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PROFILES 2000

School Health Education Profiles

Surveillance for Characteristics of Health Education Among Secondary Schools

2003

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

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School Health Education Profiles

Surveillance for Characteristics of Health Education Among Secondary Schools

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INTRODUCTION

School health education has the potential to reduce and prevent some of the most critical public health problems in the United States, including cardiovascular disease, cancer, motor-vehicle crashes, homicide, and suicide.[1] The importance of school health education is exemplified by Objective 7-2 of *Healthy People 2010*, which is to "Increase the proportion of middle, junior high, and senior high schools that provide school health education to prevent health problems in the following areas: unintentional injury; violence; suicide; tobacco use and addiction; alcohol and other drug use; unintended pregnancy, HIV/AIDS, and STD infection; unhealthy dietary patterns; inadequate physical activity; and environmental health."[2(pg.7-14)]

The seven *National Health Education Standards*, developed by the Joint Committee on National Health Education Standards, describe what students should know and be able to do as a result of school health education.[3] According to these standards, students should be able to

1. Comprehend concepts related to health promotion and disease prevention.

2. Demonstrate the ability to access valid health information and health-promoting products and services.

3. Demonstrate the ability to practice health-enhancing behaviors and reduce health risks.

4. Analyze the influence of culture, media, technology, and other factors on health.

5. Demonstrate the ability to use interpersonal communication skills to enhance health.

6. Demonstrate the ability to use goal-setting and decision-making skills to enhance health.

7. Demonstrate the ability to advocate for personal, family, and community health.

The quality of school health education is determined, in part, by the curriculum planning and development process, teacher preparation, curriculum implementation, and assessment and evaluation,[4] as well as by resources available to complement these tasks.

In 1995, CDC collaborated with state and large local education and health agencies to develop the School Health Education Profiles (Profiles). The purpose of the Profiles is to monitor and assess characteristics of and trends in health education and health policies among middle/junior high schools and senior high schools across states and cities. Data were collected in 1996, 1998, and 2000 from each school's principal and lead health education teacher (i.e., the person who coordinates health education policies and programs within a middle/junior high school or senior high school) using a self-administered questionnaire.

This report summarizes data from the 2000 Profiles. Principals' and lead health education teachers' surveys were conducted in 38 states and 13 cities to assess trends in school health education and school health policies since the mid-1990s. In addition, this report compares the 2000 Profiles data with national data on health education and school health policies from the School Health Policies and Programs Study 2000 (SHPPS 2000).

METHODOLOGY

SAMPLING

The Profiles employ systematic equal-probability sampling strategies to produce representative samples of schools serving students in grades 6–12 in each jurisdiction. In most states and cities, the sampling frame consists of all regular secondary public schools with one or more of grades 6–12. Some education and health agencies modify this procedure by inviting all schools, rather than just a sample, to participate.

DATA COLLECTION

Data are collected from each sampled school during the spring semester. Both questionnaires are mailed to the principal, who then identifies the school's lead health education teacher. Participation in the survey is confidential and voluntary; follow-up telephone calls and written reminders are used to encourage participation. The principal and teacher record their responses in the questionnaire booklets and return them directly to the state or local education or health agency.

DATA ANALYSIS

A weighting factor is applied to each record to reflect the likelihood of principals or teachers being selected and to adjust for differing patterns of nonresponse. Data from a state or city that had an overall response rate of 70% or greater and appropriate documentation were weighted, whereas data from a state or city that did not meet these criteria were not weighted. Weighted data represent all public schools serving grades 6–12 in that jurisdiction; unweighted data represent only the participating schools. Because of a low response rate, data from principals' surveys conducted in four states and lead health education teachers' surveys conducted in five states are not included in this report. Thus, this report represents information from 33 states with data from both principals' and lead health education teachers' surveys, one state with data from the principals' survey only, and 13 cities with data from both principals' and lead health education teachers' surveys (Table 1).

Across states, the sample sizes of the principals' surveys ranged from 56 to 573, and the response rates ranged from 53% to 98%; across cities, the sample sizes ranged from 24 to 242, and the response rates ranged from 58% to 100% (Table 1). The sample sizes of the lead health education teachers' surveys across states ranged from 47 to 563, and the response rates ranged from 50% to 91%; across cities, the sample sizes ranged from 24 to 235, and the response rates ranged from 60% to 100%.

SAS software was used to compute point estimates. Medians are presented for all states (i.e., those with weighted data and those with unweighted data combined) and for all cities (i.e., those with weighted data and those with unweighted data combined). The Wilcoxon rank-sum test was used to test for differences between 1996 and 2000 data across states and cities. This is a nonparametric analogue to a two-sample *t*-test. This statistical procedure (a) rank-ordered all sites for both years separately for states and cities, (b) summed the ranks separately by year and for states and cities, and (c) compared the rank sums separately for states and cities to determine if the distribution of the variable was the same for 1996 and 2000. Assuming the percentages have an underlying continuous distribution, the distribution of ranks is approximately normal; therefore, a *z*-value was used as the test statistic. The distributions were considered significantly different at $p \leq .05$.

BACKGROUND

HEALTH EDUCATION

The Institute of Medicine (IOM) recommends that schools require at least a one-semester health education course at the secondary school level.[1] School health education provides students with the knowledge, attitudes, and skills they need to avoid or modify behaviors related to the leading causes of death, illness, and injury during youth and adulthood. Health education should address the physical, mental, emotional, and social dimensions of health and be age appropriate.[5] Health education curricula should be planned, sequential, and implemented for all grades in elementary and middle/junior high schools and through at least one semester in senior high schools.[1,4]

A necessary component of effective health education is management and coordination by a professional who is trained in health education.[6] That person may work directly within the school or at the school district level. Curriculum planning and development is enhanced when schools have a school health coordinator. In addition, collaboration among health education teachers and other school staff members also improves the implementation of health education curricula. To supplement a separate health education course, health-related information can be included in a range of disciplines, including physical education, the sciences, mathematics, language arts, social studies, home economics, and the arts.[7]

Professional preparation and staff development for teachers are critical for the implementation of effective school health education programs.[8, 9] Lack of teacher training is a serious obstacle to the implementation of effective school health education.[10] Staff development for health education teachers should focus on those strategies that will actively engage students as well as facilitate their mastery of critical health information and skills.[4] Teachers who receive training implement health education curricula with more fidelity than teachers who do not receive training, resulting in more knowledge gain among students.[11]

Partnerships between schools, parents, community members, and other professionals are a key element of effective school health programs. Those partnerships contribute to successful school health education programs and to improved student health-related knowledge and skills.[12] A health committee or advisory council within the school or school district can help build support for school health initiatives. Schools that have a good relationship with parents are more likely to gain parent cooperation with school health efforts.[13] Support from parents can lead to the overall success or failure of a student as well as the success or failure of a new health program in the school. In addition, parent involvement in health education increases both student achievement and self-esteem.[14]

SCHOOL HEALTH POLICIES

Effective school health policies can help create a safe, positive physical and psychological school environment, prevent injuries form occurring at school, and prevent school failure, substance use, and violence.[15, 16]

Because 50% of new cases of HIV infection occur among adolescents and young adults,[17] having school health policies that address issues raised by HIV infection and AIDS is critical for protecting the rights of affected students and school staff members. The policies should cover school attendance, employment, privacy, infection control, participation in athletics, HIV prevention education, counseling services, and staff development.[18]

Tobacco use is the single leading preventable cause of death in the United States.[19] Approximately 80% of tobacco users initiate use before the age of 18 years.[20] CDC's *Guidelines for School Health Programs to Prevent Tobacco Use and Addiction* identify strategies for schools to help prevent tobacco use among youth.[21] An important strategy is the development and enforcement of a school policy on tobacco use. The policy should include prohibitions against tobacco use by students, school staff members, parents, and visitors on school property, in school buildings, and at school functions away from school property. In addition, the policy should prohibit tobacco advertising in school buildings, on school property, and in school publications. An effective tobacco control policy is essential in helping to achieve the *Healthy People 2010* objective to decrease tobacco use among youth.[2]

Seventy-one percent of all deaths among persons 10–24 years of age result from only four causes: motor vehicle crashes, other unintentional injuries, homicide, and suicide.[22] The No Child Left Behind Act of 2001 authorizes federal funds for school programs to prevent violence in and around schools.[23] Effective and safe schools are well prepared for any potential crisis or violent acts.[24] The CDC's *School Health Guidelines to Prevent Unintentional Injury and Violence* identify strategies for schools that can help prevent unintentional injuries, violence, and suicide.[25] An important strategy is to establish both social and physical environments that promote safety and prevent unintentional injuries, violence, and suicide.

RESULTS

HEALTH EDUCATION

Required Health Education

- Across states, the percentage of schools that required health education for students in grades 6–12 ranged from 31.4% to 100.0% (median: 91.7%) (Table 2). Among those schools, the median percentage that taught one or more separate health education courses was 95.4% and ranged from 78.1% to 100.0% across states.

- Across cities, the percentage of schools that required health education for students in grades 6–12 ranged from 0.0% to 100.0% (local median: 88.0%) (Table 2). Among those schools, the median percentage that taught one or more separate health education courses was 93.2% and ranged from 69.0% to 100.0% across cities.

Standards, Curricula, Guidelines, and Frameworks for Required Health Education Courses

Many schools required teachers in a required health education course to use specific standards, curricula, or materials. The range in percentages of schools that required their use was as follows* (Table 3):

- The National Health Education Standards: from 16.5% to 60.8% across states (state median: 32.2%) and from 27.1% to 73.7% across cities (local median: 45.1%).

- A state, district, or school curriculum, guidelines, or framework: from 81.0% to 100.0% (state median: 95.9%) across states and from 93.9% to 100.0% across cities (local median: 100.0%).

- Materials from health organizations such as the American Red Cross or the American Cancer Society: from 10.5% to 59.0% across states (state median: 36.2%) and from 34.8% to 78.7% across cities (local median: 67.9%).

- A commercially developed teacher's guide: from 20.5% to 80.1% across states (state median: 52.1%) and from 32.7% to 78.2% across cities (local median: 63.5%).

Content of Required Health Education Courses

Required health education courses aim to increase student knowledge about a variety of health-related topics. The range in percentages of schools that covered specific health-related topics was as follows (Table 4, Figure 1):

- Alcohol or other drug-use prevention: from 94.6% to 100.0% across states (state median: 99.2%) and from 98.1% to 100.0% across cities (local median: 100.0%).

- Dietary behavior and nutrition: from 85.9% to 98.6% across states (state median: 93.6%) and from 90.1% to 100.0% across cities (local median: 96.4%).

- HIV prevention: from 74.7% to 100.0% across states (state median: 97.8%) and from 95.8% to 100.0% across cities (local median: 100.0%).

- Physical activity and fitness: from 88.1% to 98.1% across states (state median: 94.3%) and from 84.9% to 100.0% across cities (local median: 95.6%).

* Schools could report use of one or more types of material.

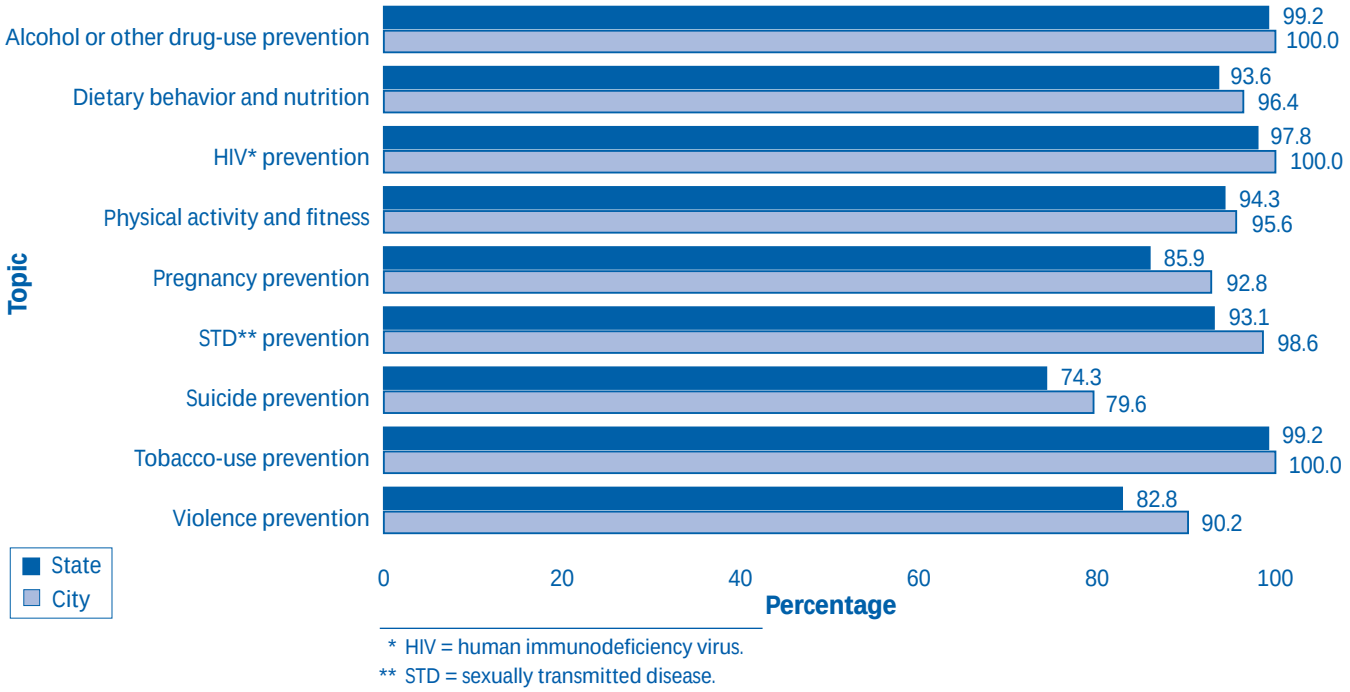


FIGURE 1. Median percentage of schools that aimed to increase student knowledge in specific topics in a required health education course, School Health Education Profiles, 2000.

- Pregnancy prevention: from 45.0% to 97.5% across states (state median: 85.9%) and from 79.5% to 100.0% across cities (local median: 92.8%).
- STD prevention: from 62.4% to 100.0% across states (state median: 93.1%) and from 88.2% to 100.0% across cities (local median: 98.6%).
- Suicide prevention: from 56.6% to 90.4% across states (state median: 74.3%) and from 50.2% to 95.2% across cities (local median: 79.6%).
- Tobacco-use prevention: from 92.9% to 100.0% across states (state median: 99.2%) and from 95.0% to 100.0% across cities (local median: 100.0%).
- Violence prevention: from 72.4% to 94.9% across states (state median: 82.8%) and from 85.6% to 100.0% across cities (local median: 90.2%).

Required health education courses aim to improve student skills. The range in percentages of schools that covered specific skills was as follows (Table 5, Figure 2):

- Analysis of media messages: from 62.3% to 93.6% across states (state median: 81.0%) and from 57.1% to 90.1% across cities (local median: 77.9%).
- Communication: from 85.4% to 97.7% across states (state median: 91.3%) and from 87.9% to 100.0% across cities (local median: 94.4%).
- Decision making: from 91.2% to 99.6% across states (state median: 97.7%) and from 93.9% to 100.0% across cities (local median: 98.3%).
- Goal setting: from 84.8% to 98.6% across states (state median: 93.1%) and from 84.6% to 100.0% across cities (local median: 95.6%).

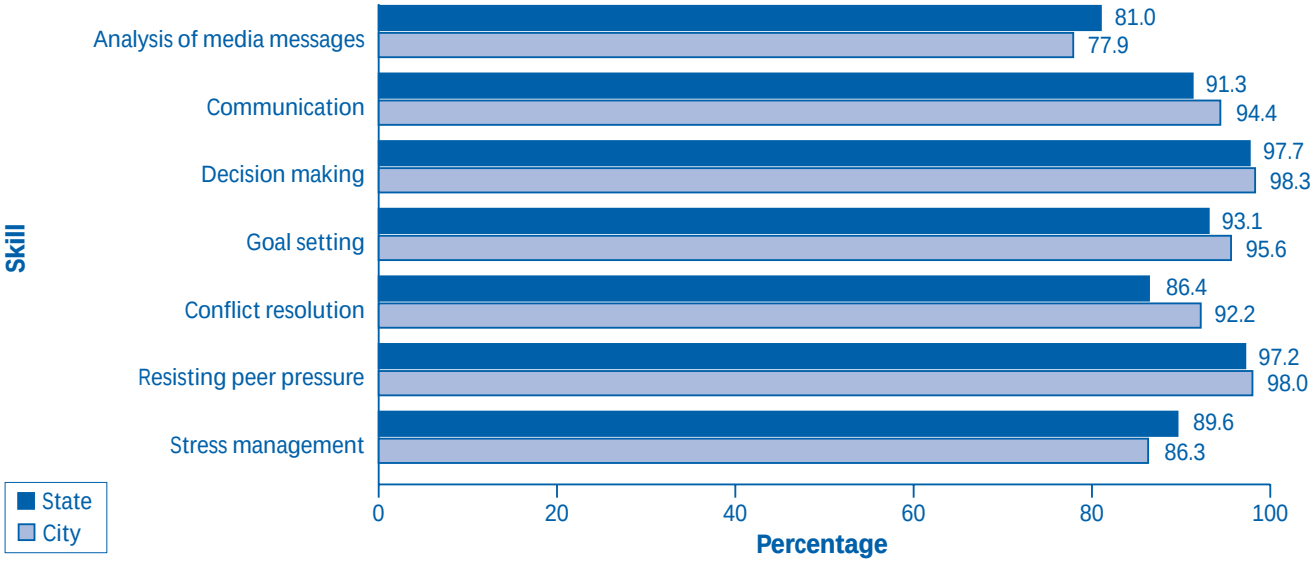


FIGURE 2. Median percentage of schools that aimed to improve specific student skills in a required health education course, School Health Education Profiles, 2000.

