

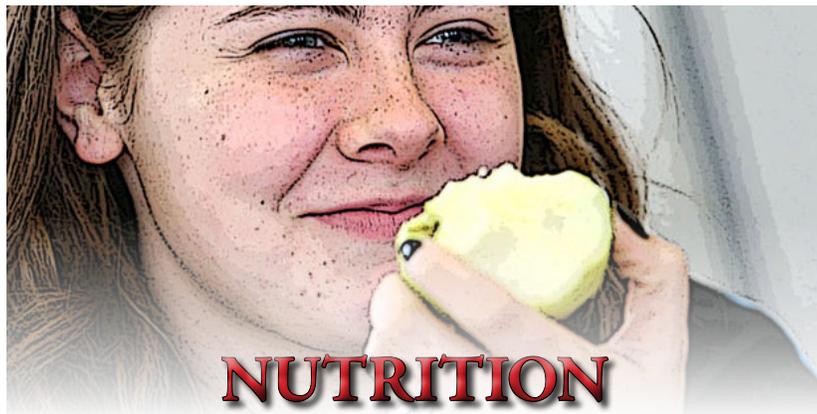
PANTA Plus

# Nutrition



For the latest  
Kentucky Youth Risk Behavior Survey data:





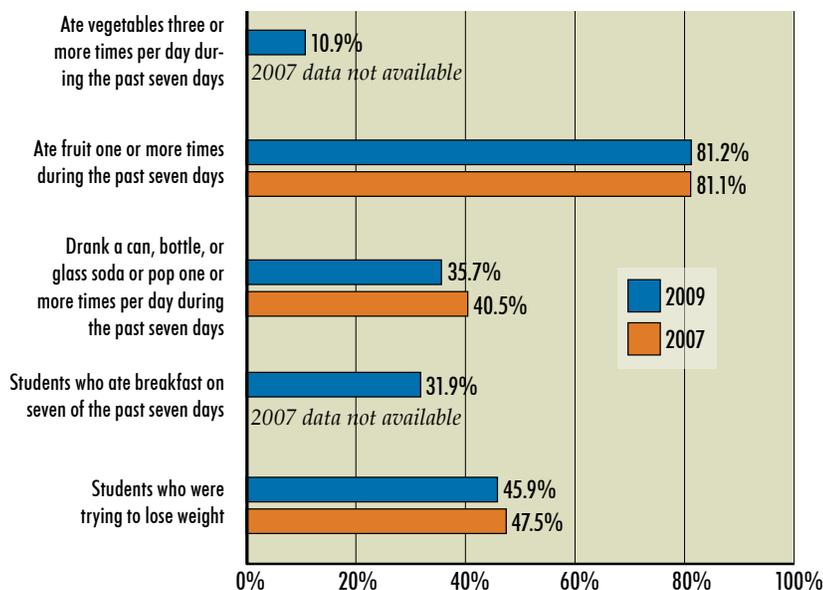
## High School Fact Sheet

Healthy eating is associated with reduced risk for many diseases, including the three leading causes of death: heart disease, cancer, and stroke. Healthy eating in childhood and adolescence is important for proper growth and development and can prevent health problems such as obesity, dental caries, and iron deficiency anemia.<sup>1</sup> Kentucky has some of the highest rates in the country of students that are obese (17.6%) or overweight (15.6%). Only (14.2%) of students are consuming enough fruits and vegetables each day while trying to lose weight in unhealthy ways by taking diet pills, powders, or liquids (7.0%) or by not eating for 24 or more hours (12.5%).

<sup>1</sup> Centers for Disease Control and Prevention. <http://www.cdc.gov/HealthyYouth/nutrition/index.htm>. Retrieved 7/28/08.

### Nutrition in Kentucky

The following graph represents the nutrition behaviors of high school students in 2007 and 2009. Please note that none of the data represent statistically significant changes.



The YRBS is a nationwide survey produced by the Centers for Disease Control and Prevention (CDC) Division of Adolescent and School Health (DASH) to monitor the six priority health-risk behaviors of adolescents: alcohol and drug use, injury and violence (including suicide), tobacco use, nutrition, physical activity, and sexual risk behaviors. The data is collected from students in 9<sup>th</sup> through 12<sup>th</sup> grades every two years.

### Youth Disproportionately at Risk

- Females (36.5%) were more likely than males (24.2%) to have described themselves as slightly or very overweight
- Females (60.5%) were more likely than males (32.3%) to have been trying to lose weight
- Blacks (85.9%) were more likely than whites (71.2%) to have drunk 100% fruit juices one or more times during the past seven days
- Whites (79.2%) were more likely than blacks (60.9%) to have eaten potatoes one or more times during the past seven days
- Whites (37.5%) were more likely than blacks (24.9%) to have drunk a can, bottle, or glass soda or pop one or more times per day during the past seven days

### For More Information

For additional KY YRBS data and other YRBS fact sheets, visit the KDE website at: <http://www.education.ky.gov/KDE/Administrative+Resources/School+Health/Youth+Risk+Behavior+Survey.htm>

For national data or more information on the YRBS, visit the CDC website at: <http://www.cdc.gov/HealthyYouth/yrbs/index.htm>





