

2016

# School Health Profiles

Montana and U.S. Results

A Comparison Report of U.S. and Montana  
School Health Policies and Practices  
and  
Health Education Programs



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## **What is the School Health Profiles?**

The School Health Profiles (Profiles) is a system of surveys assessing school health policies and practices in states, large urban school districts, and territories. Profiles surveys are conducted biennially by education and health agencies among middle and high school principals and health education teachers. Profiles monitors the current status of

- School health education requirements and content
- Physical education and physical activity
- Practices related to bullying and sexual harassment
- School health policies related to tobacco-use prevention and nutrition
- School-based health services
- Family engagement and community involvement
- School health coordination

## **How are Profiles data used?**

Education and health officials use Profiles data to

- Describe school health policies and practices and compare them across jurisdictions
- Identify professional development needs
- Plan and monitor programs
- Support health-related policies and legislation
- Seek funding
- Garner support for future surveys

## **How do specific states and school districts use their Profiles data?**

- The District of Columbia Office of the State Superintendent of Education used Profiles data to inform the modification and revamping of their 2016 Health Education Standards.
- The Orange County Public Schools used Profiles data to support updates to the district's Local Wellness Policy, as well as to support updates to human sexuality lesson plans and resources for students in grades 6 through 12.

## **How is Profiles conducted?**

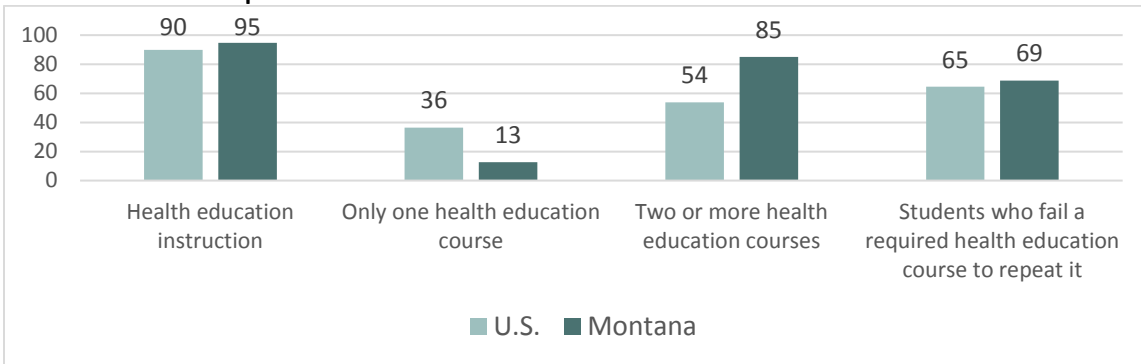
- Profiles is conducted among secondary schools in a state, large urban school district, or territory. Profiles data are collected from self-administered questionnaires from the principal and the health education teacher at each school. In 2016, 48 states obtained weighted data. Weighted data means that at least 70% of the principals and health education teachers in the sample completed the survey. Weighted data represents the state, whereas unweighted data represent only the schools that completed the questionnaire.

## School Health Profiles Health Education Teacher Results

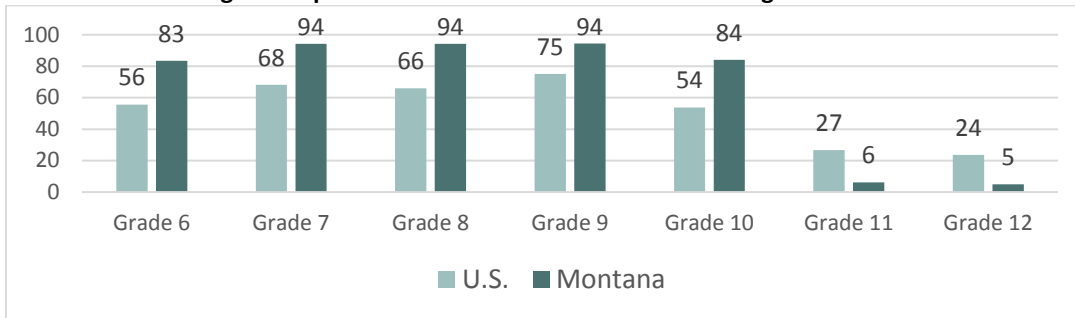
State	Sample size	Response rate
Montana	246/278 teachers	88%

### Required Health Education Courses

Percent of schools that required:

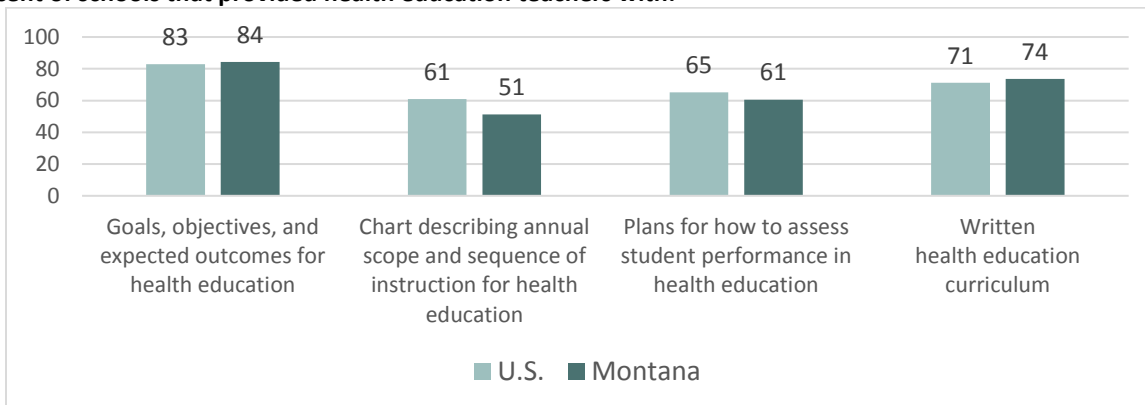


Percent of schools that taught a required health education course in each grade.



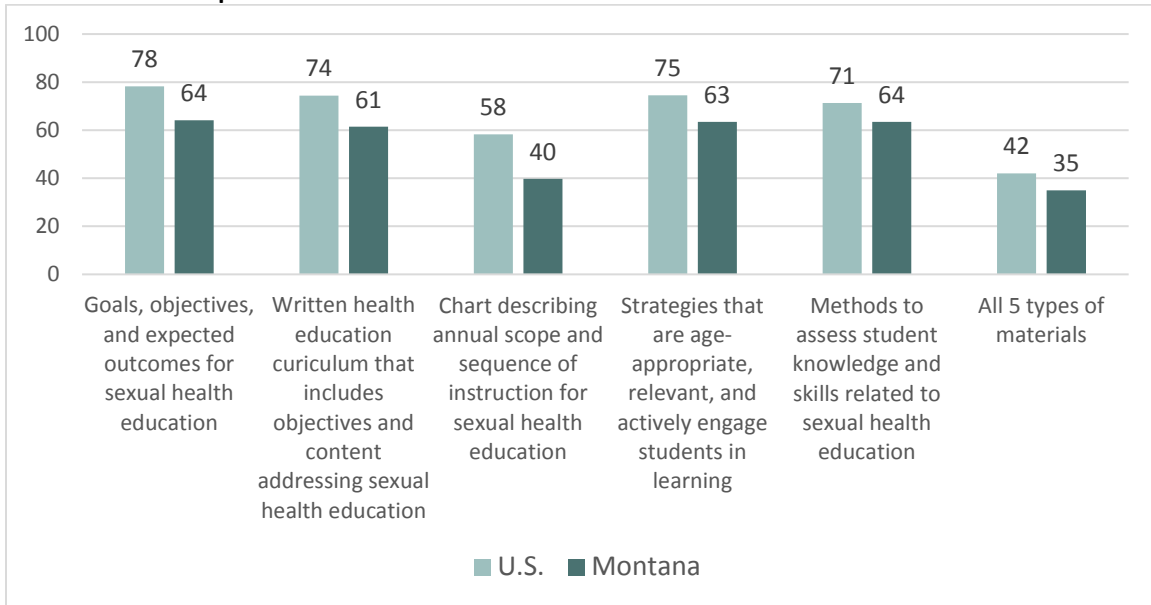
### Health Education Materials

Percent of schools that provided health education teachers with:

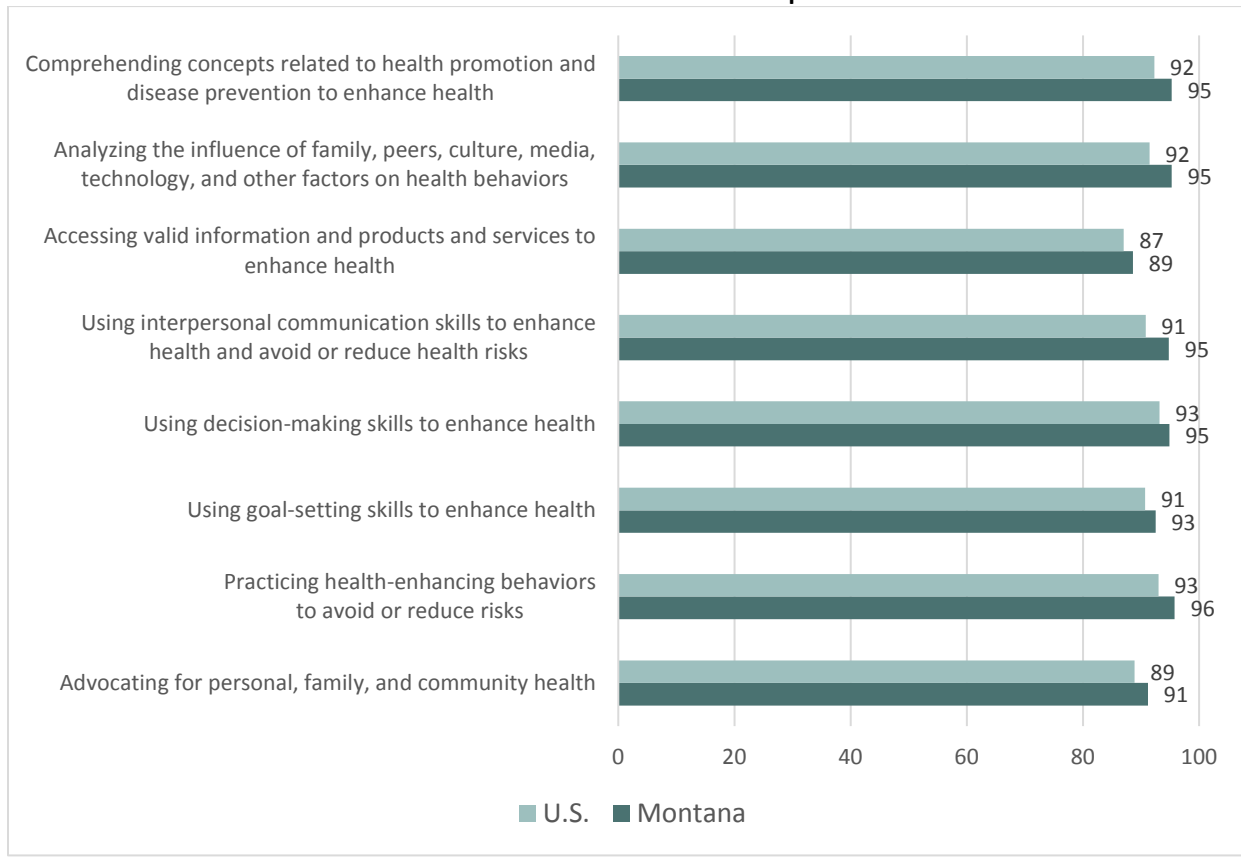


## School Health Profiles Health Education Teacher Results

**Percent of schools that provide those who teach sexual health education with materials.**

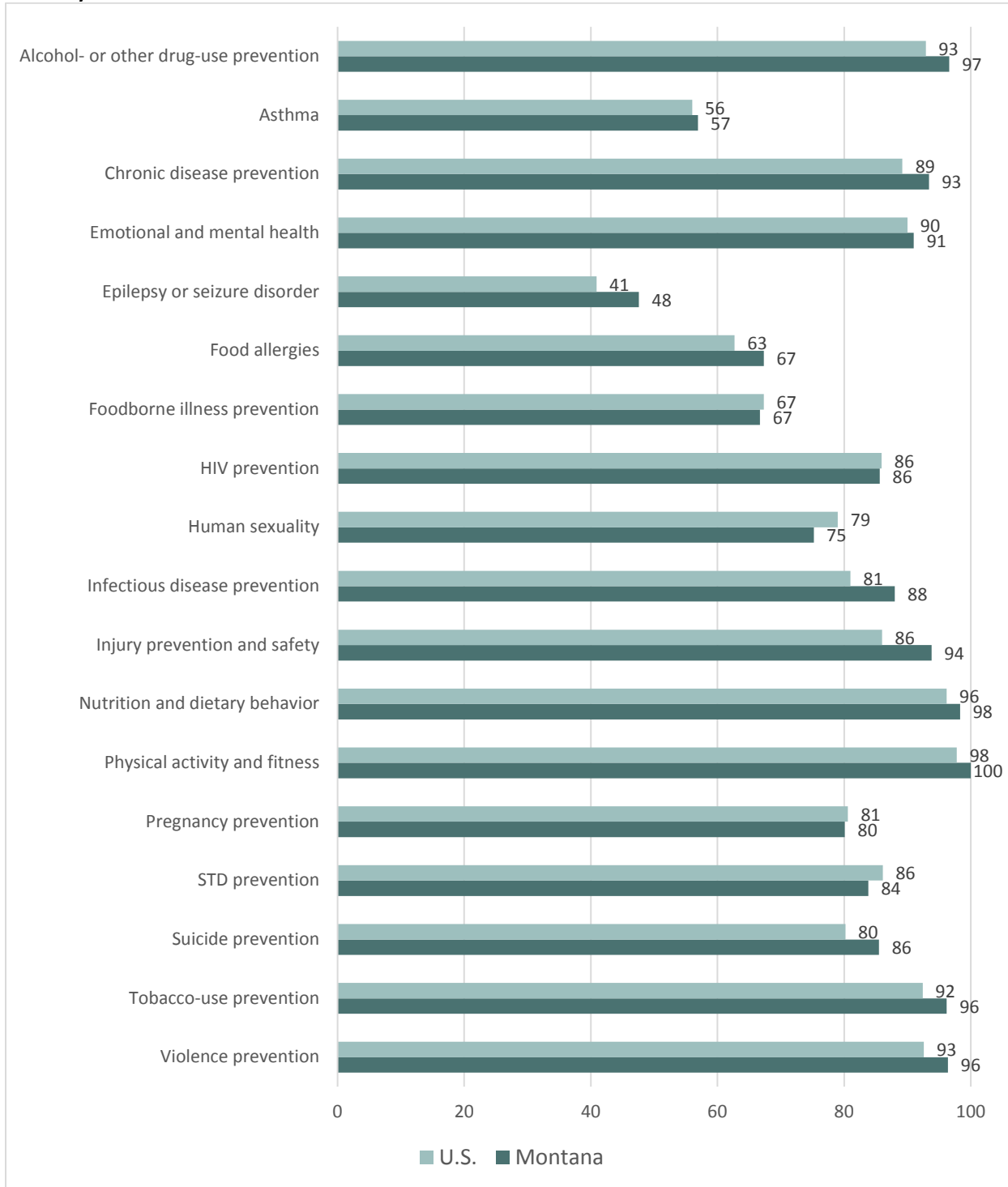


**Percent of schools with a health education curriculum that addressed specific skills.**



## School Health Profiles Health Education Teacher Results

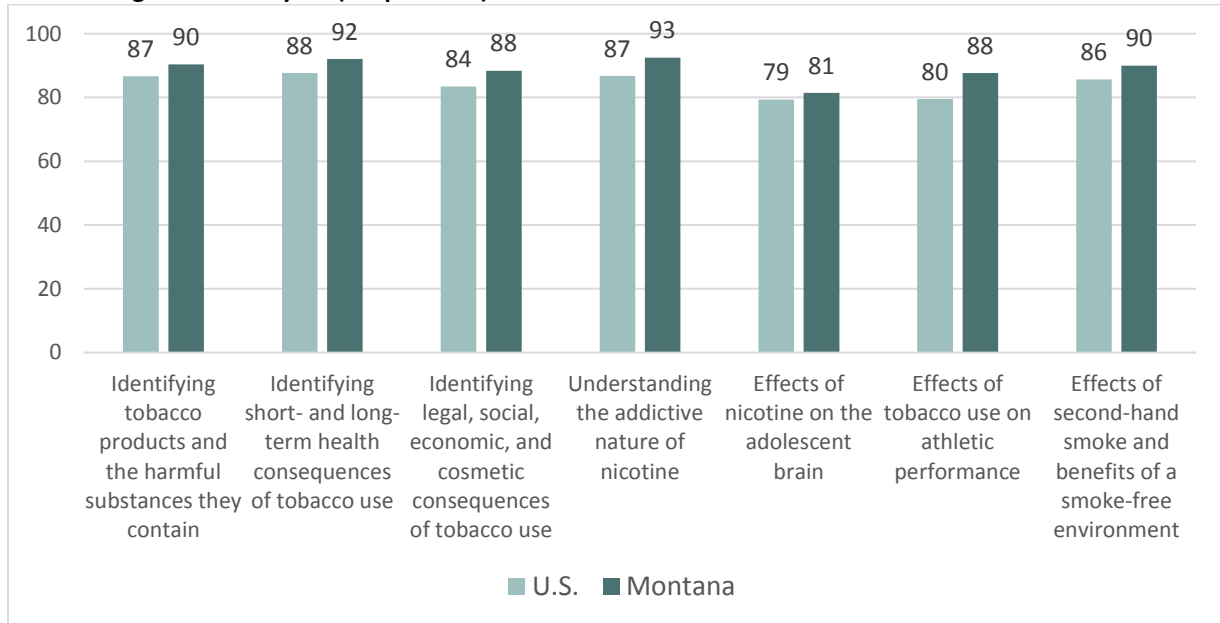
Percent of schools where teachers taught the following topics in a required health education course during the current year.



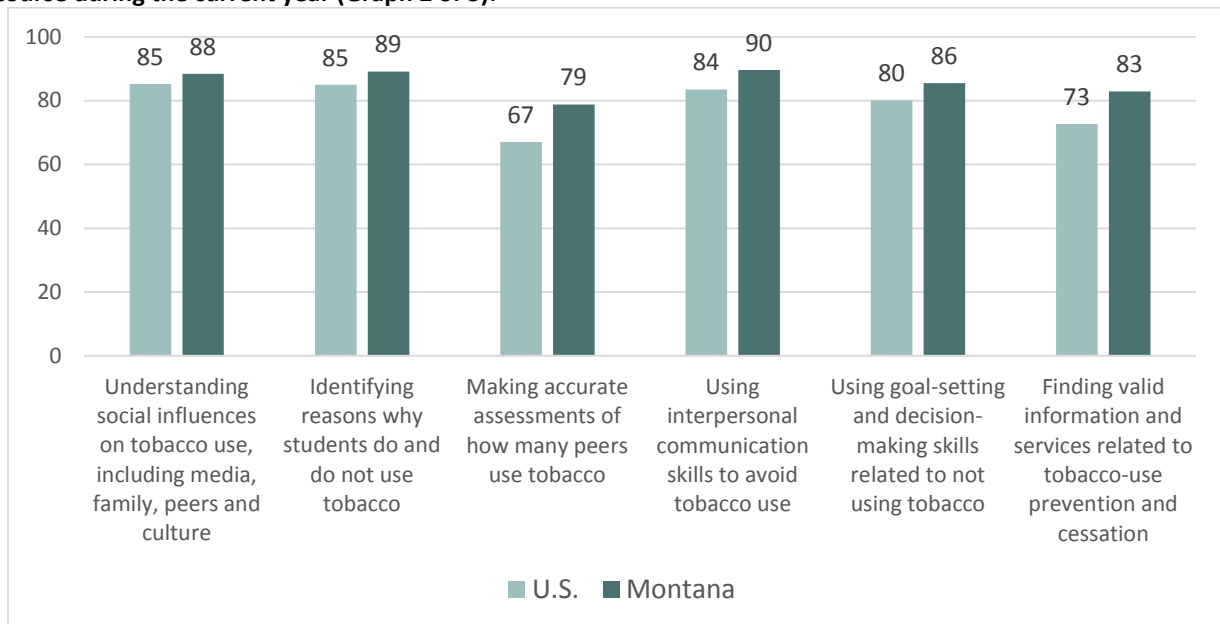
## School Health Profiles Health Education Teacher Results

### Tobacco-Use Prevention Topics Taught

Percent of schools where teachers taught specific tobacco use-prevention topics in a required health education course during the current year (Graph 1 of 3):

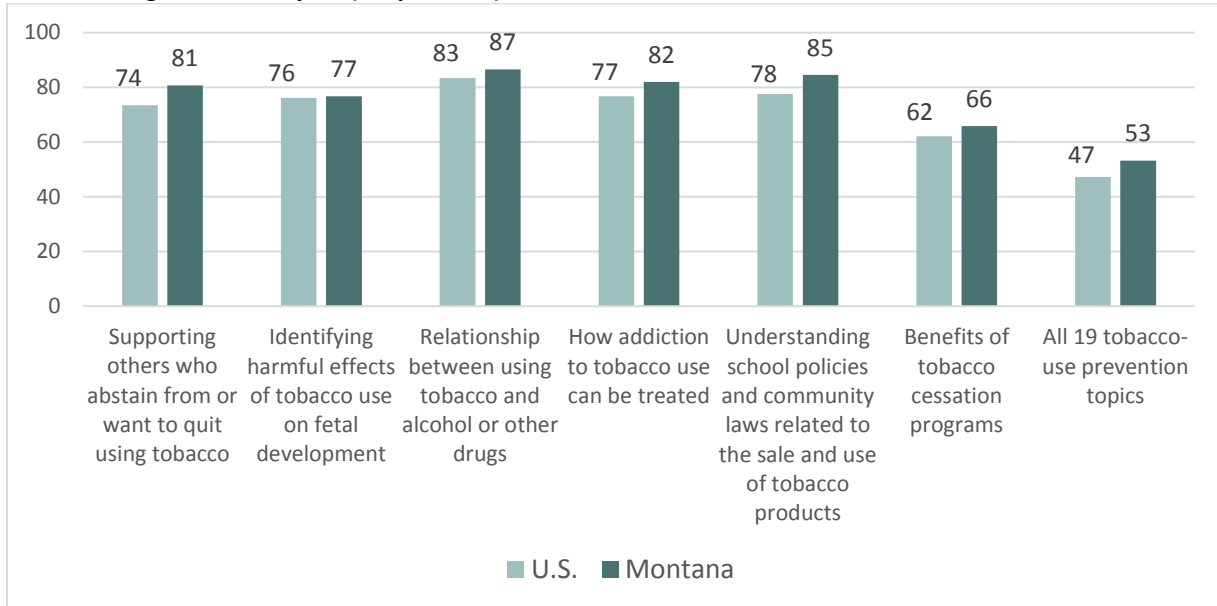


Percent of schools where teachers taught specific tobacco use-prevention topics in a required health education course during the current year (Graph 2 of 3):



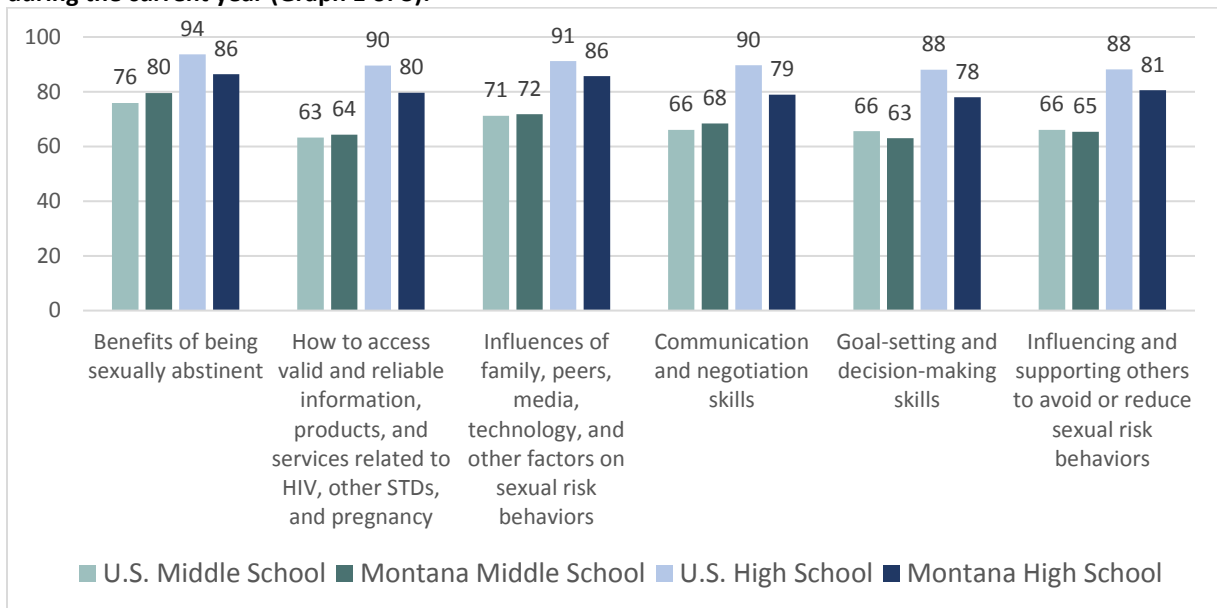
## School Health Profiles Health Education Teacher Results

**Percent of schools where teachers taught specific tobacco use-prevention topics in a required health education course during the current year (Graph 3 of 3):**



### Sexual Health Topics Taught

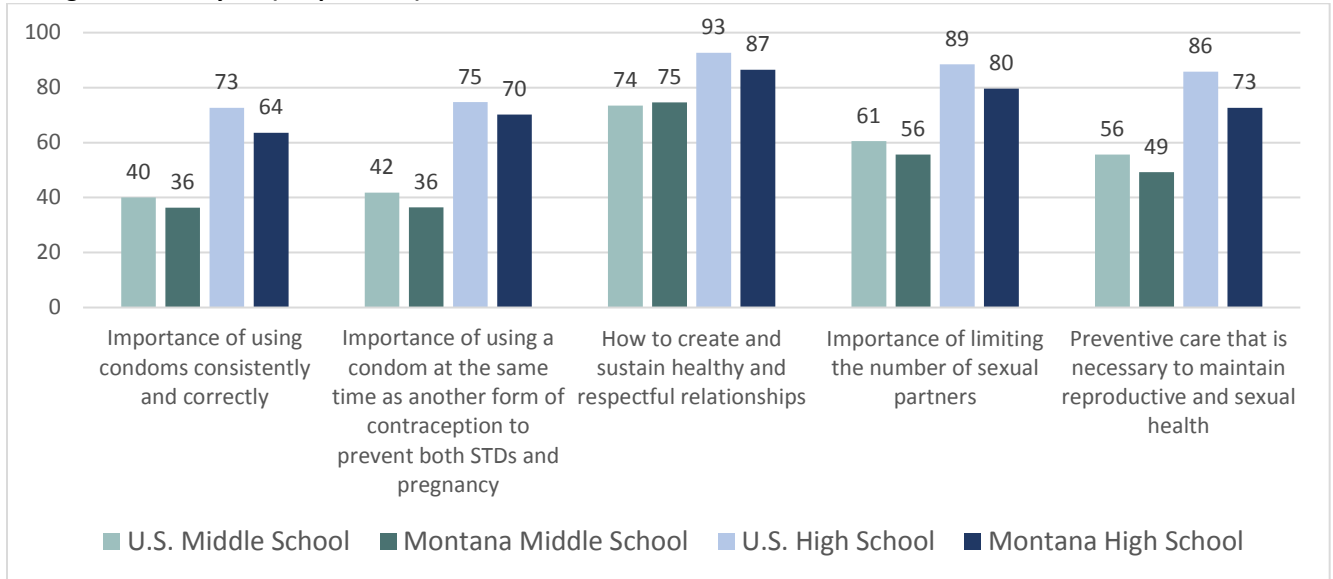
**Percent of schools where teachers taught specific sexual health topics in a required health education course during the current year (Graph 1 of 3):**