- Conflict resolution: from 78.7% to 100.0% across states (state median: 86.4%) and from 84.6% to 100.0% across cities (local median: 92.2%).
- Resisting peer pressure: from 88.9% to 99.2% across states (state median: 97.2%) and from 93.9% to 100.0% across cities (local median: 98.0%).
- Stress management: from 75.8% to 98.8% across states (state median: 89.6%) and from 72.1% to 100.0% across cities (local median: 86.3%).

Specific HIV prevention topics were covered in required health education courses. The range in percentages of schools that covered those HIV prevention topics was as follows (Table 6):

- Abstinence to avoid HIV infection: from 70.3% to 100.0% across states (state median: 95.1%) and from 92.3% to 100.0% across cities (local median: 100.0%).
- How HIV is transmitted: from 69.0% to 99.3% across states (state median: 95.3%) and from 93.1% to 100.0% across cities (local median: 100.0%).
- How to correctly use a condom: from 9.5% to 68.5% across states (state median: 35.8%) and from 29.8% to 90.9% across cities (local median: 66.3%).
- Condom efficacy: from 40.6% to 84.3% across states (state median: 71.2%) and from 67.2% to 100.0% across cities (local median: 90.8%).
- The number of young people who get HIV: from 67.7% to 95.6% across states (state median: 87.8%) and from 86.3% to 100.0% across cities (local median: 96.0%).
- How to find valid information on HIV: from 61.7% to 91.5% across states (state median: 82.1%) and from 83.5% to 100.0% across cities (local median: 95.4%).

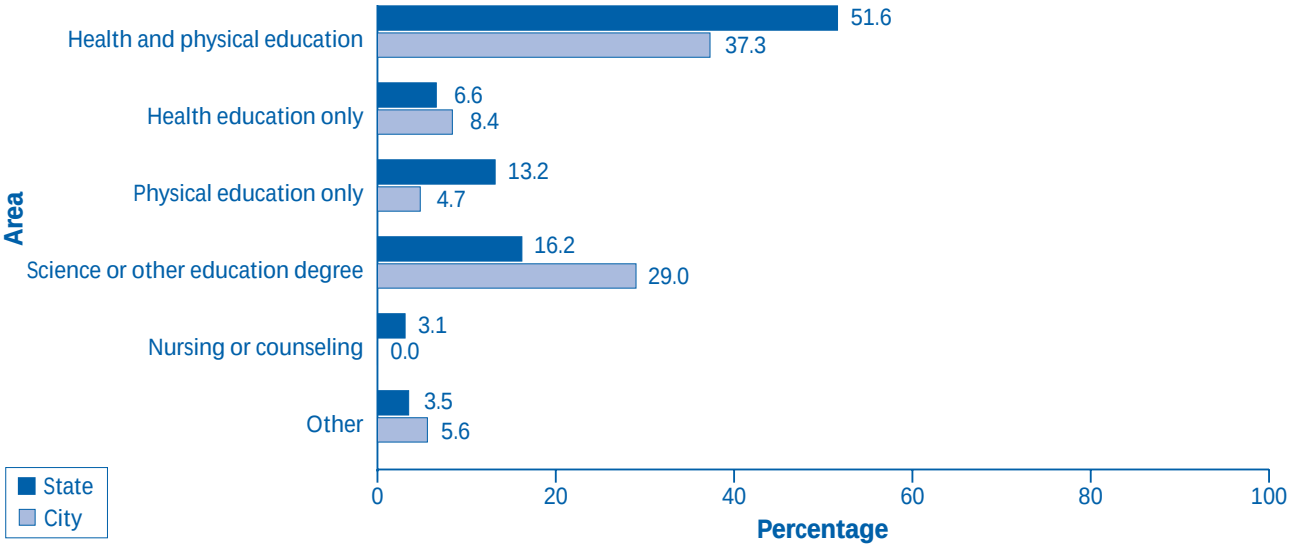


FIGURE 3. Median percentage of schools in which the lead health education teacher had professional preparation in a specific area, School Health Education Profiles, 2000.

Coordination of Health Education

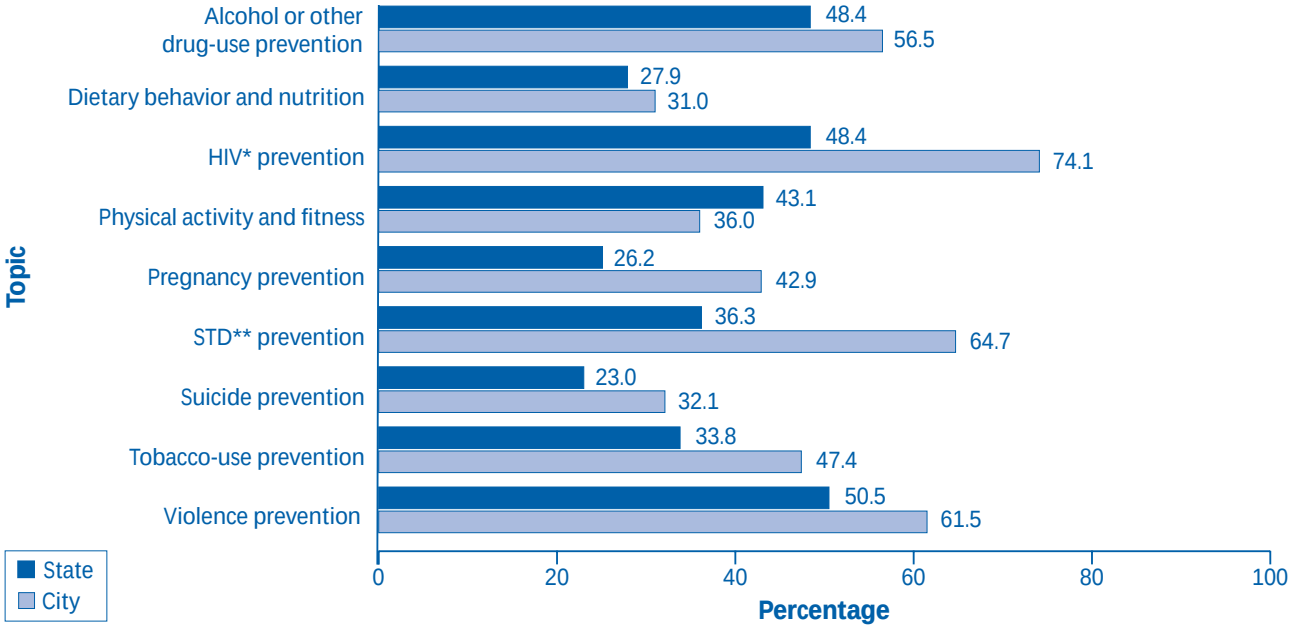
Across states and cities, a health education teacher was identified most often (state median: 45.7%; local median: 50.8%) as being responsible for coordinating health education (Table 7). A school district administrator was less likely (state median: 22.5%; local median: 21.9%) to be responsible for coordinating health education, as was a school administrator (state median: 20.7%; local median: 22.4%). A school nurse infrequently or rarely (state median: 1.6%; local median: 1.2%) coordinated health education. The median percentage of schools in which no one was responsible for coordinating health education was 4.4% across states and 3.7% across cities.

Health education staff worked with other school staff and community members on health education activities. The range in percentages of schools that coordinated health-related activities was as follows (Table 8):

- Physical education (PE) staff: from 47.6% to 90.1% across states (state median: 67.9%) and from 35.8% to 100.0% across cities (local median: 62.1%).
- School health services staff: from 30.8% to 85.5% across states (state median: 67.8%) and from 36.6% to 95.0% across cities (local median: 74.9%).
- School mental health staff: from 36.0% to 78.9% across states (state median: 52.9%) and from 38.1% to 81.5% across cities (local median: 60.2%).
- Food service staff: from 8.4% to 29.1% across states (state median: 17.3%) and from 10.5% to 56.5% across cities (local median: 16.8%).
- Community members: from 30.7% to 74.6% across states (state median: 50.3%) and from 38.2% to 74.1% across cities (local median: 49.7%).

Professional Preparation of Lead Health Education Teachers

Lead health education teachers reported professional preparation in an array of disciplines. The median percentage of schools in which the lead health education teacher had professional preparation in a specific discipline was as follows (Table 9, Figure 3):



* HIV = human immunodeficiency virus.
** STD = sexually transmitted disease.

FIGURE 4. Median percentage of schools in which the lead health education teacher had received ≥4 hours of staff development during the preceding 2 years in specific health education topics, School Health Education Profiles, 2000.

- Health and physical education: 51.6% across states and 37.3% across cities.
- Health education only: 6.6% across states and 8.4% across cities.
- Physical education only: 13.2% across states and 4.7% across cities.
- Science or other education degree: 16.2% across states and 29.0% across cities.
- Nursing or counseling: 3.1% across states and 0.0% across cities.
- Another discipline: 3.5% across states and 5.6% across cities.

Staff Development of Lead Health Education Teachers

Lead health education teachers had 4 or more hours of staff development during the preceding 2 years in many health-related topics. The range in percentages of schools in which the lead health education teacher had received staff development in specific topics was as follows (Table 10, Figure 4):

- Alcohol or other drug-use prevention: from 36.5% to 79.6% across states (state median: 48.4%) and from 35.8% to 100.0% across cities (local median: 56.5%).
- Dietary behavior and nutrition: from 16.8% to 70.8% across states (state median: 27.9%) and from 11.0% to 66.7% across cities (local median: 31.0%).
- HIV prevention: from 30.3% to 88.0% across states (state median: 48.4%) and from 54.2% to 100.0% across cities (local median: 74.1%).

- Physical activity and fitness: from 22.9% to 61.9% across states (state median: 43.1%) and from 13.3% to 91.4% across cities (local median: 36.0%).
- Pregnancy prevention: from 14.0% to 63.4% across states (state median: 26.2%) and from 32.1% to 97.7% across cities (local median: 42.9%).
- STD prevention: from 17.3% to 80.7% across states (state median: 36.3%) and from 48.3% to 97.7% across cities (local median: 64.7%).
- Suicide prevention: from 13.6% to 73.0% across states (state median: 23.0%) and from 13.1% to 75.7% across cities (local median: 32.1%).
- Tobacco use prevention: from 15.4% to 78.5% across states (state median: 33.8%) and from 28.4% to 100.0% across cities (local median: 47.4%).
- Violence prevention: from 32.7% to 73.3% across states (state median: 50.5%) and from 33.5% to 93.4% across cities (local median: 61.5%).

The range in percentages of schools in which the lead health education teacher wanted but had not yet received staff development was as follows (Table 11):

- Alcohol or other drug-use prevention: from 54.2% to 85.9% across states (state median: 71.1%) and from 60.7% to 94.3% across cities (local median: 75.5%).
- Dietary behavior and nutrition: from 44.5% to 79.3% across states (state median: 62.7%) and from 37.8% to 79.2% across cities (local median: 70.8%).
- HIV prevention: from 50.1% to 85.0% across states (state median: 68.2%) and from 59.3% to 85.7% across cities (local median: 70.3%).
- Physical activity and fitness: from 45.9% to 75.1% across states (state median: 58.3%) and from 26.6% to 82.9% across cities (local median: 57.0%).
- Pregnancy prevention: from 43.9% to 79.3% across states (state median: 58.5%) and from 53.1% to 87.5% across cities (local median: 67.1%).
- STD prevention: from 49.7% to 84.0% across states (state median: 65.4%) and from 61.3% to 95.8% across cities (local median: 73.3%).
- Suicide prevention: from 60.1% to 84.9% across states (state median: 72.0%) and from 56.7% to 91.4% across cities (local median: 73.5%).
- Tobacco-use prevention: from 50.0% to 87.3% across states (state median: 63.4%) and from 47.7% to 91.4% across cities (local median: 64.2%).
- Violence prevention: from 64.3% to 91.5% across states (state median: 77.9%) and from 61.3% to 97.1% across cities (local median: 81.5%).

Lead health education teachers received staff development during the preceding 2 years on various teaching methods. The range in percentages of schools in which the lead health education teacher had received staff development in specific teaching methods was as follows (Table 12, Figure 5):

- Teaching students with physical or cognitive disabilities: from 26.8% to 57.1% across states (state median: 38.8%) and from 11.1% to 70.6% across cities (local median: 46.2%).
- Teaching students of various cultural backgrounds: from 12.4% to 66.2% across states (state median: 34.2%) and from 41.3% to 79.8% across cities (local median: 66.5%).

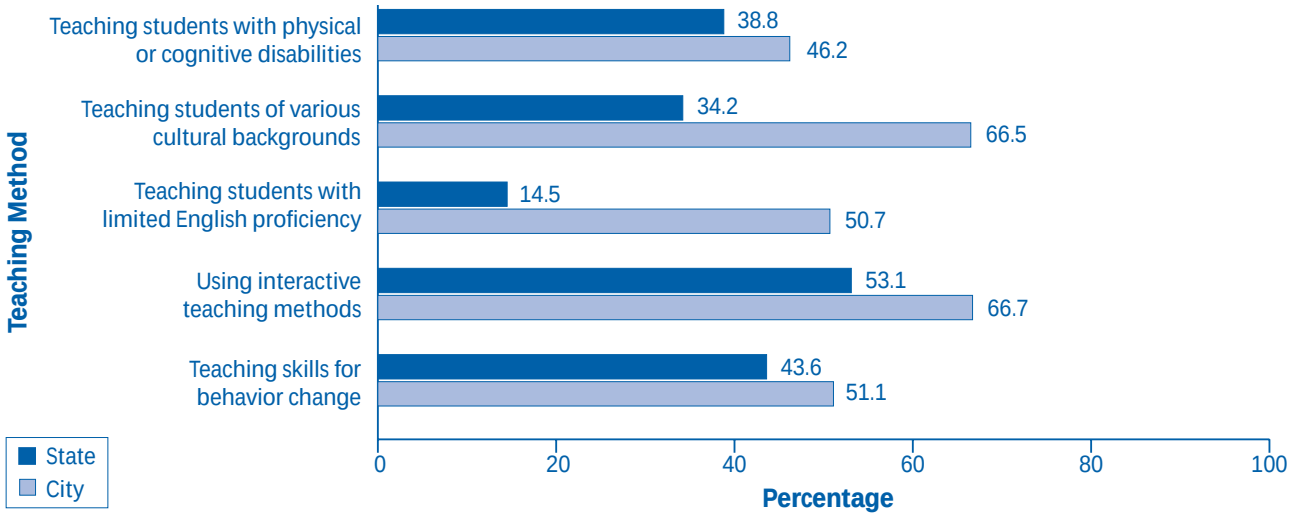


FIGURE 5. Median percentage of schools in which the lead health education teacher received staff development in specific teaching methods, School Health Education Profiles, 2000.

- Teaching students with limited English proficiency: from 2.4% to 59.2% across states (state median: 14.5%) and from 16.2% to 85.6% across cities (local median: 50.7%).

- Using interactive teaching methods such as role-plays or cooperative group activities: from 40.2% to 67.4% across states (state median: 53.1%) and from 54.0% to 85.1% across cities (local median: 66.7%).

- Teaching skills for behavior change: from 22.6% to 60.1% across states (state median: 43.6%) and from 34.1% to 80.0% across cities (local median: 51.1%).

The range in percentages of schools in which the lead health education teacher wanted but had not yet received staff development in specific teaching methods was as follows (Table 13):

- Teaching students with physical or cognitive disabilities: from 47.7% to 84.2% across states (state median: 61.5%) and from 54.0% to 88.6% across cities (local median: 73.1%).

- Teaching students of various cultural backgrounds: from 33.2% to 70.0% across states (state median: 52.0%) and from 51.9% to 82.6% across cities (local median: 70.5%).

- Teaching students with limited English proficiency: from 19.7% to 77.6% across states (state median: 45.0%) and from 38.9% to 79.5% across cities (local median: 62.2%).

- Using interactive teaching methods such as role-plays or cooperative group activities: from 44.5% to 83.1% across states (state median: 61.0%) and from 51.0% to 95.8% across cities (local median: 68.4%).

- Teaching skills for behavior change: from 65.8% to 88.7% across states (state median: 76.8%) and from 62.2% to 88.6% across cities (local median: 78.7%).

Parental and Community Involvement

The percentage of schools that had a school health advisory committee to address health issues ranged from 20.4% to 78.8% across states (median: 42.9%) and from 41.2% to 95.5% across cities (median: 68.6%).

