they served healthy snacks and drinks.

Contact: Susan Miller
smiller@mail.mcps.org

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Pittsylvania County

Physical Activity Initiatives

Cardiovascular Health Course: Gretna Middle, Chatham Middle, & Gibson Middle. Developed 22-hour “Heart Smart” cardiovascular health course for 6th graders taught as an after school program. Course was developed to impact the health of students and their families. Developed in partnership with DRchip program

Contact: Kathryn Plumb, Nurse Manager, Pittsylvania/Danville Health District
(434) 799-5190

Physical Activity Challenges. Month long program called "Survivor" with 5th graders. Each 5th grade class is divided into 2 teams and each P.E. day, there is a survivor challenge. The winner of the challenge gets to cast a vote against another tribe and the winner gets immunity - which means they cannot be voted against until they lose a challenge. The challenges are physical and mental. Some test strength, endurance, sports skills, while other challenges are mental, testing their core SOL knowledge. At the end, the 2 tribes with the least amount of votes against them compete in a final challenge for the ultimate survivor. Survivor promotes teamwork and cooperation and is just plain fun!

Contact: Rachel Parks
rparks@henry.k12.va.us

Running. Run America Program with 4th and 5th graders. Each state is worth a certain # of laps around the baseball field. When a class comes to P.E., they decide which state they want to buy and the entire class goes out and jogs that many laps around the field. Then, that state is theirs. When all states are bought up, we add up the total # of laps each class has run and the winner gets a prize. This really helps them get in shape for their Mile Run and is a huge success.

Contact: Rachel Parks
rparks@henry.k12.va.us

Walking Path. Westwood Middle School. Administration allows students & staff to walk during homeroom period.

Contact: Kathryn Plumb, Nurse Manager, Pittsylvania/Danville Health District
(434) 799-5190

Walking Trails: All middle schools. Established walking trails for student and community.

Contact: Kathryn Plumb, Nurse Manager, Pittsylvania/Danville Health District
(434) 799-5190

Nutrition Initiatives

Healthy Snacks. W. Townes Lea. Promote 1 fruit each Friday over PA system & in parent newsletter to bring that snack the following week. Use 5 A Day fruit coloring sheets

Contact: Kathryn Plumb, Nurse Manager, Pittsylvania/Danville Health District
(434) 799-5190

Vending Machine Changes. Westwood Middle School. Offer milk Vending machines

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Contact: Kathryn Plumb, Nurse Manager, Pittsylvania/Danville Health District(434) 799-5190
Joan Yates, Director School Nutrition

Water Bottles. Tunstall High School. Allows water bottles in classroom

Contact: Kathryn Plumb, Nurse Manager, Pittsylvania/Danville Health District
(434) 799-5190

Prince William

Nutrition Initiatives

For the past two years, students are only able to purchase juice from vending machines in Bull Run Middle School. No foods or snacks are sold in the school store. The principal also extended lunch to 30 minutes this year. The school celebrated National Nutrition Week by trying new foods and integrating 5-A-Day principles. The school also provides monthly nutrition tips in the schools newsletter sent to parents/guardians.

Contact: Jim Rumble, RD
rumplejc@pwcs.edu

Richmond City

Physical Activity Initiatives

Generation Fit/Fit 2 Bee. A collaborative effort between the American Cancer Society, Richmond City Parks, Recreation and Community Facilities' After School Program, and Virginia Cooperative Extension. The groups met for one hour, one day a week for six weeks. Three weeks were dedicated to nutrition and healthy eating (provided by Virginia Cooperative Extension) and three weeks were dedicated to physical activity (provided by local health clubs and yoga centers). The project was conducted at Fairfield Court Elementary School and Patrick Henry Elementary School.

Contact: Rita W. Miller
Mission Collaboration Manager VA
American Cancer Society
Rita.W.Miller@cancer.org

Happy Hearts Program. Provides nutrition education & promotes physical activity for John C. Carey Elementary School students.

Contact: George Jones
(804) 646-3137
jonesgw@ci.richmond.va.us

Rock Richmond. Free after school programs offered 5 days a week at middle schools. Includes aerobic exercises & nutrition education.

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Contact: George Jones
(804) 646-3137
jonesgw@ci.richmond.va.us

Walking Trails: Restored Hickory Hills walking trail. Built Oakwood trail & installed children's playground.

Contact: George Jones
(804) 646-3137
jonesgw@ci.richmond.va.us

Combined Physical Activity & Nutrition Initiative

Obesity. You Can Do It program for obese or overweight children.

