

bridging the gap

Research Informing Policies & Practices
for Healthy Youth

Brief Report

School District Wellness Policies:
Evaluating Progress and Potential
for Improving Children's Health
Five Years after the Federal Mandate

VOLUME 3

2006-2007
2007-2008
2008-2009
2009-2010
2010-2011

SCHOOL YEARS

nationwide
evaluation
results

February 2013



Robert Wood Johnson Foundation

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About Bridging the Gap

Bridging the Gap is a nationally recognized research program of the Robert Wood Johnson Foundation dedicated to improving the understanding of how policies and environmental factors affect diet, physical activity and obesity among youth, as well as youth tobacco use. The program identifies and tracks information at the national, state, community and school levels; measures change over time; and shares findings that will help advance effective solutions for reversing the childhood obesity epidemic and preventing young people from smoking. Bridging the Gap is a joint project of the University of Illinois at Chicago's Institute for Health Research and Policy and the University of Michigan's Institute for Social Research. For more information, visit www.bridgingthegapresearch.org.

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for Healthy Youth

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Introduction

In the United States, obesity rates among children of all ages are dramatically higher than they were a generation ago, and there are significant ethnic and racial disparities.¹ Obese children are at increased risk for serious health problems, including heart disease, type 2 diabetes, and asthma, as well as adult obesity.² Obese children also have higher annual medical expenses than children with normal body weight.³ Each year in the United States, the direct medical costs of childhood obesity total \$14.1 billion in outpatient care, prescription drugs, and emergency room visits⁴ in addition to \$237.6 million spent on inpatient care for overweight and obese children.⁵

Research also shows that overweight and obese children⁶ and adolescents⁷ tend to miss more school, which may affect academic performance.⁸ In contrast, strong evidence links healthy nutrition and physical activity behaviors with improved academic performance and classroom behavior.⁸⁻¹⁰

Many leading health authorities, including the Institute of Medicine (IOM), recognize the important role schools play in promoting health and preventing obesity among youths. Schools serve as a fundamental setting for providing children and adolescents with a healthy environment where they can consume nutritious meals, snacks, and beverages; get regular physical activity; and learn about the importance of lifelong healthy behaviors.¹¹⁻¹³ A growing body of evidence shows that school-based policies regarding foods, beverages, and physical activity are significantly related to calories consumed and expended by school-age children, and to their weight and body mass index levels.¹⁴⁻¹⁸ As such, creating a healthy school environment is critical for improving children's health and addressing the nation's childhood obesity epidemic.

Federal Requirement for School District Wellness Policies

Beginning with school year 2006–07, the Child Nutrition and WIC Reauthorization Act of 2004 (P.L. 108-265, Section 204) required school districts^a participating in the National School Lunch Program (NSLP; [42 U.S.C.1751 et seq.]) or other child nutrition programs (42 U.S.C. 1771 et seq.), such as the School Breakfast Program, to adopt and implement a wellness policy. The Healthy, Hunger-Free Kids Act of 2010 (P.L. 111-296) continued this requirement and, for the first time, requires the U.S. Department of Agriculture (USDA) to develop regulations that provide a framework and guidelines for local wellness policies that include, at a minimum:

- *goals for nutrition promotion and education;*
- *goals for physical activity and other school-based activities that promote student wellness;*
- *nutrition guidelines for all foods and beverages available on each school campus during the school day that are consistent with federal school meal standards and standards for foods and beverages sold outside of school meal programs (i.e., “competitive foods and beverages”);*
- *permission for stakeholders (parents, students, teachers, school board members, etc.) to participate in policy development, implementation, review, and updates;*
- *a requirement for the district to inform and update the community about the policies’ content and implementation;*
- *a requirement for the district to report and measure on the wellness policy implementation periodically, including school compliance, alignment with model wellness policies, and a description of progress made in attaining the wellness policy goals; and,*
- *designating one or more district and/or school officials responsible for ensuring school-level compliance with the wellness policy.*

^a In the United States, public schools are governed by local education agencies at the school-board, town, or district level. Local education agencies adopt policies that apply to all schools within their jurisdictions.

Although the federal mandate did not authorize funding for school districts to implement these policies, it does have significant potential for improving school nutrition and physical activity environments for millions of students nationwide. For example, regarding the school nutrition environment, during fiscal year 2011, more than 31.8 million students participated in the National School Lunch Program¹⁹ and more than 12.1 million students participated in the School Breakfast Program.²⁰

Report Overview

This brief report updates data published in August 2010²¹ from the most comprehensive, ongoing nationwide analysis of written wellness policies. It includes data from the 2006–07 through the 2010–11 school years, which were the first five years following the required implementation date for wellness policies. The major findings and trends presented identify areas where progress has been made in adopting and strengthening the written policies, as well as opportunities for improvement. New to this report are data relating to the reporting and assessment provisions required by the Healthy, Hunger-Free Kids Act.

These data are especially relevant to USDA's proposed rule for competitive foods and beverages, which was released in February 2013, and to the forthcoming proposed rule from USDA related to wellness policies.

They also may help inform USDA's efforts to provide technical assistance to school districts regarding their wellness policies, which is required by the Healthy, Hunger-Free Kids Act. In addition, this report helps inform future policies for preventing childhood obesity and will be useful to advocates and state and local officials seeking to create a healthier school environment.

This report concludes with Tables 1 and 2, which summarize data analyzed from the 2006–07 and the 2010–11 school years, and Tables 3 and 4, which provide details about competitive food and beverage content restrictions by location of sale for the 2010–11 school year. Consistent with prior volumes, Tables 1 and 3 present the data weighted to the percentage of public school *students* nationwide located in a district with a given policy component. In response to requests for district-level estimates, we have added Tables 2 and 4, which provide estimates of the percentage of *districts* nationwide with each policy provision.

Findings are based on nationally representative samples of school districts each year. A brief overview of the study methodology is included at the end of this report. More information, including complete data for all of the years studied (i.e., school years 2006–07 through 2010–11) and trends by demographic and socioeconomic characteristics, is available at www.bridgingthegapresearch.org/research/district_wellness_policies.

Key Findings

The following sections highlight progress that has been made to implement, strengthen, and/or increase the comprehensiveness of the required wellness policy elements between school years 2006–07 and 2010–11. Consistent with prior reports, the data presented in the following sections represent the percentage of students enrolled in public school districts nationwide. For brevity purposes, the language in the following sections that refers to “students in districts” actually represents “students in public school districts” nationwide. As previously noted, data on the percentage of public school districts nationwide with the various policy elements are presented in Tables 2 and 4.

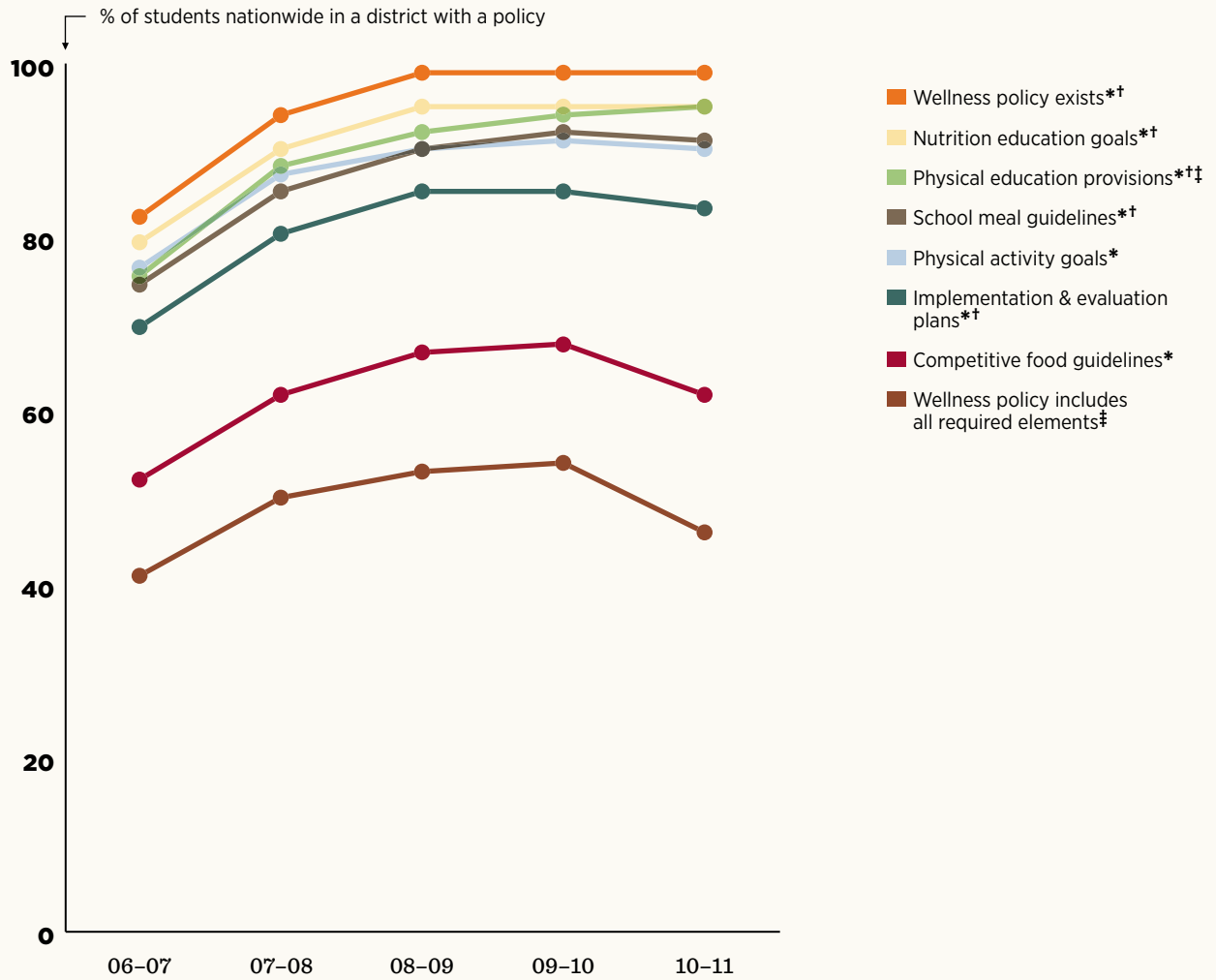
Overall Progress

As of the beginning of school year 2010–11, virtually all (99%) students nationwide were enrolled in a school district with a wellness policy (Figure 1). However, far fewer students were in a district that definitively required (rather than encouraged) all five wellness policy elements: nutrition education, school meals, physical activity, implementation and evaluation, and competitive foods.

In 2010–11, only 46 percent of students were in a district with a wellness policy that included all of the required elements, and that percentage dropped significantly from 54 percent in 2009–10. While more research is needed to explain the decrease, it was influenced by the decline in competitive food and beverage guidelines. Although this was not a statistically significant change, the percentage of students who were in a district that had competitive food and beverage guidelines dropped from 67 percent in 2009–10 to 61 percent in 2010–11.

Overall, there continues to be a wide gap in compliance among the mandatory policy provisions primarily because many districts have not adopted competitive food and beverage guidelines. Yet, across the board, there has been progress to implement, strengthen, and/or increase the comprehensiveness of all five of the required wellness policy elements; however, the extent of the progress varies greatly by element. For example, as of the beginning of school year 2010–11, most students were in a district with a policy that includes goals for nutrition education (95%), guidelines for school meals (91%), and physical activity goals (90%). Yet, five years after the federal mandate, only 83 percent of students were in a district with a policy that includes implementation and evaluation plans and only 61 percent were in a district with competitive food and beverage guidelines.

FIGURE 1 Progress in Adopting Wellness Policies and Required Policy Components, School Years 2006–07 Through 2010–11



*School year 10–11 significantly different from school year 06–07 at $p < .05$ or lower.
 † School year 10–11 significantly different from school year 07–08 at $p < .05$ or lower.
 ‡ Physical education was not a required element but is included because of its relevance to physical activity.
 § School year 10–11 significantly different from school year 09–10 and school year 08–09 at $p < .05$ or lower.

Exact percentages for school year 06–07 and school year 10–11 are provided in Table 1.

