

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
<b>School Health Coordination</b>														
Percentage of schools that ever used the School Health Index or other self-assessment tool to assess school policies, activities, and programs in the following areas:														
Nutrition					37.0	16.4	40.3	47.4	35.1	62.1	Increased, 2008-2018	Increased, 2008-2012	¶	
Tobacco-use prevention					46.8	22.4	54.8	59.6	43.9	52.6	Increased, 2008-2018	Increased, 2008-2012	¶	
Unintentional injury and violence prevention (safety)						20.9	41.9	50.9	49.1	56.1	§	Not available	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools with a School Improvement Plan that includes health-related objectives on the following topics:														
Health education						9.0	15.5	28.1	15.4	26.1		§	Not available	¶
Physical education								28.1	21.2	24.4		§	Not available	¶
Physical activity								26.3	17.3	26.7		§	Not available	¶
School meal programs								23.2	21.2	22.2		§	Not available	¶
Foods and beverages available at school outside the school meal programs								14.3	17.3	24.4		§	Not available	¶
Health services						13.6	17.2	30.4	21.2	33.3		§	Not available	¶
Counseling, psychological, and social services									30.8	46.7		§	Not available	Not available
Physical environment									38.5	31.8		§	Not available	Not available

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools with a School Improvement Plan that includes health-related objectives on the following topics:														
Social and emotional climate										40.4	44.4	§	Not available	Not available
Family engagement										46.2	46.7	§	Not available	Not available
Community involvement										44.2	46.7	§	Not available	Not available
Employee wellness										17.0	34.7	§	Not available	Not available
Percentage of schools that reviewed health and safety data as part of school's improvement planning process*							77.4	86.0	81.4	92.2	§	Not available	¶	
Percentage of schools that currently have someone who oversees or coordinates school health and safety programs and activities					92.4	71.2	87.5	86.2	89.7	98.3	Increased, 2008-2018	Decreased, 2008-2012	¶	

\* Among schools that engaged in an improvement planning process during the past year.

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>	
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018				
Percentage of schools that have one or more than one group (e.g., a school health council, committee, team) that offers guidance on the development of policies or coordinates activities on health topics					47.9	46.4	35.8	34.4	55.2	51.7	79.3	Increased, 2006-2018	Decreased, 2006-2012	¶	
Percentage of schools that have a school health council, committee, or team that did the following activities during the past year:*															
Identified student health needs based on a review of relevant data									90.9	86.7	73.3	87.0	§	Not available	¶
Recommended new or revised health and safety policies and activities to school administrators or the school improvement team									86.4	80.0	80.0	84.8	§	Not available	¶
Sought funding or leveraged resources to support health and safety priorities for students and staff									63.6	48.3	60.0	58.7	§	Not available	¶

\* Among schools that have one or more than one group that offers guidance on the development of policies or coordinates activities on health topics.

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools that have a school health council, committee, or team that did the following activities during the past year:*														
Communicated the importance of health and safety policies and activities to district administrators, school administrators, parent-teacher groups, or community members							86.4	90.0	90.0	89.1		§	Not available	¶
Reviewed health-related curricula or instructional materials							72.7	75.9	83.3	73.9		§	Not available	¶
Assessed the availability of physical activity opportunities for students								93.3	80.0	89.1		§	Not available	¶
Developed a written plan for implementing a Comprehensive School Physical Activity Program (a multi-component approach that provides opportunities for students to be physically active before, during, and after school)										46.7	46.7	§	Not available	Not available

\* Among schools that have one or more than one group that offers guidance on the development of policies or coordinates activities on health topics.

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
<b>School Connectedness</b>														
Percentage of schools that have any clubs that give students opportunities to learn about people different from them, such as students with disabilities, homeless youth, or people from different cultures									84.7	80.7	86.0	§	Not available	¶
Percentage of schools that offer each of the following activities for students to learn about people different from them, such as students with disabilities, homeless youth, or people from different cultures:														
Lessons in class									91.4	69.0	87.5	§	Not available	¶
Special events sponsored by the school or community organizations (e.g., multicultural week, family night)									84.5	76.8	80.0	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
<b>Sexual Orientation</b>														
Percentage of schools that have a student-led club that aims to create a safe, welcoming, and accepting school environment for all youth, regardless of sexual orientation or gender identity						57.6	31.3	47.5	69.5	55.2	74.1	Increased, 2008-2018	Increased, 2008-2014	¶
Percentage of schools that engage in the following LGBTQ youth-related practices:														
Identify “safe spaces” (e.g., a counselor’s office, designated classroom, or student organization) where LGBTQ youth can receive support from administrators, teachers, or other school staff							94.0	81.3	88.1	91.4	98.3	§	Not available	¶
Prohibit harassment based on a student’s perceived or actual sexual orientation or gender identity							100.0	98.4	100.0	100.0	100.0	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools that engage in the following LGBTQ youth-related practices:														
Encourage staff to attend professional development on safe and supportive school environments for all students, regardless of sexual orientation or gender identity						82.1	81.3	89.8	94.8	100.0		§	Not available	¶
Facilitate access to providers not on school property who have experience in providing health services, including HIV/STD testing and counseling, to LGBTQ youth						95.5	67.2	78.0	67.3	75.9		§	Not available	¶
Facilitate access to providers not on school property who have experience in providing social and psychological services to LGBTQ youth						94.0	65.6	77.6	67.2	84.5		§	Not available	¶
LGBTQ. Percentage of schools that implement HIV, other STD, and pregnancy prevention strategies that meet the needs of lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth						75.4	36.8	56.9	44.6	72.4		§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.



# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
<b>Bullying and Sexual Harassment</b>														
Percentage of schools in which staff received professional development on preventing, identifying, and responding to student bullying and sexual harassment, including electronic aggression									93.2	84.2	89.7	§	Not available	¶
Percentage of schools that have a designated staff member to whom students can confidentially report student bullying and sexual harassment, including electronic aggression									91.5	91.4	100.0	§	Not available	¶
Percentage of schools that use electronic, paper, or oral communication to publicize and disseminate policies, rules, or regulations on bullying and sexual harassment, including electronic aggression									98.3	94.8	96.6	§	Not available	¶
SSE PM 4. Percentage of schools that prevent bullying and sexual harassment, including electronic aggression, among all students									58.9	50.0	77.2	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
<b>Required Physical Education</b>														
Percentage of schools that taught required physical education in the following grades:*														
6th grade				95.6	100.0	95.4	100.0	100.0	96.9	100.0	100.0	Increased, 2004-2018	†	¶
7th grade				100.0	100.0	95.6	100.0	100.0	100.0	100.0	100.0	Increased, 2004-2018	†	¶
8th grade				100.0	100.0	95.4	100.0	100.0	100.0	100.0	100.0	Increased, 2004-2018	†	¶
9th grade				100.0	96.8	95.7	100.0	100.0	100.0	100.0	100.0	Increased, 2004-2018	†	¶
10th grade				94.4	86.2	95.4	97.0	96.6	96.2	100.0	100.0	Increased, 2004-2018	†	¶
11th grade				27.3	22.7	34.9	36.4	57.7	76.0	52.0	52.2	Increased, 2004-2018	Increased, 2004-2014	¶
12th grade				27.3	22.7	34.9	36.4	57.7	76.0	52.0	52.2	Increased, 2004-2018	Increased, 2004-2014	¶

\* Among schools with students in that grade. The results published here for 2012 and prior years may not match previously published numbers because the manner in which these were calculated changed in 2014.