Contact: George Jones
(804) 646-3137
jonesgw@ci.richmond.va.us

Roanoke City

Physical Activity Initiatives

Carol White PEP Grant. Roanoke City purchased technology-based equipment to help students assess fitness levels. They also purchased pedometers, mountain bikes, and play stations and dance programs to encourage greater aerobic development. All secondary staff received several sessions of training about the new equipment as well as new activities that could be implemented in their physical education programs. They are making a concerted effort to "get the students' moving through more non-traditional physical education programs.

Contact: Kathy Tucker
kctucker@aol.com

Nutrition Initiatives

Roanoke City also changed the offerings in their drink machines and has requested healthy products for their snack machines. Only water, fruit juice, and 'Powerade' are sold in the high school drink machines. The cafeteria is selling flavored reduced fat milk. The food service department is discussing how they can offer more salads, fresh fruit, whole wheat bread, etc. They plan to have new contracts in place for the 2004-05 school year with drink and snack vendors requesting only healthy options for the students.

Contact: Tom Powers, director School Nutrition Programs tpowers@roanoke.k12.va.us
Kathy Tucker
kctucker@aol.com

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Rockingham County

Physical Activity Initiatives

Students at Turner Ashby High School use digiwalkers daily and record their activity into their fitness portfolio. Each student calculates exercise totals and intensity levels and makes a PowerPoint presentation of their workout program.

Contact: Cindy Ferek
cferek@rockingham.k12.va.us

Russell County

Physical Activity Initiatives

Health Department program targets 4 & 5 grade students to promote importance of staying physically active outside of school. Goal is to increase physical activity 15 minutes a day, 6 days a week. Participants receive small incentives to participate and information is shared with families.

Contact: Toby Cook, Nurse Manager
Lenowisco Health District
toby.cook@vdh.virginia.gov

Salem City

Physical Activity Initiatives

Swimming: Established swim program with YMCA for 2nd grade students. Includes water instruction and classroom participation at the YMCA.

Contact: S. Hill
All elementary schools

Shenandoah County

Physical Activity Initiatives

5-Day P.E. Students participate in physical education 5 days a week. (compared to 2-3 times a week at many schools). The State of Virginia would like schools to place an emphasis on three major areas of physical fitness: Cardiovascular, Flexibility, and Strength. Our students participate in all 3 areas everyday before they can participate in any specific game or recreational skills. We stretch, run, and work on back, stomach, arm and leg strength daily. This is a rigorous program but the students like the predictability and work ethic. Our state physical fitness test scores are outstanding year after year. At different times of the year, our classes perform on step aerobics activities.

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

The regular education teachers see the academic and health benefits of students having physical exercise daily and encourage the necessary scheduling for this to happen for every child in the building. All 470 students, grades 6-8 participate in our physical education classes daily.

There is a correlation between fitness and academic efficiency. Academically we have been:

- Fully Accredited three consecutive years by the Virginia Dept. of Education on SOL testing;
- Fully Accredited by the Southern Association of Colleges and Schools; and Received AYP according to the standards for No Child Left Behind.

Contact: Charles F. Everett, Principal
cfeverett@shenandoah.k12.va.us
(540) 465-3422
Signal Knob Middle School

Smyth County

Nutrition Initiatives

In August 2003, the School Division removed all soft drinks and beverages containing less than 25% fruit juice from all drink machines to which students have access.

Contact: Jim Sullivan Preston Brockman , School Nutrition contact
jimsullivan@scsb.org prestonbrockman@scsb.org

Tazewell County

Physical Activity Initiatives

Health Department program targets 4 & 5 grade students to promote importance of staying physically active outside of school. Goal is to increase physical activity 15 minutes a day, 6 days a week. Participants receive small incentives to participate and information is shared with families.

Contact: Toby Cook, Nurse Manager
Lenowisco Health District
toby.cook@vdh.virginia.gov

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Virginia Beach

Physical Activity Initiatives

Pedometers.

New Castle Elementary. Using pedometers for 4th & 5th grade students.

Contact: Lil Shouldis

Elementary schools. Physical Activity Challenge for 3-5th graders during gym class.

Contact: Angie Munari

angie.munari@vdh.virginia.gov

Rock Walls. All middle schools (15) now have rock walls for students to use during PE.

Contact: Steve Knott

Running Club. Luxford Elementary. After school running club for 4th and 5th grade students. The children are provided with a healthy snack and practice to improve their scores on the aerobic activity portion of the physical education tests.

