
HOUSE CONCURRENT RESOLUTION

REQUESTING THE DEPARTMENT OF EDUCATION TO REPORT TO THE
LEGISLATURE ON THE STATUS OF PHYSICAL EDUCATION IN HAWAII'S
PUBLIC SCHOOLS.

1 WHEREAS, research suggests that schools that provide time
2 for high-quality physical education generate a positive effect
3 on academic achievement and some of the benefits include
4 increased concentration; improved scores in mathematics,
5 reading, and writing; and a reduction in disruptive behaviors;
6 and

7
8 WHEREAS, physical education offered within public schools
9 can provide all students access to physical activity regardless
10 of race; ethnicity; socioeconomic status; gender; or urban,
11 suburban, or rural setting; and

12
13 WHEREAS, physical education programs are critical to
14 providing students with the skills necessary to achieve and
15 maintain life-long physical fitness; and

16
17 WHEREAS, regular physical activity and physical fitness can
18 play a significant role in promoting health and preventing
19 chronic illnesses such as heart disease, cancer, type 2
20 diabetes, and osteoporosis; and

21
22 WHEREAS, in 2013, the Institute of Medicine identified
23 daily school physical education for all students as a strategy
24 to prevent obesity across the nation; and

25
26 WHEREAS, SHAPE America, the American Heart Association, and
27 a number of other national health organizations recommend that
28 schools provide one hundred fifty minutes per week of
29 instructional physical education for elementary school children
30 and two hundred twenty-five minutes per week for middle and high
31 school students throughout the school year; and
32



1 WHEREAS, the Hawaii Content and Performance Standards III
2 for physical education were based on national standards in 2005,
3 but have not been updated since then and do not align with the
4 National Physical Education Standards developed in 2013; and
5

6 WHEREAS, barriers and challenges have impeded the
7 Department of Education from fully implementing the Hawaii
8 Content and Performance Standards III for physical education in
9 all grades; now, therefore,
10

11 BE IT RESOLVED by the House of Representatives of the
12 Twenty-ninth Legislature of the State of Hawaii, Regular Session
13 of 2018, the Senate concurring, that the Department of Education
14 is requested to provide a report to the Legislature on the
15 status of physical education in Hawaii's public schools; and
16

17 BE IT FURTHER RESOLVED that the status report include but
18 not be limited to:
19

20 (1) The current state of physical education in Hawaii's
21 public schools, including the number of physical
22 education instructional minutes per week provided to
23 all students in grades K-12, qualifications of
24 personnel delivering physical education, and methods
25 for assessment of student achievement on instructional
26 standards for physical education; and
27

28 (2) A plan for adoption of current national
29 recommendations, including an estimate of needs and
30 resources to implement updated instructional
31 standards, increased minutes of instruction,
32 professional development, assessments, and sequential
33 standards-based curriculum; and
34

35 BE IT FURTHER RESOLVED that the Department of Education is
36 requested to submit a report of its findings and
37 recommendations, including any proposed legislation, to the
38 Legislature no later than twenty days prior to the convening of
39 the Regular Session of 2019; and
40

41 BE IT FURTHER RESOLVED that certified copies of this
42 Concurrent Resolution be transmitted to the Chairperson of the



H.C.R. NO. 15

1 Board of Education; Superintendent of Education; and Hawaii
 2 Association for Health, Physical Education, Recreation and
 3 Dance.

4
 5
 6

OFFERED BY:

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STATE OF HAWAII
DEPARTMENT OF EDUCATION
P.O. BOX 2360
HONOLULU, HAWAII 96804

Date: 03/21/2018
Time: 02:30 PM
Location: 309
Committee: House Education

Department: Education

Person Testifying: Dr. Christina M. Kishimoto, Superintendent of Education

Title of Resolution: HCR 015 REQUESTING THE DEPARTMENT OF EDUCATION TO REPORT TO THE LEGISLATURE ON THE STATUS OF PHYSICAL EDUCATION IN HAWAII'S PUBLIC SCHOOLS.

Purpose of Resolution:

Department's Position:

The Department of Education (Department) supports the intent of HCR 015 and respectfully is providing information regarding data pertinent to physical education in Hawaii's public schools.

The Department currently has middle and high school data from the Hawaii Youth Risk Behavior Survey (YRBS) that is conducted in compliance with the requirements of a cooperative agreement with the Centers for Disease Control and Prevention's (CDC) Division of Adolescent and School Health. The survey is a joint project of the Hawaii Departments of Education and Health (DOH) and the University of Hawaii's Curriculum Research and Development Group. The YRBS report is available on odd-numbered years, and the state is able to get data on physical education, such as the percentage of students who were physically active at least 60 minutes per day on 5 or more days. Health risk behaviors are also correlated to academic achievement; such as grades that students mostly earned in school. Brochures are printed so the data can be shared with teachers, parents, and community partners. All of these reports are available at the Hawaii Health Data Warehouse - <http://hhdw.org/health-reports-data/other-reports/>.