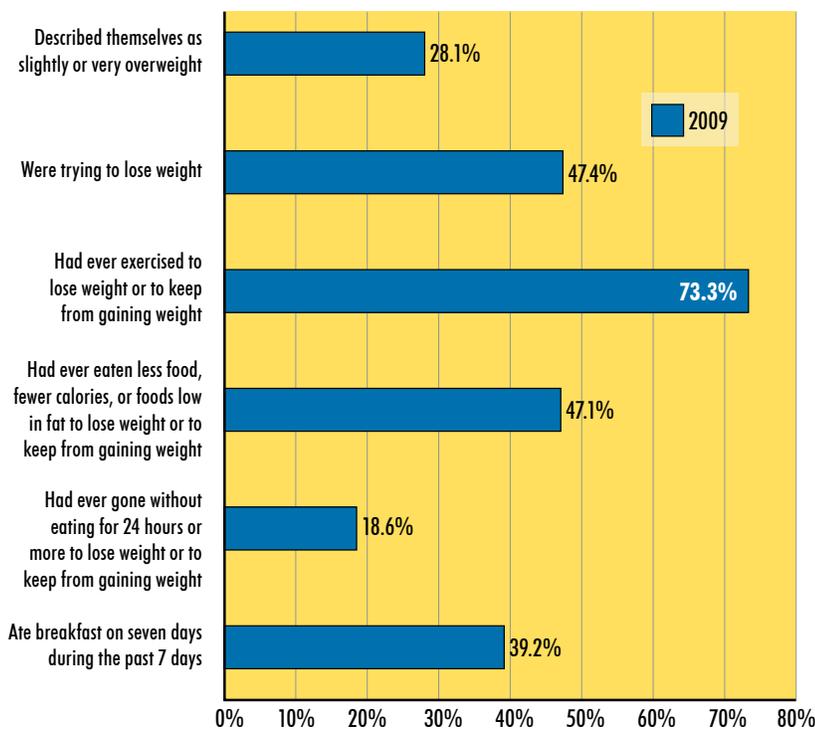
## Middle School Fact Sheet

Healthy eating is associated with reduced risk for many diseases, including the three leading causes of death: heart disease, cancer, and stroke. Healthy eating in childhood and adolescence is important for proper growth and development and can prevent health problems such as obesity, dental caries, and iron deficiency anemia.<sup>1</sup>

<sup>1</sup> Centers for Disease Control and Prevention. <http://www.cdc.gov/HealthyYouth/nutrition/index.htm>. Retrieved 7/9/09.

### Nutrition in Kentucky

The following graph represents the nutrition behaviors of middle school students in 2009. No comparison data is available.



The YRBS is a nationwide survey produced by the Centers for Disease Control and Prevention (CDC) Division of Adolescent and School Health (DASH) to monitor the six priority health-risk behaviors of adolescents: alcohol and drug use, injury and violence (including suicide), tobacco use, nutrition, physical activity, and sexual risk behaviors. In 2009, Kentucky was one of 14 states who administered a middle school YRBS to students in grades 6th through 8th.

### Youth Disproportionately at Risk

- Females (55.4%) were more likely than males (40.1%) to have been trying to lose weight
- Females (78.6%) were more likely than males (68.5%) to have ever exercised to lose weight or to keep from gaining weight
- Females (56.8%) were more likely than males (38.1%) to have ever eaten less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight
- Females (24.1%) were more likely than males (13.6%) to have ever gone without eating for 24 hours or more to lose weight or to keep from gaining weight
- Females (8.4%) were more likely than males (3.7%) to have ever vomited or taken laxatives to lose weight or to keep from gaining weight
- Hispanic/Latinos (14.1%) were more likely than whites (5.9%) to have ever vomited or taken laxatives to lose weight or to keep from gaining weight
- Males (46.6%) were more likely than females (31.3%) to have eaten breakfast on seven days during the past seven days

### For More Information

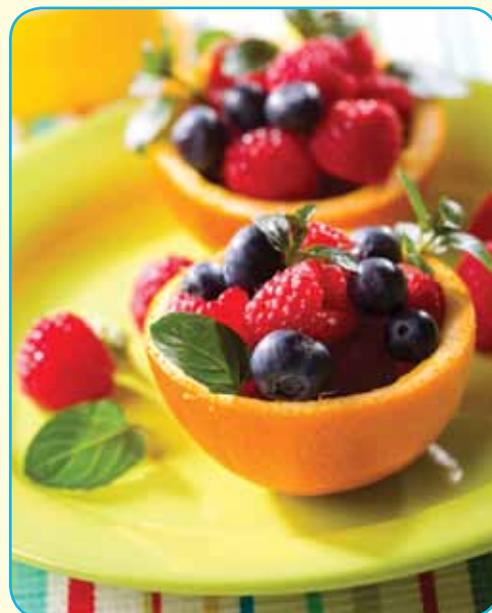
For additional KY YRBS data and other YRBS fact sheets, visit the KDE website at: <http://www.education.ky.gov/KDE/Administrative+Resources/School+Health/Youth+Risk+Behavior+Survey.htm>

For national data or more information on the YRBS, visit the CDC website at: <http://www.cdc.gov/HealthyYouth/yrbs/index.htm>



## Data

- One in three (or over 331,000) Kentucky children are seriously overweight or at risk of becoming overweight. (2007 YRBS, 2007 PedNSS, 2007 Kids Count)
- One in three babies born in Kentucky in 2000 will develop diabetes during their lifetime. (NGA Investing in Kentucky's Health)
- Over half of Kentucky students (54%) participating in the National School Lunch Program receive free or reduced lunch. (KDE)
- This is the first generation that is predicted to have a shorter life span than their parents. (Robert Wood Johnson Foundation. Childhood Obesity Framing Document)



## Emerging, Promising and Best Practices

**Environment Nutrition Activity Community Tool (ENACT)** Best practices and promising approaches strategies to improve nutrition and physical activity environments <http://www.preventioninstitute.org/sa/enact/members/index.php>

**Choose 1% or Less Campaign.** The 1% Or Less campaign is a health-education program that aims to increase calcium intake while reducing the total saturated fat consumption by encouraging adults and children over two years to switch from drinking whole or 2% milk to 1% or fat-free (skim) milk. The campaign materials include: guidelines for blind milk taste tests and classroom activities for elementary, middle and high school students. For more information, contact the Nutrition Services Branch at the Department for Public Health at 502-564- 3827.