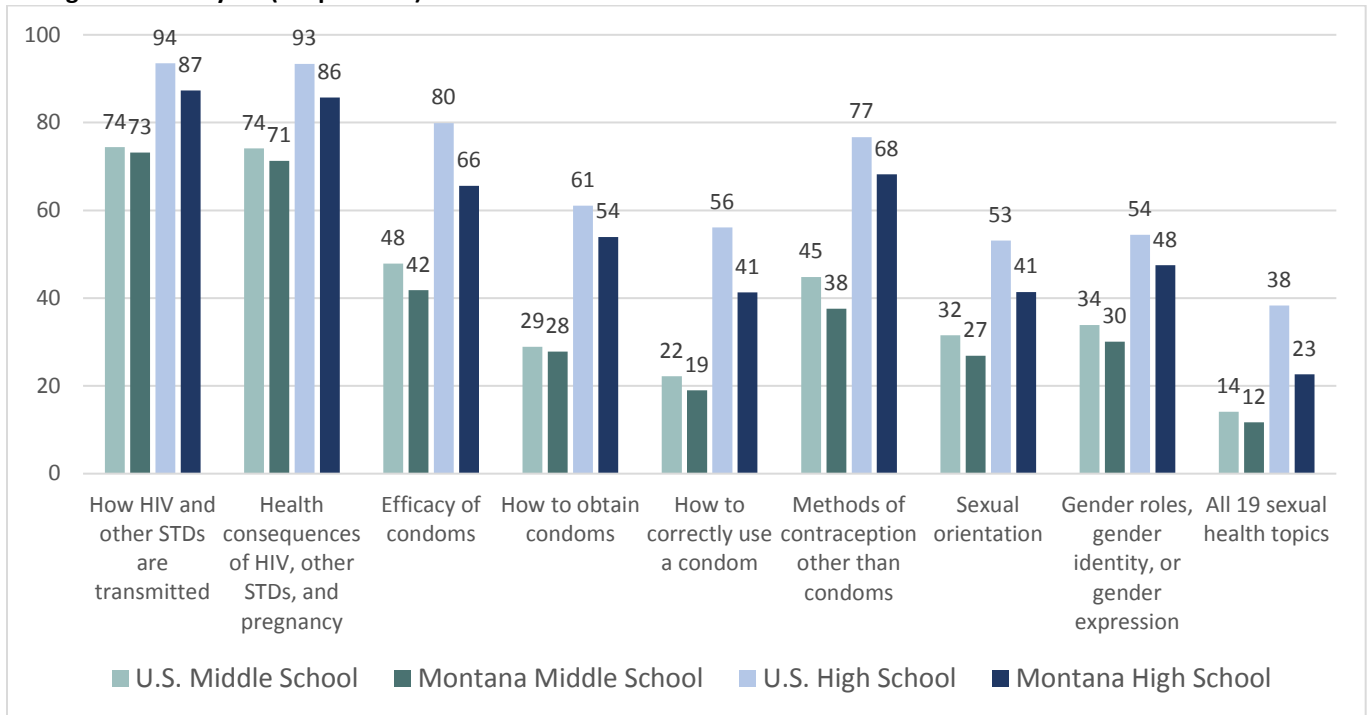


## School Health Profiles Health Education Teacher Results

**Percent of schools where teachers taught specific sexual health topics in a required health education course during the current year (Graph 2 of 3):**



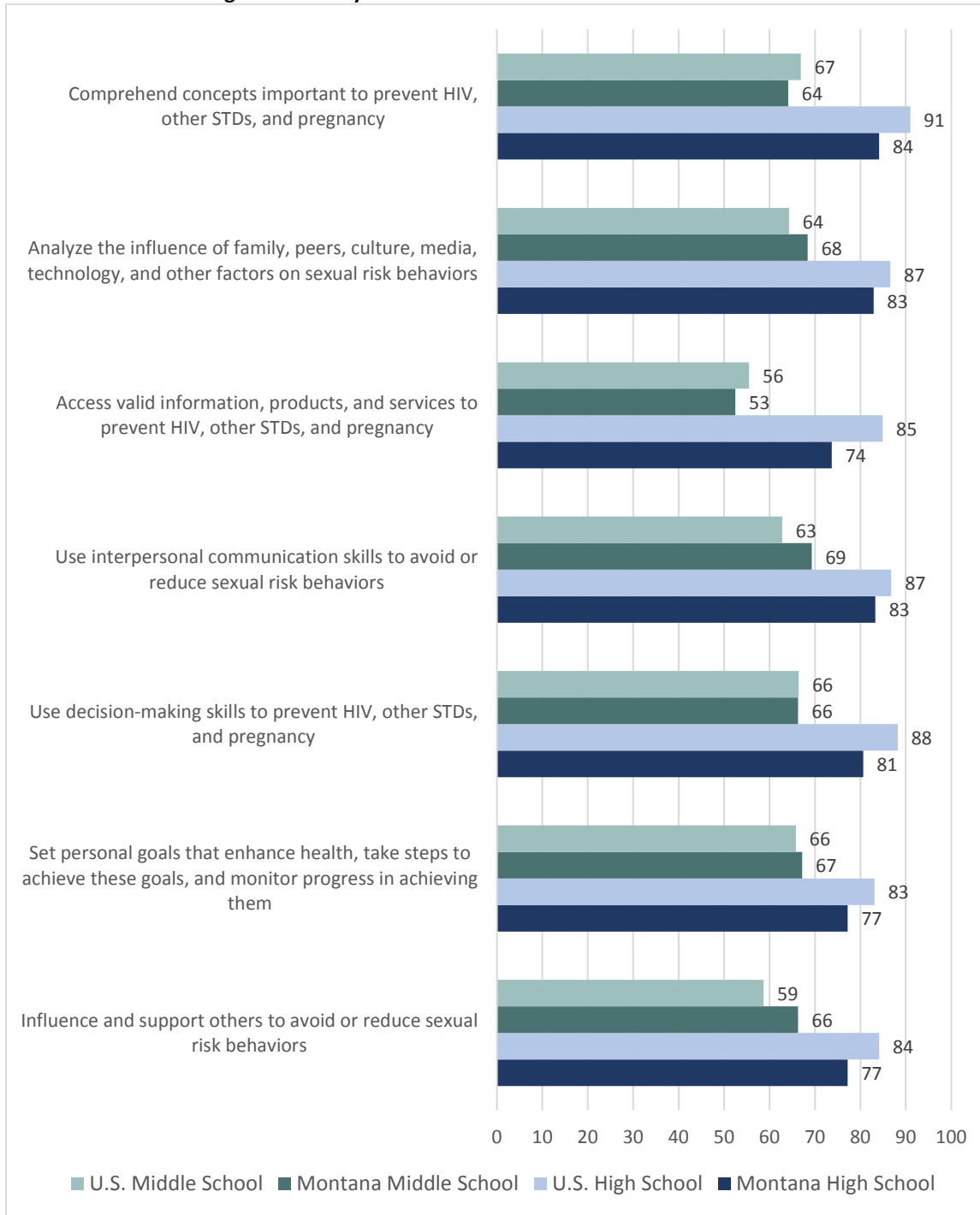
**Percent of schools where teachers taught specific sexual health topics in a required health education course during the current year (Graph 3 of 3):**



## School Health Profiles Health Education Teacher Results

### Health Topics Assessment

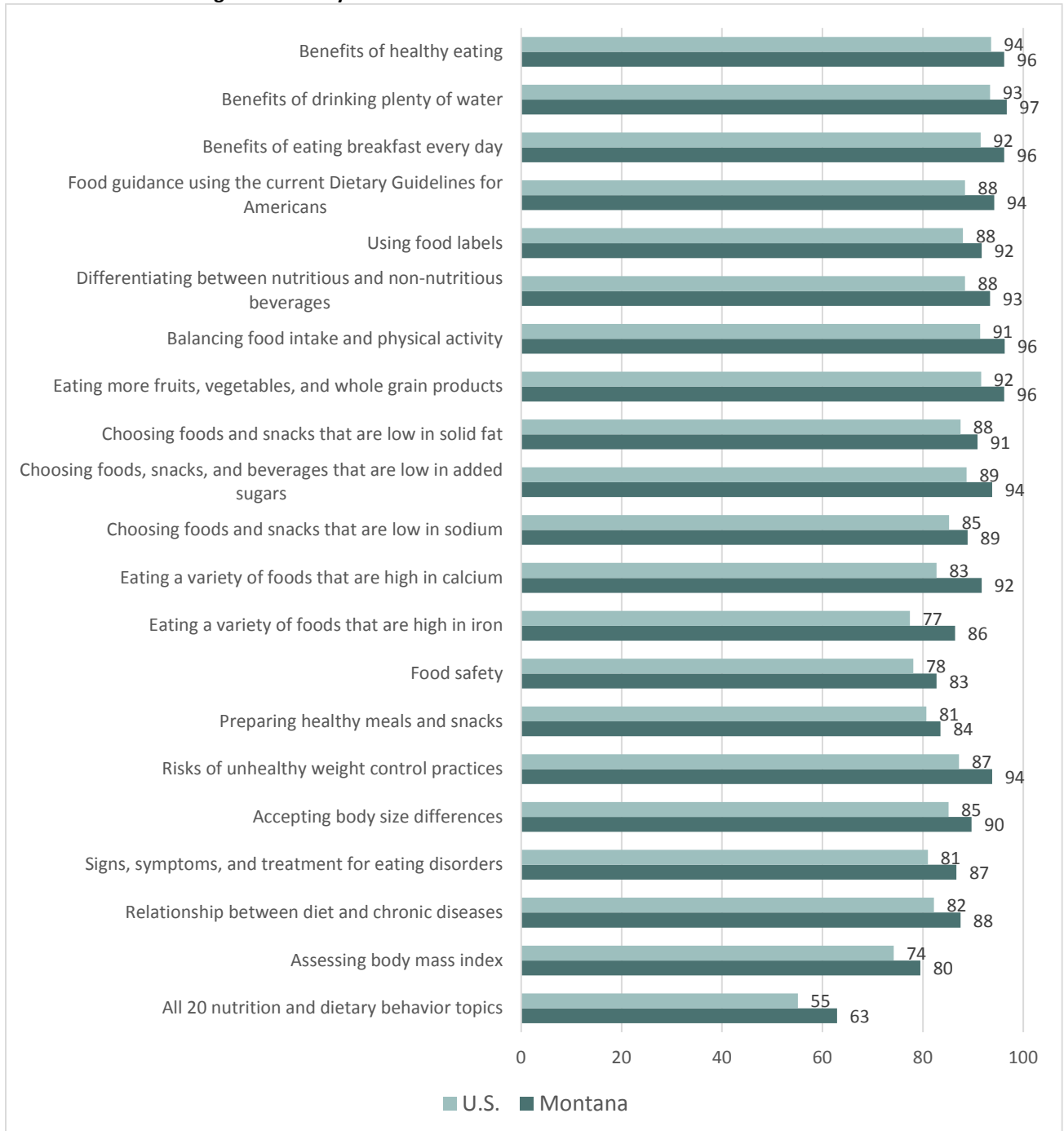
Percent of schools where teachers assessed the ability of students to do specific skills in a required health education course during the current year.



## School Health Profiles Health Education Teacher Results

### Nutrition and Dietary Behavior Topics Taught

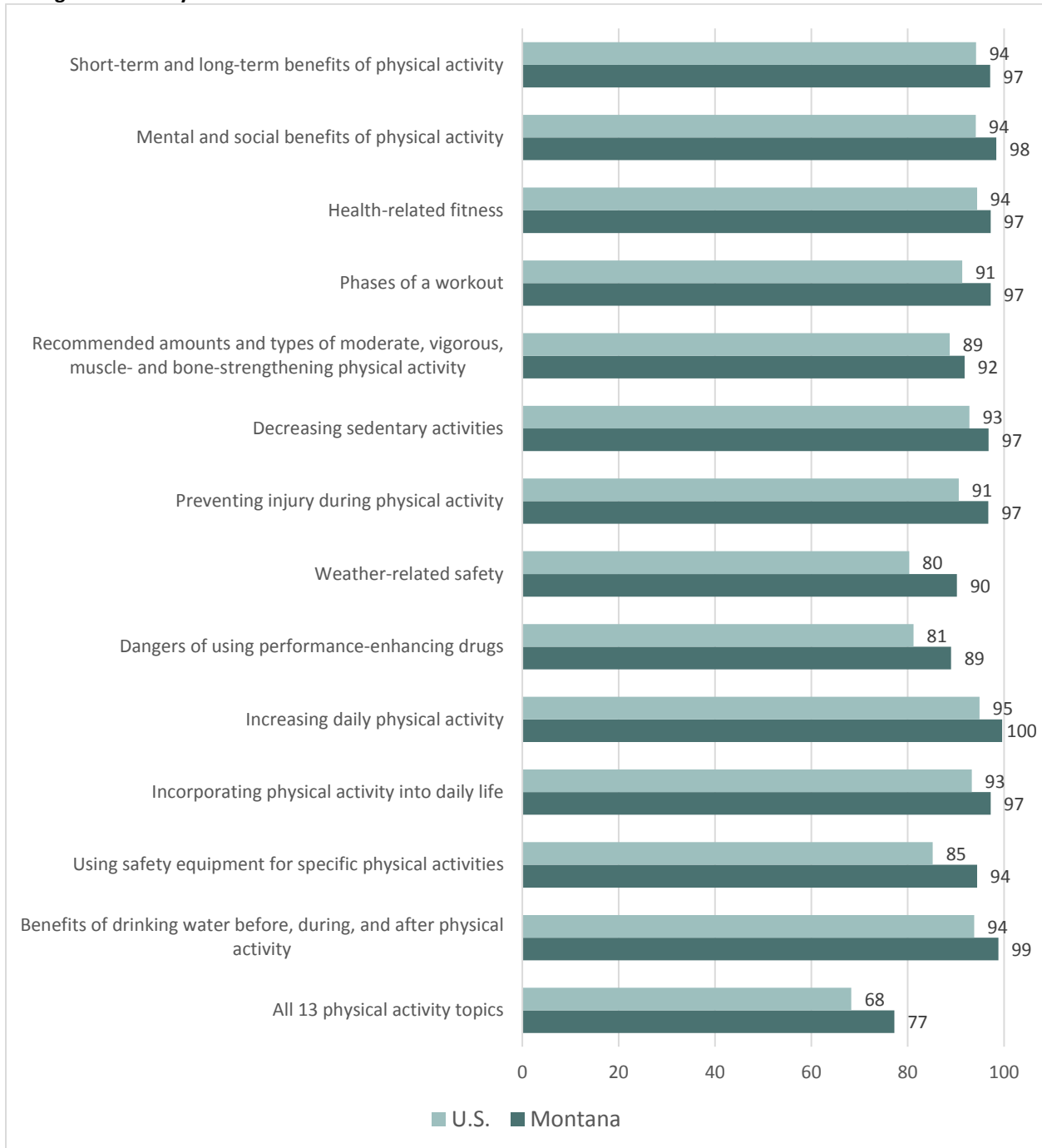
Percent of schools where teachers taught specific nutrition and dietary behavior topics in a required health education course during the current year.



