




New Jersey School Health Profiles 2014

The School Health Profiles (Profiles) assist state and local education and health agencies in monitoring and assessing characteristics of bullying prevention and mental health; nutrition; physical education and physical activity; health-related professional development; school health education; school organization to guide health policy; sexual health; tobacco prevention; and other health topics. The Centers for Disease Control and Prevention (CDC), in collaboration with state and local education and health agencies, developed the Profiles. Data from Profiles can be used to improve school health programs.

Every two years, questionnaires are administered to school officials to collect data – one for school principals and one for lead health education teachers. In 2014, two questionnaires were distributed to 428 regular public schools and charter schools containing any of grades 6 through 12 in New Jersey, where grade 6 is not the grade of termination. Surveys could be completed by mail or online. Complete questionnaires were received from principals in 71% of schools and from lead health education teachers in 71% of schools. Because the response rates for these surveys were greater than or equal to 70%, the results have been weighted to be representative of all regular public secondary schools in New Jersey.

This summary provides highlights of the Profiles survey results by general topic area, with further details on each topic area in the tables that follow. A comparison was performed by CDC between 2012 and 2014 using a t-test (based on $p < .05$) to test for a statistically significant increase or decrease in the percent response rate to a given question. Results are also reported for 2008 and 2010 administrations, though these results are not included in the CDC analysis of change. Principal question responses in the tables are noted with (P), while teacher responses are noted with (T). A dash (--) is used if CDC did not conduct analysis on a particular item. The trends are identified by the following symbols shown below.

Increase in percent response rate	Decrease in percent response rate	No change in percent response rate	Change not reported by CDC
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2014 Profiles Topics:

[Bullying Prevention and Mental Health](#) New Jersey school principals and teachers report high rates of teaching students about mental health issues and improving school climates to prevent bullying. Seventy-nine percent of schools provided health information to parents and families to increase knowledge of preventing school bullying.

[Health Education](#) New Jersey schools offer health education courses that teach a variety of skills to their students. For example, in 2014, 95% of teachers reported a health education curriculum that analyzes the influence of family, peers, culture, media, technology, and other factors on health behavior; while 96% reported a curriculum that guides students to practice health-enhancing behaviors to avoid or reduce risks. Among schools that require a course, 38% require students to repeat the course if they fail it.

Nutrition School principals report increases in non-fried vegetable offerings, along with reductions in offerings of less healthy food alternatives. Also, 40% of schools report serving locally or regionally grown foods in the cafeteria or classrooms, and 35% report planting a school food or vegetable garden. On the other hand, a significant increase (9%) from 2012 to 2014 was seen in the number of schools offering cookies, crackers, cakes, pastries, or other baked goods that are not low in fat for purchase at school.

Physical Education and Physical Activity Physical education is required in all grades in New Jersey, and schools teach skills to students intended to increase and enhance their physical activity. A majority of schools also offer sports opportunities to students. In addition, 46% have students participate in physical activity breaks within the classroom during the school day. Families were offered information to increase knowledge of physical activity in 58% of schools.

Professional Development The most frequent types of professional development received in the two years before the 2014 survey were as follows: violence prevention (82%), suicide prevention (66%), using interactive teaching methods (64%), classroom management techniques (62%), and physical activity and fitness (63%). The most commonly requested professional development opportunities were the following: suicide prevention (85%), emotional and mental health (84%), alcohol-use or other drug-use prevention (83%), human sexuality (83%), and violence prevention (82%).

School Organization to Guide Health Policy Nearly all schools (92%) have someone who oversees or coordinates school health and safety programs and activities, but fewer have a school health team that offers guidance on development of policies or coordination of activities on health topics (64%). Schools reported an increase in the use of the School Health Index or other self-assessment tools to assess school policies, activities, and programs.

Sexual Health Nearly all lead health teachers in high schools report addressing HIV, STD, and pregnancy prevention topics with their students, including 100% teaching the following: health consequences of HIV, other STDs, and how they are transmitted; health consequences of pregnancy; the benefits of being sexually abstinent; how to access valid and reliable health information; the efficacy of condoms; and the importance of using condoms consistently and correctly. A majority of middle school lead health teachers addressed these topics, as well, with the exception of condom information.