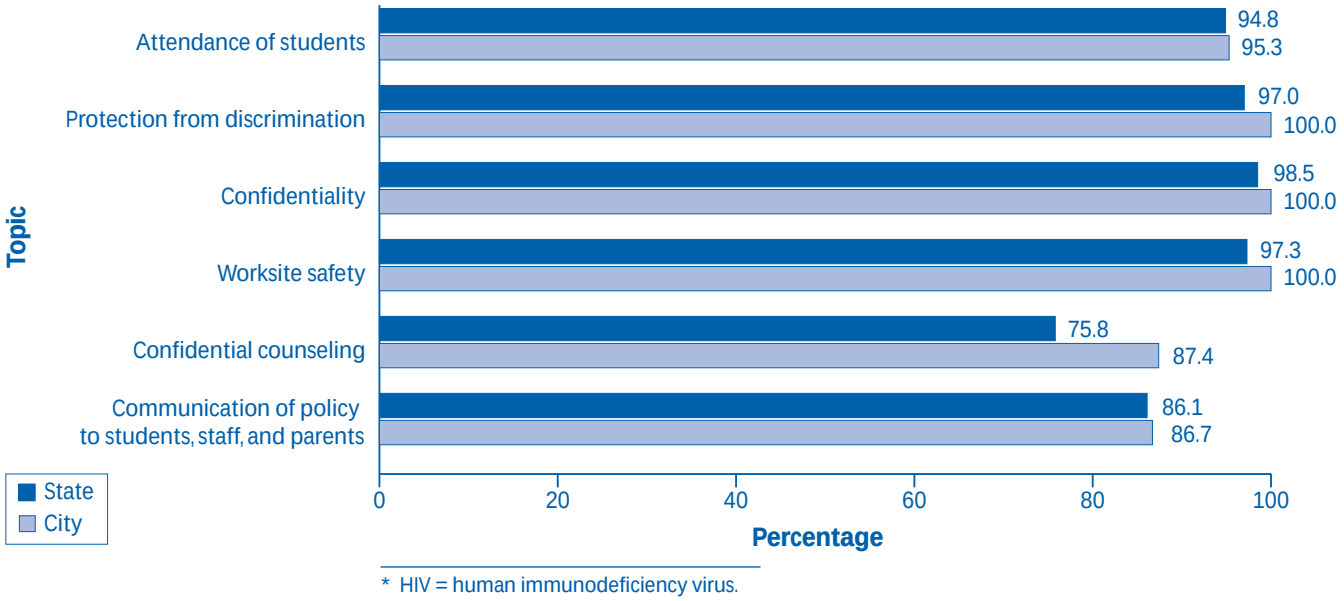


FIGURE 6. Among schools with a written policy on HIV*-infected students or school staff, the median percentage of those schools that addressed specific topics, School Health Education Profiles, 2000.

The percentage of schools that received parental feedback about health education in their children's school ranged from 30.4% to 65.9% (state median: 52.5%) across states and from 44.5% to 69.9% across cities (local median: 57.1%) (Table 14). Among those schools that received feedback, the median percentage of schools that received mainly positive feedback was 88.7% across states and 90.0% across cities. The median percentage of schools that received mainly negative feedback was 1.0% across states and 0.0% across cities. The median percentage of schools that received equally positive and negative feedback was 10.3% across states and 10.0% across cities.

SCHOOL HEALTH POLICIES

HIV Infection/AIDS

The percentage of schools with a written policy that protects the rights of HIV-infected students or school staff ranged from 26.7% to 75.4% across states (state median: 54.8%) and from 37.8% to 100.0% across cities (local median: 67.5%) (Table 15). Among those that had a written policy, the range in percentages of schools that addressed specific topics was as follows (Table 15, Figure 6):

- Attendance at school of HIV-infected students: from 84.3% to 100.0% across states (state median: 94.8%) and from 78.3% to 100.0% across cities (local median: 95.3%).
- Protection of HIV-infected students and staff members from discrimination: from 89.9% to 100.0% across states (state median: 97.0%) and from 91.7% to 100.0% across cities (local median: 100.0%).
- Maintenance of confidentiality for HIV-infected students and staff members: from 92.4% to 100.0% across states (state median: 98.5%) and from 95.8% to 100.0% across cities (local median: 100.0%).
- Worksite safety: from 90.9% to 100.0% across states (state median: 97.3%) and from 87.5% to 100.0% across cities (local median: 100.0%).

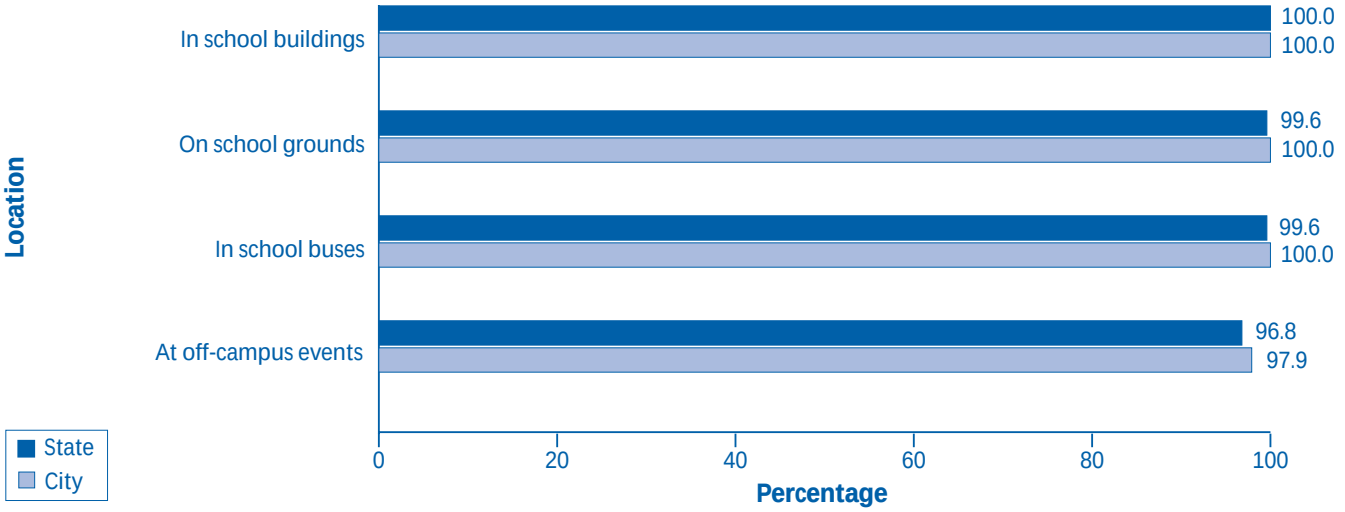


FIGURE 7. Among schools with a policy prohibiting cigarette smoking by students, the median percentage of those schools that had a policy prohibiting cigarette smoking in specific locations, School Health Education Profiles, 2000.

- Confidential counseling for HIV-infected students: from 63.3% to 84.6% across states (state median: 75.8%) and from 0.0% to 100.0% across cities (local median: 87.4%).

- Communication of the policy to students, school staff, and parents: from 74.3% to 92.3% across states (state median: 86.1%) and from 78.3% to 100.0% across cities (local median: 86.7%).

Tobacco Use

The percentage of schools with a policy that prohibits cigarette smoking by students ranged from 96.1% to 100.0% across states (state median: 99.4%) and from 92.5% to 100.0% across cities (local median: 98.0%) (Table 16). Among those that had a policy, the range in percentages of schools that prohibited smoking in specific locations was as follows (Table 16, Figure 7):

- In school buildings: from 99.1% to 100.0% across states (state median: 100.0%) and from 97.7% to 100.0% across cities (local median: 100.0%).

- On school grounds: from 98.2% to 100.0% across states (state median: 99.6%) and from 96.8% to 100.0% across cities (local median: 100.0%).

- In school buses or other vehicles used to transport students: from 95.4% to 100.0% across states (state median: 99.6%) and from 97.7% to 100.0% across cities (local median: 100.0%).

- At off-campus, school-sponsored events: from 84.7% to 100.0% across states (state median: 96.8%) and from 91.3% to 100.0% across cities (local median: 97.9%).

The percentage of schools with a policy that prohibits cigarette smoking by students in all four locations (in school buildings, on school grounds, in school buses, and at off-campus events) ranged from 84.0% to 100.0% across states (state median: 96.3%) and from 90.6% to 100.0% across cities (local median: 97.9%).

Consequences exist for students who are caught smoking cigarettes in schools that have a policy prohibiting cigarette smoking by students. The range in percentages of schools that took specific actions was as follows (Table 17):

- Referring students to a school counselor: from 42.3% to 81.1% across states (state median: 59.6%) and from 34.8% to 100.0% across cities (local median: 71.9%).
- Referring students to a school administrator: from 93.7% to 100.0% across states (state median: 98.8%) and from 85.0% to 100.0% across cities (local median: 96.3%).
- Encouraging students to participate in a cessation program: from 28.5% to 75.5% across states (state median: 54.9%) and from 21.3% to 76.5% across cities (local median: 63.6%).
- Requiring students to participate in a cessation program: from 9.6% to 57.7% across states (state median: 25.4%) and from 8.6% to 90.5% across cities (local median: 36.6%).
- Placing students in detention: from 33.0% to 66.3% across states (state median: 49.7%) and from 29.5% to 91.3% across cities (local median: 60.3%).
- Suspending students from school: from 43.1% to 90.5% across states (state median: 74.0%) and from 50.0% to 100.0% across cities (local median: 75.0%).
- Informing parents or guardians: from 93.3% to 100.0% across states (state median: 98.6%) and from 74.3% to 100.0% across cities (local median: 97.7%).

Tobacco advertising is prohibited by many schools. The median percentage of schools that prohibited tobacco advertising was as follows (Table 18):

- Tobacco advertising in school buildings, on school grounds, on school buses, and in school publications: 92.5% across states and 92.1% across cities.
- Tobacco advertising through sponsorship of school events: 90.2% across states and 90.7% across cities.
- Student wear of tobacco brand-name apparel: 92.1% across states and 85.8% across cities.

Unintentional Injuries and Violence

The median percentage of schools that had a written plan for responding to violence was 94.5% across states and 97.6% across cities. The range in percentages of schools that implemented safety and security measures was as follows (Table 19, Figure 8):

- Requiring visitors to report to the main office: from 84.6% to 100.0% across states (state median: 99.6%) and from 97.8% to 100.0% across cities (local median: 100.0%).
- Maintaining a closed campus: from 33.7% to 100.0% across states (state median: 87.3%) and from 78.8% to 100.0% across cities (local median: 95.7%).
- Using staff or adult volunteers to monitor school halls: from 67.9% to 93.8% across states (state median: 87.1%) and from 87.0% to 100.0% across cities (local median: 95.8%).
- Checking bags, desks, and lockers: from 7.4% to 77.5% across states (state median: 45.6%) and from 6.1% to 92.9% across cities (local median: 59.3%).

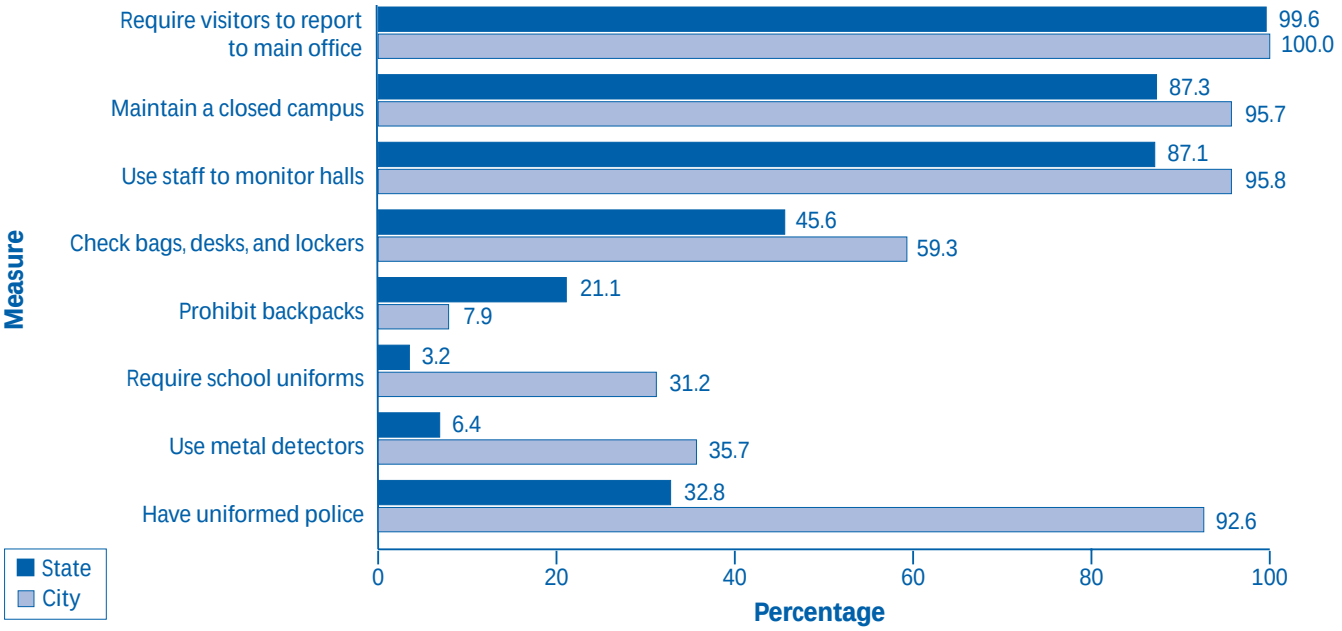


FIGURE 8. Median percentage of schools that implemented safety and security measures, School Health Education Profiles, 2000.

- Prohibiting backpacks: from 0.0% to 54.2% across states (state median: 21.1%) and from 0.0% to 45.5% across cities (local median: 7.9%).
- Requiring school uniforms: from 0.0% to 53.3% across states (state median: 3.2%) and from 0.0% to 87.5% across cities (local median: 31.2%).
- Using metal detectors: from 0.0% to 49.3% across states (state median: 6.4%) and from 0.0% to 93.3% across cities (local median: 35.7%).
- Having uniformed police: from 6.5% to 83.3% across states (state median: 32.8%) and from 56.3% to 100.0% across cities (local median: 92.6%).

TRENDS IN HEALTH EDUCATION AND SCHOOL HEALTH POLICIES

The Profiles were first conducted in 1996 and repeated biennially with all surveys using many of the same questions. For this report, the data from questions that were the same in 1996 and 2000 were analyzed for changes over time.

- The following are improvements in health education and health policy that occurred from 1996 to 2000:

  —Across states and cities, the percentage of schools in which teachers taught about tobacco-use prevention increased.

  —Across states, the percentage of schools in which teachers tried to improve student skills in communication, decision making, goal setting, conflict resolution, resisting peer pressure, and stress management increased.

  —Across states and cities, the percentage of schools in which the health education teacher coordinated health education increased.

  —Across states, the percentage of schools in which health education teachers planned or coordinated health-related projects or activities with school health services staff increased.

  —Across states, the percentage of schools that had a written HIV policy on procedures to protect students and staff from discrimination; maintain confidentiality of HIV-infected students and staff; ensure worksite safety; and communicate the policy to students, staff members, and parents increased.

  —Across cities, the percentage of schools that had a written HIV policy on worksite safety increased.

  —Across states and cities, the percentage of schools that had a health advisory group to address health issues increased.

- The following deteriorations in health education and health policy occurred from 1996 to 2000:

  —Across states and cities, the percentage of schools that required a health education course decreased.

  —Across states, the percentage of schools in which teachers taught about dietary behavior and nutrition decreased.

  —Across states, the percentage of schools in which teachers taught how HIV is transmitted decreased.

- No changes in health education and health policy were detected from 1996 to 2000 in the following areas:

  —Across states and cities, the percentage of schools in which teachers taught about alcohol or other drug-use prevention, HIV prevention, physical activity and fitness, pregnancy prevention, STD prevention, suicide prevention, and violence prevention.

  —Across cities, the percentage of schools in which teachers taught about nutrition and dietary behavior.

—Across cities, the percentage of schools in which teachers tried to improve student skills in communication, decision making, goal setting, conflict resolution, resisting peer pressure, and stress management.

—Across states, the percentage of schools in which teachers taught how to correctly use a condom and about condom efficacy.

—Across cities, the percentage of schools in which teachers taught how HIV is transmitted, how to correctly use a condom, and about condom efficacy.

—Across states and cities, the percentage of schools in which health education teachers planned or coordinated health education projects or activities with physical education staff, school mental health staff, and food service staff.

—Across cities, the percentage of schools in which health education teachers planned or coordinated health-related projects or activities with school health services staff.

—Across cities, the percentage of schools that had a written HIV policy on procedures to protect students and staff from discrimination; maintain confidentiality of HIV-infected students and staff; and communicate the policy to students, staff members, and parents.