Contact: Eileen Magarachi

eimagara@vbcps.k12.va.us

Walking Club. High School. After School Walking Club. Includes nutritional counseling, monthly health observances, physical activity lectures through May.

Contact: Angie Munari

angie.munari@vdh.virginia.gov

Nutrition Initiatives

Candy Restriction. Rosemont Elementary. Implemented a “No Candy Policy” in the classroom.

Contact: 2nd grade teacher

Deserts. Luxford Elementary. Students are not permitted to purchase more than one dessert/sweet snack from the school cafeteria each day. Letters were sent home to encourage the parents to create the same environment at home.

Contact: Joanne D’Agostino

Non-Food Rewards. System-wide (88 schools). Nurses/Teachers were encouraged to start using non-food rewards in the classroom.

Contact: Angie Munari

angie.munari@vdh.virginia.gov

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX C: School-Based Activities to Address Childhood Obesity for School Year 2003-04

Combined Physical Activity & Nutrition Initiatives

Fitness Initiative. School-wide initiative at Luxford Elementary School to improve overall Physical Education Aerobic Testing scores. Program includes use of water bottles to promote hydration; nutrition assembly to emphasize healthy eating at home and school; limiting students to one desert or snack during lunch; Munch & Learn to promote healthy snacks at school; tracking miles walked during P.E. class; after school Running Club for 4th & 5th grade students; Spring Fling Run/Walk; Field Day running/walking event for each grade.

Contact: Eileen Magaraci
eimagara@vbcps.k12.va.us

Community-Based & Other Initiatives

After School Program: All elementary schools. Established a 4-week nutrition and physical education 'Healthy Kid Challenge' for 1st grade students. All activities were done outside of the school. Children were rewarded with incentives.

Contact: Angie Munari
angie.munari@vdh.virginia.gov

Reading. Targets 3-6 year olds. 'Reading for Heart' reading program for children 3-6. Program held at local libraries. Story is read with underlying physical activity or nutritional message and discussed with children and parents.

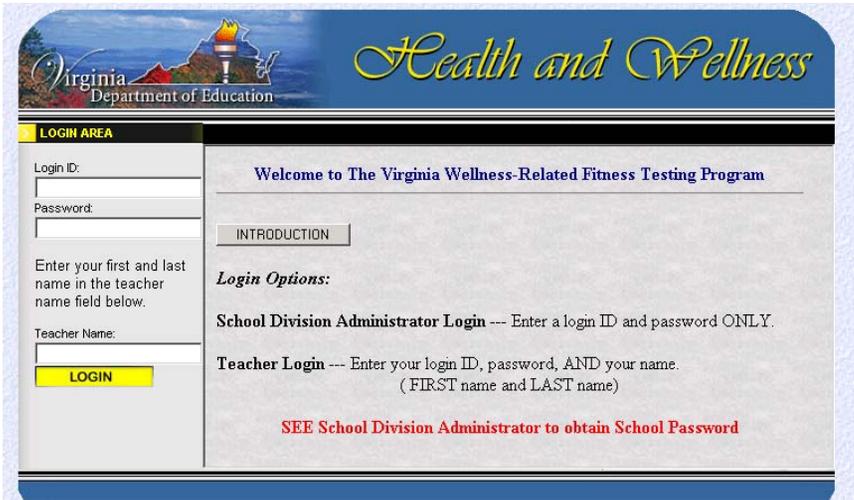
Contact: Angie Munari
angie.munari@vdh.virginia.gov

Weight Management: Targets 9-15 year olds. Established 8-week 'Way to Go Kids' weight management class for children ages 9-15. Program held at health department. Partnered with Rec Center and area physicians. Parents are invited to attend.

Contact: Angie Munari
angie.munari@vdh.virginia.gov

Report from the Joint Committee of the Board of Education and the Board Health

APPENDIX D: Sample Fitness Assessment



STUDENT INDIVIDUAL FITNESS ASSESSMENT

Name	ID#	Date of Birth	Age	Grade	Period	Teacher
JANE DOE	521	2/28/1989	M 14	9	7	XXXX
BMI Measurement =			Percentile Rating =			

	Mile Run	Pacer	Curl Ups	Curl Ups (cadence)	Partial Curl Ups	Sit & Reach	V Sit & Reach	Back Saver	Pull-ups	Pushups	Flexed Arm Hang	Shuttle
Scores	8.15	N/A	46	N/A	N/A	23	N/A	N/A	6	N/A	N/A	
Wellness standards	Passed	N/A	Passed	N/A	N/A	Below	N/A	N/A	Passed	N/A	N/A	
	9.3	41	41	24	40	25	1	8	2	14	15	
National standards	Below		Passed		N/A	Below	N/A		Passed	N/A	N/A	Passed
	7.44		45		40	28	1		5	24	20	9.9
Presidential standards	Below		Below		N/A	Below	N/A		Below	N/A		Passed
	6.26		56		62	36	4.5		10	40		9.1