Tobacco Prevention The vast majority of lead health teachers teach students various tobacco-use prevention topics, such as identifying short- and long-term health consequences of tobacco use (96%) and identifying tobacco products and the harmful substances they contain (95%). Almost all schools have adopted a policy prohibiting tobacco use (95%); and a smaller proportion (62%) have policies prohibiting use among students, staff, and visitors in school buildings, at school functions, in school vehicles, on school grounds, and at off-site school events for 24 hours a day and seven days a week.

Bullying Prevention and Mental Health

Percentage of schools in which teachers tried to increase student knowledge on the following topics in a required course in any of grades 6 through 12 during the current school year (T):	2008	2010	2012	2014	2012-2014 Change
Emotional and mental health	95%	96%	96%	96%	
Suicide prevention	81%	83%	85%	87%	
Violence prevention (e.g., bullying, fighting, or dating violence prevention)	96%	94%	98%	97%	

Percentage of schools that engage in the following Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) youth-related practices (P):	2008	2010	2012	2014	2012-2014 Change
Have a student-led club that aims to create a safe, welcoming, and accepting school environment for all youth, regardless of sexual orientation or gender identity	33%	38%	36%	42%	
Identify 'safe spaces' (e.g., a counselor's office, designated classroom, or student organization) where LGBTQ youth can receive support from administrators, teachers, or other school staff	-	65%	67%	72%	
Prohibit harassment based on a student's perceived or actual sexual orientation or gender identity	-	91%	90%	92%	
Encourage staff to attend professional development on safe and supportive school environments for all students, regardless of sexual orientation or gender identity	-	70%	76%	80%	
Facilitate access to providers not on school property who have experience in providing social and psychological services to LGBTQ youth	-	56%	54%	59%	

Percentage of schools in which:	2008	2010	2012	2014	2012-2014 Change
Staff received professional development on preventing, identifying, and responding to student bullying and sexual harassment, including electronic aggression (P)	-	-	-	99%	--
There is a designated staff member to whom students can confidentially report student bullying and sexual harassment, including electronic aggression (P)	-	-	-	100%	--
Electronic, paper, or oral communication is used to publicize and disseminate policies, rules, or regulations on bullying and sexual harassment, including electronic aggression (P)	-	-	-	100%	--
Parents and families were provided with health information designed to increase parent and family knowledge of preventing student bullying and sexual harassment, including electronic aggression (i.e., cyber-bullying) (T)	-	-	-	79%	--

Health Education

Percentage of schools that taught a required health education course in the following grades (T):	2008	2010	2012	2014	2012-2014 Change
6th grade	93%	89%	95%	92%	●
7th grade	94%	92%	95%	93%	●
8th grade	94%	92%	95%	93%	●
9th grade	91%	87%	93%	89%	●
10th grade	84%	82%	86%	85%	●
11th grade	91%	87%	92%	89%	●
12th grade	91%	89%	92%	87%	●

Percentage of schools in which the health education curriculum addresses the following skills (T):	2008	2010	2012	2014	2012-2014 Change
Comprehending concepts related to health promotion and disease prevention to enhance health	98%	98%	99%	96%	●
Analyzing the influence of family, peers, culture, media, technology, and other factors on health behaviors	97%	97%	97%	95%	●
Accessing valid information and products and services to enhance health	91%	91%	90%	92%	●
Using interpersonal communication skills to enhance health and avoid or reduce health risks	98%	97%	97%	95%	●
Using decision-making skills to enhance health	98%	99%	98%	96%	●
Using goal-setting skills to enhance health	95%	96%	96%	96%	●
Practicing health-enhancing behaviors to avoid or reduce risks	98%	98%	97%	96%	●
Advocating for personal, family, and community health	95%	95%	96%	93%	●

Percentage of schools in which:	2008	2010	2012	2014	2012-2014 Change
There is a full-time registered nurse who provides health services to students (P)	99%	99%	99%	99%	●
Students take only one required health education course (T)	27%	17%	20%	19%	●
Students take two or more required health education courses (T)	70%	78%	78%	77%	●
Students who fail the health education course must repeat it (among schools that required the course) (T)	42%	39%	44%	38%	●
Health education instruction is required in any of grades 6 through 12 (T)	-	96%	96%	96%	●
Parents and families were provided with health information designed to increase parent and family knowledge of asthma during the current school year (T)	33%	35%	34%	39%	●