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
<b>Physical Education and Physical Activity</b>														
Percentage of schools in which physical education teachers or specialists received professional development on physical education or physical activity during the past year									96.5	84.5	94.8	§	Not available	¶
Percentage of schools in which those who teach physical education are provided with the following materials:														
Goals, objectives, and expected outcomes for physical education					98.1	100.0	98.4	98.3	94.8	98.3	Decreased, 2008-2018	†	¶	
A chart describing the annual scope and sequence of instruction for physical education					89.2	100.0	88.9	87.9	86.2	93.1	Decreased, 2008-2018	†	¶	
Plans for how to assess student performance in physical education					96.3	100.0	96.8	94.8	84.5	98.3	Decreased, 2008-2018	†	¶	
A written physical education curriculum					94.6	98.5	88.9	84.5	77.6	89.7	Decreased, 2008-2018	Decreased, 2008-2014	¶	
Resources for fitness testing									100.0	100.0	100.0	§	Not available	¶
Physical activity monitoring devices, such as pedometers or heart rate monitors, for physical education									77.6	67.2	77.6	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which students participate in physical activity breaks in classrooms during the school day outside of physical education							38.1	44.8	46.6	50.0	§	Not available	¶	
Percentage of schools that offer opportunities for all students to participate in intramural sports programs or physical activity clubs					77.9	78.8	85.9	80.7	75.9	81.0	No linear change	Increased, 2008-2012	¶	
Percentage of schools that offer interscholastic sports to students							64.1	55.2	56.9	50.0	§	Not available	¶	
Percentage of schools that offer opportunities for students to participate in physical activity before the school day through organized physical activities or access to facilities or equipment for physical activity								54.4	46.6	44.8	§	Not available	¶	
Percentage of schools that have a joint use agreement for shared use of school or community physical activity facilities							73.0	67.8	72.4	58.6	§	Not available	¶	
CSPAP (2.6.03). Percentage of schools that have established, implemented, or evaluated CSPAP								5.3	6.9	3.4	§	Not available	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
<b>Tobacco-Use Prevention Policies</b>														
Percentage of schools that have adopted a policy prohibiting tobacco use			100.0	100.0	100.0	100.0	98.5	98.4	96.5	93.1	91.4	Decreased, 2002-2018	†	¶
Percentage of schools that prohibit tobacco use by students, staff, and visitors in school buildings, at school functions, in school vehicles, on school grounds, and at off-site school events, applicable 24 hours a day and seven days a week			71.1	66.5	74.0	98.1	95.5	71.4	71.7	77.8	64.3	Decreased, 2002-2018	Increased, 2002-2008 Decreased, 2008-2018	¶
Percentage of schools that post signs marking a tobacco-free school zone, that is, a specified distance from school grounds where tobacco use is not allowed					79.5	96.2	98.5	92.2	84.9	87.7	81.0	Decreased, 2006-2018	Increased, 2006-2014	¶

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
<b>Nutrition-Related Policies and Practices</b>														
Percentage of schools that always or almost always offer fruits or non-fried vegetables at school celebrations when foods or beverages are offered						44.1	29.9	34.4	50.8	46.6	25.0	Decreased, 2008-2018	Increased, 2008-2014	¶
Percentage of schools in which students can purchase snack foods or beverages from one or more vending machines at the school or at a school store, canteen, or snack bar			81.6	92.8	84.5	77.3	62.7	71.9	66.1	66.7	56.1	Decreased, 2002-2018	Decreased, 2002-2014	¶
Percentage of schools in which students can purchase the following snack foods or beverages from one or more vending machines at the school or at a school store, canteen, or snack bar:														
Chocolate candy			59.2	44.5	43.8	5.7	9.0	9.4	6.8	5.4	0.0	Decreased, 2002-2018	Decreased, 2002-2010	¶
Other kinds of candy			57.1	44.6	43.8	5.7	9.0	9.4	10.2	5.4	0.0	Decreased, 2002-2018	Decreased, 2002-2010	¶
Salty snacks that are not low in fat (e.g., regular potato chips)			75.5	83.2	67.0	11.4	19.4	15.6	16.9	10.7	5.5	Decreased, 2002-2018	Decreased, 2002-2010	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which students can purchase the following snack foods or beverages from one or more vending machines at the school or at a school store, canteen, or snack bar:														
Low sodium or “no added salt” pretzels, crackers, or chips									50.0	39.3	36.4	§	Not available	¶
Cookies, crackers, cakes, pastries, or other baked goods that are not low in fat						20.6	22.4	28.1	22.4	16.4	20.4	Decreased, 2008-2018	Increased, 2008-2012	¶
Ice cream or frozen yogurt that is not low in fat						9.4	20.9	15.6	5.2	8.9	10.9	Decreased, 2008-2018	Decreased, 2008-2014	¶
2% or whole milk (plain or flavored)					64.6	31.5	32.8	34.4	23.7	10.7	7.3	Decreased, 2006-2018	Decreased, 2006-2012	¶
Nonfat or 1% (low-fat) milk (plain)									32.8	23.2	18.2	§	Not available	¶
Water ices or frozen slushes that do not contain juice						20.7	22.4	19.0	15.5	17.9	18.2	Decreased, 2008-2018	No quadratic change	¶
Soda pop or fruit drinks that are not 100% juice					57.3	11.4	7.5	11.1	11.9	7.1	0.0	Decreased, 2006-2018	Decreased, 2006-2014	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which students can purchase the following snack foods or beverages from one or more vending machines at the school or at a school store, canteen, or snack bar:														
Sports drinks (e.g., Gatorade)					78.6	71.7	55.2	64.1	50.8	33.9	28.6	Decreased, 2006-2018	Decreased, 2006-2012	¶
Energy drinks (e.g., Red Bull, Monster)									1.7	0.0	1.8	§	Not available	¶
100% fruit or vegetable juice									35.6	40.0	23.6	§	Not available	¶
Foods or beverages containing caffeine					5.5	10.4	1.6	1.7	3.6	0.0	Decreased, 2008-2018	Decreased, 2008-2012	¶	
Fruits (not fruit juice)					44.3	38.8	42.9	28.8	30.4	18.2	Decreased, 2008-2018	No change, 2008-2012	¶	
Non-fried vegetables (not vegetable juice)					29.7	32.8	29.0	19.0	19.6	16.4	Decreased, 2008-2018	Decreased, 2008-2014	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.



# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools that have done any of the following during the current school year:														
Priced nutritious foods and beverages at a lower cost while increasing the price of less nutritious foods and beverages						11.4	12.1	15.9	15.5	28.6	32.7	Increased, 2008-2018	Increased, 2008-2014	¶
Collected suggestions from students, families, and school staff on nutritious food preferences and strategies to promote healthy eating						52.6	54.5	55.6	47.5	39.3	40.0	Decreased, 2008-2018	No change, 2008-2012	¶
Provided information to students or families on the nutrition and caloric content of foods available						47.2	53.0	46.9	63.8	50.0	60.7	Increased, 2008-2018	No quadratic change	¶
Conducted taste tests to determine food preferences for nutritious items						26.1	31.3	33.9	42.1	21.4	25.9	Decreased, 2008-2018	Increased, 2008-2014	¶
Provided opportunities for students to visit the cafeteria to learn about food safety, food preparation, or other nutrition-related topics						22.5	23.9	19.4	21.4	23.6	23.6	No linear change	Decreased, 2008-2012	¶
Served locally or regionally grown foods in the cafeteria or classrooms								57.8	79.7	73.2	76.4	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>	
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018				
Percentage of schools that have done any of the following during the current school year:															
Planted a school food or vegetable garden							49.2	64.4	62.5	63.2	§	Not available	¶		
Placed fruits and vegetables near the cafeteria cashier, where they are easy to access							81.3	93.1	87.5	85.7	§	Not available	¶		
Used attractive displays for fruits and vegetables in the cafeteria							68.3	86.2	80.4	80.0	§	Not available	¶		
Offered a self-serve salad bar to students							85.9	89.8	85.7	83.9	§	Not available	¶		
Labeled healthful foods with appealing names (e.g., crunchy carrots)							27.4	50.9	48.1	43.6	§	Not available	¶		
Encouraged students to drink plain water								88.1	85.5	82.5	§	Not available	¶		
Prohibited school staff from giving students food or food coupons as a reward for good behavior or good academic performance								35.6	33.9	29.1	§	Not available	¶		
Prohibited less nutritious foods and beverages (e.g., candy, baked goods) from being sold for fundraising purposes								52.5	44.6	46.4	§	Not available	¶		

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>		
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018					
Percentage of schools that prohibit advertisements for candy, fast food restaurants, or soft drinks in the following locations:																
In school buildings					81.5	100.0	79.7	86.4	89.5	92.9	Increased, 2008-2018	†	¶			
On school grounds including on the outside of the school building, on playing fields, or other areas of the campus					79.8	100.0	73.4	88.1	87.7	87.5	No linear change	†	¶			
On school buses or other vehicles used to transport students					83.3	100.0	81.3	91.4	87.5	89.3	No linear change	†	¶			
In school publications (e.g., newsletters, newspapers, web sites, other school publications)					77.9	100.0	76.2	86.0	81.8	83.9	Decreased, 2008-2018	†	¶			
In curricula or other educational materials (including assignment books, school supplies, book covers, and electronic media)								89.5	83.9	83.9	§	Not available	¶			

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools that permit students to have a drinking water bottle with them in either all locations or certain locations during the school day							100.0	94.8	100.0	100.0	§	Not available	¶	
Percentage of schools that offer a free source of drinking water in the following locations:*														
Cafeteria during breakfast								94.5	96.1	94.2	§	Not available	¶	
Cafeteria during lunch								98.2	96.1	94.2	§	Not available	¶	
Gymnasium or other indoor physical activity facilities								96.3	96.0	94.3	§	Not available	¶	
Outdoor physical activity facilities and sports fields								98.2	100.0	94.7	§	Not available	¶	
Hallways throughout the school								100.0	98.2	98.2	§	Not available	¶	

\* Among schools with that location.