[http://healthymeals.nal.usda.gov/nal\\_display/index.php?info\\_center=14&tax\\_level=2&tax\\_subject=552&level3\\_id=0&level4\\_id=0&level5\\_id=0&topic\\_id=2160&&placement\\_default=0](http://healthymeals.nal.usda.gov/nal_display/index.php?info_center=14&tax_level=2&tax_subject=552&level3_id=0&level4_id=0&level5_id=0&topic_id=2160&&placement_default=0)

**Dairy Council Tools for Schools.** The National Dairy Council offers valuable information and resources designed to help health care professionals, school nutrition professionals, and teachers ensure that children 9 years of age and older get the Dietary Guidelines for Americans. The Dairy Council website provides nutrition and product information, resources

for health professionals, media center, tools for education, recipes, health tips and more. <http://www.nationaldairyCouncil.org/educationmaterials/Pages/Education-MaterialsHome.aspx>

**Centers for Disease Control and Prevention.** CDC provides a website full of information on ways to increase fruits and vegetables consumption including eating on the go, family dinners, back-to-school tips for parents, and the importance of fruits and vegetables. The Fruit and Veggie of the Month suggests uses, where and how it is grown and nutritional information for the selected item of the month. CDC also offers a Fruit and Veggie Recipe database and interactive tools which demonstrate healthier options for recipes and meal planning, such as Analyze My Plate and Recipe Remix. <http://www.fruit-sandveggiesmatter.gov/>

**Fruits and Veggies: More Matter.** This website contains a database of video demonstrations on the selection and preparation of fruits and veggies, as well as a fruit and vegetable database on selection, storage, and nutrition facts information. A fruit and vegetable blog and ask the expert gives users an opportunity to interact with others in finding ways to increase consumption of fruits and vegetables. A recipe database gives quick, easy tips for meals, how to cook vegetables, kids meals and more. There are educational materials for teachers including games and activity sheets, and

information on worksite wellness programs. Check out the interactive game, Food Champs (<http://www.foodchamps.org/>). <http://www.fruitsandveggiesmoreoften.org/>

**Produce for a Better Health Foundation Website** serves as a go-to resource for fruit and vegetable education and marketing. This website provides a multitude of resources for schools, food service and educators. These resources include: School Food Service Guide, Crunch the Numbers Curriculum, There's a Rainbow on My Plate Curriculum, Healthy Eating with Peanuts and Produce Curriculum, and lots of Kids Activity Sheets including some with Over the Hedge Theme. In addition, they have healthy vending options and healthy fundraising tips. Check out the Love Your Veggies Contest and grant opportunities. <http://www.pbhfoundation.org/index.php>

**Farm to School** connects schools (K-12) and local farms with the objectives of serving healthy meals in school cafeterias, improving student nutrition, providing agriculture, health and nutrition education opportunities, and supporting local and regional farmers. For guidance on starting farm to school programs, visit <http://www.farmtoschool.org>.

**Eat Smart, Play Hard**® provides practical tools to help you motivate children and their caregivers to eat healthy and be physically active. Messages and materials are fun and based on MyPyramid and the Dietary Guidelines for Americans. <http://www.fns.usda.gov/eatsmartplayhardeducators/>

**MyPyramid** offers personalized eating plans and interactive tools to help you plan/ assess your food choices based on the Dietary Guidelines for Americans. Interactive tools include: MyFood-a-pedia –search food items for nutritional information; MyPyramid Planner – menu planner; MyPyramid Plan – individualize your diet; and MyPyramid Blast Off Game. Lesson plans are available for different age groups. Listen to podcasts and watch PSAs. <http://www.mypyramid.gov/>

**CDC Healthy Schools Healthy Youth** provides key strategies to prevent obesity through the “Make a Difference at Your School” guidelines. You can also search success stories in a variety of topics in Making It Happen! School Nutrition Success Stories. The



Health Education Curriculum Analysis Tool (HECAT) can help school districts, schools, and others conduct a clear, complete, and consistent analysis of health education curricula based on the [National Health Education Standards](#) and CDC's [Characteristics of Effective Health Education Curricula](#). The [Food-Safe Schools Action Guide](#) provides a one-stop resource for preventing foodborne illness. <http://www.cdc.gov/HealthyYouth/>

**WE CAN!** provides education to parents and caregivers of eight to thirteen year olds on: healthy weight basics, healthy eating and physical activity habits and reducing screen time. For information on Kentucky's WE CAN! Program, visit <http://wecanky.com/>. <http://www.nhlbi.nih.gov/health/public/heart/obesity/wecan/>

**Planet Health** is a complete curriculum that helps academic, physical education, and health education teachers guide middle school students in these areas:

- Learning about nutrition and physical activity while building skills in language arts, math, science, and social studies.
- Understanding how health behaviors are inter-related.
- Choosing healthy foods, increasing physical activity, and limiting TV and other screen time. <http://www.planet-health.org>

**The 5 A Day Power Plus and Cafeteria Power Plus Programs** promote fruit and vegetable consumption among elementary school students. The curriculum consists of four components behavioral curricula for the 4<sup>th</sup> and 5<sup>th</sup> grades, parental involvement/education, school food service changes and industry support and involvement. <http://www.health.state.mn.us/divs/hpcd/chp/powerplus/fourthgrade.htm>



# Policy and Environmental Change

Policy and environmental change interventions are population-based approaches that complement and strengthen other public health programs and activities that traditionally have focused on individual behavior change.