Percentage of schools in which teachers tried to increase student knowledge on the following topics in a required course in any of grades 6 through 12 during the current school year (T):	2008	2010	2012	2014	2012-2014 Change
Asthma	62%	67%	73%	74%	●
Infectious disease prevention (e.g., influenza [flu] prevention)	-	-	92%	93%	●
Alcohol- or other drug-use prevention	98%	96%	98%	99%	●

Nutrition

Percentage of schools in which students can purchase the following snack foods or beverages from one or more vending machines at the school or at a school store, canteen, or snack bar (P):	2008	2010	2012	2014	2012-2014 Change
Chocolate candy	8%	8%	7%	7%	●
Other kinds of candy	10%	11%	8%	10%	●
Salty snacks that are not low in fat (e.g., regular potato chips)	23%	23%	29%	30%	●
Cookies, crackers, cakes, pastries, or other baked goods that are not low in fat	27%	27%	28%	37%	➔
Ice cream or frozen yogurt that is not low in fat	24%	26%	27%	30%	●
2% or whole milk (plain or flavored)	38%	40%	31%	37%	●
Water ices or frozen slushes that do not contain juice	14%	16%	10%	15%	●
Soda pop or fruit drinks that are not 100% juice	18%	16%	19%	15%	●
Sports drinks (e.g., Gatorade)	39%	41%	35%	32%	●
Foods or beverages containing caffeine	17%	15%	18%	14%	●
Fruits (not fruit juice)	39%	39%	42%	44%	●
Non-fried vegetables (not vegetable juice)	33%	31%	32%	41%	➔

Percentage of schools that:	2008	2010	2012	2014	2012-2014 Change
Provided parents and families with health information designed to increase parent and family knowledge of nutrition and healthy eating during the current school year (T)	50%	50%	44%	55%	➔
Permit students to have a drinking water bottle with them during the school day (P)	-	-	81%	85%	●
Always or almost always offer fruits or non-fried vegetables at school celebrations when foods or beverages are offered (P)	46%	39%	43%	42%	●
Allow students to purchase snack foods or beverages from one or more vending machines at the school or at a school store, canteen, or snack bar (P)	67%	66%	66%	65%	●

Percentage of schools that have done any of the following during the current school year (P):	2008	2010	2012	2014	2012-2014 Change
Priced nutritious foods and beverages at a lower cost while increasing the price of less nutritious foods and beverages	12%	11%	15%	14%	●
Collected suggestions from students, families, and school staff on nutritious food preferences and strategies to promote healthy eating	64%	69%	75%	66%	➔
Provided information to students or families on the nutrition and caloric content of foods available	59%	58%	69%	68%	●
Conducted taste tests to determine food preferences for nutritious items	28%	35%	35%	36%	●
Provided opportunities for students to visit the cafeteria to learn about food safety, food preparation, or other nutrition-related topics	27%	27%	24%	26%	●
Served locally or regionally grown foods in the cafeteria or classrooms	-	-	41%	40%	●
Planted a school food or vegetable garden	-	-	27%	35%	●
Placed fruits and vegetables near the cafeteria cashier, where they are easy to access	-	-	76%	78%	●
Used attractive displays for fruits and vegetables in the cafeteria	-	-	69%	69%	●
Offered a self-serve salad bar to students	-	-	29%	27%	●
Labeled healthful foods with appealing names (e.g., crunchy carrots)	-	-	37%	36%	●

Percentage of schools in which teachers taught the following nutrition and dietary behavior topics in a required course for students in any of grades 6 through 12 during the current school year (T):	2008	2010	2012	2014	2012-2014 Change
Benefits of healthy eating	96%	98%	98%	99%	●
Using food labels	94%	94%	95%	96%	●
Balancing food intake and physical activity	94%	96%	97%	98%	●
Eating more fruits, vegetables, and whole grain products	95%	96%	98%	98%	●
Choosing foods and snacks that are low in solid fat (i.e., saturated and trans fat)	94%	94%	97%	97%	●
Food safety	83%	84%	90%	87%	●
Preparing healthy meals and snacks	91%	91%	94%	94%	●
Risks of unhealthy weight control practices	95%	92%	96%	95%	●
Accepting body size differences	92%	93%	94%	93%	●
Signs, symptoms, and treatment for eating disorders	90%	89%	93%	90%	●