Data reflect policies in effect as of the first day of each school year.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

Wellness Policy Comprehensiveness and Strength

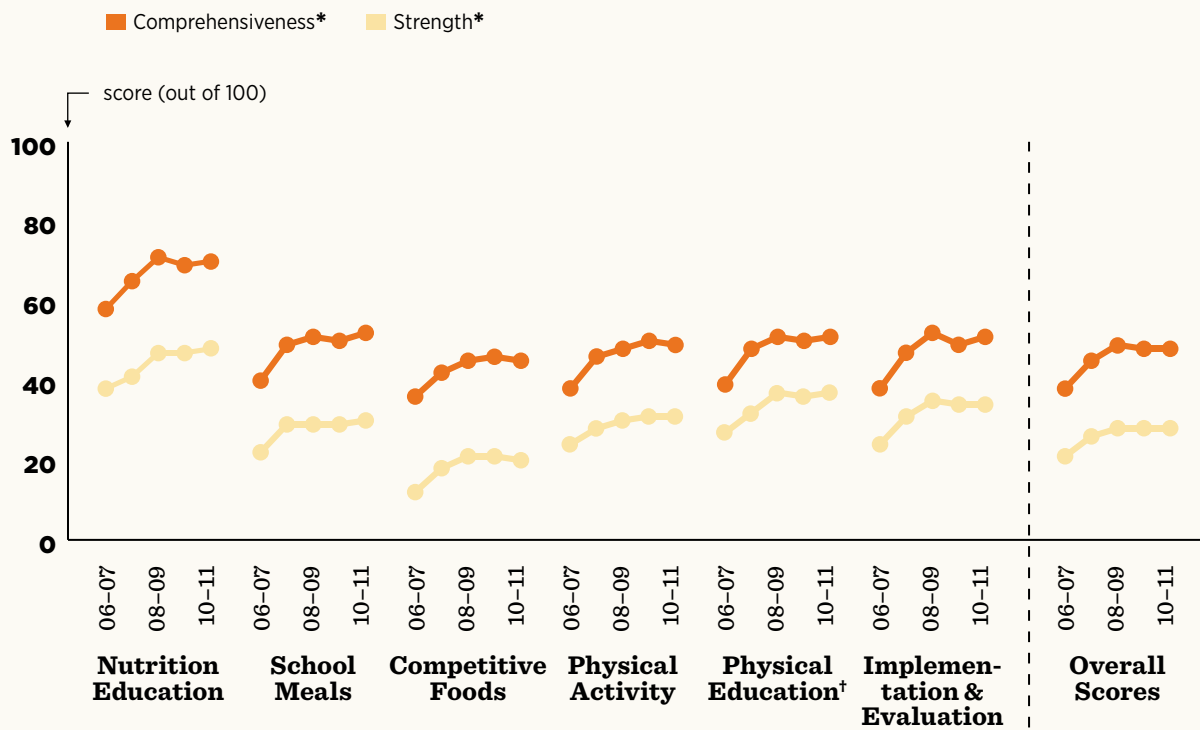
Overall, the comprehensiveness and strength of wellness policies have improved since school year 2006–07, but both aspects remain relatively weak (Figure 2). Comprehensiveness and strength were computed based on the items included in Table 1, for which there were five years of data. Both comprehensiveness and strength are computed on a scale ranging from 0 to 100. A *comprehensive* score of 100 indicates that all of the items for the given topic (e.g., nutrition education) were *addressed* in the policy. A *strength* score of 100 indicates that all of the items for the given topic were *definitively required*.

Based on the provisions for which five years of data were available (see Table 1), the average score for comprehensiveness increased from 38 to 48 (on a scale of 0 to 100) over the five-year period; while the strength of the policies increased from 21 to 28 (on a scale of 0 to 100). In other words, while the policies addressed approximately one-half of all of the provisions examined for this report, only slightly more than one-quarter of the provisions examined were strong or definitively required.

As Figure 2 illustrates, the comprehensiveness and strength of wellness policies have remained fairly flat across all topic areas over the past three years. This suggests that progress to expand and strengthen wellness policies has stalled. However, the policies were significantly stronger in school year 2010–11 than they were in school year 2006–07. Comprehensiveness and strength vary by topic area:

- *Nutrition education* was the most comprehensively addressed component of the wellness policies. The comprehensiveness score increased from 58 to 70 over the five-year period. Nutrition education provisions also were more likely to be required (i.e., strong policies) than other wellness policy components. The strength score increased from 38 to 48 over the five-year period.
- Wellness policies increasingly addressed *school meal provisions*—the comprehensiveness score increased from 40 to 52 over the five-year period. The strength of the school meal provisions remained relatively weak—increasing from 22 to 30 over the five-year period.
- Wellness policy provisions for *competitive foods and beverages* remained the weakest component. While more policies addressed competitive items in school year 2010–11 than in school year 2006–07, such provisions have remained consistently weak. The comprehensive score increased from 36 to 45 and the strength score increased from 12 to only 20 over the five-year period. The following section, as well as data provided in Tables 3 and 4, provides more detail about specific components of competitive food and beverage policies.
- Similar to other topic areas, *physical activity* provisions were more commonly addressed over the five-year period, but they, too, remained weak overall. From school year 2006–07 to school year 2010–11, the comprehensiveness score increased from 38 to 49 and the strength score increased from 24 to 31.
- Although *physical education* is not a required component of wellness policies, nearly 95 percent of all students were in a district with a wellness policy that addressed physical education during school year 2010–11 (Figure 1). Such policies were somewhat comprehensive, as scores increased from 39 to 51, yet they, too, were weak overall. Over the five-year period, the strength score increased from 27 to 37. The strength score has remained relatively stagnant since 2008–09.
- Interestingly, most districts have *implementation and evaluation plans* (Figure 1) and the comprehensiveness score of the evaluation components has increased over time, from 38 in school year 2006–07 to 51 in school year 2010–11. Yet, most of the provisions were not required—the strength score increased from 24 to 34 over the five-year period.

FIGURE 2 Wellness Policy Comprehensiveness and Strength by Topic and Year, School Years 2006–07 Through 2010–11



*All items included in Table 1, for which there were five years of data, were used to compute comprehensiveness and strength. Both comprehensiveness and strength are computed on a scale ranging from 0 to 100. A **comprehensive** score of 100 indicates that all of the items for the given topic (e.g., nutrition education) were addressed in the policy. A **strength** score of 100 indicates that all of the items for the given topic were strong (i.e., definitively required).

† Physical education was not a required element but is included because of its relevance to physical activity.

Data reflect policies in effect as of the first day of each school year.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

Competitive Food and Beverage Provisions

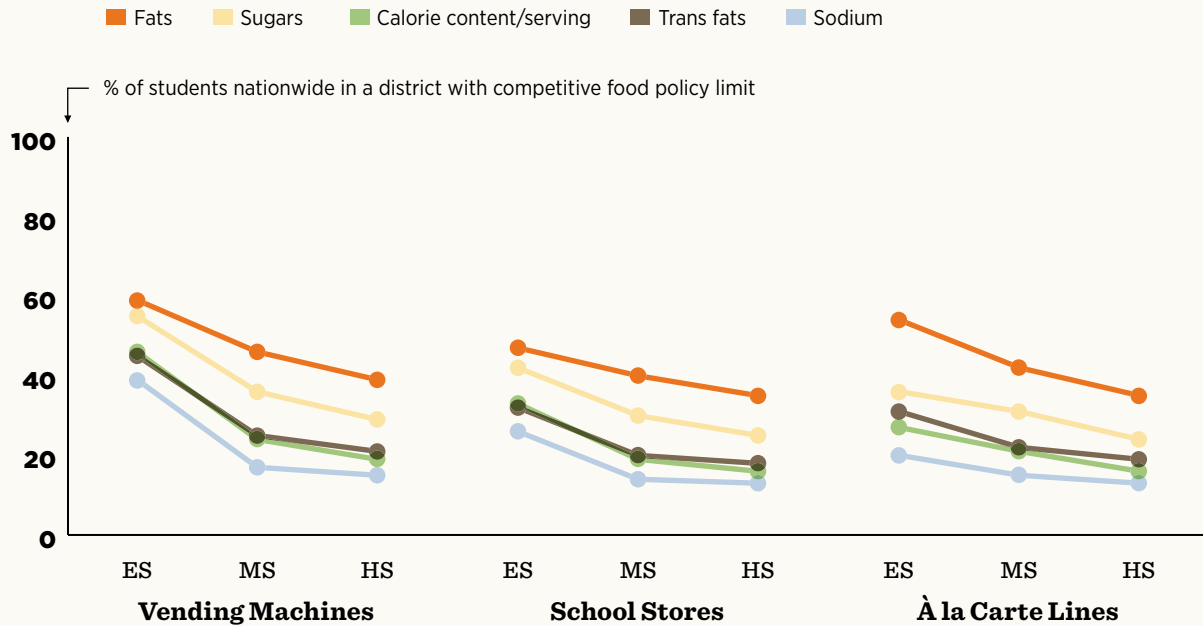
As noted previously and in Figures 1 and 2, competitive food and beverage provisions are the least likely to be addressed and are the weakest provisions in the wellness policies. Figures 3 and 4 and Tables 3 and 4 offer some insights as to why this is the case. Some highlights of the findings include:

- Competitive food and beverage policies applicable at the elementary level are markedly stronger (i.e., definitively required) than policies applicable at

the middle and high school levels. This trend has remained consistent over the five-year period.

- Competitive food and beverage provisions vary by location of sale. Policies are more likely to limit items in vending machines than school store and à la carte settings.
- On the competitive food side, policies are more likely to require specific limits on the fat and sugar content of foods than they are to require limits on trans fats, calories, or sodium.
- Most students (65% of elementary, 58% of middle, and 47% of high school students) were in a district that banned regular soda in vending machines,

FIGURE 3 Specific and Required Competitive Food Limits by Venue and Grade Level of Applicability, School Year 2010–11



Exact percentages are provided in Table 3.

Data reflect policies in effect as of the first day of the school year.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

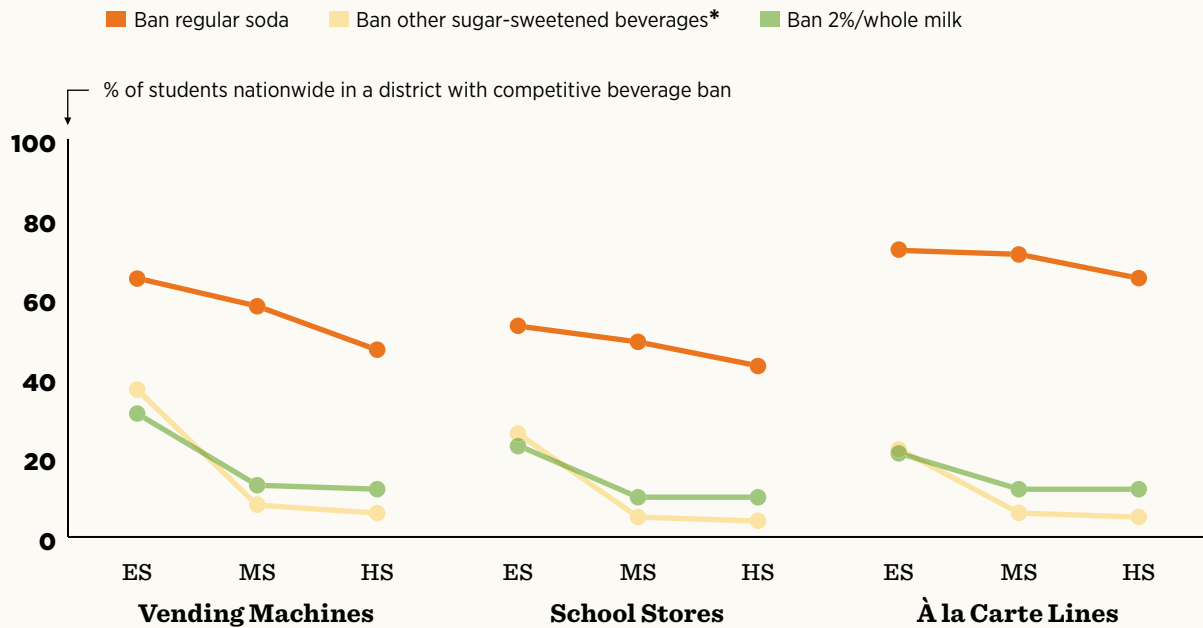
school stores, and à la carte settings at the beginning of school year 2010–11.

- Bans on other sugar-sweetened beverages (SSBs) such as sports drinks, sweetened teas, sweetened fruit drinks, and other drinks with added sugars, are lacking and are virtually non-existent at the middle and high school levels.
 - A relatively low percentage of elementary school students were in a district that banned other SSBs from vending machines (37%), school stores (26%), or à la carte lines (22%), as of the beginning of school year 2010–11.
 - Very few secondary school students were in

a district that banned SSBs other than soda from vending machines (8% of middle school, 6% of high school), school stores (5% of middle school, 4% of high school), or à la carte lines (6% of middle school, 5% of high school), as of the beginning of school year 2010–11.

- Wellness policies that banned high-fat milks (whole and 2% milk) also were lacking; when they did exist, the policies were more likely to apply to vending machines than school stores or à la carte lines. The policies also were more likely to apply at the elementary level as compared with the middle and high school levels.

