

2014 Georgia High School Nutrition Policy Data Summary

Background

More than 870,000 children in Georgia were enrolled in public middle and high schools in Georgia during the Spring of 2014.¹ Students eat one or more meals and/or snacks at school since they typically spend six-seven hours each day during the school year at school. The school food environment is associated with students' dietary behaviors and obesity.^{2,3} Schools can help improve dietary behaviors of children by implementing policies and practices conducive to healthful eating.⁴

Data Description

The School Health Profiles (SHP) is a biennial survey of middle and high school principals and lead health educators (LHEs). SHP monitors the status of school health education, physical education, and school health policies related to HIV/AIDS, tobacco use prevention, nutrition, asthma management activities, and family and community involvement in school health.

For the 2014 SHP survey in Georgia, questionnaires were sent to 392 public schools, charter schools, and alternative schools containing any of grades 6 through 12 during spring 2014. Survey responses were received from principals in 77 percent of schools and from LHEs in 72 percent of schools. Because the response rate was greater than 70 percent, the results were weighted and are considered representative of all regular public, charter and alternative schools containing at least one of the grades 6 through 12. This summary focuses on Georgia high schools.

Overview of Nutrition Policies and Practices

SHP survey data showed that among Georgia's high schools in 2014:

- 58 percent have used the School Health Index (available at: <http://www.cdc.gov/healthyyouth/shi/>) or some other self-assessment tool to assess school nutrition policies, activities and programs.
- 91 percent currently have a coordinator for school health and safety programs.
- 89 percent have a vending machine where students can purchase snack foods or beverages.
- 94 percent permit students to have a drinking water bottle with them during the school day.
- Only 18 percent allow students to purchase fruits and vegetables from vending machines or at a school store or canteen.
- 88 percent do not sell less healthy foods and beverages, such as soda, sports drinks, baked goods, salty snacks, and candy.
- 39 percent offer fruits or non-fried vegetables when foods or beverages are offered at school celebrations.
- The Lead Health Educators in 79 percent of schools **would like to receive** professional development or training about nutrition and dietary behavior.
- The Lead Health Educators in 20 percent of schools **received** professional development or training about nutrition and dietary behavior during the past two years.



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School Food and Beverage Purchasing Policies

- Most of Georgia’s high schools provided low sodium crackers and bottled water for purchase (Chart 1).
- Less than half made non-fat or 1 percent milk, fresh fruits, and non-fried vegetables available for purchase (Chart 1).
- Over 60 percent of high schools allowed students to purchase less healthy food and beverage choices, including chocolate candy, other candy, salty snacks not low in fat, cookies or other baked goods not low in fat, sports drinks, soda or fruit drinks not 100 percent fruit juice, and caffeinated foods and beverages (Chart 2).
 - 88 percent of high schools allowed students to purchase at least one less healthy snack.

Chart 1. Percent of Georgia high schools that allow students to purchase *more* healthy snacks, 2014

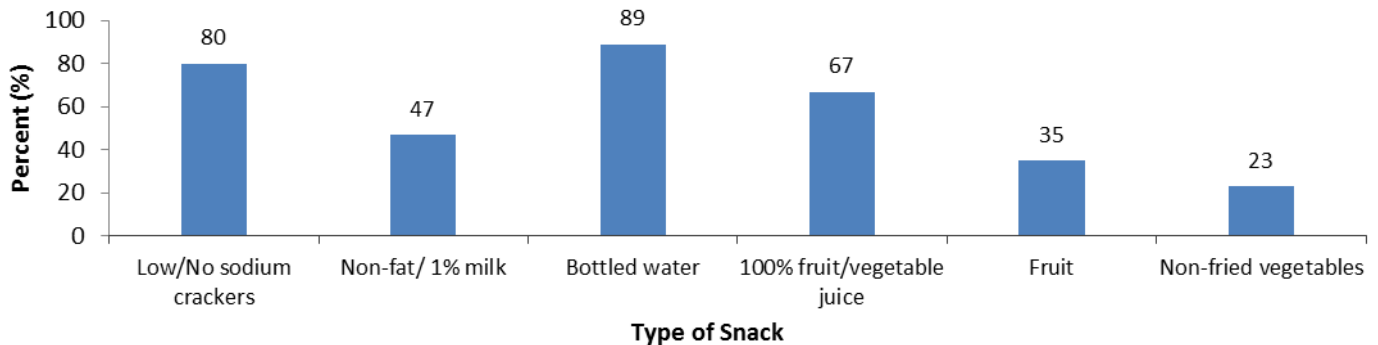
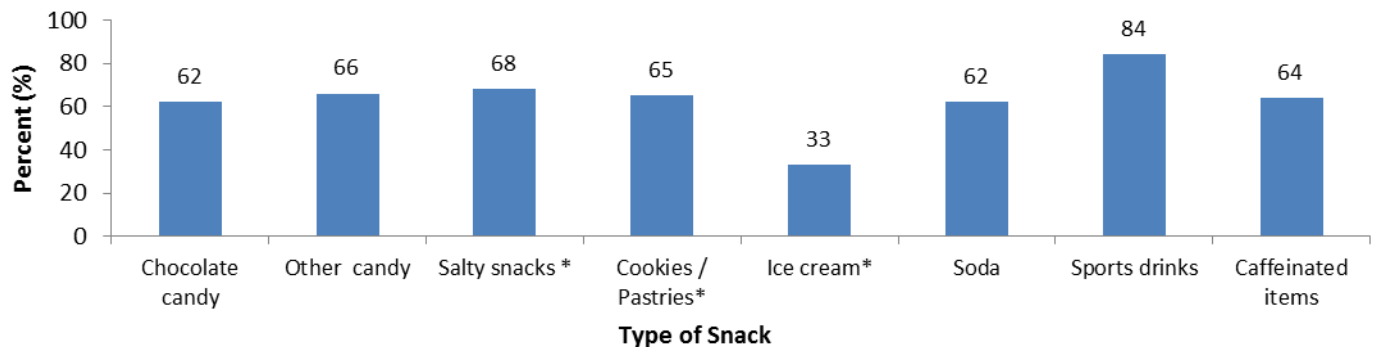