Percentage of schools in which teachers tried to increase student knowledge on the following topics in a required course in any of grades 6 through 12 during the current school year (T):	2008	2010	2012	2014	2012-2014 Change
Foodborne illness prevention	76%	72%	78%	72%	●
Nutrition and dietary behavior	98%	98%	99%	99%	●

Percentage of schools that prohibit advertisements for candy, fast food restaurants, or soft drinks in the following locations (P):	2008	2010	2012	2014	2012-2014 Change
In school buildings	85%	82%	82%	82%	●
On school grounds including on the outside of the school building, on playing fields, or other areas of the campus	81%	80%	76%	78%	●
On school buses or other vehicles used to transport students	82%	79%	80%	80%	●
In school publications (e.g., newsletters, newspapers, web sites, or other school publications)	81%	81%	78%	79%	●

Physical Education and Physical Activity

Percentage of schools that taught required physical education in the following grades (P)	2008	2010	2012	2014	2012-2014 Change
6th grade	99%	99%	99%	100%	●
7th grade	100%	100%	100%	100%	●
8th grade	100%	100%	100%	100%	●
9th grade	99%	99%	98%	100%	●
10th grade	99%	99%	98%	100%	●
11th grade	99%	99%	98%	100%	●
12th grade	99%	99%	98%	100%	●

Percentage of schools in which teachers taught the following physical activity topics in a required course for students in any of grades 6 through 12 during the current school year (T):	2008	2010	2012	2014	2012-2014 Change
Health-related fitness (i.e., cardiorespiratory endurance, muscular endurance, muscular strength, flexibility, and body composition)	97%	98%	98%	99%	●
Phases of a workout (i.e., warm-up, workout, cool down)	95%	95%	96%	98%	●
Decreasing sedentary activities (e.g., television viewing)	92%	94%	94%	98%	➔
Preventing injury during physical activity	96%	94%	96%	98%	●
Weather-related safety (e.g., avoiding heat stroke, hypothermia, and sunburn while physically active)	87%	87%	90%	87%	●
Dangers of using performance-enhancing drugs (e.g., steroids)	94%	94%	95%	94%	●

Percentage of schools in which teachers tried to increase student knowledge on the following topics in a required course in any of grades 6 through 12 during the current school year (T):	2008	2010	2012	2014	2012-2014 Change
Injury prevention and safety	92%	94%	94%	94%	●
Physical activity and fitness	99%	100%	100%	99%	●

Percentage of schools that:	2008	2010	2012	2014	2012-2014 Change
Offer opportunities for all students to participate in intramural sports programs or physical activity clubs (P)	84%	79%	73%	77%	●
Offer interscholastic sports to students (P)	-	-	77%	82%	●
Have a joint use agreement for shared use of school or community physical activity facilities (P)	-	-	76%	74%	●
Have students participate in physical activity breaks in classrooms during the school day outside of physical education (P)	-	-	43%	46%	●
Provide parents and families with health information designed to increase parent and family knowledge of physical activity during the current school year (T)	52%	48%	46%	58%	➔

Professional Development

Percentage of schools in which (T):	2008	2010	2012	2014	2012-2014 Change
The lead health education teacher was certified, licensed, or endorsed by the state to teach health education in middle school or high school	93%	95%	94%	94%	●

Percentage of schools in which those who teach physical education are provided with the following materials (P):	2008	2010	2012	2014	2012-2014 Change
Goals, objectives, and expected outcomes for physical education	99%	99%	98%	98%	●
A chart describing the annual scope and sequence of instruction for physical education	91%	89%	91%	92%	●
Plans for how to assess student performance in physical education	93%	92%	94%	92%	●
A written physical education curriculum	98%	98%	97%	99%	●

Percentage of schools in which those who teach health education are provided with the following materials (T):	2008	2010	2012	2014	2012-2014 Change
Goals, objectives, and expected outcomes for health education	94%	95%	95%	94%	●
A chart describing the annual scope and sequence of instruction for health education	78%	77%	81%	77%	●
Plans for how to assess student performance in health education	82%	80%	81%	78%	●
A written health education curriculum	94%	94%	95%	94%	●

Percentage of schools in which the lead health education teacher had the following number of years of experience in teaching health education courses or topics (T):	2008	2010	2012	2014	2012-2014 Change
1 year	3%	3%	4%	5%	●
2 to 5 years	15%	15%	14%	17%	●
6 to 9 years	15%	19%	18%	15%	●
10 to 14 years	18%	21%	24%	26%	●
15 years or more	49%	43%	41%	38%	●