Policies include laws, regulations, and formal and informal rules. Examples include all schools offering physical education during school hours; laws and regulations for what can or cannot be included in vending machines at schools; laws and regulations to restrict smoking on school campuses; or regulations permitting students to carry and administer their own asthma medications.

Environmental changes are implemented to improve the economic, social, or physical environments of the school. Examples include incorporating walking paths or recreation areas into school campuses; offering low-fat foods in school cafeterias; removing designated smoking areas from school campuses; or reducing exposure to asthma triggers, such as secondhand smoke in schools.

Food policies establish nutrition standards and create an environment where the healthy choice is the easy choice. For schools, the goal is to ensure consistency between what students learn in the classroom, and the nutrition messages provided within the school environment and through school practices.

## Value and Benefits of School Nutrition Policies

- Healthy kids learn better. Research clearly demonstrates that good nutrition is linked to better behavior and academic performance. To provide the best possible learning environment for children, schools must also provide an environment that supports healthy behaviors.
- Strong school nutrition policies may help schools in providing consistent messages in the provision of healthy foods at: classroom celebrations, school stores and in other areas of the school environment, and demonstrates a school commitment to promoting healthy behaviors. It supports the classroom lessons

students are learning about health - instead of contradicting them.

- Promotes positive eating behaviors in order to positively change eating behaviors throughout the lifespan. Students need to receive consistent, reliable health information and ample opportunity to use it.



- Children who participate in school meal programs have better nutritional intake than those who do not. In addition, participation in the School Breakfast Program has been shown to improve standardized test scores, improve attendance, decrease tardiness, and improve participation in class. (Food Research & Action Center. Child Nutrition Fact Sheet: National School Lunch Program. [www.frac.org](http://www.frac.org))

## Model Policies

Suggested school health policies on nutrition that schools can adopt to encourage and promote healthy eating and education that can be providing on promoting healthy eating:

- Adopt policies ensuring that all foods and beverages available on school campuses and at school events contribute toward eating patterns that are consistent with the Dietary Guidelines for Americans (Dietary Guidelines for Americans 2010 <http://www.cnpp.usda.gov/dietaryguidelines.htm>) (Future updates concerning this area will be addressed in the final regulations for the 2010 Child Nutrition reauthorization Healthy, Hunger-Free Kids Act to be found at: <http://www.fns.usda.gov/fns/>)
- Improve the quality and appeal of school meals



- Develop guidelines for fund raising that promote healthy food items or non food methods
- Serve water to drink; Have clean sources of tap water and/or drinking fountains (Future updates concerning this area will be addressed in the final regulations for the 2010 Child Nutrition reauthorization Healthy, Hunger-Free Kids Act to be found at: <http://www.fns.usda.gov/fns/>)
- Farm to school programs incorporate fresh local produce into school meals while teaching about agriculture (Future updates concerning this area will be addressed in the final regulations for the 2010 Child Nutrition reauthorization Healthy, Hunger-Free Kids Act to be found at: <http://www.fns.usda.gov/fns/>)
- Eliminate marketing of unhealthy food on school grounds
- Provide enough time and space to eat in relaxed environment
- Establish school gardens to expose students to fresh produce while teaching them about how food is grown
- Establish a policy whereby schools will not use food or beverages as rewards of academic performance or good behavior
- Establish nutrition guidelines for classroom policies such as food as a reward and classroom celebrations

Source: National Alliance for Nutrition and Physical Activity <http://www.schoolwellnesspolicies.org/>

## The American Academy of Pediatrics Policy Statement (excerpt)<sup>33</sup>

In a policy statement issued in August 2003 by the American Academy of Pediatrics, pediatricians are encouraged to work with school administrators and others in the community on ways to decrease the availability of foods and beverages with little nutritional value and to decrease the dependence on vending machines, snack bars, and school stores for school revenue. Regarding physical activity, advocacy is sorely needed for physical education programs that emphasize and model learning of daily activities for personal fitness (as opposed to physical education limited to a

few team sports). A statement of reaffirmation for this policy was published on February 1, 2007.

This policy statement, called Prevention of Pediatric Overweight and Obesity<sup>34</sup> asks that doctors actively encourage:

- parents and caregivers to promote healthy eating patterns by offering nutritious snacks, such as vegetables and fruits.
- low-fat dairy foods, and whole grains; encouraging children's autonomy in self-regulation of food intake and setting appropriate limits on choices; and modeling healthy food choices.
- routine promotion of physical activity, including unstructured play at home, in school, in child care settings, and throughout the community.
- the limitation of television and video time to a maximum of 2 hours per day.
- the help of parents, teachers, coaches, and others who influence youth to discuss health habits, not body habitus (physique or body build), as part of their efforts to control overweight and obesity.
- policy makers from local, state, and national organizations and schools to support a healthful lifestyle for all children, including proper diet and the support and advocacy for social marketing intended to promote healthful food choices and increased physical activity.
- organizations that are responsible for health care and health care financing to provide coverage for effective obesity prevention and treatment strategies.
- public and private sources to direct funding toward research into effective strategies to prevent overweight and obesity and to maximize limited family and community resources to achieve healthful outcomes for youth.
- the support and advocacy for social marketing intended to promote healthful food choices and increased physical activity.

## State and Federal Laws

State and federal laws address nutrition standards for school meals and give the opportunity for local development of wellness policies, including nutrition. Local



schools and districts have the ability to enhance these laws through local School Based Decision Making and local Board of Education policies to promote better health of students and staff.

## Kentucky Nutrition and Physical Activity Legislation

In February 2006 the Kentucky legislature passed a bill with minimum nutrition standards for foods & beverages available on public school campuses during the school day as part of school meals or outside of the National School Lunch Program. School Day means the period of time between the arrival of the first student and the end of the last instructional period.

