

2002 SCHOOL HEALTH EDUCATION PROFILE SCHOOL PRINCIPAL QUESTIONNAIRE

This questionnaire will be used to assess school health education across your state or school district. Your cooperation is essential for making the results of this survey comprehensive, accurate, and timely. Your answers will be kept confidential.

INSTRUCTIONS

1. This questionnaire should be completed by the **principal** (or the person acting in that capacity) and concerns only activities that occur in the school listed below. Please consult with other people if you are not sure of an answer.
2. Please use a #2 pencil to fill in the answer circles completely. Do not fold, bend, or staple this questionnaire or mark outside the answer circles.
3. Follow the instructions for each question.
4. Write any additional comments you wish to make at the end of the questionnaire.
5. Return the questionnaire in the envelope provided.

Person completing this questionnaire

Name: _____
Title: _____
School name: _____
District: _____
Telephone number: _____

To be completed by the SEA or LEA conducting the survey

School name: _____

Survey ID			
0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

1. Are any of the following grades taught in this school? (Mark yes or no for each grade.)

		Yes	No			
Grade						
a.	6.....	0.....	0			
b.	7.....	0.....	0			
c.	8.....	0.....	0			
d.	9.....	0.....	0			
e.	10.....	0.....	0			
f.	11.....	0.....	0			
g.	12.....	0.....	0			

If you answered NO to all grades in Question 1, you are finished. Please return this questionnaire.

REQUIRED HEALTH EDUCATION

(Definition: Required health education is defined as instruction about health education topics such as injuries and violence, alcohol and other drug use, tobacco use, nutrition, HIV infection, and physical activity that students must receive for graduation or promotion from this school.)

2. Is health education required for students in any of grades 6 through 12 in this school? (Mark one response.)

- a. Yes
- b. No Skip to Question 7

3. Is required health education taught in each of the following ways to students in grades 6 through 12 in this school? (Mark yes or no for each method.)

		Yes	No			
Method						
a.	In a combined health education and physical education course.....	0.....	0			
b.	In a course mainly about another subject other than health education such as science, social studies, home economics, or English.....	0.....	0			

REQUIRED HEALTH EDUCATION COURSE

(Definition: A required health education course is taught as a separate semester- or quarter-long unit of instruction for which the student receives credit. It is not health education units or lessons integrated into other subjects.)

4. How many required health education courses do students take in grades 6 through 12 in this school? (Mark one response.)

- a. 0 courses → Skip to Question 7
- b. 1 course
- c. 2 courses
- d. 3 courses
- e. 4 or more courses

5. Is a required health education course taught in each of the following grades in this school? (Mark yes, no, or not applicable for each grade.)

Yes No Not Applicable
(e.g., grade not taught
in this school)

Grade

- a. 6.....0.....0.....0
- b. 7.....0.....0.....0
- c. 8.....0.....0.....0
- d. 9.....0.....0.....0
- e. 10.....0.....0.....0
- f. 11.....0.....0.....0
- g. 12.....0.....0.....0

6. During this school year, about what percent of students in grades 6 through 12 were exempted or excused from any part of a required health education course by parental request? (Mark one response.)

- a. Students cannot be exempted or excused
- b. Less than 1%
- c. 1% to 5%
- d. 6% or more

HEALTH EDUCATION COORDINATION

7. **Who coordinates health education in this school?** (Mark one response.)
- a. No one coordinates health education in this school
 - b. District administrator
 - c. District health education or curriculum coordinator
 - d. School administrator
 - e. Health education teacher
 - f. School nurse
 - g. Someone else
8. **Does this school or school district have a school health committee or advisory group that develops policies, coordinates activities, or seeks student and family involvement in programs that address health issues?** (Mark one response.)
- a. Yes
 - b. No

PHYSICAL EDUCATION AND PHYSICAL ACTIVITY PROGRAMS

9. **Is physical education required for students in any of grades 6 through 12 in this school?** (Mark one response.)
- a. Yes
 - b. No → skip to question 12
10. **Can students be exempted from taking required physical education for any of the following reasons?** (Mark yes or no for each reason.)
- | Reason | Yes | No |
|---|-----|----|
| a. Enrollment in other courses (i.e., math or science)..... | 0 | 0 |
| b. Participation in school sports..... | 0 | 0 |
| c. Participation in other school activities (i.e., ROTC, marching band, chorus, or cheerleading)..... | 0 | 0 |
| d. Participation in community sports activities..... | 0 | 0 |
11. **If students fail required physical education, are they required to repeat it?** (Mark one response.)
- a. Yes
 - b. No

12. **Are faculty and staff at this school allowed to use physical activity, such as laps or push-ups, to punish students for bad behavior in physical education?** (Mark one response.)
- a. Yes
 - b. No
13. **Are faculty and staff at this school allowed to make students miss all or part of physical education as punishment for bad behavior in another class?** (Mark one response.)
- a. Yes
 - b. No
14. **Is a newly hired physical education teacher or specialist required to be certified, licensed, or endorsed by the state in physical education?** (Mark one response.)
- a. Yes
 - b. No
15. **Does this school offer students opportunities to participate in intramural activities or physical activity clubs?** (Mark one response.)
- a. Yes
 - b. No
16. **Does this school provide transportation home for students who participate in after-school intramural activities or physical activity clubs?** (Mark one response.)
- a. Yes
 - b. No
 - c. This school does not offer intramural activities or clubs
17. **Outside of school hours or when school is not in session, do children or adolescents use any of this school's activity or athletic facilities for community-sponsored sports teams or physical activity programs?** (Mark one response.)
- a. Yes
 - b. No

TOBACCO PREVENTION POLICIES

18. **Has this school adopted a policy prohibiting tobacco use?** (Mark one response.)
- a. Yes
 - b. No → **Skip to Question 26**

19. Does the tobacco prevention policy specifically prohibit use of each type of tobacco for each of the following groups? (Mark yes or no for each type of tobacco for each group.)

Type of tobacco	<u>Students</u>		<u>Faculty/Staff</u>		<u>Visitors</u>	
	Yes	No	Yes	No	Yes	No
a. Cigarettes	0	0	0	0	0	0
b. Smokeless tobacco (i.e., chewing tobacco, snuff, or dip)	0	0	0	0	0	0
c. Cigars	0	0	0	0	0	0
d. Pipes	0	0	0	0	0	0

20. Does the tobacco prevention policy specifically prohibit tobacco use during each of the following times for each of the following groups? (Mark yes or no for each time for each group.)

Time	<u>Students</u>		<u>Faculty/Staff</u>		<u>Visitors</u>	
	Yes	No	Yes	No	Yes	No
a. During school hours	0	0	0	0	0	0
b. During non-school hours	0	0	0	0	0	0

21. Does the tobacco prevention policy specifically prohibit tobacco use in each of the following locations for each of the following groups? (Mark yes or no for each location for each group.)

Location	<u>Students</u>		<u>Faculty/Staff</u>		<u>Visitors</u>	
	Yes	No	Yes	No	Yes	No
a. In school buildings	0	0	0	0	0	0
b. On school grounds	0	0	0	0	0	0
c. In school buses or other vehicles used to transport students	0	0	0	0	0	0
d. At off-campus, school-sponsored events	0	0	0	0	0	0

22. Does your school have procedures to inform each of the following groups about the tobacco prevention policy that prohibits their use of tobacco? (Mark yes, no, or not applicable for each group.)

Group	Yes	No	Not Applicable
a. Students.....	0	0	0
b. Faculty and staff.....	0	0	0
c. Visitors.....	0	0	0

23. Does your school have procedures to inform parents about the policy that prohibits tobacco use by students? (Mark one response.)

- a. Yes
- b. No
- c. Not applicable

24. Does your school designate an individual who has primary responsibility for seeing that the tobacco use prevention policy is enforced? (Mark one response.)

- a. Yes
- b. No

25. When students are caught smoking cigarettes, how often are each of the following actions taken? (Mark one response for each action.)

Action	Never	Rarely	Sometimes	Always or almost always
a. Parents or guardians are informed.....	0	0	0	0
b. Referred to a school counselor.....	0	0	0	0
c. Referred to a school administrator.....	0	0	0	0
d. Encouraged, but not required to participate in an assistance, education, or cessation program.....	0	0	0	0
e. Required to participate in an assistance, education, or cessation program.....	0	0	0	0
f. Referred to legal authorities.....	0	0	0	0
g. Placed in detention.....	0	0	0	0
h. Given in-school suspension.....	0	0	0	0
i. Suspended from school.....	0	0	0	0

26. Does your school provide referrals to tobacco cessation programs for each of the following groups? (Mark yes or no for each group.)

Group	Yes	No
a. Faculty and staff.....	0.....	0
b. Students.....	0.....	0

27. Is tobacco advertising prohibited in each of the following locations? (Mark yes or no for each location.)

Location	Yes	No
a. In the school building.....	0.....	0
b. On school grounds including on the outside of the building, on playing fields, or other areas of the campus.....	0.....	0
c. On school buses or other vehicles used to transport students.....	0.....	0
d. In school publications (e.g., newsletters, newspapers, web sites, or other school publications)	0.....	0

28. Is tobacco advertising through sponsorship of school events prohibited? (Mark one response.)

- a. Yes
- b. No

29. Are students at your school prohibited from wearing tobacco brand-name apparel or carrying merchandise with tobacco company names, logos, or cartoon characters on it? (Mark one response.)

- a. Yes
- b. No

30. Does your school post signs marking a tobacco-free school zone, that is, a specified distance from school grounds where tobacco use by students, faculty and staff, and visitors is not allowed? (Mark one response.)