As part of the Department's cooperative agreement with the CDC, the Department administers the School Health Profiles Surveys on even-numbered years to secondary public and charter schools so trends and patterns can be examined about practices at the school level, such as the physical education provided. Hawaii's 2016 School Health Profiles data can be found at: <http://bit.ly/2016HIPprofiles>

Hawaii is also compared to others states in a CDC report, School Health Profiles 2016: Characteristics of Health Programs Among Secondary Schools, which can be found at: https://www.cdc.gov/healthyyouth/data/profiles/pdf/2016/2016_Profiles_Report.pdf

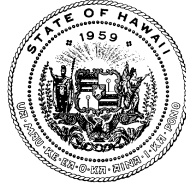
Information such as “Percentage of Secondary Schools in Which Teachers Taught Specific Physical Activity Topics in a Required Course During the Current School Year, Selected U.S. Sites: School Health Profiles, Lead Health Education Teacher Surveys, 2016” is available.

Each year, Hawaii public schools also complete the Safety and Wellness Survey (SAWS) that provides data on the implementation of the Department’s Wellness Guidelines for physical education at public, non-charter schools, such as the percentage of schools where “All required PE classes have instructional periods totaling a minimum of 45 minutes per week for grades K-3, 55 minutes per week for grades 4-5, 107 minutes per week for elementary grade 6, and 200 minutes per week for secondary grades 6-12.”

<http://www.hawaiipublicschools.org/TeachingAndLearning/HealthAndNutrition/WellnessGuidelines/Pages/home.aspx>

Thank you for this opportunity to provide testimony on HCR 015.

The Hawaii State Department of Education seeks to advance the goals of the Strategic Plan which is focused on student success, staff success, and successful systems of support. This is achieved through targeted work around three impact strategies: school design, student voice, and teacher collaboration. Detailed information is available at www.hawaiipublicschools.org.



**STATE OF HAWAII
DEPARTMENT OF HEALTH**

P. O. Box 3378
Honolulu, HI 96801-3378
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**Testimony COMMENTING on H.C.R 15
REQUESTING THE DEPARTMENT OF EDUCATION TO REPORT TO THE
LEGISLATURE ON THE STATUS OF PHYSICAL EDUCATION IN HAWAII'S PUBLIC
SCHOOLS**

**REPRESENTATIVE JUSTIN H. WOODSON, CHAIR
HOUSE COMMITTEE ON EDUCATION**

Hearing Date: March 21, 2018

Room Number: 309

1 **Fiscal Implications:** The Department of Health (DOH) appreciates the opportunity to provide
2 comment on House Concurrent Resolution 15 (H.C.R 15), and respectfully defers to the
3 Department of Education (DOE) regarding implementation of the measure and to the priorities
4 set forth in the Governor's Supplemental Budget Request.

5 **Department Testimony:** The purpose of this Act is to request the DOE to provide a report on
6 the status of physical education (PE) in Hawaii's public schools.

7 The DOH supports the DOE in its vision of "*educated, healthy, and joyful lifelong*
8 *learners*" and its strategic plan which outlines objectives for "whole child" and "well-rounded"
9 education. The DOH also supports the Hawaii State Board of Education in full implementation
10 of its policies 103-1 (Health and Wellness) and 105-1 (Academic Program) which cover
11 requirements for PE in schools.

12 Quality PE contributes to a child's daily accumulation of physical activity and helps to
13 meet the recommendation of 60 minutes or more of physical activity each day (Physical Activity
14 Guidelines for Americans, U.S. Department of Health and Human Services). Regular physical
15 activity also helps students to achieve an energy balance - which is essential for maintaining a

1 healthy weight. Almost one-third (28.3% YRBS 2015) of Hawaii's adolescents are currently
2 overweight or obese.

3 SHAPE America, the American Heart Association, and a number of other national health
4 organizations recommend that schools provide 150 minutes per week of instructional PE for
5 elementary school children, and 225 minutes per week for middle and high school students
6 throughout the school year. Currently in Hawaii, DOE Wellness Guidelines recommend 45
7 minutes for elementary school children and 200 minutes for secondary (middle and high school)
8 youth.^{1,2}

9 According to the Youth Risk Behavior Survey (YRBS) 2015, only 6.7% of Hawaii's
10 public school students have daily PE compared to the national average of 29.8%. Female
11 students in Hawaii are significantly less likely to participate in daily PE when compared to males
12 (5.0% vs. 8.5%). There is also variation in student participation in PE when the YRBS data are
13 analyzed by ethnicity, grade level, and county of residence.