## School Health Profiles Health Education Teacher Results

### Physical Activity Topics Taught

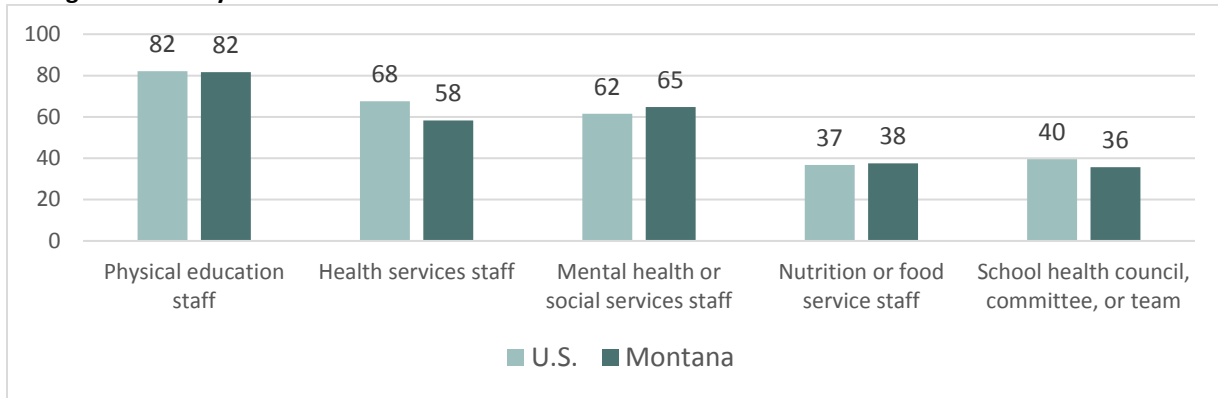
Percent of schools where teachers taught specific physical activity topics in a required health education course during the current year.



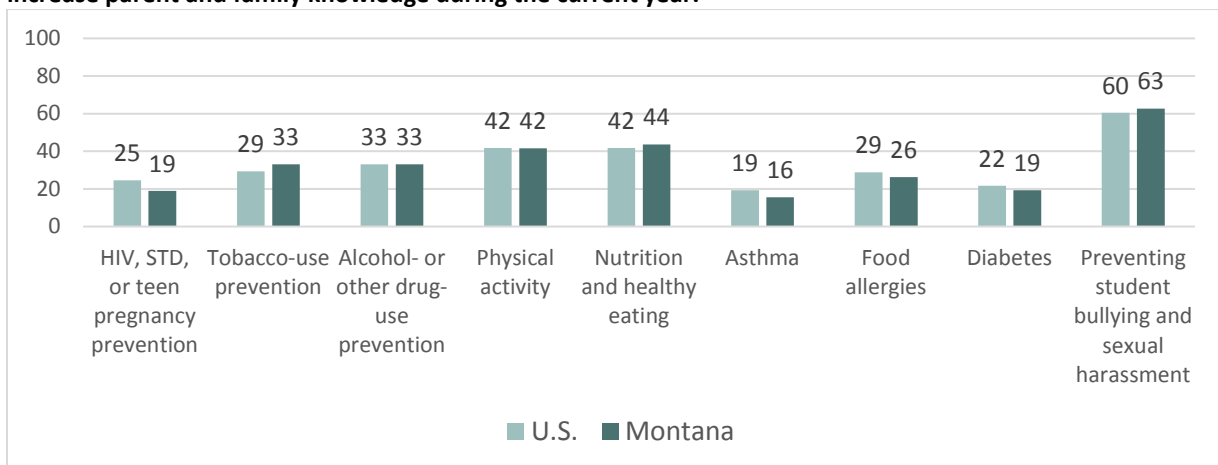
## School Health Profiles Health Education Teacher Results

### Collaboration

Percent of schools in which health education staff worked on health education activities with other school staff during the current year.



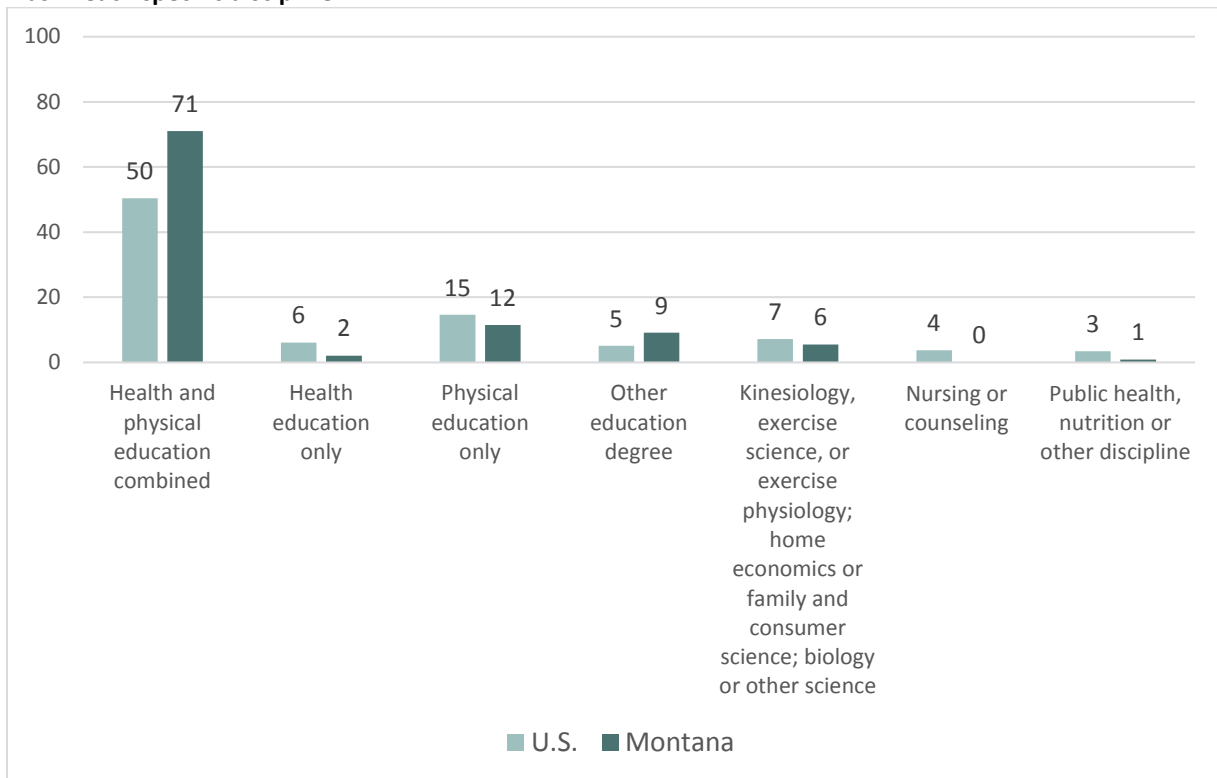
Percent of schools that provided parents and families with health information on specific topics designed to increase parent and family knowledge during the current year.



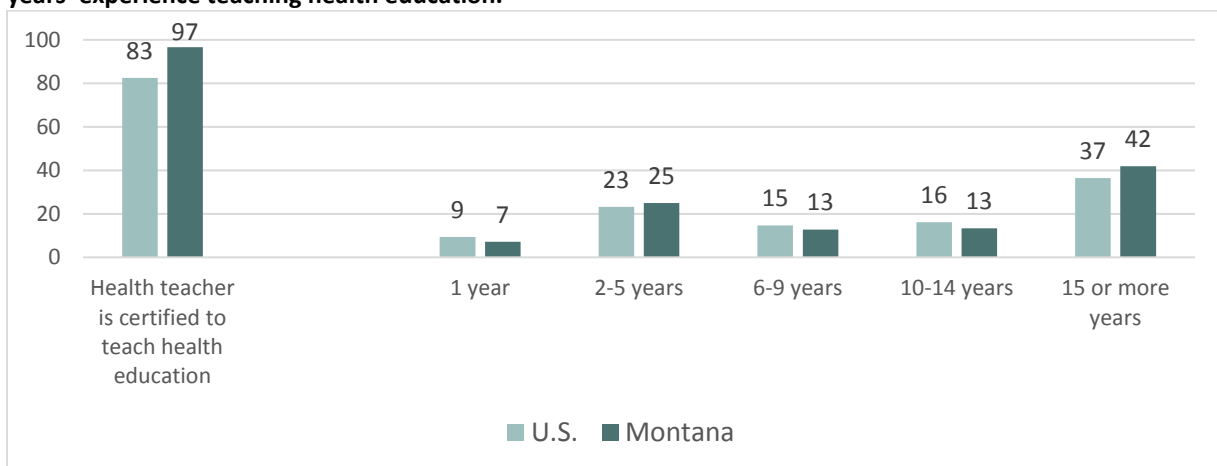
## School Health Profiles Health Education Teacher Results

### Professional Development (PD)

Percent of schools in which the major emphasis of the lead health education teacher's professional preparation was in each specific discipline.



Percent of schools in which the lead health education teacher was certified to teach health education and the years' experience teaching health education.



## School Health Profiles Health Education Teacher Results

### PD-Specific Health Topics

Percent of schools in which the lead health education teacher received professional development during the past two years; and who wanted to receive professional development on a specific topic. **(fewer)**

Topic	Received Professional Development		Wanted to Receive Professional Development	
	U.S.	Montana	U.S.	Montana
Alcohol- or other drug-use prevention	35	40	70	73
Asthma	18	19	45	55
Chronic disease prevention	27	29	62	71
Emotional and mental health	44	46	72	73
Epilepsy or seizure disorder	19	16	47	53
Food allergies	25	22	48	52
Foodborne illness prevention	19	19	44	45
HIV prevention	30	21	58	64
Human sexuality	28	19	64	71
Infectious disease prevention	29	29	51	62
Injury prevention and safety	40	45	56	62
Nutrition and dietary behavior	34	32	69	77
Physical activity and fitness	46	54	65	71
Pregnancy prevention	25	15	57	62
STD prevention	28	18	61	68
Suicide prevention	44	48	70	76
Tobacco-use prevention	26	36	60	68
Violence prevention	54	53	73	77

### PD-Teaching Methods

Percent of schools in which the lead health education teacher received professional development during the past two years on teaching methods; and who wanted to receive professional development on teaching methods. **(fewer)**

Topic	Received Professional Development		Wanted to Receive Professional Development	
	U.S.	Montana	U.S.	Montana
Teaching students with physical, medical, or cognitive disabilities	49	39	65	65
Teaching students of various cultural backgrounds	45	37	57	54
Teaching students with limited English proficiency	36	13	52	38
Teaching students of different sexual orientations or gender identities	22	11	61	60
Using interactive teaching methods	59	48	63	67
Encouraging family or community involvement	41	33	67	67
Teaching skills for behavior change	45	40	69	71
Classroom management techniques	61	55	60	69
Assessing or evaluating students in health education	38	30	68	71

## School Health Profiles Health Education Teacher Results

### PD-Sexual Health Education

Percent of schools in which the lead health education teacher received professional development during the past two years on topics related to teaching sexual health education; and who wanted to receive professional development on sexual health topics. **(fewer)**

Topic	Received Professional Development		Wanted to Receive Professional Development	
	U.S.	Montana	U.S.	Montana
Aligning lessons and materials with the district scope and sequence for sexual health education	31	20	58	64
Creating a comfortable and safe learning environment for students receiving sexual health education	29	22	59	62
Connecting students to on-site or community-based sexual health services	21	15	58	60
Using a variety of effective instructional strategies to deliver sexual health education	28	19	66	73
Building student skills in HIV, other STD, and pregnancy prevention	26	20	64	67
Assessing student knowledge and skills in sexual health education	26	21	62	66
Understanding current district or school board policies or curriculum guidance regarding sexual health education	28	22	60	65



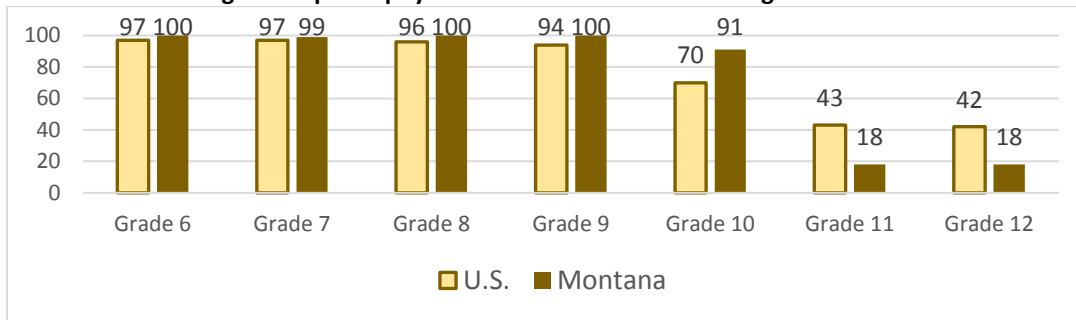


## School Health Profiles Principal Results

State	Sample size	Response rate
Montana	253/278 principals	91%

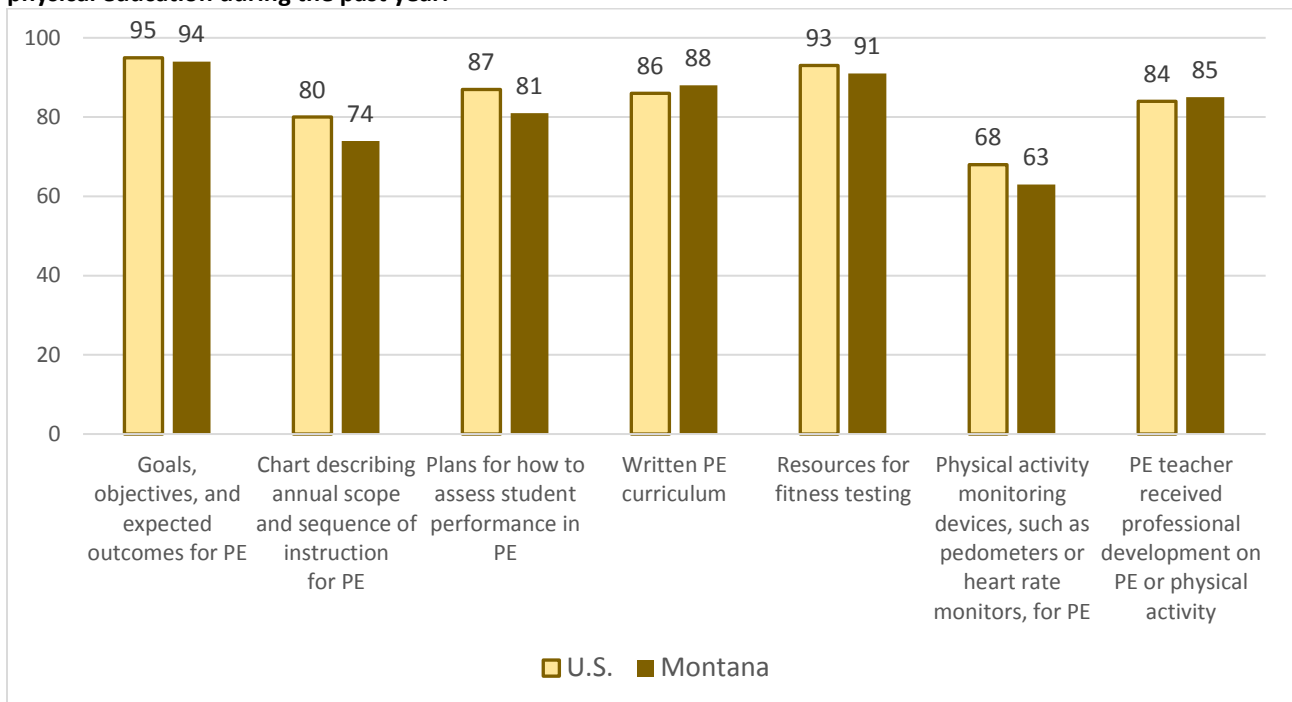
### Required Physical Education

Percent of schools that taught a required physical education course in each grade.