Report from the Joint Committee of the Board of Education and the Board Health

APPENDIX D: Sample Fitness Assessment

DIVISION LEVEL: FITNESS ASSESSMENT- showing aggregate data for High School grades

Division: Prince_William_County_Public_Schools School: Assessment: Fall Assessment Ethnicity: All																				
Age	Aerobic				Abdominal				Flexibility				Upper Body Strength				BMI			
	Boys		Girls		Boys		Girls		Boys		Girls		Boys		Girls		Boys		Girls	
	Tested	Passed	Tested	Passed	Tested	Passed	Tested	Passed	Tested	Passed	Tested	Passed	Tested	Passed	Tested	Passed	BMI	%tile	BMI	%tile
6	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
	Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%					
7	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
	Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%					
8	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
	Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%					
9	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
	Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%					
10	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
	Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%					
11	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
	Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%					
12	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
	Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%		Passed: 0%					
13	9	5	8	2	9	6	8	5	9	8			9	4	8	5				
	Passed: 55.56%		Passed: 25.00%		Passed: 66.67%		Passed: 62.50%		Passed: 0.00%		Passed: 0.00%		Passed: 44.44%		Passed: 62.50%					
14	157	37	142	12	157	45	142	29	157	2	142	14	157	49	142	15			26	92.5
	Passed: 23.57%		Passed: 8.45%		Passed: 28.66%		Passed: 20.42%		Passed: 1.27%		Passed: 9.86%		Passed: 31.21%		Passed: 10.56%					
15	198	5	195	4	198	7	195	5	198	3	195	4	198	8	195	6	22	77.9	21	63.2
	Passed: 2.53%		Passed: 2.05%		Passed: 3.54%		Passed: 2.56%		Passed: 1.52%		Passed: 2.05%		Passed: 4.04%		Passed: 3.08%					
16	116		73	1	116	2	73	2	116	1	73	1	116	3	73	2				
	Passed: 0.00%		Passed: 1.37%		Passed: 1.72%		Passed: 2.74%		Passed: 0.86%		Passed: 1.37%		Passed: 2.59%		Passed: 2.74%					
17	16	1	11		16	1	11		16		11		16	1	11				21	48.8
	Passed: 6.25%		Passed: 0.00%		Passed: 6.25%		Passed: 0.00%		Passed: 0.00%		Passed: 0.00%		Passed: 6.25%		Passed: 0.00%					

Report from the Joint Committee of the Board of Education and the Board of Health
APPENDIX E
Virginia Action For Healthy Kids --Recommendations for School Nutrition Standards

Lisa Collis

The First Lady of Virginia

To: Superintendents of Virginia Public Schools
From: Lisa Collis
Subject: Nutrition Standards for Schools

As a mother and the Honorary Chair of Virginia Action for Healthy Kids, I believe that schools play a role in shaping a better, healthier future for the children of this Commonwealth.

I strongly encourage you to adopt the enclosed nutrition standards and guidelines developed by the Virginia Action for Healthy Kids (VAFHK) coalition.

VAFHK is part of a nationwide initiative dedicated to improving the health and educational performance of children through better nutrition and physical activity in schools. I whole-heartedly support their goals. Well-nourished students are better students, research has shown that students who engage in regular physical education are stronger – both physically and mentally. One recent study by the California State Department of Public Instruction provided “compelling evidence that the physical well-being of students has a direct impact on their ability to achieve academically.”

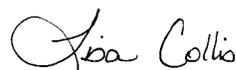
It is no secret that youth are facing serious health challenges today. Currently, an estimated 15 percent of children and adolescents are considered overweight, a three-fold increase from 30 years ago. The prevalence of Type 2 diabetes is on the rise, fewer children are meeting established dietary guidelines and nearly half of Americas aged 12-21 years are not vigorously active on a regular basis.

We know that schools cannot meet all of the nutrition and activity related needs of students on their own. But because children spend so much of their time in school or at school related activities, in many cases eating two meals a day on campus, schools can play an important part in the solution.

As Superintendent, your role in this effort is crucial. I encourage you to adopt the nutrition recommendations and bring your school division one step closer to providing an environment in which students can excel and develop healthy behaviors – for **life**.