COMPARISON TO NATIONAL DATA

To provide a comprehensive description of school health education and other components of the school health program, CDC periodically conducts the School Health Policies and Programs Study (SHPPS). SHPPS was first conducted in spring 1994[26] and repeated in spring 2000.[27] SHPPS 2000 school-level data were collected from a nationally representative sample of public and private elementary, middle/junior high, and senior high schools. A comparison of 2000 Profiles data (states and cities) with the national SHPPS 2000 data from middle/junior high and senior high schools demonstrates the following:

- Nearly all schools across states and cities (median: 91.7% and 88.0%, respectively) and nationally (96.2%) required some health education.[28]

- Across states and cities, the median percentage of schools that tried to increase student knowledge on specific topics in a required health education course was higher for nearly all topics as compared to the national percentage.[28]

- Across states and cities, the median percentage of schools in which the health education teacher planned or coordinated projects with PE staff (median: 67.9% and 62.1%, respectively), health services staff (median: 67.8% and 74.9%, respectively), and mental health staff (median: 52.9% and 60.2%, respectively) was similar to the national percentage of schools in which the health education teacher planned or coordinated projects with PE staff, health services staff, and mental health staff (59.9%, 60.4%, and 49.2%, respectively).[28]

- Across states and cities, the median percentage of schools that required visitors to report to the main office (median: 99.6% and 100.0%, respectively) and that maintained a closed campus (median: 87.3% and 95.7%, respectively) was similar to the national percentage of middle/junior and senior high schools that required visitors to report to the main office (94.3% and 99.2%, respectively) and that maintained a closed campus (89.4% and 73.4%, respectively). However, the median percentage of schools that used metal detectors and had uniformed police varied greatly between states and cities (metal detectors: 6.4% and 35.7%, respectively; uniformed police: 32.8% and 92.6%) and nationally in middle/junior and senior high schools (metal detectors: 10.0% and 10.0%, respectively; uniformed police: 19.2% and 30.1%, respectively).[29]

- Nearly all schools across states and cities (median: 99.4% and 98.0%, respectively) and nationally (95.0%) had a policy prohibiting cigarette smoking by students.[29] Among those schools, nearly all schools across states and cities and nationally prohibited student smoking in school buildings, on school grounds, in school buses, and at school-sponsored, off-campus events.

DISCUSSION

School health education could be one of the most effective means to reduce and prevent serious health problems, including cardiovascular disease, cancer, motor vehicle crashes, homicide, and suicide, in the United States.[1] The Profiles provide information on curriculum planning, curriculum implementation, and teacher qualifications and preparation, which are all important areas of focus as schools and districts work to improve school health education and health policies.

The 2000 Profiles data demonstrated that many schools have implemented programs and policies that can positively influence health education curriculum planning and development. Although the median percentage of schools that required a health education course was 91.7% across states and 88.0% across cities, this represents a decrease from 1996 for both states and cities. The median percentage of schools that had a person to coordinate health education was very high: 95.6% across states and 96.3% across cities.

Nationwide, high school students continue to practice behaviors that place them at risk for the development of serious health problems.[30] The Profiles data indicated that, across states and cities, most schools tried to increase student knowledge in specific topics and a large percentage tried to improve student skills to reduce risk behaviors. Across states and cities, more than 85% of schools taught about diet and nutrition, physical activity and fitness, and the prevention of HIV infection and tobacco, alcohol, and drug use. However, since 1996 the median percentage of states in which teachers taught about dietary behavior and nutrition, how HIV is transmitted, and how to correctly use a condom has decreased.

Collaboration between schools and the community is critical to the success of health education programs within schools, but the median percentage of schools that planned or coordinated health education projects or activities with community members was only 50.3% across states and 49.7% across cities. This clearly shows that most schools have room for improvement in their rates of collaboration with community members.

A large percentage of schools had a lead health education teacher with professional preparation in health education or in health and physical education combined. However, some schools had a lead health education teacher whose professional preparation was not in health education. Health education could be more effective if a greater percentage of schools employed a lead health education teacher who was professionally trained in health education.

Opportunities for professional development are important for maintaining and increasing teachers' knowledge and skills. The median percentage of schools in which a lead health education teacher had received 4 or more hours of staff development during the preceding 2 years in a specific health topic varied by topic. However, the median percentage of schools in which the lead health education teacher wanted, but had not yet received, staff development ranged from 58.3% (physical activity and fitness) to 77.9% (violence prevention) across states and from 57.0% (physical activity and fitness) to 81.5% (violence prevention) across cities. More frequent staff development with the most up-to-date information is needed to help teachers confidently and effectively present health topics to their students.

The findings in this report are subject to several limitations. First, these data apply only to public middle/junior high schools and senior high schools. Second, the data are self-reported by school principals and lead health education teachers. Finally, the Profiles data do not provide an in-depth assessment of all elements of health education or health policies.

State and local education and health officials use Profiles data to improve school health education and health policies. Data are used to advocate for health education and to identify health education topics that are taught. Data also are used to identify and monitor community and parental involvement in health education, to identify areas for improvement, to encourage appropriate professional preparation, and to identify topics for staff development. Finally, Profiles data can help school administrators and staff members determine how well their schools are addressing the health and safety needs of their students.

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TABLES

TABLE 1. Sample Sizes and Response Rates, Selected U.S. Sites—School Health Education Profiles, Principals' and Teachers' Surveys, 2000

STATE SURVEYS

Site	Principals' surveys		Teachers' surveys	
	Sample size	Response rate (%)	Sample size	Response rate (%)
Weighted Data				
Alabama	304	89	271	79
Alaska	265	82	236	73
Arkansas	328	78	314	74
California	369	73	NA*	NA
Delaware	56	85	47	71
Hawaii	65	77	62	74
Idaho	215	89	202	84
Illinois**	391	85	356	77
Iowa	322	93	294	84
Maine	215	98	200	91
Massachusetts	573	82	563	81
Michigan	331	84	298	76
Minnesota	312	84	306	82
Missouri	334	80	335	80
Montana	255	74	248	72
Nebraska	333	82	318	78
New Hampshire	167	80	154	73
New Jersey	316	75	307	73
North Dakota	163	76	155	72
Ohio	368	79	344	74
Oklahoma	332	78	326	77
Pennsylvania**	305	71	NA	NA
Tennessee	254	73	254	73
Utah	192	72	188	70
Virginia	275	75	261	71
West Virginia	259	89	235	80
Unweighted Data				
California	NA	NA	331	66
Georgia	231	63	217	59
Indiana	262	67	256	65
Kentucky	282	65	229	53
Louisiana**	214	62	207	60
Maryland**	166	53	155	50
Pennsylvania**	NA	NA	285	66
South Carolina	229	53	228	53
South Dakota	148	60	NA	NA
Texas**	340	67	321	64

(continued)

TABLE 1. Sample Sizes and Response Rates, Selected U.S. Sites—School Health Education Profiles, Principals' and Teachers' Surveys, 2000 *(continued)*

LOCAL SURVEYS

Site	Principals' surveys		Teachers' surveys	
	Sample size	Response rate (%)	Sample size	Response rate (%)
Weighted Data				
Chicago	242	79	235	77
Dallas	43	86	43	86
District of Columbia	40	89	39	87
Ft. Lauderdale	57	78	57	78
Los Angeles	100	79	98	77
Miami	87	82	91	86
New Orleans	24	100	24	100
Orange County	37	82	39	87
Palm Beach	38	88	36	84
Philadelphia	98	78	92	74
San Diego	43	93	45	98
San Francisco	33	75	31	70
Unweighted Data				
Houston	35	58	36	60

* NA = not available.

** Survey did not include students from one of the state's large school districts.

TABLE 2. Percentage of Schools That Required Health Education in Grades 6–12 and, Among Those Schools, Percentage That Taught ≥1 Separate Health Education Course, Selected U.S. Sites—School Health Education Profiles, Principals' Surveys, 2000

STATE SURVEYS

Site	Required health education	Taught ≥1 separate health education course
Weighted Data		
Alabama	87.3	84.8
Alaska	86.8	97.7
Arkansas	96.0	99.4
California	83.3	78.1
Delaware	98.1	98.1
Hawaii	100.0	100.0
Idaho	97.2	98.0
Illinois*	93.9	93.6
Iowa	75.7	93.0
Maine	90.1	96.3
Massachusetts	92.3	95.8
Michigan	82.4	94.0
Minnesota	98.4	99.6
Missouri	86.9	91.6
Montana	93.2	89.2
Nebraska	89.9	89.0
New Hampshire	90.1	95.0
New Jersey	96.7	97.9
North Dakota	94.2	96.8
Ohio	97.9	99.1
Oklahoma	31.4	80.1
Pennsylvania*	96.8	99.6
Tennessee	84.3	89.8
Utah	97.8	99.4
Virginia	90.6	89.9
West Virginia	98.4	96.8
Unweighted Data		
Georgia	99.1	97.3
Indiana	98.1	97.2
Kentucky	91.0	97.6
Louisiana*	91.5	87.3
Maryland*	91.9	92.3
South Carolina	85.8	82.7
South Dakota	79.6	91.0
Texas*	84.5	91.2
State Median	**91.7**	**95.4**

(continued)

TABLE 2. Percentage of Schools That Required Health Education in Grades 6–12 and, Among Those Schools, Percentage That Taught ≥1 Separate Health Education Course, Selected U.S. Sites—School Health Education Profiles, Principals' Surveys, 2000 *(continued)*

LOCAL SURVEYS

Site	Required health education	Taught ≥1 separate health education course
Weighted Data		
Chicago	81.8	73.7
Dallas	64.8	100.0
District of Columbia	88.0	97.0
Ft. Lauderdale	88.4	91.6
Los Angeles	98.9	98.9
Miami	67.9	78.7
New Orleans	100.0	100.0
Orange County	86.5	69.0
Palm Beach	80.6	88.1
Philadelphia	93.4	94.8
San Diego	0.0	NA**
San Francisco	93.8	73.3
Unweighted Data		
Houston	91.4	100.0
Local Median	**88.0**	**93.2**

* Survey did not include students from one of the state's large school districts.

** NA = not available.

TABLE 3. Percentage of Schools With a Required Health Education Course That Required Teachers To Use Standards, a Specific Curriculum, Guidelines, Framework, or Other Selected Materials, Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000

STATE SURVEYS

Site	National Health Education Standards	State, district, or school curriculum, guidelines, or framework	Materials from health organizations	Commercial teacher's guide
Weighted Data				
Alabama	46.3	99.5	55.2	72.1
Alaska	31.4	95.7	25.5	45.5
Arkansas	37.7	97.1	36.2	68.4
Delaware	24.5	85.2	10.5	34.0
Hawaii	60.8	90.5	16.3	21.6
Idaho	16.5	87.7	24.6	55.9
Illinois*	32.2	95.4	36.6	58.9
Iowa	32.4	91.9	33.1	41.4
Maine	26.9	92.3	19.1	20.5
Massachusetts	37.1	96.9	42.3	37.7
Michigan	18.5	93.0	38.2	39.9
Minnesota	29.0	92.1	33.5	35.8
Missouri	35.6	96.4	31.2	51.1
Montana	25.8	87.3	31.8	46.1
Nebraska	24.7	90.0	34.4	52.1
New Hampshire	24.1	81.6	26.6	34.6
New Jersey	37.3	99.6	48.4	56.1
North Dakota	20.4	81.0	26.7	44.2
Ohio	33.3	98.6	27.5	54.0
Oklahoma	30.2	96.6	59.0	55.0
Tennessee	32.0	98.2	33.1	61.5
Utah	22.3	98.9	26.5	39.8
Virginia	26.0	95.7	41.1	68.0
West Virginia	40.5	99.5	40.6	80.1
Unweighted Data				
California	35.8	97.6	48.0	51.7
Georgia	34.2	100.0	41.7	76.7
Indiana	46.8	97.0	42.1	72.1
Kentucky	39.5	98.0	29.9	53.9
Louisiana*	24.1	94.1	44.9	69.3
Maryland*	44.5	98.5	43.1	50.4
Pennsylvania*	41.2	95.9	44.7	51.3
South Carolina	40.8	94.3	38.8	69.7
Texas*	29.6	97.5	42.5	68.5
State Median	**32.2**	**95.9**	**36.2**	**52.1**

(continued)

TABLE 3. Percentage of Schools With a Required Health Education Course That Required Teachers To Use Standards, a Specific Curriculum, Guidelines, Framework, or Other Selected Materials, Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000

LOCAL SURVEYS

Site	National Health Education Standards	State, district, or school curriculum, guidelines, or framework	Materials from health organizations	Commercial teacher's guide
Weighted Data				
Chicago	47.0	97.4	60.0	54.7
Dallas	59.4	100.0	78.7	78.2
District of Columbia	30.6	93.9	45.2	66.6
Ft. Lauderdale	43.1	100.0	73.9	72.1
Los Angeles	37.1	100.0	34.8	41.9
Miami	40.6	98.3	70.8	62.0
New Orleans	73.7	100.0	75.0	66.7
Orange County	52.4	100.0	45.5	52.4
Palm Beach	41.6	100.0	64.9	65.0
Philadelphia	27.1	96.9	38.3	32.7
San Diego	NA**	NA	NA	NA
San Francisco	56.3	95.2	75.0	66.7
Unweighted Data				
Houston	50.0	100.0	77.4	58.1
Local Median	**45.1**	**100.0**	**67.9**	**63.5**

* Survey did not include students from one of the state's large school districts.

** NA = not available.

TABLE 4. Percentage of Schools That Tried To Increase Student Knowledge in Specific Topics,* Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000

STATE SURVEYS

Site	Alcohol or other drug-use prevention	Dietary behavior and nutrition	HIV** prevention	Physical activity and fitness	Pregnancy prevention	STD§ prevention	Suicide prevention	Tobacco-use prevention	Violence prevention
Weighted Data									
Alabama	100.0	94.9	98.0	98.1	88.8	94.0	82.4	100.0	90.0
Alaska	95.4	88.6	86.5	92.4	71.5	75.2	73.4	92.9	79.3
Arkansas	99.3	92.1	96.3	92.7	80.5	87.5	82.9	99.7	82.1
Delaware	100.0	86.5	100.0	95.7	97.5	97.5	77.0	100.0	88.9
Hawaii	100.0	98.6	100.0	97.2	94.4	100.0	69.2	100.0	94.4
Idaho	98.9	96.8	94.8	95.6	70.6	89.1	77.3	98.8	78.3
Illinois§§	99.7	91.0	98.6	92.5	82.3	95.3	73.0	98.9	77.2
Iowa	98.5	94.5	98.1	93.9	88.8	94.6	73.7	99.1	72.4
Maine	97.3	93.0	97.7	88.1	84.7	93.2	70.1	98.2	84.2
Massachusetts	98.8	95.2	96.9	94.0	84.1	90.6	74.3	99.2	94.9
Michigan	99.2	90.7	96.6	93.2	79.1	92.1	57.6	97.9	82.5
Minnesota	98.9	91.4	98.6	92.2	90.6	95.1	81.5	99.3	82.0
Missouri	99.6	95.3	96.2	94.6	82.0	90.2	73.2	99.2	81.8
Montana	98.0	90.5	94.8	97.0	76.5	84.0	60.7	98.8	81.9
Nebraska	97.8	90.2	95.1	91.6	76.0	85.1	67.1	98.1	74.0
New Hampshire	98.0	94.1	96.2	92.2	83.5	90.5	73.1	97.1	80.1
New Jersey	100.0	93.2	99.6	95.3	89.1	97.1	76.6	100.0	87.0
North Dakota	100.0	94.3	96.9	94.3	74.2	89.6	77.9	100.0	83.1
Ohio	99.0	94.9	NA+	92.8	89.5	NA	77.7	100.0	78.3
Oklahoma	94.6	86.9	94.3	94.6	77.9	77.2	56.6	94.4	80.4
Tennessee	98.8	96.5	98.1	98.1	85.9	91.6	74.6	100.0	82.8
Utah	99.4	96.3	99.4	95.8	76.7	91.0	90.4	99.4	91.9
Virginia	98.8	92.8	97.4	97.3	86.0	94.2	70.1	97.4	78.2
West Virginia	100.0	96.2	98.1	97.3	87.7	93.0	79.9	100.0	93.0
Unweighted Data									
California	99.5	93.4	99.0	93.4	91.0	96.2	67.5	99.0	82.9
Georgia	100.0	93.6	98.0	95.1	89.2	93.1	83.8	100.0	89.7
Indiana	100.0	94.9	99.6	96.2	92.6	98.3	84.1	99.6	85.5
Kentucky	99.5	97.0	98.0	96.5	87.4	94.5	75.0	99.5	87.4
Louisiana§§	97.7	85.9	74.7	93.6	45.0	62.4	58.0	98.2	87.2
Maryland§§	100.0	92.3	97.7	90.8	91.3	95.3	77.3	100.0	84.7
Pennsylvania§§	100.0	91.0	99.6	96.6	87.6	94.8	68.8	100.0	75.5
South Carolina	97.5	93.6	98.7	92.3	87.9	93.8	56.7	98.7	78.3
Texas§§	99.2	93.9	96.3	93.9	80.7	89.8	76.5	98.8	85.0
State Median	**99.2**	**93.6**	**97.8**	**94.3**	**85.9**	**93.1**	**74.3**	**99.2**	**82.8**

(continued)

TABLE 4. Percentage of Schools That Tried To Increase Student Knowledge in Specific Topics,* Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000 (continued)

LOCAL SURVEYS

Site	Alcohol or other drug-use prevention	Dietary behavior and nutrition	HIV** prevention	Physical activity and fitness	Pregnancy prevention	STD§ prevention	Suicide prevention	Tobacco-use prevention	Violence prevention
Weighted Data									
Chicago	98.1	92.9	95.8	96.1	79.5	88.2	50.6	98.0	90.8
Dallas	100.0	100.0	100.0	100.0	91.0	100.0	95.2	100.0	100.0
District of Columbia	100.0	93.5	100.0	93.5	93.9	100.0	50.2	97.0	87.4
Ft. Lauderdale	100.0	98.1	98.2	92.0	91.0	98.1	77.9	100.0	86.1
Los Angeles	100.0	100.0	100.0	95.7	94.4	98.9	81.5	100.0	87.2
Miami	100.0	95.0	100.0	84.9	91.6	98.4	77.4	98.3	89.9
New Orleans	100.0	100.0	100.0	95.2	95.2	100.0	66.7	95.0	90.5
Orange County	100.0	95.8	100.0	95.5	100.0	100.0	81.8	100.0	87.0
Palm Beach	100.0	100.0	100.0	92.7	96.3	96.2	85.0	100.0	92.5
Philadelphia	100.0	90.1	100.0	97.4	86.1	94.6	63.8	98.4	85.6
San Diego	NA	NA	NA	NA	NA	NA	NA	NA	NA
San Francisco	100.0	95.0	100.0	100.0	90.0	95.0	94.4	100.0	100.0
Unweighted Data									
Houston	100.0	96.9	100.0	96.9	96.9	100.0	81.3	100.0	97.0
Local Median	**100.0**	**96.4**	**100.0**	**95.6**	**92.8**	**98.6**	**79.6**	**100.0**	**90.2**

* In a required health education course.
** HIV = human immunodeficiency virus.
§ STD = sexually transmitted disease.
§§ Survey did not include students from one of the state's large school districts.
+ NA = not available.