### Physical Education Materials and Professional Development

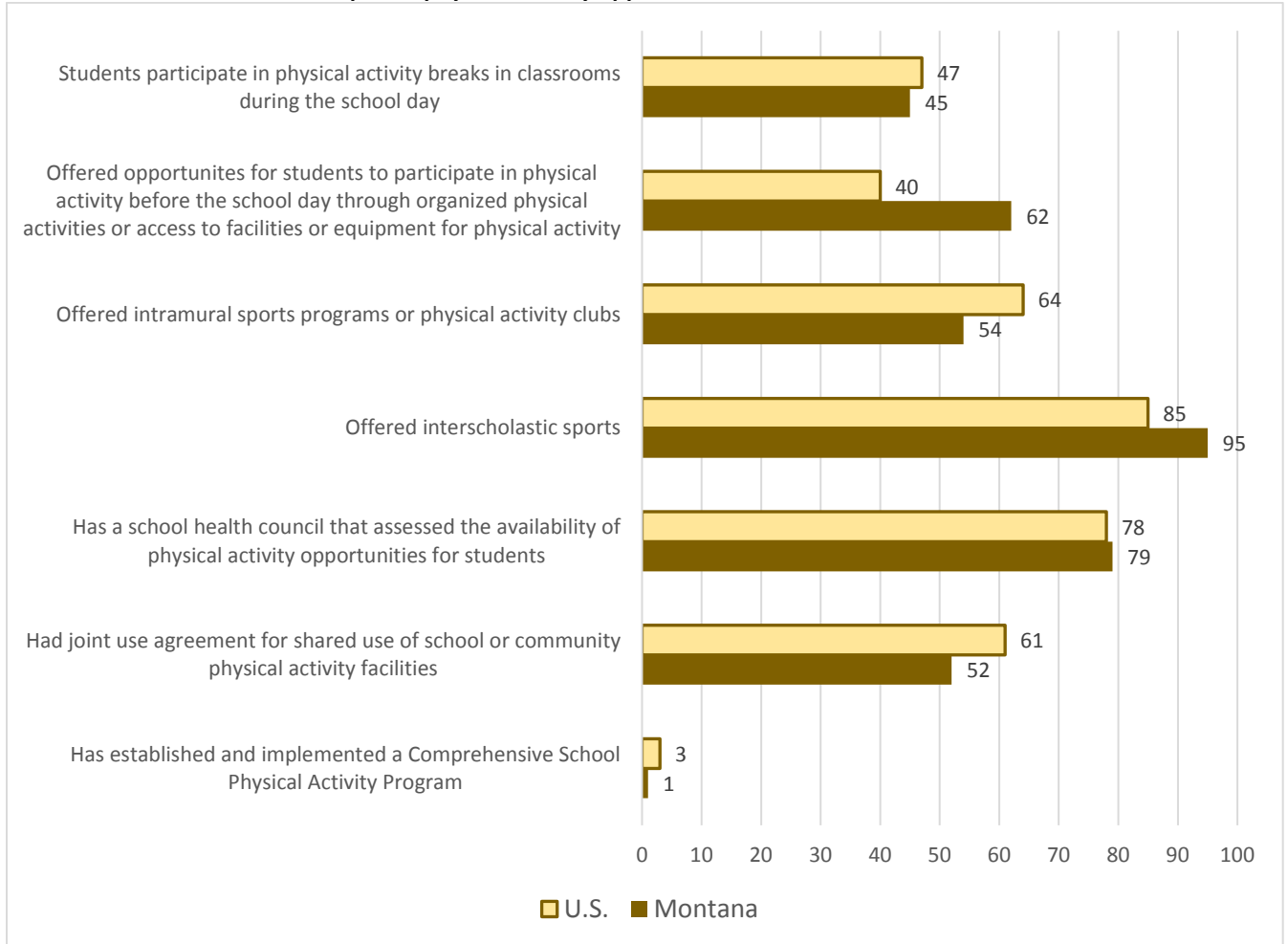
Percent of schools that provided physical education teachers with materials for teaching physical education and the percent of schools in which at least one physical education teacher received professional development on physical education during the past year.



## School Health Profiles Principal Results

### Physical Activity Opportunities

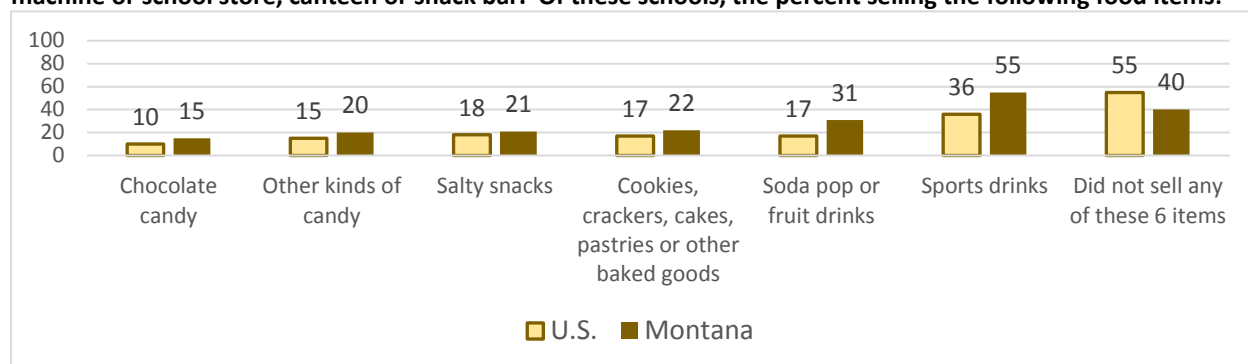
Percent of schools that offered specific physical activity opportunities for students.



## School Health Profiles Principal Results

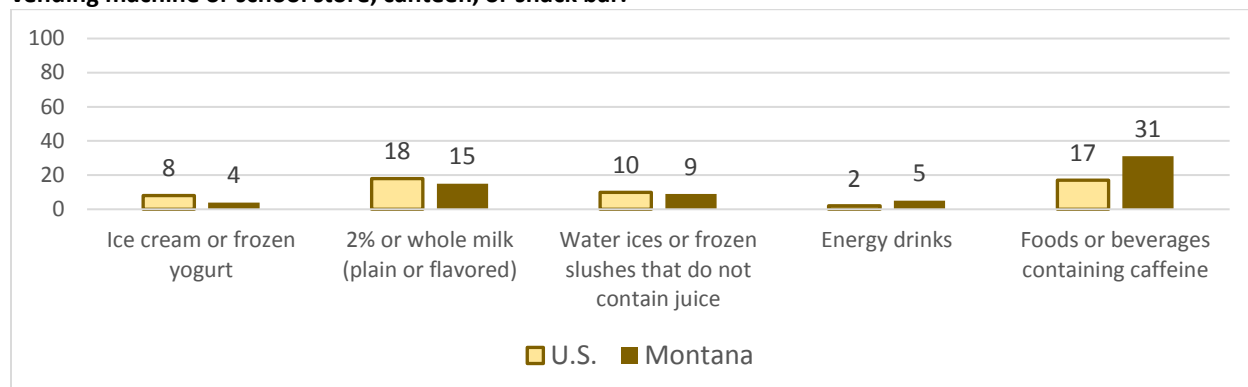
### Nutrition-Related Policies and Practices

**(74%) of Montana schools, (62% U.S.), allowed students to purchase snack foods or beverages from a vending machine or school store, canteen or snack bar. Of these schools, the percent selling the following food items:**



### Vending Machines – Less Nutritious Foods or Beverages

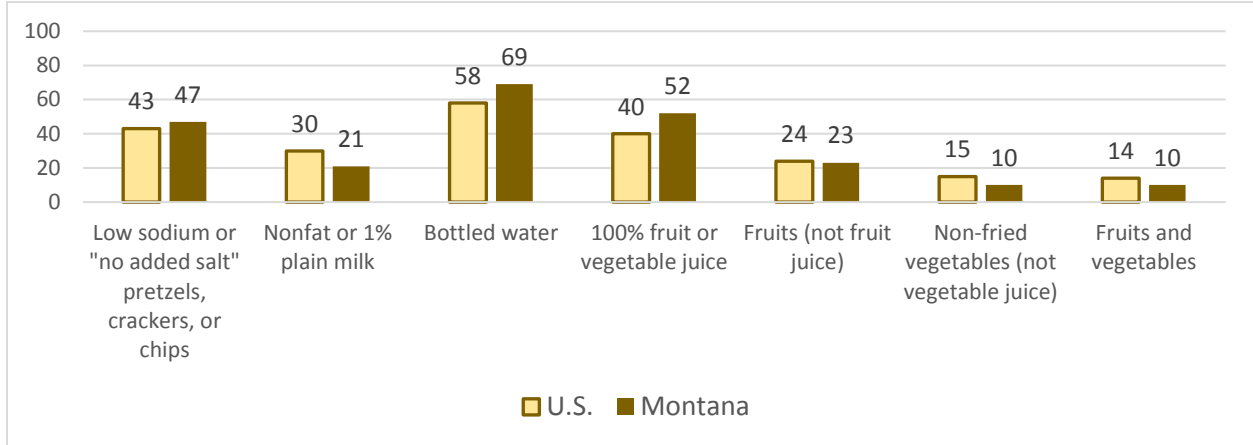
**The percent of schools that allowed students to purchase less nutritious snack foods or beverages from a vending machine or school store, canteen, or snack bar.**



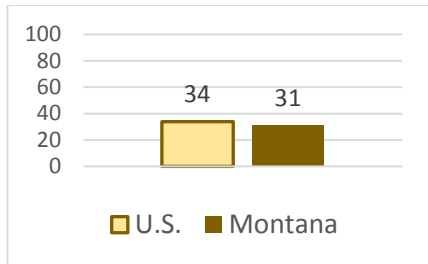
## School Health Profiles Principal Results

### Vending Machines – More Nutritious Foods or Beverages

The percent of schools that allowed students to purchase less nutritious snack foods or beverages from a vending machine or school store, canteen, or snack bar.



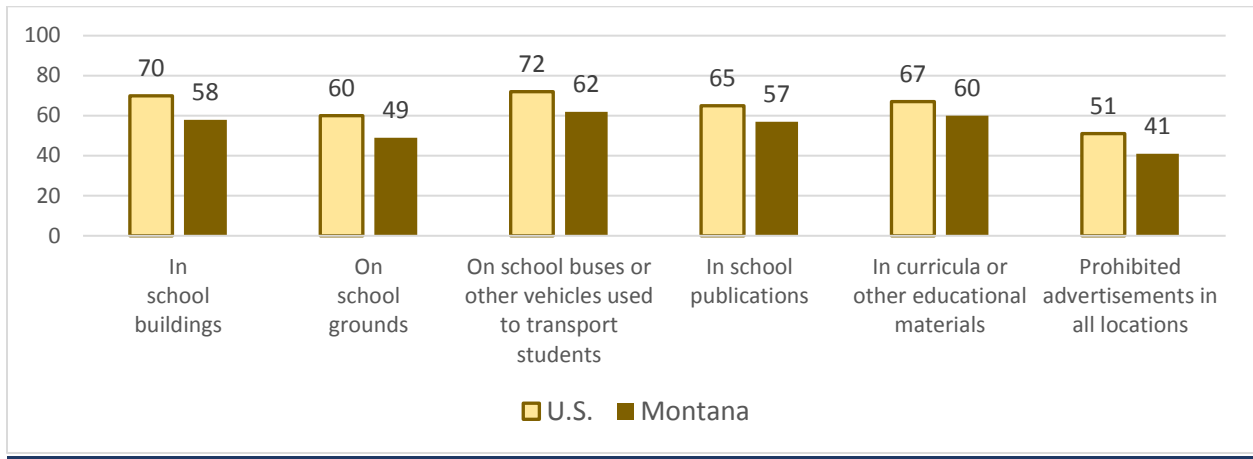
### School Celebrations



The percent of schools that always or almost always offered fruits or non-fried vegetables at school celebrations.

### Prohibited Advertisements

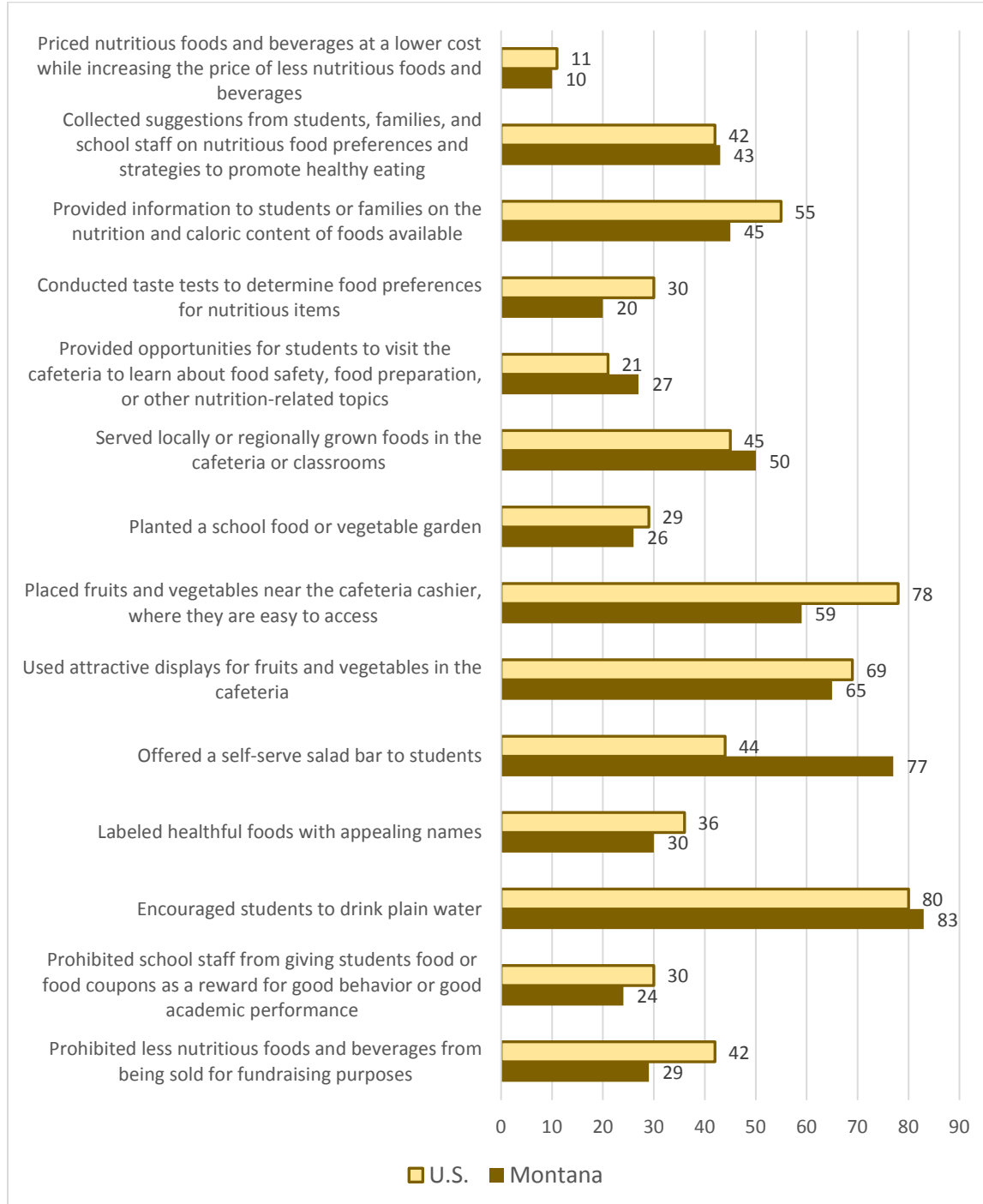
The percent of schools that prohibited advertisements for candy, fast food restaurants, or soft drinks in specific locations.



