

OMB No.: 0920-0340

Expiration Date: 1/31/95

1994 School Health Policies and Programs Study (SHPPS)

# School Health Education

## Classroom Teacher Interview

Public reporting burden for this collection of information is estimated to average 1 hour (or 60 minutes) per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to PHS Reports Clearance Officer; ATTN: PRA; Hubert H. Humphrey Bldg., Rm. 721-B; 200 Independence Ave., SW; Washington, DC 20201, and to the Office of Management and Budget; Paperwork Reduction Project (0920-0340); Washington, DC 20503

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## I. COURSE ORGANIZATION AND CONTENT

Let me define some terms so that we'll be talking about the same things. When I say "course," I mean an entire set of classes that a group of students attend throughout a school term. When I use the term "class section," I mean one group of students that meets for a particular course. Do you have any questions about how I'll be using these terms? **IF NEEDED, REVIEW DEFINITIONS.**

1. **HANDCARD #1.** Look at Handcard #1. The last time you taught (**READ NAME OF COURSE**), was the course mainly about health education topics, such as these, or about another subject? **CHECK THE ONE BEST ANSWER. IF ANOTHER SUBJECT (BOX 2) IS SELECTED, ASK:** What subject was your course about? **RECORD RESPONSE.**

- 1  Health education topics
- 2  Another subject (**SPECIFY**): \_\_\_\_\_

2. Mainly what grade were the students who took your course? **CHECK ALL THAT APPLY (1-7). RECORD (8) OTHER.**

- 1  6th
- 2  7th
- 3  8th
- 4  9th
- 5  10th
- 6  11th
- 7  12th
- 8  Other (**SPECIFY**): \_\_\_\_\_

3. How many weeks did the course last? **RECORD NUMBER OF WEEKS.**

Weeks: \_\_\_\_\_

4. How many times per week did the course meet? **CHECK THE ONE BEST ANSWER (1-6).**

- 1  One day
- 2  Two days
- 3  Two days one week/three days the next (alternating)
- 4  Three days
- 5  Four days
- 6  Five days

5. How many minutes were in one class period? **RECORD NUMBER OF MINUTES.**

Minutes: \_\_\_\_\_

6. Did your course include all boys or all girls, OR did you teach boys and girls together in coed classes?  
**CHECK ALL THAT APPLY (1-3), SINCE RESPONDENT MAY HAVE TAUGHT MORE THAN ONE CLASS SECTION.**

- 1  All boys
- 2  All girls
- 3  Coed

7. The last time you taught your course, did you assess your students' needs and interests at any time, through methods such as class discussions, written questionnaires, or a suggestion or question box? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-4). RECORD (5) OTHER.**

- 1  No
- 2  Discussion with class
- 3  Written questionnaire
- 4  Suggestion or question box
- 5  Other (**SPECIFY**):

8. **HANDCARD #2.** Look at Handcard #2. Did you use written curricular materials such as these for your course? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, SAY:** Please tell me the titles, if applicable, and the approximate dates they were developed. **(NOTE: MATERIALS SUCH AS THOSE THAT ARE TEACHER-DEVELOPED MAY NOT HAVE A FORMAL TITLE.) CHECK ALL THAT APPLY (2-9). RECORD THE TITLES AND DATES FOR EACH. IF TEACHER DID NOT BRING WRITTEN MATERIALS FOR INTERVIEW, SAY:** If you don't have the materials with you, just tell me the titles and dates you can remember.

1  No written curricular materials

2  Student textbook:  
Date:

3  Teacher's Guide for student textbook:  
Date:

4  State curriculum/guidelines/framework:  
Date:

5  District curriculum/guidelines/framework:  
Date:

6  School curriculum/guidelines/framework  
Date:

7  Other state, district, or school materials:  
Date:

8  Teacher-developed lesson plans or other materials:  
Date:

9  Other commercial materials:  
Date:



10. In your course, did you use teaching materials from community agencies or voluntary organizations, such as the American Cancer Society or the American Heart Association? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK: Whose materials did you use? DO NOT READ LIST. CIRCLE ALL THAT APPLY. RECORD (7) OTHER.**

- 1  No
- 2  American Cancer Society
- 3  American Heart Association
- 4  American Lung Association
- 5  American Red Cross
- 6  Planned Parenthood
- 7  Other (**SPECIFY**):

11. Did you use any audiovisual (AV) materials to teach your course? **IF NEEDED, SAY:** Audiovisual materials include videotapes, films, slides, overheads, filmstrips, and cassette tapes. **IF NO, CHECK BOX 1, AND SKIP TO Q.13. IF YES, ASK:** What's the subject and copyright date of your newest AV material? **CHECK BOXES 2 AND 3, AND RECORD SUBJECT AND COPYRIGHT DATE.**

- 1  No AV materials used--**SKIP TO Q.13**
- 2  Subject: \_\_\_\_\_
- 3  Copyright date: \_\_\_\_\_

12. **IF RESPONDENT DID NOT LIST HIV PREVENTION (TOPIC #15) IN Q.9, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF HIV PREVENTION WAS LISTED IN Q.9 AND NOT NAMED IN Q.11, ASK:** What's the subject and copyright date of your newest AV material for teaching about HIV/AIDS? **CHECK BOX 2 IF RESPONDENT DOES NOT HAVE HIV/AIDS AV MATERIALS. CHECK BOXES 3-4, AND WRITE IN SUBJECT AND COPYRIGHT DATE IF RESPONDENT DOES HAVE HIV/AIDS AV MATERIALS.**

