

The Public's Health and the Law in the 21st Century
5th Annual Partnership Conference

Concurrent Session

Law and Policy as Tools for Healthy Schools

Tuesday, June 13, 2006
4:00-5:30 pm

Moderator: William Potts-Datema, MS, Branch Chief, Program Development and Services Branch,
Division of Adolescent and School Health, CDC, Atlanta, GA

Panel: Heather Duvall, MA, Project Coordinator, Oklahoma Fit Kids Coalition, Oklahoma City, OK

James G. Hodge, Jr., JD, LLM, Associate Professor, Johns Hopkins Bloomberg School of
Public Health, Executive Director, Center for Law and the Public's Health, and Core
Faculty, Berman Bioethics Institute, Baltimore, MD

William Potts-Datema, MS, Branch Chief, Program Development and Services Branch,
Division of Adolescent and School Health, CDC, Atlanta, GA

Session Purpose:

The goal of this session is to demonstrate to non-education officials that law and policy can be effective tools to improve the health of children and adolescents in school environments.

Protecting the health and safety of children and adolescents in schools is a critical component of any community's comprehensive public health plan. Achieving optimal student health at school requires collaboration among education and health agency practitioners. This session will outline laws and policies that provide both opportunities for, and limitations on, improving the health of young people in schools. It also will present a case study of one state's use of law and policy to improve student health through grass-roots coalitions.

William Potts-Datema will discuss the Coordinated School Health Program Model, providing the framework for the next two speakers. James G. Hodge, Jr. will showcase a newly completed White Paper from the Center for Law and the Public's Health that organizes and explains the plethora of national, state, and local school laws and policies impacting child and adolescent health. Heather DuVall will provide a case study of a successful grassroots coalition that has been working with their state legislature on school health laws.

Learning Objectives:

By the close of this session, conference participants will be able to:

- Outline the coordinated school health model as a way to improve student health and foster learning;
- Describe the breadth of laws and policies that affect the health of children and adolescents in schools; and
- Explain how grassroots coalitions can be the catalyst for new state laws that improve student health.

Session Convener:

The Division of Adolescent and School Health, National Center for Chronic Disease Prevention and Promotion, CDC

Resource Materials:

Hodge, JG, Mair, JS, Gable, LA. An Assessment of School Laws and Policies Affecting Child and Adolescent Health, Centers for Disease Control and Prevention (CDC). Atlanta, GA; 2006; 1-90.

Lessons Learned:

1. James Hodge, Jr.
Protecting the health and safety of children, adolescents, and others in school environments is an essential component of any comprehensive public health plan. The nation's public schools are regulated through a multitude of federal, state, and local governmental entities that lack cohesion in their collective approach to improving child and adolescent health in educational settings. As in many areas of public health, the law can be a tool for improving the health of children and adolescents in schools.

To date, however, no one has systematically assessed school laws and policies that seek to protect child and adolescent health. Together with CDC's Division of Adolescent and School Health and CDC's Public Health Law Program, the *Center* is engaged in scoping research and analysis to develop a modern legal framework for the role of law in protecting the health of students and staff in the nation's public schools (K-12).

The culmination of the *Center's* research is the production of which, a draft White Paper. This document broadly analyzes the law concerning the eight interactive components of the coordinated school health program (CSHP): (1) health education, (2) physical education, (3) health services, (4) nutrition services, (5) counseling and psychological services, (6) healthy school environment, (7) health promotion of staff, and (8) family/community involvement. For more information about this project, please see the *Center's* website at <http://www.publichealthlaw.net/Research/Affprojects.htm#Schools>.

2. Health Duvall
The Oklahoma Fit Kids Coalition, a statewide organization focused on reducing and preventing obesity in Oklahoma, was formed in response to the many pediatricians, concerned parents, and health advocates that were committed to combating this epidemic. We approach our work through a combination of education, collaboration and advocacy. There are many organizations and entities in Oklahoma that have been working on this issue for several years. Honoring their work, the OFKC was created to

promote nutrition and physical activity and raise awareness across the state about the need for everyone to take responsibility for the health of all Oklahomans.

Since the inception of the coalition, it was important for us to garner support from nutrition and physical activity experts, key agency leaders from the Health and Education sectors, as well as public policy officials. Our legislative champions who have been long-time supporters of children's health carried our message through the legislature creating successful laws that have positively impacted Oklahoma's school children. With the support of our Governor, State Commissioner of Health, State Secretary of Health, and State Superintendent of Public Instruction, the Oklahoma Fit Kids Coalition has become a strong and powerful voice in the fight against childhood obesity in Oklahoma. Identifying champions, key leaders and dedicated supporters will generate success in advocacy efforts. Valuing the work of your partners and member organization will ensure sustainability and motivation. The Oklahoma Fit Kids Coalition is an incredibly successful model of local-level grassroots advocacy.