

2014 SCHOOL HEALTH PROFILES LEAD HEALTH EDUCATION TEACHER QUESTIONNAIRE

This questionnaire will be used to assess school health education across your state or school district. Your cooperation is essential for making the results of this survey comprehensive, accurate, and timely. Your answers will be kept confidential.

INSTRUCTIONS

1. This questionnaire should be completed by the **lead health education teacher** (or the person acting in that capacity) and concerns only activities that occur in the **school listed below**. Please consult with other people if you are not sure of an answer.
2. Please use a #2 pencil to fill in the answer circles completely. Do not fold, bend, or staple this questionnaire or mark outside the answer circles.
3. Follow the instructions for each question.
4. Write any additional comments you wish to make at the end of this questionnaire.
5. Return the questionnaire in the envelope provided.

Person completing this questionnaire

Name: _____
Title: _____
School name: _____
District: _____
Telephone number: _____

To be completed by the agency conducting the survey

School name: _____

Survey ID			
0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

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REQUIRED HEALTH EDUCATION COURSES

(Definition: A required health education course is defined as one that students must take for graduation or promotion from your school and includes instruction about health topics such as injuries and violence, alcohol and other drug use, tobacco use, nutrition, HIV infection, and physical activity.)

1. **How many required health education courses do students take in grades 6 through 12 in your school?** (Mark one response.)

- Ⓐ 0 courses → **Skip to Question 4**
- Ⓑ 1 course
- Ⓒ 2 courses
- Ⓓ 3 courses
- Ⓔ 4 or more courses

2. **Is a required health education course taught in each of the following grades in your school?** (For each grade, mark yes or no, or if your school does not have that grade, mark “grade not taught in your school.”)

	Grade	Yes	No	Grade not taught in your school
a.	6.....	0.....	0.....	0.....
b.	7.....	0.....	0.....	0.....
c.	8.....	0.....	0.....	0.....
d.	9.....	0.....	0.....	0.....
e.	10.....	0.....	0.....	0.....
f.	11.....	0.....	0.....	0.....
g.	12.....	0.....	0.....	0.....

3. **If students fail a required health education course, are they required to repeat it?** (Mark one response.)

- Ⓐ Yes
- Ⓑ No

The following questions apply to any instruction on health topics such as those listed above Question 1, including instruction that is not required and instruction that occurs outside of health education courses.

4. Are those who teach health education at your school provided with each of the following materials? (Mark yes or no for each material.)

Material	Yes	No
a. Goals, objectives, and expected outcomes for health education.....	0	0
b. A chart describing the annual scope and sequence of instruction for health education.....	0	0
c. Plans for how to assess student performance in health education	0	0
d. A written health education curriculum	0	0

5. Does your health education curriculum address each of the following skills? (Mark yes or no for each skill, or mark NA for each skill if your school does not have a health education curriculum.)

Skill	Yes	No	NA
a. Comprehending concepts related to health promotion and disease prevention to enhance health.....	0	0	0
b. Analyzing the influence of family, peers, culture, media, technology, and other factors on health behaviors.....	0	0	0
c. Accessing valid information and products and services to enhance health.....	0	0	0
d. Using interpersonal communication skills to enhance health and avoid or reduce health risks.....	0	0	0
e. Using decision-making skills to enhance health.....	0	0	0
f. Using goal-setting skills to enhance health.....	0	0	0
g. Practicing health-enhancing behaviors to avoid or reduce risks.....	0	0	0
h. Advocating for personal, family, and community health	0	0	0

6. **Are those who teach sexual health education at your school provided with each of the following materials?** (Mark yes or no for each material, or mark NA for each material if no one in your school teaches sexual health education.)

	Material	Yes	No	NA
a.	Goals, objectives, and expected outcomes for sexual health education	0	0	0
b.	A written health education curriculum that includes objectives and content addressing sexual health education	0	0	0
c.	A chart describing the annual scope and sequence of instruction for sexual health education	0	0	0
d.	Strategies that are age-appropriate, relevant, and actively engage students in learning.....	0	0	0
e.	Methods to assess student knowledge and skills related to sexual health education	0	0	0

REQUIRED HEALTH EDUCATION

(Definition: Required health education is defined as any classroom instruction on health topics such as those listed above Question 1, including instruction that occurs outside of health education courses that students must receive for graduation or promotion from your school.)