- 1  Did not teach HIV/AIDS
- 2  No HIV/AIDS AV materials
- 3  Subject: \_\_\_\_\_
- 4  Copyright date: \_\_\_\_\_

13. **HANDCARD #3.** Did you teach any students with cognitive disabilities? By cognitive disabilities, I mean students who are learning disabled, developmentally disabled, or behavior disordered. **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** Looking at Handcard #3, did you modify your teaching or expectations in any of these ways? **CHECK ALL THAT APPLY (2-14).** **THEN ASK:** Did you use any other ways that aren't listed? **RECORD (15) OTHER.**

- 1  No students with special needs
- 2  Preferred seating
- 3  Assigned note takers for classwork
- 4  Assigned readers for classwork
- 5  Gave untimed tests or allowed extra time
- 6  Had someone read tests to students
- 7  Gave modified tests
- 8  Gave modified assignments
- 9  Gave hard copies of overheads
- 10  Gave summaries of lectures
- 11  Used more "hands-on" activities
- 12  Gave vocabulary in advance
- 13  Teamed with academically strong students
- 14  Modified instructional content
- 15  Other (**SPECIFY**):

14. **HANDCARD #4.** In your course, did you use any activities to highlight different cultural values? **IF NO ACTIVITIES, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** Looking at Handcard #4, did you use any of these types of activities? **CHECK ALL THAT APPLY (2-8).** **THEN ASK:** Did you use any other activities that aren't listed? **RECORD (9) OTHER.**

- 1  No activities
- 2  Used books about different cultures
- 3  Used posters about different cultures
- 4  Discussed customs of different cultures
- 5  Celebrated holidays or awareness days of different cultures
- 6  Displayed flags or other emblems from different cultures
- 7  Asked students to share their own cultural experiences related to class topics
- 8  Taught about the importance of respecting cultural differences
- 9  Other (**SPECIFY**):

Now I'm going to show you a series of eight lists of health education topics.

15. **SHOW HANDCARD #5.** Please take a moment to review Handcard #5. Did you teach anything on this list? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-9). THEN ASK:** Did you cover anything else about accidents and unintentional injuries that's not listed? **RECORD (10) OTHER.**

- 1  None of these
- 2  Always wearing bicycle helmets
- 3  Always wearing motorcycle helmets
- 4  Always wearing seatbelts
- 5  Always wearing protective equipment for roller blades and skateboards, such as knee pads, elbow pads, or helmets
- 6  Risks associated with driving under the influence of alcohol or other drugs
- 7  Statistics on adolescent deaths and injuries from accidents and unintentional injuries
- 8  Group attitudes (social norms) toward risk behaviors related to accidents and unintentional injuries.
- 9  Actual amount (true prevalence) of risk behavior related to accidents and unintentional injuries among adolescents and adults
- 10  Other (**SPECIFY**):

16. **HANDCARD #6.** Please take a moment to review Handcard #6. Did you teach anything on this list? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-10). THEN ASK:** Did you cover anything else about intentional injuries and violence that's not listed? **RECORD (11) OTHER.**

- 1  None of these
- 2  How to settle conflicts without physical fighting
- 3  How to handle stress in healthy ways
- 4  Risks associated with physical fighting
- 5  Risks associated with carrying and using weapons
- 6  Risks associated with gang activities
- 7  What to do if someone is thinking about suicide
- 8  Statistics on adolescent deaths and injuries from violence and suicide
- 9  Group attitudes (social norms) toward risk behaviors related to intentional injuries and violence
- 10  Actual amount (true prevalence) of risk behavior related to intentional injuries and violence among adolescents and adults
- 11  Other (**SPECIFY**):

17. **HANDCARD #7.** Please take a moment to review Handcard #7. Did you teach anything on this list?  
**IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-14). THEN ASK:** Did you cover anything else about tobacco use that's not listed? **RECORD (15) OTHER.**

- 1  None of these
- 2  Short-term risks associated with cigarette smoking (yellow teeth/bad breath, effects of tobacco on the body, effects on athletic performance)
- 3  Long-term risks associated with cigarette smoking (heart disease, lung cancer, emphysema, premature wrinkling)
- 4  Risks associated with sidestream/second-hand smoke (lung cancer, other respiratory diseases)
- 5  Short-term risks associated with chewing tobacco or snuff (yellow teeth/bad breath, mouth/tongue sores)
- 6  Long-term risks associated with chewing tobacco or snuff (oral cancer, tooth loss)
- 7  Statistics on death and disability associated with tobacco use
- 8  Group attitudes (social norms) toward risk behaviors related to tobacco use
- 9  Actual amount (true prevalence) of risk behavior related to tobacco use among adolescents and adults
- 10  School policies about tobacco use
- 11  Social influences on tobacco use (wanting to be part of a group, feeling like an adult, advertising, media)
- 12  Healthy alternatives to smoking
- 13  Effects of tobacco-related disease on health care costs
- 14  Advocacy skills and social action concerning tobacco use
- 15  Other (**SPECIFY**):

18. **HANDCARD #8.** Please take a moment to review Handcard #8. Did you teach anything on this list? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-19). THEN ASK:** Did you cover anything else about alcohol and other drug use that's not listed? **RECORD (20) OTHER.**

