

FEB 01 2018

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# SENATE 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



# S.C.R. NO. 25

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 Senate of the Twenty-ninth  
12 Legislature of the State of Hawaii, Regular Session of 2018, the  
13 House of Representatives concurring, that the Department of  
14 Education is requested to provide a report to the Legislature on  
15 the 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



# S.C.R. NO. 25

1 Board of Education; Superintendent of Education; and Hawaii  
 2 Association for Health, Physical Education, Recreation and  
 3 Dance.  
 4  
 5  
 6

OFFERED BY Michelle A. Leland

~~SC 4242-029~~

Stacy S

Matt

Clarence K. Kishikawa

[Signature]

[Signature]

Frederic R. Mungie

[Signature]

[Signature]

[Signature]

James M. Mendenhall

Breene Harris

[Signature]

Will Eyo

Rosely de Bahr





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

**Date:** 04/13/2018  
**Time:** 02:00 PM  
**Location:** 309  
**Committee:** House Education

**Department:** Education

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

**Title of Resolution:** SCR 025 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 SCR 025 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 other 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](https://www.cdc.gov/healthyyouth/data/profiles/pdf/2016/2016_Profiles_Report.pdf)

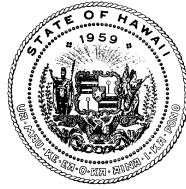
Information such as “Percentage of Secondary Schools in Which Teachers Taught Specific Physical Activity Topics in a Required Course During the Current School Year, Selected U.S. Sites: School Health Profiles, Lead Health Education Teacher Surveys, 2016” is available.

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 SCR 025.

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](http://www.hawaiipublicschools.org).



**STATE OF HAWAII  
DEPARTMENT OF HEALTH**

P. O. Box 3378  
Honolulu, HI 96801-3378  
doh.testimony@doh.hawaii.gov

**Testimony in SUPPORT of S.C.R 25  
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: April 13, 2018

Room Number: 309

1 **Fiscal Implications:** The Department of Health (DOH) respectfully defers to the Department of  
2 Education (DOE) regarding implementation of the measure and to the priorities set forth in the  
3 Governor's Supplemental Budget Request.

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

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

11 Quality PE contributes to a child's daily accumulation of physical activity and helps to  
12 meet the recommendation of 60 minutes or more of physical activity each day (Physical Activity  
13 Guidelines for Americans, U.S. Department of Health and Human Services). Regular physical  
14 activity also helps students to achieve an energy balance - which is essential for maintaining a  
15 healthy weight. Almost one-third (28.4% [YRBS 2017](#)) of Hawaii's adolescents are currently  
16 overweight or obese.

1           SHAPE America, the American Heart Association, and a number of other national health  
2 organizations recommend that schools provide 150 minutes per week of instructional PE for  
3 elementary school children, and 225 minutes per week for middle and high school students  
4 throughout the school year. Currently in Hawaii, DOE Wellness Guidelines recommend 45  
5 minutes for elementary school children and 200 minutes for secondary (middle and high school)  
6 youth.<sup>12</sup>

7           According to the most recent Hawaii Youth Risk Behavior Survey ([YRBS](#)) 2017, only  
8 5.8% of Hawaii’s public school students have daily PE compared to the national average of  
9 29.8%. Female students in Hawaii are significantly less likely to participate in daily PE when  
10 compared to males (4.0% vs. 7.7%). There is also variation in student participation in PE when  
11 the YRBS data are analyzed by ethnicity, grade level, and county of residence.

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

19           The DOH recognizes that capacity building is needed so schools can provide quality PE  
20 and advance the recommended national standards. The DOH has partnered with DOE and  
21 supported PE and health education (HE) capacity building efforts for more than 15 years. For  
22 the school year 2018-19, the DOH will fund eight (8) PE and HE resource teachers with one (1)  
23 to be located in each District statewide. These resource teachers will provide training, technical

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

<sup>2</sup> 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](https://www.heart.org/idc/groups/heart-public/@wcm/@adv/documents/downloadable/ucm_473782.pdf).

- 1 assistance, and a lending library of instructional materials for schools to help them to implement
- 2 quality, standards-based instruction in PE.
- 3 Thank you for the opportunity to provide testimony.
- 4 **Offered Amendments:** None.





The American Heart Association strongly supports SCR 25.

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.

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.

*"Building healthier lives,  
free of cardiovascular  
diseases and stroke."*

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Please remember the American Heart Association in your will.



## 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.



- 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 SCR 25 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,

A handwritten signature in black ink that reads "Ronald B. Weisman".

Hawaii Government Relations/Communications Director

*"Building healthier lives,  
free of cardiovascular  
diseases and stroke."*

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Please remember the American Heart Association in your will.





Date: April 12, 2018

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

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

Re: **Strong Support for SCR 25**

Hrg: April 13, 2018 at 2:00 pm at Conference Room 309

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Thank you for the opportunity to testify in **strong support** for SCR25, 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 Hawai'i 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.

Health education teaches about physical, mental, emotional and social health. It motivates students to improve and maintain their health, prevent disease, and reduce risky behaviors. School health programs can have positive effects on health and educational outcomes, and studies have shown that healthier students tend to do better in school. They have higher attendance, have better grades, and perform better on tests.

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. SCR25 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 SCR25 out of committee.

Mahalo,

A handwritten signature in black ink, appearing to read "Trish".

