



**ECHS@DSU**

# Local Wellness Policy District

Modified from the *Alliance for a Healthier Generation Model Wellness Policy*

5/8/2015

# ECHS Local Wellness Policy District

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## Preamble

Early College High School (hereto referred to as the District) is committed to the optimal development of every student. The District believes that for students to have the opportunity to achieve personal, academic, developmental, and social success, we need to create positive, safe, and health-promoting learning environments at every level, in every setting, throughout the school year.

Research shows that two components, good nutrition and physical activity before, during, and after the school day, are strongly correlated with positive student outcomes. For example, student participation in the U.S. Department of Agriculture's (USDA) School Breakfast Program is associated with higher grades and standardized test scores, lower absenteeism, and better performance on cognitive tasks.<sup>1,2,3,4,5,6,7</sup> Conversely, less-than-adequate consumption of specific foods including fruits, vegetables, and dairy products, is associated with lower grades among students.<sup>8,9,10</sup> In addition, students who are physically active through active transport to and from school, recess, physical activity breaks, high-quality physical education, and extracurricular activities – do better academically.<sup>11,12,13,14</sup>

This policy outlines the District's approach to ensuring environments and opportunities for all students to practice healthy eating and physical activity behaviors throughout the school day while minimizing commercial distractions. Specifically, this policy establishes goals and procedures to ensure that:

- Students in the District have access to healthy foods throughout the school day—both through reimbursable school meals and other foods available throughout the school campus—in accordance with Federal and state nutrition standards;
- Students receive quality nutrition education that helps them develop lifelong healthy eating behaviors;
- Students have opportunities to be physically active before, during, and after school;
- Schools engage in nutrition and physical activity promotion and other activities that promote student wellness;
- School staff are encouraged and supported to practice healthy nutrition and physical activity behaviors in and out of school;
- The community is engaged in supporting the work of the District in creating continuity between school and other settings for students and staff to practice lifelong healthy habits; and
- The District establishes and maintains an infrastructure for management, oversight, implementation, communication about, and monitoring of the policy and its established goals and objectives.

This policy applies to all students, staff, and schools in the District.

## Delaware Statistics

- According to the Delaware Survey of Children's Health (DSCH) 43.7% of children ages 2-17 are not meeting the recommendation of 2 cups or less of sugar-sweetened beverages per week in 2011.
- On average, children aged 2-17 drink 3.7 cups of sugar-sweetened beverages daily in 2011 (Nemours, DSCH, 2011).
- In 2013, 8.8% of high school students drank more than 3 sodas a day on average (CDC, Adolescent and School Health, 2013).
- 49.7% of children are not consuming the recommended 5 servings of fruits and vegetables per day in 2011 (Nemours, DSCH, 2011).
- The average daily servings of vegetables consumed were 1.8 in 2011 (Nemours, DSCH, 2011).
- 59.7% of high school students surveyed did not eat breakfast any of the 7 days prior to the survey (CDC, Adolescent and School Health, 2013).
- In Delaware 19.1% of high school students surveyed did not participate in at least 60 minutes of physical activity any day in the past week, which is higher than the national average of 15.2% (CDC, Adolescent and School Health, 2013).
- 54.1% of children aged 2-17 are not meeting the recommended 2 hours or less of screen time per day in 2011 (Nemours, DSCH, 2011).
- 14.2% of Delaware high school students surveyed are obese, which is above the national percentage of 13.7% (CDC, Adolescent and School Health, 2013).
- 16.3% of Delaware high school students surveyed are overweight, which is close to the national average of 16.6% (CDC, Adolescent and School Health, 2013).
- In 2011, 40.1% of children aged 2-17 were overweight or obese in Delaware (Nemours, DSCH, 2011).
- In Delaware, 21.6% of males aged 12-17 were overweight in 2011, up from 17.3% in 2008 and 19.7% were obese, up from 15.4% (Nemours, DSCH, 2011).
- 17.8% of 6-11 year old males in Delaware were overweight in 2011, an increase from 15.3% in 2008 (Nemours, DSCH, 2011).

## **I. School Wellness Committee**

### ***Committee Role and Membership***

The District will create a representative district wellness committee (hereto referred to as the DWC or work within an existing school health committee) that meets quarterly to assist in the development, implementation, and periodic review and update of this district-level wellness policy (heretofore referred as “wellness policy”) and will establish and monitor goals and objectives for each school.

