The growing obesity epidemic gives principals an opportunity to demonstrate leadership in addressing the health needs of school-aged children.

Jane McDonald

In 1982, 4 percent of children in America were overweight. In 1994, that number jumped to 16 percent. New studies by the Centers for Disease Control and Prevention (2005) suggest that one in four overweight children are showing signs of impaired glucose tolerance, and 60 percent are at risk for heart disease.
Health:
As with most social concerns, schools are expected—and usually want—to lend a helping hand, and they can help reverse the alarming trends in children’s health if they show leadership. This article suggests 10 practical and proven ways principals can address the growing health issues of school-aged children.

**Make children’s health a priority.** Believing that children should be healthy is easy. Acting on that belief can be challenging. Principals need to make children’s health a priority and commit the funds, effort, time, and people needed to support health education.

**Learn what the community wants.** One of the best ways to improve children’s health is to seek aid from community members. Principals can select an advisory committee to help guide health activities and provide feedback about community health needs. Parents, students, teachers, business representatives, nutritionists, doctors, and nurses can all provide valuable perspectives.

**Collaborate with businesses and community agencies.** Many community organizations welcome the opportunity to collaborate with schools on health issues. For example, the Children’s Hunger Alliance of Ohio (2005) worked with local schools to bring free “Breakfast in the Classroom” to all children. Principals can encourage agencies to volunteer time, share expertise, donate equipment, give money, and sponsor special events, such as community health fairs, that benefit children.

**Learn the specific health risks of different cultures.** The food choices people make depend not only on their nutritional needs but also on their culture. As diversity in America’s schools continues to increase, principals need to understand the ways each culture handles health issues in order to provide appropriate information on nutrition and physical activity.

**Include health content and skills in all curricular areas.** Integrating health knowledge, skills, and attitudes into various curricular areas can be as simple as children compiling cookbooks of healthy menus in language arts, and calculating the number of calories in each recipe—and the amount of exercise needed to burn those calories—in math class.

**Teach children to monitor their own health.** Teachers can help children understand how their daily decisions about food, exercise, smoking, and drinking can affect them and their families. Children can also be taught to monitor their own blood pressure, pulse, and body temperature.

**Involve and educate parents.** Because children first learn about health behaviors from the adults in their homes, principals help schools play a major supporting role by educating parents about children’s health. They can do so by holding informational sessions where families can receive free resources and learn about children’s needs for increased physical activity, healthy dietary habits, and reduced screen time.

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**WEB RESOURCES**

The American Association of School Administrators provides booklets and audiovisual materials on wellness and school health education programs.

[www.aasa.org](http://www.aasa.org)

The American Red Cross supplies health promotion training programs for children 5 to 8.

[Info@redcross.org](mailto:Info@redcross.org)

The American Public Health Association has an online fact sheet and resource guide for teachers.

[www.apha.org](http://www.apha.org)

The Association for the Advancement of Health Education provides teaching ideas for K–12 health education.

[Info@aahperd.org/aahe/aahe.html](mailto:Info@aahperd.org/aahe/aahe.html)

The Children’s Defense Fund’s Health of America’s Children series is available online.

[www.childrensdefense.org](http://www.childrensdefense.org)

Michigan Team Nutrition shares ideas for integrating nutrition education into core subjects.

[www.tn.fcs.msue.msu.edu](http://www.tn.fcs.msue.msu.edu)

The National Mental Health Information Center is a clearinghouse for articles from mental health publications.

[www.mentalhealth.samhsa.gov](http://www.mentalhealth.samhsa.gov)

The President’s Council on Physical Fitness and Sports describes its fitness awards program.

[www.fitness.gov](http://www.fitness.gov)

The School Nutrition Association lists children’s books on nutrition and answers frequently asked questions about nutrition.

[www.afsa.org](http://www.afsa.org)

The U.S. Department of Health and Human Services provides national health objectives for 2010, with baseline statistical data and relevant publications.

[www.samhsa.gov/features/kidsarea](http://www.samhsa.gov/features/kidsarea)
Work with cafeteria staff to offer healthy menu selections. Principals can monitor cafeteria menu selections and work with the cafeteria supervisor to offer healthier food choices that go beyond the government’s guidelines. Making changes in menus may be more difficult in districts where food service employees are required to make a profit on school meals, but it is still possible to feature healthy meals each week.

Provide staff development to ensure appropriate teaching methods. Teachers need to be comfortable and capable in using instructional methods that help children learn healthy behaviors. Principals can offer professional development opportunities and coach teachers in these methods. For example, role-playing activities help children learn concrete ways to resist pressures to be involved in risky health behaviors. Also, cooperative learning methods help students learn from each other and build self-esteem.

Commit to comprehensive health education. Targeting nutrition and exercise is a healthy start for schools. But the impact on children’s health can be greater if nutrition and physical activity are part of a larger plan to address the complexities of children’s health. Principals who want to have a stronger impact on the well-being of children have found that a comprehensive health education program can help build the foundation for healthy life habits. In fact, comprehensive programs are often more effective in changing health attitudes of children than occasional programs on single health topics (Kolbe 1993b). Comprehensive programs share five common components:

Direct instruction on health knowledge and skills that focuses on disease prevention, wellness, and life skills.

Health services provided by the school or as a referral system to community resources.

A healthy and safe school environment that is free of smoke, drugs, and violence; has nutritious choices available; and is nurturing and supportive of both children and adults.

Open communication about the school’s health program helps to educate parents and other community members and to gain support for school activities. Principals also can use the news media as an ally in building understanding and support for health education.

An evaluation component provides feedback that is used to regularly update and modify the comprehensive health program.

Health education works, but its effectiveness depends on factors such as teacher training, comprehensiveness of the health program, time available for instruction, family involvement, and community support (Gold 1994). Although children first learn about healthy behaviors from the lifestyles of their family members (McFarlane et al. 2003), once children enter school, their knowledge, skills, and attitudes about health can be influenced by instruction. It is the informed and resourceful principal who can promote good health habits in schools.

References

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