FIGURE 4 Competitive Beverage Bans by Venue and Grade Level of Applicability, School Year 2010–11



*Other sugar-sweetened beverages include sports drinks, sweetened teas, sweetened fruit drinks, and other drinks with added sugars.

Exact percentages are provided in Table 3.

Data reflect policies in effect as of the first day of the school year.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

Wellness Policy Reporting Requirements

New to this report are data on the extent to which the wellness policies include provisions for district or school level reporting of wellness policy implementation, compliance, or progress (see last section of Tables 1 and 2). These data were added to illustrate the nature and extent of reporting provisions already included in the district wellness policies prior to implementation of the reporting provisions under the Healthy, Hunger-Free Kids Act.

At the beginning of the 2010–11 school year:

- The majority of students (56%) were in a district with a wellness policy that required the district to provide a report on wellness policy implementation efforts. Fifty-four percent of students were in a district that required reporting on policy compliance.
- Only 12 percent to 14 percent of students were in a district with a policy that required reporting to the public on efforts to implement the wellness policy.
- Required reporting elements ranged from reporting on the nutritional quality of school meals, results of the School Health Index, physical education and/or physical activity requirements, the availability of competitive foods and beverages, and results of fitness assessments. However, across the board, a very small percentage of students (fewer than 13% across all grade levels) were in a district with a policy that addressed one or some of these reporting requirements.

Policy Opportunities

While districts have made progress in adopting wellness policies, and in making those policies more comprehensive and stronger, the policies remain weak overall and have been stagnant over the past three school years. A number of opportunities exist for advocates and for decision-makers at all levels of government to continue to strengthen the wellness policies. A brief summary of such opportunities follows:

At the federal level

- Promulgate regulations as required by the Healthy, Hunger-Free Kids Act that provide a framework and guidelines for the content and reporting of wellness policies.
- In February 2013, USDA proposed updated nutrition standards for competitive foods and beverages, as required by the Healthy, Hunger-Free Kids Act. The final standards should provide nutritional guidelines for all foods and beverages sold outside of the school meal programs for all grade levels and in all in-school locations of sale. Provide opportunities for states and districts to adopt innovative policies that exceed the federal standards in this area.
- Identify strategies for institutionalizing opportunities for physical activity throughout the school day.
- Provide districts with technical assistance, model policies, and resources to facilitate efforts to implement wellness policies.

At the state level

- Adopt statewide standards and guidelines that districts can follow to facilitate local-level implementation, as research shows that district policies are stronger in states that have strong policies.²²

- Provide technical assistance and resources to support district-level implementation of state and district policies.
- Work with districts to develop innovative strategies to support implementation of state and district policies.
- Compile and post information on district policies on state website.

At the district level

- Continually review, evaluate, and revise wellness policies that will support overall student health.
- Ensure that implementation, evaluation, and reporting of wellness policy progress and compliance are a high priority.
- Ensure dissemination of information about district policy implementation, evaluation, and reporting to community stakeholders, such as school district health/wellness committees, school boards, the district parent-teacher association, and the state agency.
- Post information on district website, if available.
- Engage the public in efforts to support the implementation of wellness policies.
- Focus on policy changes that will provide school-age children opportunities to meet the daily recommendations of the *Physical Activity Guidelines for Americans*²³ and the *Dietary Guidelines for Americans*.²⁴ For example, during non-school hours, allow members of the community to use school facilities for physical activity purposes or limit the availability of foods and beverages in schools that are high in added sugars, solid fats, sodium, and calories.

Summary of Wellness Policy Data

The following tables summarize most of the data compiled for this study during school years 2006–07 and 2010–11. New to this year’s report are data on the extent to which the wellness policies include provisions for district- or school-level reporting of wellness policy implementation, compliance, or progress.

The data in Table 1 are weighted to reflect the percentage of elementary, middle, and high school students nationwide who were enrolled in a district with a given policy provision. The data in Table 2 are weighted to reflect the percentage of districts nationwide with a given policy provision applicable at the elementary, middle, and high school levels. All data reflect policies in place by the first day of the given school year. More details, including data for various subpopulations and geographic areas, are available at www.bridgingthegapresearch.org/research/district_wellness_policies.

We defined **STRONG POLICY PROVISIONS** as those that required action and specified an implementation plan or strategy. They included language such as *shall, must, require, comply* and *enforce*. **WEAK POLICY PROVISIONS** offered suggestions or recommendations, and some required action, but only for certain grade levels or times of day. They included language such as *should, might, encourage, some, make an effort to, partial, and try*.

Where applicable, significant change across the categories (no policy, weak policy, and strong policy) between school years 2006–07 and 2010–11 are identified (*p*-values) and were computed using chi-square statistics.

TABLE 1 Percentage of *Students* Nationwide in Public School Districts with Wellness Policy Provisions, School Years 2006–07 and 2010–11

Selected Policies for Competitive Foods and Beverages	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06–07	10–11	06–07	10–11	06–07	10–11
Nutrition guidelines for competitive foods and beverages^b (Required wellness policy element)						
No policy	18%	4%	22%	4%	24%	6%
Weak policy	27%	28%	28%	36%	28%	39%
Strong policy	55%	68%	50%	60%	47%	55%
Significant change over 5-year period	— <i>p</i> <.001 —		— <i>p</i> <.001 —		— <i>p</i> <.001 —	
Nutrition guidelines apply to competitive food and/or beverage contracts						
No policy	82%	66%	83%	67%	84%	69%
Weak policy	3%	8%	3%	8%	3%	6%
Strong policy	15%	26%	14%	25%	13%	26%
Significant change over 5-year period	— <i>p</i> <.001 —		— <i>p</i> <.001 —		— <i>p</i> <.001 —	
Nutrition information for competitive foods and/or beverages						
No policy	90%	92%	92%	92%	92%	90%
Weak policy	4%	3%	4%	3%	4%	4%
Strong policy	6%	4%	4%	4%	4%	6%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

^b Data for school year 2006–07 has been revised slightly from data originally reported.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 1, CONTINUED

Selected Policies for Competitive Foods and Beverages (CONTINUED)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
ACCESS RESTRICTIONS						
Competitive food and/or beverage ban						
No policy	84%	80%	97%	96%	99%	98%
Weak policy	14%	13%	3%	4%	1%	2%
Strong policy	2%	7%	0%	0%	0%	0%
Significant change over 5-year period	— $p < .01$ —					
Vending machine restrictions during the school day						
No policy	30%	14%	34%	13%	36%	17%
Weak policy	32%	33%	50%	55%	52%	59%
Strong policy	39%	53%	16%	32%	12%	24%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
À la carte restrictions during meal times						
No policy	31%	11%	35%	11%	37%	14%
Weak policy	43%	45%	51%	57%	52%	62%
Strong policy	26%	44%	14%	32%	11%	24%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
School store restrictions during the school day						
No policy	37%	26%	41%	26%	43%	29%
Weak policy	31%	31%	46%	48%	47%	51%
Strong policy	32%	42%	14%	26%	10%	20%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Fundraisers during the school day						
No policy	47%	27%	49%	28%	52%	30%
Weak policy	52%	36%	50%	49%	47%	51%
Strong policy	1%	37%	1%	23%	1%	20%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Policies governing classroom parties						
No policy	46%	35%	48%	34%	48%	34%
Weak policy	53%	63%	51%	63%	51%	64%
Strong policy	1%	2%	1%	2%	1%	2%
Significant change over 5-year period	— $p < .01$ —		— $p < .001$ —		— $p < .001$ —	
Policies governing food as a reward						
No policy	68%	58%	69%	58%	70%	56%
Weak policy	23%	30%	23%	30%	22%	32%
Strong policy	9%	12%	8%	12%	8%	12%
Significant change over 5-year period	— $p < .05$ —		— $p < .01$ —		— $p < .001$ —	
Policies governing evening and/or community events						
No policy	84%	88%	86%	88%	87%	88%
Weak policy	15%	12%	14%	11%	12%	11%
Strong policy	1%	0%	1%	1%	1%	1%
Significant change over 5-year period	— $p < .05$ —					
Availability of free drinking water throughout the school day						
No policy	88%	84%	89%	84%	89%	83%
Weak policy	3%	3%	3%	3%	3%	3%
Strong policy	9%	12%	8%	13%	8%	13%
Significant change over 5-year period	— $p < .05$ —					

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 1, CONTINUED

Selected Policies for Competitive Foods and Beverages (CONTINUED)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
ADVERTISING AND MARKETING OF FOODS AND BEVERAGES IN SCHOOLS						
Promotion of healthy foods and beverages						
No policy	78%	71%	78%	71%	78%	71%
Weak policy	17%	22%	16%	22%	16%	21%
Strong policy	6%	7%	6%	7%	6%	7%
Restrictions on marketing of unhealthy foods and beverages						
No policy	81%	76%	83%	76%	84%	79%
Weak policy	8%	10%	8%	10%	9%	10%
Strong policy	10%	14%	10%	14%	7%	11%

Policies Governing School Meals	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
School meal nutrition guidelines must meet the federal school meal requirements (Required wellness policy element)						
No policy	24%	7%	27%	7%	28%	8%
Weak policy	2%	2%	2%	2%	1%	2%
Strong policy	75%	91%	72%	91%	71%	91%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Nutrition guidelines for school meals that met or exceeded the Dietary Guidelines						
No policy	57%	35%	60%	38%	59%	36%
Weak policy	32%	41%	30%	42%	31%	45%
Strong policy	10%	24%	10%	20%	10%	19%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Adequate time to eat meals (at least 20 minutes for lunch; at least 10 minutes for breakfast)						
No policy	49%	41%	51%	42%	52%	42%
Weak policy	41%	45%	40%	46%	39%	45%
Strong policy	10%	14%	9%	13%	9%	13%
Significant change over 5-year period	— $p < .05$ —		— $p < .05$ —		— $p < .05$ —	
Nutrition information for school meals						
No policy	80%	77%	81%	77%	82%	75%
Weak policy	8%	11%	8%	10%	7%	10%
Strong policy	12%	12%	11%	12%	11%	15%
School Breakfast Program						
No policy	39%	24%	42%	24%	44%	25%
Weak policy	18%	19%	17%	19%	16%	19%
Strong policy	43%	57%	40%	57%	40%	56%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Farm-to-school and/or farm-to-cafeteria program						
No policy	94%	93%	94%	93%	95%	93%
Weak policy	6%	6%	5%	6%	5%	6%
Strong policy	1%	1%	1%	1%	1%	1%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 1, CONTINUED

Policies Governing School Meals (CONTINUED)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
Nutrition-related training for food service staff						
No policy	76%	61%	77%	61%	76%	61%
Weak policy	18%	28%	18%	28%	18%	28%
Strong policy	6%	11%	5%	11%	6%	11%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Recess before lunch for elementary school students (added in 2008-09 school year)						
No policy	N/A	83%	N/A	N/A	N/A	N/A
Weak policy		15%				
Strong policy		2%				
Allows only 1%/skim milk (added in 2009-10 school year)						
No policy	N/A	74%	N/A	78%	N/A	76%
Weak policy		10%		11%		14%
Strong policy		15%		10%		10%
At least half of grains served are whole grains (added in 2009-10 school year)						
No policy	N/A	87%	N/A	92%	N/A	92%
Weak policy		6%		1%		1%
Strong policy		7%		7%		7%
Specifies number of fruits and/or vegetables served at meals (added in 2009-10 school year)						
No policy	N/A	85%	N/A	91%	N/A	91%
Weak policy		1%		1%		1%
Strong policy		14%		8%		8%

Policies Governing Nutrition Education	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
Nutrition Education Goals (Required wellness policy element)						
No policy	19%	3%	22%	3%	22%	4%
Weak policy	2%	2%	2%	2%	2%	2%
Strong policy	79%	95%	76%	95%	76%	94%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Nutrition education curriculum for all grades						
No policy	35%	15%	37%	16%	38%	18%
Weak policy	31%	38%	30%	37%	31%	41%
Strong policy	35%	47%	33%	46%	32%	41%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Nutrition education integrated into other subjects						
No policy	54%	49%	56%	49%	58%	53%
Weak policy	19%	19%	18%	19%	17%	17%
Strong policy	27%	31%	26%	32%	25%	30%
Nutrition education teaches behavior-focused skills						
No policy	34%	20%	36%	20%	37%	20%
Weak policy	22%	21%	21%	21%	20%	23%
Strong policy	44%	59%	43%	59%	42%	57%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 1, CONTINUED

Policies Governing Nutrition Education (CONTINUED)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
School gardens (<i>added in 2008-09 school year</i>)						
No policy	N/A	88%	N/A	88%	N/A	88%
Weak policy		11%		11%		11%
Strong policy		1%		1%		1%
Nutrition education training for teachers						
No policy	67%	61%	68%	60%	70%	59%
Weak policy	25%	28%	24%	29%	23%	30%
Strong policy	8%	11%	8%	11%	7%	11%
Significant change over 5-year period						— $p < .01$ —