The DWC membership will represent all school levels (elementary and secondary schools) and include (to the extent possible), but not be limited to:

- Parents and caregivers;
- Students;
- Representatives of the school nutrition program (ex., school nutrition director);
- Physical education teachers;
- Health education teachers;
- School health professionals (ex., health education teachers, school health services staff [i.e., nurses, physicians, dentists, health educators, and other allied health personnel who provide school health services], and mental health and social services staff [i.e., school counselors, psychologists, social workers, or psychiatrists];
- School administrators (ex., superintendent, principal, vice principal), school board members;
- Health professionals (ex., dietitians, doctors, nurses, dentists);
- And the general public.

### ***Leadership***

The Superintendent or designee(s) will convene the DWC and facilitate development of and updates to the wellness policy, and will ensure each school’s compliance with the policy.

Name	Title	Email address	Role
Kathryn Krieger	Nurse/Homeless Liaison	Kathryn.krieger@echs.k12.de.us	Member
Kizzi Smith	School Nutrition Director	Kizzi.smith@echs.k12.de.us	Chair/Coordinator
Travis Jernigan	Food Service Worker	<a href="mailto:Travis.jernigan@echs.k12.de.us">Travis.jernigan@echs.k12.de.us</a>	Member
Nakira Quail	Student	nakiraquail@yahoo.com	Member

Each school will designate a school wellness policy coordinator, who will ensure compliance with the policy. Refer to Appendix A for a list of school level wellness policy coordinators.

## **II. Wellness Policy Implementation, Monitoring, Accountability, and Community Engagement**

### ***Implementation Plan***

The District will develop and maintain a plan for implementation of the wellness policy that allocates roles, responsibilities, actions, and timelines specific to each school.

It is recommended that the school use the [Healthy Schools Program online tools](#) to complete a school level assessment based on the Centers for Disease Control and Prevention's School Health Index, create an action plan that fosters implementation, and generate an annual progress report.

This wellness policy and the progress reports can be found at: [echs.desu.edu](http://echs.desu.edu)

### ***Recordkeeping***

The District will retain records to document compliance with the requirements of the wellness policy at [District's Administrative Offices, Office #1] and/or on the District's shared drive. The documentation will include but will not be limited to:

- The written wellness policy;
- Documentation demonstrating compliance with community involvement requirements, including (1) Efforts to actively solicit DWC membership from the required stakeholder groups; and (2) These groups' participation in the development, implementation, and periodic review and update of the wellness policy;
- Documentation of annual policy progress reports for each school under its jurisdiction; and
- Documentation of the triennial assessment of the policy for each school under its jurisdiction;
- Documentation demonstrating compliance with public notification requirements, including: (1) Methods by which the wellness policy, annual progress reports, and triennial assessments are made available to the public; and (2) Efforts to actively notify families about the availability of wellness policy.

### ***Annual Progress Reports***

The District will publish an annual report in both English (and any other appropriate language) around *July* each year to share basic information about the wellness policy, and report on the progress of each school in meeting wellness goals. This report will include, but is not limited to:

- The website address for the wellness policy and/or how the public can receive/access a copy of the wellness policy;
- A description of each school's progress in meeting the wellness policy goals;
- A summary of each school's events or activities related to wellness policy implementation;
- The name, position title, and contact information of the designated District policy leader(s) identified in Section I; and
- Information on how individuals and the public can get involved with the DWC or SWC.

### ***Triennial Progress Assessments***

At least once every three years, the District, DWC, and individual schools will evaluate compliance with the wellness policy to assess the implementation of the policy and include:

- The extent to which schools under the jurisdiction of the District are in compliance with the wellness policy;
- The extent to which the District's wellness policy compares to model wellness policies; and
- The progress made in attaining the goals of the District's wellness policy.

The position/person responsible for managing the triennial assessment and contact information is Kizzi Smith, Operations Manager.

### ***Revisions and Updating the Policy***

The DWC will update or modify the wellness policy based on the results of the annual progress reports, triennial assessments, or needs changes at least every three years, following the triennial assessment.

The District will actively notify the community about the content of the wellness plan, annual reports, triennial progress assessments, and any updates to the wellness policy annually using various mechanisms like emails and newsletters, and will ensure the communications are culturally and linguistically appropriate to the community, and any other ways that the district and individual schools are communicating other important school information with parents.

## **III. Nutrition Promotion**

Nutrition promotion positively influences lifelong eating behaviors by using evidence-based techniques and nutrition messages, and by creating food environments that encourage healthy nutrition choices and encourage participation in school meal programs.