Percentage of schools in which the major emphasis of the lead health education teacher's professional preparation was on the following (T):	2008	2010	2012	2014	2012-2014 Change
Health and physical education combined	77%	79%	76%	73%	●
Health education	5%	6%	3%	4%	●
Physical education	4%	4%	4%	8%	➔
Other education degree	3%	2%	2%	1%	●
Kinesiology, exercise science, exercise physiology; home economics or family and consumer science; biology or other science	3%	1%	6%	2%	➔
Nursing or counseling	7%	7%	9%	10%	●
Public health, nutrition, or other	1%	2%	1%	3%	➔

Percentage of schools in which health education staff worked with the following groups on health education activities during the current school year (T):	2008	2010	2012	2014	2012-2014 Change
Physical education staff	93%	92%	93%	95%	●
Health services staff (e.g., nurses)	87%	83%	81%	84%	●
Mental health or social services staff (e.g., psychologists, counselors, and social workers)	75%	76%	73%	72%	●
Nutrition or food service staff	31%	37%	35%	35%	●
School health council, committee, or team	-	43%	40%	47%	●

Percentage of schools in which the lead health education teacher received professional development on the following topics during the two years before the survey (T):	2008	2010	2012	2014	2012-2014 Change
Alcohol- or other drug-use prevention	57%	48%	42%	45%	●
Asthma	35%	35%	38%	44%	●
Emotional and mental health	56%	48%	48%	51%	●
Foodborne illness prevention	22%	21%	28%	28%	●
HIV prevention	47%	42%	39%	39%	●
Human sexuality	51%	50%	39%	37%	●
Infectious disease prevention (e.g., flu prevention)	-	-	50%	43%	●
Injury prevention and safety	55%	54%	58%	54%	●
Nutrition and dietary behavior	43%	41%	41%	36%	●
Physical activity and fitness	67%	69%	63%	63%	●
Pregnancy prevention	40%	35%	31%	26%	●
STD prevention	47%	42%	33%	30%	●
Suicide prevention	58%	65%	68%	66%	●
Tobacco-use prevention	36%	34%	26%	24%	●
Violence prevention (e.g., bullying, fighting, or dating violence prevention)	81%	77%	89%	82%	↘
Describing how widespread HIV and other STD infections are and the consequences of these infections	45%	38%	30%	31%	●
Understanding the modes of transmission and effective prevention strategies for HIV and other STDs	46%	39%	32%	34%	●
Identifying populations of youth who are at high risk of being infected with HIV and other STDs	41%	34%	29%	29%	●
Implementing health education strategies using prevention messages that are likely to be effective in reaching youth	46%	45%	41%	36%	●
Teaching essential skills for health behavior change related to HIV prevention and guiding student practice of these skills	36%	34%	26%	25%	●
Assessing students' performance in HIV prevention education	27%	25%	20%	20%	●
Describing the prevalence and potential effects of teen pregnancy	-	-	29%	28%	●
Identifying populations of youth who are at high risk of becoming pregnant	-	-	26%	24%	●
Teaching students with physical, medical, or cognitive disabilities	55%	53%	47%	54%	●
Teaching students of various cultural backgrounds	36%	32%	32%	37%	●
Teaching students with limited English proficiency	21%	21%	17%	20%	●
Teaching students of different sexual orientations or gender identities	-	21%	19%	23%	●
Using interactive teaching methods (e.g., role plays or cooperative group activities)	62%	63%	56%	64%	●
Encouraging family or community involvement	34%	32%	33%	40%	●
Teaching skills for behavior change	53%	49%	48%	49%	●
Classroom management techniques (e.g., social skills training, environmental modification, conflict resolution and mediation, and behavior management)	63%	68%	63%	62%	●
Assessing or evaluating students in health education	38%	42%	43%	44%	●