Policies Governing Physical Activity and Physical Education	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
PHYSICAL ACTIVITY POLICIES						
Physical activity goals (<i>Required wellness policy element</i>)						
No policy	21%	6%	24%	7%	26%	9%
Weak policy	2%	3%	2%	3%	2%	2%
Strong policy	76%	91%	73%	90%	72%	88%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Physical activity opportunities outside of physical education for every grade level						
No policy	41%	29%	46%	32%	49%	36%
Weak policy	27%	23%	25%	23%	23%	24%
Strong policy	33%	48%	30%	45%	27%	39%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Physical activity opportunities (e.g., breaks) throughout the school day						
No policy	54%	45%	57%	47%	59%	49%
Weak policy	37%	43%	36%	41%	34%	39%
Strong policy	9%	13%	7%	11%	7%	12%
Significant change over 5-year period	— $p < .05$ —		— $p < .05$ —		— $p < .05$ —	
Amount of time specified for physical activity during the school day (<i>added in 2008-09 school year</i>)						
No policy	N/A	85%	N/A	89%	N/A	95%
Weak policy		3%		2%		2%
Strong policy		12%		9%		3%
Prohibited use of (e.g., running laps) or withholding physical activity (e.g., recess) as punishment						
No policy	75%	58%	79%	63%	80%	63%
Weak policy	10%	19%	8%	14%	7%	16%
Strong policy	15%	23%	13%	22%	13%	20%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Daily recess requirements for elementary school students						
No policy	70%	60%	N/A	N/A	N/A	N/A
Weak policy	15%	19%				
Strong policy	15%	21%				
Significant change over 5-year period	— $p < .01$ —					

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 1, CONTINUED

Policies Governing Physical Activity and Physical Education (CONTINUED)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
PHYSICAL ACTIVITY POLICIES (CONTINUED)						
Recess requirements for elementary school students (less than daily) (added in 2008-09 school year)						
No policy	N/A	81%	N/A	N/A	N/A	N/A
Weak policy		12%				
Strong policy		6%				
Community use of school facilities for physical activity						
No policy	81%	72%	82%	72%	83%	70%
Weak policy	8%	13%	8%	13%	7%	14%
Strong policy	11%	15%	10%	15%	10%	16%
Significant change over 5-year period	— $p < .01$ —		— $p < .01$ —		— $p < .001$ —	
Safe active routes to school						
No policy	89%	85%	90%	86%	91%	86%
Weak policy	4%	7%	4%	6%	3%	6%
Strong policy	7%	8%	7%	8%	5%	8%
Significant change over 5-year period					— $p < .05$ —	
PHYSICAL EDUCATION POLICIES						
Physical education provisions						
No policy	24%	6%	27%	5%	28%	5%
PE addressed in wellness policy	76%	94%	73%	95%	72%	95%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Physical education curriculum for each grade						
No policy	42%	19%	45%	19%	46%	20%
Weak policy	17%	30%	17%	31%	19%	36%
Strong policy	41%	51%	38%	50%	34%	44%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Physical education time requirements: at least 150 mins/week (ES); at least 225 mins/week (MS/HS)						
No policy	71%	59%	76%	64%	85%	76%
Weak policy	26%	36%	22%	33%	11%	22%
Strong policy	3%	5%	3%	3%	4%	2%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Physical education classes, courses, or credits for high school students						
No policy	N/A	N/A	N/A	N/A	84%	70%
Weak policy					2%	1%
Strong policy					14%	29%
Significant change over 5-year period					— $p < .001$ —	
Physical education required to teach about a physically active lifestyle						
No policy	43%	28%	44%	27%	43%	27%
Weak policy	11%	7%	9%	6%	8%	8%
Strong policy	46%	65%	47%	67%	49%	65%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Physical education time devoted to moderate-to-vigorous physical activity (i.e., minimum of 50% of class time)						
No policy	72%	49%	74%	57%	75%	61%
Weak policy	22%	39%	20%	32%	20%	28%
Strong policy	6%	12%	6%	11%	5%	11%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 1, CONTINUED

Policies Governing Physical Activity and Physical Education (CONTINUED)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
PHYSICAL EDUCATION POLICIES (CONTINUED)						
Requires physical education to be taught by a state-authorized physical educator						
No policy	69%	55%	70%	58%	70%	62%
Weak policy	13%	13%	11%	9%	10%	6%
Strong policy	19%	32%	19%	33%	20%	33%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Requires physical education teachers to be trained in physical education skills						
No policy	81%	77%	82%	78%	81%	80%
Weak policy	9%	6%	9%	6%	10%	6%
Strong policy	10%	17%	10%	17%	9%	14%
Significant change over 5-year period	— $p < .001$ —		— $p < .01$ —		— $p < .01$ —	
Requirements for Wellness Policy Implementation and Evaluation						
Plans for implementation (Required wellness policy element)						
No policy	28%	12%	31%	12%	32%	12%
Weak policy	6%	6%	6%	7%	7%	7%
Strong policy	65%	82%	63%	82%	61%	81%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Health advisory committee						
No policy	51%	38%	53%	38%	54%	36%
Weak policy	11%	9%	11%	10%	10%	10%
Strong policy	38%	53%	36%	52%	36%	54%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Plans for evaluation						
No policy	57%	41%	58%	41%	60%	40%
Weak policy	35%	45%	34%	45%	33%	47%
Strong policy	9%	14%	8%	14%	8%	13%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Body mass index (BMI) screening^b						
No policy	84%	65%	83%	65%	83%	65%
BMI suggested or encouraged	8%	19%	9%	20%	8%	21%
BMI measurement required for some but not all grades	8%	16%	7%	13%	8%	13%
BMI measurement required without parental reporting	0%	0%	0%	2%	0%	1%
BMI measurement required with parental reporting	0%	0%	1%	0%	0%	0%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Reporting on policy compliance and/or implementation (see report section below)						
No policy	53%	39%	55%	39%	57%	40%
Weak policy	20%	21%	19%	22%	20%	20%
Strong policy	26%	40%	25%	40%	24%	40%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

^b Data for school year 2006-07 has been revised slightly from data originally reported.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 1, CONTINUED

Requirements for Wellness Policy Implementation and Evaluation (CONTINUED)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
Plan for policy revision						
No policy	68%	57%	69%	57%	69%	56%
Weak policy	9%	11%	9%	11%	9%	9%
Strong policy	24%	32%	23%	32%	22%	35%
Significant change over 5-year period	— <i>p</i> <.01 —		— <i>p</i> <.01 —		— <i>p</i> <.001 —	
Funding for policy implementation						
No policy	93%	95%	93%	94%	94%	95%
Weak policy	5%	5%	5%	5%	5%	5%
Strong policy	2%	0%	2%	0%	1%	0%

Reporting Requirements (added in 2010-11 school year)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE		
	Elementary 10-11	Middle 10-11	High 10-11
Requires district to post wellness policy on website			
No policy	99%	99%	99%
Weak policy	0%	0%	0%
Strong policy	1%	1%	1%
Requires district to post wellness policy on non-website			
No policy	88%	88%	91%
Weak policy	6%	6%	5%
Strong policy	6%	6%	4%
Requires district to submit wellness policy to state			
No policy	99%	99%	99%
Weak policy	0%	0%	0%
Strong policy	1%	1%	1%
Requires district to report to public on wellness policy implementation			
No policy	87%	87%	85%
Weak policy	1%	1%	1%
Strong policy	12%	12%	14%
Requires district officials to report to district school board, superintendent, etc., on wellness policy implementation			
No policy	42%	42%	43%
Weak policy	3%	3%	2%
Strong policy	56%	56%	56%
Requires district to report to state on wellness policy implementation			
No policy	96%	96%	97%
Weak policy	0%	0%	0%
Strong policy	4%	4%	3%
Requires district to report to other group/stakeholders			
No policy	95%	95%	95%
Weak policy	1%	1%	1%
Strong policy	4%	4%	4%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 1, CONTINUED

Reporting Requirements (added in 2010–11 school year) (CONTINUED)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE		
	Elementary 10–11	Middle 10–11	High 10–11
Requires district to report on food safety inspections			
No policy	98%	98%	98%
Weak policy	0%	0%	0%
Strong policy	2%	2%	2%
Requires district to report on local wellness policy compliance			
No policy	43%	43%	44%
Weak policy	3%	3%	2%
Strong policy	54%	54%	54%
Requires district to report on meal program participation			
No policy	94%	94%	96%
Weak policy	1%	1%	0%
Strong policy	6%	5%	3%
Requires district to report nutritional quality of meal program			
No policy	83%	83%	86%
Weak policy	4%	4%	3%
Strong policy	13%	13%	11%
Requires district to report on competitive foods and beverages available/sold			
No policy	89%	89%	91%
Weak policy	4%	4%	4%
Strong policy	7%	7%	5%
Requires district to report on physical education/physical activity requirements			
No policy	90%	90%	91%
Weak policy	2%	2%	2%
Strong policy	8%	8%	7%
Requires district to report on fitness assessments			
No policy	92%	92%	92%
Weak policy	1%	1%	1%
Strong policy	7%	7%	7%
Requires district to report on student body mass index			
No policy	99%	99%	99%
Weak policy	0%	0%	0%
Strong policy	0%	0%	0%
Requires district to report on other results (e.g., from School Health Index, School Meals Initiative, physical activity opportunities)			
No policy	79%	79%	82%
Weak policy	7%	8%	7%
Strong policy	14%	13%	11%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 2 Percentage of Public School *Districts* Nationwide with Wellness Policy Provisions, School Years 2006–07 and 2010–11^c

Selected Policies for Competitive Foods and Beverages	% OF PUBLIC SCHOOL <i>DISTRICTS</i> NATIONWIDE					
	Elementary		Middle		High	
	06–07	10–11	06–07	10–11	06–07	10–11
Nutrition guidelines for competitive foods and beverages (<i>Required wellness policy element</i>)						
No policy	21%	8%	25%	6%	29%	9%
Weak policy	30%	34%	25%	36%	27%	38%
Strong policy	49%	58%	50%	58%	44%	53%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Nutrition guidelines apply to competitive food and/or beverage contracts						
No policy	86%	75%	86%	73%	84%	73%
Weak policy	3%	5%	2%	5%	2%	4%
Strong policy	11%	20%	12%	22%	14%	23%
Significant change over 5-year period	— $p < .05$ —		— $p < .05$ —			
Nutrition information for competitive foods and/or beverages						
No policy	93%	95%	94%	94%	94%	94%
Weak policy	3%	3%	3%	3%	3%	3%
Strong policy	4%	2%	3%	3%	3%	3%
ACCESS RESTRICTIONS						
Competitive food and/or beverage ban						
No policy	87%	83%	99%	99%	99%	99%
Weak policy	13%	14%	1%	1%	1%	1%
Strong policy	1%	4%	0%	0%	0%	0%
Vending machine restrictions during the school day						
No policy	34%	20%	37%	19%	41%	24%
Weak policy	37%	38%	51%	59%	51%	63%
Strong policy	29%	41%	12%	21%	8%	13%
Significant change over 5-year period	— $p < .01$ —		— $p < .001$ —		— $p < .001$ —	
À la carte restrictions during meal times						
No policy	35%	18%	38%	17%	42%	19%
Weak policy	49%	53%	51%	62%	49%	67%
Strong policy	16%	29%	11%	22%	9%	14%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
School store restrictions during the school day						
No policy	38%	32%	42%	30%	46%	35%
Weak policy	38%	35%	48%	53%	47%	56%
Strong policy	23%	34%	10%	17%	7%	10%
Significant change over 5-year period	— $p < .05$ —		— $p < .01$ —		— $p < .05$ —	
Fundraisers during the school day						
No policy	58%	36%	57%	36%	59%	38%
Weak policy	41%	36%	42%	52%	40%	53%
Strong policy	1%	28%	1%	12%	1%	9%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

^c Definitions for strong and weak policy provisions are provided on page 14.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 2, CONTINUED

