HEALTHY PEOPLE 2020

OBJECTIVES DIRECTLY RELEVANT TO SCHOOL HEALTH, NUTRITION, AND SAFETY

Early Childhood Education

- EMC-1) Increase the proportion of children who are ready for school in all five domains of healthy development: physical development, social-emotional development, approaches to learning, language and cognitive development. [developmental]
- ECBP-1) Increase the proportion of preschool Early Head Start and Head Start programs that provide health education to prevent health problems in the following areas: unintentional injury; violence; tobacco use and addiction; alcohol and drug use; unhealthy dietary patterns; and inadequate physical activity, dental health, and safety. [developmental]
 - ECBP 1.1 All priority areas
 - ECBP 1.2 Unintentional injury
 - ECBP 1.3 Violence
 - ECBP 1.4 Tobacco use and addiction
 - ECBP 1.5 Alcohol and other drug use
 - ECBP 1.6 Unhealthy dietary patterns
 - ECBP 1.7 Inadequate physical activity
 - ECBP 1.8 Dental and oral health
 - ECBP 1.9 Safety
- NWS-1) Increase the number of states with nutrition standards for foods and beverages provided to preschool-aged children in child care. Baseline: 24 States. Target: 34 States
- PA-9) Increase the number of states with licensing regulations for physical activity provided in child care.
 - PA 9.1 Require activity programs providing large muscle or gross motor activity, development, and/or equipment. Baseline: 25 States. Target: 35 States.
 - PA 9.2 Require children to engage in vigorous or moderate physical activity. Baseline: 3 States. Target: 13 States
 - PA 9.3 Require number of minutes of physical activity per day or by length of time in care. Baseline: 1 State. Target: 11 States.
- TU-13) Establish laws in States, District of Columbia, Territories, and Tribes on smoke-free indoor air that prohibit smoking in public places and worksites.
 - TU 13.6 Commercial daycare centers. Baseline: 38 States and DC (STATE 2009). Target: 51 States and DC
 - TU 13.7 Home-based daycare centers. Baseline: 37 States and DC (STATE 2009). Target: 51 States and DC

Academic Achievement

- ECBP-6) Increase the proportion of the population that completes high school. Baseline: 89.0% of persons aged 18 to 24 years old had completed high school (Census 2007). Target: 97.9%
- AH-5) Increase educational achievement of adolescents and young adults.
 - AH 5.1 Increase the proportion of students who graduate with a regular diploma 4 years after starting 9th grade. Baseline: 74.9% (Common Core of Data 2007-2008). Target: 82.4%
 - AH 5.2 Increase the proportion of students who are served under the Individuals with Disabilities Education Act who graduate high school with a diploma. Baseline: 59.3% of students aged 14 to 21 years old (IDEA). Target: 65.2%

- AH 5.3 Increase the proportion of students whose reading skills are at or above the proficient achievement level for their grade.

 - AH 5.3.1 Fourth (4th) grade. Baseline: 33.0% (NAEP 2009). Target 36.3% AH 5.3.2 Eighth (8th) grade. Baseline: 32.4% (NAEP 2009). Target: 35.6%
 - AH 5.3.3 Twelfth (12th) grade. Baseline: 35.4% (NAEP 2005). Target: 38.9%
- AH 5.4 Increase the proportion of students whose mathematics skills are at or above the proficient achievement level for their grade.
 - AH 5.4.1 Fourth (4th) grade. Baseline: 39.1% (NAEP 2009). Target: 43.0%
 - AH 5.4.2 Eighth (8th) grade. Baseline: 33.9% (NAEP 2009). Target: 37.3%
 - AH 5.4.3 Twelfth (12th) grade. Baseline: 23.0% (NAEP 2005). Target: 25.3%
- AH 5.5 Increase the proportion of adolescents who consider their school work to be meaningful and important. Baseline: 26.6% (NSDUH 2008). Target: 29.3%
- AH 5.6 Decrease school absenteeism among adolescents due to illness or injury. Baseline: 14.6% of adolescents aged 12 to 17 years missed 11 or more whole school days due to illness or injury in the previous 12 months (NHIS 2008). Target: 13.1%
- DH-14) Increase the proportion of children and youth with disabilities who spend at least 8 percent of their time in regular education programs. Baseline: 56.8% (IDEA 2007-2008). Target: 73.8%