14 PE provides a safe learning environment for all children, including those with disabilities,
15 to develop movement skills that contribute to lifelong healthy behaviors. According to the
16 Superintendent's Annual Report (2015), 10% of public school students qualify for Special
17 Education. PE is especially important for youth who lack access to physical activity
18 opportunities in their home or community environment. More than half (58%) of Hawaii's
19 public school students are considered economically disadvantaged (Superintendent's Annual
20 Report 2015).

21 The DOH recognizes that capacity building is needed so schools can provide quality PE
22 and advance the recommended national standards. The DOH has partnered with DOE and

¹ Society of Health and Physical Educators. *Physical Education Guidelines*. Retrieved
from <https://www.shapeamerica.org/standards/guidelines/peguidelines.aspx>.

² American Heart Association. (2015, April 25). Increasing and Improving Physical Education and Physical Activity in
Schools: Benefits for Children's Health and Educational Outcomes. Retrieved
from https://www.heart.org/idc/groups/heart-public/@wcm/@adv/documents/downloadable/ucm_473782.pdf.

1 supported PE and health education (HE) capacity building efforts for more than 15 years. For
2 the school year 2018-19, the DOH will fund eight (8) PE and HE resource teachers with one (1)
3 to be located in each District statewide. These resource teachers will provide training, technical
4 assistance, and a lending library of instructional materials for schools to help them to implement
5 quality, standards-based instruction in PE.

6 Thank you for the opportunity to provide testimony.

7 **Offered Amendments:** None.



American Heart Association Testimony in Strong Support of HCR 15, “Requesting the Department of Education to Report to the Legislature on the Status of Physical Education in Hawaii’s Public Schools”

The American Heart Association strongly supports HCR 15.

Childhood obesity is a U.S. epidemic. Hawaii youths are not immune, falling at or near the national average of childhood obesity statistics, and the trend for Hawaii’s youths is unfortunately climbing. More focus is needed to improve and instill both healthy nutrition and physical activity lifestyle habits in Hawaii youths. Currently, physical education is not required for Hawaii middle schools, and only one semester is required in high schools. If healthy lifestyle habits are not established at young ages, it is very difficult to change unhealthy habits in later ages.

The burden of cardiovascular disease is now growing faster than our ability to combat it due to the obesity epidemic, poor diet, high blood pressure and a dramatic rise in Type 2 diabetes – all major risk factors for heart disease and stroke. In a frightening reversal, the overall decline in CVD mortality rates have flattened to less than 1 percent per year since 2011, and rates have even worsened for our most at-risk populations. In 2015, the death rate from heart disease actually increased by 1 percent for the first time since 1969, according to the Centers for Disease Control and Prevention’s (CDC) National Center for Health Statistics.

In addition, CVD has become our nation’s costliest chronic disease. In 2014, stroke and heart failure were the most expensive chronic conditions in the Medicare fee-for-service program. Expenses associated with CVD are expected to soar in the coming years and surpass medical cost estimates for other chronic diseases, such as diabetes and Alzheimer’s. Based on prevalence, death rates, disability and cost, CVD will continue to be the most burdensome disease Americans will face in the next decades.

The costs of obesity, which is rooted in lifestyle habits established at younger ages, is staggering, **costing \$190 billion a year in weight-related medical bills**, according to the American Heart Association. In 2011, the CDC estimated that healthcare costs exceed \$8,600 annually (per capita). Another study estimated that medical spending attributable to obesity was estimated to be more than \$1,400 higher than normal weight individuals.

Obesity and lack of physical fitness in America’s youth also affect our national security. Senior former military leaders report that 27% of young Americans are too overweight to serve in the military. Around 15,000 potential recruits fail their physicals every year because they are too heavy.

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free of cardiovascular
diseases and stroke.”*

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Please remember the American Heart Association in your will.





The American Heart Association strongly advocates for daily, quality physical education in our nation's schools to give children a healthy head start on life.

ACTIVE CHILDREN THRIVE ACADEMICALLY AND SOCIALLY

Physically active children are more likely to thrive academically and socially. Through effective physical education, children learn how to incorporate safe and healthy activities into their lives. Physical education is an integral part of developing the "whole" child for success in social settings and the learning environment.