I look forward to working with you, the teachers and staff in your school district to map out a path to a healthier future for all of Virginia’s children.

Sincerely,



Lisa Collis

Enclosure

The Executive mansion Richmond Virginia 23219 8-4-371-2642

Report from the Joint Committee of the Board of Education and the Board of Health
APPENDIX E
Virginia Action For Healthy Kids --Recommendations for School Nutrition Standards

Background Information

Childhood overweight and obesity rates have nearly tripled in the past thirty years and continue to rise. Poor eating habits and increased sedentary activities have contributed to this trend. There are numerous emotional and health consequences of overweight. Since the greatest portion of a child's day is spent in the school environment, schools are in a strong position to impact children's nutritional and physical activity habits and reduce the proliferation of childhood obesity. Nutrition and physical activity are essential for students to achieve their full academic and physical potential. The goal of these standards is to provide a framework for schools to make positive changes that would increase the availability of nutritious foods.

While the Federal government has established nutrition standards for school breakfast and lunch meals served under the national School Lunch Program (NSLP) and School Breakfast Program (SBP), the greatest challenge to promoting healthy food choices in schools is that other foods and beverages are sold in competition with school meals. Competitive foods include foods from vending machines, school stores, snack bars, fundraisers, and others. Currently there are no statewide standards in place for competitive foods in Virginia.

In general, competitive foods are high in fat, added sugar, and calories, and low in important nutrients. (Examples include candy bars, chips, and sodas.) Over the past few decades, there has been an increase in the availability of these foods in the school setting. When children replace school meals with these less nutritious foods, they are at risk for inadequate nutrient intake and excess calorie intake. When these foods are purchased in addition to school meals, there is the risk of over-consumption that may contribute to overweight and obesity.

Schools play a crucial role in promoting and supporting children as they develop healthy eating habits. Virginia Action for Healthy Kids (VAFHK) recommends that all schools adopt nutrition integrity guidelines to help facilitate schools' ability provide students with nutritious options, based on the following precepts:

- A healthy, well-nourished student is ready to learn and will stay in school.
- Children should be given plentiful opportunities to choose nutritious foods.
- Schools should provide quality nutrition education in addition to healthful foods, so students not only have access to healthy options, but also gain the knowledge, skills, and motivation to make nutritious food choices.
- High calorie, low nutrient items should be limited by access and/or portion size, since they contribute to excessive calories and possibly overweight. A variety of nutritious, appealing, and culturally appropriate foods and beverages should be available to all students.
- Schools should be encouraged to participate in the National School Lunch and Breakfast programs and actively promote student participation, since these programs are mandated to provide well-balanced nutritious meals for all students, based on the *Dietary Guidelines for Americans*.

Report from the Joint Committee of the Board of Education and the Board of Health

APPENDIX E

Virginia Action For Healthy Kids --Recommendations for School Nutrition Standards

These nutrition recommendations are provided as a guide or template for schools to use when developing local nutrition policies. They are based, in part, upon the *Dietary Guidelines for Americans 2000* and the *U.S. Surgeon General's Call to Action*, and were developed by the Virginia Action for Healthy Kids, a coalition of educators, health professionals, and community members aimed at promoting health and academic achievement among Virginian youth. For more information, visit: www.ext.vt.edu/actionforhealthykids or contact Dr. Serrano at serrano@vt.edu

Definitions: The following general definitions apply to all recommendations

School Day - from 6:00 am until the end of the last instructional period

Campus - school building and grounds

Competitive Foods - Foods and beverages offered in competition with the school meal programs

	Recommendation	Rationale
General Recommendations	<ol style="list-style-type: none"> 1) Require all foods and beverages offered anywhere on the school campus to incorporate the recommendations of VAFHK 2) Prohibit competitive foods of minimal nutritional value on campus during the school day 3) Encourage fund-raising organizations to limit sale of high fat or high calorie foods of minimal nutritional value 4) Establish a school breakfast program if the school does not have one 5) Establish a Nutrition Advisory Council in schools consisting of administrators, teachers, school nutrition personnel, students, parents and community partners 	<ul style="list-style-type: none"> • The school environment should support and teach healthy eating and learning in order to provide students the skills to build and maintain a healthy lifestyle. • Breakfast provides students with needed nutrients. Participation in school breakfast has been demonstrated to improve test scores, composite math and reading percentile scores, class participation, and reduce absences. • Nutrition Advisory Councils provide opportunities for parental and community involvement in nutrition-related activities at schools

