



**Specialized Instructional Support**  
**&**  
**North Carolina Healthy Schools**

# **Healthy Active Children Policy (SHLT-000)**

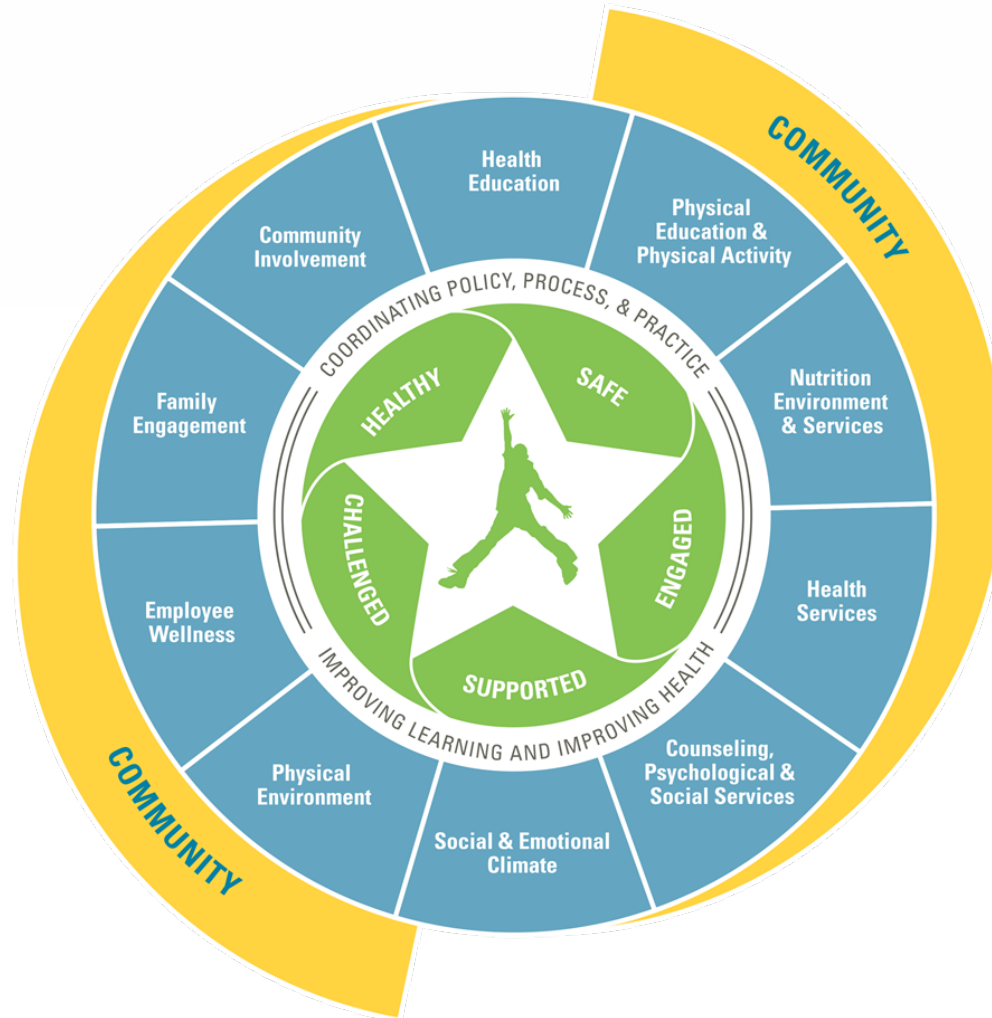
## **Updates**

**January 6, 2021**



# Whole School, Whole Community, Whole Child

## *A Collaborative Approach to Learning and Health*





# Healthy Active Children Policy

- Section 1: Local School Health Advisory Council (SHAC)
- Section 2: Whole School, Whole Community, Whole Child (WSCC) Model
- Section 3: Local Wellness Policy
- Section 4: Physical Education and Healthful Living
- Section 5: Physical Activity and Recess
- Section 6: Nutrition Services, Education and Promotion
- Section 7: Policy Monitoring



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- **Section 8: Data Collection – Centers for Disease Control and Prevention Youth Risk Behavior Survey**



YRBS





# Priority Health-Risk Behaviors and Health Outcomes Monitored by YRBS

- Behaviors that contribute to the leading causes of mortality and morbidity
  - Unintentional injuries and violence
  - Sexual behaviors
  - Alcohol and other drug use
  - Tobacco use
  - Unhealthy dietary behaviors
  - Inadequate physical activity
- Obesity
- Other priority health issues