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
SSNE 1 (2.3.04). Percentage of schools that do not sell less healthy foods and beverages (soda pop or fruit drinks, sports drinks, baked goods, salty snacks, candy)						25.0	43.3	34.4	45.8	57.1	66.1	Increased, 2008-2018	Increased, 2008-2012	¶
SSNE 2 (2.3.06). Percentage of schools that prohibit all forms of advertising and promotion for candy, fast food restaurants, and soft drinks									77.2	76.8	76.8	§	Not available	¶
SSNE 3 (2.3.07). Percentage of schools that price nutritional foods and beverages at a lower cost while increasing the price of less nutritious foods and beverages						11.4	12.1	15.9	15.5	28.6	32.7	Increased, 2008-2018	Increased, 2008-2014	¶
SSNE 4 (2.3.08). Percentage of schools that provide information to students or families on the nutrition, caloric, and sodium content of foods available						47.2	53.0	46.9	63.8	50.0	60.7	Increased, 2008-2018	No quadratic change	¶

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
SSNE 5 (2.3.09). Percentage of schools that place fruits and vegetables near the cafeteria cashier, where they are easy to access							81.3	93.1	87.5	85.7		§	Not available	¶
SSNE 6 (2.3.10). Percentage of schools that allow students to have access to drinking water								86.0	92.7	87.3		§	Not available	¶
SSNE 7 (2.3.11). Percentage of schools that offer fruits or non-fried vegetables when foods or beverages are offered at school celebrations						44.1	29.9	34.4	50.8	46.6	25.0	Decreased, 2008-2018	Increased, 2008-2014	¶
SSNE 8 (2.3.12). Percentage of schools that allow students to purchase fruits and vegetables from vending machines or at the school store, canteen, or snack bar						29.7	32.8	29.0	19.0	19.6	16.4	Decreased, 2008-2018	Decreased, 2008-2014	¶

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
<b>Health Services</b>														
Percentage of schools that have a full-time registered nurse who provides health services to students						79.4	58.2	29.7	50.0	42.1	32.8	Decreased, 2008-2018	Decreased, 2008-2012	¶
Percentage of schools that have a part-time registered nurse who provides health services to students										70.2	79.3	§	Not available	Not available
Percentage of schools that have a school-based health center that offers health services to students										28.1	39.7	§	Not available	Not available
Percentage of schools that provide the following services to students:														
HIV testing								3.1	1.7	0.0	0.0	§	Not available	¶
HIV treatment									0.0	0.0	0.0	§	Not available	¶
STD testing									1.7	0.0	1.8	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>	
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018				
Percentage of schools that provide the following services to students:															
STD treatment									3.4	0.0	1.8	§	Not available	¶	
Pregnancy testing							1.6	3.4	0.0	5.4	§	Not available	¶		
Provision of condoms							3.1	3.4	1.8	16.3	§	Not available	¶		
Provision of condom-compatible lubricants (i.e., water- or silicone-based)								0.0	0.0	7.7	§	Not available	¶		
Provision of contraceptives other than condoms (e.g., birth control pill, birth control shot, intrauterine device [IUD])							1.6	1.7	0.0	3.6	§	Not available	¶		
Prenatal care							3.2	5.1	0.0	1.8	§	Not available	¶		
Human papillomavirus (HPV) vaccine administration							3.2	3.4	1.8	1.8	§	Not available	¶		

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.



# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools that provide students with referrals to any organizations or health care professionals not on school property for the following services:														
HIV testing							82.8	89.8	50.0	77.8	§	Not available	¶	
HIV treatment								89.8	48.3	78.2	§	Not available	¶	
nPEP (non-occupational post-exposure prophylaxis for HIV-- a short course of medication given within 72 hours of exposure to infectious bodily fluids from a person known to be HIV positive)									43.1	74.5	§	Not available	Not available	
STD testing								89.8	51.8	77.8	§	Not available	¶	
STD treatment								89.8	51.8	77.8	§	Not available	¶	
Pregnancy testing							85.9	89.8	52.7	79.2	§	Not available	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools that provide students with referrals to any organizations or health care professionals not on school property for the following services:														
Provision of condoms							82.8	88.1	50.0	76.4	§	Not available	¶	
Provision of condom-compatible lubricants (i.e., water- or silicone-based)								84.7	46.4	74.1	§	Not available	¶	
Provision of contraceptives other than condoms (e.g., birth control pill, birth control shot, intrauterine device [IUD])							81.3	84.7	48.2	76.4	§	Not available	¶	
Prenatal care							84.4	83.1	50.9	79.2	§	Not available	¶	
Human papillomavirus (HPV) vaccine administration							82.8	83.1	50.9	80.4	§	Not available	¶	
Percentage of schools that have a protocol that ensures students with a chronic condition that may require daily or emergency management (e.g., asthma, diabetes, food allergies) are enrolled in private, state, or federally funded insurance programs if eligible								79.3	83.9	80.7	§	Not available	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools that routinely use school records to identify and track students with a current diagnosis of the following chronic conditions:														
Asthma									96.6	92.9	96.4	§	Not available	¶
Food allergies									96.6	92.9	98.2	§	Not available	¶
Diabetes									96.6	92.9	96.5	§	Not available	¶
Epilepsy or seizure disorder									96.6	94.6	98.2	§	Not available	¶
Obesity									56.9	53.6	50.9	§	Not available	¶
Hypertension/high blood pressure									79.3	69.1	71.9	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools that provide referrals to any organizations or health care professionals not on school property for students diagnosed with or suspected to have the following chronic conditions:														
Asthma									86.4	73.2	73.7	§	Not available	¶
Food allergies									86.2	71.4	71.9	§	Not available	¶
Diabetes									86.4	73.2	71.9	§	Not available	¶
Epilepsy or seizure disorder									86.2	72.7	71.9	§	Not available	¶
Obesity									74.1	58.2	73.2	§	Not available	¶
Hypertension/high blood pressure									86.2	61.8	70.2	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools with the following practices regarding parental consent and notification when sexual or reproductive health services are provided:														
School does not provide any sexual or reproductive health services										64.8	57.4	§	Not available	Not available
Parental consent is required before any sexual or reproductive health services are provided										22.2	8.5	§	Not available	Not available
Parental consent is not required for sexual or reproductive health services and parents are provided with information about services provided only upon request										0.0	4.3	§	Not available	Not available
Parental consent is not required for sexual or reproductive health services, but parents may be notified depending on the service provided										0.0	8.5	§	Not available	Not available

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools with the following practices regarding parental consent and notification when sexual or reproductive health services are provided:														
Parental consent is not required for sexual or reproductive health services, but parents are notified about all services provided										5.6	8.5	§	Not available	Not available
Parental consent is not required for sexual or reproductive health services and parents are not notified about any services provided										7.4	12.8	§	Not available	Not available
Percentage of schools with the following practices regarding parental consent and notification when sexual or reproductive health services are referred:														
School does not refer any sexual or reproductive health services										33.3	22.4	§	Not available	Not available
Parental consent is required before any sexual or reproductive health services are referred										16.7	2.0	§	Not available	Not available

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools with the following practices regarding parental consent and notification when sexual or reproductive health services are referred:														
Parental consent is not required for sexual or reproductive health services and parents are provided with information about referrals provided only upon request										9.3	6.1	§	Not available	Not available
Parental consent is not required for sexual or reproductive health services, but parents may be notified depending on the referral provided										5.6	12.2	§	Not available	Not available
Parental consent is not required for sexual or reproductive health services, but parents are notified about all referrals provided										0.0	2.0	§	Not available	Not available
Parental consent is not required for sexual or reproductive health services and parents are not notified about any referrals provided										35.2	55.1	§	Not available	Not available

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**

**2018 School Health Profiles Report  
Trend Analysis Report - Principal Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
SHS PM 2. Percentage of schools that provide students with on-site services or referrals to healthcare providers for 7 key sexual health services									83.1	45.6	74.1	§	Not available	¶
SWCC_1 (4.5.02). Percentage of schools that identify and track students with chronic conditions that may require daily or emergency management (e.g., asthma, food allergies)									96.6	94.6	98.2	§	Not available	¶
SWCC_2 (4.5.05). Percentage of schools that have protocols that ensure students with a chronic condition that may require daily or emergency management are enrolled into private, state, or federally funded insurance programs if eligible									79.3	83.9	80.7	§	Not available	¶
SWCC_3 (4.5.08). Percentage of schools that provide referrals to community-based medical care providers for students identified with chronic conditions or at risk for activity, diet, and weight-related chronic conditions									86.4	75.0	76.8	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.



# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
<b>Family and Community Involvement</b>														
Percentage of schools that have done any of the following activities during the current school year:														
Provided parents and families with information about how to communicate with their child about sex									78.0	41.4	65.5	§	Not available	¶
Provided parents with information about how to monitor their child (e.g., setting parental expectations, keeping track of their child, responding when their child breaks the rules)									79.3	64.9	69.1	§	Not available	¶
Involved parents as school volunteers in the delivery of health education activities and services									37.9	28.1	34.5	§	Not available	¶
Linked parents and families to health services and programs in the community									94.9	86.0	83.6	§	Not available	¶
Percentage of schools that use electronic, paper, or oral communication to inform parents about school health services and programs									89.8	81.0	87.5	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

# SAN DIEGO UNIFIED SCHOOL DISTRICT

## 2018 School Health Profiles Report Trend Analysis Report - Principal Survey

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools that participate in a program in which family or community members serve as role models to students or mentor students, such as the Big Brothers Big Sisters program									41.4	34.5	40.0	§	Not available	¶
Percentage of schools that provide service-learning opportunities for students									64.9	50.0	55.4	§	Not available	¶
Percentage of schools that provide peer tutoring opportunities for students									79.7	70.7	75.0	§	Not available	¶
Percentage of schools in which students' families helped develop or implement policies and programs related to school health during the past two years									48.3	35.1	51.8	§	Not available	¶
SSE PM 5. Percentage of schools that implement school connectedness strategies									70.7	65.5	67.3	§	Not available	¶
SSE PM 6. Percentage of schools that implement parent engagement strategies for all students									84.2	61.4	72.2	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
<b>Required Health Education</b>														
Percentage of schools in which students take only one required health education course	2.3	0.0	4.2	2.4	0.0	3.5	0.0	7.0	5.6	10.3	7.1	Increased, 1998-2018	†	¶
Percentage of schools in which students take two or more required health education courses	0.0	0.0	52.1	21.5	0.0	0.0	0.0	46.7	42.6	36.2	10.7	Increased, 1998-2018	†	¶
Percentage of schools that taught a required health education course in the following grades:*														
6th grade	0.0	0.0	40.0	10.7	0.0	0.0	0.0	41.5	34.9	31.1	6.1	Increased, 1998-2018	†	¶
7th grade	2.3	0.0	33.3	5.4	0.0	0.0	0.0	20.8	22.7	13.3	0.0	Increased, 1998-2018	†	¶
8th grade	0.0	0.0	43.6	10.6	0.0	0.0	0.0	41.2	36.4	34.0	6.1	Increased, 1998-2018	†	¶
9th grade	0.0	0.0	41.7	10.9	0.0	3.5	0.0	13.9	17.1	17.5	6.0	Increased, 1998-2018	†	¶

\* The 2008-2018 results published here may differ slightly from the 2008-2018 results published in site reports. This is because the site reports excluded data from schools that do not contain the grade in the question. Because grade information is not available in a consistent format for all years, data from these schools are included in the trend analysis.

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>	
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018				
Percentage of schools that taught a required health education course in the following grades:*															
10th grade	0.0	0.0	35.3	8.2	0.0	0.0	0.0	24.6	20.0	20.0	4.2	Increased, 1998-2018	†	¶	
11th grade	0.0	0.0	35.3	8.4	0.0	0.0	0.0	16.6	8.8	7.7	2.1	Decreased, 1998-2018	†	¶	
12th grade	0.0	0.0	32.4	5.6	0.0	0.0	0.0	7.3	11.4	7.7	2.1	Decreased, 1998-2018	†	¶	
Among schools that required a health education course, percentage that required students who fail the course to repeat it				33.0		50.0		20.5	16.7	24.0	66.7	Increased, 2004-2018	Decreased, 2004-2014	¶	

\* The 2008-2018 results published here may differ slightly from the 2008-2018 results published in site reports. This is because the site reports excluded data from schools that do not contain the grade in the question. Because grade information is not available in a consistent format for all years, data from these schools are included in the trend analysis.

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which the health education curriculum addresses the following skills:														
Comprehending concepts related to health promotion and disease prevention to enhance health						98.3	100.0	89.7	92.9	91.1	94.7	Decreased, 2008-2018	†	¶
Analyzing the influence of family, peers, culture, media, technology, and other factors on health behaviors						96.5	98.3	89.7	92.9	89.3	93.0	Decreased, 2008-2018	Decreased, 2008-2014	¶
Accessing valid information and products and services to enhance health						98.3	100.0	86.4	89.3	87.5	93.0	Decreased, 2008-2018	†	¶
Using interpersonal communication skills to enhance health and avoid or reduce health risks						100.0	100.0	98.3	94.6	92.9	94.7	Decreased, 2008-2018	†	¶
Using decision-making skills to enhance health						100.0	100.0	98.3	94.6	94.6	94.8	Decreased, 2008-2018	†	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>	
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018				
Percentage of schools in which the health education curriculum addresses the following skills:															
Using goal-setting skills to enhance health						98.1	98.3	90.0	87.5	82.1	94.7	Decreased, 2008-2018	Decreased, 2008-2014	¶	
Practicing health-enhancing behaviors to avoid or reduce risks						100.0	100.0	96.7	92.9	91.1	94.8	Decreased, 2008-2018	†	¶	
Advocating for personal, family, and community health						98.1	98.3	84.7	89.1	87.5	93.1	Decreased, 2008-2018	Decreased, 2008-2014	¶	
Percentage of schools in which those who teach sexual health education are provided with the following materials:															
Goals, objectives, and expected outcomes for sexual health education										100.0	98.2	100.0	§	Not available	¶
A written health education curriculum that includes objectives and content addressing sexual health education										100.0	100.0	100.0	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which those who teach sexual health education are provided with the following materials:														
A chart describing the annual scope and sequence of instruction for sexual health education									75.9	87.3	96.4	§	Not available	¶
Strategies that are age-appropriate, relevant, and actively engage students in learning									100.0	96.4	100.0	§	Not available	¶
Methods to assess student knowledge and skills related to sexual health education									93.1	92.7	96.4	§	Not available	¶
Percentage of schools that provide curricula or supplementary materials that include HIV, STD, or pregnancy prevention information that is relevant to lesbian, gay, bisexual, transgender, and questioning youth							100.0	76.1	83.1	82.8	96.6	Decreased, 2010-2018	Not available	¶
Percentage of schools in which health education instruction is required in any of grades 6 through 12							98.3	90.1	81.4	81.0	90.9	Decreased, 2010-2018	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers tried to increase student knowledge on the following topics in a required course in any of grades 6 through 12 during the current school year:														
Alcohol- or other drug-use prevention					100.0	100.0	89.4	88.1	86.0	62.0	Decreased, 2008-2018	†	¶	
Asthma					27.7	10.0	30.8	23.6	25.5	27.1	Increased, 2008-2018	No quadratic change	¶	
Chronic disease prevention									63.6	53.1	§	Not available	Not available	
Emotional and mental health					98.2	98.4	70.8	69.5	67.3	56.9	Decreased, 2008-2018	Decreased, 2008-2014	¶	
Epilepsy or seizure disorder								16.1	20.0	18.8	§	Not available	¶	
Food allergies								37.5	38.2	37.5	§	Not available	¶	
Foodborne illness prevention					24.5	13.4	34.9	33.3	45.5	37.5	Increased, 2008-2018	Increased, 2008-2014	¶	
Human immunodeficiency virus (HIV) prevention					100.0	100.0	98.4	98.3	88.9	96.3	Decreased, 2008-2018	†	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.