7. **Is health education instruction required for students in any of grades 6 through 12 in your school?** (Mark one response.)

- Ⓐ Yes
- Ⓑ No

8. During this school year, have teachers in your school tried to increase student knowledge on each of the following topics in a required course in any of grades 6 through 12? (Mark yes or no for each topic.)

	Topic	Yes	No
a.	Alcohol- or other drug-use prevention.....	0.....	0
b.	Asthma	0	0
c.	Diabetes.....	0	0
d.	Emotional and mental health	0	0
e.	Epilepsy or seizure disorder.....	0	0
f.	Food allergies.....	0	0
g.	Foodborne illness prevention.....	0	0
h.	Human immunodeficiency virus (HIV) prevention.....	0	0
i.	Human sexuality	0	0
j.	Infectious disease prevention (e.g., influenza [flu] prevention)	0	0
k.	Injury prevention and safety	0	0
l.	Nutrition and dietary behavior	0	0
m.	Physical activity and fitness.....	0	0
n.	Pregnancy prevention.....	0	0
o.	Sexually transmitted disease (STD) prevention.....	0	0
p.	Suicide prevention	0	0
q.	Tobacco-use prevention.....	0	0
r.	Violence prevention (e.g., bullying, fighting, or dating violence prevention).....	0	0

9. **During this school year, did teachers in your school teach each of the following tobacco-use prevention topics in a required course for students in any of grades 6 through 12? (Mark yes or no for each topic.)**

	Topic	Yes	No
a.	Identifying tobacco products and the harmful substances they contain.....	0	0
b.	Identifying short- and long-term health consequences of tobacco use.....	0	0
c.	Identifying social, economic, and cosmetic consequences of tobacco use	0	0
d.	Understanding the addictive nature of nicotine	0	0
e.	Effects of tobacco use on athletic performance	0	0
f.	Effects of second-hand smoke and benefits of a smoke-free environment	0	0
g.	Understanding the social influences on tobacco use, including media, family, peers, and culture	0	0
h.	Identifying reasons why students do and do not use tobacco	0	0
i.	Making accurate assessments of how many peers use tobacco	0	0
j.	Using interpersonal communication skills to avoid tobacco use (e.g., refusal skills, assertiveness).....	0	0
k.	Using goal-setting and decision-making skills related to not using tobacco	0	0
l.	Finding valid information and services related to tobacco-use prevention and cessation	0	0
m.	Supporting others who abstain from or want to quit using tobacco	0	0
n.	Identifying harmful effects of tobacco use on fetal development.....	0	0
o.	Relationship between using tobacco and alcohol or other drugs	0	0
p.	How addiction to tobacco use can be treated.....	0	0
q.	Understanding school policies and community laws related to the sale and use of tobacco products.....	0	0
r.	Benefits of smoking cessation programs	0	0

10. **During this school year, did teachers in your school teach each of the following HIV, STD, or pregnancy prevention topics in a required course for students in each of the grade spans below? (Mark yes or no for each topic for each grade span, or mark NA for each topic if your school does not contain grades in that grade span.)**

Topic	<u>Grades</u> <u>6, 7, or 8</u>			<u>Grades</u> <u>9, 10, 11, or 12</u>		
	Yes	No	NA	Yes	No	NA
a. How HIV and other STDs are transmitted	0.....	0.....	0.....	0.....	0.....	0.....
b. Health consequences of HIV, other STDs, and pregnancy	0.....	0.....	0.....	0.....	0.....	0.....
c. The benefits of being sexually abstinent	0.....	0.....	0.....	0.....	0.....	0.....
d. How to access valid and reliable health information, products, and services related to HIV, other STDs, and pregnancy.....	0.....	0.....	0.....	0.....	0.....	0.....
e. The influences of family, peers, media, technology and other factors on sexual risk behaviors	0.....	0.....	0.....	0.....	0.....	0.....
f. Communication and negotiation skills related to eliminating or reducing risk for HIV, other STDs, and pregnancy.....	0.....	0.....	0.....	0.....	0.....	0.....
g. Goal-setting and decision-making skills related to eliminating or reducing risk for HIV, other STDs, and pregnancy.....	0.....	0.....	0.....	0.....	0.....	0.....
h. Influencing and supporting others to avoid or reduce sexual risk behaviors	0.....	0.....	0.....	0.....	0.....	0.....
i. Efficacy of condoms, that is, how well condoms work and do not work.....	0.....	0.....	0.....	0.....	0.....	0.....
j. The importance of using condoms consistently and correctly.....	0.....	0.....	0.....	0.....	0.....	0.....
k. How to obtain condoms.....	0.....	0.....	0.....	0.....	0.....	0.....
l. How to correctly use a condom.....	0.....	0.....	0.....	0.....	0.....	0.....
m. The importance of using a condom at the same time as another form of contraception to prevent both STDs and pregnancy	0.....	0.....	0.....	0.....	0.....	0.....
n. How to create and sustain healthy and respectful relationships.....	0.....	0.....	0.....	0.....	0.....	0.....
o. The importance of limiting the number of sexual partners	0.....	0.....	0.....	0.....	0.....	0.....
p. Preventive care (such as screenings and immunizations) that is necessary to maintain reproductive and sexual health	0.....	0.....	0.....	0.....	0.....	0.....