**“Student voice is  
the road to  
change.”**

**- Dr. Russell J. Quaglia**



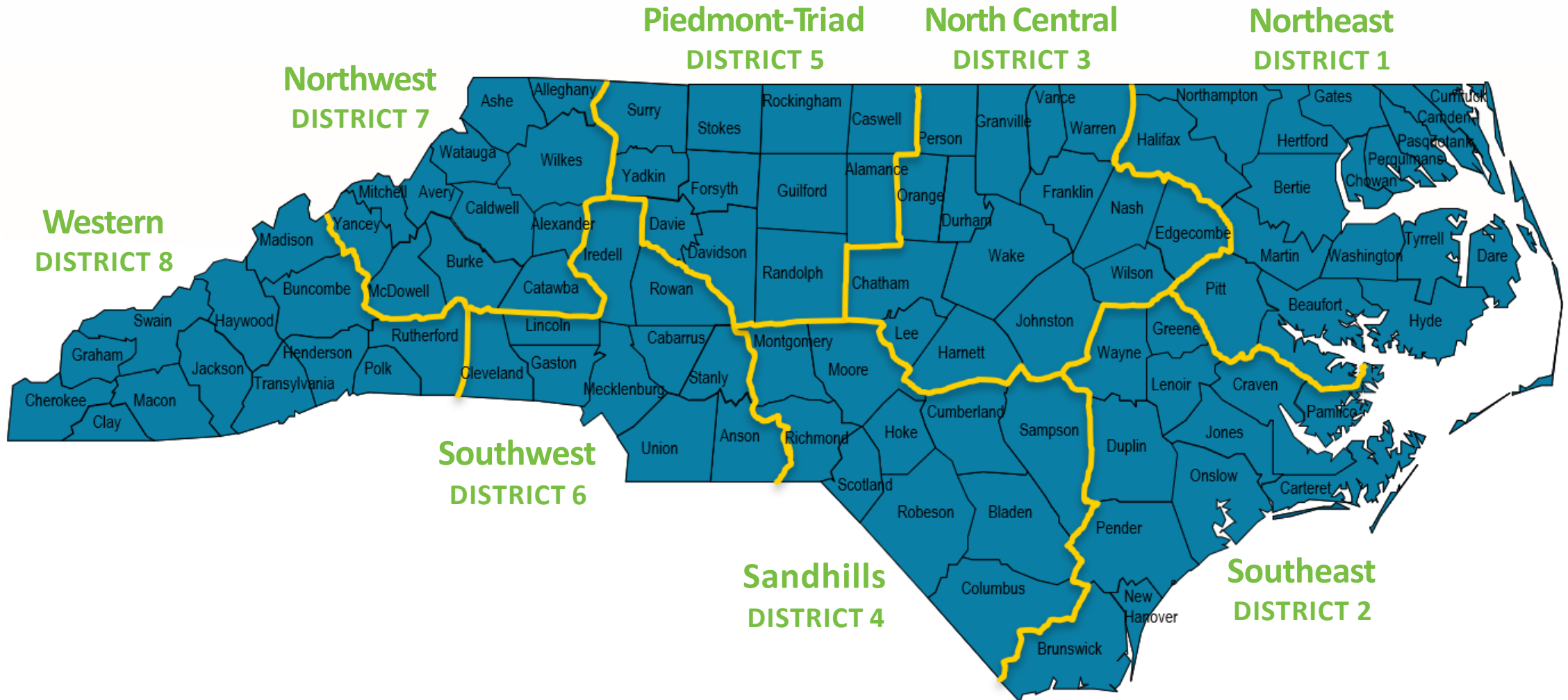
## 2021 NC YRBS Administration

- Statewide Sample
- 20 LEAs currently receiving district-level data
- Oversampling of 8 SBE regions
- Phased-in oversampling at LEA level in subsequent administrations
- Online





# North Carolina State Board of Education Districts





## SHLT-000 Policy Introduction

The State Board of Education (SBE) adopted the Whole School, Whole Community, Whole Child (WSCC) framework as a model for addressing non-academic barriers to student success. The Healthy Active Children (HAC) Policy focuses on School Health Advisory Councils, School Nutrition, Healthful Living, Physical Activity, and data collection within the WSCC framework. It is best practice for LEAs to identify data to assess current status and address student health needs. Data from the HAC Policy Report and the Youth Risk Behavior Survey (YRBS) are essential to assessing, planning, implementing, and evaluating programming to meet the needs of students and staff. Data collected through the YRBS and the HAC Policy Report are critical to understanding the physical, mental, and social well-being of North Carolina students. Behaviors must be measured directly to determine the level of risk among adolescents. YRBS data shows strong relationships between the health and academic performance of North Carolina students. The survey provides consistent and reliable health behavior data at the state and national level. School Health Advisory Councils should use this data to inform health decisions for their LEA.



## **Section 8. DATA COLLECTION – CENTERS FOR DISEASE CONTROL AND PREVENTION YOUTH RISK BEHAVIOR SURVEY**

The Youth Risk Behavior Survey (YRBS) is a national school-based survey conducted by the Centers for Disease Control and Prevention (CDC) in collaboration with state and local education agencies. The YRBS has been conducted in North Carolina since 1993. In order to gather State Board of Education region level data, it is important that any LEA that is chosen participates in the YRBS.

The State Board of Education finds that improving student health is essential to accomplishing its goal of eliminating educational opportunity gaps and promoting equal access to education. That goal cannot be accomplished without accurate and comprehensive information about student health. The State Board of Education is dependent on local school administrators to gather that information. It is important for public school units to participate in the administration of the YRBS in order to fulfill both their obligations and the Board's obligation to provide equal educational opportunities to their students.



## Section 8. DATA COLLECTION – CENTERS FOR DISEASE CONTROL AND PREVENTION YOUTH RISK BEHAVIOR SURVEY

1. Each LEA should cooperate with the Department of Public Instruction to collect Youth Risk Behavior Survey (YRBS) data in odd-numbered years.
2. YRBS data collection will be reported to DPI as part of the School-Based Mental Health Policy plan reporting process.





## Section 8. DATA COLLECTION – CENTERS FOR DISEASE CONTROL AND PREVENTION YOUTH RISK BEHAVIOR SURVEY

3. SBE regional-level data will be provided to each LEA at the conclusion of data evaluation.
4. SBE regional-level data and district-level data, where available, should be used by each local SHAC to create and inform goals and action plans.





# Now more than ever we need healthy children that are able to learn better!