- 1  None of these
- 2  Short-term risks associated with alcohol use (DUI injuries, risks associated with heavy/binge drinking)
- 3  Long-term risks associated with alcohol use, such as problems associated with addiction (health, family, career), alcohol-related diseases (cirrhosis, other liver damage), effects of having a DUI arrest record
- 4  Drink equivalents and blood alcohol content
- 5  Short-term risks associated with other drug use (marijuana, cocaine, crack, and other illegal drugs, such as LSD, PCP, ecstasy, mushrooms, speed, ice, heroin, or pills)
- 6  Long-term risks associated with other drug use
- 7  Classifications of drugs and how they work in the body
- 8  Identification of drugs
- 9  OTC and prescription drugs
- 10  Risks associated with illegal steroid use
- 11  Effects of AOD on the mind and body
- 12  Effects of AOD on decision-making
- 13  Healthy alternatives to AOD use
- 14  Statistics on death and disability from AOD use
- 15  Group attitudes (social norms) toward risk behaviors related to AOD use
- 16  Actual amount (true prevalence) of risk behavior related to AOD use among adolescents and adults
- 17  School policies on AOD use
- 18  Social influences on AOD use
- 19  Potential legal consequences of AOD use
- 20  Other (**SPECIFY**):

19. **HANDCARD #9.** Please take a moment to review Handcard #9. Did you teach anything on this list? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-16). THEN ASK:** Did you cover anything else about sexual behavior that's not listed? **RECORD (17) OTHER.**

- 1  None of these
- 2  Parts and functions of the reproductive system
- 3  Reasons for choosing sexual abstinence
- 4  Contraceptive methods to prevent pregnancy
- 5  How to prevent sexually transmitted diseases (STD)
- 6  Signs and symptoms of STD
- 7  How and where to get STD testing
- 8  Social influences on sexual behavior
- 9  Dating and relationships
- 10  Marriage
- 11  Risks associated with having multiple sexual partners
- 12  Perception of risk for STD and pregnancy
- 13  Statistics on adolescent pregnancies and STD rates
- 14  Group attitudes (social norms) toward risk behaviors related to sex
- 15  Actual amount (true prevalence) of risk behavior related to sex among adolescents and adults
- 16  Sexual orientation
- 17  Other (**SPECIFY**):

20. **HANDCARD #10.** Please take a moment to review Handcard #10. Did you teach anything on this list? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-18). THEN ASK:** Did you cover anything else about HIV/AIDS that's not listed? **RECORD (19) OTHER.**

- 1  None of these
- 2  Basic facts about HIV/AIDS
- 3  How HIV is and is not transmitted
- 4  How HIV affects the immune system
- 5  Disease progression of AIDS
- 6  Needle-sharing behaviors that transmit HIV
- 7  Sexual behaviors that transmit HIV
- 8  Reasons for choosing sexual abstinence
- 9  Correct use of condoms
- 10  Condom efficacy/how well condoms work
- 11  Influence of alcohol and other drugs on HIV risk behaviors
- 12  Statistics on adolescent death and disability related to HIV/AIDS
- 13  Group attitudes (social norms) toward risk behaviors related to HIV
- 14  Actual amount (true prevalence) of risk behavior related to HIV among adolescents and adults
- 15  Information on HIV testing and counseling
- 16  Compassion and support for persons living with HIV/AIDS
- 17  Perceptions of risk for HIV/AIDS
- 18  Societal impact of HIV/AIDS
- 19  Other (**SPECIFY**):

21. **HANDCARD #11.** Please take a moment to review Handcard #11. Did you teach anything on this list? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-20). THEN ASK:** Did you cover anything else about nutrition and dietary behavior that's not listed? **RECORD (21) OTHER.**

- 1  None of these
- 2  Nutrients and foods where they are found
- 3  Vitamin- and mineral-related disorders
- 4  Four food groups
- 5  Food Guide Pyramid
- 6  Five a Day (fruits and vegetables)
- 7  Dietary Guidelines for Americans
- 8  Choosing healthy meals and snacks
- 9  Label reading
- 10  Preparing healthy meals and snacks
- 11  Healthy weight management
- 12  Myths associated with diet supplements
- 13  Risks associated with crash diets/low-calorie diets
- 14  Risks associated with using diet pills
- 15  Risks associated with purging (vomiting, laxatives) for weight loss
- 16  Signs and symptoms of eating disorders (anorexia nervosa, bulimia nervosa)
- 17  What to do if someone has an eating disorder
- 18  Overeating as a response to stress
- 19  Social pressures for thinness, especially for female students
- 20  Statistics on death and disability associated with dietary causes
- 21  **Other (SPECIFY):**

22. **HANDCARD #12.** Please take a moment to review Handcard #12. Did you teach anything on this list? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-16). THEN ASK:** Did you cover anything else about physical activity that's not listed? **RECORD (17) OTHER.**

- 1  None of these
- 2  Benefits of regular participation in aerobic activity
- 3  Benefits of regular participation in stretching exercises
- 4  Benefits of regular participation in strengthening exercises
- 5  Overcoming barriers to regular physical activity
- 6  Planning a personal fitness program
- 7  Healthy weight management
- 8  Fitness fads/gimmicks
- 9  Reducing risk for certain diseases, such as cardiovascular disease or osteoporosis
- 10  How to measure one's own fitness
- 11  Statistics on death and disability associated with sedentary lifestyle
- 12  Community opportunities for physical activity
- 13  Preventing injury during physical activity
- 14  Physiological benefits of exercise
- 15  Psychological benefits of exercise
- 16  Social benefits of exercise
- 17  **Other (SPECIFY):**