11. **During this school year, did teachers in your school teach about the following contraceptives in a required course for students in any of grades 9 through 12?**
(Mark yes or no for each contraceptive, or mark NA for each one if your school does not contain any of grades 9, 10, 11, or 12.)

	Contraceptive	Yes	No	NA
a.	Birth control pill (e.g., OrthoTri-cyclen)	0	0	0
b.	Birth control patch (e.g., Ortho Evra)	0	0	0
c.	Birth control ring (e.g., NuvaRing).....	0	0	0
d.	Birth control shot (e.g., Depo-Provera)	0	0	0
e.	Implants (e.g., Implanon).....	0	0	0
f.	Intrauterine device (IUD; e.g., Mirena, ParaGard)	0	0	0
g.	Emergency contraception (e.g., Plan B)	0	0	0

12. **During this school year, did teachers in your school assess the ability of students to do each of the following in a required course for students in each of the grade spans below?** (Mark yes or no for each topic for each grade span, or mark NA for each topic if your school does not contain grades in that grade span.)

	Topic	<u>Grades</u> <u>6, 7, or 8</u>			<u>Grades</u> <u>9, 10, 11, or 12</u>		
		Yes	No	NA	Yes	No	NA
a.	Comprehend concepts important to prevent HIV, other STDs and pregnancy.....	0	0	0	0	0	0
b.	Analyze the influence of family, peers, culture, media, technology, and other factors on sexual risk behaviors	0	0	0	0	0	0
c.	Access valid information, products, and services to prevent HIV, other STDs and pregnancy.....	0	0	0	0	0	0
d.	Use interpersonal communication skills to avoid or reduce sexual risk behaviors.....	0	0	0	0	0	0
e.	Use decision-making skills to prevent HIV, other STDs and pregnancy	0	0	0	0	0	0
f.	Set personal goals that enhance health, take steps to achieve these goals, and monitor progress in achieving them	0	0	0	0	0	0
g.	Influence and support others to avoid or reduce sexual risk behaviors.....	0	0	0	0	0	0

13. During this school year, did teachers in your school teach each of the following **nutrition and dietary behavior topics in a required course** for students in any of grades 6 through 12? (Mark yes or no for each topic.)

	Topic	Yes	No
a.	Benefits of healthy eating	0	0
b.	Benefits of drinking plenty of water	0	0
c.	Benefits of eating breakfast every day.....	0	0
d.	Food guidance using the current Dietary Guidelines for Americans (e.g., MyPlate or MyPyramid)	0	0
e.	Using food labels	0	0
f.	Differentiating between nutritious and non-nutritious beverages.....	0	0
g.	Balancing food intake and physical activity	0	0
h.	Eating more fruits, vegetables, and whole grain products	0	0
i.	Choosing foods and snacks that are low in solid fat (i.e., saturated and trans fat)	0	0
j.	Choosing foods, snacks, and beverages that are low in added sugars ..	0	0
k.	Choosing foods and snacks that are low in sodium	0	0
l.	Eating a variety of foods that are high in calcium	0	0
m.	Eating a variety of foods that are high in iron	0	0
n.	Food safety.....	0	0
o.	Preparing healthy meals and snacks	0	0
p.	Risks of unhealthy weight control practices	0	0
q.	Accepting body size differences	0	0
r.	Signs, symptoms, and treatment for eating disorders	0	0
s.	Relationship between diet and chronic diseases	0	0
t.	Assessing body mass index (BMI)	0	0