Health Education

- ECBP-2) Increase the proportion of elementary, middle, and senior high schools that provide comprehensive school health education to prevent health problems in the following areas: unintentional injury; violence; suicide; tobacco use and addiction; alcohol or other drug use; unintended pregnancy, HIV/AIDS, and STD infection; unhealthy dietary patterns; and inadequate physical activity.
 - ECBP 2.1 All priority areas. Baseline: 25.6% (SHPPS 2006). Target: 28.2%
 - ECBP 2.2 Unintentional injury. Baseline: 81.7% (SHPPS 2006). Target: 89.9%
 - ECBP 2.3 Violence. Baseline: 81.9% (SHPPS 2006). Target: 90.1%
 - ECBP 2.4 Suicide. Baseline: 43.9% (SHPPS 2006). Target: 48.3%
 - ECBP 2.5 Tobacco use and addiction. Baseline: 81.0% (SHPPS 2006). Target: 89.1%
 - ECBP 2.6 Alcohol and other drug use. Baseline: 81.8% (SHPPS 2006). Target: 90.0%
 - ECBP 2.7 Unintended pregnancy, HIV/AIDS. And STD infection. Baseline: 39.3% (SHPPS 2006). Target: 43.2%
 - ECBP 2.8 Unhealthy dietary patterns. Baseline: 84.3% (SHPPS 2006). Target: 92.7%
 - ECBP 2.9 Inadequate physical activity. Baseline: 79.2% (SHPPS 2006). Target: 87.1%
- ECBP -3) Increase the proportion of elementary, middle, and senior high schools that have health education goals or objectives that address the knowledge and skills articulated in the National Health Education Standards.
 - ECBP 3.1 Comprehending concepts related to health promotion and disease prevention (knowledge). Baseline: 97.2% (SHPPS 2006). Target: 100%
 - ECBP 3.2 Accessing valid information and health promoting products and services (skills). Baseline: 86.1% (SHPPS). Target: 100%
 - ECBP 3.3 Advocating for personal, family, and community health (skills).

Baseline: 92.1% (SHPPS 2006). Target: 100%

- ECBP 3.4 Analyzing the influence of culture, media, technology, and other factors on health (skills). Baseline: 85.4% (SHPPS 2006). Target: 100%
- ECBP 3.5 Practicing health-enhancing behaviors and reducing health risks (skills). Baseline: 98.9% (SHPPS 2006). Target: 100%
- ECBP 3.6 Using goal-setting and decision-making skills to enhance health (skills). Baseline: 95.9% (SHPPS). Target: 100%
- ECBP 3.7 Using interpersonal communication skills to enhance health (skills).
 - Baseline: 94.2% (SHPPS). Target: 100%