23. Did you teach about immunizations to protect against vaccine-preventable diseases, such as polio, whooping cough, rubella, and hepatitis B? **CHECK THE ONE BEST ANSWER.**

- 1  No
- 2  Yes

**II.SKILLS AND METHODS**

24.**HANDCARD #13.** Look at Handcard #13. Now, I'd like to ask about skills for healthy behaviors. This list includes six major types of skills. For each type of skill, please tell me whether you taught about these skills. **CHECK COLUMN 1 OR 2 FOR EACH SKILL.**

**THEN ONLY FOR THE SKILLS TEACHER TAUGHT, ASK:** Did your students practice the skills as part of your course? By practice, I mean that your students participated in activities where the skills could be used, in or out of class. **CHECK COLUMN 3 FOR ALL THAT APPLY. THEN ASK:** Did you teach about or have students practice other health-related skills that aren't listed? **RECORD (7) OTHER, AND CHECK COLUMNS 2 AND/OR 3.**

**SKILLS**

<b>SKILLS</b>	<b>(1) Teacher did not teach skill</b>	<b>(2) Teacher taught skill</b>	<b>(3) Students practiced skill</b>
1Communication			
2Decision-making			
3Goal-setting			
4Non-violent conflict resolution			
5Resisting social pressures for unhealthy behaviors			
6Stress management			
7Other ( <b>SPECIFY</b> ):			

25. **HANDCARD #14.** Look at Handcard #14. Now I'd like to ask about the teaching methods you used to teach health education. Using the categories of often, sometimes, rarely, or never, written at the bottom of the handcard, how often would you say you used each of these methods the last time you taught your course? **WORKING ACROSS THE GRID FOR EACH METHOD, ASK:** How often did you use (**READ METHOD**) in your course? **CHECK ONE COLUMN (1-4) TO SHOW HOW OFTEN RESPONDENT USED EACH METHOD (1-15). THEN ASK:** Did you use other methods that aren't listed? **RECORD (16) OTHER, AND CHECK APPROPRIATE COLUMNS (1-4).**

<b>TEACHING METHOD</b>	<b>(1) Often</b>	<b>(2) Sometimes</b>	<b>(3) Rarely</b>	<b>(4) Never</b>
1 Class (seat) work				
2 Lecture (teacher lecturing to class)				
3 Large group discussions				
4 Small group discussions				
5 Games				
6 Simulations				
7 Cooperative activities				
8 Arts (literature, stories)				
9 Role play				
10 Physical practice				
11 AV materials				
12 Interactive video				
13 Computer-assisted instruction				
14 Contracts for behavior change				
15 Contests for behavior change				
16 Other ( <b>SPECIFY</b> ):				

**26.HANDCARD #15.** Look at Handcard #15. This is a list of health-related pledges that students sometimes make. In your course, did your students make any written or verbal pledges like these? **IF NO, CHECK BOX AT TOP OF GRID, AND SKIP TO Q.28. IF YES, CHECK ALL THAT APPLY (1-13) IN COLUMN 1 AND/OR COLUMN 2. THEN ASK:** Did your students make any other health-related pledges that aren't listed? **RECORD (14) OTHER, AND CHECK COLUMNS 1 AND/OR 2.**

**No pledges--SKIP TO Q.28**

<b>PLEDGE</b>	<b>Written</b>	<b>Verbal</b>
1 Not to use alcohol or drugs during adolescence		
2 Not to use alcohol or drugs at a particular time, such as prom night		
3 Not to drink and drive or ride with a drinking driver		
4 Not to use tobacco		
5 Not to use weapons		
6 To settle conflicts without fighting		
7 To abstain from sexual intercourse during adolescence		
8 To practice safer sex		
9 To practice healthful nutrition		
10 To exercise regularly		
11 To always wear a seatbelt		
12 To always wear a helmet while biking		
13 To support others in their decisions to practice healthful behaviors		
14 Other ( <b>SPECIFY</b> ):		

27. Did students do anything in your class to reinforce their pledges, such as discussing their progress or designing a partner or buddy system? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK ALL THAT APPLY (2-3). THEN ASK:** Did your students do any other things in your class to reinforce their pledges that aren't listed? **RECORD (4) OTHER.**

- 1  No reinforcement in class
- 2  Discussed their progress or adherence to their pledges
- 3  Designed a partner or buddy system to help support each other
- 4  Other (**SPECIFY**):

28. **HANDCARD #16.** Look at Handcard #16. Did you bring in adults such as these as guest speakers in your course? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** What types of adult guest speakers did you bring in? **CHECK ALL THAT APPLY (2-11). THEN ASK:** Did you use any other types of adult guest speakers that aren't listed? **RECORD (12) OTHER.**

- 1  None of these
- 2  Law enforcement official
- 3  Athlete
- 4  Person living with HIV/AIDS
- 5  Recovering AOD addict
- 6  Victim of drunk driving
- 7  Former drunk driver
- 8  Family planning representative
- 9  Minister/clergy
- 10  Food service personnel
- 11  Health services personnel
- 12  Other (**SPECIFY**):

29. Did you bring in youth, the same age or older than your students, as guest speakers or to conduct health-related activities in your course? **CHECK THE ONE BEST ANSWER. IF NO, SKIP TO Q.31.**