TABLE 5. Percentage of Schools That Tried To Improve Specific Student Skills,* Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000

STATE SURVEYS

Site	Analysis of media messages	Communication	Decision making	Goal setting	Conflict resolution	Resisting peer pressure	Stress management
Weighted Data							
Alabama	79.0	89.5	97.4	92.8	91.8	97.5	89.2
Alaska	65.3	87.2	93.8	87.2	82.7	88.9	78.5
Arkansas	68.5	90.5	97.0	95.0	88.7	97.5	90.4
Delaware	88.2	95.7	98.1	93.8	100.0	98.1	96.2
Hawaii	92.4	97.2	98.6	95.8	81.5	97.2	91.3
Idaho	78.0	91.2	97.8	94.1	85.0	94.6	91.8
Illinois**	80.0	90.2	97.3	92.3	82.8	96.5	88.6
Iowa	81.1	89.7	96.1	92.0	78.7	94.3	91.6
Maine	90.2	95.0	96.7	96.1	81.2	95.6	89.2
Massachusetts	93.6	94.6	99.4	93.3	92.6	98.2	89.5
Michigan	79.6	91.3	98.1	88.9	83.9	97.7	82.0
Minnesota	85.3	90.6	98.6	91.6	80.6	96.5	90.1
Missouri	76.3	93.1	98.6	95.0	88.6	98.3	94.7
Montana	78.8	86.5	91.2	84.8	81.6	94.8	82.5
Nebraska	73.4	87.0	95.1	89.3	80.5	94.9	86.3
New Hampshire	88.0	93.8	99.1	89.7	86.4	95.9	87.1
New Jersey	91.5	94.6	99.3	95.2	92.4	98.9	89.1
North Dakota	81.0	91.8	97.7	89.8	84.7	96.1	93.2
Ohio	85.8	90.8	97.3	92.3	85.4	98.4	89.6
Oklahoma	62.3	85.4	98.2	87.4	92.7	96.3	78.2
Tennessee	70.0	89.4	95.8	91.4	85.6	96.3	84.9
Utah	91.7	97.7	97.6	97.6	93.2	98.0	98.8
Virginia	86.3	92.8	99.1	94.9	86.8	96.6	86.1
West Virginia	85.6	96.1	98.6	98.6	95.8	99.0	93.8
Unweighted Data							
California	80.6	87.7	95.7	89.1	79.1	96.7	75.8
Georgia	85.4	94.1	98.5	93.7	93.2	98.5	93.2
Indiana	90.6	95.7	99.6	94.0	89.7	99.1	96.6
Kentucky	80.2	90.4	98.5	92.5	88.4	97.5	92.3
Louisiana**	79.8	88.8	94.7	94.7	89.5	97.1	86.5
Maryland**	91.4	92.2	97.7	93.8	90.8	98.5	92.2
Pennsylvania**	86.5	92.9	97.0	90.3	82.0	98.5	89.6
South Carolina	75.0	89.8	96.9	95.0	85.5	95.6	81.9
Texas**	73.0	93.9	95.5	93.1	89.1	99.2	91.9
State Median	**81.0**	**91.3**	**97.7**	**93.1**	**86.4**	**97.2**	**89.6**

(continued)

TABLE 5. Percentage of Schools That Tried To Improve Specific Student Skills,* Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000 *(continued)*

LOCAL SURVEYS

Site	Analysis of media messages	Communication	Decision making	Goal setting	Conflict resolution	Resisting peer pressure	Stress management
Weighted Data							
Chicago	59.5	87.9	94.0	93.3	93.3	94.7	77.5
Dallas	78.2	95.7	100.0	100.0	95.7	95.2	95.2
District of Columbia	75.1	90.3	93.9	84.6	84.6	93.9	72.1
Ft. Lauderdale	81.2	92.8	95.6	95.6	91.1	98.2	88.2
Los Angeles	90.1	96.7	97.8	95.6	89.1	99.0	80.3
Miami	76.3	93.1	96.5	96.5	96.7	98.2	84.4
New Orleans	57.1	90.5	100.0	90.5	90.5	95.2	81.0
Orange County	83.3	95.8	95.8	95.8	100.0	100.0	95.8
Palm Beach	77.6	100.0	100.0	100.0	96.2	96.3	100.0
Philadelphia	76.2	90.1	98.8	94.4	89.5	97.8	73.2
San Diego	NA§	NA	NA	NA	NA	NA	NA
San Francisco	84.2	100.0	100.0	95.0	90.0	100.0	94.7
Unweighted Data							
Houston	81.8	100.0	100.0	100.0	97.0	100.0	96.9
Local Median	**77.9**	**94.4**	**98.3**	**95.6**	**92.2**	**98.0**	**86.3**

* In a required health education course.

** Survey did not include students from one of the state's large school districts.

§ NA = not available.

TABLE 6. Percentage of Schools That Taught Specific Topics Related to HIV* Infection/AIDS** Prevention,[§] Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000

STATE SURVEYS

Site	Abstinence to avoid HIV	How HIV is transmitted	How to correctly use a condom	Condom efficacy	Number of young people who get HIV	How to find information on HIV
Weighted Data						
Alabama	96.5	97.0	31.6	71.3	92.1	90.4
Alaska	78.8	82.7	37.4	64.2	70.9	64.2
Arkansas	92.0	93.4	25.6	62.6	85.2	78.0
Delaware	100.0	95.1	56.5	76.6	90.8	88.3
Hawaii	98.6	98.6	68.5	84.3	92.0	91.5
Idaho	93.3	93.2	23.1	57.8	87.6	76.3
Illinois[§§]	97.5	98.6	34.1	73.0	88.0	78.4
Iowa	96.1	96.6	48.7	83.4	89.6	82.0
Maine	96.5	97.2	61.7	84.1	85.6	86.6
Massachusetts	95.0	95.4	52.3	78.0	87.6	82.1
Michigan	95.0	94.8	31.3	67.4	86.2	79.9
Minnesota	97.9	98.0	46.6	83.5	91.8	83.8
Missouri	94.0	94.7	27.6	65.7	85.5	79.4
Montana	92.5	91.3	34.2	68.5	88.1	81.3
Nebraska	89.4	91.6	27.4	63.0	81.9	70.2
New Hampshire	94.1	94.4	55.4	77.4	86.5	82.1
New Jersey	97.9	99.3	58.0	81.7	91.5	87.5
North Dakota	92.4	93.8	25.9	60.8	85.7	72.9
Ohio	97.3	NA[+]	NA	NA	90.4	NA
Oklahoma	90.4	88.7	29.8	63.8	82.9	75.5
Tennessee	95.1	94.6	34.0	64.0	85.4	83.6
Utah	98.8	98.8	9.5	43.2	95.4	81.5
Virginia	92.9	93.8	NA	NA	86.5	83.5
West Virginia	94.3	95.3	48.2	76.1	90.2	86.4
Unweighted Data						
California	96.7	97.2	53.8	82.4	88.6	84.3
Georgia	98.0	97.5	27.4	76.5	92.4	84.3
Indiana	98.7	98.7	NA	NA	95.6	88.2
Kentucky	96.4	97.4	41.2	68.9	87.8	77.4
Louisiana[§§]	70.3	69.0	14.3	40.6	67.7	61.7
Maryland[§§]	94.6	95.4	46.5	80.0	90.0	83.7
Pennsylvania[§§]	99.2	99.2	50.8	82.2	95.1	86.4
South Carolina	98.1	97.4	53.2	71.2	86.4	69.5
Texas[§§]	95.0	93.8	27.4	63.8	85.1	76.3
State Median	**95.1**	**95.3**	**35.8**	**71.2**	**87.8**	**82.1**

(continued)

TABLE 6. Percentage of Schools That Taught Specific Topics Related to HIV* Infection/AIDS** Prevention,§ Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000 *(continued)*

LOCAL SURVEYS

Site	Abstinence to avoid HIV	How HIV is transmitted	How to correctly use a condom	Condom efficacy	Number of young people who get HIV	How to find information on HIV
Weighted Data						
Chicago	92.3	93.1	44.5	67.2	86.3	83.5
Dallas	100.0	100.0	29.8	73.9	100.0	95.7
District of Columbia	97.1	97.0	90.9	87.9	93.9	97.0
Ft. Lauderdale	98.1	98.1	75.6	84.0	98.1	95.5
Los Angeles	98.9	100.0	69.7	91.0	93.3	85.6
Miami	100.0	100.0	80.9	91.2	100.0	98.4
New Orleans	100.0	100.0	85.7	100.0	100.0	100.0
Orange County	100.0	100.0	54.2	95.8	95.8	91.3
Palm Beach	100.0	100.0	62.9	96.1	96.2	92.5
Philadelphia	97.3	98.4	61.5	81.0	92.8	92.1
San Diego	NA	NA	NA	NA	NA	NA
San Francisco	100.0	100.0	90.5	95.2	95.2	95.2
Unweighted Data						
Houston	100.0	100.0	51.6	90.6	100.0	100.0
Local Median	**100.0**	**100.0**	**66.3**	**90.8**	**96.0**	**95.4**

* HIV = human immunodeficiency virus.
** AIDS = acquired immunodeficiency syndrome.
§ In a required health education course.
§§ Survey did not include students from one of the state's large school districts.
+ NA = not available.

TABLE 7. Percentage of Schools in Which a Specific Person Was Responsible for Coordinating Health Education, Selected U.S. Sites—School Health Education Profiles, Principals' Surveys, 2000

STATE SURVEYS

Site	School district administrator*	School administrator**	Health education teacher	School nurse	No coordinator
Weighted Data§					
Alabama	16.2	32.6	39.4	6.7	5.2
Alaska	24.3	31.7	28.3	0.9	14.9
Arkansas	19.6	26.4	47.8	1.9	4.2
California	22.1	22.3	39.8	5.7	10.2
Delaware	15.8	13.7	68.5	0.0	2.0
Hawaii	4.7	14.7	75.6	0.0	5.0
Idaho	21.7	18.3	54.4	2.1	3.6
Illinois§§	23.4	24.2	46.7	0.3	5.4
Iowa	31.5	15.1	44.1	3.1	6.2
Maine	14.9	10.5	59.1	8.0	7.5
Massachusetts	60.1	9.3	25.2	2.3	3.1
Michigan	35.9	18.3	40.3	1.5	4.0
Minnesota	23.0	14.0	58.6	0.8	3.6
Missouri	28.8	22.2	42.7	4.3	2.0
Montana	19.8	13.0	60.8	2.0	4.3
Nebraska	23.8	21.7	41.8	3.0	9.7
New Hampshire	9.9	19.3	53.5	9.4	7.8
New Jersey	52.0	19.9	19.7	5.8	2.5
North Dakota	19.5	25.5	49.2	0.0	5.7
Ohio	30.1	18.3	47.7	0.3	3.6
Oklahoma	19.8	35.3	16.6	13.8	14.5
Pennsylvania§§	40.3	20.8	36.6	0.4	1.9
Tennessee	21.6	30.8	32.3	2.7	12.5
Utah	19.2	20.7	57.8	1.2	1.2
Virginia	25.2	17.4	51.3	1.7	4.4
West Virginia	14.8	22.5	60.2	0.0	2.5
Unweighted Data§					
Georgia	29.0	27.6	41.9	0.9	0.5
Indiana	21.0	20.2	56.0	0.0	2.9
Kentucky	4.4	28.4	62.8	0.8	3.6
Louisiana§§	21.1	17.4	55.3	1.1	5.3
Maryland§§	44.7	5.9	44.7	0.7	3.9
South Carolina	24.5	23.6	42.8	2.9	6.3
South Dakota	23.2	27.5	32.6	1.4	15.2
Texas§§	26.5	26.2	37.5	2.5	7.3
State Median	**22.5**	**20.7**	**45.7**	**1.6**	**4.4**

(continued)

TABLE 7. Percentage of Schools in Which a Specific Person Was Responsible for Coordinating Health Education, Selected U.S. Sites—School Health Education Profiles, Principals' Surveys, 2000 *(continued)*

LOCAL SURVEYS

Site	School district administrator*	School administrator**	Health education teacher	School nurse	No coordinator
Weighted Data§					
Chicago	3.9	23.1	44.1	11.5	17.4
Dallas	27.2	14.9	37.0	6.1	14.9
District of Columbia	2.6	0.0	86.7	5.5	5.2
Ft. Lauderdale	19.8	25.1	50.8	0.0	4.3
Los Angeles	12.2	25.5	57.4	1.2	3.7
Miami	26.3	42.9	23.9	1.5	5.4
New Orleans	34.8	8.7	56.5	0.0	0.0
Orange County	26.7	30.0	40.0	0.0	3.3
Palm Beach	27.9	35.6	33.7	0.0	2.9
Philadelphia	21.5	12.6	60.1	2.2	3.6
San Diego	55.1	22.4	0.0	15.0	7.4
San Francisco	12.5	16.7	70.8	0.0	0.0
Unweighted Data§					
Houston	21.9	15.6	62.5	0.0	0.0
Local Median	**21.9**	**22.4**	**50.8**	**1.2**	**3.7**

* District superintendent or district health education or curriculum coordinator.

** Principal or school curriculum coordinator.

§ Percentages for each row might not add up to 100.0 due to rounding.

§§ Survey did not include students from one of the state's large school districts.

TABLE 8. Percentage of Schools in Which Health Education Teachers Planned or Coordinated Health-Related Projects or Activities With Other Groups, Selected U.S. Sites—School Health Education Profiles, Teachers' Survey, 2000

STATE SURVEYS

Site	Physical education staff	School health services staff	School mental health staff	Food service staff	Community members
Weighted Data					
Alabama	69.1	68.2	55.5	26.1	45.7
Alaska	47.6	45.3	52.9	17.3	56.1
Arkansas	64.8	61.5	39.5	14.9	39.8
Delaware	90.1	82.7	56.9	16.4	51.0
Hawaii	68.6	45.4	50.7	14.2	68.9
Idaho	62.7	57.0	52.9	12.9	49.7
Illinois*	65.0	60.0	50.4	13.4	40.6
Iowa	56.1	73.6	47.7	16.6	53.9
Maine	67.8	75.9	56.0	19.1	57.0
Massachusetts	76.4	85.5	78.9	28.6	74.6
Michigan	57.1	37.7	50.8	15.1	50.1
Minnesota	68.9	74.5	62.0	22.4	59.1
Missouri	80.7	80.5	57.5	24.9	51.9
Montana	82.8	49.2	51.3	18.2	47.5
Nebraska	61.6	61.1	36.0	13.9	42.3
New Hampshire	53.9	79.0	63.8	23.6	56.4
New Jersey	81.6	80.9	61.8	11.8	48.3
North Dakota	61.6	30.8	49.2	23.9	45.7
Ohio	67.7	68.8	51.7	11.4	51.8
Oklahoma	48.6	47.0	51.6	29.1	30.7
Tennessee	65.0	56.7	54.0	23.4	48.9
Utah	60.2	46.2	55.9	8.4	63.2
Virginia	83.5	74.0	50.3	15.8	50.0
West Virginia	73.6	74.7	58.2	25.3	54.2
Unweighted Data					
California	48.1	53.3	48.1	11.9	46.2
Georgia	82.8	43.7	50.5	25.0	54.0
Indiana	74.5	79.4	54.0	14.4	60.4
Kentucky	76.8	68.6	54.8	18.1	60.6
Louisiana*	70.9	60.8	46.9	20.7	34.2
Maryland*	68.2	67.8	53.8	9.7	50.3
Pennsylvania*	87.9	78.0	57.1	17.9	59.1
South Carolina	67.9	68.8	42.3	24.8	44.6
Texas*	60.5	62.1	42.5	11.4	41.6
State Median	**67.9**	**67.8**	**52.9**	**17.3**	**50.3**

(continued)

TABLE 8. Percentage of Schools in Which Health Education Teachers Planned or Coordinated Health-Related Projects or Activities With Other Groups, Selected U.S. Sites—School Health Education Profiles, Teachers' Survey, 2000 *(continued)*

LOCAL SURVEYS

Site	Physical education staff	School health services staff	School mental health staff	Food service staff	Community members
Weighted Data					
Chicago	62.1	66.4	59.3	29.9	38.2
Dallas	39.4	67.6	38.1	14.1	43.3
District of Columbia	100.0	95.0	71.3	36.9	73.8
Ft. Lauderdale	63.2	37.6	51.9	30.9	44.8
Los Angeles	35.8	63.5	49.5	11.5	53.2
Miami	52.9	36.6	64.4	16.8	45.7
New Orleans	95.8	91.7	62.5	56.5	66.7
Orange County	44.7	48.7	38.5	10.5	48.7
Palm Beach	45.7	74.9	56.9	14.2	49.7
Philadelphia	88.0	85.1	60.2	24.7	45.9
San Diego	49.1	86.7	64.5	11.2	71.1
San Francisco	67.9	82.1	81.5	11.1	74.1
Unweighted Data					
Houston	97.1	88.6	64.7	17.1	73.5
Local Median	**62.1**	**74.9**	**60.2**	**16.8**	**49.7**

* Survey did not include students from one of the state's large school districts.