- ECBP-4) Increase the proportion of elementary, middle, and senior high schools that provide school health education to promote personal health and wellness in the following areas: hand washing or hand hygiene; oral health; growth and development; sun safety and skin cancer prevention; benefits of rest and sleep; ways to prevent vision and hearing loss; and the importance of health screenings and checkups.
 - ECBP 4.1 Hand washing or hand hygiene. Baseline: 83.4% (SHPPS 2006). Target: 91.7%
 - ECBP 4.2 Dental and oral health. Baseline: 64.8% (SHPPS 2006). Target: 71.3%
 - ECBP 4.3 Growth and development. Baseline: 76.0% (SHPPS). Target: 83.6%
 - ECBP 4.4 Sun safety or skin cancer prevention. Baseline: 72.4% (SHPPS 2006). Target: 79.6%
 - ECBP 4.5 Benefits of rest and sleep. Baseline: 90.2% (SHPPS 2006). Target: 99.2%
 - ECBP 4.6 Ways to prevention vision and hearing loss. Baseline: 49.4% (SHPPS 2006). Target: 54.3%
 - ECBP 4.7 Benefits of health screenings and checkups. Baseline" 60.6% (SHPPS 2006). Target: 66.7%
- EMC-4) Increase the proportion of elementary, middle, and senior high schools that require school health education.
 - EMC 4.1 Increase the proportion of schools that require newly hired staff who teach required health education to have undergraduate or graduate training in health education.
 - EMC 4.1.1 Elementary schools. Baseline: 35.2% (SHPPS 2006). Target: 38.7%
 - EMC 4.1.2 Middle schools. Baseline: 58.9% (SHPPS 2006). Target: 62.8%
 - EMC 4.1.3 Senior high schools. Baseline: 76.8% (SHPPS 2006). Target: 84.5%
 - EMC 4.2 Increase the proportion of schools that require newly hired staff who teach required health instruction to be certified, licensed, or endorsed by the State in health education.
 - EMC 4.2.1 Elementary schools. Baseline: 32.5% (SHPPS 2006). Target: 35.8%
 - EMC 4.2.2 Middle schools. Baseline: 50.7% (SHPPS 2006). Target: 55.8%
 - EMC 4.2.3 Senior high schools. Baseline: 72.8% (SHPPS 2006). Target: 80.1%
 - EMC 4.3 Increase the proportion of schools that require cumulative instruction in health education that meet the US National Health Education Standards for elementary, middle, and senior high schools.
 - EMC 4.3.1 Elementary schools. Baseline: 7.5% (SHPPS 2006). Target: 11.5%
 - EMC 4.3.2 Middle schools. Baseline: 10.3% (SHPPS 2006). Target: 14.3%
 - EMV 4.3.3 Senior high schools. Baseline: 6.5% (SHPPS 2006). Target 10.5%
 - EMC 4.4 Increase the proportion of required health education classes or courses with a teacher who had professional development related to teaching personal and social skills for behavior change within the past 2 years. Baseline: 52.5% (SHPPS 2006). Target: 57.8%
- ECBP-7) Increase the proportion of college and university students who receive information from their institution on each of the priority health-risk behavior areas (all priority areas, unintentional injury, violence, suicide, tobacco use and addiction, alcohol and other drug use, unintended pregnancy,
 - HIV/AIDS, and STD infection, unhealthy dietary patterns and inadequate physical activity).
 - ECBP 7.1 All priority areas [developmental].
 - ECBP 7.2 Unintentional injury. Baseline: 27.3% (NCHA/ACHA 2009). Target: 30.0%
 - ECBP 7.3 Violence. Baseline: 34.3% (NCHA/ACHA 2009). Target: 37.7%
 - ECBP 7.4 Suicide. Baseline: 29.2% (NCHA/ACHA 2009). Target: 32.1%
 - ECBP 7.5 Tobacco use and addiction. Baseline: 33.4% (NCHA/ACHA 2009). Target: 36.7%
 - ECBP 7.6 Alcohol and other drug use. Baseline: 66.2% (NCHA/ACHA 2009). Target: 72.8%
 - ECBP 7.7 Unintended pregnancy. Baseline: 39.9% (NCHA/ACHA 2009). Target: 43.9%
 - ECBP 7.8 HIV, AIDS, and STD infection. Baseline: 52.5% (NCHA/ACHA 2009). Target: 57.8%
 - ECBP 7.9 Unhealthy dietary patterns. Baseline: 52.0% (NCHA/ACHA 2009). Target: 57.2%
 - ECBP 7.10 Inadequate physical activity. Baseline: 56.0% (NCHA/ACHA 2009). Target: 61.6%

- FP-12) Increase the proportion of adolescents who received formal instruction on reproductive health topics before they were 18 years old.
 - FP 12.1 Abstinence females. Baseline: 87.2% (NSFG 2006-2008). Target: 95.5%
 - FP 12.2 Abstinence males. Baseline: 81.1 % (NSFG 2006-2008). Target: 89.2%
 - FP 12.3 Birth control methods females. Baseline: 69.5% (NSFG 2006-2008). Target: 76.4%
 - FP 12.4 Birth control methods males. Baseline: 61.9% (NSFG 2006-2008). Target: 68.1%
 - FP 12.5 HIV/AIDS Prevention females. Baseline: 88.3% (NSFG 2006-2008). Target: 97.2%
 - FP 12.6 HIV/AIDS Prevention males. Baseline: 89.0% (NSFG 2006-2008). Target: 97.9%
 - FP 12.7 Sexually transmitted diseases females. Baseline: 93.2% (NSFG 2006-2008). Target: 97.9%
 - FP 12.8 Sexually transmitted diseases males. Baseline: 92.2% (NSFG 2006-2008). Target: 94.2%

Physical Education and Physical Activity

- PA-4) Increase the proportion of the Nation's public and private schools that require daily physical education for all students.
 - PA 4.1 Elementary schools. Baseline: 3.8% (SHPPS 2006). Target: 4.2%
 - PA 4.2 Middle and junior high schools. Baseline: 7.9% (SHPPS 2006). Target: 8.6%
 - PA 4.3 Senior high schools. Baseline: 2.1% (SHPPS 2006). Target: 2.3%
- PA-5) Increase the proportion of adolescents who participate in daily school physical education. Baseline: 33.3% (YRBS 2009). Target: 36.6%
- PA-6) Increase regularly scheduled school recess in the U.S.
 - PA 6.1 increase the number of states that require regularly scheduled elementary school recess. Baseline: 7 states (SHPPS 2006). Target: 17 States
 - PA 6.2 Increase the proportion of school districts that require regularly scheduled elementary school recess. Baseline: 57.1% (SHPPS 2006). Target: 62.8%
- PA-7) Increase the proportion of school districts that require or recommend elementary school recess for an appropriate period of time. Baseline: 61.5% (SHPPPS 2006). Target: 67.7%
- PA-8) Increase the proportion of children and adolescents who do not exceed recommended limits for screen time.
- IVP-27) Increase the proportion of public and private schools that require students to wear appropriate protective gear when engaged in school-sponsored physical activities.
 - IVP 27.1 Physical education. Baseline: 76.8% (SHPPS 2006). Target: 84.5%
 - IVP 27.2 Intramural activities and physical activity clubs. Baseline: 85.5% (SHPPS 2006). Target: 94.4%