Selected Policies for Competitive Foods and Beverages (CONTINUED)	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
ACCESS RESTRICTIONS (CONTINUED)						
Policies governing classroom parties						
No policy	49%	36%	49%	35%	50%	34%
Weak policy	51%	63%	50%	64%	49%	65%
Strong policy	1%	1%	1%	1%	0%	1%
Significant change over 5-year period	— $p < .01$ —		— $p < .001$ —		— $p < .001$ —	
Policies governing food as a reward						
No policy	72%	64%	74%	65%	75%	64%
Weak policy	20%	25%	19%	24%	18%	24%
Strong policy	8%	11%	7%	11%	7%	12%
Significant change over 5-year period			— $p < .05$ —		— $p < .05$ —	
Policies governing evening and/or community events						
No policy	84%	87%	83%	88%	84%	89%
Weak policy	16%	12%	16%	10%	16%	10%
Strong policy	1%	1%	1%	2%	1%	1%
Availability of free drinking water throughout the school day						
No policy	88%	87%	89%	86%	89%	84%
Weak policy	2%	1%	2%	1%	2%	1%
Strong policy	10%	13%	9%	13%	9%	15%
Significant change over 5-year period					— $p < .05$ —	
ADVERTISING AND MARKETING OF FOODS AND BEVERAGES IN SCHOOLS						
Promotion of healthy foods and beverages						
No policy	76%	74%	77%	74%	78%	73%
Weak policy	19%	22%	18%	22%	16%	22%
Strong policy	5%	4%	5%	4%	5%	5%
Restrictions on marketing of unhealthy foods and beverages						
No policy	85%	78%	86%	79%	89%	81%
Weak policy	5%	11%	5%	11%	5%	10%
Strong policy	10%	11%	10%	10%	6%	9%
Significant change over 5-year period	— $p < .05$ —		— $p < .05$ —		— $p < .05$ —	

Policies Governing School Meals	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
School meal nutrition guidelines must meet the federal school meal requirements (Required wellness policy element)						
No policy	27%	13%	29%	11%	32%	12%
Weak policy	2%	2%	2%	3%	1%	3%
Strong policy	71%	84%	69%	86%	67%	85%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Nutrition guidelines for school meals that met or exceeded the Dietary Guidelines						
No policy	60%	43%	61%	43%	63%	42%
Weak policy	31%	40%	31%	42%	29%	45%
Strong policy	9%	17%	8%	15%	8%	13%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 2, CONTINUED

Policies Governing School Meals (CONTINUED)	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
Adequate time to eat meals (at least 20 minutes for lunch; at least 10 minutes for breakfast)						
No policy	52%	37%	52%	35%	55%	36%
Weak policy	35%	48%	37%	53%	35%	52%
Strong policy	12%	14%	11%	12%	10%	13%
Significant change over 5-year period	— $p < .01$ —		— $p < .001$ —		— $p < .001$ —	
Nutrition information for school meals						
No policy	82%	81%	82%	82%	85%	83%
Weak policy	8%	10%	7%	9%	6%	8%
Strong policy	11%	9%	10%	9%	9%	9%
School Breakfast Program						
No policy	45%	31%	46%	29%	49%	29%
Weak policy	16%	20%	17%	21%	18%	24%
Strong policy	39%	49%	37%	50%	33%	47%
Significant change over 5-year period	— $p < .01$ —		— $p < .01$ —		— $p < .01$ —	
Farm-to-school and/or farm-to-cafeteria program						
No policy	95%	94%	95%	95%	96%	96%
Weak policy	4%	4%	4%	4%	4%	4%
Strong policy	0%	1%	0%	1%	0%	0%
Nutrition-related training for food service staff						
No policy	74%	63%	74%	64%	75%	63%
Weak policy	20%	28%	20%	27%	19%	28%
Strong policy	6%	9%	6%	10%	6%	9%
Significant change over 5-year period	— $p < .05$ —		— $p < .05$ —		— $p < .01$ —	
Recess before lunch for elementary school students (added in 2008-09 school year)						
No policy	N/A	79%	N/A	N/A	N/A	N/A
Weak policy		17%				
Strong policy		4%				
Allows only 1%/skim milk (added in 2009-10 school year)						
No policy	N/A	80%	N/A	82%	N/A	82%
Weak policy		11%		10%		12%
Strong policy		9%		8%		7%
At least half of grains served are whole grains (added in 2009-10 school year)						
No policy	N/A	90%	N/A	93%	N/A	94%
Weak policy		2%		1%		1%
Strong policy		8%		7%		6%
Specifies number of fruits and/or vegetables served at meals (added in 2009-10 school year)						
No policy	N/A	90%	N/A	92%	N/A	92%
Weak policy		1%		1%		1%
Strong policy		9%		7%		7%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 2, CONTINUED

Policies Governing Nutrition Education	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
Nutrition education goals (Required wellness policy element)						
No policy	21%	7%	24%	6%	27%	8%
Weak policy	2%	2%	1%	2%	1%	2%
Strong policy	77%	91%	74%	92%	71%	90%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Nutrition education curriculum for all grades						
No policy	38%	19%	39%	17%	43%	19%
Weak policy	31%	44%	31%	44%	29%	46%
Strong policy	31%	37%	30%	38%	28%	35%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Nutrition education integrated into other subjects						
No policy	55%	53%	59%	53%	62%	55%
Weak policy	15%	18%	14%	18%	11%	16%
Strong policy	30%	30%	27%	29%	27%	29%
Nutrition education teaches behavior-focused skills						
No policy	36%	25%	39%	23%	42%	25%
Weak policy	17%	21%	16%	22%	15%	23%
Strong policy	47%	54%	45%	54%	43%	52%
Significant change over 5-year period	— $p < .05$ —		— $p < .001$ —		— $p < .05$ —	
School gardens (added in 2008-09 school year)						
No policy	N/A	85%	N/A	87%	N/A	87%
Weak policy		14%		12%		13%
Strong policy		1%		1%		1%
Nutrition education training for teachers						
No policy	70%	63%	73%	63%	73%	63%
Weak policy	23%	27%	20%	27%	20%	27%
Strong policy	7%	10%	7%	10%	7%	10%
Significant change over 5-year period			— $p < .05$ —		— $p < .05$ —	

Policies Governing Physical Activity and Physical Education	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
PHYSICAL ACTIVITY POLICIES						
Physical activity goals (Required wellness policy element)						
No policy	22%	8%	25%	7%	28%	9%
Weak policy	1%	3%	1%	3%	1%	3%
Strong policy	77%	90%	74%	90%	71%	88%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Physical activity opportunities outside of physical education for every grade level						
No policy	42%	27%	47%	28%	49%	31%
Weak policy	27%	26%	24%	27%	24%	28%
Strong policy	31%	47%	29%	45%	28%	42%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .01$ —	

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 2, CONTINUED

Policies Governing Physical Activity and Physical Education (CONTINUED)	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
PHYSICAL ACTIVITY POLICIES (CONTINUED)						
Physical activity opportunities (e.g., breaks) throughout the school day						
No policy	58%	47%	62%	49%	62%	51%
Weak policy	33%	37%	32%	37%	31%	36%
Strong policy	10%	15%	6%	14%	6%	13%
Significant change over 5-year period	— $p < .05$ —		— $p < .01$ —		— $p < .05$ —	
Amount of time specified for physical activity during the school day (added in 2008-09 school year)						
No policy	N/A	89%	N/A	93%	N/A	95%
Weak policy		4%		3%		3%
Strong policy		7%		4%		2%
Prohibited use of (e.g., running laps) or withholding physical activity (e.g., recess) as punishment						
No policy	79%	68%	81%	72%	84%	71%
Weak policy	9%	15%	8%	11%	6%	12%
Strong policy	12%	17%	11%	17%	10%	17%
Significant change over 5-year period	— $p < .01$ —		— $p < .05$ —		— $p < .01$ —	
Daily recess requirements for elementary school students						
No policy	72%	60%	N/A	N/A	N/A	N/A
Weak policy	12%	16%				
Strong policy	16%	24%				
Significant change over 5-year period	— $p < .01$ —					
Recess requirements for elementary school students (less than daily) (added in 2008-09 school year)						
No policy	N/A	84%	N/A	N/A	N/A	N/A
Weak policy		11%				
Strong policy		5%				
Community use of school facilities for physical activity						
No policy	77%	69%	78%	70%	79%	69%
Weak policy	9%	11%	8%	10%	7%	10%
Strong policy	14%	20%	14%	20%	14%	22%
Significant change over 5-year period					— $p < .05$ —	
Safe active routes to school						
No policy	88%	84%	88%	84%	89%	85%
Weak policy	4%	8%	4%	8%	4%	8%
Strong policy	8%	8%	7%	7%	7%	7%
PHYSICAL EDUCATION POLICIES						
Physical education provisions						
No policy	27%	11%	29%	9%	33%	11%
PE addressed in wellness policy	73%	89%	71%	91%	67%	89%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Physical education curriculum for each grade						
No policy	47%	22%	50%	21%	53%	22%
Weak policy	14%	33%	14%	34%	17%	38%
Strong policy	39%	45%	36%	46%	30%	39%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 2, CONTINUED

Policies Governing Physical Activity and Physical Education (CONTINUED)	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
PHYSICAL EDUCATION POLICIES (CONTINUED)						
Physical education time requirements: at least 150 mins/week (ES); at least 225 mins/week (MS/HS)						
No policy	77%	68%	79%	71%	87%	82%
Weak policy	21%	27%	18%	25%	9%	16%
Strong policy	2%	5%	2%	4%	4%	2%
Significant change over 5-year period	— $p < .05$ —					
Physical education classes, courses, or credits for high school students						
No policy	N/A	N/A	N/A	N/A	88%	78%
Weak policy					3%	2%
Strong policy					9%	20%
Significant change over 5-year period	— $p < .05$ —					
Physical education required to teach about a physically active lifestyle						
No policy	45%	31%	49%	31%	52%	35%
Weak policy	9%	7%	7%	7%	6%	9%
Strong policy	46%	61%	45%	62%	42%	56%
Significant change over 5-year period	— $p < .01$ —		— $p < .001$ —		— $p < .01$ —	
Physical education time devoted to moderate-to-vigorous physical activity (i.e., minimum of 50% of class time)						
No policy	72%	56%	71%	64%	73%	65%
Weak policy	20%	33%	22%	26%	21%	25%
Strong policy	8%	11%	8%	10%	6%	9%
Significant change over 5-year period	— $p < .001$ —					
Requires physical education to be taught by a state-authorized physical educator						
No policy	73%	66%	74%	69%	73%	70%
Weak policy	7%	6%	6%	5%	6%	4%
Strong policy	20%	28%	20%	26%	21%	26%
Requires physical education teachers to be trained in physical education skills						
No policy	84%	82%	85%	82%	86%	83%
Weak policy	6%	4%	6%	4%	4%	4%
Strong policy	10%	14%	9%	14%	9%	12%

Requirements for Wellness Policy Implementation and Evaluation	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
Plans for implementation (Required wellness policy element)						
No policy	35%	17%	36%	16%	39%	15%
Weak policy	4%	6%	4%	6%	4%	7%
Strong policy	61%	77%	60%	78%	57%	78%
Significant change over 5-year period	— $p < .001$ —		— $p < .001$ —		— $p < .001$ —	
Health advisory committee						
No policy	54%	46%	58%	45%	61%	45%
Weak policy	9%	8%	9%	8%	7%	8%
Strong policy	37%	46%	33%	46%	32%	47%
Significant change over 5-year period			— $p < .01$ —		— $p < .01$ —	

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 2, CONTINUED

Requirements for Wellness Policy Implementation and Evaluation <small>(CONTINUED)</small>	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE					
	Elementary		Middle		High	
	06-07	10-11	06-07	10-11	06-07	10-11
Plans for evaluation						
No policy	59%	46%	62%	46%	63%	44%
Weak policy	35%	46%	32%	46%	32%	48%
Strong policy	6%	8%	6%	8%	5%	8%
Significant change over 5-year period	— <i>p</i> <.05 —		— <i>p</i> <.01 —		— <i>p</i> <.001 —	
Body mass index (BMI) screening						
No policy	88%	72%	88%	71%	89%	73%
BMI suggested or encouraged	6%	20%	6%	22%	6%	21%
BMI measurement required for some but not all grades	5%	8%	5%	7%	4%	6%
BMI measurement required without parental reporting	0%	0%	0%	1%	0%	0%
BMI measurement required with parental reporting	0%	0%	0%	0%	0%	0%
Significant change over 5-year period	— <i>p</i> <.001 —		— <i>p</i> <.001 —		— <i>p</i> <.001 —	
Reporting on policy compliance and/or implementation						
No policy	56%	45%	58%	45%	62%	47%
Weak policy	21%	25%	20%	25%	20%	24%
Strong policy	22%	30%	22%	30%	18%	29%
Significant change over 5-year period	— <i>p</i> <.05 —		— <i>p</i> <.05 —		— <i>p</i> <.01 —	
Plan for policy revision						
No policy	67%	58%	69%	58%	71%	59%
Weak policy	10%	12%	10%	12%	8%	11%
Strong policy	22%	30%	22%	30%	20%	30%
Significant change over 5-year period			— <i>p</i> <.05 —		— <i>p</i> <.05 —	
Funding for policy implementation						
No policy	93%	97%	93%	97%	94%	97%
Weak policy	6%	3%	6%	3%	5%	3%
Strong policy	1%	0%	1%	0%	1%	0%
Significant change over 5-year period	— <i>p</i> <.01 —		— <i>p</i> <.01 —		— <i>p</i> <.05 —	