### ***School Meals and Smart Snacks***

Our school district promotes nutrition by serving healthy meals to children that:

- include plenty of fruits, vegetables, whole grains; and
- fat-free and low-fat milk.
- are moderate in sodium;
- low in saturated fat;
- have zero grams *trans* fat per serving (nutrition label or manufacturer's specification); and
- meet the nutrition needs of school children within their calorie requirements.

The school meal programs and Smart Snacks aim to improve the diet and health of school children, help diminish childhood obesity, and model healthy eating patterns that can continue outside of school. They aim to support healthy choices while accommodating cultural food preferences and special dietary needs.

All schools within the District participate in USDA Child Nutrition Programs, including the National School Lunch Program (NSLP), the School Breakfast Program (SBP), and *Summer Food Service Program (SFS)P*. All schools within the District are committed to offering school meals through the NSLP and SBP programs, and other applicable Federal Child Nutrition Programs, that:

- Are accessible to all students;
- Are appealing and attractive to children;
- Are served in clean and pleasant settings;
- Meet or exceed [USDA nutrition standards](#);

- Promote healthy food and beverage choices using the [Smarter Lunchroom techniques](#);
- Accommodate students with special dietary needs.

*(7) Requirements for lunch periods. (i) Timing. Schools must offer lunches meeting the requirements of this section during the period the school has designated as the lunch period. Schools must offer lunches between 10 a.m. and 2 p.m. Schools may request an exemption from these times only from FNS.*

*(ii) Lunch periods for young children. With State agency approval, schools are encouraged to serve children ages 1 through 4 over two service periods. Schools may divide the quantities and/or the menu items, foods, or food items offered each time any way they wish. (iii) Adequate lunch periods. FNS encourages schools to provide sufficient lunch periods that are long enough to give all students enough time to be served and eat their lunches (Code of Federal Requirements, 210.10).*

Ideally students will be allowed at least 10 minutes to eat breakfast and at least 20 minutes to eat lunch, counting from the time they have received their meal and are seated. Students are served lunch at a reasonable and appropriate time of day.

### **Staff Qualifications and Professional Development**

All school nutrition program directors, managers, and staff will meet or exceed hiring and annual continuing education/training requirements in the [USDA Professional Standards for school Nutrition Professionals](#). These school nutrition personnel will refer to [USDA's Professional Standards for School Nutrition Standards website](#) to search for training that meets their learning needs.

### **Water**

To promote hydration, free, safe, unflavored drinking water will be available to all students throughout the school day (midnight the night before to 30 minutes after the end of the instructional day) and throughout every school campus (areas that are owned or leased by the school and used at any time for school). The District will make drinking water available where school meals are served during mealtimes.

### **Competitive Foods and Beverages**

The foods and beverages offered, sold and served outside of the school meal programs (i.e., “competitive” foods and beverages) during the school day and extended school day (time during before and after school activities) will meet or exceed the USDA Smart Snacks nutrition standards. These standards will apply in all locations and through all services where foods and beverages are sold, which may include, but are not limited to, a la carte options in cafeterias, vending machines, school stores, and snack, and food carts. The district could choose to extend this to include:

- Celebrations and parties. The district will provide a list of healthy party ideas to parents and teachers, including non-food celebration ideas. Healthy party ideas from the [Alliance for a Healthier Generation](#) and from the [USDA](#).
- Classroom snacks brought by parents. The District will provide to parents a [list of foods and beverages that meet Smart Snacks](#) nutrition standards; and
- Rewards and incentives. The District will provide teachers and other relevant school staff a [list of alternative ways to reward children](#). Foods and beverages will not be used as a reward, or withheld as punishment for any reason, such as for performance or behavior.
- Fundraising. The District will make available to parents and teachers a list of healthy fundraising ideas [examples from the [Alliance for a Healthier Generation](#) and the [USDA](#)]. Schools may also use only non-food fundraisers, and encourage those promoting physical activity (such as walk-a-thons, jump rope for heart, fun runs, etc.).

Summary of the standards and information are available at:

<http://www.fns.usda.gov/healthierschoolday/tools-schools-smart-snacks>.

The Alliance for a Healthier Generation provides a set of tools to assist with implementation of Smart Snacks available at [www.healthiergeneration.org/smartsnacks](http://www.healthiergeneration.org/smartsnacks).