- 1  No--**SKIP TO Q.31**
- 2  Yes

30. Were any of the youth specifically trained to be peer educators by your school or by some other group or agency? **CHECK THE ONE BEST ANSWER (1-3).**

- 1  No

- 2  Yes
- 3  Don't know

### III. STUDENT ASSESSMENT AND ASSIGNMENTS

31. **HANDCARD #17.** Now I'd like to ask about your students' grades and assignments. Did students receive a grade in your health education course? **IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK:** Looking at Handcard #17, did you use any of the criteria on this list for grading? **CHECK ALL THAT APPLY (2-7). THEN ASK:** Did you use any other criteria for grading that aren't listed? **RECORD (8) OTHER.**

- 1  No grade
- 2  Attendance
- 3  Participation
- 4  Attitude
- 5  Skills
- 6  Homework assignments
- 7  Written tests
- 8  Other (**SPECIFY**):

32. **HANDCARD #18.** Look at Handcard #18. As part of your course, did you give assignments to students to participate in health-related community activities, such as these? **IF NO, CHECK BOX 1, AND GO TO NEXT QUESTION. IF YES, ASK:** Which of these activities did you assign to students? **CHECK ALL THAT APPLY (2-8). THEN ASK:** Did you assign any other health-related community activities that aren't listed? **RECORD (9) OTHER.**

- 1  None of these
- 2  Perform voluntary work at a health department or other health-related community organization
  - 3  Participate in a community-based health fair
  - 4  Conduct community member surveys
  - 5  Gather information about a school or community health service (e.g., screenings, clinic services)
  - 6  Use a school or community health service (e.g., a hotline, a clinic)
  - 7  Visit a pharmacy to compare prices on health products
  - 8  Identify potential injury sites at school or in the community
  - 9  Other (**SPECIFY**):

33.**HANDCARD #19.** Look at Handcard #19. As part of your course, did you give assignments to students to participate in health-related activities such as these at home or with family members? **IF NO, CHECK BOX 1 AND GO TO NEXT QUESTION. IF YES, ASK:** Which of these activities did you assign to students? **CHECK ALL THAT APPLY (2-5). THEN ASK:** Did you assign any other health-related activities to be done at home or with family members? **RECORD (6) OTHER.**

- 1  None of these
- 2  Conduct health survey of family members
- 3  Share health information with family members
- 4  Count medications in family medicine chest
- 5  Identify products or hazards that pose a potential health threat
- 6  Other (**SPECIFY**):

**IV.PARENTAL AND COMMUNITY SUPPORT**

34.**HANDCARD #1.** Next, I'd like to ask about any response or reaction to your health education course you've had from parents of students in this school OR other community members. Look at Handcard #1 again. Please tell me the topics by number, if any, on which you increased or expanded your coverage because of parental or other community feedback. **IF NO TOPICS, CHECK THE "NO TOPICS" BOX ABOVE THE GRID. IF YES, RECORD TOPIC NUMBERS FROM HANDCARD #1 IN COLUMN 1. FOR EACH TOPIC, ASK:** Was the feedback on this topic from parents of students in your school, from other community members, or both? **CHECK THE PARENT AND COMMUNITY COLUMNS (2-3) THAT APPLY.**

No topics

(1) TOPIC NUMBER	(2) Parent feedback	(3) Community feedback

35. **HANDCARD #1.** Still looking at Handcard #1, please tell me the topic numbers, if any, on which you reduced or restricted your coverage because of parental or other community feedback. **IF NO TOPICS, CHECK THE "NO TOPICS" BOX ABOVE THE GRID. IF YES, RECORD TOPIC NUMBERS FROM HANDCARD #1 IN COLUMN 1. FOR EACH TOPIC, ASK:** Was the feedback on this topic from parents of students in your school, from other community members, or both? **CHECK THE PARENT AND COMMUNITY COLUMNS (2-3) THAT APPLY.**

No topics

(1) TOPIC NUMBER	(2) Parent feedback	(3) Community feedback

**V.IMPROVING SCHOOL HEALTH EDUCATION**

36. What would you like to DO, if anything, in health education that you have NOT been able to do? **IF NOTHING, CHECK BOX 1, AND SKIP TO Q.38. IF WOULD LIKE TO DO, CHECK BOX 2, AND RECORD RESPONSE.**

- 1  Nothing--**SKIP TO Q.38 (Section VI)**
- 2  Would like to do (**SPECIFY**):

37. What needs to happen so that you can do these things? **RECORD RESPONSE.**



## VI. PROFESSIONAL PREPARATION

To end our interview, I'd like to ask you about your own professional background.

38. How many years, counting this year as a full year, have you been teaching health education?  
**RECORD NUMBER OF YEARS.**

Years: \_\_\_\_\_

39. How many years, counting this year as a full year, have you been teaching health education in this school? **RECORD NUMBER OF YEARS.**

Years: \_\_\_\_\_

40. Do you currently teach health education in any other schools? **CHECK THE ONE BEST ANSWER. IF YES, ASK: How many other schools? RECORD NUMBER OF SCHOOLS FOR (2) YES.**