14. **During this school year, did teachers in your school teach each of the following physical activity topics in a required course for students in any of grades 6 through 12? (Mark yes or no for each topic.)**

	Topic	Yes	No
a.	Short-term and long-term benefits of physical activity, including reducing the risks for chronic disease	0	0
b.	Mental and social benefits of physical activity	0	0
c.	Health-related fitness (i.e., cardiorespiratory endurance, muscular endurance, muscular strength, flexibility, and body composition)	0	0
d.	Phases of a workout (i.e., warm-up, workout, cool down)	0	0
e.	Recommended amounts and types of moderate, vigorous, muscle-strengthening, and bone-strengthening physical activity	0	0
f.	Decreasing sedentary activities (e.g., television viewing, using video games)	0	0
g.	Preventing injury during physical activity	0	0
h.	Weather-related safety (e.g., avoiding heat stroke, hypothermia, and sunburn while physically active)	0	0
i.	Dangers of using performance-enhancing drugs (e.g., steroids)	0	0
j.	Increasing daily physical activity.....	0	0
k.	Incorporating physical activity into daily life (without relying on a structured exercise plan or special equipment)	0	0
l.	Using safety equipment for specific physical activities.....	0	0
m.	Benefits of drinking water before, during, and after physical activity.....	0	0

HIV PREVENTION

15. **Does your school provide curricula or supplementary materials that include HIV, STD, or pregnancy prevention information that is relevant to lesbian, gay, bisexual, transgender, and questioning youth (e.g., curricula or materials that use inclusive language or terminology)? (Mark one response.)**

- Ⓐ Yes
Ⓑ No

COLLABORATION

16. During this school year, have any health education staff worked with each of the following groups on health education activities? (Mark yes or no for each group.)

Group		Yes	No
a.	Physical education staff	0	0
b.	Health services staff (e.g., nurses)	0	0
c.	Mental health or social services staff (e.g., psychologists, counselors, and social workers)	0	0
d.	Nutrition or food service staff	0	0
e.	School health council, committee, or team	0	0

17. During this school year, did your school provide parents and families with health information designed to increase parent and family knowledge of each of the following topics? (Mark yes or no for each topic.)

Topic		Yes	No
a.	HIV prevention, STD prevention, or teen pregnancy prevention	0	0
b.	Tobacco-use prevention	0	0
c.	Physical activity	0	0
d.	Nutrition and healthy eating	0	0
e.	Asthma	0	0
f.	Food allergies	0	0
g.	Diabetes	0	0
h.	Preventing student bullying and sexual harassment, including electronic aggression (i.e., cyber-bullying)	0	0

18. During this school year, have teachers in this school given students homework assignments or health education activities to do at home with their parents? (Mark one response.)

- (a) Yes
 (b) No

PROFESSIONAL DEVELOPMENT

19. During the past two years, did you receive professional development (e.g., workshops, conferences, continuing education, or any other kind of in-service) on each of the following topics? (Mark yes or no for each topic.)

	Topic	Yes	No
a.	Alcohol- or other drug-use prevention.....	0	0
b.	Asthma	0	0
c.	Diabetes.....	0	0
d.	Emotional and mental health	0	0
e.	Epilepsy or seizure disorder.....	0	0
f.	Food allergies.....	0	0
g.	Foodborne illness prevention.....	0	0
h.	HIV prevention	0	0
i.	Human sexuality	0	0
j.	Infectious disease prevention (e.g., flu prevention)	0	0
k.	Injury prevention and safety	0	0
l.	Nutrition and dietary behavior.....	0	0
m.	Physical activity and fitness.....	0	0
n.	Pregnancy prevention.....	0	0
o.	STD prevention.....	0	0
p.	Suicide prevention	0	0
q.	Tobacco-use prevention.....	0	0
r.	Violence prevention (e.g., bullying, fighting, or dating violence prevention).....	0	0

20. During the past two years, did you receive professional development (e.g., workshops, conferences, continuing education, or any other kind of in-service) on each of the following topics? (Mark yes or no for each topic.)