Chart 2: Percent of Georgia high schools that allow students to purchase *less* healthy snacks, 2014

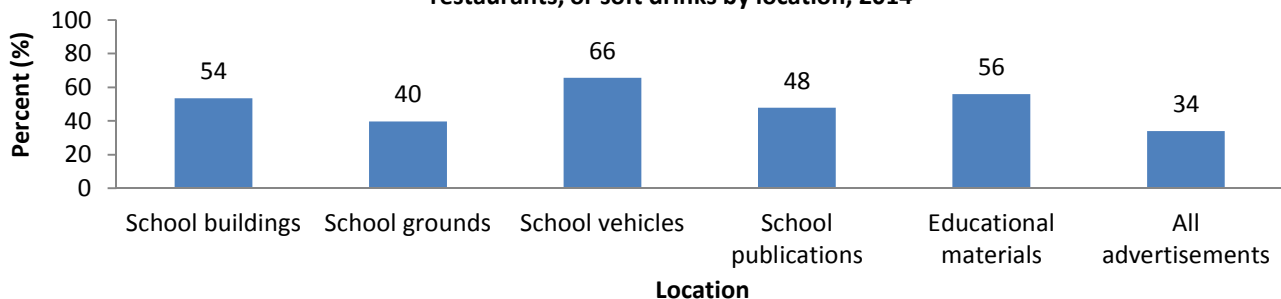


*Not low in fat

School Advertisement Policies

- Only 34 percent of high schools prohibit all forms of advertising or promotions for candy, fast food restaurants, and soft drinks on school property or in school publications/curricula (Chart 3).
- Less than 50 percent of high schools prohibit advertisements for candy, fast food restaurants, or soft drinks on school grounds or in school publications.

Chart 3. Percent of Georgia high schools that prohibit advertisements for candy, fast food restaurants, or soft drinks by location, 2014



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Supportive School Nutrition Environment Strategies

- 100 percent of LHEs tried to increase student knowledge on nutrition and dietary behavior.
- Only 24 percent of Georgia’s schools have implemented at least three strategies to promote a supportive school nutrition environment.
- A minority of Georgia’s high schools have implemented most of the supportive school nutrition environment strategies (Table 1).
- The only two strategies implemented in a majority of high schools are placing fruits and vegetables near the cafeteria cashier (86 percent) and using attractive displays for fruits and vegetables (72 percent).

Table 1. Percent of Georgia high schools that have implemented supportive school nutrition environment strategies during the current school year, 2014*

Strategy	Percent (%)
Priced nutritious foods and beverages at a lower cost while increasing the price of less nutritious foods and beverages	10.1
Prohibited school staff from giving students food or food coupons as a reward for good behavior or good academic performance	19.1
Prohibited less nutritious foods and beverages from being sold for fundraising purposes	22.0
Planted a school food or vegetable garden	29.6
Conducted taste tests to determine food preferences for nutritious items	31.4
Offered a self-serve salad bar to students	32.1
Served locally or regionally grown foods in the cafeteria or classrooms	35.8
Collected suggestions from students, families, and school staff on nutritious food preferences and strategies to promote healthy eating	38.4
Labeled healthful foods with appealing names	38.6
Provided information to students or families on the nutrition and caloric content of foods available	48.7
Used attractive displays for fruits and vegetables in the cafeteria	72.2
Placed fruits and vegetables near the cafeteria cashier, where they are easy to access	86.3

*For more information on strategies to create a supportive nutrition environment, see the Centers for Disease Control and Prevention’s [School Health Guidelines to Promote Healthy Eating and Physical Activity](#)

Family and Community Involvement

Families and communities play important roles in improving nutritional behavior of students.

- 42 percent of schools provided parents and families with health information designed to increase knowledge of nutrition and healthy eating.
- 66 percent of LHEs gave students homework assignments or health education activities to do at home with their parents during the current school year.
- 48 percent of schools have a school health council, committee, or team that offers guidance on the development of policies or coordinates activities on health topics.
- Among schools with school health councils, committees, or teams:
 - 61 percent had parents or families of students represented.
 - 64 percent had community members represented.
- In 45 percent of schools, students’ families helped develop or implement policies and programs related to school health during the past two years.

We Protect Lives.

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How Can Schools Improve Student Nutrition?

By designing and implementing health education curricula: Effective health education curricula provide students with functional health information that helps them to develop the essential health skills necessary to adopt, practice and maintain healthy behaviors.⁵ Such curricula incorporate learning strategies, teaching methods, and materials that are age- and developmentally-appropriate, and culturally inclusive.⁵ Implementation of effective health education also includes providing continuing education and training for health education teachers.^{6,7}

By providing healthy and safe school environments: Healthy school environments help improve dietary behavior and overweight among youths.⁸ Components of a healthy school environment include increasing the availability of healthful foods such as fruits and vegetables in snack bars, and vending machines and restricting the sale of foods high in fat, sodium, and added sugars, and beverages containing caffeine on school grounds, as well as providing students with access to safe, free drinking water throughout the school day.^{9,10}

By incorporating family and community involvement. This provides an effective integrated approach for improving the health and well-being of students. School health interventions aimed at improving student health outcomes are more effective when they involve parents and community organizations.¹¹ It also ensures that parents are more involved in school health activities, and communicate more effectively with school staff about their children's health.¹²

References

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