**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers tried to increase student knowledge on the following topics in a required course in any of grades 6 through 12 during the current school year:														
Human sexuality					100.0	100.0	95.3	96.6	88.7	100.0	Decreased, 2008-2018	†	¶	
Infectious disease prevention (e.g., influenza [flu] prevention)							67.0	74.1	76.4	58.0	Decreased, 2012-2018	Not available	¶	
Injury prevention and safety					91.1	96.5	44.1	60.7	69.1	57.1	Decreased, 2008-2018	Decreased, 2008-2014	¶	
Nutrition and dietary behavior					65.3	51.6	68.7	88.4	92.0	72.3	Increased, 2008-2018	Increased, 2008-2014	¶	
Physical activity and fitness					100.0	100.0	98.1	96.5	94.3	89.1	Decreased, 2008-2018	†	¶	
Pregnancy prevention					100.0	100.0	95.3	100.0	94.4	96.3	Decreased, 2008-2018	†	¶	
Sexually transmitted disease (STD) prevention					100.0	100.0	98.4	100.0	92.6	100.0	Decreased, 2008-2018	†	¶	
Suicide prevention					53.0	20.7	64.4	66.7	63.6	61.2	Increased, 2008-2018	Increased, 2008-2014	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers tried to increase student knowledge on the following topics in a required course in any of grades 6 through 12 during the current school year:														
Tobacco-use prevention					100.0	98.3	70.3	87.0	80.4	58.3	Decreased, 2008-2018	†	¶	
Violence prevention (e.g., bullying, fighting, dating violence prevention)					100.0	98.3	79.7	94.9	83.9	96.5	Decreased, 2008-2018	†	¶	
Percentage of schools in which teachers taught the following tobacco-use prevention topics in a required course for students in any of grades 6 through 12 during the current school year:														
Identifying tobacco products and the harmful substances they contain					92.7	55.0	58.4	66.0	50.9	25.0	Decreased, 2008-2018	No quadratic change	¶	
Identifying short- and long-term health consequences of tobacco use					92.7	61.7	60.0	67.9	53.6	27.5	Decreased, 2008-2018	No quadratic change	¶	
Identifying social, economic, and cosmetic consequences of tobacco use					89.2	56.6	49.2	59.3	45.6	21.6	Decreased, 2008-2018	Decreased, 2008-2014	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers taught the following tobacco-use prevention topics in a required course for students in any of grades 6 through 12 during the current school year:														
Understanding the addictive nature of nicotine					92.7	58.3	56.0	69.2	52.6	30.8	Decreased, 2008-2018	Decreased, 2008-2014	¶	
Effects of nicotine on the adolescent brain									47.4	25.5	§	Not available	Not available	
Effects of tobacco use on athletic performance					83.9	51.3	57.7	60.4	50.9	25.5	Decreased, 2008-2018	No quadratic change	¶	
Effects of second-hand smoke and benefits of a smoke-free environment					92.7	63.4	54.3	67.3	49.1	25.5	Decreased, 2008-2018	Decreased, 2008-2014	¶	
Understanding the social influences on tobacco use, including media, family, peers, and culture					89.2	53.1	56.9	64.2	50.9	25.5	Decreased, 2008-2018	No quadratic change	¶	
Identifying reasons why students do and do not use tobacco					92.7	51.5	52.5	63.0	45.6	25.5	Decreased, 2008-2018	Decreased, 2008-2014	¶	
Making accurate assessments of how many peers use tobacco					87.4	43.2	40.3	50.9	32.1	19.6	Decreased, 2008-2018	Decreased, 2008-2014	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers taught the following tobacco-use prevention topics in a required course for students in any of grades 6 through 12 during the current school year:														
Using interpersonal communication skills to avoid tobacco use (e.g., refusal skills, assertiveness)						87.4	52.9	51.7	58.5	48.2	25.5	Decreased, 2008-2018	Decreased, 2008-2014	¶
Using goal-setting and decision-making skills related to not using tobacco						82.2	47.2	46.6	54.7	44.6	23.1	Decreased, 2008-2018	Decreased, 2008-2014	¶
Finding valid information and services related to tobacco-use prevention and cessation						92.7	48.9	43.9	54.7	41.1	22.0	Decreased, 2008-2018	Decreased, 2008-2014	¶
Supporting others who abstain from or want to quit using tobacco						87.4	49.1	41.0	49.1	35.7	19.6	Decreased, 2008-2018	Decreased, 2008-2014	¶
Identifying harmful effects of tobacco use on fetal development						92.7	53.4	45.4	59.6	42.9	24.5	Decreased, 2008-2018	Decreased, 2008-2014	¶
Relationship between using tobacco and alcohol or other drugs									64.7	47.4	25.5	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers taught the following tobacco-use prevention topics in a required course for students in any of grades 6 through 12 during the current school year:														
How addiction to tobacco use can be treated									48.1	38.6	19.6	§	Not available	¶
Understanding school policies and community laws related to the sale and use of tobacco products									60.4	49.1	24.5	§	Not available	¶
Benefits of tobacco cessation programs									50.0	32.1	17.6	§	Not available	¶
Percentage of schools in which teachers taught the following sexual health topics in a required course for students in any of grades 6, 7, or 8 during the current school year:														
How HIV and other STDs are transmitted						100.0	100.0	97.1	100.0	93.3	96.8	Decreased, 2008-2018	†	¶
Health consequences of HIV, other STDs, and pregnancy						100.0	100.0	91.3	100.0	93.3	96.8	Decreased, 2008-2018	†	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers taught the following sexual health topics in a required course for students in any of grades 6, 7, or 8 during the current school year:														
The benefits of being sexually abstinent					100.0	100.0	97.1	100.0	93.3	96.8	Decreased, 2008-2018	†	¶	
How to access valid and reliable health information, products, and services related to HIV, other STDs, and pregnancy					100.0	100.0	91.3	100.0	93.3	96.8	Decreased, 2008-2018	†	¶	
The influences of family, peers, media, technology and other factors on sexual risk behaviors								100.0	90.0	96.8	§	Not available	¶	
Communication and negotiation skills related to eliminating or reducing risk for HIV, other STDs, and pregnancy					100.0	100.0	94.2	100.0	86.7	96.8	Decreased, 2008-2018	†	¶	
Goal-setting and decision-making skills related to eliminating or reducing risk for HIV, other STDs, and pregnancy					100.0	100.0	91.3	97.1	86.7	96.8	Decreased, 2008-2018	†	¶	
Influencing and supporting others to avoid or reduce sexual risk behaviors								97.1	80.0	96.8	§	Not available	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers taught the following sexual health topics in a required course for students in any of grades 6, 7, or 8 during the current school year:														
Efficacy of condoms, that is, how well condoms work and do not work						100.0	94.2	100.0	93.3	93.8		Decreased, 2010-2018	Not available	¶
The importance of using condoms consistently and correctly						100.0	94.2	97.1	93.3	96.8		Decreased, 2010-2018	Not available	¶
How to obtain condoms						100.0	85.1	97.1	90.0	96.8		No linear change	Not available	¶
How to correctly use a condom						100.0	94.2	94.3	93.3	96.8		Decreased, 2010-2018	Not available	¶
Methods of contraception other than condoms										93.3	96.8	§	Not available	Not available
The importance of using a condom at the same time as another form of contraception to prevent both STDs and pregnancy							94.2	94.3	93.3	96.8		No linear change	Not available	¶
How to create and sustain healthy and respectful relationships							91.3	100.0	93.3	96.8		Increased, 2012-2018	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>	
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018				
Percentage of schools in which teachers taught the following sexual health topics in a required course for students in any of grades 6, 7, or 8 during the current school year:															
The importance of limiting the number of sexual partners									97.1	83.3	90.3	§	Not available	¶	
Preventive care (such as screenings and immunizations) that is necessary to maintain reproductive and sexual health									100.0	86.7	96.8	§	Not available	¶	
Sexual orientation										66.7	96.8	§	Not available	Not available	
Gender roles, gender identity, or gender expression										66.7	96.8	§	Not available	Not available	

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.



**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>	
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018				
Percentage of schools in which teachers taught the following sexual health topics in a required course for students in any of grades 9, 10, 11, or 12 during the current school year:															
How HIV and other STDs are transmitted							100.0	100.0	100.0	87.5	100.0	Decreased, 2010-2018	Not available	¶	
Health consequences of HIV, other STDs, and pregnancy							100.0	100.0	100.0	87.5	100.0	Decreased, 2010-2018	Not available	¶	
The benefits of being sexually abstinent						100.0	100.0	100.0	100.0	79.2	100.0	Decreased, 2008-2018	†	¶	
How to access valid and reliable health information, products, and services related to HIV, other STDs, and pregnancy						100.0	100.0	100.0	100.0	82.6	100.0	Decreased, 2008-2018	†	¶	
The influences of family, peers, media, technology and other factors on sexual risk behaviors									96.2	78.3	100.0	§	Not available	¶	
Communication and negotiation skills related to eliminating or reducing risk for HIV, other STDs, and pregnancy						100.0	100.0	100.0	96.2	87.0	95.5	Decreased, 2008-2018	†	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers taught the following sexual health topics in a required course for students in any of grades 9, 10, 11, or 12 during the current school year:														
Goal-setting and decision-making skills related to eliminating or reducing risk for HIV, other STDs, and pregnancy					100.0	100.0	100.0	96.2	87.5	100.0	Decreased, 2008-2018	†	¶	
Influencing and supporting others to avoid or reduce sexual risk behaviors								92.3	78.3	95.5	§	Not available	¶	
Efficacy of condoms, that is, how well condoms work and do not work					100.0	100.0	100.0	100.0	87.5	100.0	Decreased, 2008-2018	†	¶	
The importance of using condoms consistently and correctly					100.0	100.0	100.0	100.0	87.5	100.0	Decreased, 2008-2018	†	¶	
How to obtain condoms					100.0	100.0	100.0	100.0	87.5	100.0	Decreased, 2008-2018	†	¶	
How to correctly use a condom						100.0	100.0	100.0	83.3	100.0	Decreased, 2010-2018	Not available	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>	
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018				
Percentage of schools in which teachers taught the following sexual health topics in a required course for students in any of grades 9, 10, 11, or 12 during the current school year:															
Methods of contraception other than condoms										87.5	100.0	§	Not available	Not available	
The importance of using a condom at the same time as another form of contraception to prevent both STDs and pregnancy								100.0	100.0	87.5	100.0	Decreased, 2012-2018	Not available	¶	
How to create and sustain healthy and respectful relationships								100.0	100.0	82.6	100.0	Decreased, 2012-2018	Not available	¶	
The importance of limiting the number of sexual partners									100.0	78.3	100.0	§	Not available	¶	
Preventive care (such as screenings and immunizations) that is necessary to maintain reproductive and sexual health									96.0	83.3	100.0	§	Not available	¶	
Sexual orientation										78.3	100.0	§	Not available	Not available	
Gender roles, gender identity, or gender expression										78.3	100.0	§	Not available	Not available	