### ***Food and Beverage Marketing in Schools***

Any foods and beverages marketed or promoted to students on the school campus during the school day will meet or exceed the USDA Smart Snacks in School nutrition standards. Food advertising and marketing includes, but is not limited to the following:

- Brand names, trademarks, logos or tags, except when placed on a physically present food or beverage product or its container.
- Displays, such as on vending machine exteriors.
- Corporate brand, logo, name, or trademark on school equipment, such as marquees, message boards, scoreboards, or backboards (Note: immediate replacement of these items are not required; however, districts will consider replacing or updating scoreboards or other durable equipment over time so that decisions about the replacement include compliance with the marketing policy).
- Corporate brand, logo, name, or trademark on cups used for beverage dispensing, menu boards, coolers, trash cans, and other food service equipment; as well as on posters, book covers, pupil assignment books, or school supplies displayed, distributed, offered, or sold by the District.
- Advertisements in school publications or school mailings.
- Free product samples, taste tests, or coupons of a product, or free samples displaying advertising of a product.

## **IV. Nutrition Education**

The District aims to teach, model, encourage, and support healthy eating by students. Schools will provide nutrition education that:

- Is designed to provide students with the knowledge and skills necessary to promote and protect their health;
- Includes enjoyable, developmentally-appropriate, culturally-relevant, and participatory activities, such as cooking demonstrations or lessons, promotions, taste-testing, farm visits, and school gardens;
- Promotes fruits, vegetables, whole-grain products, low-fat and fat-free dairy products, and healthy food preparation methods;
- Emphasizes caloric balance between food intake and energy expenditure;
- Links with school meal programs, cafeteria nutrition promotion activities, school gardens, Farm to School programs, other school foods, and nutrition-related community services;
- Teaches media literacy with an emphasis on food and beverage marketing; and
- Include nutrition education training for teachers and other staff.
- Encourages all health education teachers to provide opportunities for students to practice or rehearse the skills taught through the health education curricula.

*In grades K to 4, a minimum of thirty (30) hours in each grade of comprehensive health education. In grades 5 and 6, a minimum of thirty five (35) hours in each grade of comprehensive health education. In grades 7 and 8, separate from other subject areas, a minimum of sixty (60) hours of comprehensive health education. In grade 9 to 12, one half (1/2) credit of comprehensive health education is required for graduation (Delaware Code, Title 14, Requirement 851.1.1.3).*

## ***Essential Healthy Eating Topics in Health Education***

The District will include in the health education curriculum the following essential topics on healthy eating:

- The relationship between healthy eating and personal health and disease prevention
- Food guidance from [MyPlate](#)
- Reading and using USDA's food labels
- Eating a variety of foods every day
- Balancing food intake and physical activity
- Eating more fruits, vegetables, and whole grain products
- Choosing foods that are low in fat, saturated fat, and cholesterol and do not contain *trans* fat
- Choosing foods and beverages with little added sugars
- Eating more calcium-rich foods
- Preparing healthy meals and snacks
- Risks of unhealthy weight control practices
- Accepting body size differences
- Food safety
- Importance of water consumption
- Importance of eating breakfast
- Making healthy choices when eating at restaurants
- Eating disorders
- *The Dietary Guidelines for Americans*
- Reducing sodium intake
- Social influences on healthy eating, including media, family, peers, and culture
- How to find valid information or services related to nutrition and dietary behavior
- How to develop a plan and track progress toward achieving a personal goal to eat healthfully
- Resisting peer pressure related to unhealthy dietary behavior
- Influencing, supporting, or advocating for others' healthy dietary behavior

[USDA's Team Nutrition](#) provides free nutrition education and promotion materials, including standards-based nutrition education curricula and lesson plans, posters, interactive games, menu graphics, and more.

## **V. Physical Activity**

The USDA recommends that children and adolescents participate in 60 minutes of physical activity every day.

All schools in the district will be encouraged to participate in *Let's Move!* Active Schools ([www.letsmoveschools.org](http://www.letsmoveschools.org)) in order to successfully address all the Comprehensive School Physical Activity Program (CSPAP) areas.

Physical activity during the school day (including, but not limited to recess, physical activity breaks, or physical education) **will not be withheld** as punishment for any reason. The district will provide teachers and other school staff with a [list of ideas](#) for alternative ways to discipline students.

To the extent practicable, the District will ensure that its grounds and facilities are safe and that equipment is available to students to be active. The District will conduct necessary inspections and repairs.