- KRS 158.850 (limitation on retail fast foods in cafeterias)
- KRS 158.852 (district food service directors)
- KRS 158.854 (competitive foods – vending machine sales)
- KRS 158.856 (assessment and reporting on nutrition and physical activity environments)
- KRS 160.345(11) (local wellness policies for elementary schools)

To access these laws go to the Kentucky Department of Education, Division of Nutrition and Health Services website: <http://scn.ky.gov/sb172.htm#ksl>

## Federal Laws

In 2010 the Child Nutrition Reauthorization Healthy, Hunger-Free Kids Act was passed by congress and signed into law. The 2010 Healthy, Hunger-Free Kids Act builds upon the framework of the 2004 Child Nutrition and WIC Reauthorization Act, which required each district to have local school wellness policies for the schools in the district that include goals for nutrition education, physical activity, and other school-based activities.

The 2010 Act continues to set basic standards for school wellness policies including goals for nutrition promotion and education and physical activity, while still permitting local flexibility to tailor the policies to their particular needs.<sup>32</sup>

Some of the 2010 Healthy, Hunger-Free Kids Act components will provide the following<sup>32</sup>:

- Gives the USDA the authority to set nutritional standards for all foods regularly sold in schools

during the school day, including vending machines, the “a la carte” lunch lines, and school stores. (Note that Kentucky’s minimum nutrition standards are located in KAR 702:6:090.)

- Provides additional funding to schools that meet updated nutritional standards for federally-subsidized lunches. This is an historic investment, the first real reimbursement rate increase in over 30 years.
- Helps communities establish local farm to school networks, create school gardens, and ensures that more local foods are used in the school setting.
- Expands access to drinking water in schools, particularly during meal times.
- Sets basic standards for school wellness policies including goals for nutrition promotion and education and physical activity, while still permitting local flexibility to tailor the policies to their particular needs.
- Requires schools to make information more readily available to parents about the nutritional quality of meals.

Future updates as this law becomes common practice in schools can be found at the USDA Food and Nutrition Service: <http://www.fns.usda.gov/fns/>

## Assessment and Planning

*School Health Index* Centers for Disease Control and Prevention – Division of Adolescent School Health. This is an easy-to-use self-assessment and planning tool that enable school health councils and others to analyze the strengths and weaknesses of their school health policies, curricula and services. It is available free to download or request a hard copy. An interactive web version is also available at: <http://www.cdc.gov/healthyyouth/shi/index.htm>. Schools may request technical assistance on the School Health Index by the Department of Education’s Coordinated School Health Program by calling 502-564-2706.

*The Health Education Curriculum Analysis Tool (HECAT)* can help school districts, schools, and others conduct a clear, complete, and consistent analysis of health education curricula based on the [National Health Education Standards](#) and CDC’s [Characteristics of Effective Health Education Curricula](#). The HECAT results can help schools select or develop appropriate



and effective health education curricula and improve the delivery of health education. The HECAT can be customized to meet local community needs and conform to the curriculum requirements of the state or school district.

The following HECAT health topic modules are currently available:

- Alcohol and Other Drugs
- Healthy Eating
- Mental and Emotional Health
- Personal Health and Wellness
- Physical Activity
- Safety
- Sexual Health
- Tobacco
- Violence Prevention

<http://www.cdc.gov/HealthyYouth/HECAT/index.htm>

**Students Taking Charge** Students Taking Charge is a national movement of youth advocates putting their passion for eating right, being active and living healthy into making their schools healthier places. With Students Taking Charge, students have the tools to assess their school nutrition and physical activity environment which supports local initiation of policy change and program development.

Students Taking Charge is a place where students can: develop leadership and advocacy skills, gain knowledge about school health issues, educate school leaders, media, and the general public about important issues; make new friends and provide peer-to-peer education, share their creativity, ideas, and talents. <http://www.studentstakingcharge.org/> Group leader/student sponsor information: [www.studentstakingcharge.org/index.php/group\\_leader\\_center/](http://www.studentstakingcharge.org/index.php/group_leader_center/)

Kentucky Action for Healthy Kids and Coordinated School Health, through the Department for Health and the Department of Education, provide support for this program through training and technical assistance. <http://chfs.ky.gov/dph/mch/cfhi/Coordinated%20School%20Health.htm> and <http://www.actionforhealthykids.org/take-action/>

**Promoting Healthy Youth, Schools, and Communities: A Guide to Community-School Health Councils** American Cancer Society. This guide is designed to assist school districts in developing new school health councils, strengthening existing coun-



cils, and maintaining them as effective entities that can support and guide school health practices, programs and policies. The guide includes a CD-ROM that aids in customizing worksheets and other materials. Visit the American Cancer Society Web site at [www.cancer.org](http://www.cancer.org), [http://www.cancer.org/docroot/PED/content/PED\\_13\\_4x\\_Guide\\_to\\_Community\\_School\\_Health\\_Councils.pdf.asp](http://www.cancer.org/docroot/PED/content/PED_13_4x_Guide_to_Community_School_Health_Councils.pdf.asp)

**Fit, Healthy, and Ready to Learn: A School Health Policy Guide** National Association of State Boards of Education. It is designed to help state and local decision makers establish effective policies that promote high academic achievement and lifelong health habits. It provides guidance on general school health policies and program development, as well as specific information on physical education program design, safety requirements, food service programs, smoking cessation services, and lifelong sun safety habits. Chapter E: Policies to Encourage Healthy Eating. [https://nasbe.org/index.php?option=com\\_content&view=article&id=396:fit-healthy-and-ready-to-learn-a-school-health-policy-guide&catid=53:shs-resources&Itemid=372](https://nasbe.org/index.php?option=com_content&view=article&id=396:fit-healthy-and-ready-to-learn-a-school-health-policy-guide&catid=53:shs-resources&Itemid=372)

**Action for Healthy Kids** Includes resources to improve the quality of food in schools, enhance nutrition education, improve physical education, and increase opportunities for kids to be active. Programs, resources and state information are available. <http://www.actionforhealthykids.org>

A searchable database was developed by Action for Healthy Kids in partnership with CDC to compliment the USDA's local wellness policy Web site <http://www.fns.usda.gov/tn/Healthy/wellnesspolicy.html>



This site helps districts identify policy options and write their own policies. Users can adapt or copy sample language from un-reviewed policies gathered from across the country.

