



Increasing and Improving Physical Education and Physical Activity in Schools Benefits for Children's Health and Educational Outcomes

The American Heart Association's Position

- Physical education in the nation's schools is an important part of a student's comprehensive, well-rounded education program and a means of positively affecting life-long health and well-being.
- At a minimum, the physical education program should provide physical activity to enhance current health while teaching knowledge and skills that foster a long-term commitment to physical activity as part of a healthy lifestyle.
- The American Heart Association advocates for more frequent, effective physical education in all schools. Optimally, physical education will engage students in health-promoting physical activity for at least half of class time and teach them the knowledge and skills necessary for lifelong physical activity. The AHA recommends 150 minutes of physical education each week for children in elementary school and 225 minutes per week for middle school and high school.
- Physical education should be supplemented, but not replaced, by additional physical activity opportunities including classroom physical activity breaks, active learning, intramurals, afterschool programs, and recess.
- School districts should be held accountable for offering effective physical education and providing other opportunities for students to be physically active during the school day.
- Students should be assessed for their knowledge gain in physical education and physical fitness status and improvement over time. Schools should report these results to the district and appropriate state agency in an aggregate manner and make these data available to the public.

Fast Facts:

1. In 2017, only 26 percent of high school students surveyed had participated in at least 60 minutes of physical activity per day and only 30 percent attended physical education class daily while in school.¹
2. Many comprehensive reviews have substantiated that school-based interventions increase physical activity among students² and have positive effects on obesity prevention.³
3. A 2017 benefit-cost analysis⁴ by the Washington State Institute for Public Policy (WSIPP) on school-based programs to increase physical activity found that they were associated with a positive benefit to cost ratio of approximately \$33.28 over a lifetime due to reductions in obesity and increased labor market earnings due to the positive impact of physical activity on academic achievement.

For more information and resources from the American Heart Association's policy research department on physical education in schools please visit: <http://www.heart.org/en/about-us/policy-research>

1. Kann L, McManus T, Harris W, et al. Youth risk behavior surveillance — United States, 2017. *MMWR Surveillance Summaries*. 2018;67(No. SS-8):1-114.
2. The Guide to Community Preventive Services. Behavioral and social approaches to increase physical activity: Enhanced school-based physical education. *The Community Guide: What Works to Promote Health* 2013; Available at: <http://www.thecommunityguide.org/pa/behavioral-social/schoolbased-pe.html>. Accessed September 6, 2018.
3. Wang Y, Cai L, Wu Y, et al. What childhood obesity prevention programmes work? A systematic review and meta-analysis. *Obesity Reviews*. 2015;16(7):547-565.
4. Washington State Institute for Public Policy. *Benefit-cost technical documentation: Washington state institute for public policy benefit-cost model*. Washington State Dec 2017. Available at: <http://wsipp.wa.gov/TechnicalDocumentation/WsippBenefitCostTechnicalDocumentation.pdf>