### ***Physical Education***

Students will be provided physical education that:

- is age-appropriate
- is consistent with national and state standards for physical education
- will promote the benefits of a physically active lifestyle and will help students develop skills to engage in lifelong healthy habits, as well as incorporate essential health education concepts (discussed in the “*Essential Physical Activity Topics in Health Education*” subsection).
- is equitable for the participation of all students. Classes and equipment will be modified as needed.
- will promote student physical fitness through individualized fitness and activity assessments (via the [Presidential Youth Fitness Program](#) or other appropriate assessment tool) and will use criterion-based reporting for each student.

*All public school students in grade 1-8 shall be enrolled in a physical education program. All public school students in grades 9-12 shall complete the credit in physical education necessary to graduate from high school (Delaware Code, Title 14, Regulation 500.5.2-5.3).*

All physical education teachers in the District will be required to participate in at least once a year professional development in education.

### ***Essential Physical Activity Topics in Health Education***

The District will include in the health education curriculum the following essential topics on physical activity when student is enrolled in physical education course:

- The physical, psychological, or social benefits of physical activity
- How physical activity can contribute to a healthy weight
- How physical activity can contribute to the academic learning process
- How an inactive lifestyle contributes to chronic disease
- Health-related fitness, that is, cardiovascular endurance, muscular endurance, muscular strength, flexibility, and body composition
- Differences between physical activity, exercise, and fitness
- Phases of an exercise session, that is, warm up, workout, and cool down
- Overcoming barriers to physical activity
- Decreasing sedentary activities, such as TV watching
- Opportunities for physical activity in the community
- Preventing injury during physical activity
- Weather-related safety, for example, avoiding heat stroke, hypothermia, and sunburn while being physically active
- How much physical activity is enough, that is, determining frequency, intensity, time, and type of physical activity
- Developing an individualized physical activity and fitness plan
- Monitoring progress toward reaching goals in an individualized physical activity plan
- Dangers of using performance-enhancing drugs, such as steroids
- Social influences on physical activity, including media, family, peers, and culture
- How to find valid information or services related to physical activity and fitness
- How to influence, support, or advocate for others to engage in physical activity
- How to resist peer pressure that discourages physical activity

### ***Recess***

All elementary schools will offer recess on all or most days during the school year.

If recess is offered before lunch, schools will have appropriate hand-washing facilities and/or hand-sanitizing mechanisms located just inside/outside the cafeteria to ensure proper hygiene prior to eating and students are required to use these mechanisms before eating.

Hand-washing time, as well as time to put away coats/hats/gloves, will be built in to the recess transition period/timeframe before students enter the cafeteria.

Outdoor recess will be offered when feasible.

In the event that the school or district must conduct indoor recess, teachers and staff will promote physical activity for students, to the extent practicable.

### ***Physical Activity Breaks (Elementary and Secondary)***

The District recognizes that students are more attentive and ready to learn if provided with periodic breaks when they can be physically active or stretch.

Teachers will be recommended to provide short (3-5 minute) physical activity breaks to students during and between classroom time.

Teachers will be provided resources and links to resources, tools, and technology with ideas for physical activity breaks. Resources and ideas are available through [USDA](#) and the [Alliance for a Healthier Generation](#).

### ***Active Academics***

Teachers will incorporate movement and kinesthetic learning approaches into “core” subject instruction when possible and do their part to limit sedentary behavior during the school day.

Teachers will serve as role models by being physically active alongside the students whenever feasible.

### ***Before and After School Activities***

The District offers opportunities and encourages students to participate in physical activity either before and/or after the school day (or both) through by offering: clubs, intermural activities, sports, and other activities.

### ***Active Transport***

The District will support active transport to and from school, such as walking or biking.

## **VI. Other Activities that Promote Student Wellness**

All efforts related to obtaining federal, state, or association recognition for efforts, or grants/funding opportunities for healthy school environments will be coordinated with and complementary of the wellness policy, including but not limited to ensuring the involvement of the DWC/SWC.

All school-sponsored events will adhere to the wellness policy. All school-sponsored wellness events will include physical activity opportunities.

### ***Community Partnerships***

The District will develop relationships with community partners (i.e. hospitals, universities/colleges, local businesses, etc.) in support of this wellness policy’s implementation.

Existing and new community partnerships and sponsorships will be evaluated to ensure that they are consistent with the wellness policy and its goals.

### ***Community Health Promotion and Engagement***

The District will promote to parents/caregivers, families, and the general community the benefits of and approaches for healthy eating and physical activity throughout the school year. Families will be informed and invited to participate in school-sponsored activities and will receive information about health promotion efforts.