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

---

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers assessed the ability of students to do each of the following in a required course for students in any of grades 6, 7, or 8 during the current school year:														
Comprehend concepts important to prevent HIV, other STDs, and pregnancy									87.9	71.0	90.6	§	Not available	¶
Analyze the influence of family, peers, culture, media, technology, and other factors on sexual risk behaviors									91.2	64.5	90.6	§	Not available	¶
Access valid information, products, and services to prevent HIV, other STDs, and pregnancy									88.2	71.0	90.6	§	Not available	¶
Use interpersonal communication skills to avoid or reduce sexual risk behaviors									91.2	71.0	90.6	§	Not available	¶
Use decision-making skills to prevent HIV, other STDs, and pregnancy									91.2	67.7	93.8	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers assessed the ability of students to do each of the following in a required course for students in any of grades 6, 7, or 8 during the current school year:														
Set personal goals that enhance health, take steps to achieve these goals, and monitor progress in achieving them									75.8	71.0	93.8	§	Not available	¶
Influence and support others to avoid or reduce sexual risk behaviors									84.8	67.7	90.6	§	Not available	¶
Percentage of schools in which teachers assessed the ability of students to do each of the following in a required course for students in any of grades 9, 10, 11, or 12 during the current school year:														
Comprehend concepts important to prevent HIV, other STDs, and pregnancy									96.2	83.3	91.7	§	Not available	¶
Analyze the influence of family, peers, culture, media, technology, and other factors on sexual risk behaviors									88.0	70.8	91.7	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

---

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers assessed the ability of students to do each of the following in a required course for students in any of grades 9, 10, 11, or 12 during the current school year:														
Access valid information, products, and services to prevent HIV, other STDs, and pregnancy									92.3	79.2	91.7	§	Not available	¶
Use interpersonal communication skills to avoid or reduce sexual risk behaviors									84.6	73.9	95.7	§	Not available	¶
Use decision-making skills to prevent HIV, other STDs, and pregnancy									92.3	79.2	91.7	§	Not available	¶
Set personal goals that enhance health, take steps to achieve these goals, and monitor progress in achieving them									84.6	70.8	87.5	§	Not available	¶
Influence and support others to avoid or reduce sexual risk behaviors									84.6	58.3	87.5	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers taught the following nutrition and dietary behavior topics in a required course for students in any of grades 6 through 12 during the current school year:														
Benefits of healthy eating					55.7	33.7	64.7	66.7	83.0	60.0	Increased, 2008-2018	Increased, 2008-2014	¶	
Benefits of drinking plenty of water									68.9	81.1	56.9	§	Not available	¶
Benefits of eating breakfast every day										73.6	52.9	§	Not available	Not available
Food guidance using the current Dietary Guidelines for Americans (e.g., MyPlate)									55.1	63.5	40.4	§	Not available	¶
Using food labels					45.0	27.8	48.9	64.0	72.5	45.1	Increased, 2008-2018	Increased, 2008-2014	¶	
Differentiating between nutritious and non-nutritious beverages									63.3	72.5	51.9	§	Not available	¶
Balancing food intake and physical activity					60.0	29.0	63.0	66.0	78.4	56.0	Increased, 2008-2018	Increased, 2008-2014	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers taught the following nutrition and dietary behavior topics in a required course for students in any of grades 6 through 12 during the current school year:														
Eating more fruits, vegetables, and whole grain products					55.7	31.3	57.8	63.8	78.4	58.8	Increased, 2008-2018	No quadratic change	¶	
Choosing foods and snacks that are low in solid fat (i.e., saturated and trans fat)					53.3	29.9	59.5	54.0	65.4	43.1	Increased, 2008-2018	Increased, 2008-2014	¶	
Choosing foods, snacks, and beverages that are low in added sugars								55.1	66.0	50.0	§	Not available	¶	
Choosing foods and snacks that are low in sodium								48.0	60.4	43.1	§	Not available	¶	
Eating a variety of foods that are high in calcium								42.3	55.6	37.3	§	Not available	¶	
Eating a variety of foods that are high in iron								41.5	53.8	37.3	§	Not available	¶	
Food safety					38.9	13.8	47.2	42.0	52.8	31.4	Increased, 2008-2018	Increased, 2008-2014	¶	
Preparing healthy meals and snacks					47.1	19.5	50.5	48.1	53.8	34.6	Increased, 2008-2018	Increased, 2008-2014	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.



**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>	
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018				
Percentage of schools in which teachers taught the following nutrition and dietary behavior topics in a required course for students in any of grades 6 through 12 during the current school year:															
Risks of unhealthy weight control practices					52.4	27.5	54.3	58.8	61.5	40.4		Increased, 2008-2018	Increased, 2008-2014	¶	
Accepting body size differences					45.6	22.9	48.9	64.4	56.6	42.3		Increased, 2008-2018	Increased, 2008-2014	¶	
Signs, symptoms, and treatment for eating disorders					40.4	20.1	48.2	44.2	44.2	28.8		No linear change	Increased, 2008-2014	¶	
Relationship between diet and chronic diseases									49.0	51.0	37.3	§	Not available	¶	
Assessing body mass index (BMI)									53.1	55.1	47.1	§	Not available	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers taught the following physical activity topics in a required course for students in any of grades 6 through 12 during the current school year:														
Short-term and long-term benefits of physical activity, including reducing the risks for chronic disease									83.9	79.6	73.5	§	Not available	¶
Mental and social benefits of physical activity									83.6	81.5	71.4	§	Not available	¶
Health-related fitness (i.e., cardiorespiratory endurance, muscular endurance, muscular strength, flexibility, and body composition)					96.4	100.0	94.2	89.1	86.8	77.1	Decreased, 2008-2018	†	¶	
Phases of a workout (i.e., warm-up, workout, cool down)					96.5	98.3	94.2	83.6	85.2	77.6	Decreased, 2008-2018	Decreased, 2008-2014	¶	
Recommended amounts and types of moderate, vigorous, muscle-strengthening, and bone-strengthening physical activity									83.6	79.2	77.1	§	Not available	¶
Decreasing sedentary activities (e.g., television viewing)					89.5	100.0	75.0	87.3	81.5	72.9	Decreased, 2008-2018	†	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which teachers taught the following physical activity topics in a required course for students in any of grades 6 through 12 during the current school year:														
Preventing injury during physical activity						89.5	98.3	90.3	85.5	81.5	72.9	Decreased, 2008-2018	No change, 2008-2012 Decreased, 2012-2018	¶
Weather-related safety (e.g., avoiding heat stroke, hypothermia, and sunburn while physically active)						84.3	98.3	73.1	76.4	79.2	58.3	Decreased, 2008-2018	Decreased, 2008-2012 Decreased, 2012-2018	¶
Dangers of using performance-enhancing drugs (e.g., steroids)						83.9	98.3	72.6	66.7	62.3	52.1	Decreased, 2008-2018	No quadratic change	¶
Increasing daily physical activity									89.1	88.7	79.2	§	Not available	¶
Incorporating physical activity into daily life (without relying on a structured exercise plan or special equipment)									87.3	84.9	75.0	§	Not available	¶
Using safety equipment for specific physical activities									73.6	85.2	64.6	§	Not available	¶
Benefits of drinking water before, during, and after physical activity									87.3	83.3	79.2	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

