

# FLORIDA HEALTHY SCHOOLS

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## FLORIDA DOH PARTNERS WITH DOE, CODA, AND FAHPERDS FOR MIDDLE SCHOOL PHYSICAL ACTIVITY PROJECT

The Florida Department of Health (DOH) Bureau of Chronic Disease Prevention & Health Promotion and the Department of Education (DOE) Office of Healthy Schools (OHS) are pleased to announce the award of \$1.9 million dollars of American Recovery & Reinvestment Act Funds to implement the Middle School Physical Activity Project.

The development of this competitive application was a joint effort between DOH, DOE, the Council of District Administrators of Physical Education (CODA), and Florida Alliance for Health Physical Education, Recreation, Dance and Sport (FAHPERDS). Letters of Commitment were also received from the Alliance for a Healthier Generation, Coordinated School Health Partnership, Florida Association of District School Superintendents, Governor's Council for Physical Fitness, and Governor Charlie Crist.

***“Physical activity reduces the risk of premature mortality in general and of coronary heart disease, hypertension,***

***colon cancer, and diabetes mellitus in particular. Regular physical activity in childhood and adolescence improves strength and endurance, helps build healthy bones and muscles, helps control weight, reduces anxiety and stress, increases self-esteem, and may improve blood pressure and cholesterol levels. Positive experiences with physical activity at a young age help lay the basis for being regularly active throughout life.”***

Centers for Disease Control and Prevention (CDC)

The Florida Middle School Health Behavior Survey (MSHBS), and the Youth Risk Behavior Survey (YRBS) data for 2009 show that 56.9% of Florida sixth grade students were physically active for a total of at least 60 minutes per day on five or more of the past seven days. By twelfth grade the number had decreased to only 36.8%. Intervention at the middle school level is critical to preventing this sharp decline. The survey data also show that nearly 30% of students were physically active for 30 minutes or less during an average 50 minute physical education



class.

Although physical activity and physical education are closely related, physical education goes beyond participation. It helps students develop the knowledge, skills, and attitudes necessary to lead an active, healthy lifestyle.

Numerous studies and publications such as the John W. Gardner Center for Youth and Their Communities; *Exploring the Link between Physical Fitness and Academic Achievement*, available at [http://jgc.stanford.edu/docs/YDA\\_IssueBrief\\_Fitness.Im.pdf](http://jgc.stanford.edu/docs/YDA_IssueBrief_Fitness.Im.pdf) document the link between physical fitness and academic success.

This project is designed to provide resources to implement *Sports, Play, and Active Recreation for Kids (SPARK)*. Resources include curricula, training, and supplies, as well as a staff person to coordinate the implementation statewide.

The SPARK curriculum has

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been endorsed by the CDC and the National Heart, Lung, and Blood Institute, and has been evaluated through several studies, which include Middle School Physical Activity and Nutrition (M-SPAN) and Trial of Activity for Adolescent Girls (TAAG). Results consistently show a significant increase in the quality and quantity of physical activity for participants.

The Department of Health will administer the grant and the Department of Education will coordinate statewide implementation. The effort will be sustained by creating a cadre of regional trainers; providing ongoing technical assistance; sharing best practices; and providing additional physical activity/education resources through the DOE CSHP Resource Center.

Increasing the quality and quantity of physical activity in physical education classes in Florida middle schools is expected to lead to improvements in both health and educational outcomes.

## “LIFE 101: True Confessions of a Reformed Couch Potato”

By Suzanne Borges Santa Rosa Pelican Dec. 30, 2009 Reprinted with permission from the Pensacola News Journal

At my house is a sofa that we call the *Couch Monster*. Somewhat stylish yet serviceable, the Couch Monster waits for its next victim to relax upon it. Once in its clutches, a couch potato will seldom complete what he or she is reading or watching before sleep overcomes or the will to avoid spud-like dormancy is sapped away, especially during winter or after a long day at work. Certainly New Year resolutions for a fitter 2010 are doomed while resting on the Couch Monster.