Reporting Requirements <small>(added in 2010-11 school year)</small>	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE		
	Elementary	Middle	High
	10-11	10-11	10-11
Requires district to post wellness policy on website			
No policy	99%	99%	98%
Weak policy	0%	0%	0%
Strong policy	1%	1%	1%
Requires district to post wellness policy on non-website			
No policy	90%	90%	92%
Weak policy	7%	6%	5%
Strong policy	4%	3%	3%
Requires district to submit wellness policy to state			
No policy	99%	99%	99%
Weak policy	0%	0%	0%
Strong policy	1%	1%	1%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 2, CONTINUED

Reporting Requirements (added in 2010–11 school year) (CONTINUED)	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE		
	Elementary	Middle	High
	10–11	10–11	10–11
Requires district to report to public on wellness policy implementation			
No policy	87%	88%	88%
Weak policy	2%	1%	1%
Strong policy	11%	11%	11%
Requires district officials to report to district school board, superintendent, etc., on wellness policy implementation			
No policy	48%	49%	51%
Weak policy	5%	5%	4%
Strong policy	47%	46%	45%
Requires district to report to state on wellness policy implementation			
No policy	99%	98%	98%
Weak policy	0%	0%	0%
Strong policy	1%	1%	1%
Requires district to report to other group/stakeholders			
No policy	97%	96%	96%
Weak policy	1%	2%	1%
Strong policy	2%	3%	3%
Requires district to report on food safety inspections			
No policy	98%	98%	98%
Weak policy	0%	0%	0%
Strong policy	2%	2%	2%
Requires district to report on local wellness policy compliance			
No policy	50%	50%	52%
Weak policy	6%	6%	5%
Strong policy	44%	44%	43%
Requires district to report on meal program participation			
No policy	96%	95%	97%
Weak policy	0%	1%	0%
Strong policy	3%	4%	3%
Requires district to report nutritional quality of meal program			
No policy	85%	85%	86%
Weak policy	3%	4%	3%
Strong policy	11%	12%	10%
Requires district to report on competitive foods and beverages available/sold			
No policy	91%	90%	91%
Weak policy	4%	4%	4%
Strong policy	5%	6%	5%
Requires district to report on physical education/physical activity requirements			
No policy	96%	96%	96%
Weak policy	1%	1%	1%
Strong policy	3%	3%	3%
Requires district to report on fitness assessments			
No policy	95%	95%	96%
Weak policy	2%	2%	1%
Strong policy	3%	3%	3%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 2, CONTINUED

Reporting Requirements (added in 2010–11 school year) (CONTINUED)	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE		
	Elementary	Middle	High
	10–11	10–11	10–11
Requires district to report on student body mass index			
No policy	98%	98%	98%
Weak policy	2%	2%	1%
Strong policy	0%	0%	0%
Requires district to report on other results (e.g., from School Health Index, School Meals Initiative, physical activity opportunities)			
No policy	82%	81%	84%
Weak policy	6%	7%	6%
Strong policy	12%	12%	11%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

Competitive Food and Beverage Content Restrictions

The following tables summarize restrictions on competitive foods and/or beverages for school year 2010–11, including limits on calories, fat, sugar, sodium, and caffeine. These restrictions are analyzed by each location of sale. The data in Table 3 are weighted to reflect the percentage of elementary, middle, and high school students nationwide who were enrolled in a district with a given policy provision. The data in Table 4 are weighted to reflect the percentage of districts nationwide with a given policy provision applicable at each grade level—elementary, middle, and high school. All data reflect policies in place by the first day of the given school year. More details and data presented at the district level and for various subpopulations and geographic areas are available at www.bridgingthegapresearch.org/research/district_wellness_policies.

We defined **STRONG POLICY PROVISIONS** as those that required action and specified an implementation plan or strategy. For all provisions except for other sugar-sweetened beverages, fat content of milk, and caffeine content of beverages, there are two categories for strong policies to differentiate those that 1) met the 2007 IOM competitive food and beverage standards²⁷ or 2) had a weaker requirement that did not meet the IOM standards. For other sugar-sweetened beverages, fat content of milk, and caffeine content of beverages, there is only one strong policy category for those that met the IOM standard. In either case, strong policy provisions included language such as *shall, must, require, comply, and enforce*. **WEAK POLICY PROVISIONS** offered suggestions or recommendations, and some required action, but only for certain grade levels or times of day. They included language such as *should, might, encourage, some, make an effort to, partial, and try*.

TABLE 3 Percentage of *Students* Nationwide in Public School Districts with Wellness Policies Addressing Competitive Food and Beverage Content Restrictions by Grade Level of Applicability and Location of Sale, School Year 2010–11

Elementary School Level (Grades 1–5)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE, SCHOOL YEAR 2010–11					
	Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
FOOD STANDARDS						
Sugar content						
No policy/provision	30%	42%	37%	84%	53%	96%
Weak policy	15%	16%	27%	13%	11%	4%
Strong policy: Did not meet IOM standard	8%	7%	8%	0%	6%	0%
Strong policy: Met IOM standard (≤35% of total calories/ total weight from sugar)	18%	19%	20%	3%	16%	0%
Competitive food or location ban	29%	16%	8%	0%	14%	0%
Fat content						
No policy/provision	23%	35%	24%	73%	50%	96%
Weak policy	17%	18%	22%	24%	10%	4%
Strong policy: Did not meet IOM standard	12%	12%	23%	1%	13%	0%
Strong policy: Met IOM standard (≤35% of total calories from fat)	19%	19%	24%	2%	13%	0%
Competitive food or location ban	29%	16%	8%	0%	14%	0%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 3, CONTINUED

Elementary School Level (Grades 1–5) (CONTINUED)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE, SCHOOL YEAR 2010–11					
	Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
FOOD STANDARDS (CONTINUED)						
Trans fats						
No policy/provision	44%	57%	48%	88%	65%	98%
Weak policy	11%	11%	22%	9%	10%	2%
Strong policy: Did not meet IOM standard	7%	6%	12%	1%	6%	0%
Strong policy: Met IOM standard (trans fat free or no more than 0.5g trans fat)	9%	10%	10%	1%	5%	0%
Competitive food or location ban	29%	16%	8%	0%	14%	0%
Sodium content						
No policy/provision	44%	56%	60%	79%	66%	98%
Weak policy	17%	18%	20%	20%	10%	2%
Strong policy: Did not meet IOM standard	9%	7%	10%	0%	7%	0%
Strong policy: Met IOM standard (≤ 200 mg sodium/portion)	1%	3%	2%	1%	3%	0%
Competitive food or location ban	29%	16%	8%	0%	14%	0%
Calorie content						
No policy/provision	50%	64%	65%	92%	67%	99%
Weak policy	4%	3%	8%	6%	3%	1%
Strong policy: Did not meet IOM standard	4%	2%	6%	1%	4%	0%
Strong policy: Met IOM standard (≤ 200 calories/serving)	14%	15%	15%	1%	12%	0%
Competitive food or location ban	28%	15%	7%	0%	14%	0%
BEVERAGE STANDARDS						
Regular Soda						
No policy/provision	27%	40%	23%	81%	50%	97%
Weak policy	8%	7%	5%	8%	7%	3%
Strong policy: Did not meet IOM standard (bans regular soda but not all sugar-sweetened beverages)	29%	27%	50%	10%	18%	0%
Strong policy: Met IOM standard (beverages with added caloric sweeteners prohibited)	14%	11%	13%	1%	11%	0%
Competitive beverage or location ban	22%	15%	8%	0%	13%	0%
Other sugar-sweetened beverages (SSBs)^d						
No policy/provision	42%	53%	43%	91%	59%	97%
Weak policy	21%	21%	35%	8%	16%	3%
Strong policy: Met IOM standard (beverages with added caloric sweeteners prohibited)	14%	11%	13%	1%	11%	0%
Competitive beverage or location ban	22%	15%	8%	0%	13%	0%
Sugar/calorie content of flavored milk						
No policy/provision	62%	71%	67%	95%	74%	99%
Weak policy	3%	3%	3%	4%	1%	1%
Strong policy: Did not meet IOM standard	12%	10%	22%	1%	10%	0%
Strong policy: Met IOM standard (≤ 22 g of total sugars/8 oz portion)	2%	2%	2%	0%	1%	0%
Competitive beverage or location ban	22%	15%	7%	0%	13%	0%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

^d For other sugar-sweetened beverages, fat content of milk, and caffeine content of beverages, the only strong policy category was the IOM standard.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 3, CONTINUED

		% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE, SCHOOL YEAR 2010-11					
		Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
Elementary School Level (Grades 1-5) (CONTINUED)							
BEVERAGE STANDARDS (CONTINUED)							
Fat content of milk^d							
No policy/provision		45%	56%	56%	89%	63%	97%
Weak policy		24%	21%	24%	9%	19%	3%
Strong policy: Met IOM standard (only low-fat (1%) or non-fat/skim milk allowed)		8%	8%	14%	2%	5%	0%
Competitive beverage or location ban		22%	15%	7%	0%	13%	0%
Serving size limit for beverages							
No policy/provision		51%	61%	54%	92%	69%	98%
Weak policy		17%	17%	29%	7%	10%	1%
Strong policy: Did not meet IOM standard		10%	7%	10%	1%	7%	0%
Strong policy: Met IOM standard (Milk: 8 oz; 100% Juice: 4 oz)		0%	0%	1%	0%	0%	0%
Competitive beverage or location ban		22%	15%	7%	0%	13%	0%
Caffeine content of beverages^d							
No policy/provision		41%	51%	42%	90%	57%	97%
Weak policy		6%	7%	7%	7%	5%	3%
Strong policy: Met IOM standard (beverages with added caffeine prohibited)		30%	26%	43%	3%	25%	0%
Competitive beverage or location ban		22%	15%	8%	0%	13%	0%
Middle School Level (Grades 6-8)							
FOOD STANDARDS							
Sugar content							
No policy/provision		38%	45%	41%	83%	54%	96%
Weak policy		25%	25%	28%	14%	20%	3%
Strong policy: Did not meet IOM standard		10%	7%	8%	1%	7%	0%
Strong policy: Met IOM standard ($\leq 35\%$ of total calories/total weight from sugar)		24%	22%	23%	3%	17%	1%
Competitive food or location ban		3%	1%	1%	0%	2%	0%
Fat content							
No policy/provision		30%	37%	32%	72%	50%	96%
Weak policy		24%	23%	26%	24%	14%	3%
Strong policy: Did not meet IOM standard		25%	24%	25%	1%	25%	0%
Strong policy: Met IOM standard ($\leq 35\%$ of total calories from fat)		17%	14%	15%	3%	8%	1%
Competitive food or location ban		3%	1%	1%	0%	2%	0%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

^d For other sugar-sweetened beverages, fat content of milk, and caffeine content of beverages, the only strong policy category was the IOM standard.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 3, CONTINUED

Middle School Level (Grades 6–8) (CONTINUED)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE, SCHOOL YEAR 2010–11					
	Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
FOOD STANDARDS (CONTINUED)						
Trans fats						
No policy/provision	55%	61%	58%	87%	66%	98%
Weak policy	20%	19%	20%	9%	19%	2%
Strong policy: Did not meet IOM standard	11%	8%	11%	2%	7%	0%
Strong policy: Met IOM standard (trans fat free or no more than 0.5g trans fat)	11%	10%	10%	1%	5%	0%
Competitive food or location ban	3%	1%	1%	0%	2%	0%
Sodium content						
No policy/provision	65%	70%	66%	78%	78%	98%
Weak policy	18%	17%	19%	20%	9%	1%
Strong policy: Did not meet IOM standard	11%	9%	11%	1%	8%	1%
Strong policy: Met IOM standard (\leq 200mg sodium/portion)	3%	3%	2%	1%	3%	0%
Competitive food or location ban	3%	1%	1%	0%	2%	0%
Calorie content						
No policy/provision	67%	78%	74%	92%	79%	99%
Weak policy	8%	3%	4%	6%	2%	1%
Strong policy: Did not meet IOM standard	13%	10%	13%	1%	11%	0%
Strong policy: Met IOM standard (\leq 200 calories/serving)	9%	8%	7%	1%	5%	0%
Competitive food or location ban	3%	1%	1%	0%	2%	0%
BEVERAGE STANDARDS						
Regular Soda						
No policy/provision	31%	42%	25%	81%	51%	97%
Weak policy	11%	9%	5%	8%	8%	3%
Strong policy: Did not meet IOM standard (bans regular soda but not all SSBs)	51%	44%	65%	10%	34%	1%
Strong policy: Met IOM standard (beverages with added caloric sweeteners prohibited)	6%	4%	5%	1%	4%	0%
Competitive beverage or location ban	2%	1%	1%	0%	2%	0%
Other sugar-sweetened beverages (SSBs)^d						
No policy/provision	70%	75%	71%	96%	77%	98%
Weak policy	23%	19%	23%	3%	16%	2%
Strong policy: Met IOM standard (beverages with added caloric sweeteners prohibited)	6%	4%	5%	1%	4%	0%
Competitive beverage or location ban	2%	1%	1%	0%	2%	0%
Sugar/calorie content of flavored milk						
No policy/provision	73%	76%	74%	95%	77%	99%
Weak policy	3%	3%	3%	4%	1%	1%
Strong policy: Did not meet IOM standard	20%	18%	20%	1%	18%	0%
Strong policy: Met IOM standard (\leq 22g of total sugars/8 oz portion)	2%	2%	2%	0%	1%	0%
Competitive beverage or location ban	2%	1%	1%	0%	2%	0%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