	Topic	Yes	No
a.	Describing how widespread HIV and other STD infections are and the consequences of these infections.....	0	0
b.	Understanding the modes of transmission and effective prevention strategies for HIV and other STDs	0	0
c.	Identifying populations of youth who are at high risk of being infected with HIV and other STDs	0	0
d.	Implementing health education strategies using prevention messages that are likely to be effective in reaching youth.....	0	0
e.	Teaching essential skills for health behavior change related to HIV prevention and guiding student practice of these skills	0	0
f.	Assessing students' performance in HIV prevention education	0	0
g.	Describing the prevalence and potential effects of teen pregnancy	0	0
h.	Identifying populations of youth who are at high risk of becoming pregnant.....	0	0
i.	Current district or school board policies or curriculum guidance regarding HIV education or sexual health education.....	0	0

21. Would you like to receive professional development on each of the following topics? (Mark yes or no for each topic.)

	Topic	Yes	No
a.	Alcohol- or other drug-use prevention.....	0	0
b.	Asthma	0	0
c.	Diabetes.....	0	0
d.	Emotional and mental health	0	0
e.	Epilepsy or seizure disorder.....	0	0
f.	Food allergies.....	0	0
g.	Foodborne illness prevention.....	0	0
h.	HIV prevention	0	0
i.	Human sexuality	0	0
j.	Infectious disease prevention (e.g., flu prevention)	0	0
k.	Injury prevention and safety	0	0
l.	Nutrition and dietary behavior	0	0
m.	Physical activity and fitness.....	0	0
n.	Pregnancy prevention.....	0	0
o.	STD prevention.....	0	0
p.	Suicide prevention	0	0
q.	Tobacco-use prevention	0	0
r.	Violence prevention (e.g., bullying, fighting, or dating violence prevention).....	0	0

22. During the past two years, did you receive professional development (e.g., workshops, conferences, continuing education, or any other kind of in-service) on each of the following topics? (Mark yes or no for each topic.)

	Topic	Yes	No
a.	Teaching students with physical, medical, or cognitive disabilities	0	0
b.	Teaching students of various cultural backgrounds.....	0	0
c.	Teaching students with limited English proficiency.....	0	0
d.	Teaching students of different sexual orientations or gender identities.....	0	0
e.	Using interactive teaching methods (e.g., role plays or cooperative group activities).....	0	0
f.	Encouraging family or community involvement	0	0
g.	Teaching skills for behavior change	0	0
h.	Classroom management techniques (e.g., social skills training, environmental modification, conflict resolution and mediation, and behavior management).....	0	0
i.	Assessing or evaluating students in health education	0	0

23. Would you like to receive professional development on each of these topics? (Mark yes or no for each topic.)

	Topic	Yes	No
a.	Teaching students with physical, medical, or cognitive disabilities	0	0
b.	Teaching students of various cultural backgrounds.....	0	0
c.	Teaching students with limited English proficiency.....	0	0
d.	Teaching students of different sexual orientations or gender identities.....	0	0
e.	Using interactive teaching methods (e.g., role plays or cooperative group activities).....	0	0
f.	Encouraging family or community involvement	0	0
g.	Teaching skills for behavior change	0	0
h.	Classroom management techniques (e.g., social skills training, environmental modification, conflict resolution and mediation, and behavior management).....	0	0
i.	Assessing or evaluating students in health education	0	0

PROFESSIONAL PREPARATION

24. **What was the major emphasis of your professional preparation?** (Mark one response.)
- Ⓐ Health and physical education combined
 - Ⓑ Health education
 - Ⓒ Physical education
 - Ⓓ Other education degree
 - Ⓔ Kinesiology, exercise science, or exercise physiology
 - Ⓕ Home economics or family and consumer science
 - Ⓖ Biology or other science
 - Ⓗ Nursing
 - Ⓘ Counseling
 - Ⓢ Public health
 - Ⓚ Nutrition
 - Ⓛ Other
25. **Currently, are you certified, licensed, or endorsed by the state to teach health education in middle school or high school?** (Mark one response.)
- Ⓐ Yes
 - Ⓑ No
26. **Including this school year, how many years of experience do you have teaching health education courses or topics?** (Mark one response.)
- Ⓐ 1 year
 - Ⓑ 2 to 5 years
 - Ⓒ 6 to 9 years
 - Ⓓ 10 to 14 years
 - Ⓔ 15 years or more

Thank you for your responses. Please return this questionnaire.