Virginia Action For Healthy Kids --Recommendations for School Nutrition Standards

	Recommendation	Rationale	Suggestions
Beverages	Beverages that contain <u>at least 25%</u> fruit juice with no added sweeteners	Fruit contains important nutrients and is linked to disease prevention	Fruit juices with 25% minimum fruit juice. Optimum would be 100% real fruit juices
	Water	Water is an essential nutrient and a healthy beverage choice	Bottled water without added sugar, artificial sweeteners or caffeine
	Low-fat (1%), non-fat milk	Milk is a good source of calcium, which is important for long-term bone health. Offering low or non-fat milk promotes calcium consumption without contributing unnecessary calories and fat	Low-fat (1%) and non-fat milk and flavored milks
	Eliminate sale of:		
	Soft drinks, sport drinks, punch, and other juice drinks containing less than 25% real fruit juice	These drinks provide little nutritional value, replace more healthful alternatives, and promote tooth decay	
	Beverages that contain caffeine (except chocolate milk*) *Chocolate milk is a good source of calcium	Caffeine is considered an addictive substance	
	Carbonated beverages (including flavored and unflavored sparkling waters)	Research indicates carbonated beverage consumption directly affects and replaces more healthful alternatives in the diet. Carbonated beverages cannot be sold as part of USDA guidelines	

Virginia Action For Healthy Kids --Recommendations for School Nutrition Standards

	Recommendation	Rationale	Suggestions
Snacks, Sweets, Side Dishes	<p><u>Portion Size</u> Less than 300 kcal (calories) per item</p>	<p>Larger serving sizes may lead to over-consumption</p>	<p>See chart on page 5.</p>
	<p><u>Fat</u> No more than 30% of total calories from fat, except nuts and seeds.**</p> <p>**Although high in fat and calories, nuts and seeds are high in monounsaturated fat, which can help lower "bad" LDL cholesterol and maintain "good" HDL cholesterol. Note: Some children experience allergic reactions to nuts, particularly peanuts.</p>	<p>High fat foods contribute to the intake of unnecessary calories without added nutrients</p>	<p>Pretzels, baked potato and corn chips, some popcorns, some granola bars, yogurt (preferably low-fat or non-fat), low-fat string cheese, nuts and seeds**</p>
	<p><u>Saturated Fat</u> No more than 10% of calories from saturated fat</p>	<p>Foods that are high in saturated fat increase the risk of coronary heart disease by raising blood cholesterol</p>	<p>See suggestions above under "fat"</p>
	<p><u>Sodium</u> Use in moderation</p>	<p>The <i>Dietary Guidelines for Americans 2000</i> urges moderation in sodium intake</p>	<p>Low-sodium snacks</p>
	<p><u>Sugar</u> No more than 35% by weight⁺</p> <p>⁺Except fresh, dried or canned fruits and vegetables, without additional sweeteners</p>	<p>Foods and beverages that are high in sugar are often high in calories and low in nutrients.⁺ They also promote dental caries</p>	<p>Some granola bars, trail mix, animal crackers, graham crackers, frozen fruit bars, frozen yogurts, light ice creams, light puddings and gelatins</p>

Report from the Joint Committee of the Board of Education and the Board of Health
APPENDIX E
Virginia Action For Healthy Kids --Recommendations for School Nutrition Standards