---

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools that taught all 13 physical activity topics during the current school year									53.7	53.7	45.8	§	Not available	¶
ESHE_PM_2a: Percentage of schools that teach 11 key HIV, STD, and pregnancy prevention topics in a required course during grades 6, 7, or 8 and during grades 9, 10, 11, or 12									91.2	68.6	92.2	§	Not available	¶
ESHE_PM_2b: Percentage of schools that assess the ability of students to do 7 skills in a required course taught during grades 6, 7, or 8 and during grades 9, 10, 11, or 12									76.8	59.6	88.9	§	Not available	¶
ESHE_PM_2c: Percentage of schools in which those who teach sexual health education are provided with key materials for teaching sexual health education									74.1	85.5	96.4	§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools that provided parents and families with health information designed to increase parent and family knowledge of the following topics during the current school year:														
HIV prevention, STD prevention, or teen pregnancy prevention					100.0	94.8	68.6	71.4	63.8	89.5		Decreased, 2008-2018	†	¶
Tobacco-use prevention					46.8	35.0	35.2	36.4	41.4	22.2		Decreased, 2008-2018	No quadratic change	¶
Physical activity					56.1	34.7	41.6	30.9	52.6	36.4		Decreased, 2008-2018	Decreased, 2008-2012 No change, 2012-2018	¶
Nutrition and healthy eating					56.2	34.7	43.5	36.4	50.0	29.6		Decreased, 2008-2018	Decreased, 2008-2012 Decreased, 2012-2018	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools that provided parents and families with health information designed to increase parent and family knowledge of the following topics during the current school year:														
Asthma					48.8	24.6	28.7	18.2	38.6	20.4		Decreased, 2008-2018	Decreased, 2008-2012 No change, 2012-2018	¶
Food allergies								20.0	39.3	18.5		§	Not available	¶
Diabetes								18.2	36.8	18.5		§	Not available	¶
Preventing student bullying and sexual harassment, including electronic aggression (i.e., cyber-bullying)								70.9	67.9	91.2		§	Not available	¶
Percentage of schools in which teachers have given students health education homework assignments or activities to do at home with their parents during the current school year								56.5	70.9	87.5		§	Not available	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
<b>Professional Development</b>														
Percentage of schools in which the lead health education teacher received professional development on the following topics during the two years before the survey:														
Alcohol- or other drug-use prevention	100.0	93.8	92.6	100.0	82.5	35.1	45.9	28.1	31.0	27.3	Decreased, 2000-2018	†	¶	
Asthma					11.2	31.6	18.0	34.4	14.0	31.6	20.4	Increased, 2006-2018	Increased, 2006-2010 No change, 2010-2018	¶
Chronic disease prevention										21.1	16.7	§	Not available	Not available
Emotional and mental health	57.7	58.3	65.8	86.7	80.9	31.8	52.5	36.8	43.1	50.0	Decreased, 2000-2018	Decreased, 2000-2014	¶	
Epilepsy or seizure disorder								24.1	29.8	18.5	§	Not available	¶	
Food allergies								21.1	35.1	20.8	§	Not available	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which the lead health education teacher received professional development on the following topics during the two years before the survey:														
Foodborne illness prevention					14.6	20.5	23.2	48.1	29.8	31.6	24.1	Increased, 2006-2018	Increased, 2006-2012 Decreased, 2012-2018	¶
HIV prevention		100.0	85.4	85.6	100.0	73.2	78.4	70.3	48.3	53.4	70.2	Decreased, 2000-2018	†	¶
Human sexuality		93.2	89.6	90.4	100.0	60.1	70.1	55.9	40.4	43.1	78.9	Decreased, 2000-2018	†	¶
Infectious disease prevention (e.g., flu prevention)								59.4	46.6	47.4	50.9	Decreased, 2012-2018	Not available	¶
Injury prevention and safety		28.9	20.8	33.3	24.5	31.4	38.0	51.9	53.4	49.1	46.3	Increased, 2000-2018	No quadratic change	¶
Nutrition and dietary behavior		11.0	43.8	32.3	21.8	29.4	18.3	34.1	17.5	22.8	11.1	Decreased, 2000-2018	Increased, 2000-2006 Decreased, 2006-2018	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.



**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which the lead health education teacher received professional development on the following topics during the two years before the survey:														
Physical activity and fitness		13.3	27.1	16.9	23.6	34.0	24.6	38.1	19.0	29.8	29.6	Increased, 2000-2018	Increased, 2000-2014	¶
Pregnancy prevention		97.7	81.3	82.8	92.8	53.1	61.8	52.1	29.3	33.3	62.5	Decreased, 2000-2018	Decreased, 2000-2014	¶
STD prevention		97.7	89.6	92.6	100.0	63.6	74.9	55.9	35.1	36.8	68.4	Decreased, 2000-2018	†	¶
Suicide prevention		75.7	72.9	80.4	82.8	68.9	25.3	61.6	47.5	48.3	64.8	Decreased, 2000-2018	Decreased, 2000-2014	¶

<sup>1</sup>Based on trend analyses using a logistic regression model,  $p < 0.05$ .

<sup>2</sup>Based on t-test analysis,  $p < 0.05$ .

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which the lead health education teacher received professional development on the following topics during the two years before the survey:														
Tobacco-use prevention	100.0	83.3	90.3	100.0	65.0	33.1	41.0	17.9	26.3	18.5	Decreased, 2000-2018	†	¶	
Violence prevention (e.g., bullying, fighting, dating violence prevention)	93.4	93.8	73.7	81.4	73.5	48.0	70.6	60.3	45.6	67.9	Decreased, 2000-2018	Decreased, 2000-2014	¶	
Percentage of schools in which the lead health education teacher received professional development on the following topics during the two years before the survey:														
Teaching students with physical, medical, or cognitive disabilities	11.1	29.2	47.7	30.0	41.8	45.5	48.4	32.8	43.1	40.4	Increased, 2000-2018	Increased, 2000-2014	¶	
Teaching students of various cultural backgrounds	64.4	47.9	59.9	60.5	46.4	63.9	70.0	46.6	51.7	49.1	Decreased, 2000-2018	No change, 2000-2014	¶	
Teaching students with limited English proficiency	20.1	33.3	34.2	48.4	35.6	76.8	71.6	63.8	52.6	47.4	Increased, 2000-2018	Increased, 2000-2012 Decreased, 2012-2018	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>	
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018				
Percentage of schools in which the lead health education teacher received professional development on the following topics during the two years before the survey:															
Teaching students of different sexual orientations or gender identities							32.4	27.2	21.1	46.6	78.9	Increased, 2010-2018	Not available	¶	
Using interactive teaching methods (e.g., role plays, cooperative group activities)	60.0	85.4	75.5	87.4	49.8	52.6	69.4	50.9	56.9	59.6	Decreased, 2000-2018	No quadratic change	¶		
Encouraging family or community involvement	31.2	50.0	50.2	73.1	59.3	40.8	38.4	32.8	37.9	39.3	Decreased, 2000-2018	Decreased, 2000-2014	¶		
Teaching skills for behavior change	46.7	72.9	72.9	78.0	49.2	32.0	49.4	28.1	36.2	47.4	Decreased, 2000-2018	No quadratic change	¶		
Classroom management techniques (e.g., social skills training, environmental modification, conflict resolution and mediation, behavior management)					62.9	40.9	55.2	50.9	41.1	41.4	45.6	Decreased, 2006-2018	Decreased, 2006-2014	¶	
Assessing or evaluating students in health education					30.2	40.7	17.0	40.9	19.6	25.9	29.8	Decreased, 2006-2018	Decreased, 2006-2014	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

---

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which the lead health education teacher received professional development on the following topics related to teaching sexual health education:														
Aligning lessons and materials with the district scope and sequence for sexual health education										37.9	73.7	§	Not available	Not available
Creating a comfortable and safe learning environment for students receiving sexual health education										43.1	77.2	§	Not available	Not available
Connecting students to on-site or community-based sexual health services										43.1	75.4	§	Not available	Not available
Using a variety of effective instructional strategies to deliver sexual health education										37.9	73.7	§	Not available	Not available
Building student skills in HIV, other STD, and pregnancy prevention										36.2	73.7	§	Not available	Not available

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which the lead health education teacher received professional development on the following topics related to teaching sexual health education:														
Assessing student knowledge and skills in sexual health education										37.9	73.2	§	Not available	Not available
Understanding current district or school board policies or curriculum guidance regarding sexual health education										46.6	77.2	§	Not available	Not available
Percentage of schools in which the lead health education teacher would like to receive professional development on the following topics:														
Alcohol- or other drug-use prevention		75.5	79.2	70.7	81.8	78.6	53.1	46.8	39.7	37.9	34.5	Decreased, 2000-2018	Decreased, 2000-2014	¶
Asthma					50.1	61.2	44.2	36.8	32.8	20.7	23.6	Decreased, 2006-2018	Decreased, 2006-2010 Decreased, 2010-2018	¶
Chronic disease prevention (e.g., diabetes, obesity prevention)										41.4	36.4	§	Not available	Not available