Percentage of schools in which the lead health education teacher would like to receive professional development on the following topics (T):	2008	2010	2012	2014	2012-2014 Change
Alcohol- or other drug-use prevention	87%	81%	85%	83%	●
Asthma	67%	63%	66%	59%	●
Emotional and mental health	84%	82%	80%	84%	●
Foodborne illness prevention	62%	61%	61%	60%	●
HIV prevention	79%	78%	80%	75%	●
Human sexuality	83%	81%	83%	83%	●
Infectious disease prevention (e.g., flu prevention)	-	-	68%	69%	●
Injury prevention and safety	72%	69%	69%	70%	●
Nutrition and dietary behavior	84%	80%	85%	80%	●
Physical activity and fitness	83%	76%	79%	80%	●
Pregnancy prevention	79%	76%	77%	72%	●
STD prevention	81%	79%	79%	77%	●
Suicide prevention	84%	84%	83%	85%	●
Tobacco-use prevention	79%	74%	73%	72%	●
Violence prevention (e.g., bullying, fighting, or dating violence prevention)	80%	83%	80%	82%	●
Teaching students with physical, medical, or cognitive disabilities	76%	82%	81%	81%	●
Teaching students of various cultural backgrounds	68%	68%	71%	69%	●
Teaching students with limited English proficiency	64%	65%	64%	66%	●
Teaching students of different sexual orientations or gender identities	-	75%	78%	78%	●
Using interactive teaching methods (e.g., role plays or cooperative group activities)	78%	83%	80%	79%	●
Encouraging family or community involvement	76%	81%	79%	75%	●
Teaching skills for behavior change	87%	88%	83%	79%	●
Classroom management techniques (e.g., social skills training, environmental modification, conflict resolution and mediation, and behavior management)	80%	80%	77%	75%	●
Assessing or evaluating students in health education	84%	80%	84%	81%	●

School Organization to Guide Health Policy

Percentage of schools that have the following groups represented on any school health team (Among schools with a group that offers guidance on the development of policies or coordinates activities on health topics.) (P):	2008	2010	2012	2014	2012-2014 Change
School administrators	92%	95%	94%	94%	●
Health education teachers	89%	95%	96%	89%	↘
Physical education teachers	89%	94%	94%	89%	●
Other classroom teachers	-	-	66%	69%	●
Mental health or social services staff (e.g., school counselors)	66%	66%	79%	84%	●
Nutrition or food service staff	65%	60%	49%	41%	●
Health services staff (e.g., school nurse)	91%	86%	87%	87%	●
Maintenance and transportation staff	19%	19%	24%	16%	●
Technology staff	-	26%	29%	24%	●
Library/media center staff	-	21%	26%	21%	●
Student body	43%	59%	50%	43%	●
Parents or families of students	60%	60%	57%	50%	●
Community members	46%	54%	48%	39%	●
Local health departments, agencies, or organizations	38%	38%	37%	31%	●
Faith-based organizations	8%	11%	8%	11%	●
Businesses	12%	16%	14%	11%	●
Local government agencies	20%	23%	23%	17%	●

Percentage of schools that ever used the School Health Index or other self-assessment tool to assess school policies, activities, and programs in the following areas (P):	2008	2010	2012	2014	2012-2014 Change
Physical activity	35%	42%	35%	53%	↗
Nutrition	32%	41%	35%	52%	↗
Tobacco-use prevention	32%	39%	31%	44%	↗
Asthma	24%	30%	28%	40%	↗
Injury and violence prevention	-	37%	32%	45%	↗

Percentage of schools with a School Improvement Plan that includes health-related objectives on the following topics (P):	2008	2010	2012	2014	2012-2014 Change
Health education	-	33%	28%	27%	●
Health services	-	32%	30%	24%	●
Mental health and social services	-	29%	30%	26%	●
Healthy and safe school environment	-	37%	36%	39%	●
Family and community involvement	-	33%	35%	44%	●
Faculty and staff health promotion	-	25%	25%	21%	●

Percentage of schools that have a school health team that did any of the following activities during the past year (among schools with a group that offers guidance on the development of policies or coordinates activities on health topics) (P):	2008	2010	2012	2014	2012-2014 Change
Identified student health needs based on a review of relevant data	-	-	70%	74%	
Recommended new or revised health and safety policies and activities to school administrators or the school improvement team	-	-	81%	77%	
Sought funding or leveraged resources to support health and safety priorities for students and staff	-	-	54%	53%	
Communicated the importance of health and safety policies and activities to district administrators, school administrators, parent-teacher groups, or community members	-	-	90%	89%	
Reviewed health-related curricula or instructional materials	-	-	91%	85%	