Trish La Chica, MPA  
Policy and Advocacy Director

**SCR-25**

Submitted on: 4/12/2018 1:58:09 PM

Testimony for EDN on 4/13/2018 2:00:00 PM

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

Comments:

To the Honorable Justin H. Woodson, Chair; the Honorable Sam Satoru Kong, Vice-Chair and Members of the Committee on Education:

Good afternoon. My name is Melodie Aduja. I serve as Chair of the Oahu County Committee ("OCC") on Legislative Priorities of the Democratic Party of Hawaii. Thank you for the opportunity to provide written testimony on **SCR25** relating to the status of physical education in Hawaii's public schools.

The OCC on Legislative Priorities is in favor of **SCR25** and strongly supports its adoption.

**SCR25** is in accord with the Democratic Platform as it requests the Department of Education to provide a report to the Legislature on the status of physical education in Hawaii's public schools; and that the status report include but not be limited to: (1) the current state of physical education in Hawaii's public schools, including the number of physical education instructional minutes per week provided to all students in grades K-12, qualifications of personnel delivering physical education, and methods for assessment of student achievement on instructional standards for physical education; and (2) a plan for adoption of current national recommendations, including an estimate of needs and resources to implement updated instructional standards, increased minutes of instruction, professional development, assessments, and sequential standards-based curriculum.

The DPH Platform states that "We believe that the future of our state as well as our country depends upon an educated and knowledgeable citizenry. We support the prioritization of our resources toward providing quality public education and library services to every student, regardless of learning capacity or ability to pay, in an environment conducive to the learning process. These resources shall be made available at every level, from pre-school through higher education, including life-long learning. Educational facilities must be maintained, renovated and built to 21st century

innovations so that our students learn in well-designed, safe environments." (Platform of the DPH, P.6, Lines 296-302 (2016)).

Given that **SCR25** requests the Department of Education to provide a report to the Legislature on the status of physical education in Hawaii's public schools; and that the status report include but not be limited to: (1) the current state of physical education in Hawaii's public schools, including the number of physical education instructional minutes per week provided to all students in grades K-12, qualifications of personnel delivering physical education, and methods for assessment of student achievement on instructional standards for physical education; and (2) a plan for adoption of current national recommendations, including an estimate of needs and resources to implement updated instructional standards, increased minutes of instruction, professional development, assessments, and sequential standards-based curriculum, it is the position of the OCC Legislative Priorities Committee to strongly support its adoption.

Thank you very much for your kind consideration.  
Sincerely yours,

/s/ Melodie Aduja  
Melodie Aduja, Chair, OCC Legislative Priorities Committee  
Email: legislativepriorities@gmail.com, Text/tel.: (808) 258-8889

**SCR-25**

Submitted on: 4/12/2018 3:33:10 PM

Testimony for EDN on 4/13/2018 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Aly Hite	Individual	Support	No

Comments:



**LATE**

**SCR-25**

Submitted on: 4/12/2018 8:17:39 PM  
Testimony for EDN on 4/13/2018 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
PHC HNL	Pioneering Healthier Communities of Honolulu	Support	No

Comments:

Re: SCR 25

The Pioneering Healthier Communities (PHC) Initiative brings together local, diverse leaders to discuss and support strategies, policies and programs that we can accomplish together to build healthier communities in our island home. The Honolulu Committee was established in 2009. The members of PHC of Honolulu are involved in helping children and families to become healthier through schools, afterschool programs, healthcare and community initiatives.

The Pioneering Healthier Community (PHC) Leadership Committee strongly supports SCR25, requesting the Department of Education to report to the Legislature on the Status of Physical Education in Hawaii’s public schools.

The PHC members are very concerned about the health of Hawaii’s keiki. Many children in Hawaii are developing the chronic disease risk factors such as poor nutrition, lack of physical activity, and obesity. This is important in light of Hawaii’s already high prevalence of diabetes and cardiovascular disease, especially in many rural and economically disadvantaged communities. These risk factors are developing in early childhood and worsen during adolescence.

If we are serious about supporting health, tackling healthcare costs and creating vibrant, more productive communities in Hawaii, we must prevent obesity and chronic disease before they start. This will take a sustained, comprehensive strategy involving every aspect of our society – including government, business, healthcare, employers, schools, childcare and more. This includes meaningful and high-quality health and physical education (PE) for every student in public schools. High quality health and PE class has been shown to health over the lifetime of the student. Students who engage in high quality PE have also been shown to have better focus, behavior, and academic outcomes.

Currently, the availability of high quality health and PE for Hawaii’s public school students varies tremendously across the state. While many schools have wonderful, comprehensive, innovative programs, others have little PE curriculum.

As such, we urge you to pass SCR25 so the Legislature and public can understand the status of PE in Hawaii's public schools and take the necessary actions to ensure the health of Hawaii's children.

Thank you for this opportunity to testify.

Sincerely,

Michael Broderick

Stacy Evensen

Jennifer Dang

Amy Asselbaye

Joy Barua

Daniela Kittinger

Barbara Pleadwell

Daniel Leung

Michael Libertini

Ray L'Heureux

John Mai

May Okihiro

Diane Tabangay

Tina Tamai

Paula Adams

**SCR-25**

Submitted on: 4/12/2018 4:18:05 PM  
Testimony for EDN on 4/13/2018 2:00:00 PM



<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Donna Ede	Individual	Support	No

Comments:

This is what is happening in Hawaii's public school physical education classes. This is also why we need to increase support for K-12 physical education in Hawaii's schools. Mahalo, Donna Ede - 5349 Ophihi St., Honolulu, Hawaii 96821

[Hawaii Physical Education Teachers March 20, 2018 Opened SHAPE America National Conference with the presentation linked below:](#) Please scroll to about 27:11

[https://m.facebook.com/story.php?story\\_fbid=10156172099751445&id=169936651444](https://m.facebook.com/story.php?story_fbid=10156172099751445&id=169936651444)