1  No

2  Yes--**NUMBER OF OTHER SCHOOLS:** \_\_\_\_\_

41. I'd like to ask about your education background and certification or endorsement. **WORK ACROSS COLUMNS 1-4 AT THE TOP OF THE GRID. ASK ABOUT EACH TYPE OF DEGREE OR CERTIFICATION/ENDORSEMENT ONE AT A TIME.** **ASK:** Do you have (a college major, a college minor, a graduate degree or 30 graduate credits, state education agency certification or endorsement)? **IF NO, CHECK "NO" OR "NOT AVAILABLE" IN CORRESPONDING COLUMNS. IF YES, ASK:** In what area(s)? **DO NOT READ LIST. CHECK ALL THAT APPLY IN EACH COLUMN. RECORD OTHER, AND CHECK CORRESPONDING COLUMNS.**

<b>DEGREE OR CERTIFICATION</b>	<b>(1) College major</b>	<b>(2) College minor</b>	<b>(3) Graduate degree or 30 graduate credits</b>	<b>(4) SEA certification or endorsement</b>
	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No <input type="checkbox"/> Not available
Health education <u>AND</u> physical education				
Health education				
Physical education				
Exercise science				
Biology or other science				
Kinesiology				
Recreation				
Social studies				
Public health				
Administration				
Nursing				
Home economics				
Nutrition				
Counseling				
Other <b>(SPECIFY):</b>				

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42. **DO NOT ASK THIS QUESTION IF RESPONDENT HAS NO SEA CERTIFICATION/ENDORSEMENT (Q.41, COLUMN 4). GO ON TO NEXT QUESTION. OTHERWISE, ASK:** What levels and grades are you certified or endorsed to teach? **DO NOT READ LIST. SELECT THE ONE BEST ANSWER (1-3). RECORD (4) OTHER.**

- 1  K-12
- 2  Elementary school (SPECIFY GRADES):
- 3  Secondary school (SPECIFY GRADES):
- 4  Other (SPECIFY):

43. **HANDCARD #1.** Look at Handcard #1 again. During the past two years, have you received four or more hours (at least a half-day) of in-service training on any of these topics? **DO NOT READ LIST. IF NO, CHECK "NO" IN COLUMN 1 IN GRID. OTHERWISE, CHECK COLUMN 1 FOR ALL TOPICS THAT APPLY (2-23). NEXT, ASK:** Which of these topics, if any, would you select as your top three priorities to receive in-service training? These could be different topics or some of the same ones you selected before. **IF NO TOPICS, CHECK "NO" IN COLUMN 2 IN GRID. OTHERWISE, CHECK COLUMN 2 FOR ALL TOPICS THAT APPLY (2-23). THEN ASK:** Are there other topics on which you've received training during the past two years or would like to receive in-service training? **IF YES, RECORD (24) OTHER, AND CHECK COLUMNS 1 AND/OR 2.**

TOPIC	(1) Received training	(2) Would like training
(↓ Numbered to match handcard)	<input type="checkbox"/> No	<input type="checkbox"/> No
2 Alcohol and other drug use prevention		
3 Community health		
4 Conflict resolution/Violence prevention		
5 Consumer health		
6 C.P.R.		
7 Death and dying		
8 Dental and oral health		
9 Dietary behaviors and nutrition		
10 Disease prevention and control		

<b>TOPIC</b>	<b>(1) Received training</b>	<b>(2) Would like training</b>
11 Emotional and mental health		
12 Environmental health		
13 First aid		
14 Growth and development		
15 HIV prevention		
16 Human sexuality		
17 Injury prevention and safety		
18 Personal health		
19 Physical activity and fitness		
20 Pregnancy prevention		
21 Sexually transmitted disease (STD) prevention		
22 Suicide prevention		
23 Tobacco use prevention		
24 Other ( <b>SPECIFY TOPIC</b> ):		

44. To end our interview, I'd like your opinion about teaching school health education today. Would you recommend it to teachers starting out? Why or why not? **RECORD RESPONSE.**

**AT END OF INTERVIEW, SAY:** Thank you very much for your time talking with me! Your answers will really help us get a feel for what schools are doing and what they need!

## HANDCARD #1

### HEALTH EDUCATION TOPICS

- 1 None of these
- 2 Alcohol and other drug use prevention
- 3 Community health
- 4 Conflict resolution/Violence prevention
- 5 Consumer health
- 6 C.P.R.
- 7 Death and dying
- 8 Dental and oral health
- 9 Dietary behaviors and nutrition
- 10 Disease prevention and control
- 11 Emotional and mental health
- 12 Environmental health
- 13 First aid
- 14 Growth and development
- 15 HIV prevention
- 16 Human sexuality
- 17 Injury prevention and safety
- 18 Personal health
- 19 Physical activity and fitness
- 20 Pregnancy prevention
- 21 Sexually transmitted disease (STD) prevention
- 22 Suicide prevention
- 23 Tobacco use prevention

## HANDCARD #2

### WRITTEN HEALTH EDUCATION MATERIALS

- 1 None of these
- 2 Student textbook
- 3 Teacher's Guide for student textbook
- 4 State curriculum/guidelines/framework
- 5 District curriculum/guidelines/framework
- 6 School curriculum/guidelines/framework
- 7 Other state, district, or school materials
- 8 Teacher-developed lesson plans or other materials
- 9 Other commercial materials

**HANDCARD #3**  
**MODIFICATIONS FOR STUDENTS**  
**WITH COGNITIVE DISABILITIES**

- 1 No students with special needs
- 2 Preferred seating
- 3 Assigned note takers for classwork
- 4 Assigned readers for classwork
- 5 Gave untimed tests or allowed extra time
- 6 Had someone read tests to students
- 7 Gave modified tests
- 8 Gave modified assignments
- 9 Gave hard copies of overheads
- 10 Gave summaries of lectures
- 11 Used more "hands-on" activities
- 12 Gave vocabulary in advance
- 13 Teamed with academically strong students