Apparently, the Santa Rosa School District has heard of our Couch Monster. Either that or increases in employee health insurance premiums reached a tipping point. “We are constantly looking for ways to reduce that cost,” said Karen Retherford, Human Resource Services Manager. “The Superintendent and school board agree that prevention and wellness are key elements in controlling health care costs.” After hearing presentations from four companies that offer wellness programs, the district chose Virgin Health Miles with an annual cost of \$186,805 to the district for the first year and to each participant of five dollars monthly. To sweeten the deal, the district’s health insurance provider, Blue Cross Blue Shield of Florida, offered a one-percent credit on their annual renewal if the district implemented a wellness program. The district considers a wellness program as a win-win for everyone, Retherford said. “The World Health Organization estimates that 70 percent of all medical claims are for preventable causes,” she said. “Just think what an impact that could make on our health insurance claims experience!”

Designed by the same corporation which runs Virgin Airlines, the district’s Virgin Health Miles program provides each participant with a pedometer called a “GoZone” which records its wearer’s steps and syncs through software and a USB cable at an employee’s personal or work computer to the Virgin Health Miles web site. In addition to uploading GoZone steps, the site tracks daily activity for participants by duration, distance or calories burned; provides motivators like reward points and five achievement levels (giving real cash or discounted shopping); and encourages activity challenges among those enrolled in the program. That last feature brings out the competitive nature in employees like me who never want to finish in last place.

By early December, 44 percent of the school district’s workforce (1,087 people) were participating, a slightly higher percentage than is typical of companies that use Virgin Health Miles. More importantly, 71 percent of the local participants are age 40 or over. Within six weeks of beginning October 15, 144 employees had achieved Level 2 status and were rewarded with \$50 each in their Health Miles accounts, which can accumulate up to \$500 each per year, a nice Christmas bonus for 2010.

I was skeptical of the success of the program for a couch potato like me, especially with my arthritic feet and tender knees. However, I figured that for five bucks a month I could at least try for Level 2 and recoup my financial investment by summer. I reached Level 2 within six weeks, surprising both me and my family. Where once I was pleased to record 5,000 steps per day, now anything under 10,000 steps is cause for self-chastisement. I may not lose much weight (my husband believes that eating Peanut M&M’s while exercising can not be beneficial), but I can now find the power switch on our treadmill and walk twice as far and twice as fast in one 20 minute session. That little GoZone at my waist or on my shoe was annoying at first. It was like having Pinocchio’s Jiminy Cricket constantly making me feel guilty for sitting in one place for long. But, by December, I was addicted to the gadget, as were other school employees.

Kathie Lewis, a bookkeeper at King Middle School, said the GoZone has motivated her to find reasons to walk during the day. “I park farther away in the mall parking lots, and I now personally deliver items to my teachers at school.” “I love the fact that I am doing something for me!” said Linda Johnsen, a guidance counselor at Holley Navarre Intermediate School. “I decided that I give of my time and energy to others all day, and this is a way I could give something to myself.” “I have a competition going with myself that I walk at least 10,000 steps a day,” Johnsen said. “And it’s working. I am already at Level 2 because I am making my exercise a priority. I know that my commitment to 10,000 steps a day has helped me manage my stress level.” The experience has created a team spirit among employees, both Johnsen and Lewis said. They cheer each other on and enjoy sharing stories about wearing the GoZone. The program fits the personality and lifestyle of fourth grade teacher Shelley Mann of Gulf Breeze Elementary. In addition, knowing that a \$500 prize is offered helps. Mann said it’s been fun for her to see how Gulf Breeze area students from elementary to high school are noticing their teachers’ pedometers, piquing their interest in the program, too.

Mann and many of us have benefited from the program in just two months. It helps us reach goals with peer support. We can keep our GoZone and Health Miles results to ourselves or share our successes. The New Year can be a healthier one, too. “I had great intentions to include a fitness regimen into my days, but the rigors of daily life so frequently stole away my workout time,” Mann said. “More than a few years of ‘virtual exercise’ in my vivid imagination had drifted by in the blink of an eye.”