^d For other sugar-sweetened beverages, fat content of milk, and caffeine content of beverages, the only strong policy category was the IOM standard.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 3, CONTINUED

Middle School Level (Grades 6–8) (CONTINUED)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE, SCHOOL YEAR 2010–11					
	Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
BEVERAGE STANDARDS (CONTINUED)						
Fat content of milk^d						
No policy/provision	61%	67%	63%	89%	72%	97%
Weak policy	27%	23%	25%	9%	18%	3%
Strong policy: Met IOM standard (only low-fat (1%) or non-fat/skim milk allowed)	11%	9%	11%	2%	7%	0%
Competitive beverage or location ban	2%	1%	1%	0%	2%	0%
Serving size limit for beverages						
No policy/provision	56%	61%	59%	92%	69%	98%
Weak policy	32%	29%	30%	6%	22%	1%
Strong policy: Did not meet IOM standard	10%	8%	10%	1%	7%	0%
Strong policy: Met IOM standard (Milk: 8 oz; 100% Juice: 4 oz)	0%	0%	0%	0%	0%	0%
Competitive beverage or location ban	2%	1%	1%	0%	2%	0%
Caffeine content of beverages^d						
No policy/provision	63%	68%	64%	91%	69%	97%
Weak policy	18%	17%	18%	7%	15%	2%
Strong policy: Met IOM standard (beverages with added caffeine prohibited)	18%	14%	17%	2%	14%	1%
Competitive beverage or location ban	2%	1%	1%	0%	2%	0%

High School Level (Grades 9–12)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE, SCHOOL YEAR 2010–11					
	Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
FOOD STANDARDS						
Sugar content						
No policy/provision	44%	49%	47%	84%	57%	97%
Weak policy	27%	26%	28%	13%	20%	3%
Strong policy: Did not meet IOM standard	8%	7%	6%	0%	5%	0%
Strong policy: Met IOM standard (≤35% of total calories/total weight from sugar)	19%	17%	18%	2%	15%	0%
Competitive food or location ban	2%	1%	0%	0%	3%	0%
Fat content						
No policy/provision	35%	40%	37%	71%	53%	96%
Weak policy	26%	25%	28%	25%	15%	3%
Strong policy: Did not meet IOM standard	22%	24%	23%	1%	24%	0%
Strong policy: Met IOM standard (≤35% of total calories from fat)	15%	10%	11%	2%	6%	1%
Competitive food or location ban	2%	1%	0%	0%	3%	0%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

^d For other sugar-sweetened beverages, fat content of milk, and caffeine content of beverages, the only strong policy category was the IOM standard.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 3, CONTINUED

		% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE, SCHOOL YEAR 2010-11					
		Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
High School Level (Grades 9-12) (CONTINUED)							
FOOD STANDARDS (CONTINUED)							
Trans fats							
No policy/provision		58%	62%	61%	89%	66%	98%
Weak policy		20%	20%	20%	8%	19%	2%
Strong policy: Did not meet IOM standard		10%	8%	9%	2%	6%	1%
Strong policy: Met IOM standard (trans fat free or no more than 0.5g trans fat)		10%	9%	9%	1%	6%	0%
Competitive food or location ban		2%	1%	0%	0%	3%	0%
Sodium content							
No policy/provision		65%	68%	67%	76%	79%	98%
Weak policy		20%	18%	21%	23%	9%	2%
Strong policy: Did not meet IOM standard		8%	7%	8%	0%	5%	1%
Strong policy: Met IOM standard (≤200mg sodium/portion)		5%	5%	4%	1%	5%	0%
Competitive food or location ban		2%	1%	0%	0%	3%	0%
Calorie content							
No policy/provision		72%	81%	80%	94%	82%	99%
Weak policy		9%	3%	4%	4%	2%	1%
Strong policy: Did not meet IOM standard		10%	8%	10%	1%	8%	0%
Strong policy: Met IOM standard (≤200 calories/serving)		7%	6%	5%	1%	5%	0%
Competitive food or location ban		2%	1%	0%	0%	3%	0%
BEVERAGE STANDARDS							
Regular Soda							
No policy/provision		39%	50%	30%	84%	55%	97%
Weak policy		13%	7%	5%	6%	8%	2%
Strong policy: Did not meet IOM standard (bans regular soda but not all SSBs)		41%	39%	60%	9%	30%	1%
Strong policy: Met IOM standard (beverages with added caloric sweeteners prohibited)		5%	3%	5%	1%	4%	0%
Competitive beverage or location ban		1%	1%	0%	0%	3%	0%
Other sugar-sweetened beverages (SSBs)^d							
No policy/provision		72%	77%	75%	96%	79%	98%
Weak policy		22%	19%	20%	3%	15%	2%
Strong policy: Met IOM standard (beverages with added caloric sweeteners prohibited)		5%	3%	5%	1%	4%	0%
Competitive beverage or location ban		1%	1%	0%	0%	3%	0%
Sugar/calorie content of flavored milk							
No policy/provision		78%	79%	79%	97%	81%	100%
Weak policy		4%	3%	3%	2%	1%	0%
Strong policy: Did not meet IOM standard		16%	15%	16%	1%	13%	0%
Strong policy: Met IOM standard (≤22g of total sugars/8 oz portion)		2%	2%	2%	0%	2%	0%
Competitive beverage or location ban		1%	1%	0%	0%	3%	0%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

^d For other sugar-sweetened beverages, fat content of milk, and caffeine content of beverages, the only strong policy category was the IOM standard.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 3, CONTINUED

High School Level (Grades 9–12) (CONTINUED)	% OF STUDENTS IN PUBLIC SCHOOL DISTRICTS NATIONWIDE, SCHOOL YEAR 2010–11					
	Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
BEVERAGE STANDARDS (CONTINUED)						
Fat content of milk^d						
No policy/provision	66%	71%	68%	91%	77%	97%
Weak policy	22%	19%	20%	7%	13%	3%
Strong policy: Met IOM standard (only low-fat (1%) or non-fat/skim milk allowed)	11%	9%	11%	2%	7%	0%
Competitive beverage or location ban	1%	1%	0%	0%	3%	0%
Serving size limit for beverages						
No policy/provision	59%	63%	62%	92%	71%	99%
Weak policy	34%	30%	31%	7%	23%	1%
Strong policy: Did not meet IOM standard	6%	6%	6%	1%	4%	0%
Strong policy: Met IOM standard (Milk: 8 oz; 100% Juice: 8 oz)	1%	0%	0%	0%	0%	0%
Competitive beverage or location ban	1%	1%	0%	0%	3%	0%
Caffeine content of beverages^d						
No policy/provision	72%	76%	73%	93%	76%	98%
Weak policy	16%	15%	15%	5%	13%	2%
Strong policy: Met IOM standard (beverages with added caffeine prohibited)	11%	9%	11%	2%	9%	1%
Competitive beverage or location ban	1%	1%	0%	0%	3%	0%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

^d For other sugar-sweetened beverages, fat content of milk, and caffeine content of beverages, the only strong policy category was the IOM standard.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 4 Percentage of Public School *Districts* Nationwide with Wellness Policies Addressing Competitive Food and Beverage Content Restrictions by Grade Level of Applicability and Location of Sale, School Year 2010–11^e

Elementary School Level (Grades 1–5)	% OF PUBLIC SCHOOL <i>DISTRICTS</i> NATIONWIDE, SCHOOL YEAR 2010–11					
	Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
FOOD STANDARDS						
Sugar content						
No policy/provision	41%	48%	45%	83%	61%	95%
Weak policy	19%	19%	32%	15%	12%	4%
Strong policy: Did not meet IOM standard	6%	6%	6%	0%	4%	0%
Strong policy: Met IOM standard (≤35% of total calories/ total weight from sugar)	14%	13%	13%	2%	8%	1%
Competitive food or location ban	20%	14%	4%	0%	14%	0%
Fat content						
No policy/provision	30%	38%	30%	73%	58%	95%
Weak policy	24%	23%	29%	24%	10%	4%
Strong policy: Did not meet IOM standard	11%	11%	20%	1%	10%	0%
Strong policy: Met IOM standard (≤35% of total calories from fat)	15%	15%	17%	1%	8%	1%
Competitive food or location ban	20%	14%	4%	0%	14%	0%
Trans fats						
No policy/provision	57%	64%	61%	91%	70%	97%
Weak policy	14%	13%	25%	7%	12%	3%
Strong policy: Did not meet IOM standard	4%	3%	6%	1%	2%	0%
Strong policy: Met IOM standard (trans fat free or no more than 0.5g trans fat)	6%	5%	5%	1%	2%	0%
Competitive food or location ban	20%	14%	4%	0%	14%	0%
Sodium content						
No policy/provision	52%	60%	67%	77%	72%	96%
Weak policy	21%	20%	22%	22%	9%	3%
Strong policy: Did not meet IOM standard	6%	6%	7%	0%	4%	1%
Strong policy: Met IOM standard (≤200mg sodium/portion)	1%	1%	0%	1%	1%	0%
Competitive food or location ban	20%	14%	4%	0%	14%	0%
Calorie content						
No policy/provision	63%	71%	79%	95%	75%	99%
Weak policy	4%	3%	4%	3%	2%	1%
Strong policy: Did not meet IOM standard	3%	3%	4%	0%	3%	0%
Strong policy: Met IOM standard (≤200 calories/serving)	11%	10%	10%	1%	6%	0%
Competitive food or location ban	19%	13%	3%	0%	14%	0%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

^e Definitions for strong and weak policy provisions are provided on page 32.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 4, CONTINUED

Elementary School Level (Grades 1–5) (CONTINUED)	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE, SCHOOL YEAR 2010–11					
	Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
BEVERAGE STANDARDS						
Regular Soda						
No policy/provision	39%	49%	35%	83%	59%	95%
Weak policy	9%	8%	5%	6%	7%	4%
Strong policy: Did not meet IOM standard (bans regular soda but not all sugar-sweetened beverages)	21%	20%	43%	11%	10%	1%
Strong policy: Met IOM standard (beverages with added caloric sweeteners prohibited)	13%	10%	12%	0%	10%	0%
Competitive beverage or location ban	18%	14%	5%	0%	13%	0%
Other sugar-sweetened beverages (SSBs)^f						
No policy/provision	55%	61%	56%	95%	66%	96%
Weak policy	15%	16%	28%	4%	10%	4%
Strong policy: Met IOM standard (beverages with added caloric sweeteners prohibited)	13%	10%	12%	0%	10%	0%
Competitive beverage or location ban	18%	14%	5%	0%	13%	0%
Sugar/calorie content of flavored milk						
No policy/provision	74%	80%	79%	98%	82%	100%
Weak policy	3%	2%	2%	2%	1%	0%
Strong policy: Did not meet IOM standard	6%	5%	16%	0%	5%	0%
Strong policy: Met IOM standard (≤22g of total sugars/8 oz portion)	0%	0%	0%	0%	0%	0%
Competitive beverage or location ban	17%	13%	3%	0%	13%	0%
Fat content of milk^f						
No policy/provision	58%	64%	68%	94%	71%	96%
Weak policy	20%	18%	20%	6%	14%	4%
Strong policy: Met IOM standard (only low-fat (1%) or non-fat/skim milk allowed)	4%	4%	7%	1%	2%	0%
Competitive beverage or location ban	18%	14%	5%	0%	13%	0%
Serving size limit for beverages						
No policy/provision	60%	65%	63%	93%	73%	98%
Weak policy	14%	15%	26%	6%	9%	1%
Strong policy: Did not meet IOM standard	9%	7%	7%	1%	5%	1%
Strong policy: Met IOM standard (Milk: 8 oz; 100% Juice: 4 oz)	1%	0%	1%	0%	0%	0%
Competitive beverage or location ban	17%	13%	3%	0%	13%	0%
Caffeine content of beverages^f						
No policy/provision	53%	60%	55%	94%	65%	95%
Weak policy	7%	8%	9%	4%	5%	4%
Strong policy: Met IOM standard (beverages with added caffeine prohibited)	22%	18%	32%	2%	17%	1%
Competitive beverage or location ban	18%	14%	5%	0%	13%	0%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