- a. Yes
- b. No

NUTRITION-RELATED POLICIES AND PRACTICES

31. How long do students usually have to eat lunch once they are seated? (Mark one response.)

- a. Less than 20 minutes
- b. 20 minutes or more
- c. This school does not serve lunch to students

32. Does this school or district have a policy stating that fruits or vegetables will be offered at school settings such as student parties, after-school programs, staff meetings, parents' meetings, or concession stands? (Mark one response.)

- a. Yes
- b. No

33. Can students purchase snack foods or beverages from vending machines or at the school store, canteen, or snack bar? (Mark one response.)

- a. Yes
- b. No → Skip to Question 36

34. Can students purchase each snack food or beverage from vending machines or at the school store, canteen, or snack bar? (Mark yes or no for each food or beverage.)

Food/Beverage	Yes	No
a. Chocolate candy.....	0	0
b. Other kinds of candy.....	0	0
c. Salty snacks that are not low in fat, such as regular potato chips.....	0	0
d. Salty snacks that are low in fat, such as pretzels, baked chips, or other low fat chips.....	0	0
e. Fruits or vegetables.....	0	0
f. Low-fat cookies, crackers, cakes, pastries, or other low-fat baked goods.....	0	0
g. Soft drinks, sports drinks, or fruit drinks that are not 100% juice.....	0	0
h. 100% fruit juice.....	0	0
i. Bottled water.....	0	0

35. Can students purchase snack foods or beverages during the following times? (Mark yes or no for each time.)

Time	Yes	No
a. Before classes begin in the morning.....	0.....	0
b. During any school hours when meals are not being served.....	0.....	0
c. During school lunch periods.....	0.....	0

VIOLENCE PREVENTION

36. Does your school implement each of the following safety and security measures? (Mark yes or no for each measure.)

Measure	Yes	No
a. Require visitors to report to the main office or reception area upon arrival.....	0.....	0
b. Maintain a “closed campus” where students are not allowed to leave school during the school day, including during lunchtime... ..	0.....	0
c. Use staff or adult volunteers to monitor school halls during and between classes.....	0.....	0
d. Routinely conduct bag, desk, or locker checks.....	0.....	0
e. Prohibit students from carrying backpacks or book bags at school.....	0.....	0
f. Require students to wear school uniforms.....	0.....	0
g. Require students to wear identification badges.....	0.....	0
h. Use metal detectors.....	0.....	0
i. Have uniformed police, undercover police, or security guards during the regular school day.....	0.....	0

37. Does your school have or participate in each of the following programs? (Mark yes or no for each program.)

Program	Yes	No
a. A peer mediation program.....	0.....	0
b. A safe-passage to school program.....	0.....	0
c. A program to prevent gang violence.....	0.....	0
d. A program to prevent bullying.....	0.....	0

38. Does your school have a written plan for responding to violence at the school? (Mark one response.)

- a. Yes
- b. No

ASTHMA MANAGEMENT ACTIVITIES

39. Does your school implement each of the following school-based asthma management activities? (Mark yes or no for each activity.)

Activity	Yes	No
a. Provide a full-time registered nurse, all day every day.....	0	0
b. Identify and track all students with asthma.....	0	0
c. Obtain and use an Asthma Action Plan (or Individualized Health Plan) for all students with asthma...0.....	0	0
d. Assure immediate access to medications as prescribed by a physician and approved by parents (allow students to self-carry inhalers).....	0	0
e. Provide intensive case management for students with asthma who are absent 10 days or more per year.....	0	0
f. Educate school staff about asthma.....	0	0
g. Educate students with asthma about asthma management.....	0	0
h. Teach asthma awareness to all students in at least one grade	0	0
i. Encourage full participation in physical education and physical activity when students with asthma are doing well...0.....	0	0
j. Provide modified physical education and physical activities as indicated by the student's Asthma Action Plan....0.....	0	0

HIV INFECTION POLICIES

40. Has this school adopted a written policy that protects the rights of students and/or staff with HIV infection or AIDS? (Mark one response.)

- a. Yes
- b. No **☒ You are finished. Please return the questionnaire.**

41. Does that policy address each of the following issues for students and/or staff with HIV infection or AIDS? (Mark yes or no for each issue.)

Issue	Yes	No
a. Attendance of students with HIV infection	0	0
b. Procedures to protect HIV-infected students and staff from discrimination.....	0	0
c. Maintaining confidentiality of HIV-infected students and staff.....	0	0
d. Worksite safety (i.e., universal precautions for all school staff).....	0	0
e. Confidential counseling for HIV-infected students.....	0	0
f. Communication of the policy to students, school staff, and parents.....	0	0
g. Adequate training about HIV infection for school staff.....	0	0
h. Procedures for implementing the policy.....	0	0

Thank you for your responses. Please return this questionnaire.

COMMENTS