Connect with your state's Action for Healthy Kids – **Kentucky Action for Healthy Kids** at: [http://take.actionforhealthykids.org/site/Clubs?club\\_id=1125&pg=main](http://take.actionforhealthykids.org/site/Clubs?club_id=1125&pg=main)

**Alliance for a Healthier Generation** Find tools and strategies to promote physical activity and healthy eating before, during, and after school. Schools and individuals can join the Healthy Schools Program. Benefits for individuals include: bi-monthly e-newsletter, database of school health grants and resources and school health webinars. Benefits for schools: individual benefits, and free technical assistance, toolkits for implementing best practices, school health assessment and action planning tools, resource database for practical information, grant opportunities and more; networking opportunities with other schools across the country, national recognition awards and bulletin board materials.

<http://www.healthiergeneration.org/schools.aspx> and <http://www.healthiergeneration.org/schools.aspx?id=3277>

## Frequently Asked Questions

### Why is it important to teach nutrition?

Practicing healthy eating is an important life skill that can be taught in nutrition education and/or health class. Nutrition is an important subject just like other subjects taught in schools. What your students eat or don't eat can affect their health, growth and ability to learn. Nutrition education helps students learn about proper nutrition which develops into the skill of healthy eating which can be used for the rest of their lives - making healthy food choices.

### Why students shouldn't skip any meals?

Being hungry in school can have a negative impact on student performance. It can lead to irritability, disinterest in the learning situation and an inability to concentrate.<sup>34</sup>

### Why does a school need a local wellness policy?

It provides an opportunity for school districts to create an environment conducive to healthy lifestyle choices

and recognizes the importance of schools in fighting the epidemic of childhood overweight and obesity.

### What exactly is a healthy diet?

A healthy diet provides all the nutrients we need in a day. The amount a child needs from each food group depends on their age, gender and daily physical activity. Children who are very physically active, for example, need more than children who get little or no physical activity. For students who get 30 to 60 minutes of daily physical activity the recommendation is at least 6-5-3-3-2<sup>34</sup>:

- 6 Grain Group servings (1 ounce each)
- 5 Vegetable Group servings (1/2 cup each)
- 3 Fruit Group servings (1/2 cup each)
- 3 Milk Group servings (1 cup each)
- 2 Meat Group servings (2 1/2 ounces each)

### What are some nutritious snacks for students?

Offering healthy snacks to children is important to providing good nutrition, supporting lifelong healthy eating habits and helping children to develop into healthy adults.

The Texas Department of Agriculture's Food and Nutrition Division has developed the following brochure in English and Spanish on healthy snacks. [http://www.squaremeals.org/vgn/tda/files/2348/9676\\_Nutritious%20Snack%20Broch2.pdf](http://www.squaremeals.org/vgn/tda/files/2348/9676_Nutritious%20Snack%20Broch2.pdf)

The Center for Science in Public Interest has the following resource on snack suggestions. - [http://www.cspinet.org/nutritionpolicy/healthy\\_school\\_snacks.pdf](http://www.cspinet.org/nutritionpolicy/healthy_school_snacks.pdf)

### Don't physical activity and good nutrition go hand-in-hand?

Absolutely! Healthy children are both well-nourished and physically fit. As well as a wide variety of foods from the Five Food Groups, the 2005 *Dietary Guidelines for Americans* and recommend that children get at least 60 minutes of physical activity a day. This includes spontaneous play like bike riding or tag, organized sports, and physical education. How can you encourage your students to become more active?:<sup>34</sup>

- Role-model an active lifestyle and share examples of how you are physically active.
- Schedule recess every day - make sure it's not lost to other subjects or withdrawn as punishment.



- Encourage active games like jump rope, kick-ball and tag during recess.
- Urge your school to offer physical education every day if it doesn't already.
- Announce opportunities for physical activity, like school sports teams or local park and recreation programs.
- Urge parents to set limits on TV watching, video and computer games. The American Academy of Pediatrics suggest no more than 2 hours a day for these activities.

### Where can I find the Dietary Guidelines for Americans?

The Dietary Guidelines are jointly issued and updated every 5 years by the Departments of Agriculture and Health and Human Services. They provide authoritative advice for people two years and older about how good dietary habits can promote health and reduce risk for major chronic diseases. The *2010 Dietary Guidelines* are published at: <http://www.cnpp.usda.gov/dietaryguidelines.htm>

### How can our school food service program be recognized for their work in providing healthier options for our students?