\* If your district is interested in participating in bi-monthly calls with employee wellness coordinators from around the state contact Carol Vickers at [carol\\_vickers@doh.state.fl.us](mailto:carol_vickers@doh.state.fl.us) or 850-245-4444 ext. 2794

The State of Florida is rich in data. This data can assist your school, School Health Advisory Committee (SHAC), or district in completing needs assessments, setting priorities, planning initiatives, developing policy, and applying for funding. The available data answer four key questions. What behaviors do students say they participate in?, What do schools say they teach? What do parents say about the health and behaviors of their children? What does the data show about health outcomes?

### **What Students Say They Do:**

The **Florida Youth Survey (FYS) Workgroup**, including the Florida Youth Tobacco Survey (FYTS), and Florida Youth Substance Abuse Survey (FYSAS), was created to minimize costs and disruption of classrooms by the multiple survey efforts. The Workgroup was convened to address the logistics and develop a plan to streamline the process of the surveys. The first joint administration of the surveys was in 2000, with samples drawn to be representative at the county level. Due to cost constraints, the workgroup decided to conduct the FYSAS and FYTS county level surveys every other year (in the even numbered years), and to conduct a smaller survey representative at the state-level in the intervening odd-numbered years. Additionally, a state level Youth Risk Behavior Survey was added to the state-level high school surveys beginning in 2001, and a similar survey for middle school students was added to the state-level middle school surveys beginning in 2003.

The **Florida Youth Tobacco Survey (FYTS)** is a self-administrated, confidential, school-based questionnaire survey of Florida public middle and high school students conducted annually by the Department of Health since 1998. The purpose of FYTS is to monitor and evaluate progress of Florida's tobacco control program. The data collected in this survey include the following subject areas: tobacco usage, tobacco use prevention education in school, students' thoughts about tobacco use, influence of anti-tobacco media and influence from tobacco companies, second-hand smoke exposure, and perceptions of tobacco laws among youth.

The FYTS has been supported by many agencies, including the Florida Departments of Education, Children and Families, and Juvenile Justice, school districts throughout the state, and the Office on Smoking and Health at the CDC.

### **Florida Youth Tobacco Survey (FYTS)**

[http://www.doh.state.fl.us/DISEASE\\_CTRL/EPI/CHRONIC\\_DISEASE/FYTS/Intro.htm](http://www.doh.state.fl.us/DISEASE_CTRL/EPI/CHRONIC_DISEASE/FYTS/Intro.htm)

The **Florida Youth Substance Abuse Survey (FYSAS)** is based on the well-known Communities that Care youth survey, assesses the use of alcohol, tobacco and other drugs, the prevalence of delinquent behaviors, and risk and protective factors for substance use and delinquent behaviors. It is administered annually in the spring semester to Florida public middle and high school students. In odd numbered years it is administered to a statewide sample of youth, to be representative at the state level. In even numbered years the sample is selected to be representative at the county (i.e. school district) level, providing data for local prevention planning.

During the first legislative session after Governor Bush's election (1999 session) the legislature created the Office of Drug Control (ODC) within the Governor's office. One of the first orders of business of the new director of ODC was to institute the Florida Youth Substance Abuse survey through the Department of Children and Families Substance Abuse Program Office.

**Florida Youth Substance Abuse Survey (FYSAS)** <http://www.preventioninflorida.org/survey.asp>

The **Youth Risk Behavior Survey (YRBS)** is a Centers for Disease Control and Prevention (CDC) sponsored, self-administrated, confidential, school-based questionnaire survey of Florida public high school students conducted every odd-numbered year since 1991. Since 2001, the increased response rates have facilitated analyses of the YRBS data to produce state level prevalence. Six areas are targeted in this survey: unintentional injuries and violence, tobacco use, alcohol and other drug use, sexual behaviors, dietary behaviors, and physical activity.