## 14 Modified instructional content

## HANDCARD #4

### HIGHLIGHTING CULTURAL VALUES

- 1 None of these
- 2 Used books about different cultures
- 3 Used posters about different cultures
- 4 Discussed customs of different cultures
- 5 Celebrated holidays or awareness days of different cultures
- 6 Displayed flags or other emblems from different cultures
- 7 Asked students to share their own cultural experiences related to class topics
- 8 Taught about the importance of respecting cultural differences

## HANDCARD #5

### ACCIDENTS AND UNINTENTIONAL INJURIES

- 1 None of these
- 2 Always wearing bicycle helmets
- 3 Always wearing motorcycle helmets
- 4 Always wearing seatbelts
- 5 Always wearing protective equipment for roller blades and skateboards, such as knee pads, elbow pads, or helmets
- 6 Risks associated with driving under the influence of alcohol or other drugs
- 7 Statistics on adolescent deaths and injuries from accidents and unintentional injuries
- 8 Group attitudes (social norms) toward risk behaviors related to accidents and unintentional injuries
- 9 Actual amount (true prevalence) of risk behavior related to accidents and unintentional injuries among adolescents and adults

## HANDCARD #6

### INTENTIONAL INJURIES AND VIOLENCE

- 1 None of these
- 2 How to settle conflicts without physical fighting
- 3 How to handle stress in healthy ways
- 4 Risks associated with physical fighting
- 5 Risks associated with carrying and using weapons
- 6 Risks associated with gang activities
- 7 What to do if someone is thinking about suicide
- 8 Statistics on adolescent deaths and injuries from violence and suicide
- 9 Group attitudes (social norms) toward risk behaviors related to intentional injuries and violence
- 10 Actual amount (true prevalence) of risk behavior related to intentional injuries and violence among adolescents and adults

## HANDCARD #7

### TOBACCO USE

- 1 None of these
- 2 Short-term risks associated with cigarette smoking (yellow teeth/bad breath, effects of tobacco on the body, effects on athletic performance)
- 3 Long-term risks associated with cigarette smoking (heart disease, lung cancer, emphysema, premature wrinkling)
- 4 Risks associated with sidestream/second-hand smoke (lung cancer, other respiratory diseases)
- 5 Short-term risks associated with chewing tobacco or snuff (yellow teeth/bad breath, mouth/tongue sores)
- 6 Long-term risks associated with chewing tobacco or snuff (oral cancer, tooth loss)
- 7 Statistics on death and disability associated with tobacco use
- 8 Group attitudes (social norms) toward risk behaviors related to tobacco use
- 9 Actual amount (true prevalence) of risk behavior related to tobacco use among adolescents and adults
- 10 School policies about tobacco use
- 11 Social influences on tobacco use (wanting to be part of a group, feeling like an adult, advertising, media)
- 12 Healthy alternatives to smoking
- 13 Effects of tobacco-related disease on health care costs
- 14 Advocacy skills and social action concerning tobacco use

## HANDCARD #8

### ALCOHOL AND OTHER DRUG (AOD) USE

- 1 None of these
- 2 Short-term risks associated with alcohol use (DUI injuries, risks associated with heavy/binge drinking)
- 3 Long-term risks associated with alcohol use, such as problems associated with addiction, health, family, and career; alcohol-related diseases, such as cirrhosis or other liver damage; and effects of having a DUI arrest record
- 4 Drink equivalents and blood alcohol content
- 5 Short-term risks associated with other drug use (marijuana, cocaine, crack, and other illegal drugs, such as LSD, PCP, ecstasy, mushrooms, speed, ice, heroin, or pills)
- 6 Long-term risks associated with other drug use
- 7 Classifications of drugs and how they work
- 8 Identification of drugs
- 9 OTC and prescription drugs
- 10 Risks associated with illegal steroid use
- 11 Effects of AOD on the mind and body
- 12 Effects of AOD on decision-making
- 13 Healthy alternatives to AOD use
- 14 Statistics on death and disability from AOD use
- 15 Group attitudes (social norms) toward risk behaviors related to AOD use
- 16 Actual amount (true prevalence) of risk behavior related to AOD use among adolescents and adults
- 17 School policies on AOD use
- 18 Social influences on AOD use
- 19 Potential legal consequences of AOD use

## HANDCARD #9

### SEXUAL BEHAVIORS

- 1 None of these
- 2 Parts and functions of the reproductive system
- 3 Reasons for choosing sexual abstinence
- 4 Contraceptive methods to prevent pregnancy
- 5 How to prevent sexually transmitted diseases (STD)
- 6 Signs and symptoms of STD
- 7 How and where to get STD testing
- 8 Social influences on sexual behavior
- 9 Dating and relationships
- 10 Marriage
- 11 Risks associated with having multiple sexual partners
- 12 Perception of risk for STD and pregnancy
- 13 Statistics on adolescent pregnancies and STD rates
- 14 Group attitudes (social norms) toward risk behaviors related to sex
- 15 Actual amount (true prevalence) of risk behavior related to sex among adolescents and adults
- 16 Sexual orientation