Currently there are two national programs that recognize schools creating healthier school environments through the promotion of nutrition and physical activity. These are the Healthier US School Challenge and the Alliance for a Healthier Generation. For more information on the requirements for recognition go to:

- USDA Healthier US School Challenge - <http://www.fns.usda.gov/tn/healthierus/index.html>
- Alliance for a Healthier Generation - <http://www.healthiergeneration.org/schools.aspx?id=3319>

### What can schools do to make a difference?

1. Address physical activity and nutrition through a Coordinated School Health Program approach.
2. Designate a school health coordinator and maintain an active school health council.
3. Assess the school's health policies and programs and develop a plan for improvement.
4. Strengthen the school's nutrition and physical activity policies.
5. Implement a high-quality promotion program for school staff.
6. Implement a high-quality course of study in health education.
7. Implement a high-quality of course of study in physical education.
8. Increase opportunities for students to engage in physical activity.
9. Implement a quality school meals program.
10. Ensure that students have appealing, healthy choices in foods and beverages



## Resources

**Addressing Nutrition.** Centers for Disease Control and Prevention – Division of Adolescent School Health. Informative fact sheets on the goal of supporting the development of lifelong healthy eating habits among young people. [http://www.cdc.gov/HealthyYouth/nutrition/pdf/Addressing\\_Nutrition.pdf](http://www.cdc.gov/HealthyYouth/nutrition/pdf/Addressing_Nutrition.pdf)

**The Role of Schools in Preventing Childhood Obesity** The State Education Standard. Schools cannot solve the obesity epidemic on their own, but it is unlikely to be halted without strong school-based policies and programs. Most important, schools can help students adopt and maintain healthy eating and physical activity behaviors. CDC has published guidelines that identify school policies and practices most likely to be effective in promoting lifelong physical activity and healthy eating. The guidelines, which are based on comprehensive reviews of the research literature and extensive input from academic experts and school health practitioners, contain many different recommendations that can be summarized as 10 key strategies. [http://www.cdc.gov/HealthyYouth/physicalactivity/pdf/roleofschools\\_obesity.pdf](http://www.cdc.gov/HealthyYouth/physicalactivity/pdf/roleofschools_obesity.pdf)

**Guidelines for School Health Programs to Promote Lifelong Healthy Eating - CDC Morbidity & Mortality Weekly Report.** June 14, 1996;45 These guidelines identify strategies most likely to be effective in promoting lifelong healthy eating among young people. Guidelines for School Health Programs to Promote Lifelong Healthy Eating were developed by CDC in collaboration with experts from other federal agencies, state agencies, universities, voluntary organizations, and professional associations. <http://www.cdc.gov/HealthyYouth/nutrition/guidelines/index.htm>

**Nutrition Standards for Foods in Schools** - The school environment is one of several settings that can influence children's food choices and eating habits. Schools can ensure that the available food and beverage options are healthy and help youth eat food that meets dietary recommendations for fruits, vegetables, whole grains, and nonfat or low-fat dairy products.

To provide schools with guidance on improving the foods and beverages offered to students, the Centers for Disease Control and Prevention (CDC) conducted a study with the Institute of Medicine (IOM) to review the science and make recommendations about nutrition standards for foods and beverages offered in direct competition with school-provided meals and snacks. The study resulted in a report entitled, *Nutrition Standards for Foods in Schools: Leading the Way toward Healthier Youth*. <http://www.cdc.gov/HealthyYouth/nutrition/standards.htm>

### Fact Sheets

Using the findings of the IOM Report, CDC developed a set of four audience-specific fact sheets as a resource for school staff, parents, and youth to use to support and develop strong nutrition standards that can impact the health of students at school. These fact sheets are designed to answer commonly asked questions about the report and provide recommendations for implementing the nutrition standards.

For Parents, Guardians, Teachers, and School Staff

([http://www.cdc.gov/HealthyYouth/nutrition/pdf/nutrition\\_factsheet\\_parents.pdf](http://www.cdc.gov/HealthyYouth/nutrition/pdf/nutrition_factsheet_parents.pdf))

For School Boards, School Districts, and Other School Administrators

([http://www.cdc.gov/HealthyYouth/nutrition/pdf/nutrition\\_factsheet\\_schools.pdf](http://www.cdc.gov/HealthyYouth/nutrition/pdf/nutrition_factsheet_schools.pdf))

For School Nutrition Service Personnel

([http://www.cdc.gov/HealthyYouth/nutrition/pdf/nutrition\\_factsheet\\_service.pdf](http://www.cdc.gov/HealthyYouth/nutrition/pdf/nutrition_factsheet_service.pdf))

For Students

([http://www.cdc.gov/HealthyYouth/nutrition/pdf/nutrition\\_factsheet\\_youth.pdf](http://www.cdc.gov/HealthyYouth/nutrition/pdf/nutrition_factsheet_youth.pdf))



**Making It Happen: School Nutrition Success Stories** This resource contains 32 success stories of innovative K-12 schools across the United States that improved their school nutrition environments for foods and beverages sold and offered outside of federal meal programs. *Making It Happen* includes ideas on what to improve, how to do it, and partners in change. *Making It Happen* was jointly published with the Food and Nutrition Service, U.S. Department of Agriculture and supported by the U.S. Department of Education. <http://apps.nccd.cdc.gov/MIH/MainPage.aspx>

**Body Mass Index Measurement in Schools** Measuring the body mass index (BMI) of students in schools is an approach to address obesity that is attracting much attention across the nation from researchers, school officials, legislators, and the media. In 2005, the Institute of Medicine called upon the federal government to develop guidance for BMI measurement programs in schools. The Centers for Disease Control and Prevention produced “Body Mass Index Measurement in Schools” to describe the purpose of school-based BMI surveillance and screening programs, examine current practices, and review research on BMI measurement programs. This article was published in the *Journal of School Health* in December 2007. This article summarizes the recommendations of experts, identifies concerns surrounding programs, and outlines needs for future research. Guidance is provided on specific safeguards that need to be addressed before schools decide to collect BMI information. <http://www.cdc.gov/features/childbmi/>