## School Health Profiles Principal Results

### Healthy Eating Strategies

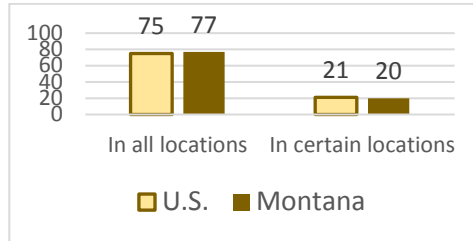
The percent of schools that implemented strategies to promote healthy eating during the current school year.



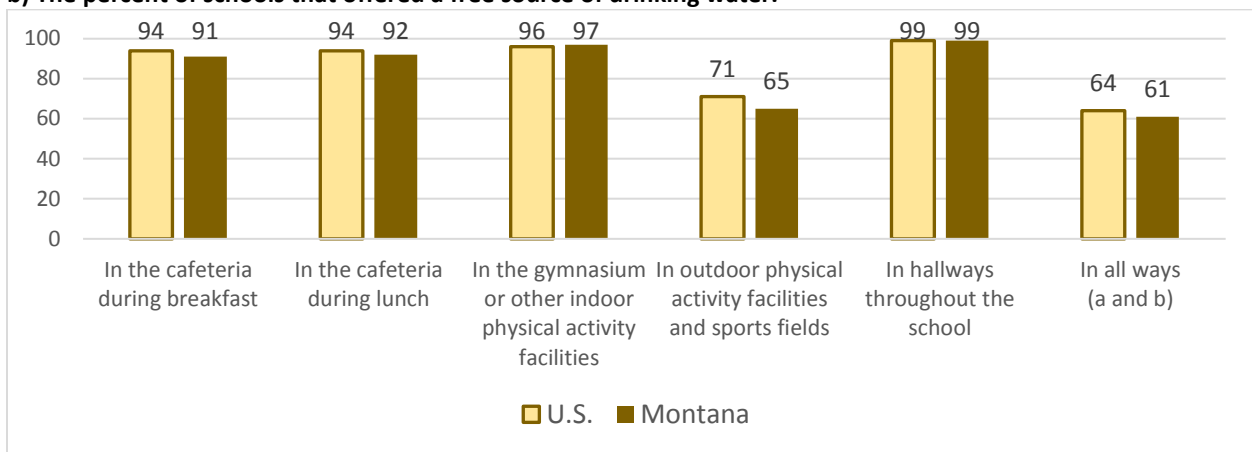
## School Health Profiles Principal Results

### Drinking Water

a) The percent of schools that permitted students to have a drinking water bottle with them during the school day

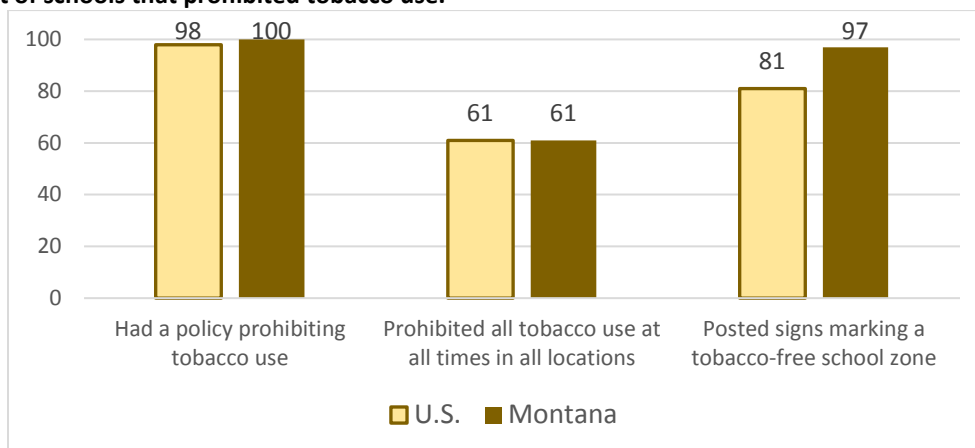


b) The percent of schools that offered a free source of drinking water.



### Tobacco-Use Prevention Policies

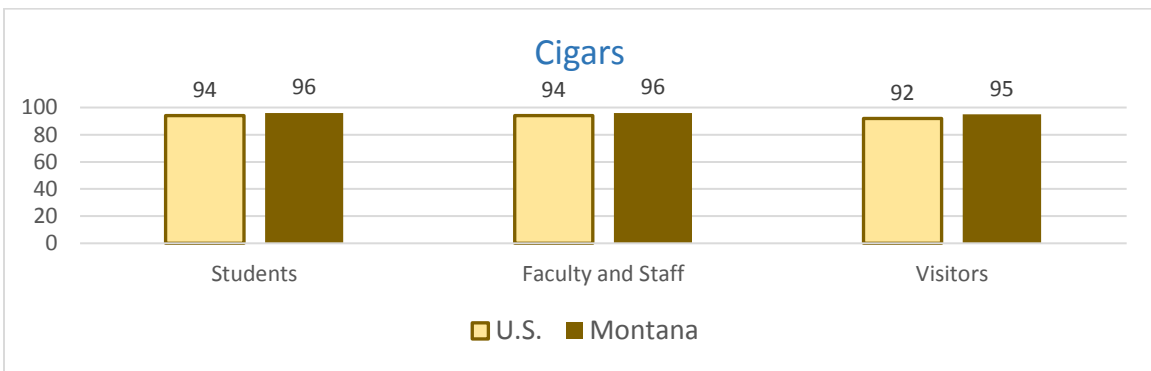
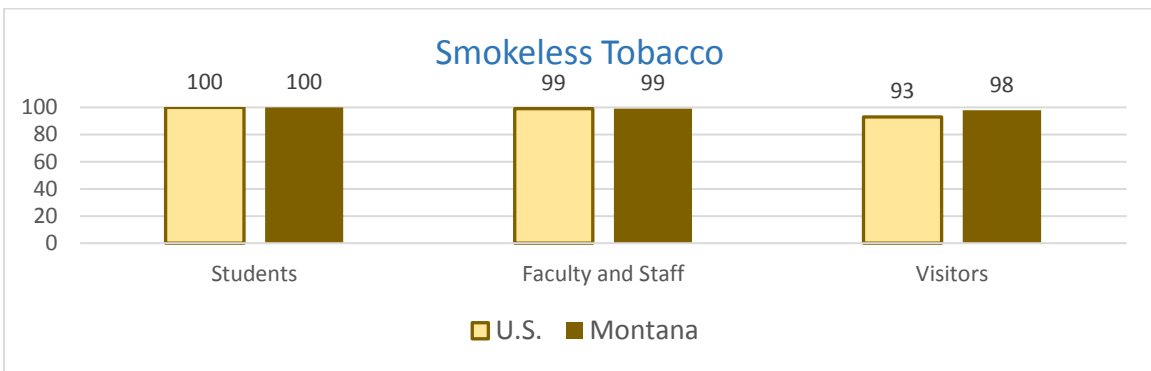
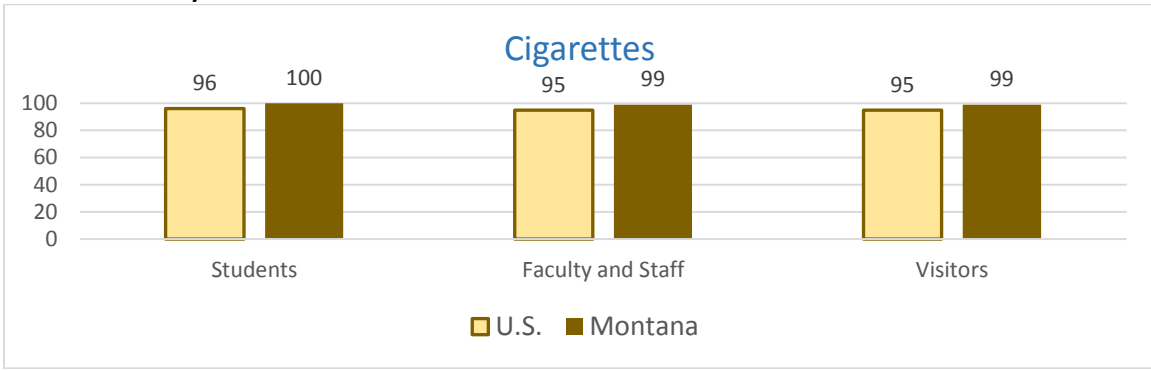
The percent of schools that prohibited tobacco use.



## School Health Profiles Principal Results

### Tobacco-Use Prevention Policies

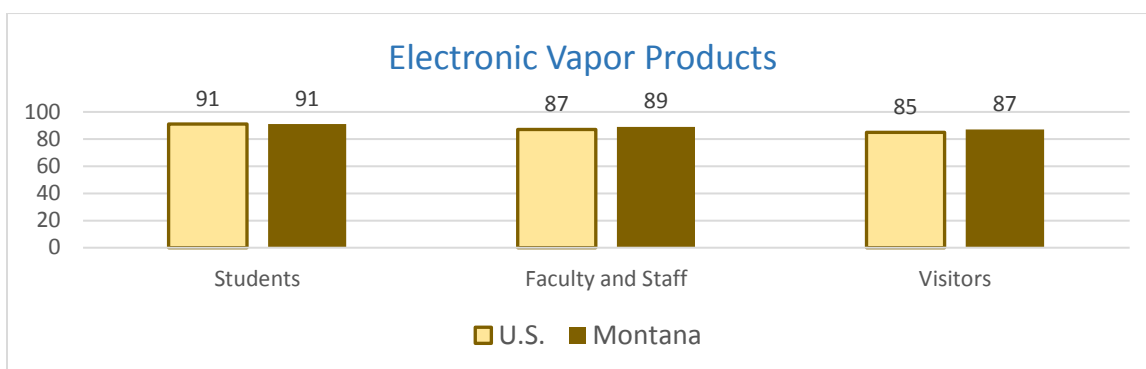
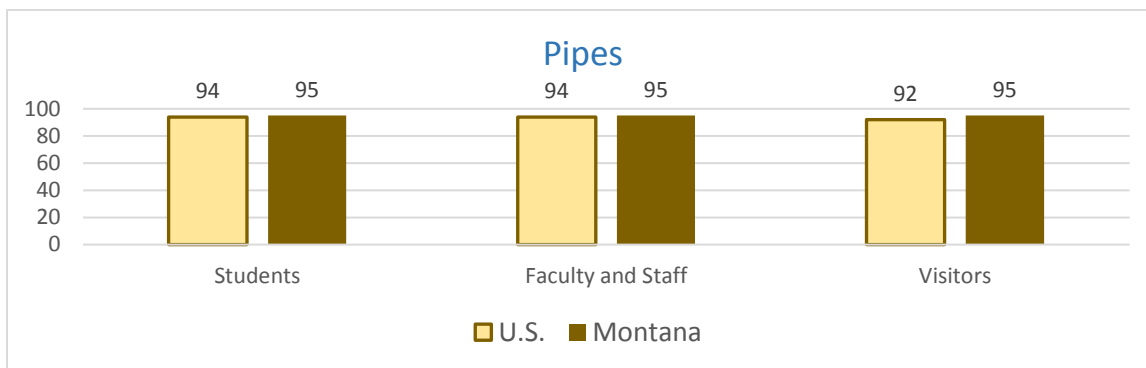
The percent of schools that had a policy prohibiting specific types of tobacco use for specific groups during any school-related activity.



## School Health Profiles Principal Results

### Tobacco-Use Prevention Policies

The percent of schools that had a policy prohibiting specific types of tobacco use for specific groups during any school-related activity.