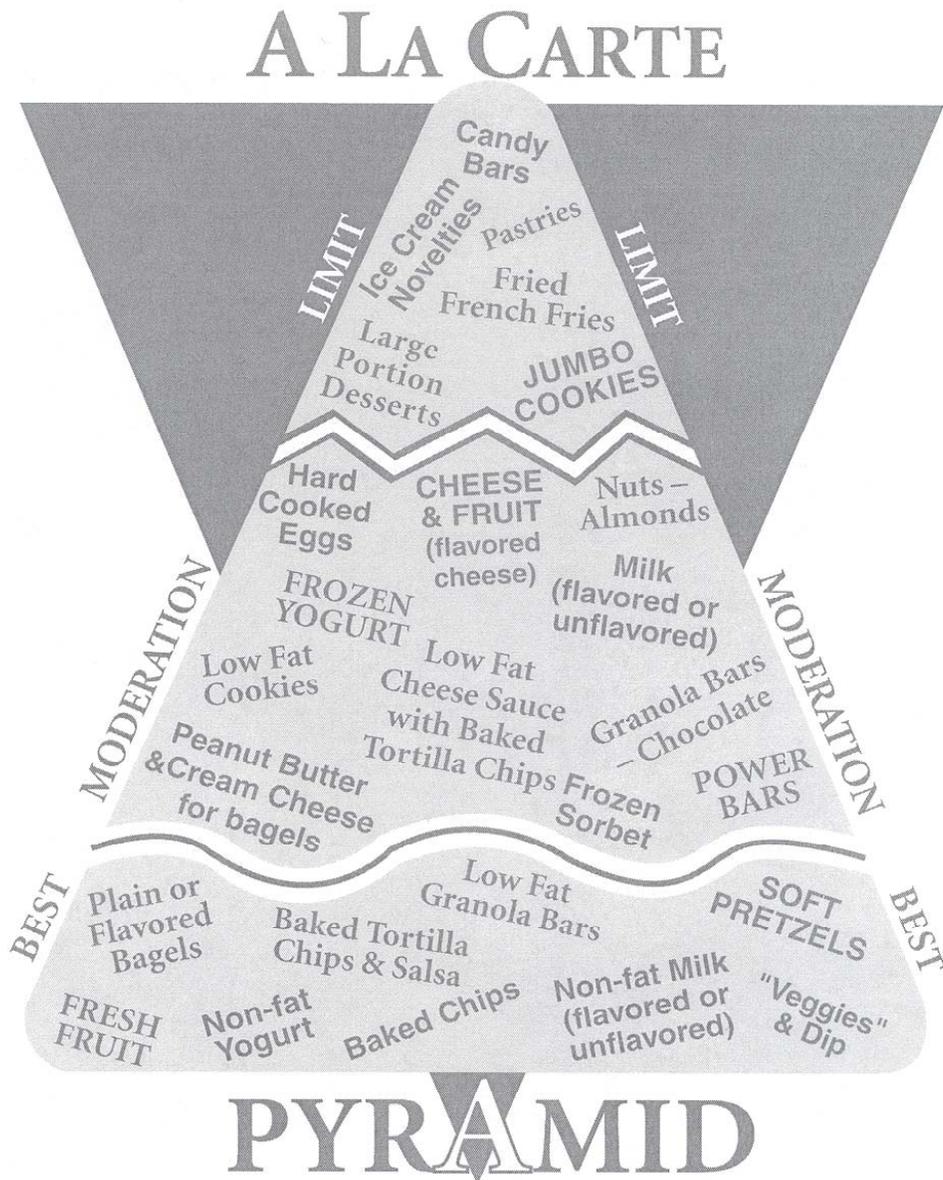
	Recommendation	Rationale	Suggestions
Whole Grains, Fruits and Vegetables	<u>Whole Grains</u> Encourage the use of whole grain breads and cereals	A diet with adequate fiber helps prevent colorectal cancers, aids in good digestion, and may reduce cholesterol	Whole grain breads and whole-grain snacks
	<u>Fruits and Vegetables</u> Require the availability of high-quality fruits and vegetables on the school campus	Fruits and vegetables are rich in vitamins, minerals, and fiber, and low in calories. Adequate fruit and vegetable intake among youth is a problem, with access being one of the top barriers	All fruits and vegetables: fresh, cooked, dried and canned without additional sweeteners

Suggested Portion Sizes¹

Snacks and Sweets Chips, crackers, popcorn, cereal Trail mix, nuts, seeds, dried fruit, jerky	1.25 oz
Cookies / cereal bars	2 oz
Bakery items (e.g., pastries, muffins)	3 oz
Frozen desserts, ice cream	3 oz
Yogurt	8 oz
Beverages (no limit on water or milk)	12 oz

¹Calories should be 300 kcal (calories) or less per item

Report from the Joint Committee of the Board of Education and the Board of Health
 APPENDIX F
 GUIDELINES FOR SNACKS



