School Health Index FAQ

Updated April 2020

What are the benefits of using the SHI?

Promoting healthy and safe behaviors among students is an important part of the fundamental mission of schools, which is to provide young people with the knowledge and skills they need to become healthy and productive adults. Improving student health and safety can:

- Increase students’ capacity to learn
- Reduce absenteeism
- Improve physical fitness and mental alertness

The SHI enable schools to:

- Identify strengths and weaknesses of their health and safety policies and programs
- Develop action plans for improving student health, which can be incorporated into the School
- Engage teachers, parents, students, and the community in promoting health-enhancing behaviors and better health.

What are the differences between the elementary school SHI and the middle/high school SHI?

The majority of the items in the two versions are identical. However, there are a few questions that are targeted toward school level. For example, the elementary school SHI includes questions about recess and hand washing that are not included in the middle/high school SHI.

Also, there are certain questions that are included in both versions but reflect different requirements for the school levels. For instance, the elementary school SHI suggests a total of 150 minutes of physical education per week, whereas the middle/high school SHI suggests a total of 225 minutes per week.

To download a list of School Health Index questions, please visit Action for Healthy Kids’ Game On program: https://www.actionforhealthykids.org/step-2/.

Why should I use the AFHK online version of the SHI?

The SHI can be completed online or on hard copy. Both methods are equally effective. Many schools have found that the online version saves time, because it allows you to:

- Save time by addressing only pertinent activity topics. (*The AFHK SHI is customized for nutrition, physical activity and cross-cutting health topics only. If you want to address additional health topics (i.e., tobacco-use prevention, safety, asthma, sexual health), you should complete the CDC’s SHI)
- Save your responses in the system
- Leave and re-enter the system as often as you would like
- Work with other school health team members to complete the SHI online together, as multiple school health team members can have access to the assessment
- Archive previous versions of the SHI, which may assist in record-keeping for schools who plan to complete the SHI annually and help track progress
- Print and share reports and action plans with team members, administrators, and others
Will it cost my school money to implement the SHI?

The SHI materials are available free of charge. The main cost associated with the SHI is time. Many schools have done it with no funding at all—merely getting some dedicated time (perhaps part of a staff development day or teacher workday) for the school health team to come together to complete the assessment and develop a school health action plan. Once schools have developed a school health action plan, many are able to implement some of the actions with no funding at all.

For activities that might require some funding, many schools have used their SHI results to help obtain money or donated resources/time from community organizations, local businesses, state/local agencies, etc., and apply for grants.

How long will it take to complete the SHI?

The AFHK SHI will take about 1 hour to complete, provided you have gathered your team and information ahead of time. To download a list of School Health Index questions, please visit Action for Healthy Kids’ Game On program: https://www.actionforhealthykids.org/step-2/.

Can only one person complete the SHI for my school?

Anyone who is affiliated with your school in the school portal has access to the SHI. The SHI is meant to be completed by school health teams, so invite your team members to join the school portal and affiliate with your school. This gives teachers, administrators, students, parents, and community members a means of contributing to school health promotion by involving them in the assessment process and inviting them to help shape plans to improve school programs. Furthermore, it allows, for example, the PE teacher to complete PE-related questions and the School Nutrition Manager to complete school meals-related questions. This ensures accurate responses and less work for any one individual.

Do I have to report my results from the SHI to the CDC?

No. The CDC does not ask that schools report their scores. The SHI is a self-assessment process, and the data are not meant to be reported to outside agencies for the purposes of comparison.

Will my school be punished if we score poorly on the SHI?

Absolutely not. The SHI will help the school determine its own strengths and weaknesses solely for the purposes of self-improvement. Individual scores will not be available to the public unless the school decides to make them available.

If I’m using the online version of the SHI, will my scores be automatically submitted to my school district or state?

Your school online SHI scores will not be automatically sent to anyone. The only way your school’s information can be viewed is if you share it or you print the information to distribute to others.

Do I need permission to use the SHI?

No. The CDC SHI was developed with federal funds by a federal agency. The AFHK adapted version was developed in partnership with CDC, so you do not need any permission to use it.
Has the SHI been tested for validity and reliability?

The School Health Index was field tested for readability and user-friendliness. We have no validity and reliability data for the simple reason that the SHI is not a research tool; it is a community organizing and educational tool.

Has the SHI been evaluated?

Several articles have been published in scientific journals that have evaluated the SHI implementation process and described the results of the process. Other studies have used the items from the SHI as indicators of best practices:

- Pearlman DN, Dowling E, Bayuk C, Cullinen K, Thacher AK. From concept to practice: using the School Health Index to create healthy school environments in Rhode Island elementary schools. Preventing Chronic Disease [serial online] 2005 Nov.

How frequently should we complete the SHI?

AFHK recommends that schools complete the SHI annually. If receiving a grant from AFHK, we will ask you to complete the SHI at the beginning and end of your grant to measure progress made during the year.

Can charter and magnet schools use the SHI?

Any type of school can use the SHI to identify the strengths and weaknesses of their health and safety policies and programs and develop action plans for improving student health.

Our school has a lot of staff turnover. Do we have to restart the SHI process every time we have new staff?

No. AFHK recommends that you complete the SHI annually. This allows you to make adjustments as staff and initiatives change year over year.

What do we do if a question does not apply to our school?

It is possible that some questions might not be relevant for every school. If you are sure that this is the case, select the 0 or not in place for this question.
I have completed the online SHI in the past for my school and I need to do one for this year but it is marked as submitted. What do I do?

AFHK’s SHI is set up so that once your SHI is submitted, you cannot modify it. After 9 months, you will be able to re-submit the SHI, where you can update responses to any questions that have changed. This allows you to make annual updates and track progress over time.

Why did Action for Healthy Kids and the CDC collaborate on a unified assessment tool?

Over the course of the last decade, many organizations, including Action for Healthy Kids, the Alliance for a Healthier Generation and the CDC developed school health assessments to support their programmatic work. As work in schools has grown for these agencies, it has become increasingly clear that it would be beneficial to have one unified assessment tool to guide school-based obesity prevention and health promotion.

Collaboration around the use of the SHI by AFHK, the Alliance and the CDC eliminates confusion about which evidence-based assessment tool to use; allows for the monitoring and alignment of school-based health policies and practices with national surveillance systems; and enables better coordination of training and technical assistance across and within these three agencies.