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>	
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018				
Percentage of schools in which the lead health education teacher would like to receive professional development on the following topics:															
Emotional and mental health		84.4	66.7	90.1	87.4	88.2	58.3	46.0	50.0	58.6	52.7	Decreased, 2000-2018	No quadratic change	¶	
Epilepsy or seizure disorder									22.4	29.3	25.5	§	Not available	¶	
Food allergies									31.0	29.3	23.6	§	Not available	¶	
Foodborne illness prevention					42.5	58.6	36.9	18.1	20.7	15.5	20.4	Decreased, 2006-2018	Decreased, 2006-2014	¶	
HIV prevention		84.4	66.7	73.1	69.4	72.8	40.1	37.4	19.0	27.6	23.6	Decreased, 2000-2018	No quadratic change	¶	
Human sexuality		73.2	66.7	67.5	63.9	72.8	38.2	40.0	29.3	43.1	30.9	Decreased, 2000-2018	No quadratic change	¶	
Infectious disease prevention (e.g., flu prevention)								43.9	22.4	21.1	27.3	Decreased, 2012-2018	Not available	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which the lead health education teacher would like to receive professional development on the following topics:														
Injury prevention and safety		35.6	22.9	62.7	42.5	63.3	44.5	19.7	19.0	21.4	25.5	Decreased, 2000-2018	Decreased, 2000-2014	¶
Nutrition and dietary behavior		37.8	52.1	80.7	58.5	72.3	56.8	51.9	31.0	39.7	32.7	Decreased, 2000-2018	Decreased, 2000-2014	¶
Physical activity and fitness		26.6	33.3	60.2	55.0	66.7	49.8	37.1	29.3	32.8	23.6	Decreased, 2000-2018	Increased, 2000-2004 Decreased, 2004-2018	¶
Pregnancy prevention		64.3	62.5	68.3	72.7	68.9	42.1	31.7	20.7	25.9	23.6	Decreased, 2000-2018	Decreased, 2000-2014	¶
STD prevention		66.6	56.3	67.5	72.6	74.6	42.0	38.4	20.7	26.3	25.5	Decreased, 2000-2018	Decreased, 2000-2014	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which the lead health education teacher would like to receive professional development on the following topics:														
Suicide prevention		68.8	75.0	87.7	96.3	86.8	61.7	39.7	41.4	50.0	43.6	Decreased, 2000-2018	Decreased, 2000-2014	¶
Tobacco-use prevention		55.4	39.6	65.9	68.8	69.1	51.5	38.7	29.3	32.8	29.1	Decreased, 2000-2018	Decreased, 2000-2014	¶
Violence prevention (e.g., bullying, fighting, dating violence prevention)		84.4	83.3	83.3	94.8	82.1	59.8	59.4	42.1	50.0	45.5	Decreased, 2000-2018	No quadratic change	¶
Percentage of schools in which the lead health education teacher would like to receive professional development on the following topics:														
Teaching students with physical, medical, or cognitive disabilities		66.7	56.3	70.7	80.3	73.7	46.7	52.9	38.6	50.0	45.5	Decreased, 2000-2018	Decreased, 2000-2014	¶
Teaching students of various cultural backgrounds		68.8	60.4	75.8	85.8	76.0	40.2	39.0	28.1	44.8	34.5	Decreased, 2000-2018	Decreased, 2000-2014	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.



**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>	
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018				
Percentage of schools in which the lead health education teacher would like to receive professional development on the following topics:															
Teaching students with limited English proficiency		62.2	60.4	70.7	71.6	68.7	40.4	43.0	33.9	39.7	36.4	Decreased, 2000-2018	Decreased, 2000-2014	¶	
Teaching students of different sexual orientations or gender identities							50.1	54.5	47.4	55.4	38.2	Decreased, 2010-2018	Not available	¶	
Using interactive teaching methods (e.g., role plays, cooperative group activities)		51.0	66.0	71.1	77.0	77.4	45.2	39.3	33.3	51.7	30.9	Decreased, 2000-2018	Decreased, 2000-2014	¶	
Encouraging family or community involvement		64.5	68.8	68.4	75.6	73.8	53.6	58.1	33.3	60.3	38.2	Decreased, 2000-2018	Decreased, 2000-2014	¶	
Teaching skills for behavior change		62.2	75.0	73.4	87.8	81.0	68.4	62.6	46.4	62.1	47.3	Decreased, 2000-2018	Decreased, 2000-2014	¶	
Classroom management techniques (e.g., social skills training, environmental modification, conflict resolution and mediation, behavior management)					89.3	68.7	44.8	48.5	30.4	41.4	42.9	Decreased, 2006-2018	Decreased, 2006-2014	¶	
Assessing or evaluating students in health education					64.7	72.2	50.2	41.0	30.4	44.8	27.3	Decreased, 2006-2018	Decreased, 2006-2014	¶	

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

---

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which the lead health education teacher would like to receive professional development on each of the following topics related to teaching sexual health education:														
Aligning lessons and materials with the district scope and sequence for sexual health education										25.9	20.4	§	Not available	Not available
Creating a comfortable and safe learning environment for students receiving sexual health education										32.8	25.5	§	Not available	Not available
Connecting students to on-site or community-based sexual health services										43.1	27.8	§	Not available	Not available
Using a variety of effective instructional strategies to deliver sexual health education										34.5	27.3	§	Not available	Not available

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

---

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which the lead health education teacher would like to receive professional development on each of the following topics related to teaching sexual health education:														
Building student skills in HIV, other STD, and pregnancy prevention										32.8	25.9	§	Not available	Not available
Assessing student knowledge and skills in sexual health education										37.9	28.3	§	Not available	Not available
Understanding current district or school board policies or curriculum guidance regarding sexual health education										32.8	26.4	§	Not available	Not available

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

§ Analysis cannot be conducted when response rates are 100% for a census or prevalence estimates are all 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
<b>Professional Preparation</b>														
Percentage of schools in which the major emphasis of the lead health education teacher's professional preparation was on the following:														
Health education or health and physical education combined (a or b)	7.1	20.0	25.6	2.8	1.8	10.8	3.3	4.3	8.9	5.2	3.5	Decreased, 1998-2018	Decreased, 1998-2006 No change, 2006-2018	¶
Physical education, kinesiology, exercise science or exercise physiology (c or e)					1.8	4.4	5.1	5.0	0.0	3.4	1.8	Decreased, 2006-2018	†	¶
Home economics or family and consumer science, biology or other science, or nutrition (f, g, or k)					0.0	2.2	55.9	79.8	69.6	62.1	68.4	Increased, 2006-2018	†	¶
Nursing or counseling (h or i)	26.2	37.7	20.5	5.4	85.4	80.4	7.3	0.0	1.8	17.2	12.3	Decreased, 1998-2018	†	¶
Public health or other (j or l)		6.6	28.2	89.2	0.0	2.2	13.7	6.0	3.6	6.9	8.8	Decreased, 2000-2018	†	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
**2018 School Health Profiles Report**  
**Trend Analysis Report - Lead Health Education Teacher Survey**

	Prevalence											Linear Change <sup>1</sup>	Quadratic Change <sup>1</sup>	2016-2018 Change <sup>2</sup>
	1998	2000	2002	2004	2006	2008	2010	2012	2014	2016	2018			
Percentage of schools in which the lead health education teacher was certified, licensed, or endorsed by the state to teach health education in middle school or high school					57.8	49.3	48.5	59.4	63.8	59.6	56.9	Increased, 2006-2018	No quadratic change	¶
Percentage of schools in which the lead health education teacher had the following number of years of experience in teaching health education courses or topics:														
1 year	4.5	0.0	0.0	63.5	22.3	4.1	17.0	5.8	6.9	8.8	3.7	Decreased, 1998-2018	†	¶
2 to 5 years	13.6	2.3	4.2	14.5	48.5	52.7	39.9	40.6	22.4	17.5	24.1	Increased, 1998-2018	Decreased, 1998-2002 No change, 2002-2018	¶
6 to 9 years	11.4	4.5	33.3	0.0	1.9	10.2	24.6	23.5	32.8	24.6	20.4	Increased, 1998-2018	†	¶
10 to 14 years	6.8	26.6	16.7	2.5	0.0	5.9	13.4	20.3	20.7	28.1	24.1	Increased, 1998-2018	†	¶
15 years or more	63.6	66.7	45.8	19.5	27.4	27.0	5.1	9.7	17.2	21.1	27.8	Decreased, 1998-2018	Decreased, 1998-2014	¶

<sup>1</sup>Based on trend analyses using a logistic regression model, p < 0.05.

<sup>2</sup>Based on t-test analysis, p < 0.05.

† Analysis cannot be conducted when prevalence estimates of 0% or 100% are present.

¶ Analysis cannot be conducted when response rates are 100% for a census or 2016 and 2018 prevalence estimates are both 0% or 100%.