Executive Summary on Body Mass Index Measurements in Schools  
[http://www.cdc.gov/HealthyYouth/obesity/BMI/pdf/BMI\\_execsumm.pdf](http://www.cdc.gov/HealthyYouth/obesity/BMI/pdf/BMI_execsumm.pdf)

**Going Local: Paths to Success for Farm to School Programs** This resource provides a snapshot of the diverse ways in which “farm to school” is making a difference nationwide. It includes case studies from eight states. *Going Local* was developed by the National Farm to School Program, Center for Food & Justice, Occidental College and the Community Food Security Coalition. <http://departments.oxy.edu/uepi/cfj/publications/goinglocal.pdf>

**Guidance for Healthy Classroom Celebrations** This tip sheet from the Center for Science and Public Interest provides school staff, parents, and students ideas for healthy celebrations for birthdays and other celebrations. [http://www.cspinet.org/nutritionpolicy/policy\\_options\\_healthycelebrations.html](http://www.cspinet.org/nutritionpolicy/policy_options_healthycelebrations.html)

**Parents in Action! Engaging Parents in Local School Wellness Policy** The toolkit from California’s Project LEAN provides resources and tools that will help school stakeholders engage parents in School Wellness Policy implementation, monitoring, and evaluation. Parents in Action! provides strategies for reaching parents, resources for assessing the school environment, fact sheets on relevant school nutrition and physical activity topics, parent education resources, and resources that will assist with the advocacy process. [http://www.californiaprojectlean.org/docuserfiles/ParentsInAction\\_web\(1\).pdf](http://www.californiaprojectlean.org/docuserfiles/ParentsInAction_web(1).pdf)

**Policy in Action: A Guide to Implementing Your Local School Wellness Policy** This guide from California’s Project LEAN is designed to serve as a roadmap for implementing school nutrition and physical activity policies, including local wellness policies. [http://www.californiaprojectlean.org/docuserfiles/ParentsInAction\\_web\(1\).pdf](http://www.californiaprojectlean.org/docuserfiles/ParentsInAction_web(1).pdf)

**School Nutrition Association** This site offers tools and stories on how schools are implementing goals relative to local wellness policies (e.g., physical education, classroom rewards and celebrations, fundraisers, and parent involvement). <http://www.schoolnutrition.org/Content.aspx?id=2164>

**School Wellness Policy and Practice: Meeting the Needs of Low-Income Students** This guide from the Food Research Action Council is designed to help schools respond to the special nutrition concerns of low-income students in their wellness policies. [http://www.frac.org/pdf/wellness\\_guide2006.pdf](http://www.frac.org/pdf/wellness_guide2006.pdf)

**State-Level School Health Policies Database** In partnership with CDC, the National Association of State



Boards of Education (NASBE) has developed research-based, best practice model policy language on various school health topics that states, districts, and schools can adopt or adapt for themselves. The data base search is available by: topic, state, national guidelines, staff picks and a general search. <http://www.nasbe.org/healthy-schools/hs/index.php>

**State Strategies to Support Local Wellness Policies** The National Association of State Boards of Education has produced an issues brief on how states are helping to implement local wellness policies with new laws, policies, guidance materials, and support to local education agencies. The brief highlights promising strategies that may help strengthen the impact of local school wellness policies. <http://nasbe.org/index.hp/shs?start=16>

**USDA Healthier Challenge** The HealthierUS School Challenge (HUSSC) is a voluntary initiative to recognize all schools participating in the National School Lunch Program that have created healthier school environments through promotion of nutrition and physical activity. Specifically, it recognizes schools that have made changes to: improve the quality of the foods served, provide students with nutrition education, and provide students with physical education and opportunities for physical activity. <http://www.fns.usda.gov/tn/healthierus/index.html>

**Pennyrile Allied Community Services – Nutritional Outreach and Wholeness (PACS-NOW)** A program that operates in all 120 counties in Kentucky with one focus of working with schools and students in the area of nutrition. In this program, children learn proper food choices, how to take care of their bodies with physical activity and exercise and personal hygiene through hand washing. <http://www.pacs-ky.org/>

**Farm to School** The Kentucky Department of Agriculture supports Farm to School Programs. The goal is to bring together the freshness and high quality of Kentucky Proud products and schools. <http://www.kyagr.com/consumer/food/FarmtoSchool.htm>

**Alliance for a Healthier Generation** <http://www.healthiergeneration.org/>

**American Academy of Pediatrics** [www.aap.org](http://www.aap.org)

**American Heart Association** <http://www.heart.org/HEARTORG/>

**CDC Division of Adolescent and School Health** <http://www.cdc.gov/HealthyYouth/>

**CDC Division of Nutrition and Physical Activity** <http://www.cdc.gov/nccdphp/dnpao/index.html>

**Health Education through Extension Leadership** <http://www.ca.uky.edu/hes/?p=6>

**Kentucky Action for Healthy Kids** [http://take.actionforhealthykids.org/site/Clubs?club\\_id=1125&pg=main](http://take.actionforhealthykids.org/site/Clubs?club_id=1125&pg=main)

**Kentucky Cooperative Extension Service** <http://ces.ca.uky.edu/ces/>

**Kentucky Department of Education Coordinated School Health**  
<http://www.education.ky.gov/KDE/Administrative%2BResources/Coordinated%2BSchool%2BHealth/>

**Kentucky Department for Public Health Coordinated School Health**  
<http://chfs.ky.gov/dph/mch/cfhi/Coordinated%20School%20Health.htm>

**Local Health Departments** <http://chfs.ky.gov/dph/Local+Health+Department.htm>

**Partnership for a Fit Kentucky** <http://www.fitky.org/>

