The Impact of Texas Senate Bill 19 on Elementary School Children's Level of

Physical Activity

Active Living Research
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What is Texas Senate Bill 19?

- Enacted September 1, 2001.
- Requires all elementary school children to participate in 30 minutes of structured daily physical activity or a total of 135 minutes per week.
- Requires school districts to form School Health Education Advisory Councils (SHAC).
- Requires coordinated school health program designed to prevent obesity, cardiovascular disease, and type 2 diabetes
 - The program must provide for coordinating health education, physical education and physical activity, nutrition services, and parental involvement
 - Each school district shall participate in training and implement the program in each elementary school in the district during the 2006
 2007 school year

Legislation 2005 – SB 42

- September 1, 2005
 - Middle School Coordinated School Health Program:
 6-8th grade
 - Each school district shall participate in training and implement the program in each school in the district during the 2007 – 2008 school year

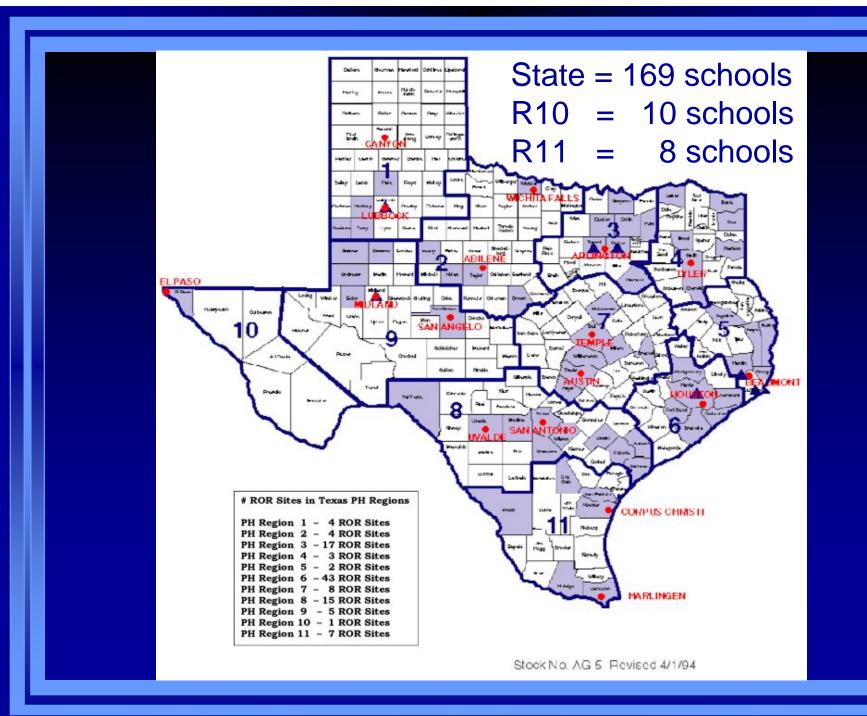
Legislation 2007- SB 530

(Amends Sections 28.002 and 28.004, Education Code)

- Effective 2007-2008, Middle School physical activity must be met by:
 - 30 minutes/d
 - 135 minutes/week
 - 225 minutes/every two weeks
- School must offer 30 min daily PA/PE in 4 semesters
- Effective September 1, 2007, physical assessments must take place in grades 3-12
- SHAC should determine importance of daily recess for elementary school students
- SHAC should evaluate CSHP

Primary Research Aims

- Aim 1: To monitor adherence to requirements of SB 19.
- Aim 2: To monitor impact of SB19 on Texas/Mexico border elementary schools:
 - school and district physical activity policy,
 - observed and measured child physical activity,
 - self reported physical activity, and related psychosocial measures,
 - child overweight.
- Aim 3: To compare CATCH trained schools to untrained schools on:
 - school and district physical activity policy,
 - observed and measured child physical activity,
 - self reported physical activity, and related psychosocial measures,
 - child overweight.