Percentage of schools that (P):	2008	2010	2012	2014	2012-2014 Change
Currently have someone who oversees or coordinates school health and safety programs and activities	92%	93%	89%	92%	
Have one or more than one group (e.g., a school health council, committee, or team) that offers guidance on the development of policies or coordinates activities on health topics	-	58%	58%	64%	
Reviewed health and safety data as part of school's improvement planning process. (Among schools that engaged in an improvement planning process during the past year.)	-	-	57%	59%	

Sexual Health

Percentage of schools that:	2008	2010	2012	2014	2012-2014 Change
Provide parents and families with health information designed to increase parent and family knowledge of HIV prevention, STD prevention, or teen pregnancy prevention (T)	31%	30%	24%	28%	
Facilitate access to providers not on school property who have experience in providing health services, including HIV/STD testing and counseling, to LGBTQ youth (P)	-	57%	54%	55%	
Provide curricula or supplementary materials that include HIV, STD, or pregnancy prevention information that is relevant to lesbian, gay, bisexual, transgender and questioning youth (T)	-	35%	39%	46%	
Have teachers who try to increase student knowledge on sexually transmitted disease (STD) prevention in a required course in any of grade 6 through 12 during the current school year (T)	91%	95%	96%	93%	

Percentage of schools in which teachers taught the following HIV, STD, or pregnancy prevention topics in a required course for students in any of grades 6, 7, or 8 during the current school year (T):	2008	2010	2012	2014	2012-2014 Change
How HIV and other STDs are transmitted	91%	90%	92%	90%	●
Health consequences of HIV, other STDs, and pregnancy	90%	87%	89%	88%	●
The benefits of being sexually abstinent	86%	88%	91%	88%	●
How to access valid and reliable health information, products, and services related to HIV, other STDs, and pregnancy	78%	77%	78%	82%	●
Communication and negotiation skills related to eliminating or reducing risk for HIV, other STDs, and pregnancy	84%	81%	85%	82%	●
Goal-setting and decision-making skills related to eliminating or reducing risk for HIV, other STDs, and pregnancy	83%	81%	87%	84%	●
Efficacy of condoms, that is, how well condoms work and do not work	-	64%	69%	63%	●
The importance of using condoms consistently and correctly	-	56%	63%	56%	●
How to obtain condoms	-	37%	47%	43%	●
How to correctly use a condom	-	28%	31%	31%	●
The importance of using a condom at the same time as another form of contraception to prevent both STDs and pregnancy	-	-	61%	56%	●
How to create and sustain healthy and respectful relationships	-	-	88%	87%	●

Percentage of schools in which teachers taught the following HIV, STD, or pregnancy prevention topics in a required course for students in any of grades 9, 10, 11, or 12 during the current school year (T):	2008	2010	2012	2014	2012-2014 Change
How HIV and other STDs are transmitted	-	100%	99%	100%	●
Health consequences of HIV, other STDs, and pregnancy	-	100%	99%	100%	●
The benefits of being sexually abstinent	98%	100%	99%	100%	●
How to access valid and reliable health information, products, and services related to HIV, other STDs, and pregnancy	98%	99%	98%	100%	●
Communication and negotiation skills related to eliminating or reducing risk for HIV, other STDs, and pregnancy	100%	97%	97%	98%	●
Goal-setting and decision-making skills related to eliminating or reducing risk for HIV, other STDs, and pregnancy	100%	98%	96%	99%	●
Efficacy of condoms, that is, how well condoms work and do not work	98%	98%	98%	100%	●
The importance of using condoms consistently and correctly	97%	96%	97%	100%	●
How to obtain condoms	93%	94%	93%	96%	●
How to correctly use a condom	-	90%	88%	93%	●
The importance of using a condom at the same time as another form of contraception to prevent both STDs and pregnancy	-	-	95%	99%	●
How to create and sustain healthy and respectful relationships	-	-	99%	100%	●

Percentage of schools in which teachers taught the following contraceptive topics in a required course for students in any of grades 6 through 12 during the current school year (T):	2008	2010	2012	2014	2012-2014 Change
Birth control pill (e.g., OrthoTri-cyclen)	-	-	97%	97%	
Birth control patch (e.g., Ortho Evra)	-	-	93%	93%	
Birth control ring (e.g., NuvaRing)	-	-	91%	92%	
Birth control shot (e.g., Depo-Provera)	-	-	90%	93%	
Implants (e.g., Implanon)	-	-	85%	91%	
Intrauterine device (IUD; e.g., Mirena, ParaGard)	-	-	92%	94%	
Emergency contraception (e.g., Plan B)	-	-	89%	95%	