### Tobacco Cessation Services for Faculty/Staff and Students

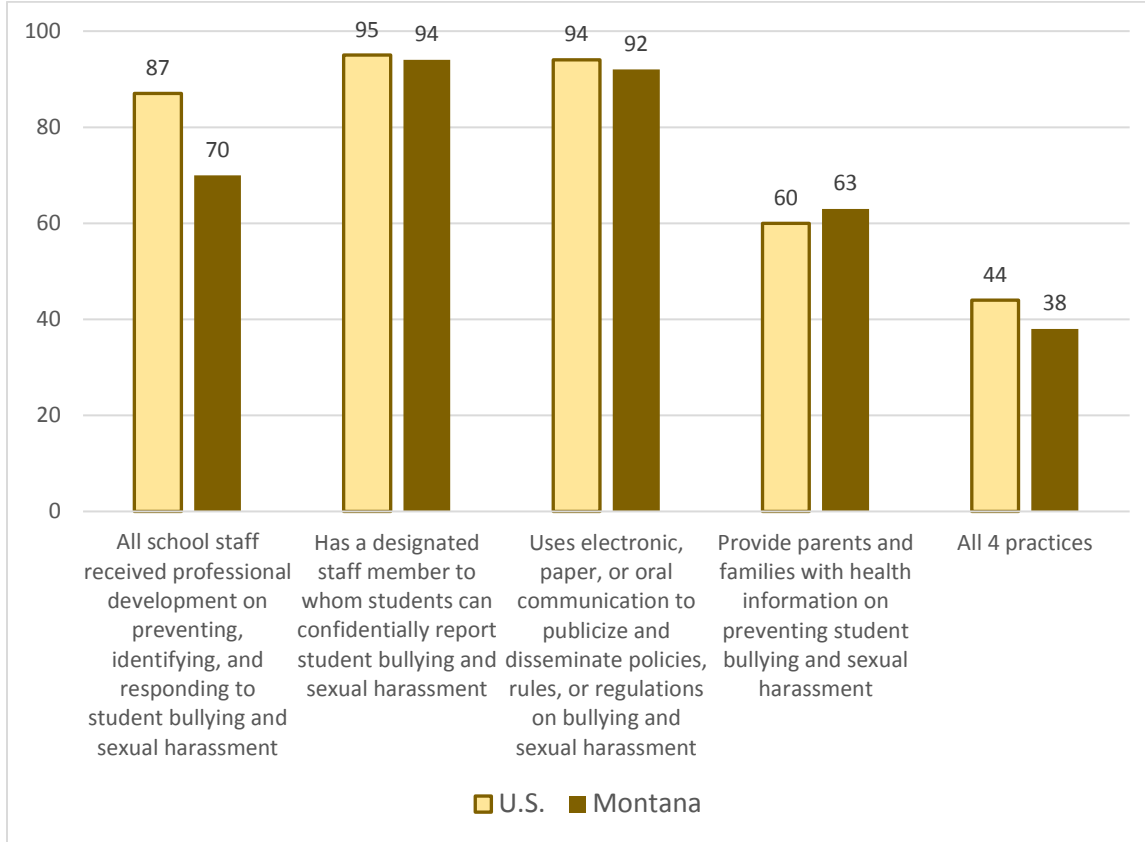
The percent of schools that . . .	Faculty and Staff		Students	
	U.S.	Montana	U.S.	Montana
Provided tobacco cessation services for faculty/staff or students	20%	12%	25%	27%
Had arrangements with organizations or health care professionals not on school property to provide tobacco cessation services for faculty/staff or students	29%	27%	30%	36%



## School Health Profiles Principal Results

### Bullying and Sexual Harassment Practices

The percent of schools with practices in place to prevent bullying and sexual harassment.

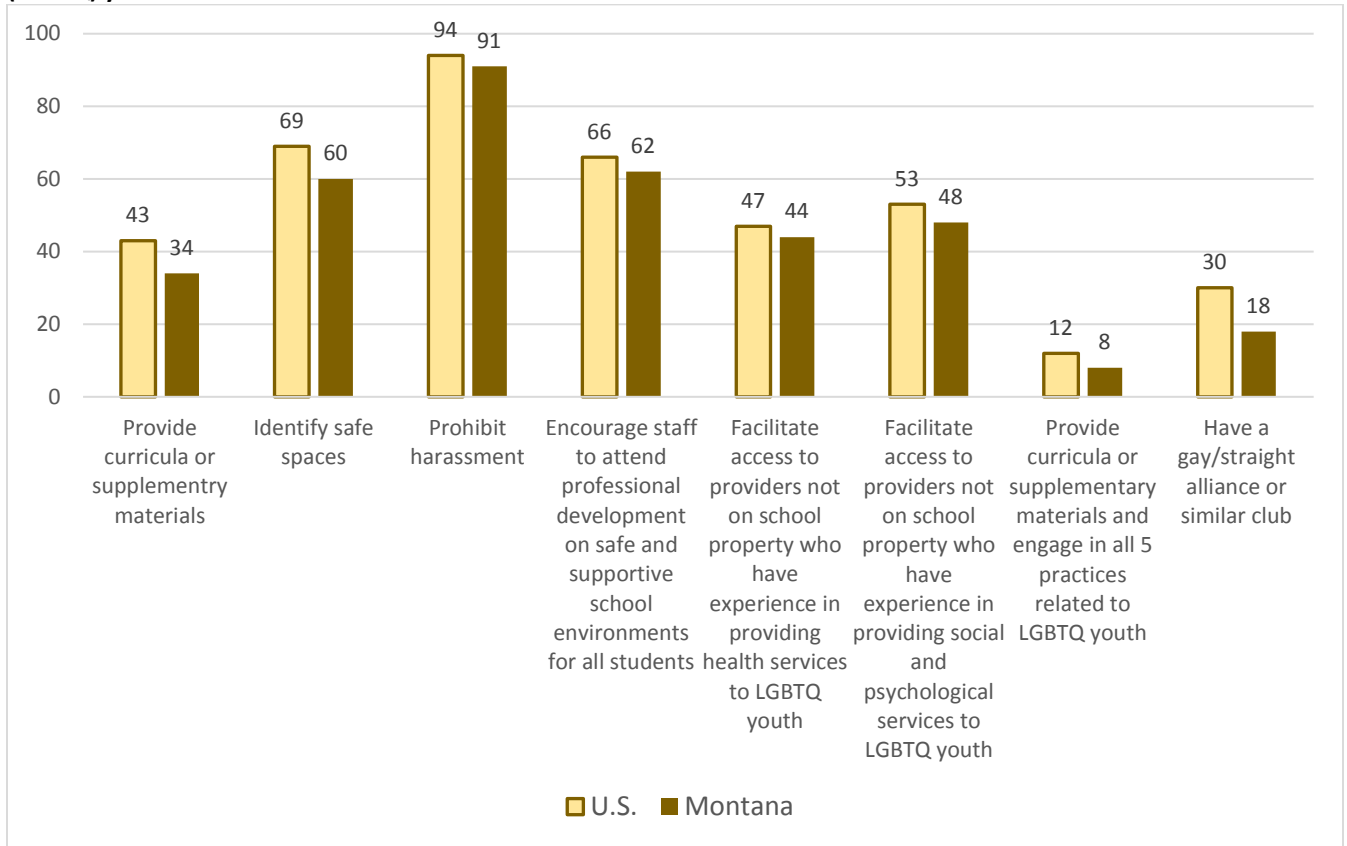


SCHOOL PROFESSIONAL  
 BULLYING PREVENTING  
 HARASSMENT STUDENTS POLICIES  
 DEVELOPMENT SEXUAL STAFF

## School Health Profiles Principal Results

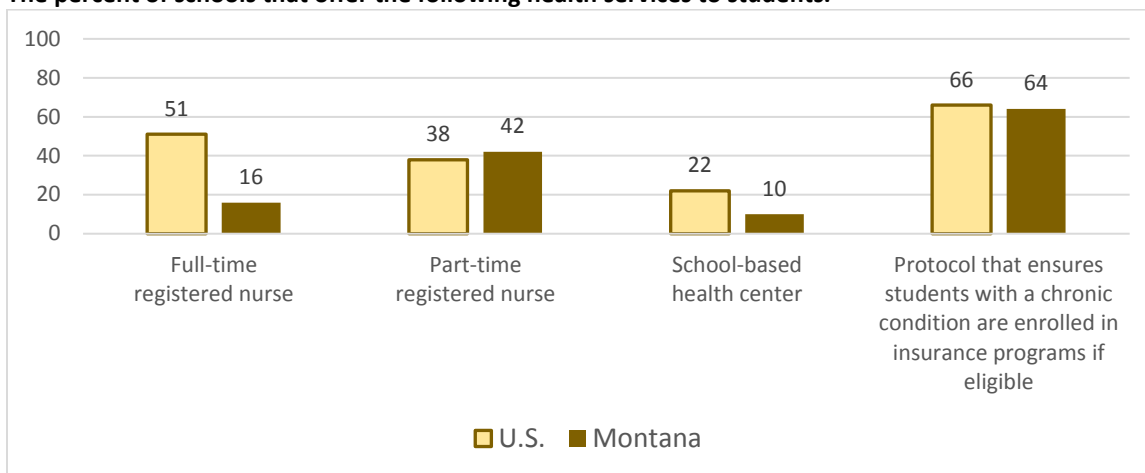
### Sexual Orientation

The percent of schools that provide the following support to Lesbian, Gay, Bisexual, Transgender, or Questioning (LGBTQ) youth.



### Health Services

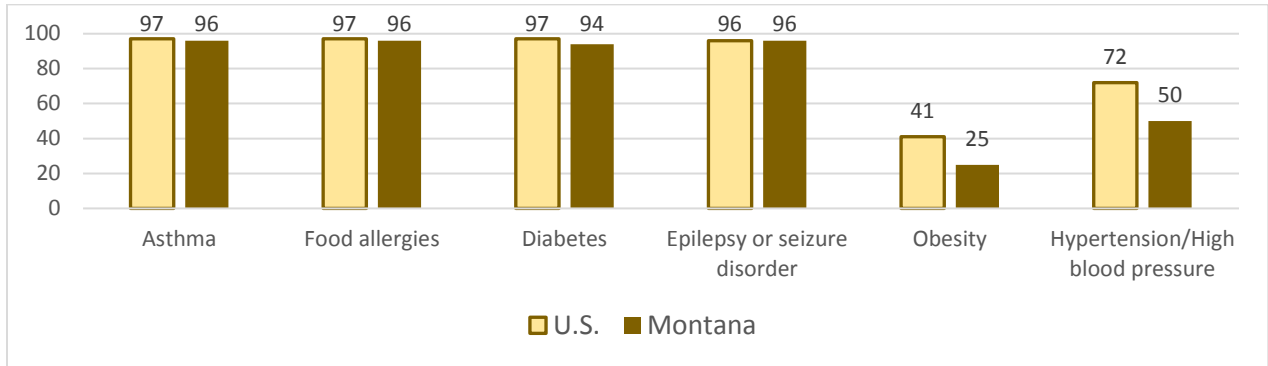
The percent of schools that offer the following health services to students.



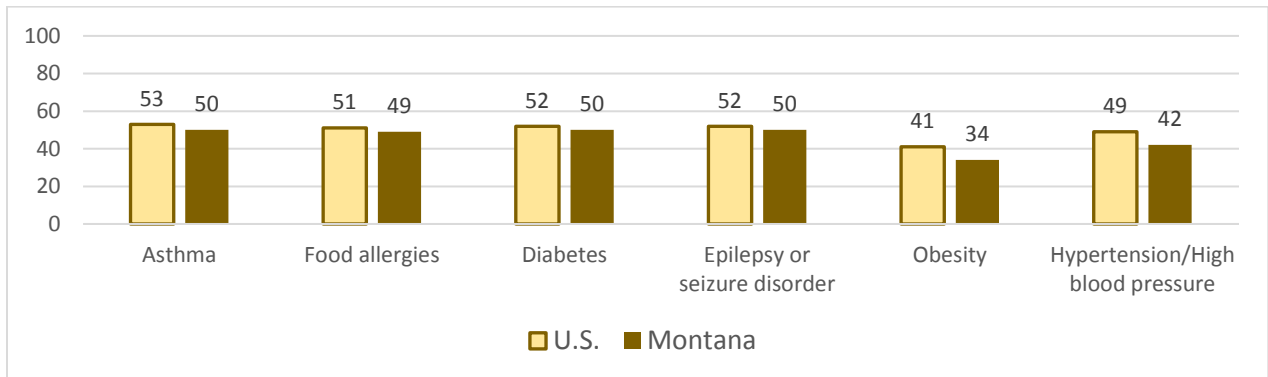
## School Health Profiles Principal Results

### Health Services

The percent of schools that routinely use school records to identify and track students with chronic conditions.



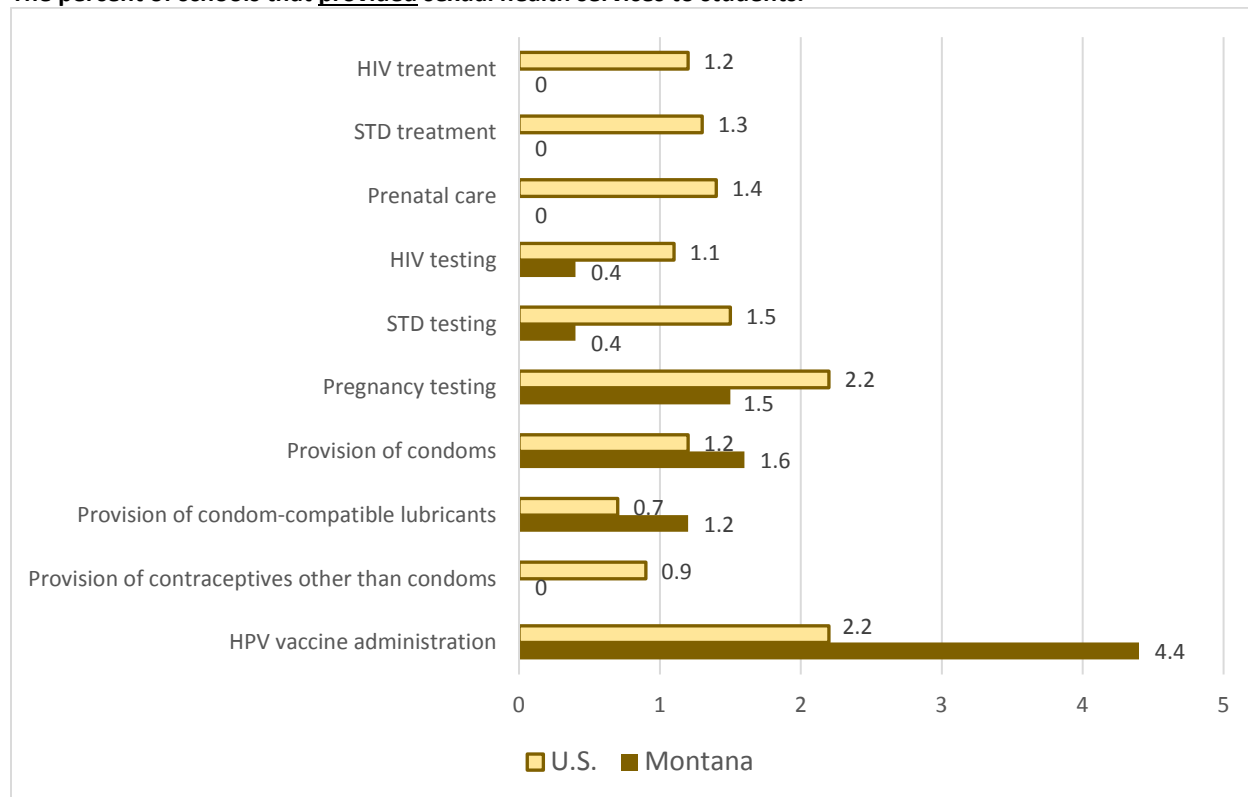
The percent of schools that provide referrals to any organizations or health care professionals not on school property for students diagnosed with or suspected to have chronic conditions.



## School Health Profiles Principal Results

### Health Services

The percent of schools that provided sexual health services to students.



The percent of schools with specific parental consent and notification practices for sexual or reproductive health services provided by the school.