### ***Staff Wellness and Health Promotion***

The DWC will have a staff wellness subcommittee that focuses on staff wellness issues, identifies and disseminates wellness resources, and performs other functions that support staff wellness in coordination with human resources staff. The subcommittee leader's name is Kathryn Krieger.

Schools in the District will implement strategies to support staff in actively promoting and modeling healthy eating and physical activity behaviors.

The District promotes staff member participation in health promotion programs and will support programs for staff members on healthy eating/weight management that are accessible and free or low-cost.

### ***Professional Learning***

When feasible, the District will offer annual professional learning opportunities and resources for staff to increase knowledge and skills about promoting healthy behaviors in the classroom and school (e.g., increasing the use of kinesthetic teaching approaches or incorporating nutrition lessons into math class) and aid in their understanding of the connections between academics and health and the ways in which health and wellness are integrated into ongoing district reform or academic improvement plans/efforts.

## **Appendix A: School Level Contacts**

<b>School</b>	<b>Name</b>	<b>Title</b>	<b>Email Address</b>	<b>Role</b>

<sup>1</sup> Bradley, B, Green, AC. Do Health and Education Agencies in the United States Share Responsibility for Academic Achievement and Health? A Review of 25 years of Evidence About the Relationship of Adolescents' Academic Achievement and Health Behaviors, *Journal of Adolescent Health*. 2013; 52(5):523–532.

<sup>2</sup> Meyers AF, Sampson AE, Weitzman M, Rogers BL, Kayne H. School breakfast program and school performance. *American Journal of Diseases of Children*. 1989;143(10):1234–1239.

<sup>3</sup> Murphy JM. Breakfast and learning: an updated review. *Current Nutrition & Food Science*. 2007; 3:3–36.

<sup>4</sup> Murphy JM, Pagano ME, Nachmani J, Sperling P, Kane S, Kleinman RE. The relationship of school breakfast to psychosocial and academic functioning: Cross-sectional and longitudinal observations in an inner-city school sample. *Archives of Pediatrics and Adolescent Medicine*. 1998;152(9):899–907.

<sup>5</sup> Pollitt E, Mathews R. Breakfast and cognition: an integrative summary. *American Journal of Clinical Nutrition*. 1998; 67(4), 804S–813S.

<sup>6</sup> Rampersaud GC, Pereira MA, Girard BL, Adams J, Metzler JD. Breakfast habits, nutritional status, body weight, and academic performance in children and adolescents. *Journal of the American Dietetic Association*. 2005;105(5):743–760, quiz 761–762.

<sup>7</sup> Taras, H. Nutrition and student performance at school. *Journal of School Health*. 2005;75(6):199–213.

<sup>8</sup> MacLellan D, Taylor J, Wood K. Food intake and academic performance among adolescents. *Canadian Journal of Dietetic Practice and Research*. 2008;69(3):141–144.

<sup>9</sup> Neumark-Sztainer D, Story M, Dixon LB, Resnick MD, Blum RW. Correlates of inadequate consumption of dairy products among adolescents. *Journal of Nutrition Education*. 1997;29(1):12–20.

<sup>10</sup> Neumark-Sztainer D, Story M, Resnick MD, Blum RW. Correlates of inadequate fruit and vegetable consumption among adolescents. *Preventive Medicine*. 1996;25(5):497–505.

<sup>11</sup> Centers for Disease Control and Prevention. *The association between school-based physical activity, including physical education, and academic performance*. Atlanta, GA: US Department of Health and Human Services, 2010.

<sup>12</sup> Singh A, Uijtdewilligne L, Twisk J, van Mechelen W, Chinapaw M. *Physical activity and performance at school: A systematic review of the literature including a methodological quality assessment*. *Arch Pediatr Adolesc Med*, 2012; 166(1):49-55.

<sup>13</sup> Haapala E, Poikkeus A-M, Kukkonen-Harjula K, Tompuri T, Lintu N, Väistö J, Leppänen P, Laaksonen D, Lindi V, Lakka T. *Association of physical activity and sedentary behavior with academic skills – A follow-up study among primary school children*. *PLoS ONE*, 2014; 9(9): e107031.

<sup>14</sup> Hillman C, Pontifex M, Castelli D, Khan N, Raine L, Scudder M, Drollette E, Moore R, Wu C-T, Kamijo K. *Effects of the FITKids randomized control trial on executive control and brain function*. *Pediatrics* 2014; 134(4): e1063-1071.