TABLE 9. Percentage of Schools in Which the Lead Health Education Teacher Had Professional Preparation in a Specific Area, Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000

STATE SURVEYS

Site	Health and physical education	Health education only	Physical education only	Science or other education degree	Nursing or counseling	Other*
Weighted Data**						
Alabama	53.1	5.6	17.4	18.0	3.8	2.2
Alaska	12.4	1.9	8.1	52.5	11.7	13.4
Arkansas	74.2	2.2	15.5	4.5	0.8	2.8
Delaware	70.5	4.3	18.0	5.0	2.2	0.0
Hawaii	51.6	7.8	19.4	13.9	3.6	3.6
Idaho	57.5	4.1	17.6	16.6	1.1	3.0
Illinois§	41.8	12.6	21.7	18.7	2.3	2.8
Iowa	36.1	7.3	15.3	29.0	5.6	6.8
Maine	40.7	19.5	10.7	18.3	8.3	2.5
Massachusetts	46.6	22.7	5.0	10.1	10.6	5.0
Michigan	31.9	12.3	16.1	30.4	3.4	6.0
Minnesota	67.4	9.1	8.5	9.1	2.3	3.4
Missouri	50.4	3.1	17.9	22.2	3.1	3.3
Montana	58.2	2.7	14.9	18.6	0.8	4.7
Nebraska	37.7	3.2	20.1	28.8	4.9	5.3
New Hampshire	23.3	18.3	15.6	20.9	18.4	3.5
New Jersey	64.3	8.8	3.7	6.1	13.9	3.2
North Dakota	36.7	3.2	17.8	36.4	2.5	3.3
Ohio	67.9	10.5	5.4	11.6	1.0	3.6
Oklahoma	35.0	2.1	7.9	27.5	17.3	10.2
Tennessee	54.4	4.5	9.0	19.1	9.1	4.0
Utah	43.6	14.3	15.4	19.5	1.5	5.7
Virginia	82.3	1.2	7.8	4.3	1.4	3.0
West Virginia	70.6	6.0	10.3	9.9	0.0	3.1
Unweighted Data**						
California	20.2	9.2	10.3	42.9	6.4	11.0
Georgia	68.3	7.9	5.0	11.9	2.5	4.5
Indiana	72.6	6.6	12.8	5.8	0.0	2.2
Kentucky	56.1	13.2	13.2	9.3	3.9	4.4
Louisiana§	74.1	1.7	10.3	9.2	1.7	2.9
Maryland§	48.9	20.7	16.3	11.1	3.0	0.0
Pennsylvania§	90.2	4.1	3.4	1.5	0.4	0.4
South Carolina	43.8	3.8	27.6	16.2	4.8	3.8
Texas§	45.0	9.2	13.1	16.0	6.0	10.6
State Median	**51.6**	**6.6**	**13.2**	**16.2**	**3.1**	**3.5**

(continued)

TABLE 9. Percentage of Schools in Which the Lead Health Education Teacher Had Professional Preparation in a Specific Area, Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000 *(continued)*

LOCAL SURVEYS

Site	Health and physical education	Health education only	Physical education only	Science or other education degree	Nursing or counseling	Other
Weighted Data**						
Chicago	37.3	3.0	12.9	28.9	9.9	8.0
Dallas	45.5	12.4	0.0	32.3	0.0	9.8
District of Columbia	84.0	5.3	5.3	0.0	0.0	5.4
Ft. Lauderdale	32.7	8.4	10.9	36.3	6.7	5.0
Los Angeles	14.3	27.1	4.7	45.5	0.0	8.4
Miami	20.2	16.4	0.0	49.5	3.7	10.2
New Orleans	95.0	0.0	5.0	0.0	0.0	0.0
Orange County	22.2	27.8	2.8	38.9	2.8	5.6
Palm Beach	49.8	20.7	5.9	20.7	0.0	2.9
Philadelphia	86.9	1.1	3.5	5.6	1.2	1.6
San Diego	0.0	20.0	0.0	29.0	37.7	13.4
San Francisco	15.4	7.7	0.0	65.4	0.0	11.5
Unweighted Data**						
Houston	87.1	3.2	9.7	0.0	0.0	0.0
Local Median	**37.3**	**8.4**	**4.7**	**29.0**	**0.0**	**5.6**

* Includes kinesiology, exercise science, public health and other.

** Percentages for each row might not add up to 100.0 because of rounding.

§ Survey did not include students from one of the state's large school districts.

TABLE 10. Percentage of Schools in Which the Lead Health Education Teacher Had Received ≥4 Hours of Staff Development During the Preceding 2 Years in Specific Health Education Topics, Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000

STATE SURVEYS

Site	Alcohol or other drug-use prevention	Dietary behavior and nutrition	HIV* prevention	Physical activity and fitness	Pregnancy prevention	STD** prevention	Suicide prevention	Tobacco-use prevention	Violence prevention
Weighted Data									
Alabama	56.3	29.8	50.2	51.8	29.7	36.3	27.6	37.7	56.5
Alaska	40.6	18.1	30.9	22.9	14.0	17.3	30.7	25.8	41.5
Arkansas	46.8	24.3	43.8	41.2	27.3	33.9	24.8	32.1	44.6
Delaware	47.5	26.9	35.3	47.7	28.8	28.8	17.3	15.4	49.0
Hawaii	41.5	27.9	48.4	26.3	24.0	31.0	14.1	30.9	41.1
Idaho	52.7	32.9	71.1	44.1	23.0	49.8	26.0	41.0	51.7
Illinois§	43.9	16.8	41.4	36.6	19.6	28.9	18.8	23.1	45.8
Iowa	43.8	27.9	40.7	37.1	19.0	27.2	16.8	22.9	38.6
Maine	43.5	29.6	55.3	36.7	28.2	40.5	30.1	33.1	53.4
Massachusetts	65.3	44.8	50.0	46.0	30.7	39.6	35.1	51.1	73.3
Michigan	47.9	37.1	51.4	38.9	28.8	46.6	21.7	41.8	52.9
Minnesota	48.4	30.6	54.3	43.1	37.4	44.8	26.1	41.5	47.9
Missouri	60.6	31.1	38.4	45.0	24.2	32.2	27.1	36.2	55.0
Montana	44.0	30.8	51.6	48.4	25.1	39.4	19.9	36.8	50.5
Nebraska	43.1	27.3	30.3	33.7	18.5	22.4	20.7	27.2	36.1
New Hampshire	56.2	41.2	44.7	49.5	30.8	45.9	31.3	38.6	54.5
New Jersey	54.1	23.5	48.5	42.3	33.9	40.8	21.1	33.8	54.6
North Dakota	51.3	29.9	43.2	41.3	17.7	30.5	26.8	35.5	48.0
Ohio	36.5	20.3	NA§§	27.8	NA	NA	16.7	20.8	35.3
Oklahoma	59.8	22.3	74.3	24.9	28.3	49.6	27.8	33.0	57.4
Tennessee	51.9	28.1	57.3	45.1	29.9	40.4	23.0	37.6	63.8
Utah	79.6	70.8	88.0	48.3	63.4	80.7	73.0	78.5	73.1
Virginia	45.3	29.4	45.2	61.9	21.5	31.3	21.2	32.8	43.9
West Virginia	55.0	34.8	40.2	44.5	21.0	29.6	19.8	58.6	58.2
Unweighted Data									
California	50.9	27.0	53.6	37.7	31.3	43.6	23.9	52.1	52.1
Georgia	44.2	25.2	56.7	46.7	31.8	50.2	18.3	31.6	44.1
Indiana	39.4	18.8	49.0	34.3	20.4	32.4	13.6	25.9	42.7
Kentucky	48.6	22.8	40.7	42.1	23.3	29.5	18.8	34.2	52.9
Louisiana§	56.7	25.4	33.2	47.7	18.6	28.8	23.6	41.5	53.0
Maryland§	69.8	33.6	74.2	50.3	41.3	60.3	31.8	56.0	46.6
Pennsylvania§	52.1	23.5	48.0	47.1	24.1	36.2	28.1	32.1	52.3
South Carolina	36.8	22.3	52.9	40.3	31.4	41.6	14.1	30.8	32.7
Texas§	37.1	25.5	30.6	46.9	16.7	24.0	19.9	24.8	48.1
State Median	**48.4**	**27.9**	**48.4**	**43.1**	**26.2**	**36.3**	**23.0**	**33.8**	**50.5**

(continued)

TABLE 10. Percentage of Schools in Which the Lead Health Education Teacher Had Received ≥4 Hours of Staff Development During the Preceding 2 Years in Specific Health Education Topics, Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000 *(continued)*

LOCAL SURVEYS

Site	Alcohol or other drug-use prevention	Dietary behavior and nutrition	HIV* prevention	Physical activity and fitness	Pregnancy prevention	STD** prevention	Suicide prevention	Tobacco-use prevention	Violence prevention
Weighted Data									
Chicago	49.5	33.3	54.2	40.4	34.4	48.3	23.5	34.7	58.2
Dallas	48.4	31.0	55.1	36.0	45.0	64.8	52.5	43.8	48.2
District of Columbia	60.5	51.6	84.7	70.9	63.4	74.0	18.6	47.4	65.8
Ft. Lauderdale	56.5	24.0	80.6	38.7	33.5	64.7	31.9	48.2	48.2
Los Angeles	54.4	27.6	72.9	20.8	42.9	61.6	28.0	70.8	46.9
Miami	35.8	19.9	70.4	28.0	42.8	57.6	26.8	28.9	33.5
New Orleans	83.3	66.7	87.5	82.6	69.6	87.5	52.2	66.7	79.2
Orange County	53.8	28.2	92.3	21.1	42.1	79.5	38.5	30.8	61.5
Palm Beach	65.4	42.6	68.4	31.2	45.3	51.1	48.5	42.5	65.4
Philadelphia	44.9	29.5	58.7	51.0	38.7	52.0	13.1	28.4	46.4
San Diego	100.0	11.0	100.0	13.3	97.7	97.7	75.7	100.0	93.4
San Francisco	78.6	42.9	74.1	34.6	32.1	50.0	32.1	76.9	81.5
Unweighted Data									
Houston	85.7	50.0	88.6	91.4	66.7	85.7	55.9	79.4	80.0
Local Median	**56.5**	**31.0**	**74.1**	**36.0**	**42.9**	**64.7**	**32.1**	**47.4**	**61.5**

* HIV = human immunodeficiency virus.
** STD = sexually transmitted disease.
§ Survey did not include students from one of the state's large school districts.
§§ NA = not available.

TABLE 11. Percentage of Schools in Which the Lead Health Education Teacher Wanted Staff Development in Specific Health Education Topics, Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000

STATE SURVEYS

Site	Alcohol or other drug-use prevention	Dietary behavior and nutrition	HIV* prevention	Physical activity and fitness	Pregnancy prevention	STD** prevention	Suicide prevention	Tobacco-use prevention	Violence prevention
Weighted Data									
Alabama	72.4	65.8	73.3	59.7	64.4	70.3	70.7	66.7	77.3
Alaska	70.0	61.4	60.9	52.5	55.5	58.9	72.0	63.4	76.7
Arkansas	73.2	57.7	70.5	59.7	57.4	65.2	71.9	68.4	77.7
Delaware	63.4	62.9	62.1	68.6	47.3	63.3	69.0	52.0	77.3
Hawaii	85.9	79.3	85.0	75.1	79.3	84.0	84.0	87.3	91.5
Idaho	72.0	65.9	67.3	54.5	57.8	62.0	78.6	65.9	79.9
Illinois§	72.5	59.7	64.3	52.1	55.0	65.1	70.4	60.8	79.0
Iowa	57.8	46.5	56.3	49.2	51.0	57.6	60.1	50.0	68.0
Maine	60.4	55.4	50.1	46.2	44.2	50.0	66.2	50.4	77.9
Massachusetts	76.3	69.6	68.9	59.2	65.7	74.3	82.6	65.5	83.5
Michigan	64.1	54.2	57.6	52.6	50.7	61.0	65.6	57.9	72.0
Minnesota	67.7	57.9	67.9	53.4	60.9	68.7	71.5	61.8	64.3
Missouri	66.5	62.7	65.0	56.5	55.2	61.9	67.7	60.0	77.4
Montana	68.4	67.1	65.3	62.7	59.2	64.5	73.5	66.4	78.0
Nebraska	65.0	49.6	55.1	45.9	43.9	52.5	61.3	56.0	72.1
New Hampshire	81.1	75.4	75.5	64.1	66.2	76.9	83.7	71.7	85.4
New Jersey	79.6	71.1	79.5	68.4	70.7	80.3	84.9	77.0	88.2
North Dakota	54.2	53.3	52.1	53.9	45.8	49.7	65.1	51.5	71.4
Ohio	65.8	51.0	NA§§	49.3	NA	NA	65.6	60.1	74.6
Oklahoma	71.8	52.2	68.6	54.2	63.2	65.7	73.7	67.5	81.0
Tennessee	72.1	62.3	66.3	58.1	57.7	62.8	74.9	60.6	81.9
Utah	73.7	69.5	69.7	58.5	65.7	67.8	84.7	71.4	86.5
Virginia	63.1	65.9	58.3	66.4	49.1	53.4	67.8	58.4	75.1
West Virginia	67.7	69.7	70.5	63.4	64.5	69.5	76.1	68.1	78.4
Unweighted Data									
California	66.1	57.5	61.1	49.7	54.8	60.3	68.8	54.5	76.1
Georgia	78.0	63.7	80.4	64.5	70.8	77.1	74.3	72.4	86.0
Indiana	63.7	44.5	58.7	52.3	49.6	57.0	66.9	52.7	72.0
Kentucky	69.7	61.6	70.6	58.3	59.7	67.4	73.5	61.9	82.1
Louisiana§	75.0	68.2	72.2	68.7	55.2	66.7	76.0	69.4	81.8
Maryland§	72.9	59.7	71.5	46.2	59.7	72.9	71.7	63.2	80.3
Pennsylvania§	74.7	65.6	80.8	67.8	66.1	76.1	73.7	70.3	83.3
South Carolina	71.1	68.8	72.4	64.1	65.7	69.5	74.2	65.1	77.5
Texas§	73.6	65.9	70.4	58.3	59.3	67.0	72.7	64.5	76.8
State Median	**71.1**	**62.7**	**68.2**	**58.3**	**58.5**	**65.4**	**72.0**	**63.4**	**77.9**

(continued)

TABLE 11. Percentage of Schools in Which the Lead Health Education Teacher Wanted Staff Development in Specific Health Education Topics, Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000 *(continued)*

LOCAL SURVEYS

Site	Alcohol or other drug-use prevention	Dietary behavior and nutrition	HIV* prevention	Physical activity and fitness	Pregnancy prevention	STD** prevention	Suicide prevention	Tobacco-use prevention	Violence prevention
Weighted Data									
Chicago	76.3	72.7	67.7	69.6	67.4	67.5	75.3	71.0	86.5
Dallas	79.7	46.7	69.9	41.5	58.2	75.2	56.7	54.5	61.3
District of Columbia	71.8	74.7	82.3	57.8	72.0	80.0	82.3	64.2	84.3
Ft. Lauderdale	62.3	70.8	59.3	48.0	64.0	62.6	72.2	47.7	77.7
Los Angeles	67.5	57.5	63.5	45.1	53.1	61.3	68.7	59.7	77.0
Miami	77.9	76.9	70.3	57.0	67.1	72.6	73.5	72.1	79.8
New Orleans	91.7	79.2	83.3	75.0	87.5	95.8	79.2	79.2	83.3
Orange County	81.6	66.7	74.4	47.4	74.4	84.6	71.1	66.7	79.5
Palm Beach	67.4	67.6	69.5	45.4	58.6	73.3	69.4	57.1	75.4
Philadelphia	73.6	71.8	77.3	68.7	80.7	78.2	85.1	70.2	88.3
San Diego	75.5	37.8	84.4	26.6	64.3	66.6	68.8	55.4	84.4
San Francisco	60.7	66.7	60.7	63.0	57.7	65.4	81.5	53.8	81.5
Unweighted Data									
Houston	94.3	71.4	85.7	82.9	79.4	82.9	91.4	91.4	97.1
Local Median	**75.5**	**70.8**	**70.3**	**57.0**	**67.1**	**73.3**	**73.5**	**64.2**	**81.5**

* HIV = human immunodeficiency virus.
** STD = sexually transmitted disease.
§ Survey did not include students from one of the state's large school districts.
§§ NA = not available.