	Does not provide any sexual or reproductive health services	Requires parental consent before any services are provided	Does not require parental consent			
			Notifies parents about services provided upon request	Notifies parents depending on the service provided	Notifies parents about all services provided	Does not notify parents about any services provided
<b>U.S.</b>	82%	11%	1%	2%	1%	1%
<b>Montana</b>	89%	9%	2%	0%	1%	1%

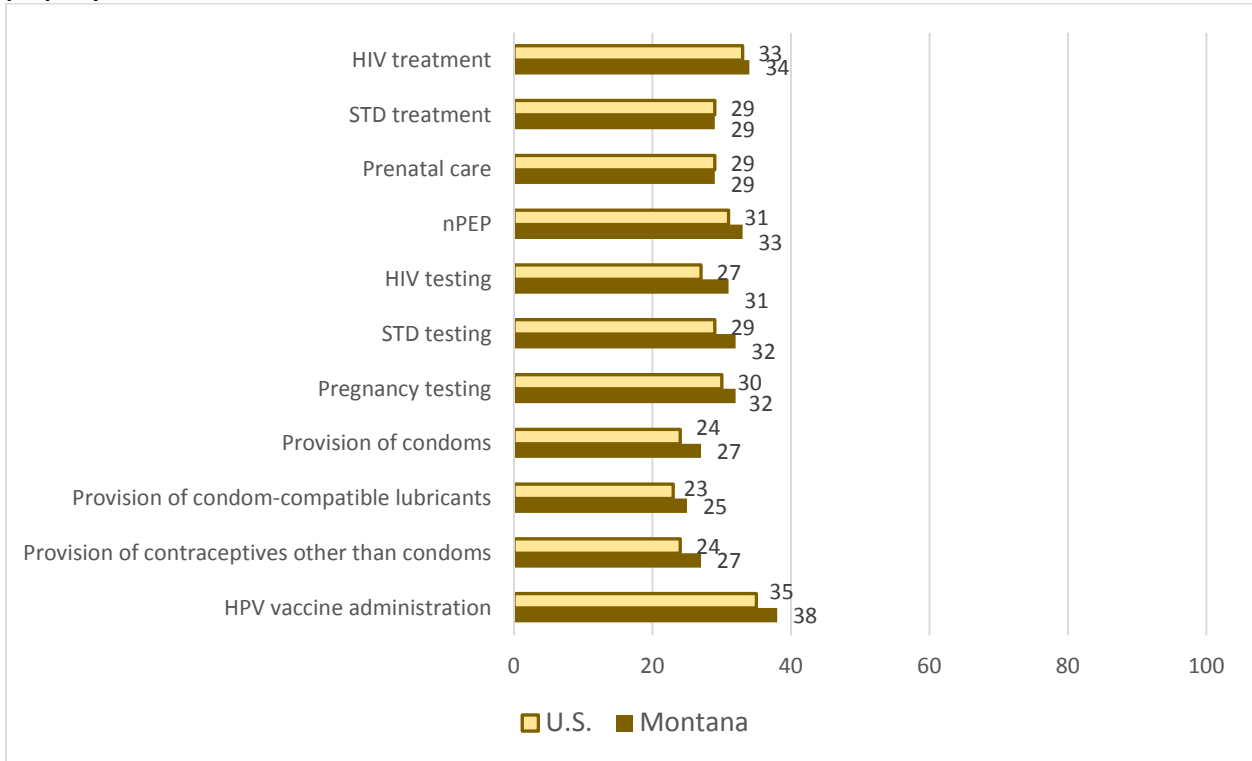
The percent of schools with specific parental consent and notification practices for sexual or reproductive health services referred by the school.

	Does not provide any sexual or reproductive health services	Requires parental consent before any services are provided	Does not require parental consent			
			Notifies parents about services provided upon request	Notifies parents depending on the service provided	Notifies parents about all services provided	Does not notify parents about any services provided
<b>U.S.</b>	62%	20%	4%	7%	2%	3%
<b>Montana</b>	61%	20%	5%	8%	2%	5%

## School Health Profiles Principal Results

### Health Services

The percent of schools that referred students to organizations or health care professionals not on school property for sexual health services.



\*Non-occupational post-exposure prophylaxis for HIV – a short course of medication given within 72 hours of exposure to infectious bodily fluids from a person known to be HIV positive.



## School Health Profiles Principal and Health Education Teacher Results

### Family and Community Involvement

The percent of schools that implemented parent engagement strategies.

Strategy	U.S.	Montana
Provided parents and families with information about how to communicate with their child about sex	22%	18%
Provided parents with information about how to monitor their child	51%	46%
Involved parents as school volunteers in the delivery of health education activities and services	21%	26%
Linked parents and families to health services and programs in the community	67%	62%
Gave students homework assignments or health education activities to do at home with their parents	58%	49%
Uses electronic, paper, or oral communication to inform parents about school health services and programs	79%	75%
Students' families helped develop or implement policies and programs related to school health	37%	38%



The percent of schools that implemented school connectedness strategies.

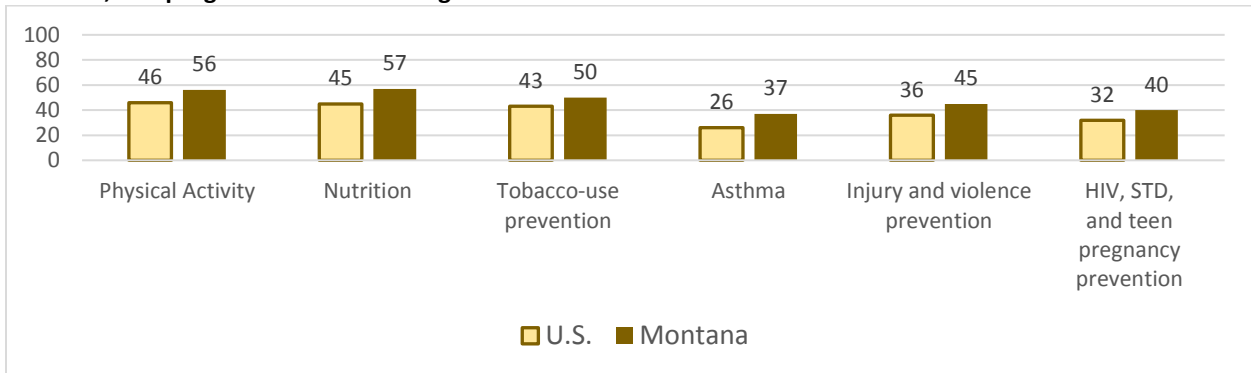
Strategy	U.S.	Montana
Participates in a program in which family or community members serve as role models to students or mentor students	38%	36%
Provides service learning opportunities	61%	62%
Provides peer training opportunities for students	80%	80%
Has clubs that give students opportunities to learn about people different from them	61%	41%
Offered activities for students to learn about people different from them through lessons in class	85%	88%
Offered activities for students to learn about people different from them through special events sponsored by the school or community organizations	64%	55%

## School Health Profiles Principal Results

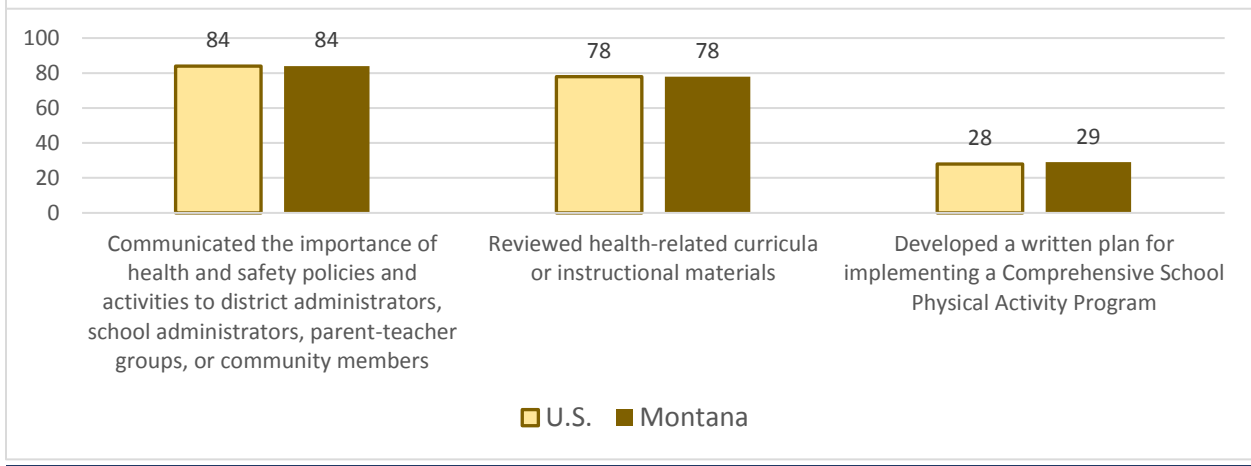
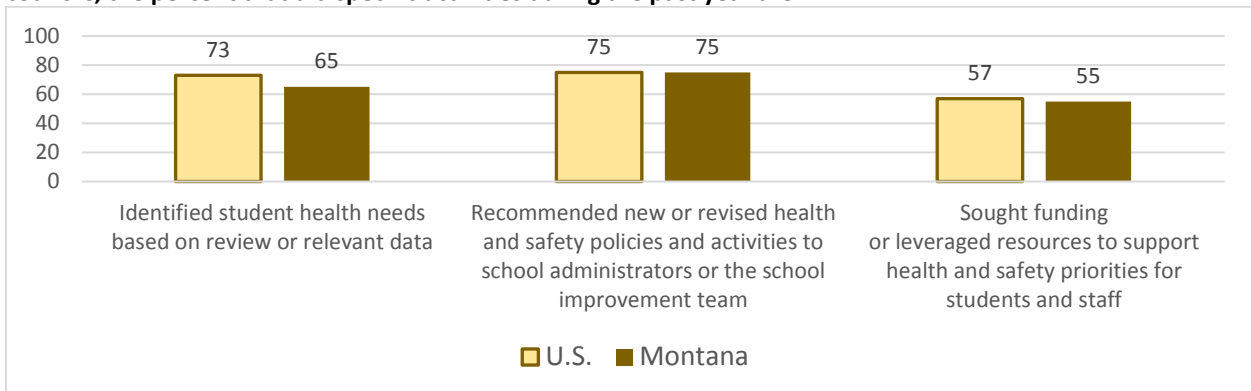
### School Health Programs

**90% of Montana schools**, 87% of U.S. schools, had someone who oversees or coordinates school health and safety programs and activities.

**The percent of schools that ever used the School Health Index or other self-assessment tool to assess policies, activities, and programs in the following areas:**



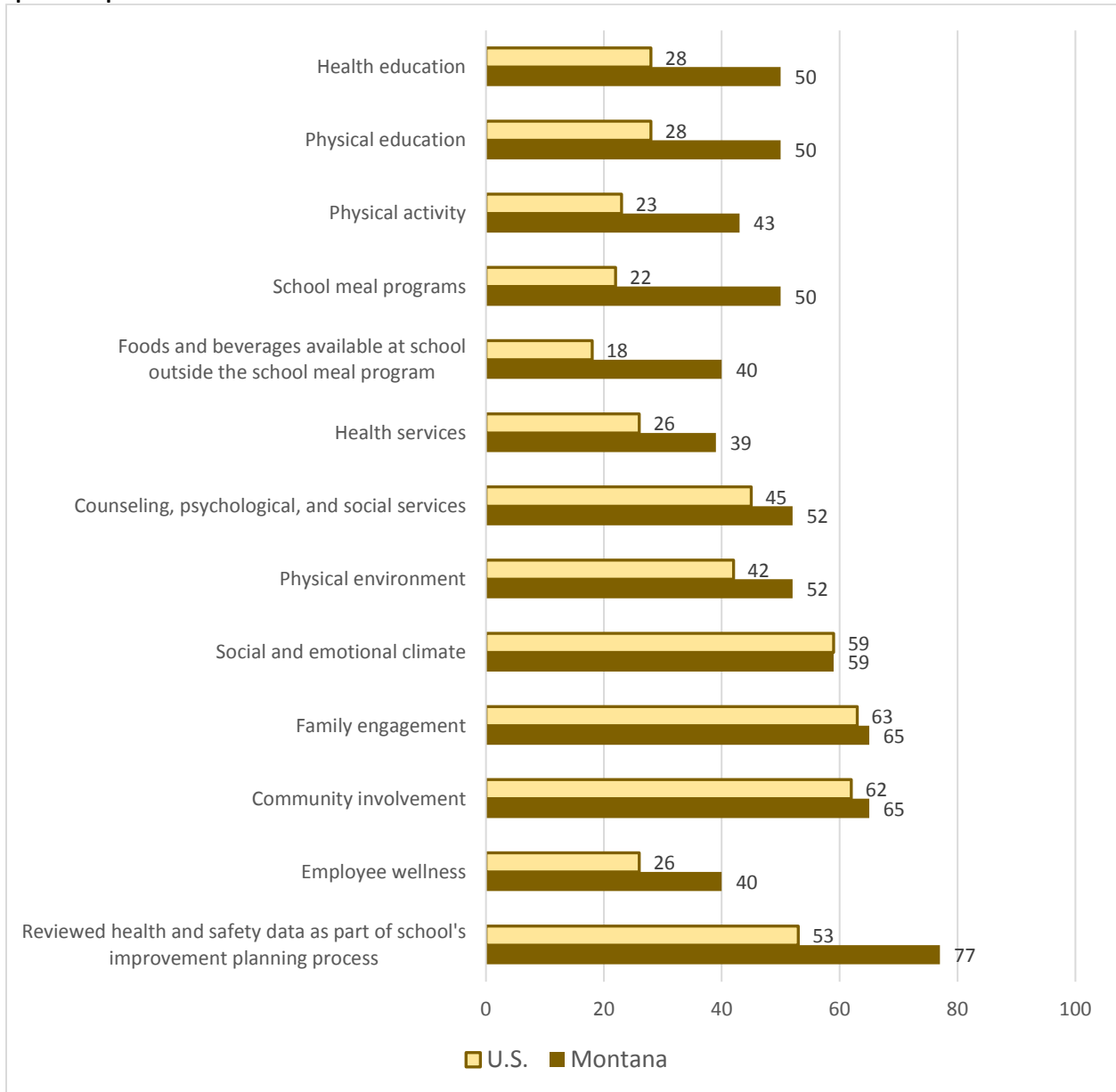
**55% of Montana schools**, 57% of U.S. schools, have one or more school health councils. **Among schools with councils, the percent that did specific activities during the past year are:**



## School Health Profiles Principal Results

### School Health Programs

The percent of schools with a School Improvement Plan that includes health-related objectives on the following specific topics:





# Montana School Health Profiles

[www.opi.mt.gov](http://www.opi.mt.gov) >Educators>Health Enhancement

Montana Office of Public Instruction  
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