Safe Learning Environments

- AH–7) Reduce the proportion of adolescents who have been offered, sold, or given an illegal drug on school property. Baseline: 22.7% of students in grades 9–12 were offered, sold, or given an illegal drug on school property during the past 12 months (YRBS 2009). Target: 20.4%
- AH-8) Increase the proportion of adolescents whose parents consider them to be safe at school. Baseline: 86.4% of parents of adolescents aged 12 to 17 years (NSCH 2007). Target: 95%
- AH–9) Increase the proportion of middle and high schools that prohibit harassment based on a student's sexual orientation or gender identity [developmental].
- AH–10) Decrease the proportion of public schools with a serious violent incident. Baseline: 17.2% (SSOCS 2007–08). Target: 15.5%
- IVP-34) Reduce physical fighting among adolescents. Baseline: 31.5% (YRBS 2009). Target: 28.4%
- IVP-35) Reduce bullying among adolescents. Baseline: 19.9% (YRBS 2009). Target: 17.9%
- IVP-36) Reduce weapon carrying by adolescents on school property. Baseline: 5.6% (YRBES 2009). Target: 4.6%

School Physical Environment

- DH-9) Reduce the proportion of people with disabilities who encounter barriers to participating in home, school, work, or community activities. [developmental].
- EH-16) Increase the proportion of the Nation's elementary, middle, and high schools that have official school policies and engage in practices that promote a healthy and safe physical school environment.
 - EH 16.1 Have an indoor quality management program. Baseline: 51.4% (SHPPS 2006). Target: 54.4%
 - EH 16.2 Have a plan for how to address mold problems. Baseline: 67% (SHPPS 2006). Target: 74%
 - EH 16.3 Have a plan for how to use, label, store, and dispose of hazardous materials. Baseline: 85.9% (SHPPS 2006). Target: 94.5%
 - EH 16.4 Reduce exposure to pesticides by using spot treatments and baiting rather than widespread application of pesticide. Baseline: 57.9 (SHPPS 2006). Target: 63.7%
 - EH 16.5 Reduce exposure to pesticides by marking areas to be treated with pesticides. Baseline: 56.2% (SHPPS 2006). Target: 61.8%
 - EH 16.6 Reduce exposure to pesticides by informing students and staff prior to application of the pesticide. Baseline: 57.9% (SHPPS 2006). Target: 63.7%
 - EH 16.7 Inspect drinking water outlets for lead. Baseline: 55.7% (SHPPS 2006). Target: 61.3%
 - EH 16.8 Among schools with community water systems, inspect drinking water outlets for bacteria. Baseline: 58.8% (SHPPS 2006). Target: 64.7%
 - EH 16.9 Among school with community water systems, inspect drinking water outlets for coliforms. Baseline: 55.2% (SHPPS 2006). Target: 60.7%
- EH-23) Reduce the number of new schools sited within 500 feet of an interstate or Federal or State highway. Baseline: 18.9% (GRASP/ATSDR 2005-2006). Target: 18.9%
- TU-15) Increase tobacco-free environments in schools, including all school facilities, property, vehicles, and school events.
 - TU 15.1 Junior high school. Baseline: 65.4% (SHPPS 2006). Target: 100%
 - TU 15.2 Middle school. Baseline: 58.7% (SHPPS 2006). Target: 100%
 - TU 15.3 High school. Baseline: 66.1%) SHPPS 2006). Target: 100%
 - TU 15.4 Head Start [developmental].