TABLE 12. Percentage of Schools in Which the Lead Health Education Teacher Received Staff Development in Specific Teaching Methods, Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000

STATE SURVEYS

Site	Teaching students with physical or cognitive disabilities	Teaching students of various cultural backgrounds	Teaching students with limited English proficiency	Using interactive teaching methods	Teaching skills for behavior change
Weighted Data					
Alabama	45.7	33.1	17.6	56.1	44.3
Alaska	45.9	61.2	30.3	53.1	42.0
Arkansas	41.0	39.0	21.4	48.7	40.5
Delaware	39.0	36.5	10.7	48.4	34.5
Hawaii	26.8	31.5	33.1	48.1	22.6
Idaho	33.7	21.2	9.8	41.6	38.1
Illinois*	35.1	23.3	14.5	49.9	39.0
Iowa	43.3	28.0	13.6	46.8	43.6
Maine	38.8	12.4	8.0	46.3	32.3
Massachusetts	38.2	32.7	15.5	61.4	49.9
Michigan	30.3	29.4	9.5	56.2	47.7
Minnesota	33.7	38.1	18.7	44.3	38.3
Missouri	46.7	41.9	16.5	61.8	50.3
Montana	32.8	24.1	4.0	48.8	43.8
Nebraska	32.9	40.5	15.9	45.7	42.0
New Hampshire	53.4	18.2	6.1	67.4	60.1
New Jersey	41.8	36.1	12.5	51.1	42.4
North Dakota	30.6	19.1	2.4	40.2	45.7
Ohio	36.6	21.8	7.3	42.0	35.7
Oklahoma	51.1	66.2	20.1	50.0	48.2
Tennessee	47.4	35.7	18.9	63.8	53.7
Utah	30.1	44.1	34.3	67.1	52.4
Virginia	33.3	38.3	16.6	53.8	37.7
West Virginia	30.0	20.8	9.1	58.1	47.1
Unweighted Data					
California	46.9	65.2	59.2	58.4	45.5
Georgia	35.8	34.3	20.8	51.2	40.5
Indiana	40.6	26.5	12.0	48.8	41.4
Kentucky	53.2	42.3	12.3	64.4	51.6
Louisiana*	33.7	27.7	8.8	60.8	46.2
Maryland*	50.3	55.7	21.6	65.8	50.0
Pennsylvania*	51.2	27.7	12.5	56.2	42.7
South Carolina	31.4	34.2	11.5	53.2	37.9
Texas*	57.1	56.7	35.8	59.3	52.4
State Median	**38.8**	**34.2**	**14.5**	**53.1**	**43.6**

(continued)

TABLE 12. Percentage of Schools in Which the Lead Health Education Teacher Received Staff Development in Specific Teaching Methods, Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000 *(continued)*

LOCAL SURVEYS

Site	Teaching students with physical or cognitive disabilities	Teaching students of various cultural backgrounds	Teaching students with limited English proficiency	Using interactive teaching methods	Teaching skills for behavior change
Weighted Data					
Chicago	57.8	44.4	32.2	60.9	57.3
Dallas	39.0	73.1	50.7	85.1	43.3
District of Columbia	46.3	66.5	38.7	54.0	66.8
Ft. Lauderdale	48.6	72.8	75.3	72.1	51.1
Los Angeles	58.6	75.8	85.6	81.7	58.7
Miami	34.3	56.2	57.5	61.8	34.1
New Orleans	37.5	41.7	25.0	66.7	70.8
Orange County	54.1	68.4	77.8	64.9	48.6
Palm Beach	43.0	79.8	73.4	76.4	47.1
Philadelphia	23.5	41.3	16.2	56.9	42.8
San Diego	11.1	64.4	20.1	60.0	46.7
San Francisco	46.2	65.4	38.5	73.1	57.7
Unweighted Data					
Houston	70.6	77.1	77.1	76.5	80.0
Local Median	**46.2**	**66.5**	**50.7**	**66.7**	**51.1**

* Survey did not include students from one of the state's large school districts.

TABLE 13. Percentage of Schools in Which the Lead Health Education Teacher Wanted Staff Development in Specific Teaching Methods, Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000

STATE SURVEYS

Site	Teaching students with physical or cognitive disabilities	Teaching students of various cultural backgrounds	Teaching students with limited English proficiency	Using interactive teaching methods	Teaching skills for behavior change
Weighted Data					
Alabama	64.5	55.2	48.3	66.3	77.3
Alaska	64.7	55.2	54.7	61.6	79.8
Arkansas	56.6	49.2	45.0	63.6	75.1
Delaware	67.3	56.4	61.6	69.2	79.5
Hawaii	84.2	70.0	77.6	83.1	87.8
Idaho	59.2	54.0	51.3	65.8	79.3
Illinois*	55.0	44.7	39.5	55.7	74.4
Iowa	48.3	38.4	31.9	54.9	70.1
Maine	51.3	45.3	32.2	58.2	74.1
Massachusetts	69.2	66.1	54.8	70.5	84.5
Michigan	60.1	46.9	35.4	65.5	79.6
Minnesota	54.0	52.0	44.5	59.8	71.1
Missouri	57.9	43.9	37.7	60.4	77.6
Montana	62.1	43.9	35.6	64.8	75.1
Nebraska	48.5	43.9	34.9	44.5	65.8
New Hampshire	71.4	58.1	43.2	79.6	88.7
New Jersey	76.7	65.6	64.0	72.5	86.1
North Dakota	47.7	33.2	19.7	49.4	69.6
Ohio	58.0	40.6	31.2	59.7	71.9
Oklahoma	61.7	57.9	49.4	57.5	79.0
Tennessee	63.5	48.2	53.0	57.3	76.5
Utah	69.6	67.5	63.3	69.6	80.7
Virginia	65.8	49.8	49.2	53.6	75.2
West Virginia	58.6	47.1	37.9	61.0	72.9
Unweighted Data					
California	58.0	53.8	45.6	56.4	73.5
Georgia	65.7	64.3	64.6	70.0	77.1
Indiana	51.0	39.1	36.3	59.3	69.8
Kentucky	58.7	52.8	41.7	60.2	72.1
Louisiana*	64.6	60.8	45.1	68.0	76.8
Maryland*	58.9	51.3	41.5	60.3	80.1
Pennsylvania*	68.2	51.1	43.2	67.4	81.4
South Carolina	69.9	67.6	58.3	62.5	81.0
Texas*	61.5	59.3	57.9	61.0	74.4
State Median	**61.5**	**52.0**	**45.0**	**61.0**	**76.8**

(continued)

TABLE 13. Percentage of Schools in Which the Lead Health Education Teacher Wanted Staff Development in Specific Teaching Methods, Selected U.S. Sites—School Health Education Profiles, Teachers' Surveys, 2000 *(continued)*

LOCAL SURVEYS

Site	Teaching students with physical or cognitive disabilities	Teaching students of various cultural backgrounds	Teaching students with limited English proficiency	Using interactive teaching methods	Teaching skills for behavior change
Weighted Data					
Chicago	79.9	71.0	62.7	73.2	87.2
Dallas	73.1	70.5	70.8	73.1	77.9
District of Columbia	82.0	76.8	79.5	79.5	79.5
Ft. Lauderdale	67.9	57.2	59.0	65.5	78.7
Los Angeles	56.2	51.9	48.6	62.2	77.4
Miami	66.2	63.6	52.4	61.7	77.2
New Orleans	79.2	82.6	73.9	95.8	87.5
Orange County	63.2	54.1	38.9	68.4	81.6
Palm Beach	54.0	56.9	46.9	61.5	76.8
Philadelphia	83.4	77.3	70.2	76.2	86.9
San Diego	66.7	68.8	62.2	51.0	62.2
San Francisco	77.8	77.8	59.3	63.0	77.8
Unweighted Data					
Houston	88.6	77.1	77.1	77.1	88.6
Local Median	**73.1**	**70.5**	**62.2**	**68.4**	**78.7**

* Survey did not include students from one of the state's large school districts.

TABLE 14. Percentage of Schools That Received Parental Feedback About Health Education in Their School and, Among Those Schools, Percentage That Received a Specific Type of Feedback, Selected U.S. Sites—School Health Education Profiles, Principals' Surveys, 2000

STATE SURVEYS

Site	Received parental feedback	Type of parental feedback received*		
		Mainly positive	Mainly negative	Equally positive and negative
Weighted Data				
Alabama	49.8	90.4	0.7	8.9
Alaska	39.0	79.3	4.0	16.7
Arkansas	47.2	90.4	0.0	9.6
California	54.4	88.7	1.0	10.3
Delaware	45.2	84.4	0.0	15.6
Hawaii	46.0	79.9	0.0	20.1
Idaho	61.1	85.6	0.7	13.6
Illinois**	51.9	90.4	1.5	8.1
Iowa	47.5	84.1	1.3	14.6
Maine	52.2	90.9	0.9	8.2
Massachusetts	65.9	92.3	1.4	6.3
Michigan	58.2	88.7	1.0	10.3
Minnesota	60.2	89.4	0.6	10.0
Missouri	53.2	86.8	0.6	12.6
Montana	54.3	88.2	1.4	10.4
Nebraska	40.7	91.0	0.7	8.3
New Hampshire	57.4	83.1	1.0	15.9
New Jersey	62.5	86.1	1.1	12.8
North Dakota	43.7	87.2	0.0	12.8
Ohio	47.3	86.3	1.8	11.9
Oklahoma	37.2	86.9	0.8	12.3
Pennsylvania**	59.7	91.9	1.2	6.9
Tennessee	53.5	87.1	0.7	12.2
Utah	65.6	90.6	1.6	7.9
Virginia	58.7	87.2	1.4	11.5
West Virginia	59.9	90.3	0.7	9.0
Unweighted Data				
Georgia	63.9	91.2	1.4	7.5
Indiana	53.8	88.7	2.1	9.2
Kentucky	49.1	86.8	0.0	13.2
Louisiana**	41.4	93.1	0.0	6.9
Maryland**	52.8	93.0	2.3	4.7
South Carolina	47.6	89.9	2.8	7.3
South Dakota	30.4	88.9	0.0	11.1
Texas**	44.4	92.7	0.7	6.6
State Median	**52.5**	**88.7**	**1.0**	**10.3**

(continued)

TABLE 14. Percentage of Schools That Received Parental Feedback About Health Education in Their School and, Among Those Schools, Percentage That Received a Specific Type of Feedback, Selected U.S. Sites—School Health Education Profiles, Principals' Surveys, 2000 *(continued)*

LOCAL SURVEYS

Site	Received parental feedback	Type of parental feedback received*		
		Mainly positive	Mainly negative	Equally positive and negative
Weighted Data				
Chicago	50.6	87.8	0.8	11.4
Dallas	49.5	95.5	0.0	4.5
District of Columbia	61.5	58.2	0.0	41.8
Ft. Lauderdale	56.9	92.6	3.7	3.7
Los Angeles	64.0	92.4	0.0	7.6
Miami	53.0	89.2	0.0	10.8
New Orleans	66.7	93.8	0.0	6.3
Orange County	59.5	86.4	0.0	13.6
Palm Beach	53.6	100.0	0.0	0.0
Philadelphia	44.5	86.2	0.0	13.8
San Diego	69.9	93.3	3.2	3.4
San Francisco	60.6	90.0	0.0	10.0
Unweighted Data				
Houston	57.1	90.0	0.0	10.0
Local Median	**57.1**	**90.0**	**0.0**	**10.0**

* Percentages for each row might not add up to 100.0 because of rounding.

** Survey did not include students from one of the state's large school districts.

TABLE 15. Percentage of Schools With a Written Policy on HIV*-Infected Students or School Staff and, Among Those Schools, Percentage That Addressed Specific Topics, Selected U.S. Sites—School Health Education Profiles, Principals' Surveys, 2000

STATE SURVEYS

Site	Had a written policy	Topic addressed by a written policy: Attendance of students**	Protection from discrimination§	Confidentiality§	Worksite safety	Confidential counseling§	Communication of policy to students, staff, and parents
Weighted Data							
Alabama	57.6	97.6	97.5	98.8	99.3	83.1	91.4
Alaska	43.0	93.8	96.5	98.2	95.8	75.8	88.8
Arkansas	44.1	96.3	96.1	96.0	94.5	81.9	86.4
California	46.1	96.3	95.1	97.5	97.4	74.3	86.6
Delaware	50.7	100.0	100.0	100.0	96.2	84.3	92.3
Hawaii	60.1	89.7	100.0	100.0	100.0	69.0	90.0
Idaho	64.8	95.4	95.4	96.2	94.6	67.9	74.3
Illinois§§	50.9	93.7	97.3	98.4	95.8	67.4	80.2
Iowa	48.6	94.9	94.2	98.1	98.1	63.8	82.1
Maine	70.4	96.5	97.9	99.3	97.3	74.6	83.5
Massachusetts	61.9	94.6	97.9	99.4	98.5	74.5	86.1
Michigan	50.9	96.4	97.6	97.6	97.0	78.2	84.6
Minnesota	52.3	91.6	93.9	98.0	98.7	73.6	86.3
Missouri	54.8	94.8	97.8	98.9	96.0	76.3	87.0
Montana	62.1	94.0	94.4	97.3	97.8	71.7	89.0
Nebraska	58.4	91.3	93.6	92.4	92.0	63.3	81.4
New Hampshire	75.4	96.4	95.6	98.0	98.2	71.4	88.0
New Jersey	60.7	97.8	98.4	99.5	97.3	75.9	85.6
North Dakota	56.5	91.4	94.5	98.9	97.9	73.2	86.0
Ohio	NA+	NA	NA	NA	NA	NA	NA
Oklahoma	61.5	94.0	97.0	96.5	98.0	76.3	86.3
Pennsylvania§§	62.2	95.7	98.5	98.4	96.0	69.0	79.8
Tennessee	62.8	96.1	98.7	98.7	99.2	84.6	88.9
Utah	61.1	96.1	99.0	100.0	99.1	75.8	81.0
Virginia	48.7	98.5	97.0	99.2	96.9	76.7	84.8
West Virginia	41.4	96.9	99.0	99.0	98.0	83.6	92.0
Unweighted Data							
Georgia	49.3	94.4	99.1	99.1	96.3	81.1	86.9
Indiana	54.5	89.7	95.6	98.5	100.0	68.7	85.2
Kentucky	26.7	84.3	89.9	95.8	97.1	80.9	76.8
Louisiana§§	34.6	94.0	95.4	98.5	100.0	82.5	85.5
Maryland§§	56.8	94.4	96.6	100.0	98.9	77.3	84.3
South Carolina	56.0	95.8	97.5	99.2	96.7	84.0	86.3
South Dakota	54.4	92.3	94.7	96.2	96.1	64.5	84.4
Texas§§	40.8	93.9	96.2	99.2	90.9	83.3	86.4
State Median	**54.8**	**94.8**	**97.0**	**98.5**	**97.3**	**75.8**	**86.1**

(continued)

TABLE 15. Percentage of Schools With a Written Policy on HIV*-Infected Students or School Staff and, Among Those Schools, Percentage That Addressed Specific Topics, Selected U.S. Sites—School Health Education Profiles, Principals' Surveys, 2000 *(continued)*

LOCAL SURVEYS

Site	Had a written policy	Topic addressed by a written policy: Attendance of students**	Protection from discrimination§	Confidentiality§	Worksite safety	Confidential counseling§	Communication of policy to students, staff, and parents
Weighted Data							
Chicago	58.5	95.9	97.5	98.4	98.5	83.2	86.1
Dallas	41.5	78.3	100.0	100.0	100.0	94.1	78.3
District of Columbia	82.7	91.0	100.0	97.1	96.8	87.4	96.8
Ft. Lauderdale	73.4	85.5	97.0	97.1	97.1	78.2	87.7
Los Angeles	67.5	96.8	100.0	100.0	98.5	81.8	86.7
Miami	73.5	98.5	98.3	100.0	100.0	89.0	86.9
New Orleans	75.0	100.0	100.0	100.0	100.0	94.4	100.0
Orange County	37.8	92.9	100.0	100.0	100.0	85.7	84.6
Palm Beach	57.9	100.0	100.0	100.0	100.0	91.4	84.1
Philadelphia	55.4	98.1	98.1	100.0	96.1	87.1	89.9
San Diego	100.0	95.3	100.0	100.0	100.0	0.0	100.0
San Francisco	45.5	92.9	100.0	100.0	100.0	100.0	80.0
Unweighted Data							
Houston	75.8	83.3	91.7	95.8	87.5	91.3	83.3
Local Median	**67.5**	**95.3**	**100.0**	**100.0**	**100.0**	**87.4**	**86.7**

* HIV = human immunodeficiency virus.
** For HIV-infected students.
§ For HIV-infected students and staff members.
§§ Survey did not include students from one of the state's large school districts.
+ NA = not available.