Aim 1: Awareness SB19 Requirements

(2005-2006)

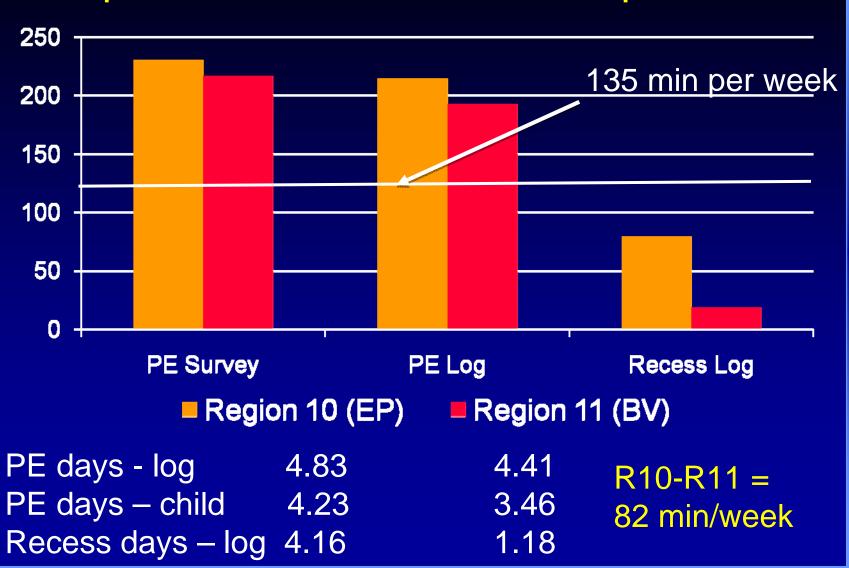
(State	R10EP R11BV
Physical Activity + CSHP*	96%	92% 100%
30 min day;135 min/week	97%	100% 100%
Required CSHP		
Health Education	88%	92% 100%
 Physical Education 	88%	92% 100%
 School Food Service 	84%	92% 100%
 Family Involvement 	59%	75% 88%
Who Informed you		
 School district 	68%	75% 50%
 Professional education 	8%	8% 13%
* CSHP: Coordinated School	l Health	Program

Aim 1: Action (2005-2006)

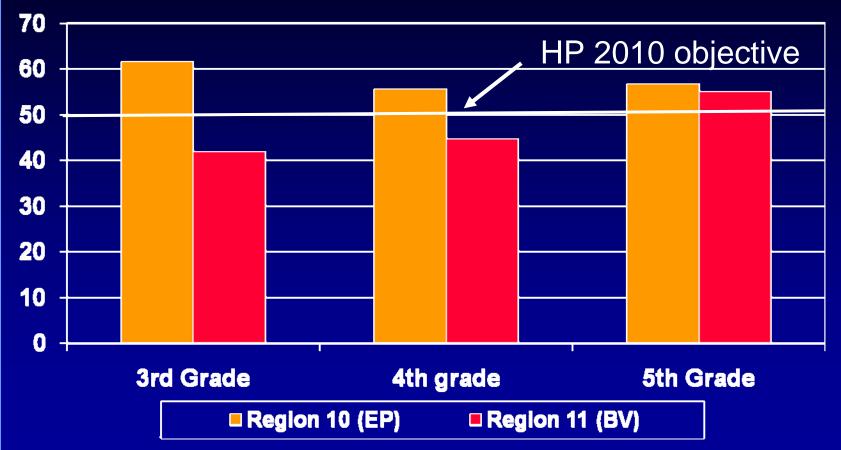
PE Planning	State	R10	R11
	000/	EP = CO	BV
 District issued PE policy stmt 	69%	58%	63%
 PE in Campus Improvement Plan 	40%	42%	38%
 HE in Campus Improvement Plan 	27%	42%	25%
Required district SHAC*			
 Aware SHAC Requirement 	49%	75%	75%
– District have SHAC?	33%	58%	38%
– School have SHA committee?	33%	83%	88%

* SHAC: School Health Advisory Council





Direct Observation of PE Class (SOFIT; n = 19 schools)



MVPA = % of PE class time where students are engaged in movement to vigorous physical activity

Health Education (2005-2006)

Program /	4d	opt	ion
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State R10 R11