Family and Community Involvement

- AH-2) Increase the proportion of adolescents who participate in extracurricular and out-of-school activities. Baseline: 82.5% (NSCH 2007). Target: 90.8%
- AH-3) Increase the proportion of adolescents who are connected to a parent or other positive adult caregiver.
 - AH-3.1 Increase the proportion of adolescents who have an adult in their lives with whom they can talk about serious problems. Baseline: 75.7% (NSDUS 2008). Target: 83.3%
 - AH 3.2 Increase the proportion of parents who attend events and activities in which their adolescents participate. Baseline: 82.1% (NSCH 2007). Target: 90.3%
- FP-13) Increase the proportion of adolescents who talked to a parent or guardian about reproductive health topics before they were 18 years old.
- PA-10) Increase the proportion of the Nation's public and private schools that provide access to their physical activity space and facilities for all persons outside of normal school hours. Baseline: 28.8% (SHPPS). Target: 31.7%

Health Status and Services

- ECBP-5) Increase the proportion of the Nation's elementary, middle, and senior high schools that have a full time registered school nurse-to-student ratio of at least 1:750.
 - ECBP 5.1 All elementary, middle, and senior high schools. Baseline: 40.6% (SHPPS 2006). Target: 44.7%
 - ECBP 5.2 Senior high schools. Baseline: 33.5% (SHPPS 2006). Target: 36.9%
 - ECBP 5.3 Middle schools. Baseline: 43.9% (SHPPS 2006). Target: 48.3%
 - ECBP 5.4 Elementary schools. Baseline: 41.4% (SHPPS 2006). Target: 45.5%
- SH-3) Increase the proportion of students in grades 9 12 who got sufficient sleep (defined as 8 or more hours on an average school night). Baseline: 30.9% (YRBS 2009). Target: 33.2%
- IID-10) Maintain vaccination coverage levels for children in kindergarten.
 - IID 10.1 TDaP (4 or more doses). Baseline: 95% (SIAS 2008). Target: 95%
 - IID 10.2 MMR (2 or more doses). Baseline: 95% (SIAS 2008). Target: 95%
 - IID 10.3 Polio (3 or more doses). Baseline: 95% (SIAS 2008). Target: 95%
 - IID 10.4 Hepatitis B (3 or more doses). Baseline: 96% (SIAS 2008). Target: 95%
 - IID 10.5 Varicella vaccine (2 or more doses). Baseline 94% (SIAS 2008). Target: 95%
- IID-11) Increase routine vaccination coverage levels for adolescents.
 - IID 11.1 1 dose of tetanus-diphtheria-acellular pertussis (Tdap) booster vaccine by 13 to 15 years. Baseline: 47% (NIS Teen 2008). Target: 80%
 - IID 11.2 2 doses of varicella vaccine by age 13 to 15 years (excluding children who have had varicella). Baseline: 37% (NIS Teen 2008). Target: 90%
 - IID 11.3 1 dose Meningococcal vaccine (MCV) by age 13 to 15 years. Baseline: 44% (NIS Teen 2008). Target: 80%
 - IID 11.4 3 doses Human papillomavirus vaccine (HPV) for females by age 13 to 15 years. Baseline: 17% (NIS Teen). Target: 80%
- IID-12) Increase the percentage of children and adults who are vaccinated annually against seasonal influenza.
 - IID 12.3 Children 5 12 years. Baseline: 26% (NHIS 2008). Target: 80%
 - IID 12.4 Children aged 13-17. Baseline: 10% (NIS Teen 2008). Target: 80%
- RD-5) Reduce the number of school or work days missed by persons with asthma due to asthma.
 - RD 5.1 Reduce the number of students with asthma ages 5-17 who miss school days due to asthma. Baseline: 58.7% (NHIS 2008). Target: 48.7%
- OH-9) Increase the proportion of school-based health centers with an oral health component.
 - OH 9.1 Increase the proportion of school-based health centers with an oral health component that includes dental sealants. Baseline: 24.1% (NASBHC 3007-3008). Target: 26.5%
 - OH 9.2 Increase the proportion of school-based health centers with an oral health component that includes dental care. Baseline: 10.1% (NASBHC 2007-2008). Target: 11.1%
 - OH 9.3 Increase the proportion of school-based health centers with an oral health component that includes topical fluoride. Baseline: 29.2% (NASBHC 2007-2008). Target: 32.1%

Nutrition Services

- AH-6) Increase the proportion of schools with a school breakfast program.
 - Baseline: 68.6% (SHPPS 2006). Target: 75.5%
- NWS-2) Increase the proportion of schools that offer nutritious foods and beverages outside of school meals.
 - NWS 2.1 Increase the proportion of schools that do not sell or offer calorically sweetened beverages to students. Baseline: 9.3% (SHPPS 2006). Target: 21.3%

NWS 2.2 Increase the proportion of school districts that require schools to make fruits or vegetables available whenever other food is offered or sold. Baseline: 6.6% (SHPPS 2006). Target: 18.6%

Staff wellness

ECBP-8) Increase the proportion of worksites that offer an employee health promotion program to their employees [developmental].

ECBP-9) Increase the proportion of employees who participate in employer-sponsored health promotion activities [developmental].

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