TABLE 16. Percentage of Schools With a Policy Prohibiting Cigarette Smoking by Students and, Among Those Schools, Percentage That Had a Policy Prohibiting Cigarette Smoking in Specific Locations, Selected U.S. Sites—School Health Education Profiles, Principals' Survey, 2000

STATE SURVEYS

		Location			
Site	Adopted a policy	In school buildings	On school grounds	In school buses	At off-campus events
Weighted Data					
Alabama	100.0	99.3	99.3	99.3	94.5
Alaska	98.1	100.0	99.3	95.4	96.1
Arkansas	99.7	99.7	99.7	100.0	99.1
California	98.8	100.0	100.0	99.1	98.0
Delaware	100.0	100.0	98.2	96.4	87.4
Hawaii	100.0	100.0	100.0	100.0	100.0
Idaho	99.6	100.0	100.0	100.0	99.0
Illinois*	98.7	99.7	99.7	98.6	97.1
Iowa	99.1	99.7	99.1	99.4	97.5
Maine	99.5	100.0	100.0	99.5	94.3
Massachusetts	99.3	100.0	99.4	99.3	94.4
Michigan	97.6	100.0	100.0	99.6	99.1
Minnesota	97.4	100.0	98.6	100.0	94.5
Missouri	100.0	99.7	99.4	99.7	96.0
Montana	99.1	100.0	99.2	100.0	97.6
Nebraska	96.1	99.1	98.8	97.6	96.6
New Hampshire	99.3	100.0	100.0	98.0	91.5
New Jersey	97.4	99.7	98.7	99.0	92.2
North Dakota	98.1	100.0	100.0	99.4	98.2
Ohio	99.7	100.0	100.0	100.0	99.7
Oklahoma	99.4	99.4	99.0	99.0	95.9
Pennsylvania*	99.3	100.0	100.0	99.7	96.2
Tennessee	99.6	99.6	99.6	99.6	97.1
Utah	100.0	100.0	99.4	100.0	97.8
Virginia	99.7	100.0	100.0	99.6	94.0
West Virginia	100.0	100.0	100.0	100.0	98.0
Unweighted Data					
Georgia	100.0	99.6	99.6	99.6	98.3
Indiana	99.2	100.0	100.0	100.0	98.4
Kentucky	96.8	100.0	98.5	100.0	84.7
Louisiana*	99.5	99.5	99.5	99.5	94.7
Maryland*	99.4	100.0	100.0	100.0	99.4
South Carolina	99.6	99.6	99.5	99.5	95.9
South Dakota	99.3	99.3	99.3	98.6	95.1
Texas*	99.1	100.0	100.0	100.0	99.7
State Median	**99.4**	**100.0**	**99.6**	**99.6**	**96.8**

(continued)

TABLE 16. Percentage of Schools With a Policy Prohibiting Cigarette Smoking by Students and, Among Those Schools, Percentage That Had a Policy Prohibiting Cigarette Smoking in Specific Locations, Selected U.S. Sites—School Health Education Profiles, Principals' Survey, 2000 *(continued)*

LOCAL SURVEYS

Site	Adopted a policy	Location			
		In school buildings	On school grounds	In school buses	At off-campus events
Weighted Data					
Chicago	92.5	99.6	98.1	98.5	97.2
Dallas	97.5	100.0	100.0	100.0	100.0
District of Columbia	100.0	100.0	97.3	100.0	97.5
Ft. Lauderdale	98.5	100.0	100.0	100.0	97.9
Los Angeles	98.0	100.0	100.0	100.0	100.0
Miami	96.7	100.0	100.0	100.0	92.4
New Orleans	100.0	100.0	100.0	100.0	91.3
Orange County	97.3	100.0	100.0	100.0	100.0
Palm Beach	100.0	100.0	100.0	100.0	100.0
Philadelphia	95.8	98.8	96.8	97.8	91.6
San Diego	100.0	97.7	97.7	97.7	97.7
San Francisco	97.0	100.0	100.0	100.0	100.0
Unweighted Data					
Houston	100.0	100.0	100.0	100.0	100.0
Local Median	**98.0**	**100.0**	**100.0**	**100.0**	**97.9**

* Survey did not include students from one of the state's large school districts.

TABLE 17. Percentage of Schools That Took Specific Actions When Students Were Caught Smoking Cigarettes,* Selected U.S. Sites—School Health Education Profiles, Principals' Survey, 2000

STATE SURVEYS

Site	Referred to school counselor	Referred to school administrator	Encouraged to participate in cessation program	Required to participate in cessation program	Placed in detention	Suspended from school	Informed parents or guardians
Weighted Data							
Alabama	43.4	98.2	34.1	14.0	54.8	74.1	98.6
Alaska	52.3	93.7	47.9	23.0	51.0	65.1	93.3
Arkansas	42.3	99.0	28.5	9.6	48.3	73.9	97.7
California	64.1	98.9	64.0	45.3	57.3	80.5	99.4
Delaware	66.9	96.3	52.4	20.4	52.6	75.8	100.0
Hawaii	52.5	100.0	66.6	19.7	59.7	86.1	100.0
Idaho	73.9	100.0	67.4	53.4	46.7	77.3	100.0
Illinois**	54.8	97.9	43.2	17.1	51.9	81.4	98.7
Iowa	64.7	97.7	54.4	19.6	39.5	65.3	98.3
Maine	81.1	100.0	73.1	41.8	34.7	85.2	99.0
Massachusetts	67.9	98.9	69.3	38.4	61.8	73.1	98.0
Michigan	60.0	97.5	59.6	31.1	37.3	85.0	98.0
Minnesota	65.4	97.5	66.9	37.1	43.2	73.8	97.2
Missouri	42.6	98.8	29.4	12.8	59.4	68.3	98.5
Montana	69.9	98.8	56.9	38.9	60.6	73.2	99.6
Nebraska	47.3	98.8	43.4	18.0	57.5	67.9	98.9
New Hampshire	73.3	98.7	64.9	33.6	33.0	87.6	95.5
New Jersey	76.4	97.6	58.4	30.0	62.7	76.2	95.4
North Dakota	65.5	98.8	42.3	18.1	58.5	64.0	100.0
Ohio	52.6	99.2	61.2	31.2	34.2	85.4	99.3
Oklahoma	49.5	98.1	33.0	13.5	63.1	71.6	97.5
Pennsylvania**	64.3	99.7	61.6	29.6	44.5	68.4	99.0
Tennessee	47.1	99.1	39.6	25.2	39.4	72.1	99.5
Utah	52.9	97.6	75.5	56.5	36.4	70.1	98.8
Virginia	59.2	99.2	57.5	37.4	44.3	88.0	98.4
West Virginia	78.2	100.0	61.9	56.8	57.5	83.2	99.2
Unweighted Data							
Georgia	43.8	99.6	40.2	12.0	39.1	66.5	99.5
Indiana	51.8	97.7	55.3	25.8	39.6	90.5	98.0
Kentucky	52.5	98.5	51.9	25.7	66.3	68.8	98.1
Louisiana**	51.3	98.6	36.4	14.6	47.2	86.9	98.6
Maryland**	61.3	100.0	67.8	57.7	40.9	89.9	100.0
South Carolina	60.2	100.0	39.1	21.6	46.0	87.9	98.6
South Dakota	63.6	96.5	40.3	15.8	59.4	56.8	98.6
Texas**	54.9	99.1	35.8	23.9	61.6	43.1	98.1
State Median	**59.6**	**98.8**	**54.9**	**25.4**	**49.7**	**74.0**	**98.6**

(continued)

TABLE 17. Percentage of Schools That Took Specific Actions When Students Were Caught Smoking Cigarettes,* Selected U.S. Sites—School Health Education Profiles, Principals' Survey, 2000 *(continued)*

LOCAL SURVEYS

Site	Referred to school counselor	Referred to school administrator	Encouraged to participate in cessation program	Required to participate in cessation program	Placed in detention	Suspended from school	Informed parents or guardian
Weighted Data							
Chicago	59.7	88.2	33.5	17.2	69.8	72.7	93.7
Dallas	34.8	95.0	37.1	24.7	87.1	64.5	95.0
District of Columbia	51.1	85.0	21.3	8.6	46.8	53.6	74.3
Ft. Lauderdale	62.5	98.5	59.3	29.4	52.5	76.5	98.5
Los Angeles	82.5	86.5	64.3	86.8	63.4	81.5	100.0
Miami	85.2	96.3	66.9	36.6	60.3	60.0	97.7
New Orleans	52.2	100.0	56.5	39.1	91.3	75.0	100.0
Orange County	79.4	97.2	76.5	44.1	54.3	77.1	97.1
Palm Beach	78.4	100.0	69.4	72.0	29.5	100.0	100.0
Philadelphia	63.5	95.5	47.8	15.0	74.0	79.0	95.5
San Diego	85.2	97.6	65.1	90.5	48.6	73.1	100.0
San Francisco	100.0	92.9	69.0	53.3	56.7	50.0	100.0
Unweighted Data							
Houston	71.9	97.1	63.6	30.3	78.8	90.9	97.1
Local Median	**71.9**	**96.3**	**63.6**	**36.6**	**60.3**	**75.0**	**97.7**

* Among schools with a policy prohibiting cigarette smoking by students.

** Survey did not include students from one of the state's large school districts.

TABLE 18. Percentage of Schools That Prohibited Tobacco Advertising in Specific Places, Through Sponsorship of School Events, and on Student Apparel, Selected U.S. Sites—School Health Education Profiles, Principals' Surveys 2000

STATE SURVEYS

Site	Prohibited advertising in school buildings, on school grounds, on school buses, and in school publications	Prohibited sponsorship of school events	Prohibited tobacco brand-name apparel
Weighted Data			
Alabama	92.5	88.1	95.3
Alaska	87.4	86.8	75.0
Arkansas	91.1	89.2	94.9
California	91.3	92.1	95.8
Delaware	92.6	85.0	63.9
Hawaii	96.9	96.9	84.7
Idaho	90.4	88.0	95.7
Illinois*	93.3	91.2	93.4
Iowa	91.6	91.5	94.9
Maine	93.5	91.1	88.4
Massachusetts	94.3	91.0	56.9
Michigan	90.1	88.5	87.7
Minnesota	94.0	90.5	87.2
Missouri	92.7	89.3	92.3
Montana	89.7	87.3	93.5
Nebraska	90.3	92.0	93.7
New Hampshire	93.3	84.8	84.8
New Jersey	93.6	89.2	59.8
North Dakota	89.2	89.0	92.7
Ohio	92.6	89.3	94.7
Oklahoma	89.7	89.9	96.9
Pennsylvania*	93.7	92.0	87.8
Tennessee	93.0	91.4	89.5
Utah	94.3	95.7	96.8
Virginia	91.5	91.3	86.4
West Virginia	94.5	93.0	89.5
Unweighted Data			
Georgia	91.6	90.2	92.0
Indiana	92.6	90.2	95.0
Kentucky	91.2	86.8	84.5
Louisiana*	92.0	86.2	95.3
Maryland*	93.4	91.5	89.7
South Carolina	92.5	89.1	86.0
South Dakota	87.5	91.0	93.8
Texas*	92.5	91.6	98.2
State Median	**92.5**	**90.2**	**92.1**

(continued)

TABLE 18. Percentage of Schools That Prohibited Tobacco Advertising in Specific Places, Through Sponsorship of School Events, and on Student Apparel, Selected U.S. Sites—School Health Education Profiles, Principals' Surveys 2000 *(continued)*

LOCAL SURVEYS

Site	Prohibited advertising in school buildings, on school grounds, on school buses, and in school publications	Prohibited sponsorship of school events	Prohibited tobacco brand-name apparel
Weighted Data			
Chicago	91.3	86.0	80.5
Dallas	90.4	86.0	85.8
District of Columbia	94.8	69.1	50.1
Ft. Lauderdale	97.0	96.4	82.9
Los Angeles	92.1	99.1	92.2
Miami	93.2	90.8	82.7
New Orleans	91.7	82.6	91.7
Orange County	81.1	83.8	86.5
Palm Beach	93.8	89.9	97.7
Philadelphia	87.3	90.7	39.8
San Diego	97.7	100.0	95.1
San Francisco	87.5	93.9	71.9
Unweighted Data			
Houston	97.1	94.1	97.1
Local Median	**92.1**	**90.7**	**85.8**

* Survey did not include students from one of the state's large school districts.

TABLE 19. Percentage of Schools That Implemented Safety and Security Measures, Selected U.S. Sites—School Health Education Profiles, Principals' Surveys, 2000

STATE SURVEYS

Site	Required visitors to report to main office	Maintained a closed campus	Used staff to monitor halls	Checked bags, desks, and lockers	Prohibited backpacks	Required school uniforms	Used metal detectors	Had uniformed police
Weighted Data								
Alabama	100.0	96.9	91.9	73.8	28.9	24.0	30.7	33.1
Alaska	84.6	33.7	67.9	26.5	9.5	1.6	1.4	6.5
Arkansas	100.0	93.6	91.6	63.2	10.0	2.8	23.9	32.5
California	99.7	84.9	88.2	36.4	2.6	16.8	9.8	45.9
Delaware	100.0	91.1	88.9	21.8	33.7	3.6	0.0	41.1
Hawaii	100.0	100.0	92.2	7.4	0.0	17.6	0.0	54.9
Idaho	97.1	53.2	88.6	48.5	18.0	0.0	0.5	43.8
Illinois*	99.0	79.4	79.6	46.1	36.5	4.0	5.9	24.0
Iowa	95.9	71.9	80.2	34.5	26.6	0.0	0.3	14.6
Maine	98.1	81.6	68.9	20.2	25.2	0.0	2.3	24.5
Massachusetts	98.1	89.7	83.3	24.6	26.1	5.1	2.3	30.2
Michigan	99.1	84.4	86.2	46.4	27.0	6.5	7.4	39.5
Minnesota	98.3	67.0	84.7	37.9	21.3	0.7	1.0	34.8
Missouri	100.0	95.9	87.1	61.7	23.1	1.5	7.4	35.0
Montana	98.4	38.0	83.9	46.8	14.4	0.7	1.3	12.0
Nebraska	95.4	65.1	84.4	41.5	17.3	0.8	0.9	12.3
New Hampshire	100.0	77.4	71.3	22.3	20.9	0.0	1.3	25.6
New Jersey	100.0	84.1	87.2	37.1	24.0	7.3	2.8	39.4
North Dakota	93.3	53.2	87.4	34.4	13.8	1.9	0.0	7.9
Ohio	99.6	90.0	81.3	50.5	47.8	3.1	6.9	26.2
Oklahoma	98.4	73.6	92.6	68.3	11.4	2.5	13.7	21.5
Pennsylvania*	100.0	95.6	86.3	42.2	46.0	3.3	11.4	29.5
Tennessee	100.0	97.0	91.6	71.8	18.4	5.9	24.4	44.8
Utah	98.9	55.3	86.2	44.0	10.1	6.6	1.7	51.4
Virginia	100.0	93.4	93.2	44.4	19.1	4.4	25.0	69.2
West Virginia	100.0	96.5	92.6	70.8	54.1	0.0	12.1	21.5
Unweighted Data								
Georgia	100.0	97.8	92.4	67.4	23.2	1.3	36.0	65.9
Indiana	99.6	93.8	82.1	47.2	52.7	0.8	9.4	28.1
Kentucky	100.0	94.6	93.5	62.8	39.1	10.8	20.0	42.4
Louisiana*	99.5	98.1	90.1	77.5	13.3	53.3	49.3	31.9
Maryland*	100.0	95.2	86.7	37.0	54.2	2.4	1.2	36.7
South Carolina	100.0	95.2	93.8	67.7	12.7	6.2	34.7	83.3
South Dakota	93.8	52.8	77.8	45.1	16.0	3.5	0.0	12.5
Texas*	99.4	81.2	92.2	64.0	13.9	10.5	12.0	52.2
State Median	**99.6**	**87.3**	**87.1**	**45.6**	**21.1**	**3.2**	**6.4**	**32.8**

(continued)

TABLE 19. Percentage of Schools That Implemented Safety and Security Measures, Selected U.S. Sites—School Health Education Profiles, Principals' Surveys, 2000 *(continued)*

LOCAL SURVEYS

Site	Required visitors to report to main office	Maintained a closed campus	Used staff to monitor halls	Checked bags, desks, and lockers	Prohibited backpacks	Required school uniforms	Used metal detectors	Had uniformed police
Weighted Data								
Chicago	100.0	95.9	94.5	71.9	32.7	76.1	81.8	92.9
Dallas	97.8	100.0	100.0	92.9	12.0	4.9	92.7	92.6
District of Columbia	100.0	92.3	97.6	89.9	36.3	31.2	92.6	94.5
Ft. Lauderdale	100.0	87.3	92.2	19.5	2.1	20.2	10.2	100.0
Los Angeles	100.0	94.4	97.8	90.8	1.9	45.2	93.3	88.7
Miami	98.8	80.5	87.0	59.3	7.9	35.7	49.9	90.7
New Orleans	100.0	95.7	95.8	83.3	8.3	87.5	91.3	95.8
Orange County	100.0	100.0	100.0	37.8	5.4	0.0	8.1	94.6
Palm Beach	100.0	100.0	100.0	43.4	3.1	12.4	4.7	100.0
Philadelphia	100.0	97.9	94.7	46.8	12.1	2.1	35.7	81.4
San Diego	100.0	100.0	95.3	12.5	2.4	31.9	2.3	63.1
San Francisco	100.0	78.8	87.9	6.1	0.0	24.2	0.0	56.3
Unweighted Data								
Houston	100.0	91.2	100.0	64.7	45.5	79.4	23.5	91.2
Local Median	**100.0**	**95.7**	**95.8**	**59.3**	**7.9**	**31.2**	**35.7**	**92.6**

* Survey did not include students from one of the state's large school districts.