### **Youth Risk Behavior Survey (YRBS)**

[http://www.doh.state.fl.us/disease\\_ctrl/epi/Chronic\\_Disease/YRBS/Reports.htm](http://www.doh.state.fl.us/disease_ctrl/epi/Chronic_Disease/YRBS/Reports.htm)

The **Middle School Health Behavior Survey (MSHBS)** was developed and conducted for the first time in 2009. Questions mirror the YRBS with the exception of questions related to sexual behavior which are not included in the middle

## Calendar of Upcoming Events in Spring 2010

Florida School Health Association Conference

May 13-14

Altamont Springs

<http://www.fsha.net/>

**Florida's Coordinated School Health Partnership**

Your DOH and DOE Staff Contacts		
DOH Bureau of Chronic Disease Prevention and Health Promotion RN Consultant : Carol Vickers	850-245-4330	
DOH School Health Services Office: TBA	850-245-4445	
DOE Office of Healthy Schools Director: Penny Detscher	850-245-5089	
Assistant Director: Dr. Antionette Meeks	850-245-0480	
Physical Education: Nichole Wilder	850-245-0480	
Nutrition and Healthy Schools: Katie Rainka	850-245-0480	
HIV/AIDS Prevention: Ksena Zipperer	850-245-9952	
Resource Center: Eileen Smith	850-245-0978	
Tobacco Grants: Lynn Vinson	850-245-0480	
Program Evaluator: Shannon Starace	850-245-0480	



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**Data (cont.)**

school survey. The MSHBS is administered on the same schedule as the YRBS and is a state level survey.

**Middle School Health Behavior Survey (MSHBS)** <http://www.floridachronicdisease.org/MSHBS/index.htm>

**What Schools Say They Teach:**

The Florida Department of Education's Office of Healthy Schools conducts Florida's statewide survey effort. Principals of selected schools respond to questions primarily on policies, practices, and programs associated with school health. Teachers answer questions focused on health education as they relate to professional development needs and the content and skills they teach their students. The questions focus on the content (components of health education) and skills found in Florida's Next Generation Sunshine State Standards for health education ([www.floridastandards.org](http://www.floridastandards.org)).

Specific topics included in the teacher's survey are:

- Alcohol and Other Drugs
- Asthma Awareness

- Emotional/Mental Health
- Food Borne Illness Prevention
- HIV Prevention
- Human Sexuality
- Injury Prevention and Safety
- Nutrition and Dietary Behavior
- Physical Activity and Fitness
- Pregnancy Prevention
- Sexually Transmitted Disease (STD) Prevention
- Suicide Prevention
- Tobacco Prevention
- Violence Prevention

**School Health Profiles**  
<http://www.fldoe.org/BII/CSHP/Education/fshps.asp>

**What Parents Say About their Children's Health and Health Behavior**

Behavioral Risk Factor Surveillance Survey (BRFSS) is a rolling telephone survey of Florida adults on a wide range of health issues including, but not limited to: physical activity, diet, tobacco and alcohol use, HIV/AIDS, asthma, diabetes, and cancer screen-

ings. This survey has been conducted annually since 1986 in Florida. In 2009 a parent callback component was added to assess parent perception of the health and behaviors of their children.

**BRFSS Callback Survey** reports are pending, however, preliminary results are available. : Contact Jamie\_weitz@doh.state.fl.us

**What the Data Show is Happening**

The Community Health Assessment Resource Tool Set (CHARTS) of the Department of Health contains health data available on the state and county levels.

In 2007 a partnership between the Departments of Health, Education, Children and Families and Juvenile Justice resulted in the development of the School-Aged Child and Adolescent Profiles. Data from all of the agencies is available on this one site, eliminating the need to search multiple agency data bases.

**Community Health Assessment Resource Tool Set (CHARTS)**  
School aged Child and Adolescent Profile

<http://www.floridacharts.com/charts/SpecReport.aspx?RepID=7245>