EP BV

Any Program

57% 100% 75%

Unsure

64% 0% 12%

Among adopters, what program

\frown \land \lnot	TCŀ	
JA		

75% 91.7% 75%

Great Body Shop

16.7% 8.3% 0%

Health and Wise

7.3% 0% 0%

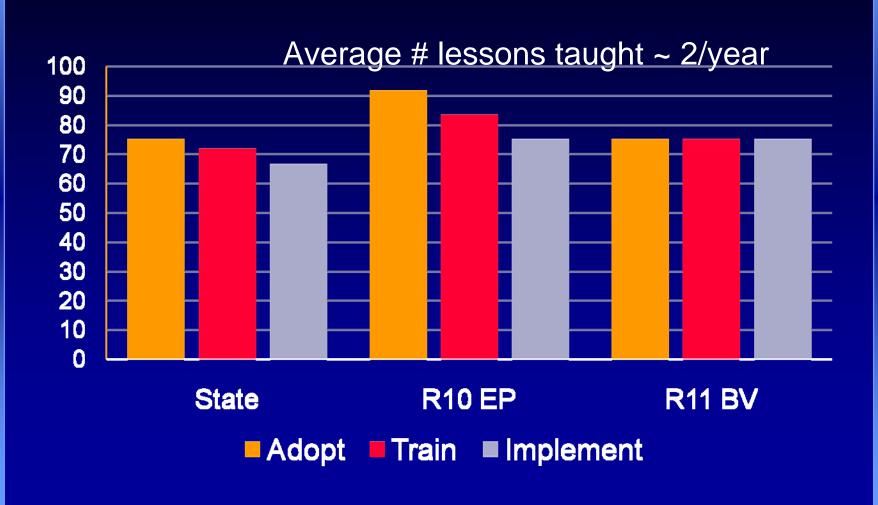
Bienestar

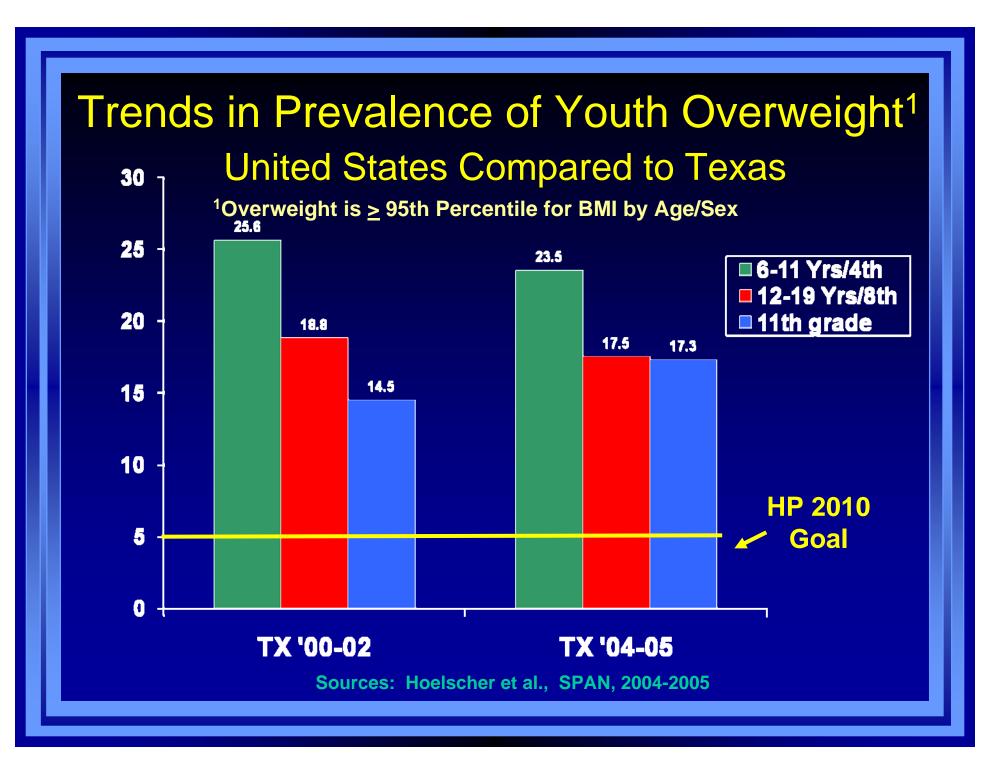
7.3% 0% 0%

Other

3.1% 8.3% 0%

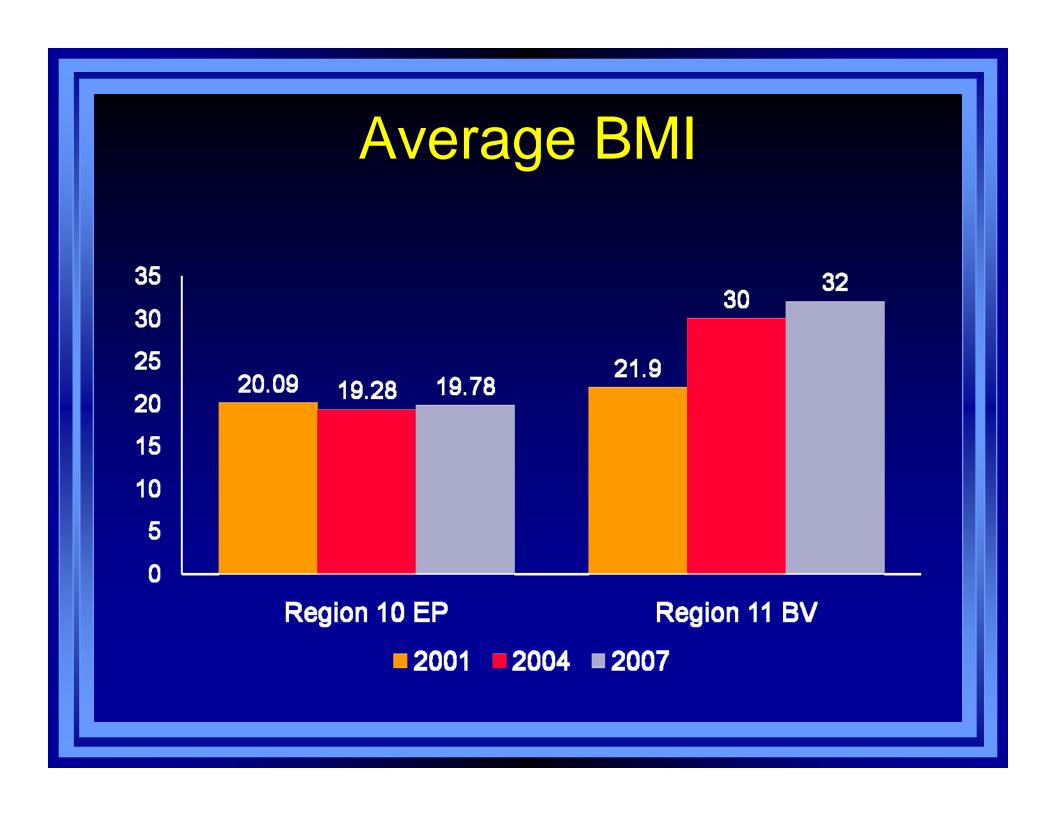






Change in Prevalence of Overweight Among Texas Health Service Regions, SPAN, 2000-2002 to 2004-2005, 4th Grade

HSR	2000-2002	CI	2004-2005	CI
1	20.0	17.0-23.3	23.0	18.6-28.0
2-3	21.1	17.0-25.8	20.9	19.4-22.5
4-5N	21.3	18.9-23.9	20.6	18.0-23.6
6-5S	28.5	18.8-40.6	22.6	13.8-34.7
7	23.3	20.2-26.6	23.5	19.5-28.0
8	30.3	24.9-36.3	28.7	24.0-34.0
9-10*	25.8	23.5-28.3	18.8	15.1-23.3
11	25.8	21.8-30.3	30.6	26.8-34.7



Why the difference?

- Higher PE time in EP: 14-22 min/week
- Higher PE time in EP: 60 min/week
- Higher MVPA: 10%
- Higher adoption CSHP: 25%
- Higher district central planning: 20%
- 7 year, 10 million investment by Paso del Norte Health Foundation; CATCH funding ended in 2005