## HANDCARD #10

### HIV AND AIDS

- 1 None of these
- 2 Basic facts about HIV/AIDS
- 3 How HIV is and is not transmitted
- 4 How HIV affects the immune system
- 5 Disease progression of AIDS
- 6 Needle-sharing behaviors that transmit HIV
- 7 Sexual behaviors that transmit HIV
- 8 Reasons for choosing sexual abstinence
- 9 Correct use of condoms
- 10 Condom efficacy/how well condoms work
- 11 Influence of alcohol and other drugs on HIV risk behaviors
- 12 Statistics on adolescent death and disability related to HIV/AIDS
- 13 Group attitudes (social norms) toward risk behaviors related to HIV
- 14 Actual amount (true prevalence) of risk behavior related to HIV among adolescents and adults
- 15 Information on HIV testing and counseling
- 16 Compassion and support for persons living with HIV/AIDS
- 17 Perceptions of risk for HIV/AIDS
- 18 Societal impact of HIV/AIDS

## HANDCARD #11

### NUTRITION AND DIETARY BEHAVIORS

- 1 None of these
- 2 Nutrients and foods where they are found
- 3 Vitamin- and mineral-related disorders
- 4 Four food groups
- 5 Food Guide Pyramid
- 6 Five a Day (fruits and vegetables)
- 7 Dietary Guidelines for Americans
- 8 Choosing healthy meals and snacks
- 9 Label reading
- 10 Preparing healthy meals and snacks
- 11 Healthy weight management
- 12 Myths associated with diet supplements
- 13 Risks associated with crash diets/low-calorie diets
- 14 Risks associated with using diet pills
- 15 Risks associated with purging (vomiting, laxatives) for weight loss
- 16 Signs and symptoms of eating disorders (anorexia nervosa, bulimia nervosa)
- 17 What to do if someone has an eating disorder
- 18 Overeating as a response to stress
- 19 Social pressures for thinness, especially for female students
- 20 Statistics on death and disability associated with dietary causes

## HANDCARD #12

### PHYSICAL ACTIVITY

- 1 None of these
- 2 Benefits of regular participation in aerobic activity
- 3 Benefits of regular participation in stretching exercises
- 4 Benefits of regular participation in strengthening exercises
- 5 Overcoming barriers to regular physical activity
- 6 Planning a personal fitness program
- 7 Healthy weight management
- 8 Fitness fads/gimmicks
- 9 Reducing risk for certain diseases, such as cardiovascular disease and osteoporosis
- 10 How to measure one's own fitness
- 11 Statistics on death and disability associated with sedentary lifestyle
- 12 Community opportunities for physical activity
- 13 Preventing injury during physical activity
- 14 Physiological benefits of exercise
- 15 Psychological benefits of exercise
- 16 Social benefits of exercise

## HANDCARD #13

### SKILLS FOR HEALTHY BEHAVIORS

- 1 Communication
- 2 Decision-making
- 3 Goal-setting
- 4 Non-violent conflict resolution
- 5 Resisting social pressures for unhealthy behaviors
- 6 Stress management

## HANDCARD #14

### TEACHING METHODS

- 1 Class (seat) work
- 2 Lecture (teacher lecturing to class)
- 3 Large group discussions
- 4 Small group discussions
- 5 Games
- 6 Simulations
- 7 Cooperative activities
- 8 Arts (literature/stories)
- 9 Role play
- 10 Physical practice
- 11 AV materials
- 12 Interactive video
- 13 Computer-assisted instruction
- 14 Contracts for behavior change
- 15 Contests for behavior change

**OFTEN**

**SOMETIMES**

**RARELY**

**NEVER**



## HANDCARD #15

### HEALTH-RELATED PLEDGES

- 1 Not to use alcohol or drugs during adolescence
- 2 Not to use alcohol or drugs at a particular time, such as prom night
- 3 Not to drink and drive or ride with a drinking driver
- 4 Not to use tobacco
- 5 Not to use weapons
- 6 To settle conflicts without fighting
- 7 To abstain from sexual intercourse during adolescence
- 8 To practice safer sex
- 9 To practice healthful nutrition
- 10 To exercise regularly
- 11 To always wear a seatbelt
- 12 To always wear a helmet while biking
- 13 To support others in their decisions to practice healthful behaviors

## HANDCARD #16

### ADULT GUEST SPEAKERS

1 None of these

2 Law enforcement official

3 Athlete

4 Person living with HIV/AIDS

5 Recovering AOD addict

6 Victim of drunk driving

7 Former drunk driver

8 Family planning representative

9 Minister/clergy

10 Food service personnel

11 Health services personnel

**HANDCARD #17**

**STUDENT ASSESSMENT**

1 No grade

2 Attendance

3 Participation

4 Attitude

5 Skills

6 Homework assignments

7 Written tests

## HANDCARD #18

### HEALTH-RELATED COMMUNITY ACTIVITIES

1 None of these

2 Perform voluntary work at a health department or other health-related community organization

3 Participate in a community-based health fair

4 Conduct community member surveys

5 Gather information about a school or community health service (e.g., screenings, clinic services)

6 Use a school or community health service (e.g., a hotline or clinic)

7 Visit a pharmacy to compare prices on health products

8 Identify potential injury sites at school or in the community

## HANDCARD #19

### HEALTH-RELATED HOME AND FAMILY ACTIVITIES

- 1 None of these
- 2 Conduct health survey of family members
- 3 Share health information with family members
- 4 Count medications in family medicine chest
- 5 Identify products or hazards that pose a potential health threat