Guidelines for Snackers

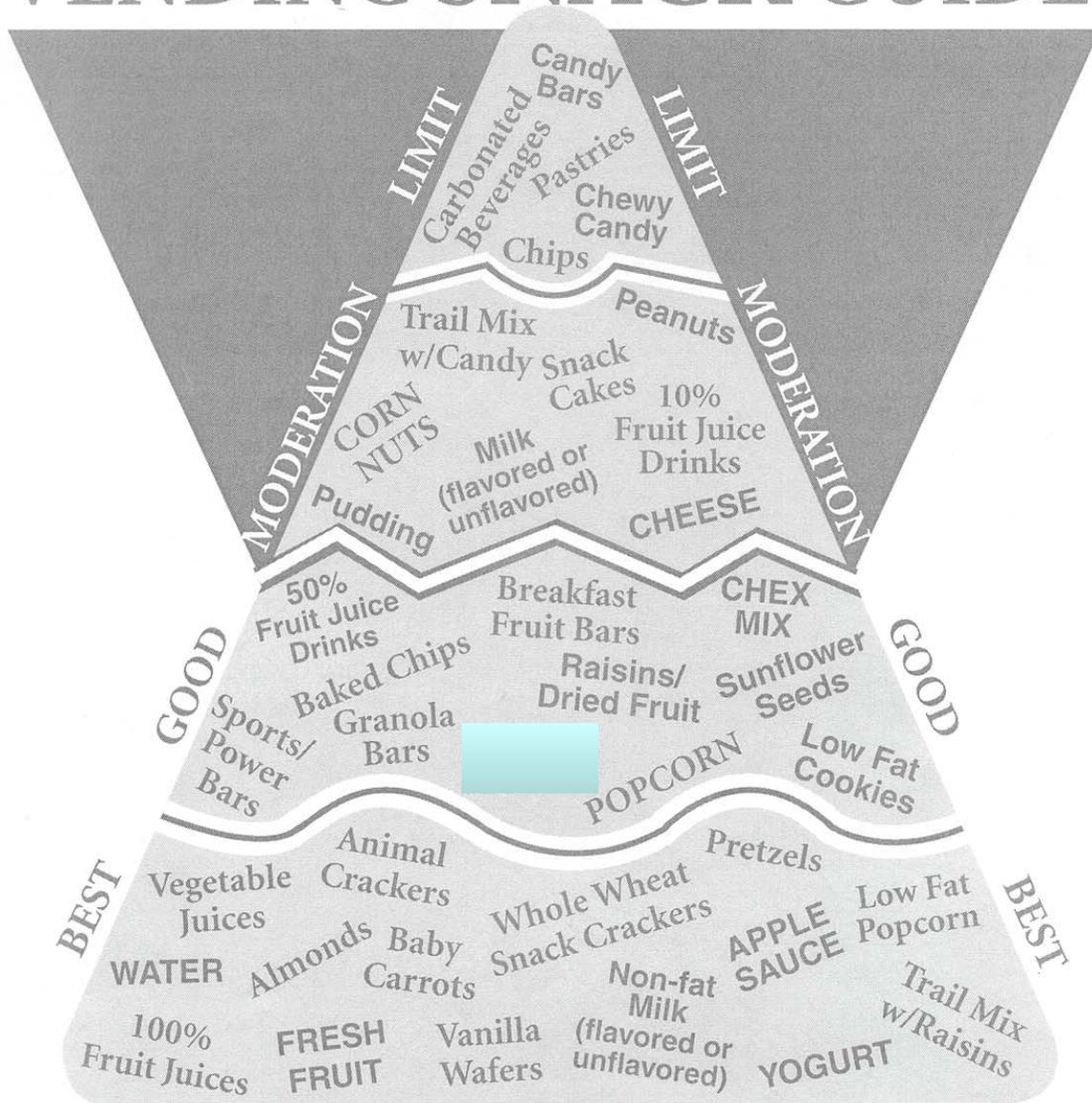
Most Americans eat 3 snacks per day, so...

Snack in small portions

Watch calories and serving size, not just fat grams – Low fat does not always mean low calorie

Snack Guide information provided by The Minnesota Department of Children, Families & Learning • January 2003

VENDING SNACK GUIDE



PYRAMID



Team Nutrition Handouts



Grab and Go Snacks.....

Grab and Go Snacks

- Pack snacks in individual portion sizes in small snack size bags- it's economical. Pack items that you can pull out with your fingers and are not fussy to eat.
- Pretzels! Try honey-mustard!
- Baby carrots
- Raisins
- Grapes
- Mozzarella cheese cubes
- Graham crackers, vanilla wafers, gingersnap cookies, animal crackers
- Popped popcorn topped with cheese sprinkles
- Crackers and cheese or peanut butter
- Milk chugs or cartons
- 100% fruit juice
- Sandwiches/turkey and cheese (pack lettuce/tomato separately to avoid a soggy sandwich)
- Snack packs of gelatin, pudding, applesauce, and canned fruit
- Low-fat yogurt cartons
- Try these snack food combinations:
 - cottage cheese + fruit
 - grapes + mozzarella cheese sticks
 - bagel/pizza sauce + melted mozzarella cheese
 - 1/2 pita break + sliced turkey or other meat
 - low-sugar cereal + skim milk
 - crackers + peanut butter or cheese