^f For other sugar-sweetened beverages, fat content of milk, and caffeine content of beverages, the only strong policy category was the IOM standard.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 4, CONTINUED

Middle School Level (Grades 6–8)	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE, SCHOOL YEAR 2010–11					
	Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
FOOD STANDARDS						
Sugar content						
No policy/provision	44%	48%	45%	82%	62%	96%
Weak policy	30%	29%	34%	15%	22%	2%
Strong policy: Did not meet IOM standard	7%	6%	6%	0%	5%	0%
Strong policy: Met IOM standard (\leq 35% of total calories/ total weight from sugar)	17%	15%	15%	2%	9%	2%
Competitive food or location ban	2%	1%	0%	0%	1%	0%
Fat content						
No policy/provision	31%	36%	31%	73%	57%	96%
Weak policy	29%	28%	33%	24%	14%	2%
Strong policy: Did not meet IOM standard	23%	22%	21%	1%	21%	0%
Strong policy: Met IOM standard (\leq 35% of total calories from fat)	14%	13%	14%	2%	6%	2%
Competitive food or location ban	2%	1%	0%	0%	1%	0%
Trans fats						
No policy/provision	61%	65%	63%	90%	70%	98%
Weak policy	24%	24%	25%	7%	22%	1%
Strong policy: Did not meet IOM standard	7%	5%	6%	1%	4%	1%
Strong policy: Met IOM standard (trans fat free or no more than 0.5g trans fat)	6%	5%	5%	1%	2%	0%
Competitive food or location ban	2%	1%	0%	0%	1%	0%
Sodium content						
No policy/provision	67%	71%	69%	77%	85%	97%
Weak policy	21%	19%	22%	22%	7%	1%
Strong policy: Did not meet IOM standard	8%	7%	8%	0%	5%	2%
Strong policy: Met IOM standard (\leq 200mg sodium/portion)	1%	1%	1%	1%	1%	0%
Competitive food or location ban	2%	1%	0%	0%	1%	0%
Calorie content						
No policy/provision	78%	84%	82%	95%	88%	100%
Weak policy	5%	2%	3%	3%	2%	0%
Strong policy: Did not meet IOM standard	7%	7%	8%	1%	7%	0%
Strong policy: Met IOM standard (\leq 200 calories/serving)	8%	6%	6%	1%	2%	0%
Competitive food or location ban	2%	1%	0%	0%	1%	0%
BEVERAGE STANDARDS						
Regular Soda						
No policy/provision	42%	49%	34%	83%	58%	96%
Weak policy	9%	8%	5%	5%	8%	2%
Strong policy: Did not meet IOM standard (bans regular soda but not all SSBs)	43%	39%	57%	11%	29%	2%
Strong policy: Met IOM standard (beverages with added caloric sweeteners prohibited)	5%	3%	4%	0%	4%	0%
Competitive beverage or location ban	1%	1%	0%	0%	1%	0%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 4, CONTINUED

Middle School Level (Grades 6–8) (CONTINUED)	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE, SCHOOL YEAR 2010–11					
	Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
BEVERAGE STANDARDS (CONTINUED)						
Other sugar-sweetened beverages (SSBs)^f						
No policy/provision	73%	77%	75%	98%	81%	97%
Weak policy	21%	19%	20%	2%	14%	3%
Strong policy: Met IOM standard (beverages with added caloric sweeteners prohibited)	5%	3%	4%	0%	4%	0%
Competitive beverage or location ban	1%	1%	0%	0%	1%	0%
Sugar/calorie content of flavored milk						
No policy/provision	77%	81%	80%	98%	83%	100%
Weak policy	3%	2%	2%	2%	0%	0%
Strong policy: Did not meet IOM standard	18%	16%	17%	0%	16%	0%
Strong policy: Met IOM standard (≤22g of total sugars/8 oz portion)	0%	0%	0%	0%	0%	0%
Competitive beverage or location ban	1%	1%	0%	0%	1%	0%
Fat content of milk^f						
No policy/provision	70%	74%	71%	94%	81%	96%
Weak policy	22%	19%	21%	6%	14%	4%
Strong policy: Met IOM standard (only low-fat (1%) or non-fat/skim milk allowed)	7%	6%	8%	1%	4%	0%
Competitive beverage or location ban	1%	1%	0%	0%	1%	0%
Serving size limit for beverages						
No policy/provision	59%	64%	62%	93%	70%	98%
Weak policy	32%	29%	30%	7%	23%	1%
Strong policy: Did not meet IOM standard	8%	7%	8%	1%	5%	1%
Strong policy: Met IOM standard (Milk: 8 oz; 100% Juice: 4 oz)	0%	0%	0%	0%	0%	0%
Competitive beverage or location ban	1%	1%	0%	0%	1%	0%
Caffeine content of beverages^f						
No policy/provision	69%	74%	72%	95%	77%	96%
Weak policy	17%	15%	16%	3%	12%	2%
Strong policy: Met IOM standard (beverages with added caffeine prohibited)	12%	10%	12%	1%	9%	2%
Competitive beverage or location ban	1%	1%	0%	0%	1%	0%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

^f For other sugar-sweetened beverages, fat content of milk, and caffeine content of beverages, the only strong policy category was the IOM standard.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 4, CONTINUED

High School Level (Grades 9–12)	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE, SCHOOL YEAR 2010–11					
	Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
FOOD STANDARDS						
Sugar content						
No policy/provision	50%	54%	51%	82%	64%	97%
Weak policy	31%	31%	35%	16%	22%	2%
Strong policy: Did not meet IOM standard	8%	7%	6%	0%	5%	0%
Strong policy: Met IOM standard (≤35% of total calories/ total weight from sugar)	9%	8%	8%	2%	6%	1%
Competitive food or location ban	2%	1%	0%	0%	2%	0%
Fat content						
No policy/provision	36%	41%	37%	73%	59%	97%
Weak policy	31%	29%	35%	24%	14%	2%
Strong policy: Did not meet IOM standard	23%	22%	21%	2%	22%	0%
Strong policy: Met IOM standard (≤35% of total calories from fat)	8%	6%	7%	1%	3%	1%
Competitive food or location ban	2%	1%	0%	0%	2%	0%
Trans fats						
No policy/provision	62%	66%	63%	90%	69%	98%
Weak policy	26%	25%	27%	8%	23%	1%
Strong policy: Did not meet IOM standard	6%	5%	6%	1%	3%	1%
Strong policy: Met IOM standard (trans fat free or no more than 0.5g trans fat)	5%	4%	4%	1%	2%	0%
Competitive food or location ban	2%	1%	0%	0%	2%	0%
Sodium content						
No policy/provision	69%	72%	70%	75%	86%	98%
Weak policy	23%	21%	23%	23%	8%	2%
Strong policy: Did not meet IOM standard	6%	5%	6%	0%	3%	1%
Strong policy: Met IOM standard (≤200mg sodium/portion)	2%	2%	1%	1%	1%	0%
Competitive food or location ban	2%	1%	0%	0%	2%	0%
Calorie content						
No policy/provision	83%	88%	87%	96%	88%	99%
Weak policy	5%	3%	3%	3%	2%	1%
Strong policy: Did not meet IOM standard	7%	6%	7%	1%	6%	0%
Strong policy: Met IOM standard (≤200 calories/serving)	4%	3%	3%	1%	2%	0%
Competitive food or location ban	2%	1%	0%	0%	2%	0%
BEVERAGE STANDARDS						
Regular Soda						
No policy/provision	48%	55%	38%	85%	61%	97%
Weak policy	12%	8%	5%	5%	9%	2%
Strong policy: Did not meet IOM standard (bans regular soda but not all SSBs)	35%	32%	54%	10%	26%	1%
Strong policy: Met IOM standard (beverages with added caloric sweeteners prohibited)	4%	3%	3%	0%	3%	0%
Competitive beverage or location ban	1%	1%	0%	0%	2%	0%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

TABLE 4, CONTINUED

High School Level (Grades 9–12) (CONTINUED)	% OF PUBLIC SCHOOL DISTRICTS NATIONWIDE, SCHOOL YEAR 2010–11					
	Vending Machines	School Stores	À la Carte	Class Parties	Fundraisers	Evening Events
BEVERAGE STANDARDS (CONTINUED)						
Other sugar-sweetened beverages (SSBs)^f						
No policy/provision	77%	81%	79%	98%	84%	98%
Weak policy	18%	16%	18%	2%	11%	2%
Strong policy: Met IOM standard (beverages with added caloric sweeteners prohibited)	4%	3%	3%	0%	3%	0%
Competitive beverage or location ban	1%	1%	0%	0%	2%	0%
Sugar/calorie content of flavored milk						
No policy/provision	78%	81%	80%	99%	82%	100%
Weak policy	4%	3%	3%	1%	0%	0%
Strong policy: Did not meet IOM standard	18%	16%	17%	0%	15%	0%
Strong policy: Met IOM standard (≤22g of total sugars/8 oz portion)	0%	0%	0%	0%	0%	0%
Competitive beverage or location ban	1%	1%	0%	0%	2%	0%
Fat content of milk^f						
No policy/provision	73%	77%	74%	94%	83%	98%
Weak policy	19%	16%	18%	5%	11%	2%
Strong policy: Met IOM standard (only low-fat (1%) or non-fat/skim milk allowed)	8%	6%	8%	1%	4%	0%
Competitive beverage or location ban	1%	1%	0%	0%	2%	0%
Serving size limit for beverages						
No policy/provision	60%	64%	63%	92%	70%	98%
Weak policy	34%	30%	31%	7%	25%	1%
Strong policy: Did not meet IOM standard	5%	4%	5%	1%	3%	0%
Strong policy: Met IOM standard (Milk: 8 oz; 100% Juice: 8 oz)	0%	0%	0%	0%	0%	0%
Competitive beverage or location ban	1%	1%	0%	0%	2%	0%
Caffeine content of beverages^f						
No policy/provision	75%	79%	77%	96%	82%	97%
Weak policy	16%	14%	15%	3%	10%	2%
Strong policy: Met IOM standard (beverages with added caffeine prohibited)	8%	6%	8%	1%	6%	1%
Competitive beverage or location ban	1%	1%	0%	0%	2%	0%

Due to rounding, some percentages may not sum exactly to 100. Exact numbers are available at www.bridgingthegapresearch.org.

^f For other sugar-sweetened beverages, fat content of milk, and caffeine content of beverages, the only strong policy category was the IOM standard.

Source: Bridging the Gap, Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago, 2013.

Overview of Study Methods

This study examined hard copies of written policies obtained via Internet research and direct communication with public school districts located in 47 of the 48 contiguous states. The study included nationally representative samples of 579, 641, 592, 622, and 679 public school districts for each school year, inclusive of school years 2006–07 through 2010–11, respectively. The day after Labor Day of each year was used as a proxy for the first day of the school year. A 94 percent response rate was achieved for school years 2006–07, 2007–08, and 2010–11; and a 97 percent response rate was achieved for school years 2008–09 and 2009–10.

For purposes of this study, **WELLNESS POLICY** was defined to include: 1) the actual district wellness policy; 2) the associated administrative policies, including implementation regulations, rules, procedures, or administrative guidelines; and 3) any district, state, or model policies that were referenced within the wellness policy or administrative documents.

All policies were analyzed by two trained analysts using an adaptation of a wellness policy coding scheme developed by Schwartz et al.²⁵ and originally presented in Chriqui et al.²⁶ A detailed explanation of the coding methodology can be found in the Appendix included in Chriqui et al.²⁶ For each policy provision described, data are presented on the percentage of students in a district with: 1) a strong policy; 2) a weak policy; or 3) no policy. We defined **STRONG POLICY PROVISIONS** as those that were definitely required and specified an implementation plan or strategy. Strong policy provisions included language such as *shall*, *must*, *will*, *require*, *comply*, and *enforce*. For Tables 3 and 4, we also differentiated strong policies that were required and either 1) met the 2007 IOM competitive food and/or beverage standards²⁷ or 2) had a weaker requirement that did not meet the IOM standards. We defined **WEAK POLICY PROVISIONS** as those that included vague terms, suggestions or recommendations, as well as those that required action, but noted exceptions for certain grade levels or certain times of day. Weak policy provisions included language such as *should*, *might*, *encourage*, *some*, *make an effort to*, *partial*, and *try*.

Data in Tables 1 and 3 are presented on the weighted percentages of students nationwide who were enrolled in public school districts with each policy provision discussed. Data are presented on the percentage of students nationwide to provide readers with a sense of the relative reach of the policies. The findings presented in this report are based on analyses of wellness policy data representing approximately 42 million students each year. Data in Tables 2 and 4 are presented on the weighted percentage of public school districts nationwide.

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