Percentage of schools that have adopted a policy that addresses the following issues (P):	2008	2010	2012	2014	2012-2014 Change
Attendance of students with HIV infection	66%	61%	67%	60%	
Procedures to protect HIV-infected students and staff from discrimination	73%	68%	74%	75%	
Maintaining confidentiality of HIV-infected students and staff	78%	79%	82%	80%	

Percentage of schools that provide the following services to students (P):	2008	2010	2012	2014	2012-2014 Change
HIV testing	-	-	7%	1%	
Pregnancy testing	-	-	4%	3%	
Provision of condoms	-	-	2%	1%	
Provision of contraceptives other than condoms (e.g., birth control pill, birth control shot, intrauterine device [IUD])	-	-	2%	0%	
Prenatal care	-	-	4%	2%	
Human papillomavirus (HPV) vaccine administration	-	-	2%	0%	

Percentage of schools that provide students with referrals to any organizations or health care professionals not on school property for the following services (P):	2008	2010	2012	2014	2012-2014 Change
HIV testing	-	-	52%	48%	
Pregnancy testing	-	-	53%	49%	
Provision of condoms	-	-	38%	37%	
Provision of contraceptives other than condoms (e.g., birth control pill, birth control shot, intrauterine device [IUD])	-	-	39%	38%	
Prenatal care	-	-	49%	45%	
Human papillomavirus (HPV) vaccine administration	-	-	46%	47%	

Tobacco Prevention

Percentage of schools that:	2008	2010	2012	2014	2012-2014 Change
Have adopted a policy prohibiting tobacco use (P)	98%	96%	97%	95%	●
Prohibit tobacco use by students, staff, and visitors in school buildings, at school functions, in school vehicles, on school grounds, and at off-site school events, applicable 24 hours a day and seven days a week (P)	52%	51%	57%	62%	●
Post signs marking a tobacco-free school zone, that is, a specified distance from school grounds where tobacco use is not allowed (P)	69%	73%	76%	63%	↘
Provide tobacco cessation services for faculty and staff (P)	16%	16%	17%	16%	●
Provide tobacco cessation services for students (P)	35%	35%	25%	27%	●
Have arrangements with any organizations or health care professionals not on school property to provide tobacco cessation services for faculty and staff (P)	23%	26%	21%	22%	●
Have arrangements with any organizations or health care professionals not on school property to provide tobacco cessation services for students (P)	31%	37%	25%	25%	●
Provided parents and families with health information designed to increase parent and family knowledge of tobacco-use prevention during the current school year (T)	38%	38%	32%	35%	●
Had teachers try to increase student knowledge on tobacco-use prevention in a required course in any of grades 6 through 12 during the current school year (T)	98%	98%	97%	98%	●

Percentage of schools in which teachers taught the following tobacco-use prevention topics in a required course for students in any of grades 6 through 12 during the current school year (T):	2008	2010	2012	2014	2012-2014 Change
Identifying tobacco products and the harmful substances they contain	95%	94%	95%	95%	●
Identifying short- and long-term health consequences of tobacco use	97%	95%	96%	96%	●
Identifying social, economic, and cosmetic consequences of tobacco use	92%	92%	92%	93%	●
Understanding the addictive nature of nicotine	96%	95%	95%	95%	●
Effects of tobacco use on athletic performance	91%	90%	89%	91%	●
Effects of second-hand smoke and benefits of a smoke-free environment	95%	94%	95%	95%	●
Understanding the social influences on tobacco use, including media, family, peers, and culture	94%	95%	93%	93%	●
Identifying reasons why students do and do not use tobacco	95%	94%	93%	94%	●
Making accurate assessments of how many peers use tobacco	77%	79%	76%	76%	●
Using interpersonal communication skills to avoid tobacco use (e.g., refusal skills, assertiveness)	93%	92%	93%	94%	●
Using goal-setting and decision-making skills related to not using tobacco	92%	91%	92%	92%	●
Finding valid information and services related to tobacco-use prevention and cessation	83%	84%	82%	83%	●
Supporting others who abstain from or want to quit using tobacco	83%	84%	84%	81%	●
Identifying harmful effects of tobacco use on fetal development	90%	90%	90%	88%	●