- Evidence suggests that physical activity has a positive impact on cognitive ability, avoiding tobacco use, insomnia, depression, and anxiety. Other studies have shown that physically fit children have higher scholastic achievement, better classroom behavior and less absenteeism than their unfit counterparts.
- In the last several years, schools have made no progress on increasing physical education, recess, or other physical activity opportunities during the day.
- Yet, 95% of parents believe physical education should be part of a school curriculum for all students in grades K-12.

QUANTITY AND QUALITY

- The national recommendation for physical education is 150 minutes per week in elementary and 225 minutes per week in middle and high schools.
- The quality of the physical education program is also paramount. A high-quality physical education program taught by a certified physical education teacher enhances the physical, mental, and social/emotional development of all children and helps them understand, improve, and maintain physical well-being.

The American Heart Association advocates for daily, quality physical education in our nation's schools, together with other healthy lifestyle choices. We support state policy that would:

- Require school districts to develop and implement a planned K-12 physical education curriculum that adheres to national and state standards for health and physical education, including providing 150 minutes per week of physical education in elementary school, 225 minutes per week in middle school and requiring physical education as a requirement for graduation from high school. The physical education grade should be counted toward students' overall grade point average.

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Please remember the American Heart Association in your will.





- Hire a physical education coordinator at the state level to provide resources and offer support to school districts across the state.
- Offer regular professional development opportunities to physical education teachers that are specific to their field.
- Require physical education teachers to be highly qualified and certified.
- Add valid fitness, cognitive, and affective assessments in physical education that are based on student improvement and knowledge gain.
- Require that students be active in moderate vigorous physical activity for at least 50% of physical education class time.
- Assure that physical education programs have appropriate equipment and adequate facilities.
- Not allow students to opt out of physical education to prepare for other classes or standardized tests.
- Not allow waivers or substitutions for physical education.

The AHA urges legislators to support HCR 15 as a first step toward implementing one of the important cornerstones of what will need to be a comprehensive approach to addressing obesity in our state.

Respectfully submitted,

Hawaii Government Relations/Communications Director

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Please remember the American Heart Association in your will.



HCR-15

Submitted on: 3/19/2018 2:33:31 PM

Testimony for EDN on 3/21/2018 2:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Javier Mendez-Alvarez	Individual	Support	No

Comments:

LATE

TESTIMONY



Date: March 21, 2018

To: The Honorable Justin Woodson, Chair
The Honorable Sam Satoru Kong, Vice Chair
Members of the House Committee on Education

LATE

From: Trish La Chica, Policy and Advocacy Director, Hawai'i Public Health Institute

Re: **Strong Support for HCR 15**

Hrg: March 21, 2018 at 2:30 pm at Conference Room 309

Thank you for the opportunity to testify in **strong support** for HCR15, requesting the Department of Education to report to the legislature on the status of physical education in Hawaii's public schools.

Created by the legislature in 2012, the Obesity Prevention Task Force is comprised of over 40 statewide organizations, and works to make recommendations to reshape Hawaii's school, work, community, and health care environments, making healthier lifestyles obtainable for all Hawaii residents. The Hawai'i Public Health Institute (HIPHI) convenes the Task Force and supports and promotes policy efforts to create a healthy Hawai'i.

In Hawaii, physical education is a required course in both elementary and high school, but not for intermediate and middle school students. Due to budget cuts and lack of resources, PE was eliminated in middle schools in 2009. According to the 2017 Hawaii Youth Risk Behavior Survey, only 15.4% of high school and 20.2% of middle school students in our state meet national physical activity recommendations. This means that majority of youth in our state do not receive federally recommended levels physical activity. Quality physical education contributes to a child's daily accumulation of physical activity and is of particular importance for children who are overweight or who lack access to these opportunities in the home environment.

Providing meaningful and high-quality physical education and health education courses are critical to providing our students with the skills and habits necessary to achieve and maintain life-long physical fitness and wellness that can prevent obesity, cardiovascular, and other chronic diseases. HCR15 will create a baseline understanding of the status of PE in public schools and what policy changes, resources, and recommendations are necessary to meet national PE recommendations.

Mahalo for the opportunity to testify. Please pass HCR15 out of committee.

Mahalo,

A handwritten signature in black ink, appearing to read 'Trish', enclosed within a light gray rectangular border.

Trish La Chica, MPA
Policy and Advocacy Director

HCR-15

Submitted on: 3/21/2018 4:18:35 AM

Testimony for EDN on 3/21/2018 2:30:00 PM

LATE

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	Oahu County Committee on Legislative Priorities of the Democratic Party of Hawai'i	Support	No

Comments: