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**EXPLORING THE POLICYMAKING PROCESS OF SCHOOL-BASED
PHYSICAL EDUCATION: A CONGRESSIONAL PERSPECTIVE**

by

Edward B. Olsen

A Dissertation

Submitted to the
Department of Educational Services and Leadership
College of Education
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Doctor of Education
at
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Dissertation Chair: Stephen L. Cone, Ph.D.

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Dedications

I dedicate this dissertation to my father, Bernard A. Olsen; and my mother, Kathleen A. Olsen for their unconditional love and support.

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Abstract

Edward B. Olsen

EXPLORING THE POLICYMAKING PROGRESS OF SCHOOL-BASED PHYSICAL EDUCATION: A CONGRESSIONAL PERSPECTIVE

2016-2017

Stephen L. Cone, Ph.D.

Doctor of Education

The purpose of this exploratory case study design was to investigate and analyze the policymaking process of physical education at the national level. The participants used to explore this phenomenon were senators and representatives from the 114th-115th Congress who sat on the Health, Education, Labor, and Pensions Committee ($n = 21$), and the Subcommittee on Early Childhood, Elementary, and Secondary Education ($n = 14$). Additional participants were national policymakers ($n = 3$), staffers ($n = 6$), and legislative liaisons ($n = 2$). Data was collected from semi-structured interviews ($n = 8$), policy artifacts ($n = 87$), and the researcher's journal ($n = 32$). The data was analyzed using a conventional approach to qualitative content analysis. The results indicate that physical education is primarily a state and local issue; however, the federal government is responsible for providing equal access, funding, and educational opportunities.

Underlying these policy decisions are several key factors: problems of NCLB, education as a civil right, ending federal control, and several others. Policy recommendations are made to state departments of education that require local school districts to report on state laws and regulations pertaining to physical education. Future research must focus on the legislative process used at the state and local levels to determine physical education initiatives in respective states and schools.

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Chapter 1

Introduction

The purpose of this chapter is to introduce the phenomenon that will be explored in this study. This phenomenon focuses on the policymaking process of school-based physical education from a congressional perspective. The chapter begins with an overview of the obesity epidemic and its accompanying health care costs. Next, a discussion ensues about the role of United States schools in addressing the childhood obesity epidemic. From here, policies impacting school-based physical education, such as the No Child Left Behind Act of 2001, the PHYSICAL Act of 2013, and the FIT KIDS Act of 2013 are presented. The chapter continues with details pertaining to the purpose statement, problem statement, research questions, theoretical framework, delimitations, and significance of the study. Chapter one concludes with a preview of chapters two, three, four, and five.

Obesity Epidemic

Overweight and obesity levels worldwide represent a global pandemic (Roth et al., 2004; Swinburn et al., 2011; Popkin, Adair, & Ng, 2012). In 2010, overweight and obesity accounted for approximately 3.4 million deaths, 4% of years of life lost, and 4% of disability-adjusted life-years (DALYS) internationally (Lim, Vos, & Flaxman, 2012). Factors that may contribute to overweight and obesity are high calorie intake, physical inactivity, genes, behavior, environment, and/or culture (USDHHS, 2010). The World Health Organization (WHO) (2014) defines overweight and obesity as “abnormal or excessive fat accumulation that may impair health” (para. 1). They determine overweight or obesity through body mass index (BMI), which is the percentage of body fat relative to

an individual's height and weight. For adult and children BMI classifications see table 1. According to the WHO (2014), obesity is preventable.

Of the 671 million obese people in the world, 50% live in 10 industrialized countries (descending order): USA, China, India, Russia, Brazil, Mexico, Egypt, Germany, Pakistan, and Indonesia (Ng et al., 2014). In the United States, obesity rates remain at epidemic proportions (Flegal et al., 2010; Fryar et al., 2012; Ogden et al., 2014). Ogden et al. (2014) conducted a study on the prevalence of childhood and adult obesity in the U.S. using data extracted from the 2011-2012 National Health and Examination Survey (NHANES) (n = 9,120). In their study, they found that 33.7% of U.S. men and 36.5% of women ages 20 and over were obese (Ogden et al., 2014). At the younger levels, they discovered that 16.9% of children and adolescents between 2-19 years of age in the U.S. were obese (Ogden et al., 2014). Furthermore, 8.1% of infants (ages 0-2) were obese according to CDC sex-specific weight for recumbent length growth charts. Finally, 8.4% of children ages 2-5, 17.7% of children ages 6-11, and 20.5% of adolescents between 12-19 years of age were all classified as obese (Ogden et al., 2014). Overall, these prevalence rates reflect a significant increase since 1980 (Fryar, et al., 2012).

Based on the high prevalence rates of obesity among adults and children in the U.S., there are several adverse consequences to our society. These consequences fall into three broad categories: health effects, economic costs, and military readiness. Children who are overweight or obese are at immediate risk for pre-diabetes – a precursor to type 2 diabetes (Li, Ford, Zhao, & Mokdad, 2009), orthopedic problems, obstructive sleep apnea, depression, and social issues (i.e., stigmatization) (Daniels et al., 2005; USDHHS,

2010). Long-term child obesity related conditions may result in adult mortality as a result of increased risk for coronary heart disease, atherosclerosis, stroke, and several types of cancer (Must, Jacques, Dallal, Bajema, & Dietz, 1992). Furthermore, obesity has shown to reduce life expectancy by 5 to 20 years (Fontaine et al., 2003). Olshansky et al. (2005) stated that if obesity rates continue, children, on average, may not live as long as their parents.

Several scholars (e.g., Cawley & Meyerhoefer, 2012; Finkelstein, 2009; Trasande & Chatterjee, 2009) have studied the health care costs associated with obesity. Cawley and Meyerhoefer (2012) found that predicted medical expenditures for non-obese men and women were \$1,763. In contrast, predicted medical expenditures for obese men and women were \$4,458 or a 150% increase. Finkelstein et al. (2009) discovered that obese people spent \$1,429 or 42% more on per capita medical costs than individuals with normal weight (BMI 18.5 – 24.9 kg/m²). They also discovered that the annual medical costs associated with obesity were \$147 billion per year (2008 USDA). At the child level, increased body mass index (BMI) levels produced \$14.1 billion in prescription drug, emergency room, and outpatients visits per year (Trasande & Chatterjee, 2009).

In 2010, approximately 75% of young Americans between the ages of 17 – 24 were rejected from serving in the military because they did not graduate from high school, possessed criminal records, and/or were physically incapable. This percentage reflects 9 million or 27% of all youth in the U.S (Christeson, Taggart, & Messner-Zidell, 2010). The number one medical reason why applicants were turned down for military service is that they were either too overweight or obese (Christeson, Taggart, & Messner-Zidell, 2010). Retired U.S. Army General Johnnie E. Wilson said: “Child obesity has

become so serious in this country that military leaders are viewing this epidemic as a potential threat to national security” (Christeson, Taggart, & Messner-Zidell, 2010, p. 1). The White House Task Force on Child Obesity (WHTFCO) issued a report to President Obama in 2010 that said, “The childhood obesity epidemic in America is a national health crisis” (p. 3). As such, this crisis cannot be overlooked or dismissed; rather, it requires much attention and immediate action (WHTFCO, 2010).

Childhood Obesity: The Role of U.S. Schools

The childhood obesity epidemic is a complex, multi-dimensional problem with no simple solution (Georges, 2014). Therefore, redressing the pediatric obesity epidemic in the U.S. will require changes to the social, cultural, economic, physical, and policy environments (IOM, 2013). These environments can be seen through different sectors: schools, home and family, media, health care and public health, neighborhoods, parks, recreation, fitness, sports, business and industry, volunteer and non-profit organizations, transportation, land use, community design, and local, state, and federal policies (IOM, 2013). It will also require a coordinated effort among policymakers at all levels of government: local, state, and federal (Pekruhn, 2009). In short, solving the childhood obesity epidemic demands the enlistment of many stakeholders each with a specific role in our society.

At the public level, schools have been identified as a viable solution to helping address the childhood obesity epidemic (USDHHS, 2008; Pekruhn, 2009; WHTFCO, 2010; IOM, 2013). The reason is that a large percentage of youth attend schools, much of their waking hours are spent in school, and schools have the personnel, space, and equipment to encourage physical activity (IOM, 2013). For example, in 2010-2011 49.5

million students in pre-kindergarten through twelfth grade attended U.S. public schools. By 2021-2021, this number is expected to rise to 53.1 million (Aud et al., 2013). On the other hand, children spend on average 6.5 hours per day in school for approximately 180 days a year (Silva, 2007). Thus, the IOM (2013) recommended that policymakers at all levels of government (i.e., federal, state, local) as well as city planners, and parent-teacher organizations consider physical activity in all school-related policy decisions as a means to improve academic achievement, health, and development in children.

The IOM (2013) also recommended that educational leaders, teachers, and parents adopt a “whole-of-school” approach towards physical activity. This whole-of-school approach works in a coordinated manner to provide access, support, and programs to students before, during, and after school so that they can receive the recommended 60 minutes of vigorous to moderate physical activity each day (IOM, 2013). During the school day, quality physical education has been identified as an “evidenced-based recommended strategy for increasing physical activity” (IOM, 2013, p. 2). Research suggests that quality physical education can have both short and long-term health benefits on its citizens (Pate, O’Neil, McIver, 2011; Van Beurden et al., 2003; Ewart, Young, & Hagberg, 1998; Cawley, Frisvold, Meyerhoefer, 2013; Trudeau et al., 1998; Trudeau, Laurencelle, Shepard, 2004). Other studies indicate that quality physical education programs can result in greater physical activity levels during and after school (Dale, Corbin, & Dale, 2000), enhanced self-concept (Goñi & Zulaika, 2000), improved self-efficacy (Dishman et al., 2004), improved motor skills and social attitudes (Emmanouel, Zervas, & Vagenas, 1992), more enjoyment (Dishman et al., 2005), heighten motivation

(Prusak, Treasure, Darst, & Pangrazi, 2004), and lower inactivity behaviors following high school graduation (Dale & Corbin, 2000).

Accordingly, LeMasurier and Corbin (2006) cited 10 major reasons for having quality physical education in schools:

1. Subsistent physical activity assists in preventing disease (Paffenbarger et al.,1986; Morris et al., 1990; Wessel et al., 2004; Paffenbarger et al., 1983; ACSM,1993; Helmrich et al., 1991; Manson et al., 1991; Prior et al., 1996; Carter et al., 2002; USDHHS, 2008).
2. Continuous physical activity encourages lifelong wellness, i.e., quality of life and a sense of well-being (Randell, 2014).
3. Quality physical education can help combat the obesity epidemic (Datar & Sturm, 2004; Doake, Visscher, Renders, & Siedell, 2006; Cale & Harris, 2006; Cawley, Frisvold, & Meyerhoefer, 2013).
4. Quality physical education can foster a lifetime of physical fitness (Trudeau et al., 1998; Trudeau, Laurencelle, & Shepard, 2004).
5. Quality physical education affords students different opportunities to engage in physical activity (LeMasurier & Corbin, 2006).
6. Quality physical education instructs students in self-management and motor skills (Emmanouel, Zervas, & Vagenas, 1992; Goni & Zulaika, 2000; Dishman et al. 2004).
7. Quality physical education and general physical activity enhance student learning and academic achievement (Hillman, Erickson, & Kramer, 2008; Hillman et al., 2009; Coe et al., 2013).

8. Consistent and ongoing physical activity is economically sound (Cawley & Meyerhoefer, 2012; Finkelstein, 2009; Trasande & Chatterjee, 2009).
9. Quality physical education is highly supported among many professional organizations (e.g., The American Heart Association, The American Academy of Pediatrics, U.S. Department of Health and Human Services, U.S. Department of Education, Centers for Disease Control and Prevention, President's Council on Physical Fitness and Sport) as well as the general public (NASPE, 2000; NASPE, 2009a).
10. Quality physical education assists in educating the whole child (NASPE, 2011; ASCM, 2015).

As indicated, the reasons for having quality physical education in schools are abound. However, barriers remain to the equal and successful delivery of physical education in schools (IOM, 2013). Chief among them are the various policy strengths and comprehensiveness related to school-based physical education at the national, state, and local levels (NASPE & AHA, 2012; Chriqui et al., 2013; CDC & BGRP, 2014). At the national level, there is no federal law that mandates physical education in U.S. schools (NASPE & AHA, 2012). Also, the Healthy Hunger-Free Kids of 2010, which sought to improve children's health and physical activity levels in schools, omitted physical education as a required component of a local school wellness policy (Chriqui, 2012; Chriqui et al., 2013).

At the state level, 74.5% of states required students to take physical education; yet, 28 states allowed exceptions or waivers and only six states mandated physical education at every grade level (NASPE & AHA, 2012). At the local level, only 3.8% of

elementary schools, 7.9% of middle schools, and 2.1% of high schools provided students with daily physical education or its equivalent for the school year (Lee, Burgeson, Fulton, & Spain, 2007). As a result, physical education has been identified as an undervalued and low status subject in schools (Ennis, 2006; James, 2011; Beddoes, Prusak, & Hall, 2014).

There are several contextual factors contributing to this phenomenon. First, there has been a shift in the values underpinning our education system (Amis et al., 2012). For much of the 19th and 20th centuries institutional logic, defined as the “broader cultural beliefs and rules that structure cognition and guide decision making (Lounsbury, 2007, p. 289), centered on a liberal approach towards education (Kliebard, 1987). In other words, school curricula not only emphasized academics but also the risks of smoking, drug use, and HIV/AIDs. It even included programs that promoted social, cultural, and physical development through art, health, and physical education (Amis et al., 2012). Today, this dominant logic has been supplanted by an academic achievement paradigm focused on improving students’ standardized test scores (Amis et al., 2012). Consequently, subjects such as health and physical education have been marginalized because it has been perceived as not being aligned with this institutional logic and the primary academic mission of schools (Amis et al., 2012).

Second, because we live in an era of high stakes testing and accountability, there is an assumption by citizens and policymakers that time spent in physical education detracts or lowers students’ standardized test scores (Trost & Han Van Der Mars, 2010). The reality is that time spent in physical education does not lower student achievement, and in many cases, it helps (Shepard, 1996; Wilkins et al., 2003; Carlson et al., 2008).

Third, many educators and policymakers are unaware of the benefits physical activity has

on academic achievement and how physical activity can be successfully integrated into a school setting (IOM, 2013). According to the literature, students who are physically fit do better on standardized tests than those who are not (Grissom, 2005; Castelli et al., 2007; Chomitz et al., 2009; Coe et al., 2013). Finally, there is a lack of sufficient information on students' physical activity behaviors in school, and what policies and practices encourage or discourage these behaviors (IOM, 2013).

Policies Impacting School-Based Physical Education

NCLB of 2001

One of the major pieces of legislation affecting the quality and state of physical education in the U.S. was the passage of the No Child Left Behind Act (NCLB) of 2001 (IOM, 2013). NCLB required states to develop assessment and accountability systems that monitored performance and improvement in reading, mathematics, and science (NCLB, 2002). Under title IX of NCLB, core subjects included: “English, reading or language arts, mathematics, science, foreign language, civics and government, economics, art, history, and geography” p. 1958); hence, physical education was omitted from this list. In addition, NCLB tied federal funding to schools standardized test scores in English language arts, mathematics, and science as measured by adequate yearly progress [AYP] (NCLB, 2002). Essentially, AYP meant that local educational agencies had to improve each year on state developed assessments in order to meet state standards and narrow the achievement gap (NCLB, 2002). If schools did not make AYP, they were at risk for decreased funding, state improvement plans, and/or district reorganization (NCLB, 2002).

As a result, schools adjusted their curricula and instruction in an effort to meet this new mandate (CEP, 2007). According to the Center for Educational Policy (2007), schools reduced time spent in social studies, art, music, and physical education by 44% in order to accommodate a 62% increase in English language arts and mathematics. The mean reduction for time spent in the former subject areas equated to 30 minutes per day (CEP, 2007). In response to this, the childhood obesity epidemic, and high youth physical inactivity levels, two pieces of legislation were introduced to the U.S. Senate and House of Representatives (IOM, 2013). They were the Promoting Health for Youth Skills in Classroom and Life Act (PHYSICAL Act, S. 392, H.R. 2160), and the Fitness Integrated with Teaching Kids Act of 2013 (Fit Kids Act, S. 1033, H.R. 2178).

PHYSICAL Act of 2013

The PHYSICAL Act of 2013 was an amendment to the Elementary and Secondary Education Act (ESEA) of 1965, which designates health and physical education as “core” subjects (Physical Act, 2013). It was originally introduced in 2011 to the 112th Congress but it eventually “died” in committee. The purpose of the bill was to “support and encourage the health and well-being of elementary school and secondary school students by enhancing school physical education and health education” (Physical Act, 2013, p. 1). By designating health and physical education as core subjects, it would raise the status and importance of these already marginalized subjects (SHAPE, 2014). Moreover, the PHYSICAL Act of 2013 provided states and local educational agencies the flexibility and option to use Title I (low income schools) and Title II (professional development for teachers) funding for health and physical education programs and its teachers (SHAPE, 2014). Presently, the bill sits in the Senate Health, Education, Labor,

and Pensions committee where it has been read twice. The prognosis of it getting passed by the committee is 0%, and the likelihood of it being enacted into law is 0%

(GovTrack.us, 2014a).

FIT Kids Act of 2013

The FIT Kids Act of 2013 was also an amendment to the ESEA of 1965, which attempted to strengthen physical education programs by having state and local educational agencies report on the quality and quantity of school health and physical education programs (Fit Kids Act, 2013). Similar to the Physical Act, it was originally introduced in 2011 to the 112th Congress where it “died” in committee. The aim of this bill was to “authorize a grant program to promote physical education, activity, and fitness and nutrition, and to ensure healthy students, and for other purposes (Fit Kids Act, 2013, p. 1). Included in this bill was a “physical education indicators measurement system” (Fit Kids Act, 2013, p. 2). This system collected data on time requirements, moderate to vigorous physical activity (MVPA), curriculum, licensed or certified physical educators, indoor/outdoor facilities, and school wellness councils (Fit Kids Act, 2013). Currently, the bill resides in the Senate Health, Education, Labor, and Pension committee where it has been read twice. The prognosis of it getting passed by the committee is 3%, and the chance of it being enacted into law is 1% (GovTrack.us, 2014b).

Problem Statement

In the United States, childhood obesity rates remain at epidemic proportions. According to the 2009-2010 National Health and Nutrition Examination Survey, roughly 17% or 12.5 million children and adolescents in the U.S. between ages 2-19 are obese. These prevalence rates represent a tripling effect since 1980 (Ogden, Carroll, Kit, Flegal,

2012). As a result, data extracted from the Medical Expenditure Panel Survey in 2005 using an instrument variables approach, determined that obesity-related costs for adults age 18 and older were estimated at 190 billion dollars. This number accounted for 20.6% of the total health care expenditures for this time period (Cawley & Meyerhoefer, 2012). By 2030, researchers project that 51% of the U.S. population will be obese, which represents a 33% increase over the next 20 years (Finkelstein et al., 2012).

Based on a recent report by the Institute of Medicine (2012), U.S. schools were identified as the primary leader in preventing childhood obesity. This report also suggested that because American society is less physically active than years ago, “schools...provide the best opportunity for a population-based approach for increasing physical activity among the nation’s youth” (IOM, 2012, p. 333). Part of this population-based approach includes implementing quality physical education in schools (IOM, 2013). Research suggests that quality physical education can have both short and long-term health benefits on its citizens (Pate, O’Neil, McIver, 2011; Van Beurden, 2003; Ewart, Young, Hagberg, 1998; Cawley, Frisvold, Meyerhoefer, 2013; Trudeau et al., 1998; Trudeau, Laurencelle, Shepard, 2004). In addition, regular physical activity has demonstrated positive correlations with improved academic achievement in schools (Grissom, 2005; Castelli et al., 2007; Chomitz et al., 2009; Coe et al., 2013).

Despite these benefits, physical education is not mandated by the federal government in U.S. public schools, nor are states or local districts allocated resources for having physical education programs (NASPE & AHA, 2012). Official policymakers at the national level, such as those individuals who have constitutional authority to make decisions and act, defer physical education public policy to the state and local levels. As a

result, there are inconsistencies in the ways policies are adopted, implemented, and evaluated throughout the country (Chriqui, 2012, NASPE & AHA, 2012; Chriqui et al., 2013; CDC & BGRP, 2014). For example, the 2012 Shape the Nation report suggested that, although 74.5% of states require students to enroll in physical education from elementary to high school, 28 states permit exemptions or waivers (NASPE & AHA, 2012). Furthermore, the Institute of Medicine (2013) indicated that obstacles remain to the fair, equal, and successful delivery of physical education programs in schools across the U.S.

Given these factors and others, physical education is identified as being an undervalued and low-status subject in schools (Ennis 2006; Hardman & Marshall, 2009; James, 2011; Beddoes, Prusak, & Hall, 2014). Existing policy research has focused on the Shape of the Nation Report, which monitors the accomplishments as well as the barriers to existing U.S. physical education policies (NASPE & AHA, 2012); the development of a physical education-related state policy classification system (Mâsse et al. 2007); the role of state policy in promoting physical activity (Morandi, 2009); engaging school governance leaders to influence physical activity policies (Cox et al., 2011); school policies and practices to improve health and prevent obesity (Turner, Chaloupka, Sandoval, 2012; Johnston, O'Malley, Terry-McElrath, & Colabianchi 2014); results from the 2012 school health policies and practices study (USDHHS & CDC, 2013); the examination of trends and evidence-based elements in state physical education legislation (Eyler et al., 2010); and physical activity policies and legislation in schools (Robertson-Wilson et al., 2012).

Yet, minimal research exists on how Congressional policymakers identify problems, set agendas, formulate policy, and adopt public policy with respect to physical education in U.S. public schools. The unit of analysis will focus on the policymaking process of physical education at the national level. The analytic framework will reflect a conventional qualitative content analysis (Hsieh & Shannon, 2005). Underlying and informing this will be a theoretical framework based on Lukes (2005) and Gaventa's (1980) power theories, and Anderson's (2011) policymaking model. The central question guiding this investigation will be: what role, if any, should members of Congress play in requiring quality physical education in U.S. public schools from a public policy perspective?

Since physical education teachers experience misperceptions and negative stereotypes as a result of their profession (Duncan, Nolan, & Wood, 2002), it is important to study the mindset and reflexivity behind those who are in charge of the policymaking process behind physical education at the national level. In doing so, this would assist physical education scholars in understanding how to advocate and implement for quality physical education in U.S. schools. This perspective is supported by the Committee on Physical Activity and Physical Education in the School Environment, an affiliate of the National Institute of Medicine, who recommended that prospective studies are needed on "systematic examination of personal, curricular, and policy barriers to successful physical education in schools" (IOM, 2013, p. 308). To their point, this study seeks to address this need.

Purpose Statement

In the United States, childhood obesity rates remain at epidemic proportions. According to the 2009-2010 National Health and Examination Survey, roughly 17% or 12.5 million children and adolescents in the U.S. between ages 2-19 are obese (Ogden, Carroll, Kit, & Flegal, 2012). As a result, political leaders such as President Obama have advocated for improved dietary and exercise habits of Americans. A case in point is the passages of the Healthy, Hunger-Free Kids Act of 2010 and The Affordable Care Act of 2010. In addition to President Obama, First Lady Michelle Obama has been instrumental in getting children more active through her “Let’s Move Campaign” in schools. Yet, the discipline of health and physical education—the subject that teaches children the knowledge, skills, and dispositions needed to develop a healthy lifestyle—remains undervalued and viewed as a low-status subject in schools (Ennis, 2006; Hardman & Marshall, 2009; James, 2011; Beddoes, Prusak, & Hall, 2014).

The purpose of this exploratory case study design (Yin, 2014) was to investigate and analyze the policymaking process of physical education at the national level. The participants used to explore this phenomenon were senators and representatives from the 114th-115th Congress who sat on the Health, Education, Labor, and Pensions Committee (HELP) ($n = 21$), and the Subcommittee on Early Childhood, Elementary, and Secondary Education ($n = 14$). Additional participants were national policymakers ($n = 3$), staffers ($n = 6$), and legislative liaisons ($n = 2$). The sampling procedures included: key informant, key knowledgeable, and reputational sampling, as well as snowball and chain sampling (Patton, 2015). Data came in the form of semi-structured interviews ($n = 8$), policy artifacts ($n = 88$), and a researcher’s journal entries ($n = 32$). Underlying and

informing this data analysis process was Luke's (2005) and Gaventa's (1980) power theories, and Anderson's (2011) policymaking model.

Research Questions

Central Question

- What role, if any, should members of Congress play in requiring daily physical education in United States schools from a public policy perspective?

Sub-Questions

1. How do members of Congress identify public policy problems and set agendas related to physical education in U.S. schools?
2. How do members of Congress formulate physical education policies at the national level?
3. How do members of Congress adopt physical education policies at the national level?

Theoretical Framework

This dissertation is anchored in two theoretical frameworks, which are designed to inform physical education policy at the national level. According to Creswell (2014), theory can be used to help explain specific events and/or processes by connecting certain variables, constructs, or hypotheses. The first theory is grounded in Lukes (2005) three dimensional view of power with insights and additions gleaned from Gaventa's (1980) work on quiescence and rebellion in an Appalachian Valley. The second theory centers on Anderson's (2011) policy process model. The former theory focuses on "power over others" or "power as domination" (Lukes, 2005, p. 12); while the latter revolves around

the sequential steps and processes inherent in public policymaking. Together, these theories help bind and limit this exploratory case study design (Yin, 2014).

The Three-Dimensions of Power

Lukes (2005) framework centers on “power over” or “power as domination” (Lukes, 2005, p. 12). Power over (*potestas*) is different than power to (*potentia*). Power over tends to be negative, hegemonic, and zero sum, as opposed to, power to which is typically positive, productive, and transformative (Swartz, 2007). Thus, Lukes (2005) defines power as, “A exercises power over B when A affects B in a manner contrary to B’s interest” (p. 30). Two questions guide the inquiry and analysis of this framework: First, how do power groups obtain compliance over non-power groups? Second, how do power groups acquire the willing compliance of non-power groups (Lukes, 2005)? Based on these questions, Lukes (2005) three dimensional model attempts to shed light on these questions.

The provenance of Lukes (2005) three dimensional framework was spawned by his interest and commitment to add to the scholarly discourse on power; to wit, how to think about and study power, both theoretically and empirically. Underlying his perspective was the following question: How does American politics work, especially among the ruling elite in a pluralist democracy (Lukes, 2005)? He contended that part of this answer is in analyzing power from a three dimensional lens, as opposed to, a one or two dimensional perspective (Lukes, 2005).

Power can be described as elusive (Bachrach & Baratz, 1962), asymmetrical, relational, and value-laden (Lukes, 2005). Power is most effective when it is less visible, which requires greater attention and analysis (Lukes, 2005). Power is an “essentially

contested concept” (p. 30) that involves unremitting debates regarding its uses and application. According to Lukes (2005), each dimension of power functions from a moral and political perspective; that is, the first dimension is seen as being pluralist, the second as being critical (behaviorist), and the third as being the three-dimensional view (Lukes, 2005). Furthermore, each dimension contains a different set of direct and indirect assumptions about the dynamics and origins of participation and non-participation in power relations (Gaventa, 1980).

The one-dimensional view. The one-dimensional view focuses on power over decisions (McCabe, 2013), and it is described through the works of Dahl (1957, 1958, 1961), Polsby (1963), and Wolfinger (1971a,b). The one-dimensional view of power is concerned with studying concrete, observable behavior that involves decisions on key issues. These key issues center on overt conflict based on subjective and parochial interests, which are seen as policy preferences. These policy preferences eventually become exposed through political participation and engagement (Lukes, 2005). Consequently, the one dimensional view is grounded in the following assumptions: (a) grievances are accepted and responded to, (b) participation in decision making is open to all, and (c) leaders can be evaluated as a spokesman and not as an elite due to the openness in the decision making process (Gaventa, 1980).

In each dimension, there are mechanisms or tools that assist political actors in achieving their goals. Essentially, these mechanisms help the powerful wield power over the powerless, either through explicit or implicit means (Gaventa, 1980). In the first dimension, political resources—votes, jobs, and influence are seen as the mechanisms by which power operates to achieve its goals (Gaventa, 1980). These resources become

bargaining “chips” which political actors use to gain advantage or power over others. How well they can bargain is often determined by their personal efficacy, political experience, and organizational strength (Gaventa, 1980).

From a pluralist view, the first dimension of power provides an effective model in which to study the overt behavioral decisions among political actors (Lukes, 2005). The study of direct, observable behavior can come from first-hand experience or documents, informants, newspapers, or other credible sources (Polby, 1963). However, a limitation of the first dimension is that power is not revealed through the subtle and obscure predilections of individuals and groups. Thus, it is blinded by the insidious ways in which the political agenda is administered and controlled (Lukes, 2005). A case in point would be individuals’ misplaced assessment of their own interests.

The two-dimensional view. The two-dimensional view is focused on power over non-decisions (McCabe, 2013), and it is based on the research and axioms of Bachrach and Baratz’s (1970) work on power, poverty, theory, and practice. Bachrach and Baratz (1970) argued that power has two faces. On the one hand, power can be identified through observable and concrete decisions as indicated in the first dimension. On the other hand, power can also be exercised through social and political values, as well as, institutional practices that inhibit or limit the non-powerful, i.e., individuals or groups from taking part in the full political process. The extent to which the powerful, i.e., individuals or groups are successful or not equates to power (Bachrach and Baratz, 1970).

Bachrach and Baratz (1970) grounded this concept in Schattschneider’s (1960) belief that organizations are in and of themselves a mobilization of bias. By this, he meant that some issues or preferences are brought to the fore, while others are suppressed

or eliminated. Bachrach and Baratz (1970) described a mobilization of bias as a set of predominant values, beliefs, rituals, and institutional procedures (rules of the game) that operate systematically and consistently to the benefit of certain persons and groups at the expense of others. Those who benefit are placed in a preferred position to defend and promote their vested interests. More often than not, the status quo defenders are a minority or elite group within the population in question (Bachrach and Baratz, 1970).

To put it differently, a mobilization of bias is a way to limit the political process (agenda) either through decisions or non-decisions by ensuring compliance over the non-powerful. A decision is a “choice among alternative modes of action” (Bachrach & Baratz, 1970, p. 39). A non-decision is a “decision that results in the suppression or thwarting of a latent and manifest challenge to the values and interests of the decision maker” (Bachrach & Baratz, 1970, p. 44). In short, the two-dimensional view of power is concerned with decisions and non-decisions within the polity, current and potential issues, observable conflict—both overt and covert, and subjective interests viewed as policy preferences or grievances (Lukes, 2005).

The mechanisms in the second dimension that assist political actors in obtaining power over others are more complex and less straightforward than the first dimension because they surround decisions and non-decisions (Gaventa, 1980). Explicit mechanisms that influence decisions are values, beliefs, rituals, and institutional procedures (rules of the game); explicit mechanisms that shape non-decisions are force, sanctions (positive/negative), norms, precedents, and rules (Gaventa, 1980). Implicit mechanisms that drive non-decisions are institutional inaction and anticipated reactions of the powerful directed at the powerless (Gaventa, 1980). Institutional inaction can be

identified as the aggregated effect of “decisionless decisions” (Gaventa, 1980, p. 15). Conversely, anticipated reactions are focused on the notion that “B” does not put forth a demand or expectation on “A” for fear of retribution (Gaventa. 1980).

The strength of the two-dimensional view is that it provides better insight into the agenda setting process, as compared to the first-dimension (Lukes, 2005). Moreover, it offers insight into the biases and power relations of individuals and collectivities who have control over the political agenda. This is evidentiary by what values and issues are mutually agreed upon and rejected by the power elite (Lukes, 2005). A drawback of the second dimension is that its analysis over the biases and control of the agenda is myopic and confined (Lukes, 2005). In other words, it is restricted to only those criteria that warrant a mobilization of bias—values, beliefs, rituals, et cetera. It is also reduced to the non-decisions of the less powerful. Thus, it lacks a sociological viewpoint that looks at power through the quelling of latent conflict (Lukes, 2005).

The three-dimensional view. The three-dimensional view is concerned with power over interests (McCabe, 2013), and it is an extrapolation of the first two dimensions of power. The third dimension of power is the heart Lukes (2005) framework because it “offers the prospect of a serious sociological and not merely personalized explanation of how political systems prevent demands from becoming political issues or even being made” (p. 40). To better understand the third dimension, limitations of the previous dimensions of power need to be expanded upon. First, the one and two dimensions of power do not take into consideration all cases where key issues are kept from making the political agenda (Gaventa, 1980; Lukes, 2005). For example, power can

come from social forces, institutional practices, and/or individual decisions (Gaventa, 1980).

Second, power is not always exercised through concrete, observable conflict (Lukes, 2005). For instance, “A” can wield power over “B” by getting him to perform some task or deed simply by shaping or influencing his wants and desires (Lukes, 2005). These wants and needs come from the powerful that imbue and inculcate certain thoughts and feelings within the non-powerful (Lukes, 2005). As Dahl (1961) alluded, leaders do not react to their constituents’ interests, rather they shape them. Third, because dimensions one and two focus power on concrete and observable conflict, it misses the effective and deceitful ways of power, which is to avoid conflict in its entirety or whenever possible (Lukes, 2005). This avoidance of conflicts comes from shaping, influencing, and determining the wants and needs of the non-elite. And, in turn, establishes a misguided assessment of the non-elites’ interests (Lukes, 2005).

Finally, just because no actual or observable grievances may exist within the political process, this does not mean that there is a consensus regarding the predominant allocation of values (Lukes, 2005). Power is elusive (Bachrach & Baratz, 1970), relational, and value-laden (Lukes, 2005). Therefore, there is often a contradiction of interests between the elite and non-elite (Gaventa, 1980). All in all, the third dimension of power is concerned with the subconscious and subliminal decisions made to control and shape the political agenda. It focuses on the current and potential issues, observable (overt, covert) and latent conflict, and subjective and real interests (Lukes, 2005).

Of all the dimensions, the mechanisms in the third dimension are considered inchoate and not easily understood—at least from a conceptual and theoretical

perspective (Gaventa, 1980). These mechanisms center on the social myths, language, symbols, and how they become manipulated in the power arena (Gaventa, 1980). The question that the mechanisms in the third dimension seeks to address is what are the means by which power shapes, influences, and determines peoples' conceptions and priorities within a situation of latent conflict? The answer lies in both direct and indirect ways (Gaventa, 1980).

Direct ways that political conceptions and consciousness can be shaped include: the dissemination of information, the mass media, and/or the socialization process (Gaventa, 1980). Indirect ways focus on political adaptations, such as "continuous defeat, political participation and consciousness, and multiple or split consciousness" (Gaventa, 1980, p. 16-18). Continuous defeat can be described as a feeling and acceptance of helplessness, which can occur through the mechanisms discussed in the first and second dimensions (Gaventa, 1980). Essentially, if "A" continuously wins over "B," then a sentiment and mood of withdrawal and defeat on the part of "B" is established giving way to a feeling of powerlessness. As a result, the non-elite begin to adopt and internalize the values, beliefs, and rules of the elite (Gaventa, 1980).

Another indirect way that conceptions and consciousness can be shaped is through the dynamic interplay of political participation and consciousness (Gaventa, 1980). Gaventa (1980) argued that political participation in the decision making process yields, to a certain degree, heightened knowledge and understanding of the key issues and the dynamics associated with them. It also provides a forum in which to engage and debate the issues, thereby fostering "political learning" (p. 17). Because non-elites are denied political participation, they become limited in their political acuity of the issues

and the social inequalities that affect them. Thus, their non-participation leads to non-consciousness (Gaventa, 1980).

A final indirect way occurs through “split” or “multiple consciousness” whereby the powerful use myths and symbols to emphasize one orientation or viewpoint, while simultaneously suppressing or exploiting another. Thus, consciousness becomes amendable depending upon the context (Gaventa, 1980). Overall, the mechanisms discussed herein should be viewed as overlapping or interrelated in order to fully understand the sum of their impact in the political process (Gaventa, 1980).

Anderson’s Policymaking Framework

The next theory used to study physical education policy at the national level is Anderson’s (2011) policy process framework. The purpose of using this framework is to help guide data analysis and better understand the process of public policymaking at the national level. This framework is based upon five sequential steps: (a) problem identification and agenda setting, (b) formulation, (c) adoption, (d) implementation, and (e) evaluation. It should be noted that, although these steps appear linear in nature, they are, in reality, intertwined. In fact, much of the policy process overlaps with each other at various times and junctures (Anderson, 2011).

The first step in public policymaking is problem identification and agenda setting. Problem identification centers on conditions, standards or values, and government action possibilities, all of which get funneled to a specific public policy problem (Anderson, 2011). A policy problem can be defined as “a condition or situation that produces needs or dissatisfaction among people and for which relief or redress by governmental action is

sought” (Anderson, 2011, p.85). Essentially, a problem has to meet these criteria in order for the government to consider it a “public policy problem.”

On the other hand, agenda setting is slightly different than problem identification. Agenda setting consists of the problem, which narrows to the issue. An issue is a problem the government feels compelled to intervene in (Anderson, 2011). From here, the issues get divided into three categories: systemic agenda (issues deserving merit and government attention), policy entrepreneurs, and mandatory items. These issues are discussed by various committees and interest groups. After deliberation and a consensus is reached, these three items converge to create an institutional agenda (Anderson, 2011). Institutional agendas are made up of problems that legislators feel government intervention is warranted (Anderson, 2011).

The second step in the policymaking process is policy formulation. This area is primarily concerned with generating ideas and plotting potential courses of action to deal with certain public policy problems. Technically speaking, three activities are involved: (a) what, if at all, can be accomplished to remedy this problem, (b) what steps or actions are needed to address the problem, and (c) how will the legislation be drafted in such a way that it reflects designers’ and proponents’ intentions (Anderson, 2011). At the national level, these discussions occur among governmental agencies, presidential organizations, legislators, and interests groups (Anderson, 2011).

The third step in the policymaking process is on policy adoption. Policy adoption focuses on policy compromise and public support. Essentially, policies go through a process of rejection, modification, and later acceptance. During this process, legislators determine the degree of acceptability of the policy provisions to their constituents

(Anderson, 2011). Another factor legislators consider is the degree of bipartisan support for the provisions. Very often, legislators will ask themselves the following question: Can it (legislation) win approval? This degree of approval or lack thereof is often affected by organizational values, professional values, personal values, policy values, ideological values, political party affiliation, constituency needs, public opinion, and deference (Anderson, 2011). When taken in sum, all of these factors and more greatly impact whether certain policies are adopted or not.

The fourth step in the policymaking process is policy implementation. Policy implementation deals with the after-effects of bills once they become laws. It is fixated on whether ideological goals become a reality or not (Anderson, 2011). This means that policy implementation needs to be studied from a variety of angles: player involvement, rule compliance, techniques applied, and political support and opposition (Anderson, 2011). According to Anderson (2011), most policy implementation studies focus on either a top-down or bottom-up perspective. Very few look at policy implementation from both perspectives, i.e., cross sectional viewpoint.

The final step in the policymaking process is policy evaluation. Policy evaluation is focused on assessing the degree to which the policy met its intended outcomes (Anderson, 2011). These outcomes encompass goal attainment, anticipated and unanticipated consequences, and reasons impacting its success or failure. It is important to mention that evaluation can take place at any point in the policy process, even though this stage is typically reserved for last (Anderson, 2011). Policy evaluation is usually performed by members who are not associated with government. Some of these individuals represent the media, institutions of higher learning, private research

companies, and others. To date, most policy evaluation studies involve experimental or quasi-experimental designs in order to test the before and after effects of a specific policy (Anderson, 2011).

Delimitations

Delimitations are defined as “a limitation imposed by the researcher in the scope of the study” (Thomas, Nelson, & Silverman, 2011, p. 60). Kroll (1971) described delimitations as choices the researcher makes to help clarify a research problem (as cited in, Thomas, Nelson, & Silverman, 2011). In essence, delimitations provide boundaries to a case; that is, factors, constructs, and/or variables that were purposefully omitted from the study (Ellis & Levy, 2009). These factors or constructs can surround a variety of topics: sample size, instrument selection, and participant selection, to name a few (Thomas, Nelson, & Silverman, 2011). In this study, the delimitations focus on the philosophical worldview of the researcher, the researcher’s potential bias, and the policymaking process.

Philosophical Worldview: Social Constructivism

The philosophical worldview informing this study centers on social constructivism. Worldviews not considered were postpositivism, postmodernism, pragmatism, and transformative due to the ontology, epistemology, axiology, and methodology associated with this research study. Social constructivist researchers attempt to understand the world in which people live and work (Creswell, 2014). Individuals develop meaning of the world through subjective and varying experiences. Thus, social constructivist researchers focus on the social process among individuals looking for the complexity of views rather than simplistic ones; and they examine a specific context by

taking into consideration the participants' cultural and historical experiences (Creswell, 2014).

Therefore, the research is grounded in the participants' views (i.e., national policymakers) of the research problem (Creswell, 2014), which in this case surrounds the marginalization of physical education from a socio-political perspective. Questions that elicit these views are open-ended and emic in nature (Creswell, 2014); hence, the “what” and “how” research questions enveloping physical education policy in this study. Finally, constructivist researchers conceded that their background can impact their interpretations, which stem from their personal, cultural, and historical experiences (Creswell, 2014).

Researcher Bias

In qualitative research, the researcher serves as the main instrument in data collection (Lincoln & Guba, 1986; Hatch, 2002; Creswell, 2013). As a result, there is potential for researcher bias and data distortion. Griffin (2004) made an insightful point that, “research can never be totally value-free or objective, although we can always strive for rigor” (p. 4). This perspective is reinforced by Lather (1986) who stressed that there is no such thing a neutral research. Nevertheless, all researchers should take responsibility for approaching their study with the highest level of objectivity, ethical diligence, and rigor as possible (Jackson II, Drummond, & Camera, 2007).

To this end, there are safeguards or checks that can be employed to avoid researcher bias and data distortion (Lather, 1986). Among these in this study are prolong engagement (Lincoln & Guba, 1985), persistent observation (Lincoln & Guba, 1985), triangulation (Maxwell, 2013), negative case analysis (Lincoln & Guba, 1985), member checks (Lincoln & Guba, 1985), rick, thick description (Ponterotto, 2006), audit trails

(Sandelowski, 1986; Koch, 2006), and reflexive bracketing (Ahern, 1999). Together, each of these strategies are discussed in detail in chapter 3. In short though, these strategies help achieve trustworthiness in this study.

Policymaking Process

The policymaking process consists of five basic steps: problem identification and agenda setting, formulation, adoption, implementation, and evaluation (Anderson, 2011). This study will only address problem identification and agenda setting, formulation, and adoption. Steps excluded were policy adoption and evaluation. The rationale can be illustrated through the followings lens: Two national pieces of legislation have attempted to increase the value of physical education as well as report on the quality and quantity of its programs. They are the Physical Act and Fit Kids Act.

As previously mentioned, the Physical Act and Fit Kids Act were introduced, read twice, and referred to committees in both the Senate and House of Representatives in 2013. Since then, no decisions or actions have been taken (GovTrack.us, 2014a,b). In fact, both pieces of legislation have less than a 5% chance of being enacted (GovTrack.us, 2014a,b). The Elementary and Secondary Education Act of 1965 or its current version, No Child Left Behind is due to be reauthorized in the 114th Congress. Hitherto, there is no known empirical research on how national policymakers set agendas, formulate policy solutions, and adopt legislation with respect to physical education in schools.

Significance of the Study

According to Booth, Colomb, and Williams (2008), the significance of a study surrounds the “so what” of research. More specifically, why is this study worth pursuing

and to what end (Booth, Colomb, & Williams, 2008)? Hostetler (2005) argued that “good” education research is built not only on well-designed research methods, but on goals and findings that favor and ameliorate peoples’ well-being. Thomas, Nelson, and Silverman (2011) suggested that the significance of a study can point out contradictory results, gaps in knowledge and understanding of certain topics, or practical applications it has on the real world. In this study, the significance will address policy, practice, and practice respectively.

Policy

In the United States, challenges remain to the effective and successful delivery of physical education in schools (IOM, 2013). Among these are the lack of strength and policy inconsistencies at the national, state, and local levels (NASPE & AHA, 2012; Chriqui et al., 2013; CDC & BGRP, 2014). From a policy perspective, this study has the potential to “close” these policy “loopholes” by unveiling the political rhetoric and thinking behind physical education in schools. The term “close” refers to strengthening policy language and improving the consistency and transparency by which all levels of government interact and respond to school-based physical education. Additionally, this study has the potential to educate national policymakers as to why there is a need for a strong national policy for K-12 physical education. Over the next few years, Congress is expected to reauthorize NCLB of 2001. Perhaps, national policymakers might see the need and importance of including all or parts of the Physical and Fit Kids Act into this piece of legislation.

Practice

This study, from a practice perspective, has the potential to improve the quality and quantity of physical education programs across the country. By redressing the policy inconsistencies at the national, state, and local levels, educational leaders, such as superintendents, principals, and supervisors may be more inclined to make physical education a priority in their schools. This level of support would, in turn, assist physical educators in providing quality physical education to their students. The term “quality” refers to opportunities for learning, meaningful content, appropriate instruction, and student programs and assessment (NASPE, 2009b). These areas can be further viewed through recommended time requirements, adequate space and facilities, teacher-student ratios that mirror other subjects, curriculum, instruction, and assessment that align to state and national standards, full inclusion, et cetera (NASPE, 2009). Together, these areas play a significant role in the way physical education is delivered at the K-12 level.

Research

Physical education public policy research has been studied from several different perspectives. Existing research has focused on progress and obstacles remaining in U.S. physical education policies (NASPE & AHA, 2012); the development of a physical education-related state policy classification system (Maze et al. 2007); the role of state policy in promoting physical activity (Morandi, 2009); engaging school governance leaders to influence physical activity policies (Cox et al., 2011); school policies and practices to improve health and prevent obesity (Johnston, O’Malley, Terry-McElrath, & Colabianchi 2014); results from the 2012 school health policies and practices study (USDHHS & CDC, 2013); the examination of trends and evidence-based elements in

state physical education legislation (Eyler et al., 2010); and physical activity policies and legislation in schools (Robertson-Wilson et al., 2012).

Unlike previous studies, this research will examine the policymaking process of physical education from a national policy perspective, which to date, is the first of its kind. The significance of this research is that it seeks to answer IOM's (2013) call, which is to investigate the personal, curricular, and policy obstacles facing physical education in schools. By identifying how national policymakers set agendas, formulate policies, and adopt policies regarding physical education in schools, better understanding can ensue as to why important pieces of legislation such as the Physical Act and Fit Kids Act have not made their way out of committee. Furthermore, heightened understanding of how national policymakers view physical education, and in turn, prioritize their legislative initiatives with respect to education in schools can be conceptualized. This increased level of understanding can result in policy and practice implications for scholars, practitioners, and advocacy groups alike.

Conclusion

The purpose of this chapter was to introduce the phenomenon, provide a brief overview of the literature, explain the research problem, present the purpose statement and research questions, offer a theoretical framework, describe the delimitations, and discuss the significance of this study from a policy, practice, and research perspective. Chapter two presents an in-depth review and synthesis of the literature surrounding the phenomenon; chapter three addresses the research methodology used to design, collect, and analyze the data; and chapter four describes the results, which focus on three themes.

Finally, chapter five discusses the results, implications for policy, practice, and research, trustworthiness of the data, and limitations of the study.

Chapter 2

Literature Review

The purpose of this chapter is to present a comprehensive review and synthesis of the literature surrounding the phenomenon being explored in this study. The chapter begins with the socio-political divide between health and wellness, physical activity trends among America's youth, and educating the whole child. Pursuant to this, a discussion occurs over the role of U.S. schools in teaching children nutrition and physical activity, the discipline of physical education, the benefits of school-based physical education from public health and academic achievement perspectives, public support for physical education, the marginalization of physical education, physical education and public policy, and a call for more research. The chapter concludes with a review of the topics discussed herein and a preview of chapter three.

The Socio-Political Divide Between Health and Wellness

The benefits of physical activity are well supported and documented in the literature (Corbin & Lindsey, 2002; USDHHS, 2008; CDC, 2014c). According to the Centers for Disease Control and Prevention (CDC) and the American College of Sports Medicine (ACSM), physical activity is recommended to the general population as a means to improve public health (Pate et al., 1995). Studies have indicated that subsistent physical activity can reduce the risk of cardiovascular disease (Paffenbarger et al., 1986; Morris et al., 1990; Wessel et al., 2004), hypertension (Paffenbarger et al., 1983; ACSM, 1993), non-insulin-dependent diabetes mellitus (Helmrich et al., 1991; Manson et al., 1991), osteoporosis (Prior et al., 1996; Carter et al., 2002) and some cancers, i.e., colon and breast (USDHHS, 2008).

Other studies have found that regular physical activity can enhance mood and reduce symptoms of depression and anxiety (Dimeo et al., 2001; Dunn, 2001), heighten cognitive functioning in older adults (Weuve et al., 2004), maintain proper weight levels, strengthen bones and muscles, and potentially increase an individual's lifespan (USDHHS, 2008) (see Table 1). Recently, there is a growing body of research on the relationship between physical fitness and academic performance in children and adolescents (Grissom, 2005; Castelli et al., 2007; Chomitz et al., 2009; Coe et al., 2013). According to the CDC (2010), physical activity can play a significant role in improving academic achievement, grades, time-on-task, concentration, and attentiveness among school-age children.

Despite these known benefits, there appears to be a socio-political divide among policymakers concerning the health and wellness of Americans. This polarization focuses on the private enterprises of the American economy and U.S. public schools. In the private sector of American industry, political leaders have called for health-enhancing lifestyle programs and improved dietary habits of Americans. For example, former Mayor Michael Bloomberg of New York City and the City Board of Health attempted to ban the selling and distribution of sugar-sweetened beverages over 16 ounces in restaurants, theaters, and food carts (Grynbaum, 2013). Mayor Bloomberg is quoted as saying, "I've got to defend my children, and yours, and do what's right to save lives. Obesity kills. There's no question it kills" (Grynbaum, 2013, para. 6). The context of his response was made in reference to the amount of sugar dispensed and sold in soft drinks, and how they have grossly impacted the obesity epidemic.

In New Jersey, Health Commissioner Mary O’Dowd and former Governor James Florio have called on local business leaders to join the “Workplace Wellness Campaign.” The mission of this campaign is to provide businesses with the resources needed to promote health enhancing behaviors for their employees as a means to increase worker productivity and reduce health care costs (“New Workplace Wellness Campaign,” 2012). In a 2012 press release, O’Dowd stated, “Improving the health and wellness of New Jerseyans is a priority for the Department and the Christie Administration” (“New Workplace Wellness Campaign,” 2012, para. 5). Governor Florio added, “The fact of the matter is that wellness programs work. They save money and they increase worker productivity. This is a no-brainer for corporate executives” (“New Workplace Wellness Campaign, 2012,” para. 6). In like fashion, New Jersey State Chamber of Commerce President and CEO, Tom Bracken augmented both these statements by saying, “New Wellness is now an imperative for the business community” (“New Workplace Wellness Campaign, 2012,” para. 8). All of these comments come as a result of previous published studies (Goetzel & Ozminkowski, 2008; Naydeck et al., 2008; Mattke et al., 2013) that show that workplace wellness programs increase worker productivity and lower health care costs.

Contrary to the private sector, many policymakers have focused their attention on increasing the standards and accountability of American public schools. However, these standards and accountability measures have focused primarily on two subject areas: English language arts and mathematics. A prime example is the No Child Left Behind Act of 2001, which ties federal funding to student performance on standardized test scores in these subject areas. This focus comes in spite of the childhood obesity epidemic

plaguing our nation (Flegal et al., 2010; Fryar et al., 2012) and the rising health care costs associated with it (Finkelstein et al., 2009; Cawley & Megerhoefer, 2012). It also comes at a time when research suggests that many long-term health conditions (e.g., obesity, hypertension, dyslipidemia, metabolic syndrome, etc.) in adults begin in childhood and adolescence (Parson et al., 1999; Biro & Wien, 2010; Halfon et al., 2012). This, of course, leads to the notion that healthy lifestyle behaviors and choices should be instilled in children at a young age (IOM, 2013).

Nevertheless, the discipline of health and physical education, the subject that provides students with the knowledge, skills, and dispositions needed to develop a healthy lifestyle, is considered a low status subject in U.S. schools (Ennis, 2006; Hardman & Marshall, 2009; James, 2011; Beddoes, Prusak, & Hall; 2014). This marginalization and relegation remains apparent (Ennis, 2006; James, 2011; Beddoes, Prusak, & Hall, 2014) even though public and private organizations, such as NIKE, Pepsi-cola, the National Football League (NFL Play 60), Society of Health and Physical Educators (SHAPE) America, Alliance for a Healthier Generation, President's Council of Fitness, Sports, Nutrition, Centers for the Disease Control and Prevention (CDC), and the U.S. Department of Health and Human Services (USDHHS) all encourage and/or offer grants to schools to develop strong health and physical education programs.

Physical Activity Trends Among America's Youth

Physical inactivity or sedentary behavior is a major contributor of childhood obesity (USDHHS, 2010; CDC, 2013; WHO, 2014a). In fact, physical inactivity is considered one of the greatest health problems of the 21st century (Blair, 2009). Physical activity is defined as “any bodily movement produced by skeletal muscles that results in

energy expenditure” (Casperen, Powell, & Christenson, 1985, p. 126). According to the 2008 Physical Activity Guidelines for Americans, children and adolescents (ages 6 -17) are recommended to engage in 60 minutes or more of moderate to vigorous physical activity each day. This includes aerobic, muscle strengthening, and bone strengthening activities (USDHHS, 2008). The rationale is that physical activity is associated with positive health and behavior outcomes in youth (Strong et al., 2005). Some of these include: musculoskeletal health, cardiovascular health, adiposity, blood pressure, lipoprotein levels, self-concept, anxiety, depression, and academic achievement (Strong et al., 2005).

Fakhouri et al. (2014) conducted a study using data combined from the 2012 National Health and Examination Survey (NHAES) and the 2012 National Youth Fitness Survey (NYFS). NHAES collects information on the health and nutritional levels of the non-institutionalized U.S. population, while NYFS gathers data on youth physical activity and fitness levels ages 3-15. Based on their findings, only 24.8% of adolescents between the ages of 12 to 15 met the guideline of at least 60 minutes of moderate to vigorous physical activity daily (Fakhouri et al., 2014). In addition, 7.6% of the youth surveyed did not participate in at least 60 minutes of moderate to vigorous physical activity on any given day of the week. According to gender, 27.0% of boys compared to 22.5% of girls engaged in moderate to vigorous physical activity for at least 60 minutes each day. The most popular activities for boys were basketball, running, football, bicycle riding, and walking. For girls, it was running, walking, basketball, dancing, and bike riding (Fakhouri et al., 2014).

The statistics found in Fakhouri et al. (2014) are corroborated with the 2013 National Youth Behavior Surveillance Survey (Kann et al., 2014). Kann et al., (2014) carried out a study between September 2012 and December 2013 regarding adolescent risk behaviors. The age group consisted of ninth through twelfth graders from across the nation including the District of Columbia. Approximately 13,583 questionnaires were utilized yielding a 77% school response rate and an 88% student response rate. This resulted in a cumulative response rate of 68%. In this survey, Kann et al. (2014) discovered the following: 15.2% of the students were not physically active ($60 \leq$ minutes) in at least one out of seven days prior to the questionnaire; 47.3% of the students were physically active between five and seven days before the survey; and 27.1% of students surveyed engaged in physical activity on all seven days preceding to the study. Moreover, only 48.0% of the students attended physical education class on one or more days in an average week, and only 29.4% went to physical education class on all five days during a typical week (Kann et al., 2014).

Another study by Troiano et al. (2007) substantiated the previous results regarding physical inactivity levels in U.S. youth. Troiano et al. (2007) conducted a study to determine the physical activity levels of children (6-11 years), adolescents (12-19 years), and adults (20+years) using data obtained from accelerometers. An accelerometer is a device or tool that can “capture body movement and provide information on the total amount of intensity, duration, and frequency of physical activities performed” (Plasqui, Bonomi, & Westerterp, 2013, p. 451). The participants came from the 2003-2004 National Health and Nutrition Examination Survey (NHNES), which included a representative sample of the U.S. civilian non-institutionalized population selected with a

complex, multistage probability design. The sample size included 6,329 participants who provided at least one day of accelerometer data, and 4,867 participants who offered four or more days of accelerometer data. In their study, Troiano et al. (2007) found that 42.0% of 6-11 year-olds, 8.0% of 12-15 year-olds, and 7.6% of 16-19 year-olds met the guideline of 60 minutes or more of moderate to vigorous physical activity daily. Interestingly, less than 5% of adults achieved their recommended guideline of 30 minutes or less of moderate to vigorous physical activity each day (Troiano et al., 2007).

Overall, the evidence suggests that physical activity levels in youth are generally below the 2008 Physical Activity Guidelines for Americans. However, these levels appear lower among older youth, girls, minorities, obese children, and individuals with disabilities. Studies indicated that physical activity declines with age (Pate et al., 2002; Troiano et al., 2007; Nader et al., 2008); girls are less active than boys (Troiano, 2007; Fakhouri et al., 2014); African Americans and Hispanics are less physically active than Caucasians (Simons-Morton et al., 1997; Kann et al., 2014); obese boys and girls are less active compared to their normal-weight peers (Fakhouri et al., 2014; Page et al., 2005); and individuals with disabilities are less physically active than their non-disabled counterparts (Steele et al., 2004; Cook, Li, & Heinrich, 2014; Tyler, MacDonald, & Menear, 2014). Notwithstanding these studies, physical activity among youth and adults are often mediated by personal, social, economic, and environmental factors (Healthy People-2020, 2014).

Given these factors and trends, enhanced school-based physical education can play a significant role in increasing the physical activity levels of America's youth (Task Force on Community Preventive Services, 2002; "Physical Activity Guidelines," 2012;

IOM, 2013). This is supported by the International Council of Sport Science and Physical Education (ICSSPE) (2010), who stated:

Physical education in school is the most effective and inclusive means of providing all children, whatever their ability/disability, sex, age, cultural, race/ethnicity, religious or social background, with the skills, attitudes, values, knowledge and understanding for lifelong participation in physical activity and sport.

It is the only school subject whose primary focus is on the body, physical activity, physical development and health; and helps children to develop the patterns of and interest in physical activity, which are essential for healthy development and which lay the foundations for adult healthy lifestyles. (para. 2, 3)

This perspective is reinforced by the National Association of Sport and Physical Education (2011) who promulgated that physical education is essential to educating the whole child.

Educating the Whole Child

Recently, the Association for Supervision and Curriculum Development (ASCD), and the Centers for Disease Control and Prevention (CDC) partnered to develop the “Whole School, Whole Community, Whole Child (WSCC) model. This model integrates and builds off the coordinated school health approach (e.g., health education, physical education and physical activity, nutrition environment and services, health services, counseling, psychological, and social services, social and emotional climate, physical environment, employee wellness, family engagement and community involvement) and

the whole child initiative (i.e., children are safe, engaged, supported, challenged, and healthy) (ASCD & CDC, 2014).

The purpose of the model is bring about greater alignment, integration, and collaboration between education and health in order to enhance the whole child—cognitive, social, emotional, and physical well-being (ASCD & CDC, 2014). This approach is ecological in nature in that the whole school and whole community work in tandem to address the needs of the whole child (ASCD & CDC, 2014). Transitioning the model from one of vision to action requires the development and coordination of local school policies, processes, and practices (ASCD & CDC, 2014). These policies, processes, and practices are ingrained in the climate and culture of the school and community with one single understanding and purpose: learning and health are interrelated (ASCD & CDC, 2014).

The development of the WSCC model came about because of the increasing link between health and education. Studies indicate that when children’s nutrition and physical fitness needs are addressed, their achievement levels increase (Bradley & Green, 2013; Taras, 2005a, Taras, 2005b; Fedewa & Ahn, 2011; Trudeau & Shepard, 2008). By the same token, individuals who have higher levels of education are more inclined to live longer, exercise regularly, avoid smoking, and go for periodic check-ups and health screenings (Braveman & Egerter, 2008; Ross & Wu, 1995; HSC & TFAH, 2013). Therefore, organizations across the nation, such as the National Association of State Boards of Education (NASBE) recognize the importance and symbiotic relationship between health and education.

The Role of U.S. Public Schools

Teaching Children Nutrition and Physical Activity

During the 2010-2011 school years, approximately 49.5 million children and adolescents attended U.S. public schools (Aud et al., 2013). Among these students, 34.6 million were between pre-kindergarten and eighth grade, and 14.9 million were enrolled in grades 9-12 (Aud et al., 2013). By 2021-2022, total public school enrollment is expected to rise by 7 percent to 53.1 million students (Aud et al., 2013). Historically, schools have played a strong role in influencing children's health and well-being. For example, schools have required immunizations, offered health screenings, and provided lunch meals that reflect healthy eating (IOM, 2012). In addition, children spend half their day in school and ingest one third to half their daily calories in school. As such, schools are in a strong position to positively influence children's physical activity and nutrition (Pate et al., 2006; IOM, 2012; CDC, 2014b).

Based on a recent report by the Institute of Medicine (2012), U.S. schools were identified as the primary leader in preventing childhood obesity. This report also suggested that because American society is less physically active than years ago, "schools...provide the best opportunity for a population-based approach for increasing physical activity among the nation's youth" (IOM, 2012, p. 333). According to the CDC (2008), one of the key strategies to addressing childhood obesity is coordinated school health programs (CSHP). CSHP has eight major components: health education, physical education, health services, nutrition services, counseling, psychological, and social services, healthy school environment, health promotion for staff, and parent/community involvement (CDC, 2008).

However, not all policymakers, school administrators, and educators support the need for CSHP in schools (Bogden, 2003). There are several reasons for this lack of support. Many educational leaders believe that, “school health program goals are desirable, but not a school’s job” (Bogden, 2003, p. 10). Their worry lies in seeing time and resources typically devoted toward academic learning redirected to promoting certain social and health goals (Bogden, 2003). Other reasons for the lack of support have been political leaders criticism of public schools for not adequately preparing students; the passage of the No Child Left Behind Act of 2001, which has increased standards and accountability in core subjects; and the belief that all educators want their students to reach their full academic potential by meeting certain standards (Bogden, 2003).

Although these arguments are well taken and valid, what is commonly misunderstood among these constituents is that students’ dietary behaviors and physical activity levels are not mutually exclusive from their academic achievement. According to the CDC (2014a), schools should invest in their nutrition and physical activity programs as a means to promote school reform. The evidence is clear that students who receive proper nutrition and appropriate bouts of physical activity are better learners than those who do not (Basch, 2011; Bradley & Green, 2013; Bouie et al., 2013; CDC, 2014a; CDC, 2014b). Therefore, because students’ health (i.e., nutrition and physical activity levels) and academic achievement (e.g., class grades, standardized tests, graduation rates, behavior, concentration, mood, memory, etc.) are interrelated, they should not be treated separately but rather as one unified system (Bradley & Green, 2013). Quality physical education in schools is a part of the whole school approach (IOM, 2013) that will lead

students to develop the cognitive, affective, and psychomotor skill-sets needed for the 21st century.

The Discipline of Physical Education

The discipline of physical education consists of the subdisciplines of anatomy, physiology, physics, cultural anthropology, history, psychology, and sociology (Henry, 1964). These subdisciplines are integrated horizontally and vertically to create a cross disciplinary approach toward the conceptual understanding and advancement of human motor behavior (Henry, 1964; 1978). Filho (2000) described the meaning of physical education as referring to:

- (a) wide range of physical activities such as sports, gymnastics, dance, games, and recreation taught to and practiced by school children and wider society;
- (b) a profession, understood as the body of people trained and engaged in organizing, planning, teaching, researching, and developing activities mentioned above as an occupation;
- (c) an academic course in the institutions of higher education whose aim is to train people for the professional and academic activities described above;
- (d) a body of knowledge, understood as an integrated system of concepts, theories, and procedures originated from the academic attempts to describe and explain one or more aspects of physical education as presented in a, b, and c (p. 2-3).

Although these four meanings provide a comprehensive description of physical education, SHAPE (2015) defines it as an “academic subject that provides a planned, sequential K-12 standards-based program of curricula and instruction designed to develop

motor skills, knowledge and behaviors for healthy, active living, physical fitness, sportsmanship, self-efficacy, and emotional intelligence” (p. 3).

One major aim of physical education is to “develop physically literate individuals who have the knowledge, skills, and confidence to enjoy a lifetime of healthful physical activity” (SHAPE, 2014, p. 11). According to the National Association of Sport and Physical Education [NASPE] (2004), a physically educated person has acquired the skills needed to participate in different physical activities, is knowledgeable and aware of the effects and benefits of being physically active, consistently and routinely engages in physical activity, demonstrates health-enhancing levels of physical fitness, and internalizes physical activity as being an important virtue to living a healthy lifestyle.

Physical education programs that are high in quality contain the following four components: (a) opportunity to learn, (b) meaningful content, (c) appropriate instruction, and (d) student and program assessment (NASPE, 2009b). The National Association of Sport and Physical Education (2009b) described opportunities to learn as every student is mandated to take physical education; the total number of minutes allocated for physical education per week is 150 minutes for elementary school and 225 minutes for middle and high schools; class sizes are similar to other disciplines; the program is developmentally appropriate; and the equipment and facilities are conducive to student learning.

Meaningful content can be described as planned, sequenced curriculum that reflects national and state standards for physical education in grades P-12 (NASPE, 2009b). Meaningful content consists of instruction that teaches students to become competent and proficient in a variety of motor skills and movement patterns. Meaningful content includes fitness education that teaches students how to develop and maintain a

healthy lifestyle. It incorporates cognitive functions surrounding motor skills and physical fitness (NASPE, 2009b). Meaningful content helps to develop interpersonal and cooperation skills, as well as acquire an appreciation for diversity. Physical education programs that offer meaningful content encourage health enhancing physical activity for a lifetime (NASPE, 2009b).

Appropriate instruction can be viewed as including students of all abilities, backgrounds, and experiences into the physical education environment (NASPE, 2009b). It allows for multiple opportunities to practice skills and concepts learned in different games, activities, or exercises (NASPE, 2009b). Appropriate instruction reflects thoughtfully constructed lessons designed to promote student learning. It avoids physical activity as a means to discipline student behavior (NASPE, 2009b). Finally, appropriate instruction conducts periodic assessments in order to gauge student learning outcomes (NASPE, 2009b).

Student and program assessment is seen as an integral aspect of a physical education program that occurs frequently in class settings. Student progress is measured through formative and summative assessments (NASPE, 2009b). Formative assessment refers to assessments that occur throughout the unit, while summative assessments take place at the end of the unit or instructional period. Student and program assessments are linked to national and state standards, in addition to the local physical education curriculum (NASPE, 2009b). Student assessments serve as vital role in shaping a quality physical education program, and are used by various stakeholders to evaluate program effectiveness (NASPE, 2009b). In summary, these four components—opportunity to

learn, meaningful content, appropriate instruction, student and program assessment—constitute a quality physical education at the primary and secondary levels.

The Benefits of School-Based Physical Education

A Public Health Perspective

The purpose of physical education is to “develop physically literate individuals who have the knowledge, skills, and confidence to enjoy a lifetime of healthful physical activity” (SHAPE, 2014, p. 11). From a public policy perspective, to what extent, if at all, do physical education programs achieve the Society of Health and Physical Educators (SHAPE) of America vision to be “Healthy People—physically educated and physically active” (SHAPE, 2014, para. 1)? This question is worth discussing because if a program or intervention is deemed ineffective, either by a lack of data or positive results, then it would make sense why a discipline would be held in disrepute. According to the literature, there appears to be both short and long-term health benefits of physical education on its citizens (Pate, O’Neill, & McIver, 2011).

Some of the short-term health benefits of physical education focus on fundamental motor skills (Van Beurden, 2003), blood pressure levels (Ewart, Young, & Hagberg, 1998), and obesity rates in elementary school children (Cawley, Frisvold, & Meyerhoefer, 2013). Van Beurden et al., (2003) conducted a study based on the “Move It Grove It” [MIGI] intervention in physical education class. This intervention developed and tested children’s ($n = 1,045$; 53% boys, 47% girls) improvement in basic fundamental motor skills and physical activity levels. The results were a 16.8% improvement in fundamental motor skills combined for both boys and girls ($z = 9.64$, $p < 0.0001$) (Van Beurden et al., 2003). From a public health standpoint, fundamental motor

skills (FMS) have the potential to influence children's decisions to engage in general physical activity, and in particular, organized sport and games (Okely, 1999).

Ewart, Young, and Hagberg (1998) carried out a school-based intervention called "Project Heart" during physical education class. This intervention targeted ninth grade girls ($n = 99$) whose blood pressure levels were at or above the 67 percentile. Students who participated in Project Heart received 50 minutes of daily aerobic activity. The duration of the program occurred for 18 weeks or one semester at an all-women's public high school in Maryland. The results indicated that the experimental group increased their cardiovascular endurance and lowered their systolic blood pressure. The amount of change for the latter was -6.0 with $p < .0001$, respectively (Ewart, Young, & Hagberg, 1998). The implication of these results, although not extensive, illustrates the need and importance of having physical education in schools, particularly for high risk adolescent girls (Ewart, Young, & Hagberg, 1998).

Finally, a recent study by Cawley, Frisvold, and Meyerhoefer (2013) found that physical education programs that engage students in moderate to vigorous physical activity can have a positive impact in reducing obesity rates among elementary school children. The data used for this study came from the Early Childhood Longitudinal Study, Kindergarten Cohort (ECLS-K) for the 1998-2004 school years. The results demonstrated that quality physical education programs can reduce body mass index (BMI) z scores (Cawley, Frisvold, & Meyerhoefer, 2013). In addition, the results suggested that physical education can decrease the probability of obesity rates among 5th grade students (Cawley, Frisvold, & Meyerhoefer, 2013). This study, which is considered a first of its kind in terms of this type of evidence, supports the United State Surgeon

General, the American Academy of Pediatrics (AAP), the Centers for Disease Control and Prevention (CDC), the Institute of Medicine (IOM), and the National Association of State Boards of Education's (NASBE) call for physical education in U.S. schools (Cawley, Frisvold, & Meyerhoefer, 2013).

Some of the long-term health benefits of physical education center on the bone density levels of adults (MacKelvie et al., 2003) and the future physical activity levels, patterns, and/or choices of adults (Trudeau et al., 1998; Trudeau, Laurencelle, Shepard, 2004). MacKelvie et al. (2003) conducted an intervention during physical education class where the students received high intensity, circuit activities. These high impact activities occurred for three times a week, for ten minutes, over the course of two years. The participants included 75 girls approximately 10 years in age. The experimental group contained 32, while the control group consisted of 43 students. The results were gains in bone mineral content (BMC) in the femoral neck (24.8% vs. 20.2%, $p < .05$) and the lumbar spine (41.7% vs. 38.0%, $p < .05$) (MacKelvie et al., 2003). MacKelvie et al. (2003) suggested that the bone density mass acquired during these exercises, if maintained throughout adulthood, could off-set three to five years of bone density loss in these girls after menopause. This finding suggests that quality physical education programs can serve as an effective health promotion strategy.

Trudeau et al. (1998) conducted a long-term follow up of the participants in the Trois Rivières semi-longitudinal study of growth and development. This study explored the potential impact quality physical education programs can have on adults with respect to their attitudes and perceptions of physical activity, exercise levels, and overall lifestyle patterns. The initial study ($n = 546$) occurred between 1970 and 1979 (Trudeau et al.,

1998). The study consisted of a quasi-experimental design that was divided into two groups: experimental and control. The experimental group ($n = 272$) received physical education one hour each day for a total of five times a week (Trudeau et al., 1998). The duration of the program occurred for six years during the participants' primary years of education. In addition, the experimental subjects were taught by a certified physical education specialist. On the other hand, the control group ($n = 274$) received a total of 40 minutes of physical education per week. The length of the program also occurred for six years during the participants early years of schooling (Trudeau et al., 1998). However, these subjects were instructed by a non-trained physical education teacher (general education teacher) (Trudeau et al., 1998).

The results indicated that adults who had participated in the Trois Rivières experimental group revealed positive long-term outcomes on lifestyle and health (Trudeau et al., 1998). More specifically, Trudeau et al. (1998) concluded four main results: (a) women in the experimental group exercised three times more a week than women in the control group; (b) participants in the experimental group viewed their health as being in good to great standing as compared to their counterparts; (c) the control subjects communicated less mental/emotional attachment to physical activity; and (d) women in the experimental group communicated less lumbar problems than those women in the control group. Overall, Trudeau et al. (1998) argued that the results gathered from this study substantiated the need and importance for having physical education in schools.

Years later, a follow-up study conducted by Trudeau, Laurencelle, and Shephard (2004) tracked the physical activity levels of the Trois Rivières participants (experimental

group) from childhood to adulthood. The purpose of this study was threefold: (a) assess the connection between the physical activity levels of the experimental group between the ages of 10-12 and 35 years of age; (b) determine the impact that the experimental intervention (physical education) had on the adults' lifestyle; and (c) evaluate the relationship between the physical activity levels of the parents with that of their children when they became adults of the same age (Trudeau, Laurencelle, & Shephard, 2004). The results showed that organized physical activity as a child, particularly for males, became a strong predictor for future physical activity as an adult. This suggested that the quality of the physical education program afforded to the experimental group perpetuated these enhanced physical activity levels later in life (Trudeau, Laurencelle, & Shephard, 2004).

Another result revealed that parental physical activity levels did not influence their children's physical activity levels when they turned the same age (Trudeau, Laurencelle, & Shephard, 2004). Trudeau, Laurencelle, and Shephard (2004) argued that this lack of association only supports the need for quality physical education in schools. In summary, these scholars and others (e.g., Brosnahan, Steffen, Lytle, Patterson, & Boostrom, 2004; Datar & Sturm, 2004; Menschik, Ahmed, Alexander, & Blum, 2008; Timpka, Petersson, & Englund, 2010) suggest that progressive physical education programs can have favorable short-term and long-term benefits on the quality of health and wellness of its citizens.

An Academic Achievement Perspective

While school-based physical education has a variety of health benefits for its citizens, policymakers are concerned about the academic performance of U.S. students on international tests (Carnoy & Rothstein, 2013). This concern originates from the Nation

at Risk (1983) report that showed U.S. students were behind certain international students in English, mathematics, science, and technology (NCEE, 1983). Today, although American students have made progress in science, math, and reading, they remain behind top performing East Asian countries, such as Singapore, Korea, Chinese Taipei, Hong Kong's Special Administrative Region (SAR), and Japan on the Trends in International Mathematics and Science Study (TIMSS) (Martin et al., 2012; Mullis et al., 2012a) and the Progress in International Reading Literary Study (PIRLS) (Mullis et al., 2012b). According to a 2012 press release regarding the general results of the 2011 TIMSS and PIRLS, Secretary of Education, Arne Duncan said, "A number of nations are out-educating us today in STEM disciplines—and if we as a nation don't turn that around, those nations will soon be out-competing us in a knowledge-based, global economy" (USDOE, 2012, para. 6). Therefore, there is a focus and priority among policymakers to address this problem and improve the educational system in the United States.

Since international tests can influence the decisions policymakers take with new school reform efforts, two questions need to be asked and answered as it relates to physical education in schools. First, is reducing or reallocating instructional time in physical education in favor of the "core" classes academically justified and warranted? Second, what is the relationship between students' physical fitness levels and their academic achievement on state sponsored standardized tests? One assumption among the populace, and perhaps, even some policymakers is that time spent in physical education lowers students' standardized tests scores (Trost & Van Der Mars, 2010). One mechanism driving this belief has been the passage of the No Child Left Behind Act [NCLB] (2001), where the federal government has tied public funding to schools

performance in English language arts and mathematics as measured by adequate yearly progress (AYP). As a result, NCLB has contributed to the climate and perception that disciplines such as music, art, and physical education are subsidiary and insignificant to the academic mission of schools (Trost & Van Der Mars, 2010).

According to the Center of Educational Policy (2007), since the enactment of NCLB in 2001, 62 percent of elementary schools and 20 percent of middle schools have increased instructional time for English language arts and mathematics. To accomplish this, 44 percent of school districts have decreased time in social studies, music, art, physical education, and recess. Overall, these statistics represented, on average, a 32 percent reduction in these subject areas (Center of Educational Policy, 2007). These results are aligned with other previous reported studies. For example, Lee, Burgenson, Fulton, and Spain (2007) found in 2006 that only 3.8 percent of elementary schools, 7.9 percent of middle schools, and 2.1 percent of high schools provided daily physical education or its equivalent.

Thus, the question still remains: From a public policy perspective, is reducing instructional time in physical education in favor of the “core” classes academically justified and warranted? According to the literature, the evidence appears to be lacking. For example, Dwyer et al. (1983) conducted a study in Australia where they examined the effects of daily physical education on the health of primary school students. The study consisted of two phases: Phase I (1978) had 500 students taken from seven elementary schools, while phase II (1980) comprised of 216 students from five of the previous seven elementary schools. Both phases lasted 14 weeks, and each one followed similar procedures and protocols. The intervention consisted of two experimental groups, both of

which received daily physical education (1 ¼ hours per day). However, the control group received physical education only three times a week for 30 minutes. Academic achievement in all three groups were measured and compared by two standardized tests: the Australian Council for Educational Research's (ACER) arithmetic test and the GAP reading test. In analyzing the results from both phases of the study, there was no decline in academic performance in the experimental groups (Dwyer, 1983).

Following Dwyer et al.'s (1983) study, Shephard (1996) conducted a study in Canada based on data derived from the Trois Rivières experiment. The purpose of the study was to analyze the habitual physical levels of school-age students in relation to their academic achievement. This study used a quasi-experimental design and consisted of 546 primary school students. The experimental group contained 272 students, while the control group had 274 students. The experimental group received an additional hour per day of physical education instruction more than the control group. Furthermore, the experimental group was taught by a certified physical education specialist. However, the control group received about 13-14% more time in academic instruction than the experimental group. In both groups, results were tested and validated using a chi-square analysis ($p < .001$). All in all, the results yielded better academic gains in French, mathematics, English, and science for the experimental group (Shephard, 1996).

Three years later, Sallis et al. (1999) carried out a two-year quasi-experimental design in California. This study attempted to understand the effects of physical education on academic achievement using the Sports, Play, and Active Recreation for Kids curriculum (SPARK). The participants totaled 759 elementary children, who were randomly assigned by school to one of three conditions: (a) certified physical education

instructors who taught the SPARK curriculum (experimental group); (b) classroom teachers who taught the SPARK program but with professional development and trainers (experimental group); and (c) classroom teachers who taught their traditional physical education curriculum (control group) (Sallis et al., 1999). It is important to mention that the control group did not have any certified physical education teachers nor a formalized physical education curriculum. In all groups, the academic achievement of the students was measured by the Metropolitan Achievement Test (MAT), which is a norm-referenced assessment that evaluates mathematics, reading, and English language arts. Based upon the data, Sallis et al. (1999) concluded that the experimental groups, who had received about twice as much physical education instructional time as the control group, were not adversely affected according to their standardized test scores.

Similarly, Wilkins (2003) led a study in Virginia that investigated, among many areas, the relationship between time spent in music, art, and physical education and student achievement on state sponsored standardized tests. The participants included 547 elementary school principals. Data was collected via surveys and the Virginia Department of Education's (VDOE) website. The surveys were used to gather information on how much time students in grades three and five spent in music, art, and physical education. The website was used to collect achievement data on students' standardized test scores in grades three and five. The standardized tests were based on the Virginia Standards of Learning (SOL). These tests measured students' knowledge, skills, and understanding in mathematics, English, science, and social studies. The results of the study suggested that reducing instructional time in art, music, and physical education did not have a positive effect on these students' standardized test scores. In fact, Wilkins

(2003) infers just the opposite: Students who received more time in art, music, and physical education tended to do better academically on these standardized tests.

Recently, Carlson et al. (2008) conducted a national study in the U.S. using data from the Early Childhood Longitudinal Study, Kindergarten class of 1998-1999. The sample size included 5,136 primary school students who were tracked from kindergarten (1998) to fifth grade (2004). The goal of this study was to analyze how time devoted towards physical education impacted their academic achievement in reading and mathematics. Time spent in physical education was collected by classroom teachers and converted into three groups. These groups reflected the natural break in distribution of minutes per week of physical education in this study. They were 0-35 minutes (low), 36-69 minutes (medium), and 70-300 minutes (high), respectively (Carlson et al., 2008).

Academic achievement was measured by in-house assessment instruments derived from several copyrighted assessment batteries in reading and mathematics (Carlson et al., 2008). The scores from these tests were converted using an item response theory (IRT) scale. These tests occurred at five different points of time during the students' academic career (K-5). The results showed that girls who received the highest amounts of physical education per week did better in math and reading than girls who received the lowest amounts of physical education per week. As for the boys, the data indicated neither a positive nor negative relationship between time spent in physical education and academic achievement (Carlson et al., 2008). After completing this study, Carlson et al. (2008) concluded that limiting time spent in physical education was not a credible and justifiable strategy to improve students' achievement in reading and mathematics.

Clearly, the evidence in the literature suggests that reducing time in physical education does not lead to improved academic achievement. Since policymakers are preoccupied with improving standardized test scores in English language arts and mathematics, the next fair and reasonable question to ask is what is the relationship between students' physical fitness levels and their academic achievement on state sponsored standardized tests? Based on a systematic review of the literature, the evidence appears that students who are physically fit do better on standardized tests than those who are not (Grissom, 2005; Castelli et al., 2007; Chomitz et al., 2009; Coe et al., 2013). One study that sought to address this relationship occurred in California (Grissom, 2005). Grissom (2005) conducted a study, through the California Department of Education, that evaluated students' fitness scores on the FitnessGram with that of the Stanford Achievement Test (SAT), 9th edition.

The FitnessGram is a criterion-referenced assessment that measures students' physical fitness levels in relation to the healthy fitness zone. The healthy fitness zone is based on minimum fitness levels needed for proper health and well-being. Students who take the FitnessGram are classified as either meeting the healthy fitness zone, in need of improvement, or in need of improvement-health risk (The Cooper Institute, 2014). On the other hand, the SAT/9 is a norm-referenced assessment that measures students' knowledge, skills, and understanding in reading and mathematics. The sample size for this study included 884,715 fifth, sixth, and ninth grade public school students, all of whom were taken from one school. The data analysis procedures needed to determine the relationship between the independent (physical fitness) and dependent (standardized test scores) variables consisted of a normal curve equivalent (NCE) and an analysis of

variance (ANOVA). The results indicated a positive correlation between the students' fitness scores and their academic achievement. In other words, as the number of fitness achievement standards increased on the FitnessGram so too did the mean normal curve equivalent score on the SAT/9 test (Grison, 2005).

In 2007, another study was published, which attempted to better understand the relationship between students' physical fitness levels and their academic achievement on state exams. Castelli et al. (2007) conducted a study in Illinois with 259 third and fifth graders. Student fitness levels were measured by the FitnessGram and academic achievement was assessed using the Illinois Standards Achievement Test (ISAT). This test assessed students' competency and performance in English language arts and mathematics. The results showed a positive correlation between physical fitness levels and academic achievement. To add, aerobic fitness and body mass index appeared to have the greatest impact on the academic performance (reading and math) in these students (Castelli et al., 2007).

Another study that looked at the relationship between physical fitness and academic achievement on standardized tests occurred in Massachusetts (Chomitz et al., 2009). This study took place in the Cambridge Public School District, and the sample size included: 1,841 fourth through eighth grade students. The physical fitness test consisted of a modified test taken from the Amateur Athletic Union (AAU) and the FitnessGram. The fitness components assessed were cardiovascular endurance, abdominal strength, upper body strength, flexibility, and agility. The criteria for proficiency were based on the guidelines specified from AAU and FitnessGram. For each component assessed, students received a proficiency status score of "participant, attainment, or outstanding" (Chomitz

et al., 2009, p. 32). In order for students to receive a “passing” score, they had to meet the criteria for “attainment” or “outstanding.” The aggregate of these scores were then calculated into the independent variable—physical fitness (Chomitz et al., 2009).

The dependent variable, academic achievement, was measured through the Massachusetts Comprehensive Assessment System (MCAS). The MCAS is a criterion-referenced test that determines students’ scores according to predetermined criteria: advanced, proficient, needs improvement, and warning (Chomitz et al., 2009). Students in grades fourth, sixth, and eighth ($n = 1,103$) were assessed in mathematics, while students in grades fourth and seventh ($n = 744$) were evaluated in English. To analyze the data from both the independent and dependent variable, bivariate and multivariate regression analyses were used. In addition, a chi square test was used to weigh the statistical significance (Chomitz et al., 2009). The confounding variables of gender, socioeconomic status, weight, grade, and ethnicity were controlled in order to strengthen the validity and reliability of the findings (Chomitz et al., 2009).

According to Chomitz et al. (2009), the results indicated a positive relationship between the students’ physical fitness scores and academic achievement on the MCAS. For example, the logistic regression model revealed that the probability of students passing the English section on the MAC test increased to 24% for each unit (0-5) passed on the fitness test. The same held true for mathematics, which resulted in a 38% increase in probability for each unit passed on the fitness test (Chomitz et al., 2009). Thus, the overall conclusion is that physical fitness plays a significant role in students’ academic achievement on state-sponsored standardized tests, when controlling those confounding

variables of gender, socioeconomic status, weight, grade, and ethnicity (Chomitz et al., 2009).

Within the past year, Coe et al. (2013) followed up on his colleagues' work of analyzing the relationship between physical fitness and academic achievement. Although his study centered on these two variables, he extended it to determine the impact that socio-economic significance has on fitness and academic achievement. Coe et al.'s (2013) study occurred in an intermediate school district in the Midwestern U.S. The sample size included: 1,701 third, sixth, and ninth grade students (Coe et al., 2013). Fitness achievement in this study was measured through the FitnessGram. The fitness components assessed were cardiovascular endurance, muscular strength, muscular endurance, flexibility, and body composition. The results of these tests were measured against the criteria for the healthy fitness zone. Students were categorized and assessed according to the number of fitness tests completed at or above the healthy fitness zone levels.

In contrast, academic achievement was measured by the Michigan Education Assessment Program (MEAP), which is currently known as the Michigan Merit Exam. The academic subjects tested were mathematics, English language arts, and social studies. However, the exact subject areas evaluated were contingent upon the grade level and school. In an effort to keep the MEAP scores consistent, they were converted to percentiles for each grade level. The data analysis techniques employed in this study were abundant because of the mediating variable—socio-economic status. Placing this variable aside, the data analysis procedures used strictly to measure the relationship between physical fitness and academic achievement, as measured by the FitnessGram and MEAP

included: the Shapiro-Wilk test, the Kruskal-Wallis nonparametric analyses, and the Tukey's post hoc test. The Tukey's test was used to help determine the statistical significance between these two variables (Coe et al., 2013).

There were several interesting results presented in this study: First, the single greatest variable affecting student achievement in this study was socio-economic status. Second, a positive correlation existed between the students' physical fitness levels on the FitnessGram and their standardized test scores on the MEAP. Third, the greatest correlation of physical fitness and academic achievement was among middle and high school students. Finally, of all the fitness components, muscular strength, muscular endurance, and body mass index appeared to influence student achievement the most (Coe et al., 2013). This last finding is meaningful because several studies (i.e., Castelli et al, 2007; Chomitz et al. 2009) have found aerobic fitness and body mass index to be the major contributors. In short, the evidence cited in this section clearly supports the need for high quality physical education programs in schools.

Public Support for Physical Education

In light of the health and academic benefits associated with physical education, public support for this school-based subject is apparent. This support comes from a variety of stakeholders: national organizations—both public and private, national policymakers, and parents. National organizations who support and endorse school-based physical education include: The American Heart Association (AHA), The American Academy of Pediatrics, The National Association for Sport and Physical Education (NASPE), the U.S. Department of Health and Human Services, the U.S. Department of Education, the President's Council on Physical Fitness and Sport, and the Centers for

Disease Control and Prevention (LeMasurier & Corbin, 2006). In addition, NIKE, Pepsi-cola, the National Football League (NFL Play 60), the American Alliance for a Healthier Generation, and the Association for Supervision and Curriculum Development (ASCD) are all on record for supporting quality physical education in schools.

There are several past and present national policymakers who have supported quality physical education in schools. The following policymakers, for example, have either sponsored or co-sponsored the Promoting Health and Youth Skills in Classrooms and Life Skills Act of 2013 (PHYSICAL ACT): Senator Tom Udall (D-NM), Senator Barbara Mikulski (D-MD), Senator Mark Udall (D-CO), Senator Kirsten Gillibrand (D-NY), Senator Tim Johnson (D-SD), Senator Brian Schatz (D-HI), Representative Marcia Fudge (D-OH), Representative Marcy Kaptur (D-OH), Representative John Lewis (D-GA), Representative Donald M. Payne Jr. (D-NJ), Representative Jared Polis (D-CO), Representative Frederica Wilson (D-FL), and Representative Charlie Rangel (D-NY). Clearly, this list of senators and representatives indicate significant support in both the Senate and House of Representatives for quality physical education in schools.

Parent perceptions and attitudes toward physical education have also shown to be positive and supportive over the years (Steward & Green, 1987; NASPE, 2000; NASPE, 2002; NASPE & AHA, 2012; Kids Health, 2013). In 2000, a survey was conducted by the Opinion Research Corporation for the National Association for Sport and Physical Education (NASPE). The purpose of the study was to assess the public's attitudes toward physical education to see if schools were providing what the public wants. The sample size included a nationally representative sample of 1,017 adults (≥ 18 years of age, 50% male and 50% female). The results indicated that 81% of parents felt physical education

should be offered on a daily basis; 64% believed that physical education helped prepare them for a healthy, active lifestyle; 91% did not feel that physical education takes away from core academic classes; and 67% indicated that sports teach discipline and teamwork, which are necessary skills for the future (NASPE, 2000).

In 2009, a survey of practicing K-12 physical education teachers was done by Polar Electro Incorporated on behalf of NASPE. The purpose of this survey was to evaluate physical education trends in U.S. schools from a K-12 physical education teachers' perspective. The sample size consisted of 1,164 physical educators from across the nation (NASPE, 2009). Of those surveyed, parent interest/concern/support for student physical activity increased by 31% and parent interest/concern/support for physical education increased by 27% (NASPE, 2009). These findings parallel a new survey conducted by the Kids Health organization. This organization anonymously surveyed 1,173 parents between January and March of 2013. Seventy-eight percent of the respondents believed that elementary students should be required to take health class, and 92% stated that they should take physical education class (Kids Health, 2013). At the middle and high school levels, 87% of the participants indicated that this age group should take classes in both health and physical education (Kids Health, 2013).

The Marginalization of Physical Education

Despite public support for physical education, the discipline of physical education remains undervalued and viewed as a low-status subject in schools (Ennis, 2006; Hardman & Marshall, 2009; James, 2011; Beddoes, Prusak, Hall, 2014). As Sparkes, Schempp, and Templin (1993) put it, physical education is located in the hierarchy of subjects—at least from a North American and British perspective—as being at the

bottom. This perspective is supported by the second worldwide survey on school physical education which found that globally, physical education received a 76% rating for legal status and a 54% rating for actual status (Hardman & Marshall, 2009). In other words, 76% of countries around the world indicated that physical education is afforded equal status compared to other subjects under the law (Hardman & Marshall, 2009). However, 54% of the same countries suggested that this was not the case in actuality or practice (Hardman & Marshall, 2009).

Part of this reason extends back to the mind body debate among the Greeks, Romans, and Europeans since time immemorial. For one, the Greeks believed that the mind and body consisted of two separate parts, with the physical being subservient to the mental. The Romans saw a healthy body as being necessary to a healthy mind. Renè DesCartes, a French philosopher, believed that the mind and body were distinct, and that the mind took precedent over the body through a philosophical belief called dualism. All of these beliefs have come to influence western ideology at one time or another. However, the physical as being subservient to the mental, has come to dominate current educational theory and practice (Sparkes, Schemp, & Templin, 1993). This, perhaps, offers some historical perspective as to why physical education is viewed as a low-status subject in schools.

In contemporary times, physical education scholars have attributed the low-status of physical education to a myriad of reasons. For a subject to be considered an academic discipline, it must be “an organized body of knowledge collectively embraced in the formal course of learning. The acquisition of such knowledge is assumed to be an adequate and worthy objective as such, without any demonstration or requirement of

practical application. The content is theoretical and scholarly as distinguished from technical and professional” (Henry, 1964, p. 32). Henry (1964) suggested that physical education is often seen as doing something for people, whether therapeutic and prophylactic, rather than contributing to a field of knowledge.

Filho (2000) argued that physical education is a practical and not an academic discipline. He grounded this notion in the belief that physical education is not an independent branch of knowledge that encompasses an integrated system of scientific theories and laws (Filho, 2000). Instead, Filho (2000) sees physical education as the pursuit of knowledge to solve practical problems. These problems focus on acquiring the knowledge and skills necessary to accomplish certain tasks, i.e., performing the forehand groundstroke in tennis (Filho, 2000).

On the other hand, James (2011) asserted that physical education is typically seen as a “specialty subject” that is not equal to “core” subjects and consequently physical education teachers are not “real” educators. She uses the following gibe: “Those who can, do. Those who can’t, teach. Those who can’t teach, teach physical education.” She goes on to say, because curriculum, instruction, and accountability in physical education has continuously changed and remained in a state of flux over the years, it has been difficult to document and measure meaningful learner outcomes. Finally, the physical education profession lacks consensus, as compared to mathematics, regarding what content strands should be mastered by students at each grade level (James, 2011).

Collier (2011) believed that the marginalization of physical education is, in part, due to current grading and assessment practices. She states that, it makes sense why physical education is taken less seriously when grades are based on dress, attendance,

effort, and decorum (Collier, 2011). Melograno (2007) indicates that, although these variables are essential prerequisites for learning, they should not be included in course grades. Interestingly, why does this remain in an environment of high stakes accountability and standards-based reform? Veal (1990) enumerates three reasons, which are still germane today: (a) socialization, (b) teacher beliefs, and (c) knowledge and understanding of how to design and administer an assessment system.

Richardson (2011) indicated that the marginalization of physical education is attributed to physical education teacher education (PETE) programs struggling to produce teachers who can implement the profession's goals and standards of quality physical education in U.S. public schools. Part of this pertains to the lack of success to develop and support novice teachers as change agents (Richardson, 2011). Another reason has been the focus on the individual teacher as the principal agent of change (Richardson, 2011). France, Moosebrugger, and Brockmeyer (2011) said it best, "To state that the marginalization of physical education can be fixed, if...is at best oversimplified" (p. 48). They state, redressing the undervalued status of physical education will require a comprehensive approach that expands the knowledge-base of the field and fosters positive student interaction with physical education. This interaction needs to be pertinent and relevant to the students' lives (France, Moosbrugger, & Brockmeyer, 2011).

Physical Education and Public Policy

Today, there exist varying degrees of strength and comprehensiveness regarding physical education policies at the national, state, and local levels (NASPE & AHA, 2012; Chriqui, 2012, Chriqui, 2013; CDC & BGRP, 2014). At the national level, there is no federal law that requires U.S. schools to provide physical education to students (NASPE

& AHA, 2012; IOM, 2013). However, there are two federal statutes that have impacted health and wellness in schools. They are the Child Nutrition and Women, Infants, and Children (WIC) Reauthorization Act of 2004 (PL 108 – 265, section 204) and the Healthy, Hunger-Free Kids Act of 2010 (PL 111-296, section 204). These two pieces of legislation are amendments to the Richard B. Russell National Lunch Act of 1946 and the Child Nutrition Act of 1966, both of which have historically influenced the health and wellness of school-age children.

According to the Child Nutrition and WIC of 2004, U.S. public schools were required, as of July 1, 2006, to develop a local wellness policy. This policy had to contain, at a minimum, the following: (a) goals for nutrition education, physical activity, and any other school-based activities that the school deems necessary; (b) nutritional guidelines for all foods sold on school property; (c) assurance that subsidized school meals adhere to federal regulations; (d) plans for evaluating the implementation of the local wellness policy by designating one or more persons to oversee compliance; and (e) the inclusion of key constituents (parents, students, board of education members, school administrators, and the public) in developing the wellness policy (Child Nutrition & WIC, 2004).

The Healthy Hunger Kids-Free Act of 2010, which was an amendment to the Child Nutrition and WIC Act, placed stronger requirements on school wellness policies. In addition to the guidelines above, this act required the following: (a) key stakeholders (e.g., parents, students, physical education teachers, school health professionals, school administrators, and the public) participate in the development, implementation, monitoring, and changes of the school wellness policy; (b) a plan for communicating to

the public about the content and implementation of the school wellness policy; and (c) districts continuously evaluate and report on the implementation of the wellness policy. This included compliance, comparison of model policies, and extent to which goals and progress were being achieved (Healthy, Hunger Kids-Free Act, 2010).

The problem with both pieces of legislation is that physical education was not a required component of the school wellness policy even though many local agencies elected to include it because of its relationship to physical activity (Chriqui, 2012; Chriqui et al., 2013). For example, approximately 95% of students nationwide were in a district with a wellness policy that contained physical education provisions (Chriqui et al., 2013). Nonetheless, the comprehensiveness and strength of these school wellness provisions remained weak. Comprehensiveness is defined by a score of 100, which suggests that all components of a particular topic (i.e., nutrition education) were addressed. Likewise, a strength score of 100 reflects that all components of a specific topic were definitely required (Chriqui et al., 2013). According to the School District Wellness Policies: Evaluating Progress and Potential for Improving Children’s Health Five Years after the Federal Mandate report, physical education received a comprehensive score of 51 and a strength score 37 for the 2010 – 2011 school years. This is up from previous years (2006-2007) where the scores were 39 and 27 respectively (Chriqui et al., 2013).

In addition, the majority of wellness policy data in this report were classified into three distinct groups: strong policy provisions, weak policy provisions, and no policy provisions. Strong policy provisions were described as “those that required action and specified an implementation plan or strategy. They included language such as shall, must,

require, comply, and enforce” (Chriqui et al., 2013, p. 14). Weak policy provisions were defined as “suggestions or recommendations and some required action, but only for certain grade levels or times of the day. They included language such as should, might, encourage some, make an effort to, partial, and try” (Chriqui et al., 2013, p. 14). No policy provisions included no action or policy language in its entirety.

The School District Wellness Policies: Evaluating Progress and Potential for Improving Children’s Health Five Years after the Federal Mandate report showed variability in the area of physical education policy. For instance, approximately 90% of the public school districts (i.e., elementary, middle, and high schools) nationwide had physical education addressed in their wellness policy, as opposed to, 10% who did not (Chriqui et al., 2013). Heretofore, only 43% of public school districts had a strong policy in having a physical education curriculum at each grade level; 74% of districts had no policies pertaining to physical education time requirements: at least 150 minutes/week (ES) and at least 225 minutes/week (MS/HS); and 78% of districts had no policy for physical education class, courses, or credits for high school students (Chriqui et al., 2013).

The report showed additional variability in the area of physical education policy. These included the following: only 60% of school districts had a strong policy that physical education be required to teach about a physically active lifestyle; 62% had a no policy regarding physical education time devoted to moderate-to-vigorous physical activity (i.e., minimum of 50% of class time); 68% of school districts had no policy that requires physical education to be taught by a state-authorized physical educator; and 82%

had no policy that requires physical education teachers to be trained in physical education skills (Chriqui et al., 2013).

Another study found similar inconsistencies in the area of physical education policy. The Robert Wood Johnson foundation funded a program called Bridging the Gap, which studies the content, comprehensiveness, and strength of the Child Nutrition and WIC Reauthorization Act of 2004, and the Healthy Hunger-Free Kids Act of 2010. Bridging the Gap is well-known throughout the U.S. for providing data on the current status and trends on these wellness policies as well as state codified statutory and administrative laws. During the 2011-2012 school year, the Bridging the Gap program conducted a national study to identify what actions local agencies have taken with respect to physical education in schools. The sample size represented 688 school districts from across the U.S. (CDC & BGRP, 2014). The results were broken down into three subtopics: specific and required number of minutes of physical education per week, specific and required high school physical education graduation requirements, and the major components of a quality physical education program (CDC & BGRP, 2014).

For specific and required number of minutes of physical education per week, approximately 70% of district policies did not address time requirements for physical education at each of the different grade levels. In fact, less than 5% of local district policies followed SHAPE America's recommendation for elementary (150 minutes/week) and middle/high school (225 minutes/week) (CDC & BGRP, 2014). This can be further analyzed through the following statistics: 27% of districts at the elementary level, 25% districts at the middle school level, and 18% of districts at the high school level recommend that schools follow Society of Health and Physical Educators

(SHAPE) America's guidelines for time spent in physical education per week (CDC & BGRP, 2014). As for specific and required high school physical education graduation requirements, the data indicated that only 19% of districts mandated physical education requirements (CDC & BGRP, 2014).

A quality physical education program can offer students the knowledge, skills, and dispositions needed to be physically active for a lifetime (CDC & BGRP, 2014). During the 2011-2012 school year, the Bridging the Gap program found the following: (a) only 61% of district policies required physical education classes to encourage a physically active lifestyle or instill personal fitness and conditioning; (b) only 30% of districts required certified and credentialed physical education teachers; (c) only 14% of districts required continuous professional development for physical educators; (d) only 11% of districts required students to participate in a minimum of 50% of moderate-to-vigorous physical activity; (e) fewer than 10% of districts required safe and satisfactory equipment and facilities; and (f) only 8% prohibited physical education waivers for interscholastic and intramural sports (CDC & BGRP, 2014).

Still, another study discovered policy inconsistencies in physical education at the state level. The 2012 Shape of the Nation report suggested that, although 74.5% of states require students to enroll in physical education from elementary to high school, 28 states permitted exceptions or waivers. Moreover, 50 states possessed state standards for physical education, but only 26 states required student assessment and 14 states required fitness assessments. Yet, 28 states demanded physical education to be included in students' grade point average (GPA). Furthermore, only 10 states allocated funding for professional development in physical education, and one state (i.e., New York) in the

United States mandated that school districts have a certified physical educator functioning as a physical education coordinator for the district (NASPE & AHA, 2012).

In addition to these findings, no more than six states mandated physical education in every grade level: Illinois, Hawaii, Massachusetts, Mississippi, New York, and Vermont. By the same token, only three states, New Jersey, Louisiana, and Florida required the nationally recommended 150 minutes per week of physical education in elementary school. And just three states, West Virginia, Utah, and Montana, required the nationally recommend 225 minutes per week of physical activity in middle and high school (NASPE & AHA, 2012). According to the National Association of Sport and Physical Education and the American Heart Association (NASPE & AHA, 2012), these policy loopholes have inhibited the field of physical education from making progress throughout the U.S.

A Call for More Research

Physical education public policy research has been studied from several different perspectives. Existing research has focused on progress and obstacles remaining in U.S. physical education policies (NASPE & AHA, 2012); the development of a physical education-related state policy classification system (Mâsse et al. 2007); the role of state policy in promoting physical activity (Morandi, 2009); engaging school governance leaders to influence physical activity policies (Cox et al., 2011); school policies and practices to improve health and prevent obesity (Turner, Chaloupka, Sandoval, 2012; Johnston, O'Malley, Terry-McElrath, & Colabianchi 2014); results from the 2012 school health policies and practices study (USDHHS & CDC, 2013); the examination of trends

and evidence-based elements in state physical education legislation (Eyler et al., 2010); and physical activity policies and legislation in schools (Robertson-Wilson et al., 2012).

Additional policy research has addressed the status and trends in physical activity and related school policies (IOM, 2013). Still, others have included: an analysis of state physical education policies (McCullick et al., 2005), a national plan for physical activity in the education sector (Siedentop, 2009), a framework physical activity policy research (Schmid, Pratt, & Witmer, 2006), a comparison of wellness policies nationwide (Chriqui, 2012), an evaluation of the policy effects of the Child Nutrition and Women, Infants, and Children's Reauthorization Act of 2004 (Chriqui, 2013), perceptions, barriers, and needs among school leaders and wellness advocates (Agron, Berends, Ellis, & Gonzalez, 2010), and current policy actions taken by public school districts regarding physical education and physical activity requirements (CDC & BRGP, 2014).

Yet, minimal research exists on how Congressional policymakers identify problems, set agendas, formulate policy, and adopt public policy with respect to physical education in U.S. public schools. The unit of analysis will focus on the policymaking process of physical education at the national level. The analytic framework will reflect a conventional qualitative content analysis (Hsieh & Shannon, 2005). Underlying and informing this will be a theoretical framework based on Lukes (2005) and Gaventa's (1980) power theories, and Anderson's (2011) policymaking model. The central question guiding this investigation will be: what role, if any, should members of Congress play in requiring quality physical education in U.S. public schools from a public policy perspective?

Since physical education teachers experience misperceptions and negative stereotypes as a result of their profession (Duncan, Nolan, & Wood, 2002), it is important to study the mindset and reflexivity of those who are in charge of the policymaking process behind physical education at the national level. In doing so, this would assist physical education scholars in understanding how to advocate and implement for quality physical education in U.S. schools. This perspective is supported by the Committee on Physical Activity and Physical Education in the School Environment, an affiliate of the National Institute of Medicine, who suggests that prospective studies are needed on “systematic examination of personal, curricular, and policy barriers to successful physical education in schools” (IOM, 2013, p. 308). To their point, my study seeks to address this need.

Conclusion

The purpose of this chapter was to provide a conceptual framework in which to understand the issues surrounding the phenomenon being explored in this study. The themes discussed in this chapter included: the socio-political divide between health and wellness, physical activity levels among America’s youth, educating the whole child, the role of U.S. schools in teaching children nutrition and physical activity, the discipline of physical education, the benefits of school-based physical education from public health and academic achievement perspectives, public support for physical education, the marginalization of physical education, physical education and public policy, and the call for more research on this topic. Chapter three will focus on the research methodology—that is, the research design, strategy of inquiry, context, participants, sampling, data collection methods, data analysis, trustworthiness, role of the researcher, and ethics.

Chapter 3

Methodology

The purpose of this chapter is to describe the research methodology used to explore the phenomenon in this study. The chapter begins with the purpose statement and research questions followed by the rationale for and assumptions of qualitative research. Included in the latter section is the strategy of inquiry, or an exploratory case study design (Yin, 2014). Following this, details pertaining to the context, participants, sampling procedures, recruitment process, and data collection methods are presented. The data collection methods focus on semi-structured interviews, policy artifacts, and a research journal. The chapter moves on with a discussion of the instrument protocols, data analysis strategy, trustworthiness of the data, role of the researcher, and ethical considerations. Chapter three concludes with a brief summary and preview of chapter four—the results.

Purpose Statement

The purpose of this exploratory case study design (Yin, 2014) was to investigate and analyze the policymaking process of physical education at the national level. The participants used to explore this phenomenon were senators and representatives from the 114th-115th Congress who sat on the Health, Education, Labor, and Pensions Committee (HELP) ($n = 21$), and the Subcommittee on Early Childhood, Elementary, and Secondary Education ($n = 14$). Additional participants were national policymakers ($n = 3$), staffers ($n = 6$), and legislative liaisons ($n = 2$). The sampling procedures included: key informant, key knowledgeable, and reputational sampling, as well as snowball and chain sampling (Patton, 2015). Data came in the form of semi-structured interviews ($n = 8$),

policy artifacts ($n = 87$), and a researcher's journal entries ($n = 32$). Underlying and informing this data analysis process was Luke's (2005) and Gaventa's (1980) power theories, and Anderson's (2011) policymaking model.

Research Questions

The following central question and sub-questions guided the research design and methodology:

Central Question

- What role, if any, should members of Congress play in requiring daily physical education in United States schools from a public policy perspective?

Sub-Questions

- How do members of Congress identify public policy problems and set agendas related to physical education in U.S. schools?
- How do members of Congress formulate physical education policies at the national level?
- How do members of Congress adopt physical education policies at the national level?

Accordingly, these research questions called for a qualitative approach to study this phenomenon.

Rationale for and Assumptions of Qualitative Research

The goal in research is to enhance the "human condition" (Rossman & Rallis, 2012, p. 4). In qualitative research, it is no different. However, its major focus is on learning some aspect of the social world (Rossman & Rallis, 2012). Qualitative researchers attempt to answer questions that center on "how" social processes or events

are constructed as well as the meanings assigned to them (Denzin & Lincoln, 2011). Qualitative researchers seek rich, thick responses to these questions (Jackson II, Drummond, Camara, 2007), and they are concerned with understanding complex and interconnected relationships (Stake, 1995). Moreover, qualitative research calls for scholars to be immersed in the field, conducting observations, making subjective judgments, analyzing and synthesizing data, while at the same time being aware of their own internal processes (Stake, 1995).

The purpose of qualitative inquiry is to understand rather than explain, construct, and see the research process as being personal and not impersonal (Stake, 1995). In order to accomplish this, qualitative researchers study social problems in their natural settings (Yin, 2011; Denzin & Lincoln, 2011; Stake, 1995; Creswell, 2013; Hatch, 2002; Rossman & Rallis, 2012), serve as the key instrument (Creswell, 2013; Hatch, 2002), apply multiple methods (Yin, 2011; Denzin & Lincoln, 2011; Creswell, 2013; Rossman & Rallis, 2012), use complex reasoning (Creswell, 2013; Hatch, 2002; Rossman & Rallis, 2012), subscribe to participant meaning (Yin, 2011; Denzin & Lincoln, 2011; Creswell, 2013; Hatch, 2002), foster an emergent design (Griffin, 2004; Creswell, 2013; Rossman & Rallis, 2012), engage in reflexivity (Creswell, 2013; Hatch, 2002), and view the phenomenon holistically (Stake, 1995; Creswell, 2013; Rossman & Rallis, 2012).

According to Griffin (2004), there are several advantages of conducting qualitative research. She suggested that, qualitative research can explore social processes in great detail, permit flexibility, deconstruct sensitive and complex topics, and foster connections among different dimensions of people (Griffin, 2004). Miles, Huberman, and Saldaña (2014) added that, because qualitative data is collected in its natural

environment, the results depict the “real world.” They stated that because qualitative research takes into account settings and context, the data can reveal non-evident truths and nuanced understandings of different issues (Miles, Huberman, & Saldaña, 2014). They further asserted that qualitative research is an ideal strategy for discovery, exploring new topics or problems, and/or generating hypothesis (Miles, Huberman, & Saldaña, 2014). Notwithstanding these advantages, qualitative data is only as good as the capability and thoroughness of the analysis (Miles, Huberman, & Saldaña, 2014).

In policy research, qualitative research is becoming more prevalent (Altheide & Johnson, 2011). The reason is that there is a need to study how policymakers assign meaning in their lived environment and what consequences come as a result (Altheide & Johnson, 2012). Also, qualitative research in policy studies can capture the “complex and bureaucratic processes whereby laws and policies are actually implemented in daily life” (Altheide & Johnson, 2011, p. 583). Brownson, Chriqui, and Stamatakis (2009) augment this discussion by stating that qualitative data can positively impact policy deliberations, priority setting, and policy solutions. Whitehead et al. (2004) pointed out that qualitative data can even be influential in problem identification and policy adoption. All in all, qualitative data has become an important source in policy-relevant evidence (Brownson, Chriqui, & Stamatakis, 2009).

Strategy of Inquiry: Case Study Research

A strategy of inquiry can be described as a set of skills, assumptions, and practices that researchers utilize as they transition from their conceptual framework to the world of data and discovery (Denzin & Lincoln, 2011). Strategies of inquiry are responsible for putting schemas into action by collecting and analyzing data in a certain

way (Denzin & Lincoln, 2011). Overall, strategies of inquiry offer a scholarly and systematic approach to properly presenting and reviewing research studies (Creswell, 2013). The strategy of inquiry used in this study was an exploratory case study design (Yin, 2014). This strategy of inquiry was chosen because “case study research policy is a qualitative research method that is used to enhance our understanding of the policymaking process” (Molloy, 2010, para. 1).

Yin’s (2014) case study research approach, in particular, was selected because he offers insight and guidance into how to conduct a fair and rigorous case study. His case study research paradigm is detailed and practical (Yin, 2014). For example, he offers scores of exemplary case study examples drawn from different fields and disciplines; he provides distinct technical language of case study terms and concepts; he puts forth practical exercises for novice and experienced scholars to hone their research skills; and he takes researchers through the research process, step-by-step, in conceptualizing, designing, implementing, evaluating, and composing a case study. Therefore, this study reflects Yin’s (2014) ideals and principles as it pertains to case study research.

Case study research is one of several strategies of inquiry in social science research (Yin, 2014). Yin (2014) defined case study research through a two dimensional perspective that centers on the scope and features of a case study. Case study research, as a strategy of inquiry, seeks to examine a current phenomenon in great detail under real-life conditions (Yin, 2014). This is particularly evident when the lines between the phenomenon and the setting are not sharply defined (Yin, 2014). Generally, case studies focus on individuals, organizations, processes, neighborhoods, institutions, and sometimes events (Yin, 2014). Regardless of the unit of analysis, case study research is

selected when there is a need to "understand complex social phenomena" (Yin, 2014, p. 4). And, it is used when there is a need to study a social phenomenon holistically using a real-world lens (Yin, 2014).

The features of case study research can be described as circumstances or issues that involve multiple variables rather than data points. In other words, the plethora of variables are attributed to in-depth exploration of the problem, prolong engagement, and contextual conditions versus the individual case itself (i.e., data point) (Yin, 2014).

Another feature and strength of case study research is that it utilizes multiple data sources: interviews, observations, documents, and artifacts (Yin, 2014). These sources ultimately converge to create a triangulation of the findings with the purpose of producing analytic generalizations derived from the case (Yin, 2014.). A final feature of case study research is that it refers to theories or theoretical propositions prior to data collection and analysis (Yin, 2014).

In selecting a strategy of inquiry, three criteria need to be considered: (a) the form and substance of the research questions; (b) the extent of control the researcher has over the behavioral conditions; and (c) the determination of the event as being contemporary or historical (Yin, 2014). In case study research, the research inquiries focus on "how" and "why" questions; the researcher has limited, if any, control over social situations and actions; and the problem being studied is current and not historical (Yin, 2014).

According to Molloy (2010), "case study research in public policy is a qualitative research method that is used to enhance understanding of the policymaking process" (para. 1). Thus, case study public policy research can help achieve the following: (a) gain knowledge of how public policies are crafted and implemented, (b) what actions among

policymakers impact the policymaking process, (c) how decisions are formulated and agreed to, and (d) what political and organizational factors are affecting the policymaking process in general (Molloy, 2010). Additional advantages of case study public policy research is that the data collected can be compared and contrasted against a number of theories and models, as well as serve as an heuristic in applied research (Molloy, 2010). Above all, case study public policy research can provide a link between the academic community of systematized data collection, analysis, and theory to the messy and humanistic side of public policymaking (Molloy, 2010).

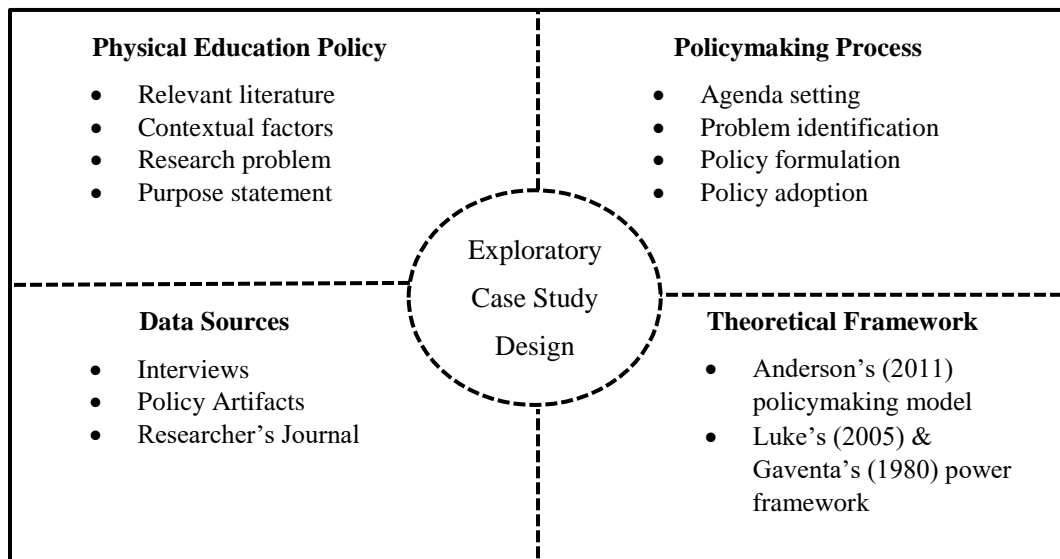


Figure 1. Exploratory Case Study Design. The straight lines represent the “boundaries” of the case. The dotted lines reflect the contextual areas involved in the case. The lines are dotted because the information flowing from each sector was fluid and changing.

Context of the Study

The setting selected for this exploratory case study design (Yin, 2014) was Washington, D.C. Washington D.C. is the geographic location chosen for this study because qualitative research is a

situated activity that locates the observer in the world. Qualitative research consists of a set of interpretive, material practices that make the world visible. These practices transform the world. They turn the world into a series of representations, including field notes, interviews, conversations, photographs, recordings, and memos to the self. At this level, qualitative research involves an interpretive, naturalistic approach to the world. This means that qualitative researchers study things in their natural settings, attempting to make sense of or interpret phenomena in terms of the meanings people bring to them. (Denzin & Lincoln, 2011, p. 3)

Accordingly, Washington D.C. is considered the hub in which most national policymaking decisions and actions take place in the United States. Thus, all members of Congress work in this area, regardless of state affiliation or rank.

Participant Selection and Sampling Strategy

Sampling in qualitative research is different from quantitative research (Lincoln & Guba, 1985). In qualitative research, the sampling focus is informational, not statistical; the goal is to maximize information not generalize to a population; the process is emergent versus previously determined; and sampling ceases when information becomes redundant, not when a certain confidence interval has been reached (Lincoln & Guba, 1985). Additionally, the sample size in qualitative research is determined and influenced

by the research questions (Marshall, 1996), and the number of participants who can illuminate on all aspects of the phenomenon being explored (Sargent, 2012).

The participants in this study included senators and representatives from the 114th-115th Congress who sat on the Health, Education, Labor, and Pensions Committee ($n = 21$), and the Subcommittee on Early Childhood, Elementary, and Secondary Education ($n = 14$). Additional participants were national policymakers ($n = 3$), staffers ($n = 6$), and legislative liaisons ($n = 2$). In order to be considered for this study, they had to meet the inclusion-exclusion criteria. The inclusion criteria was as follows: a) the individual is knowledgeable and informed about school-based health and physical education; b) the individual is knowledgeable and informed about public policymaking at the national level; and c) the individual is a national policymaker, legislative staffer, and/or a person who can answer the interview questions with depth, detail, and richness. The exclusion criteria centered on the following: a) the individual only understands general health, nutrition, and physical activity; and b) the individual only understands state and local public policymaking.

Participants who met the inclusion-exclusion criteria for this study were chosen based on a purposeful sampling approach (Patton, 2015). Purposeful sampling can be defined as “selecting information-rich cases to study, cases that by their nature and substance will illuminate the inquiry question being investigated” (Patton, 2015, p. 264). Simply, purposeful sampling is about identifying those cases (i.e., sites, individuals) who have extensive knowledge, understanding, and insight into the phenomenon being explored (Patton, 2015). These information-rich cases give way to learning a lot about the issues surrounding the phenomenon (Patton, 2015).

Due to the nature of the research problem and questions being investigated, key informants, key knowledgeable, and reputational sampling, as well as snowball or chain sampling were the specific strategies employed (Patton, 2015). The goal of the former strategy was to pinpoint and select those individuals, often by reputation, who have in-depth knowledge, experience, and expertise on a specialized topic (Patton, 2015). On the other hand, the aim of the latter strategy was to build a sample size based on a series of referrals often initiated by one or two target individuals who have information-rich knowledge surrounding the inquiry (Patton, 2015). These early participants provided the researcher with contact information of other participants who had similar or divergent views on the phenomenon being studied (Patton, 2015). Although the process repeated itself with each new contact, the researcher served as the main recruiter throughout this sampling procedure (Patton, 2015).

Based on these sampling strategies, the initial participants came from gatekeepers as well as legislative directors identified in the database. This, in turn, gave way to staffers whose members of Congress resided on the Senate Committee on Health, Education, Labor, and Pensions (HELP) and the House of Representatives Subcommittee on Early Childhood, Elementary, and Secondary Education. These congressional members and their accompanying staffers were chosen because they have jurisdiction over K-12 education. Both committees were involved in the reauthorization of the Elementary and Secondary Education Act of 1965, or the Every Student Succeeds Act of 2015.

As for the definitive number of senators and representatives from this committee, Creswell (2014) argued that in purposeful selection, the exact number of sites and

participants cannot be determined in advance (Creswell, 2014). Instead, the number and sites are determined by data saturation (Creswell, 2014). That is, data collection ends when no new categories or insights are being gleaned from the data corpus (Creswell, 2014). In this study, data saturation was achieved primarily through the collection of policy artifacts ($n = 87$) and the researcher's journal ($n = 32$). Semi-structured interviews ($n = 8$) served as a supplementary data source due to limited access to the participants.

The Recruitment Process

The co-investigator, Edward B. Olsen, was responsible for all subject recruitment. Approximately 160 members of Congress, staffers, press secretaries, and legislative liaisons were asked to participate in this study. The majority of participants came from the Senate Health, Education, Labor, and Pensions Committee and the House Subcommittee on Early Childhood, Elementary, and Secondary Education. The recruitment process began in October of 2015 and concluded in April of 2016. The recruitment process consisted of several strategies: a database, gatekeepers, SHAPE America senior manager advocates, face-to-face appointments with staffers, and office visits in Washington, D.C.

The purpose of the database was to systematically identify potential subjects and record contact information, meetings, and conversational outcomes. For instance, the database included senators' and representatives' emails, phone numbers, fax numbers, party affiliations, state affiliations, legislative directors, contact forms, office locations, and outcomes of various conversations. The database also included contact information of gatekeepers and SHAPE America advocates. The database was organized in the form of a spreadsheet to allow easy access and updates. Because reputational and snowball

sampling procedures were utilized, the database evolved and changed throughout the course of the study.

Once the database was organized, gatekeepers were contacted. Gatekeepers are a culture-sharing group of people who possess similar language, attitudes, and behaviors (Creswell, 2013). Typically, researchers try to pinpoint one or two members that will potentially lead to access of the entire group (Creswell, 2013). In this study, the gatekeeper was Ms. Katherine Talalas. Ms. Talas met with the co-investigator in person to discuss the study and the recruitment of potential subjects. She distributed the interview questions to individuals who might be willing to participate. Several follow up phone calls and emails were made to Ms. Katherine Talalas to assess progress. Midway through the recruitment process, Ms. Talas was transferred and replaced by Ms. Cate Beneditti. Ms. Beneditti also assisted in the recruitment process. However, all leads with Ms. Talalas and Ms. Beneditti failed to produce any subjects.

While conversations were taking place with Ms. Talas and Ms. Beneditti, several face-to-face appointments with staffers from both the Senate Committee on Health, Education, Labor, and Pensions and the House of Representatives Subcommittee on Early Childhood, Elementary, and Secondary Education occurred. These face-to-face appointments were initiated through email and telephone based on the co-investigator's database. Upon receiving these emails or phone calls, each legislative director was asked to meet with the co-investigator for a face-to-face meeting. This required the co-investigator to travel to Washington, D.C. where a personal introduction as well as an explanation regarding the purpose of the research study was made to each legislative director or staffer. This occurred on November 5-6 of 2015.

Once there, each legislative director or staffer was asked if he/she or their senator/representative would be interested in participating in the study. A packet of information was provided, which will included: a cover letter, consent forms, and the interview questions. None of the participants formally agreed to participate during these meetings. Follow up phone calls and emails were conducted over a three month process in order to gain interview data. The majority of the participants either declined to participate or failed to respond. Directly following these face-to-face meetings, a “cold calling” approach was utilized where the co-investigator went to senators’ and representatives’ offices who met the inclusion-exclusion criteria for participation. On November 5-6 2015, approximately 100 offices were visited. Contact information in the form business cards of individuals who might be interested in participating in the study were collected and uploaded to the database.

The final recruitment strategy involved SHAPE America and its legislative action center. Specifically, Mrs. Carly Wright and Ms. Karen Johnson, who are senior manager advocates for SHAPE America were asked to participate in the study. They were chosen because they met the inclusion-exclusion criteria for participation, and they offered great insight into the policymaking process of physical education in schools. Dr. Stephen Jefferies, former President of SHAPE America and professor emeritus at Central Washington University, was also asked to participate in the study. However, he was selected to offer an alternative viewpoint to the policymaking process of physical education in U.S. schools that could be utilized in chapter 5—the discussion.

Data Collection Methods

Interviews

In naturalistic inquiry, qualitative interviewing is considered an important research method (Rubin & Rubin, 2012). For example, it is relevant when researchers need to converse with individuals who have knowledge and understanding of specific issues (Rubin & Rubin, 2012). As a whole, qualitative interviewing allows researchers to see the world—opinions, differences, interactions—from the perspectives of the participants not their own framework (Rubin & Rubin, 2012). It permits researchers to analyze problems from a multidimensional perspective, which results in deeper and more subtle understanding (Rubin & Rubin, 2012). Still, qualitative interviewing provides researchers the ability to recreate experiences not previously seen, as well as understand intricate, complex, and even dichotomous issues or processes (Rubin & Rubin, 2012). Finally, qualitative interviewing is a valuable tool when attempting to study semi-invisible social processes (Rubin & Rubin, 2012).

Although there are many approaches to conducting in-depth qualitative interviews, this study utilized the responsive interviewing model (Rubin & Rubin, 2012). Responsive interviewing is a specific technique that allows the interviewer and interviewee to develop a conversational partnership (Rubin & Rubin, 2012). A conversational partnership is where the relationship between the interviewer and interviewee is one of mutual respect, trust, and discovery (Rubin & Rubin, 2012). In essence, the interviewer recognizes and acknowledges the interviewee's knowledge, experience, and understanding of the issues and therefore, conveys a feeling of joint conversation (Rubin & Rubin, 2012). This conversation is natural enabling the

interviewer to adjust the questions according to the topic, context, and/or participant (Rubin & Rubin, 2012). Overall, the responsive interviewing model is adaptable, respectful, and ethical (Rubin & Rubin, 2012).

One of the major goals of the responsive interviewing model is for interviewers to see the world through experiences and perspectives of their participants (Rubin & Rubin, 2012). Siedman (2006) stated, interviews can acquire the “lived experience of the other person and how they can make meaning of that lived experience” (p. 9). As such, the researcher’s role is to capture stories, descriptions, and viewpoints of their participants and arrange them in such a way that offers real insight into the phenomenon (Rubin & Rubin, 2012). The accuracy of this insight can be validated by the participants’ themselves (Rubin & Rubin, 2012). Thus, quality interviews reflect results that are fresh and real, conclusions that are balanced, thorough, credible, and accurate, and ideas that demonstrate richness and nuanced understanding (Rubin & Rubin, 2012).

To this end, the responsive interviewing model consists of three major parts: main questions, follow-up questions, and probes (Rubin & Rubin, 2012). The purpose of main questions is to answer the research questions from the viewpoints of the participants (Rubin & Rubin, 2012). Therefore, each question targets one aspect of the research problem and is sequential in nature (Rubin & Rubin, 2012). Furthermore, the main questions are written prior to the interview and presented in a way that reflects the participant’s background and experience (Rubin & Rubin, 2012).

The aim of follow-up questions is to procure additional depth, detail, and vividness by reviewing answers to the main questions (Rubin & Rubin, 2012). They can also help establish thoroughness and credibility (Rubin & Rubin, 2012). These rejoinders

can call for specific examples or clarification of key concepts and themes (Rubin & Rubin, 2012). According to Rubin and Rubin (2012), key concepts form the basis of meaning and how interviewees' make sense of and interpret their world. By the same token, themes are overarching phrases that summarize an event and why or how it occurred in some way (Rubin & Rubin, 2012). In terms of time and place, follow-up questions can occur during or after an interview (Rubin & Rubin, 2012).

The goal of probes is to direct and manage the conversation in a positive way (Rubin & Rubin, 2012). Moreover, probes are designed to keep the conversation flowing, which can result in additional evidence. Probes can also fill gaps, expound on ideas, and/or unearth certain biases or slants (Rubin & Rubin, 2012). Probes can consist of questions, comments, or gestures (Rubin & Rubin, 2012). They are typically standardized, written out before hand, and reflect a basic, pointed, and common approach (Rubin & Rubin, 2012). For example, "Continue..." or "Can you tell me more about..." (Rubin & Rubin, 2012).

Interview Formats

In this study, the responsive interview model (Rubin & Rubin, 2012) occurred through three different formats: face-to-face, telephone, and email. These mediums were chosen based on the targeted audience, geographic locations of the participants, access, financial costs, time, research questions, and interview protocol. It is important to note that the benefits and limitations of each interview format is based on synchronous communication in time and place and asynchronous communication of time and place (Opdenakker, 2006). The following sections describe, in detail, the conditions in which

each interview format may be applied, the advantages and limitations of each approach, and what principles should be taken into account when interviewing an elite population.

Face-to-face interviews. Face-to-face or in person interviews are one of the most traditional and prevalent forms of data collection methods (Dialsingh, 2008). Generally, the responsive interview model aligns to and presupposes with face-to-face interviews (Rubin & Rubin, 2012). Opdenakker (2006) pointed out that face-to-face-interviews are most appropriate when: a) social cues are essential to helping answer the research questions; b) the interviewer has the time and financial resources necessary to conduct the interviews; c) the interviewees are geographically close or in near proximity to the interviewer; and d) the formalization and procedures of the interview are essential. In light of these statements, there remain some advantages and limitations associated with this interview medium.

The advantages of face-to face-interviews focus primarily on social interaction with the participants. Opdenakker (2006) argued that face-to-face interviews can allow the interviewer to capture social cues, such as voice, intonation, and body language (Opdenakker, 2006). These social gestures can provide the interviewer with additional pertinent information that can lead to a better understanding of the phenomenon being explored (Opdenakker, 2006). Face-to-face interviews permit the interviewer and interviewee to converse back and forth without delay (Opdenakker, 2006). This allows for more spontaneity between the questions posed and the answers generated (Opdenakker, 2006). Opdenakker (2006) suggested that face-to-face interviews grant easier exchange of ideas, questions, and perspectives, as compared to other methods

(Dialsingh, 2008). Finally, face-to-face interviews can yield a high degree of participation with low item non-response rates (Dialsingh, 2008).

The limitations of face-to-face interviews center on time, cost, privacy issues, and researcher bias. Face-to-face interviews that permit audio recording require extensive time and effort in the transcription process (Opdenakker, 2006). Bryman (2001), as cited in Opdenakker, (2006), stated that for every one of hour tape, it takes six hours to transcribe. Thus, face-to-face interviews can require a lot of time, energy, and cost (Opdenakker, 2006). This pertains to travel expenses and geographic locations of the participants (Opdenakker, 2006). Face-to-face interviews can also cause privacy issues, especially when trust has not been established between the interviewer and interviewee (Dialsingh, 2008). And, face-to-face interviews can lead to interviewer bias, which could impact the reliability of the data (Phellas, Bloch, & Seale, 2012). This can occur by the way the questions are asked; the individual traits and attributes of the interviewer; or the interviewee's interest to please the interviewer (Phellas, Bloch, & Seale, 2012).

Telephone interviews. Although there are many advantages and limitations associated with face-to-face interviews, this interview format is not always available to researchers (Rubin & Rubin, 2012). Therefore, there are times and circumstances when telephone interviews are more appropriate. For example, telephone interviews are beneficial and chosen when: a) social cues are not essential or required to answer the interview questions; b) the researcher has financial and time constraints; c) the researcher has difficulty accessing participants and sites; d) the interview format calls for a more relaxing approach; and e) participant anonymity is summoned (Opdenakker, 2006).

Similar to face-to-face interviews, there are advantages and limitations associated with this interview medium.

The advantages of telephone interviews focus on time, financial costs, sample size, interviewer bias, safety, and anonymity. Holstein and Gubrium (2003) and Rubin and Rubin (2013) argued that telephone interviews can save time and money. For example, participants can be chosen or included from a greater geographical area (Rubin & Rubin, 2012; Phellas, Bloch, & Seale, 2012). Phellas, Bloch, and Seale (2012) stated that telephone interviews can introduce less interviewer bias or personal effects, and enhance the safety of the interviewer (Phellas, Bloch, & Seale, 2012). Also, better note taking can be accomplished through the telephone because the interviewer is not visually distracted from the interviewee (Tausig & Freeman, 1988). Lastly, telephone interviews can be conducted in relaxing environments, such as homes during mutually convenient times (Tausig & Freeman, 1988).

Limitations associated with telephone interviews include types of questions asked, time constraints, social cues, and distractions. Telephone interviews require straightforward questions and the duration of the interview needs to remain short (Phellas, Bloch, & Seale, 2012). This is due to the high break off rates, which means participants stop or will not answer any more questions associated with this interview format (Phellas, Bloch, & Seale, 2012). Telephone interviews do not lend themselves easily to asking sensitive questions, visual aids, or the need to readily identify social cues (Phellas, Bloch, & Seale, 2012). Still, telephone interviews can result in interviewees being distracted or having to multitask due to their surroundings (McCoyd & Kerson, 2006).

Email interviews. According to Meho (2006), email interviews have become an invaluable data collection method in qualitative research. Electronic mail or commonly known as email is considered one of many computer-mediated communication (CMC) tools (Opdenakker, 2006). CMC can be described as a “process where messages are electronically transferred from a sender to one or more receipt(s), both in synchronous (in real time) and in asynchronous (independent from time and place) setting” (Opdenakker, 2006, para. 1). With CMC or email interviews, there are times and places where this interview medium is advantageous.

Opdenakker (2006) argued that email interviews are useful and selected when: a) social cues are not paramount to answering the interview questions; b) the interviewer has a tight budget and limited time for traveling; c) the sample population is difficult to reach; d) the interview structure can be more casual and less formal; e) anonymity among the participants is required; f) the interviewer and interviewee possess the appropriate technology skills; g) major time zone differences exist between the interviewer and interviewee; and h) the interview questions and probes require reflection, thought, and time. Despite these points, there are several advantages and limitations associated with this interview format.

Email interviews allow for ongoing, long-term communication (McCoyd & Kerson, 2006). They offer participants the opportunity to complete the interview at a time, place, and location of their choosing (McCoyd & Kerson, 2006). Email interviews require writing and text-based answers. As such, this omits the need for transcription and idiosyncrasies, i.e., um (McCoyd & Kerson, 2006). Email interviews reduce interviewer bias because there is less opportunity to past judgement based on visual gestures and

social expressions (McCoyd & Kerson, 2006). They are cost efficient and are not bound to a specific geographical location (Meho, 2006). They also afford investigators the opportunity to access difficult and hard to reach populations (Meho, 2006).

However, email interviews are only applicable to participants who have access to the Internet (Meho, 2006). Furthermore, they demand a high degree of computer literacy skills (Meho, 2006). Email interviews can take many days or weeks to finish (Meho, 2006). They require simple, direct, and easy to understand questions, as compared to other methods, in order to prevent poor communication and misinterpretation (Meho, 2006). Email interviews do not lend themselves to easy identification of social and emotional cues (McCoyd & Kerson, 2006). They can also result in technological issues (Bampton & Cowton, 2002; McCoyd & Kerson, 2006). Examples include: email system failure (Bampton & Cowton, 2002), the lost of text (McCoyd & Kerson, 2006), and modifications to email addresses (McCoyd & Kerson, 2006).

Material Culture

The second data source consisted of material culture or policy artifacts. Material culture can be defined as the “study through artifacts of the beliefs—values, ideas, attitudes, and assumptions—of a particular community or society at a given time” (Prown, 1982, p. 1). Hodder (1994) referred to material culture as mute evidence, or simply written texts and artifacts. Prown (1982) reiterated this point that material culture is often referred to as artifacts (Prown, 1982). Artifacts are objects produced and/or altered by man (Prown, 1982). What makes material culture unique, as compared to verbal communication, is that an object “endures physically and thus can be separated

across space and time from its author, producer, or user” (Hodder, 1994, p. 393). In sum, artifacts can serve as a primary data source (Prown, 1982).

Artifacts are classified into a broad range of categories: art (e.g., paintings, drawings, etc), diversions (e.g., books, toys, etc), adornment (e.g., jewelry, clothing, etc.), landscape (e.g., architecture, town planning, etc.), applied arts (e.g., furniture, furnishings, etc.), and devices (machines, vehicles, etc.) (Prown, 1982). In this study, artifacts consisted of the following: press releases ($n = 60$), floor speeches ($n = 13$), press conferences ($n = 1$), a hearing ($n = 1$), an op-editorial piece ($n = 1$), first person statements derived from members of Congress websites ($n = 5$), letters ($n = 3$), a committee statement ($n = 1$), enacted legislation ($n = 1$), and a policy guide ($n = 1$).

There are several benefits to using material culture in qualitative research. Material culture, depending on the object, can permit unfettered access; the object may be inexpensive to obtain; the object may offer divergent as well as historical insight; the artifact may be used in conjunction with other data sources to reaffirm or dismiss certain biases; and the artifact can be constantly referenced leading to new insights or manifestations (Hodder, 1994). Hodder (1994) argued that material culture is critical when qualitative researchers want to investigate different viewpoints or interpretations, whether they be similar or opposing. It is important to recognize that material culture is active, not passive (Hodder, 1982, as cited in Hodder, 1994); meaning that objects are “produced so as to transform, materially, socially, and ideologically” (Hodder, 1994, p. 395).

In addition, material culture served as a valuable data source in this study due to the following reasons: (a) artifacts can depict the values within a cultural group, such as

utilitarian, aesthetic, spiritual, or attitudinal; (b) artifacts can provide a glimpse into historical events; (c) artifacts can offer an inclusive and representative picture as to mindset and thought processes behind a cultural group; (d) artifacts can allow for cultural assumptions within a group to be identified; and (e) artifacts can permit researchers to study the cultural perspective of their participants with their senses, as opposed to, their minds (Prown, 1982). In other words, the study of material culture encourages researchers to analyze their artifacts from the indigenous perspective of their participants and not their own cultural norms, values, and shared assumptions (Prown, 1982).

Research Journal

The third and final data source pertained to a research journal. In qualitative research, journal writing can be considered a main data source (Janesick, 1999) or a supplementary data source (Lamb, 2013). In this study, it served as a main data source ($n = 32$). A research journal is a technique used in qualitative research that helps promote further study of the research problem (Janesick, 1999). In addition, it can be used as a tool to foster researcher development and understanding (Borg, 2001). There are several advantages to having a research journal in qualitative research. Specifically, research journals can clearly define the role of the investigator in the research process; it can make participants' responses more transparent and easily understood; it can serve as a liaison between the researcher and participants; it can assist in data triangulation; it can personalize the information and tell the story from the lives' of the participants; and it can help researchers develop competency and expertise in their own thinking and reflection processes (Janesick, 1999).

Borg (2001) suggested that research journals can have many “process” and “product” benefits as well. The process benefits include: communicating and deliberating over possible solutions, addressing feelings and emotions, detailing situations and procedures, identifying goals and developing plans, monitoring progress, refining concepts, and exploring ideas (Borg, 2001). On the other hand, products benefits may serve in the following capacities: (a) as reminders of previous ideas or situations that influence actionable responses, (b) as documentation and previously created plans needed for evaluation, (c) as the addition of rich material necessary to write the study, (d) as records of the thinking behind key decisions, (e) as information regarding the professional growth of the researcher, (f) as concrete information on achievement, (g) and as reflective practice that when revisited, offers additional insight (Borg, 2001). In summary, keeping a research journal of the investigator’s self is important in naturalistic inquiry because the researcher serves as the research instrument (Janesick, 1999).

The principles and ideals that informed this research journal came, in part, from Progoff’s (1999) intensive interview method. In this method, Progoff (1992) recommends the following: (a) write a journal entry daily in the form of self-dialogue, (b) record everything that pertains to the study, and (c) be willing to share and engage in journal writing with other people (as cited, in Janesick, 1999). The premise behind using this model is that research requires a lot of back and forth movement between field work, writing, and presentation, which can cause issues in interpretation, meaning, and representation (Janesick, 1999). Journal writing helps overcome these issues by deepening the researcher’s knowledge and understanding of the study (Janesick, 1999).

Furthermore, it serves as a “check and balance” of the researcher’s internal processes (Janesick, 1999).

Instrumentation

This study included two instrument protocols: an interview protocol and a policy artifact protocol. Protocols are a form of conservation guides (Rubin & Rubin, 2012). They are formal in nature and developed prior to data collection (Rubin & Rubin, 2012). Protocols can be shared with participants and submitted to institutional review boards (Rubin & Rubin, 2012). Both the interview and policy artifact protocols are described, in detail, below.

Interview Protocol

The interview protocol in this exploratory case study design consisted of nine main questions along with prompts and follow-up questions using the responsive interview model (Rubin & Rubin, 2012). Please see appendix B. In order to answer these questions and achieve data saturation (Creswell, 2014), several approaches and techniques were utilized. They included: document analysis, participant observation, email interviews, and face-to-face semi-structured interviews using the “picking up the twigs” pattern (Rubin & Rubin, 2012). Document analysis refers to the investigation and review of written forms of communication, pictures, and visual recordings (Rubin & Rubin, 2012). In this study, document analysis was used with the literature on physical education policy to contextualize the main questions. It was also used to visit each senator or representative’s website to acquire basic information, such as the legislative director’s name, contact information, party affiliation, and years of public service.

Participant observation can be described as someone who assumes a variety of roles ranging from casual social exchanges to specific responsibilities (Yin, 2009). Participant observers often play a quiet and subtle role with the purpose of watching and recording notes; and they do not intrude upon the current state of affairs or events (Rubin & Rubin, 2012). The researcher's role as participant observer was to meet with each legislative director or staffer personally in Washington, D.C., where he introduced himself and the purpose of the study. The co-investigator gauged participant interest and left a packet of information materials describing consent procedures. Rubin and Rubin (2012) suggested that participant observation can be used to build trust with participants and foster a conversational partnership.

Internet interviews are forms of communication that occur electronically. Rubin and Rubin (2012) recommend this type of interview to participants who are difficult to reach or disinterested in talking openly. This study used email interviews based on participant interest and preferences. Emails were sent to the participants with two attachments: interview protocol and consent forms.

Since the majority of semi-structured interviews ($n = 7$) were conducted through email, follow-up questions occurred through email using the "picking up twigs pattern" (Rubin & Rubin, 2012). Semi-structured interviews are where the interviewer asks the interviewee questions about a certain topic, prepares questions ahead of time, and intends on asking follow-up questions (Rubin & Rubin, 2012). In semi-structured interviews, the main variable is the amount of control the interviewer exercises over the interviewee (Rubin & Rubin, 2012). Semi-structured interviews are myopic in scope focusing on a few key topics that answer the research questions (Rubin & Rubin, 2012). Bernard (2011)

added, semi-structured interviews work well in studies whose participants involve “high level bureaucrats or elite members of the community” (p. 158).

“Picking up the twigs” is an interview pattern that allows for follow-up questions to occur with the same conversational partners (Rubin & Rubin, 2012). In this pattern, researchers go back to their participants and ask them to fill in the gaps in understanding (Rubin & Rubin, 2012). Sometimes, there are concepts or themes that require further explanation (Rubin & Rubin, 2012). This study utilized semi-structured interviews using the “picking up the twigs” format in order to achieve depth, detail, richness, thoroughness, balance, and credibility (Rubin & Rubin, 2012).

Material Culture Protocol

The material culture or policy artifact protocol encompassed several steps and procedures. Before detailing these processes, Yin (2014) argued that well-constructed case studies reflect a variety of sources, including documents. Documentary information are applicable, germane, and valuable in case study research (Yin, 2014). As a result, they should be incorporated in the data collection plans (Yin, 2014). However, it is important to note that when researchers analyze documents, they understand the purpose and audience for which the document was produced (Yin, 2014). In doing so, researchers can reduce the chances of misinterpreting the document (Yin, 2014). This is critical because documents were originally produced and intended for people other than the case study itself (Yin, 2014).

The protocol begins by collecting basic or introductory information from the artifact. Please see the appendix B. This includes: artifact’s name, date published, participants’ names, if applicable, source, and location. Below this data is an inclusion-

exclusion criteria, which is designed to limit the collection of artifacts. Generally speaking, the inclusion criteria are those characteristics that qualify an artifact for acceptance into a study; while the exclusion criteria are those attributes that disqualify an artifact for acceptance into a study. Directly underneath the inclusion-exclusion criteria are the research questions. The purpose of including the research questions is to maintain a reciprocal relationship between the goals of the study and the artifact.

The next section is comprised of a running record. The left column reflects descriptive notes and the right column depicts analytic notes. The descriptive notes detail the following: purpose of the artifact, contextual information, important information, specific relationship of the artifact to the research questions, inclusion-exclusion criteria, document attachment, and other. Embedded in each of these areas are questions or prompts. These are designed to help standardize the process and ensure depth, detail, richness, thoroughness, balance, and credibility (Rubin & Rubin, 2012). The analytical column is intended to produce inferences; that is, connections between and among different documents and sources. As Yin (2014) emphasized, case study research is concerned with the convergence of findings from different data sources.

Research Journal Protocol

The researcher research journal protocol was use throughout study. It was implemented in four sequential steps. Please see the appendix B. Step one identified the journal entry number and date written. Step two identified, in the subject header, the area of concern, issue, concept, and/or central phenomenon being investigated. Step three explained and discussed the researcher's experience with the area of concern, issue, concept, and/or central phenomenon. Within this section, self-reflection occurred;

specifically, the researcher thought deeply, questioned, and formed an internal dialogue. Where appropriate, the goals of the study were reinforced. Step four reflected how this experience influenced the researcher's beliefs, attitudes, values, biases, and perceptions toward research. Again, where appropriate, possible solutions and actions were identified and described.

Data Analysis

Data analysis in qualitative research involves analyzing, synthesizing, and evaluating linguistic and/or textual data. Jorgensen (1989) defined qualitative data analysis (QDA) through the following perspective:

Analysis is a breaking up, separating, or disassembling of research materials into pieces, parts, elements, or units. With facts broken down into manageable pieces, the researcher sorts and sifts them, searching for types, classes, sequences, processes, patterns, or wholes. The aim of this process is to assemble or reconstruct the data in a meaningful way or comprehensible fashion (p. 107).

According to Creswell (2013), qualitative data analysis is the process by which data is organized and prepared, coded and categorized, reduced to overarching ideas, and interpreted and displayed.

Qualitative data analysis, at its most basic level, consists of three interactive and cyclical activities: data condensation, data display, and conclusion drawing/verification (Miles, Huberman, & Saldaña, 2014). Data condensation is the process of identifying, winnowing, culling, abstracting, and/or converting a body of data displayed in its original state, i.e., field notes, interview transcripts, and documents (Miles, Huberman, & Saldaña, 2014). Its major purpose is to narrow and focus the data so that final conclusions can be

made and supported (Miles, Huberman, & Saldaña, 2014). Data condensation occurs throughout the duration of a qualitative study and encompasses many activities (Miles, Huberman, & Saldaña, 2014). Some of these include: writing summaries, coding, creating themes, producing categories, and writing analytic memos (Miles, Huberman, & Saldaña, 2014).

Data display is the act of organizing information into a compact and observable form so that further analysis or conclusions can be generated (Miles, Huberman, & Saldaña, 2014). Examples are matrices, graphs, charts, and networks (Miles, Huberman, & Saldaña, 2014). Conclusion drawing and verification is about the researcher acknowledging certain patterns, explanations, causal flows, and propositions in the data (Miles, Huberman, & Saldaña, 2014). These conclusions are open to change and modification as further analysis and data are revealed. This is an ongoing process where conclusions are constantly being evaluated and checked for their plausibility (Miles, Huberman, & Saldaña, 2014). Together, these three activities, data condensation, data display, and conclusion drawing/verification, form the “basis” of qualitative data analysis (Miles, Huberman, & Saldaña, 2014).

Conventional Content Analysis

In this study, a conventional approach to qualitative content analysis (Hsieh & Shannon, 2005) serve as the main analytic framework. Hsieh and Shannon (2005) defined qualitative content analysis as a “research method for the subjective interpretation of the content of text data through the systematic classification process of coding and identifying themes” (p. 1278). Down-Wamboldt (1992) suggested that the aim of content analysis is to foster and enhance the knowledge and understanding of the research

problem. A conventional approach to content analysis is used when the purpose of the study is to explain a phenomenon (Hsieh & Shannon, 2005); or in this case physical education and public policy. A conventional approach to content analysis is most applicable when there is limited theory and literature on the research problem (Hsieh and Shannon, 2005); hence the problem outlined in chapters one and two.

Hsieh and Shannon (2005), along with Kondracki and Wellman (2005) argued that investigators who use this analysis strategy permit codes and categories to emerge from the data, as opposed to having a previously defined list of codes. Furthermore, a conventional approach encourages the researcher to revisit the data looking for new categories and themes (Kondracki & Wellman, 2005). Mayring (2000) termed this process inductive category development. A major strength of using this analysis strategy is that it allows the researcher to ground the data directly from the views of the participants (Hsieh & Shannon, 2005). As a result, the researcher is able to develop an in-depth understanding of the phenomenon (Hsieh & Shannon, 2005).

First Cycle Coding

In this study, there were three major cycles of coding. The first cycle contained attribute, descriptive, in vivo, and process coding; while the second cycle focused on pattern coding (Saldaña, 2009). Coding can be defined as a “word or short phrase that symbolically assigns a summative, salient, essence-capturing, and/or evocative attribute for a portion of language-base or visual data” (Saldaña, 2009, p. 3). Codes are linked and aligned with different blocks of data and consist of simple and complex labels. They act as prompts or mechanisms for greater reflection behind the meaning of certain data; they serve as a heuristic—a strategy for learning, solving problems, and discovering

knowledge; and they reflect the process of data condensation (Miles, Huberman, & Saldaña, 2014).

Attribute coding is a type of grammatical method designed to identify salient information pertaining to participant characteristics, field settings, demographics, data format, time frames, and other contextual variables (Saldaña, 2009). Attribute coding is applicable in all qualitative studies, but especially those that require several settings and data sources (Saldaña, 2009). Its underlying purpose is to serve as a form of data management (Saldaña, 2009). In this study, attribute coding were applied to all three data sources: interviews, artifacts, and researcher's journal.

Descriptive coding is a type of elemental code that “assigns labels to data to summarize in a word or short phrase—most often a noun—the basic topic of a passage of qualitative data” (Miles, Huberman, & Saldaña, 2014, p. 74). Descriptive codes are particular useful in studies with several data sources (Saldaña, 2009). Descriptive codes were applied primarily to the definition of key terms or phrases within education policy. In vivo coding is a type of elemental method intended to capture words or phrases from the participants' themselves (Saldaña, 2009). In vivo coding is particularly relevant in studies where the researcher wants to emphasize and make known the participants' voices (Saldaña, 2009). The rationale for using in vivo codes in this study is to compare and contrast what participants espouse versus what they actually do.

Process coding is another a kind of elemental method focused on using gerunds (“-ing” words) to obtain “observable and conceptual action in the data” (Miles, Huberman, & Saldaña, 2014, p, 75). Process codes center on action and interface with time, how things come about, change, sequence, and implementation (Miles, Huberman,

& Saldaña, 2014). Process codes are particularly useful in studies that are interested in participant behavior, social exchanges, and consequences (Miles, Huberman, & Saldaña, 2014). Process coding is connected and germane to this study because the phenomenon focuses on how national policymakers set agendas, identify problems, formulate and adopt policies with respect to physical education in U.S. schools.

Second Cycle Coding

The second cycle of coding contained pattern codes (Miles, Huberman, & Saldaña, 2014). Pattern coding is the process of taking smaller or individual codes from the first cycle and grouping them into categories, themes, or constructs (Miles, Huberman, & Saldaña, 2014). Pattern codes are more abstract and explanatory in nature, thus serving as a meta-code (Miles, Huberman, & Saldaña, 2014). Pattern codes operate under four major principles: (a) they compress voluminous amounts of codes into smaller, compact units; (b) they encourage the researcher to conduct analysis concurrently with data collection, resulting in more pointed fieldwork; (c) they assist the investigator in developing a more conceptual and nuanced framework for understanding the phenomenon; and (d) they create the foundation for cross-case analysis by bringing to the fore common themes and directions (Miles, Huberman, & Saldaña, 2014).

Pattern codes, as a whole, consist of interconnected summarizers: categories and themes, causes and explanations, relationships among people, and theoretical constructs (Miles, Huberman, & Saldaña, 2014). Pattern codes can originate from recurring behavior, actions, norms, relationships, culture, and practical explanations (Miles, Huberman, & Saldaña, 2014). The key in pattern coding is for researchers to be open to names and be willing to alter them as needed (Miles, Huberman, & Saldaña, 2014). This

may require going back and forth between the data, reviewing the research questions, and/or putting aside outliers until more empirical data becomes available and substantiated (Miles, Huberman, & Saldaña, 2014). In this study, pattern codes came from writing in the researcher's journal, displaying networks, and filters in Microsoft excel.

Outcomes

Pursuant to pattern coding, the analytical outcome reflected a data display. Data displays are defined as “an organized, compressed assembly of information that permits conclusion drawing and action” (Miles & Huberman, 1994, p. 11). Lenger & Eppler (2007) argued that visualization methods are graphic organizers that illustrate information in a manner that leads to greater insights, better understanding, and a clearer explanation of experiences. In qualitative research, there are many benefits to using visual displays. Chief among these are that visual displays can extend textual or narrative content, reflect paradigms or causal links derived from various concepts embedded in the final analysis, communicate the research process and joint analysis, and present a researcher's meaning from multiple viewpoints (Verdinelli & Scagnoli, 2013).

In qualitative research, there are a myriad of visual display typologies. They are boxed displays, decision tree modeling, flow charts, ladder displays, matrices, metaphorical displays, modified Venn diagrams, networks, and taxonomies (Verdinelli & Scagnoli, 2013). According to William and Long (2005), the type of display chosen is contingent upon the goals of the study. Based upon the goals of this study, a network display was adopted. Please see figure 1. Networks are defined as a “collection of ‘nodes’ or points connected by lines” (Miles & Huberman, 1994, p. 94). Networks are used to

help illustrate the findings of a study or conceptual analysis, in addition to binding its theoretical elements (Verdinelli & Scagnoli, 2013). In this study, a network was used to display the themes and sub-themes, as well as the connections and relationships among them.

Trustworthiness of Study

Trustworthiness in research can be described as the accuracy, believability, and persuasiveness of the data and results. Scholars who conduct research in a trustworthy and rigorous way focus on truth value, applicability, consistency, and neutrality (Lincoln & Guba, 1985). For example, scholars want to know how accurate and believable are the findings (truth value)? How can the findings be applied to other settings (applicability)? In what way could the study be repeated and produce similar results based on the context and participants (consistency)? To what extent are the findings based on the participants and unit of analysis and not the researcher's biases, predilections, or motivations (neutrality) (Lincoln & Guba, 1985)? In this study, the constructs of credibility, transferability, dependability, and confirmability (Lincoln & Guba, 1985) were applied to achieve trustworthiness.

Credibility

In qualitative research, credibility refers to the accuracy and authenticity of the material and findings. Toma (2006) stated, "Credibility is established if participants agree with the constructions and interpretations of the research, that is, that the description of the case is accurate based on the understanding of those studied" (p. 413). Miles and Huberman (1994) viewed credibility as truth value. In other words, are the findings real and sensible? Do they accurately capture and portray the phenomenon? To answer these

questions, Lincoln and Guba (1985) offer several techniques: prolonged engagement, triangulation, negative case analysis, and member checks.

Prolonged engagement. Prolonged engagement in qualitative research is the process where the researcher devotes enough time to learning the culture of their participants, critically evaluating misinformation, assessing and reflecting on their own values, and establishing trust (Lincoln & Guba 1985). This study achieved prolonged engagement by attending the 2016 policy summit as well as 2014, 2015, and 2016 “Speak Out Day” event for SHAPE America. The 2016 policy summit was an informational meeting on how ESSA was going to impact health and physical education programs throughout the nation. The purpose of the “Speak Out Day” events was for SHAPE America and its members to advocate on Capitol Hill for quality health and physical education programs in U.S. schools. Prolonged engagement was also achieved through several trips to Washington D.C. to meet with staffers. Follow up phone calls and emails were conducted with these constituents to gain a deeper understanding of the policymaking process at the national level. In between these exchanges, the co-investigator maintained immersion of the topic through continuous reading of literature.

Although each of these steps were taken to achieve prolonged engagement, researchers need to be aware of the potential problems associated with this strategy. One such problem is “going native” (Lincoln & Guba, 1985, p. 303). That is, when researchers immerse themselves so deeply and heavily into a cultural group in which they are studying, they sometimes forget their own professional and cultural affiliations (Lincoln & Guba, 1981). When this happens, researchers experience groupthink, which is a “mode of thinking that persons engage in when concurrence-seeking becomes so

dominant in a cohesive ingroup that it tends to override realistic appraisal of alternative courses of action” (Janis, 2005, p. 186). These problems were avoided through reflexive bracketing (Ahern, 1999; Kingdon, 2005) and journal writing.

Triangulation. Maxwell (2013) described triangulation as the application of different data collection methods as a means to offset each other’s strengths and weaknesses so that valid inferences and conclusions can be promulgated from the data. The intent of triangulation in this study, aside from achieving credibility, is to foster complementarity (Green, 2007). Green (2007) posited that complementarity views triangulation not only from the perspective of corroborating the results, but also in deepening the researcher’s knowledge and understanding of the problem. According to Denzin (1978) triangulation can come in several forms: sources, methods, investigators, and theories. In this study, only sources, methods, and theories were applied. For instance, the sources came from interviews, policy artifacts, and the researcher’s journal; the methods came in the form of different protocols; and the theories centered on Lukes (2005) and Gaventa’s (1980) power theories and Anderson’s (2011) policymaking model.

Negative case analysis. Negative case analysis is the “process of revising hypotheses in hindsight” (Lincoln & Guba, 1985, p. 309). In other words, researchers refine their hypotheses over time by taking into account all available data. This means that researchers look for disconfirming evidence in the data corpus by identifying potential outliers. As these outliers become apparent and slowly omitted through data reduction, the hypotheses get refined and strengthened. This ideal match between the hypotheses and the data corpus leads to more credible results, which, in turn, promotes trustworthiness (Lincoln & Guba, 1985). Because qualitative research does not subscribe

to hypotheses, but rather research questions and themes, the latter was the target of the study. This study engaged in negative case analysis by refining the central research question and writing analytic memorandums.

Member checking. Member checking is the process where researchers defer their data and analytic insight to the participant for whom the data was extracted (Lincoln & Guba, 1985). The purpose of member checking is to add credibility to the study by asking participants to review the data for its accuracy and authenticity. Based on the feedback from the participants, the researcher makes the necessary adjustments. Other benefits of member checking include: (a) it helps researchers determine the participants' intentions; (b) it affords participants the opportunity to correct any errors or distortions; (c) it allows participants to share more information; (d) it holds participants accountable because they are notified as being on record; (e) it helps the researcher summarize the data; and (f) it gives participants a final opportunity to clarify certain points (Lincoln & Guba, 1985). In this study, member checking was used with one telephone interview.

Transferability

In qualitative research, naturalists attempt to achieve applicability through transferability. Lincoln and Guba (1985) described transferability as the process where researchers try to provide a rich, thick description about the events, processes, and boundaries surrounding a case. The goal of transferability in qualitative research is to provide enough detail where fellow readers (researchers, practitioners) can determine, through their own judgment, the degree of applicability in other settings and contexts (Lincoln & Guba, 1985). Sometimes this is achieved in qualitative research, and other times it is not. While this may or may not be important, the greater question is what

constitutes “thick description” in qualitative research? The answer to this question, although difficult to articulate, serves as the basis of transferability in qualitative research.

In this study, “thick description” is explained through the work of Ponterotto (2006), who created a working definition based on canons ascribed by Ryle (1971), Geertz (1973), Denzin (1989), Hollaway (1997), and Schwandt (2001). His definition enumerates five central tenets: (a) thick description means that researchers report and internalize what social manifestations occur within a certain setting; (b) thick description means that the observed social behaviors are communicated with authenticity, by taking into consideration the social context, and ascribing purpose and intentionality to those behaviors; (c) thick description reflects the thoughts and feelings of the participants and the intricacies associated with them; (d) thick description translates into heavy interpretation, which leads to a strata of dense meaning of the research results for scholars, participants, and the research community; and (e) dense, heavy results create a mood and sentiment that allows readers to situate themselves mentally and emotionally within the research setting (Ponterotto, 2006).

This study achieved thick description according to the guidelines mentioned above through the triangulation of different data sources, methods, and theories. It also occurred in the fifth cycle of coding where the data had to meet the inclusion-exclusion criteria for rich, thick description based on definitions of depth, detail, vividness, nuance, and richness established by Rubin and Rubin (2012). For those data segments that did not meet the criteria, they were omitted. Underscoring this process of achieving rich, thick description was the concept of verisimilitude. That is, data is displayed in a way that is

lucid, thought provoking, and reflects the complexity of life and the world as we know it (Creswell, 2013). Please see chapter four—the results as the participants’ responses illustrate this concept.

Dependability

In qualitative research, dependability is defined through the inquiry process (Lincoln and Guba, 1985). To clarify, scholars evaluate the dependability of a qualitative study by culling through the researcher’s decisions for how he/she conceptualized, crafted, and implemented the study. They specifically look at the decisions made behind the analytical frameworks, research questions, strategies of inquiry, data collection techniques, instruments, data analysis procedures, and standards for reporting the results. In addition, scholars view the dependability of a study by how well the investigator responds to instability, phenomenological insights, and research design modifications (Lincoln & Guba, 1985). Collectively, these points serve as the criteria for determining the “dependability” of a qualitative research study.

This study achieved dependability by administering two audit trails. The purpose of conducting audit trails is to chronicle the theoretical, methodological, and analytical decisions researchers make about their study (Koch, 1994). The aim of doing this is to leave a record for future researchers so they can understand the decisions, logic, and conceptual framework of the original investigator (Sandelowski, 1986). The first audit trail pertained to the recruitment database. This database encompassed nine spreadsheets of records with individuals whom the co-investigator came in contact and/or collected data. The second audit trail occurred in the researcher’s journal. Over a 12 month period

(September, 2015 to August 2016), 32 journal entries were written. The journal entries contained various topics as experienced by the co-investigator in the field.

Confirmability

According to Lincoln and Guba (1985), confirmability is about validating the data to ensure the results, findings, and interpretations are properly substantiated and warranted. Shenton (2004) added that confirmability is about grounding the data in the participants' experiences and viewpoints, not the researcher's biases or predilections. On the other hand, Miles and Huberman (1994) assessed confirmability by how much a researcher is willing to disclose his/her biases and preferences. Regardless, confirmability is focused on the attributes associated with data, as opposed to, dependability where the emphasis is placed on the inquiry process itself (Lincoln & Guba, 1985).

Shenton (2004) offered several other strategies for achieving confirmability. They include: (a) the researcher formulates and discloses his beliefs and assumptions; (b) the researcher acknowledges methodological drawbacks of the study; (c) the researcher describes, in detail, the methods used to describe the study so that the findings can be analyzed and peer reviewed; and (d) the researcher uses data displays as a means to illustrate the audit trail. This study achieved confirmability through a codebook, network displays (figure 1), and the researcher's journal. The codebook served as an audit trail, the network display illustrated the themes and subthemes, and the research journal disclosed the co-investigator's biases and beliefs about the topic being studied.

The Role of the Researcher

A 21st century scholar is someone who critically thinks about their subject, approaches it in an inquisitive way, attempts to master it, and has the training and moral

fortitude to contribute intellectually to the greater discourse and betterment of humanity (Isaac, 2012). To achieve this, scholars discover new knowledge, integrate new knowledge, apply new knowledge, and teach new and existing knowledge to others (Glassick, Huber, & Maeroff, 1997). Scholars hold themselves to the highest standards of scholarly work by setting clear goals, adequately preparing, designing appropriate methods, establishing significant results, and critically reflecting (Glassick, Huber, & Maeroff, 1997). As an academic, I subscribe to all of these tenets of scholarly work.

My role as a researcher stems from my personality. As a person, I am analytical, methodical, reflective, and persistent. Therefore, I approach my research from the same perspective. When conducting research, I am constantly analyzing theories, methods, and propositions from multiple perspectives. I ask and attempt to answer internally the following questions: What are the gaps in the literature? How will this work extend, refine, or refute other scholars' work? What is the significance of this study? What implications does this work have for research, policy, and practice? These questions and others serve as my analytical framework when reading and conducting research. This approach originates from my commitment to academic excellence, educational background, and socio-cultural environment.

Aside from being analytical, I am also methodical when conducting research. This is apparent by how I follow the standards for reporting empirical social science research. These standards include: problem formulation, design and logic of the study, sources of evidence, measurement and classification, analysis and interpretation, generalization, ethics in reporting, title, abstract, and heading (American Educational Research Association, 2006). Subsumed under these standards are two principles that guide

research: warrants and transparency (American Educational Research Association, 2006). Warrants provide enough evidence to substantiate the results; while transparency is about communicating in a forthright manner the intent behind the inquiry and the process that led to its interest, topic, problem, and research questions (American Educational Research Association, 2006).

Contrasting these characteristics is that of reflection. When conducting research, I always reflect upon what I say and how I say it. This includes verbally and in writing. This is an important characteristic because much of a researcher's reputation is evaluated by their integrity; to wit, their moral character and reasoning. One area I pride myself in is trying to conduct research at the highest level possible. This includes double checking the accuracy of quotes, scrutinizing my paraphrasing of other scholars' work, citing properly, using the American Psychological Association (APA) manual, conducting audit trails, and engaging in reflexive bracketing—just to name a few.

Perseverance is the moral fortitude to achieve things even in the face of adversity. As a researcher, I demonstrate perseverance by accepting constructive feedback and working hard to achieve my goals. Conducting rigorous research—whether it be quantitative, qualitative, or mixed methods—requires mental toughness and persistence. In life, there is no easy way to success; it just requires a lot of hard work. Becoming a scholar and researcher is no different. I attribute my perseverance to my passion for learning and willingness to become an expert in educational research.

Ethical Considerations

As with all empirical studies, there will be ethical issues that will need to be addressed during the research process. Ethics can be viewed from the perspective of

“what is right, good, and virtuous” (Israel & Hay, 2006, p. 1). This viewpoint extends to several ethical practices, such as informed consent, confidentiality, nonmaleficence, beneficence, research relationships, integrity, and ethics of care. Each of these areas will be discussed, in detail, as well as how they were applied in the study.

Informed Consent

Israel and Hay (2006) argued that informed consent involves two interrelated activities. First, participants need to understand the scope and variables involved in the study. Second, participants need to volunteer for the study on their own accord (Israel & Hay, 2006). This study addressed informed consent by first obtaining approval from the Institutional Review Board (IRB) of Rowan University. The IRB is an ad hoc committee that oversees the ethical practices of research studies completed at the university by faculty, staff, and students. Next, informed consent occurred with the participants. For example, the participants were given a consent form to sign, along with a cover letter detailing the purpose, risks, benefits, extent of confidentiality, and freedom to withdraw. All the participants ($n = 8$) completed the informed consent forms and submitted them via email. Please see the appendix A for a copy of the consent form.

Confidentiality

Confidentiality is the manner in which human subjects are protected through anonymity (Hesse-Bader & Leavy, 2011). Israel and Hay (2006) recommended two ways to protect confidentiality. They include: methods—data collection, analysis, dissemination, and legal responsibilities and consequences. With regards to methods, there are many practices that can be used. Some of these include: (a) avoid recording identifiable information, such as names, dates, and places; (b) record identifiable

information but then remove it at a later date; (c) advise participants not to disclose their personal information throughout the duration of the study; (d) participate in data alteration, which involves modifying the data in a way that protects the participants' identities, yet maintains the integrity and fidelity of the argument (Israel & Hay, 2006). As for legal protections, this can occur through statutory requirements (Israel & Hay, 2006). For instance, the U.S. Department of Health and Human Services and the Department of Justice can provide confidentiality certificates.

Confidentiality was achieved in this study through the wishes of the participants and proper data storage. Because staffers from 114th - 115th Congress were interviewed, some participants did not want their identities and positions on physical education and public policies made public. For those that did not want their identities and positions disclosed, a spreadsheet of pseudo names were established. These names were decided by the participants prior to the interview and indicated on the consent forms. The spreadsheet of pseudo names was stored on a privately owned home computer, server, and email. Semi-structured interviews were collected using a private email address and stored in Microsoft One Drive. Information collected from policy artifacts and the researcher's journal was also stored in Microsoft One Drive. Microsoft One Drive was password protected and the co-investigator only had access to network. Five years after publication of this study, all data will be destroyed.

Nonmaleficence

The principle of nonmaleficence can be described as the act by which researchers avoid, to the greatest extent possible, harm or discomfort done to participants (Israel & Hay, 2006). It comes from the Latin phrase: *primum non nocere*, or "first, do no harm"

(Morrison, 2011, p. 48). The Canadian Institutes of Health Research (2014) suggested that harm can come in several forms: social, behavioral, psychological, physical, and/or economic. In most social science research studies, the idea of harm tends to emanate not from physical duress, but rather mental discomfort, stress, anxiety, privacy breaches, and social marginalization (Israel & Hay, 2006).

This study adhered to the principle of nonmaleficence in two ways. First, the participants were given the option of how they wanted to respond to the interview questions. This meant they could answer the questions and engage with the interviewer through a face-to-face meeting, telephone conversation, or email exchange. They were permitted any and all formats based on their preference and comfort level. Second, nonmaleficence was accomplished by reflecting deeply on the level of critique applied to the phenomenon. This critique extends to how various dimensions of power (Lukes, 2005; Gaventa, 1980) has been exercised by the U.S. government, either explicitly or implicitly, against the health and physical education profession. The worst thing that could come as a result of this study is to have critics, such as New Jersey's Governor Chris Christie, use this study as a means to further marginalize and relegate the profession. He is already on record saying that, "Math and science teachers should be paid more than gym teachers" (Manahan, 2011, para. 2).

Beneficence

The principle of beneficence stems from the position to "do good" (Gostin, 1991, p. 191). It is associated with words such as "altruism, humanity, unconditional love and non-obligatory optional moral ideals" (Mawere, 2012, para. 3). According to Hosteler (2005), good educational research extends beyond quality methodologies and sound

procedures; rather, it is about establishing results that lead to the well-being of society. This study adhered to the principle of beneficence by putting forth recommendations in the areas of policy, practice, and research for the health and physical education profession. One of the goals of this study was to assist policymakers and educational leaders with acquiring the knowledge and understanding needed to develop sound policies that lead to the enhancement of physical literacy among school-aged children.

Research Relationships, Integrity, and Ethics of Care

Part of becoming a researcher involves developing and managing relationships. These relationships include by way of example and not of limitation: research participants, work colleagues, and the community of scholars for which the researcher is affiliated. The research participants were senators and representatives from the 114-115th Congress who sat on the Health, Education, Labor, and Pensions Committee (HELP) ($n = 21$), and the Subcommittee on Early Childhood, Elementary, and Secondary Education ($n = 14$). Additional participants were national policymakers ($n = 3$), staffers ($n = 6$), and legislative liaisons ($n = 2$). Work colleagues ($n = 7$) were members of the Laura Donovan Elementary School, which is located in Freehold Township, New Jersey. The community of scholars were professors of health and physical education at the post-secondary level, who are actively engaged in research and publishing. Throughout this study, the co-investigator cultivated relationships with all three constituents.

In all research, academicians are expected to conduct themselves at the highest level possible. This includes demonstrating academic integrity and knowing what constitutes research misconduct. Academic integrity is defined as the “commitment, even in the face of adversity, to five fundamental values: honesty, trust, fairness, respect, and

responsibility” (“Center of Academic Integrity,” 1999, p. 4). Within each of these values are certain ethical practices that inform research misconduct. They are fabrication, falsification, and plagiarism, to name a few. Fabrication is when researchers invent data and make it public in some way (Israel & Hay, 2006). Falsification is when researchers alter or delete certain forms of data in order to illustrate a certain perspective (Israel & Hay, 2006). Plagiarism is when researchers do not give credit to previous scholars’ ideas, procedures, or findings (Israel & Hay, 2006). When taken together, these ethical behaviors constitute the more serious and egregious forms of research misconduct.

This study followed the norms and shared practices of developing and maintaining research relationships. It abided by the ethical practices of integrity and care. This was accomplished by reading original works, paraphrasing correctly and accurately, providing credit to authors for their ideas, writing in a scholarly manner, cross referencing sources, assigning quotes and page numbers where necessary, maintaining an audit trail through an electronic database, conducting member checks where appropriate, and engaging in the literature and data. In addition to these measures, the co-investigator maintained an attitude and perspective of professionalism knowing that this study may, at some point, be used by other scholars in the field of physical education. Therefore, it was incumbent upon the co-investigator to ensure that these ideas were grounded in the values of academic integrity.

Conclusion

The purpose of this chapter was to discuss the research methodology used to explore the phenomenon in this study. This chapter reviewed the purpose statement, research questions, and provided a rationale for and the assumptions of qualitative

research. The strategy of inquiry used to study the phenomenon was an exploratory case study design (Yin, 2014). Other areas addressed in this chapter were the context of the study, participants, sampling procedures, recruitment process, data collection methods, instrument protocols, data analysis strategy, coding cycles, trustworthiness, role of the researcher, and ethical considerations. Chapter four will focus on the results; that is, the themes discovered during the data collection and analysis phases.

Chapter 4

Results

The purpose of this chapter is to present the findings in relation to the research questions and phenomenon being explored in this study. The results are displayed through three major themes: a separation of powers, the great equalizer, and the political curtain. The first theme contains two sub-themes: federal education law as defined in ESEA and ESSA; and the federal government's role in K-12 education, as it relates to standards, curriculum, assessment, subject-related policy decisions, program requirements, subject emphasis, and specific program resource allocations to the states and localities. The second theme focuses on the federal government's responsibilities in K-12 education, which involves providing equal access, opportunity, and funding. The third and final theme explains those factors that influenced members of Congress policy decisions to defer physical education to the state and local levels, and to provide equal access, opportunity, and funding to K-12 schools. Chapter four concludes with a synopsis of the results and a preview of chapter five.

Theme I: A Separation of Powers

Federal Education Law

According to the 10th Amendment of the U.S. Constitution, “the powers not delegated to the United States by the Constitution, nor prohibited by it to the States, are reserved to the States respectively, or to the people” (U.S. Constitution Amendment X, 1789). Public education, in general and more specifically K-12 physical education, falls under the 10th Amendment. Historically, education has been a state and local issue. However, in 1965, President Johnson signed into law the Elementary and Secondary

Education Act (ESEA). The purpose of this law was “to strengthen and improve educational quality and educational opportunities in the Nation's elementary and secondary schools” (ESEA, 1965, p. 27). Moreover, it was intended to provide federal grants and equal educational opportunities to students living in low socio-economic communities (Thomas & Brady, 2005).

Despite federal involvement, ESEA of 1965 prohibited the federal government from intervening in matters pertaining to curriculum, program requirements, personnel decisions, and/or education materials. Section 604 reads:

Nothing contained in this Act shall be construed to authorize any department, agency, officer, or employee of the United States to exercise any direction, supervision, or control over the curriculum, program of instruction, administration, or personnel of any educational institution or school system, or over the selection of library resources, textbooks, or other printed or published instructional materials by any educational institution or school system (p. 57).

The purpose of including this provision was to ensure the separation of roles and responsibilities among the federal, state, and local levels with respect to K-12 education.

Since this time, ESEA has been reauthorized several times with the latest being the Every Student Succeeds Act (ESSA) of 2015. Prior to ESSA, President Bush signed into law the No Child Left Behind Act of 2001. The major goal in this reauthorization was to reduce disparities in student achievement through accountability, flexibility, and choice (NCLB, 2002). This reauthorization significantly increased the federal government’s role in K-12 public education by establishing core subjects, adequate yearly progress, highly qualified teacher status, high stakes testing and accountability

requirements, and specific funding mechanisms and sanctions for local educational agencies.

Under Title IX of NCLB, core subjects included: “English, reading or language arts, mathematics, science, foreign language, civics and government, economics, art, history, and geography” (p. 1958). Health and physical education was not included on this list of core subjects. Because health and physical education lacked a predominant role in NCLB, the subject was often marginalized resulting in financial cuts throughout the nation (SHAPE America, 2016b).

Since the passage of NCLB, parents, teachers, educational leaders, and policymakers have been working to reduce the federal government’s role in K-12 education and restore much of the authority and responsibility to the states and local levels. As Representative Rokita (R-IN) said in a press release on December 2, 2015 after the House of Representatives passed ESSA: “This bill [ESSA] empowers states and ends federally mandated, unproductive, high stakes testing, the core of ‘No Child Left Behind.’” Senator Hatch (R-UT) reinforced this point in a press release on December 2, 2015 when he stated:

For years, Utahns have been asking for the freedom to choose their own standards, their own assessments, and their own accountability systems when educating their children. This bill [ESSA] empowers states to establish systems that work best for local schools districts, families, and—most importantly—students.

However, Brian Moulton, a staffer, who worked with a member in Congress on ESSA indicated in an interview on January 5, 2016 that there were philosophical differences

between parties and chambers regarding the federal government's responsibility in K-12 education. He replied:

During the committee's consideration of ESEA reauthorization, there was significant tension between two general positions – the Democratic members desire to maintain a strong federal role in K-12 education to ensure that the most disadvantaged students were not left behind, and the Republican members desire to revert the greatest amount of authority to state and local governments and minimize the federal footprint in this area. This same tension also existed between the House and Senate reauthorization measures. ESSA struck a balance between these two approaches, by maintaining significant federal accountability requirements while granting states greater control over what metrics and timelines were involved.

In the Conference Committee, these issues were resolved with bipartisan and bicameral support and ESSA was signed into law by President Obama on December 10, 2015. For K-12 health and physical education, ESSA represented the greatest federal support for health and physical education in its history. ESSA included health and physical education as part of its definition of a well-rounded education, placing it at an even level with other subject areas in terms of value and importance (SHAPE America, 2016b). Karen Johnson, an advocacy consultant for SHAPE America said it best, "It was ground breaking and an important first step toward elevated health and physical education in a student's school day." A well-rounded education was defined in ESSA as follows:

courses, activities, and programming in subjects such as English, reading or language arts, writing, science, technology, engineering, mathematics, foreign

languages, civics and government, economics, arts, history, geography, computer science, music, career and technical education, health, physical education, and any other subject, as determined by the State or local educational agency, with the purpose of providing all students access to an enriched curriculum and educational experience. (p. 2099)

In addition, ESSA authorized, for the first time, Title I, II, and IV funding to be used by local school districts for health and physical education programs (SHAPE America, 2016b).

Title I focuses on improving the academic achievement of the disadvantaged (United States Department of Education [USDOE], 2004). The purpose of this title is to provide financial resources to local education agencies with high concentrations of low socio-economic children so they can receive a high quality education and meet the rigorous state academic achievement standards (USDOE, 2004; SHAPE, 2016b).

Title II focuses on preparing, training, and recruiting high quality teachers and principals (USDOE, 2004). The aim of this title is to provide financial resources to local educational agencies for the professional enhancement of principals, teachers, and other school-related personnel (SHAPE America, 2016). Title IV pertains to 21st century schools (USDOE, 2004). Part “A” of this title addresses safe and drug free schools and communities (USDOE, 2004). The goal of this title is to provide federal assistance to local schools in order to prevent illegal drug use; foster activities to support academic learning, and bring parents and communities together (USDOE, 2004). Included in part of A of Title IV are health and physical education programs where federal funding is distributed in the form of block grants (SHAPE America, 2016b).

The Role of the Federal Government

Despite this level of federal support, Congress has a “sense” as to its role in K-12 education. In ESSA, Congress made it clear that, “It is the sense of the Congress that States and local educational agencies retain the rights and responsibilities of determining educational curriculum, programs of instruction, and assessments for elementary and secondary education” (ESSA, p. 2122). Furthermore, section 8527b of ESSA prohibits the federal government or the Secretary of Education from endorsing any curriculum. It stated:

Notwithstanding any other provision of Federal law, no funds provided to the Department under this Act may be used by the Department, whether through a grant, contract, or cooperative agreement, to endorse, approve, develop, require, or sanction any curriculum, including any curriculum aligned to the Common Core State Standards developed under the Common Core State Standards Initiative or any other academic standards common to a significant number of States, designed to be used in an elementary school or secondary school. (p. 2113-2114)

This view was supported by the participants. In an interview with Staffer X (pseudonym name), a staffer who worked on the reauthorization of ESEA, stated on January 10, 2016 that:

Our position is that these are decisions [physical education] best left to states to figure out, how to balance their curriculum and any attendance or graduation requirements. We specifically rejected efforts to impose federal mandates on

physical education requirements on the states in the recent reauthorization of the Elementary and Secondary Education Act, the Every Student Succeeds Act.

Jonathan Anderson (pseudonym name), a legislative assistant who worked on the reauthorization of ESEA, shared a similar perspective. In an interview on February 8, 2016, he stated:

It goes without saying that we need to have a strong, healthy populace that is capable of meeting the needs of this century—which means we must decrease obesity rates among our youth population. Higher obesity rates increase health care costs, shrink life expectancy, affect our capacity to sustain a workforce that is capable of meeting our great manufacturing needs, and limits the percentage of men and women who are eligible to serve in the armed forces. This is not only a health issue, but a national security issue as well. However, the solution to our nation’s great obesity problem is not a Congressionally-mandated Physical Education (P.E.) prescription pill to be imposed on states and school districts.”

Unanimously, the participants felt that health and physical education is primarily a state and local issue.

Alicia Kielmovitch, an educational policy fellow, was asked on January 7, 2016 to what extent, if any, should members of Congress play in strengthening the policy language and improving the consistency and transparency by which all levels of government interact and respond to physical education at the K-12 level. She responded, “Senator Hatch (R-UT) believes that state and local school districts are in a better position than the federal government to advocate for policy change and language around

this topic.” When asked about cutbacks to physical education in favor of core classes as a result of increased emphasis on standardized testing, she stated:

Senator Hatch believes that all subjects warrant time in the school day, especially those with scientific evidence that demonstrate effectiveness, worth, and value to a student’s education. Again, it should be up to states and local districts to determine educational priorities.

Andres Perez, an educational policy fellow, was asked on December 7, 2015 what role, if any, should the federal government play in addressing the childhood obesity epidemic? He shared:

The federal government should not have a hand in specific curriculum decisions. If states want to invest in health and physical education, they may. The federal government should provide funding research [to address childhood obesity] that can support states, but not mandate [physical education] courses.

Harvey Sparks, a legislative staffer who worked with a member of Congress on the reauthorization ESEA, was asked his views on the PHYSICAL Act. In an interview on December 11, 2015, he indicated:

Again, while the intent is good [benefits of the PHYSICAL ACT], I do not think that the federal government should be in the role of mandating what classes students take. States have a vested interest in the health of their students. These issues are important but they should be addressed at the state and local level.

Karen Johnson, an advocacy consultant for SHAPE America was asked in an interview on May 31, 2016 what role, if any, should members of Congress play in ensuring that students receive daily physical education in U.S. schools? She responded, “Education is a

state and local issue. Congress should not dictate the amount of time a student participates in physical education. [However, they can provide the]...acknowledgement that physical education plays a role in academic achievement.” Carly Wright, Senior Manager of Advocacy for SHAPE America was asked the same question on July 14, 2016. She reiterated:

Daily physical education or a minutes per week requirement for physical education is unlikely to be required by the federal government. The majority of these type of mandates are addressed at the state level, as education is a local level policy priority and decision...It is...up to us to push the importance of required daily physical education on the state and local level.

According to the data, it is clear that health and physical education remains a state and local issue. However, the federal government does play a role in K-12 education, and specifically physical education. The answer lies in equal access, opportunity, and funding, which speaks to the second theme of this study.

Theme II: The Great Equalizer

When President Johnson signed ESEA into law in 1965, one of his goals of the “Great Society” was to win the “War on Poverty.” He felt this could be best achieved through quality education, especially at the primary and secondary levels. In signing ESEA into law on April 11, 1965, President Johnson said:

As a son of a tenant farmer, I know that education is the only valid passport from poverty. As President of the United States, I believe deeply no law I have signed or will ever sign means more to the future of America. (para 17-18)

President Obama, in a speech prior to signing ESSA into law on December 10, 2015 reinforced this point when he remarked:

And finally, this bill [ESSA] upholds the core value that animated the original Elementary and Secondary Education Act signed by President Lyndon Johnson—the value that says education, the key to economic opportunity, is a civil right.

Several members of the 114th-115th Congress echoed similar sentiments.

Representative Scott (D-VA), in a floor statement on December 2, 2015 to congressional colleagues, the American public, and the residents of Virginia opined:

Congress acknowledged that the right to an education is a civil right that knows no State boundaries and that the Federal Government has a role to ensure that all States are fulfilling their promises for all of America's children.

Representative Curbelo (R-FL) made a floor speech on December 2, 2015 to congressional colleagues, the American public, and residents of Florida where he verbalized,

This agreement [ESSA] allows us to capture the spirit of that last ESEA reauthorization: that education is the great civil rights issue of our time. Now every child in this country can learn, no matter the color of their skin, the zip code they live in, the language their parents speak, or their income level.

Senator Bennet (D-CO) offered a similar perspective in a floor speech on November 18, 2015. He stated:

And, I can appreciate that we should have a debate about what level of government should do what, but I believe that there is no doubt that we have a vital national interest in making sure that education liberates all children to fulfill their potential.

Education, as a civil right, was supported by Senate and House Republicans and Democrats in ESSA.

Since national policymakers believe that education is a civil right, they feel it is the federal government's responsibility to K-12 education to be the great equalizer. That is, to provide equal educational access, opportunity, and funding for all Americans, especially those living in poverty. In this study, access was defined as the ability, right, and/or permission to use, borrow, or acquire educational programs and services in U.S. public schools. Opportunity was described as a set of conditions that allows and encourages equal educational programs and services to exist in U.S. public schools. Funding was viewed as the fair distribution of resources from the federal government to states in the form of block grants. The ensuing statements made by participants in this study substantiate this perspective.

Equal Access

Representative Takano (D-CA) sent a letter on November 18, 2015 to Chairman Kline (R-MN), Chairman Alexander (R-TN), Ranking Member Scott (D-VA), and Ranking Member Murray (D-WA), as well as other conference conferees. In his letter, he urged them to consider several principles when reconciling the House of Representatives and Senate versions of ESSA. Chief among them was the first principle: "Ensuring our K-12 public education system is providing equitable access to quality education and

resources for all students, including the most disadvantaged.” By “access,” he was referring to resource equity, English learners, students’ with disabilities, the whole child, and safe and welcoming schools.

On November 17, 2015, Congresswoman Bonamici (D-OR) mentioned to the Conference committee her feelings and views toward ESSA. She stated, “Since coming to Congress, I’ve worked to strengthen our nation’s education policies because our economic future depends on providing students equal access to quality public education.” A day later, Senator Murray (D-WA) offered a remark prior to the Senate voting to move to conference with the House of Representatives to resolve differences within ESSA. She indicated:

M. President, since February of this year, Chairman Alexander and I have worked together on a bipartisan education bill that would...includ[e] federal guardrails to ensure all students have access to a quality education.

Carly Wright, Senior Manager of Advocacy for SHAPE America, stated in an interview on July 14, 2016: “The goal of federal education legislation is to reduce disparities and to level the playing field for all students to ensure that every child has access to a high-quality education.” As evidenced by the data, the federal government believes that one of its primary roles in K-12 education is to provide equal access to educational programs and services for all U.S. children.

Equal Opportunity

In addition to equal access, several members of Congress see the role of the federal government in K-12 education as providing equal educational opportunity to all U.S. children. On November 20, 2015, Senator Warren (D-MA) made a floor speech to

congressional colleagues, the American public, and the residents of Massachusetts. She indicated:

Half a century ago, this country made a promise to support public education fully and fairly enough to create real opportunities; not just for some of our children, but for all of our children. It is time to live up to that promise.

Representative Bonamici (D-OR) reiterated this notion in a floor speech to congressional colleagues, the American public, and the residents of Oregon. On December 2, 2015, she stated:

The law [ESSA] we are voting on today is true to the legacy of the original Elementary and Secondary Education Act and its goal of closing achievement gaps and promoting equitable opportunities and outcomes for students.

On the same day, Representative Fudge (D-OH) released a press statement following the House of Representatives passage of ESSA. She said, “Throughout this process, I have emphasized the final ESEA reauthorization must provide equal opportunities for all children regardless of race, ethnicity, income, language, or disability.” Similarly, Senator Baldwin (D-WI) stated in a press release on December 9, 2015 to members of Congress, the American public, and residents of Wisconsin the following:

Today, we put politics aside in order to fulfill the fifty-year-old promise of the Elementary and Secondary Education Act that says that every child, no matter what circumstances they are born into in this great country, has the opportunity to achieve.

Interestingly enough, the view that it is the federal government's responsibility to provide equal educational opportunities to all students was primarily a Democratic perspective.

Based on all the data collected, few Republicans shared this perspective.

Equal Funding

Aside from providing equal educational access and opportunity, the federal government also strives to provide equal funding. Senator Warren (D-OK) captured this perspective in a floor speech on December 8, 2015 to the President of the U.S., members of Congress, and the residents of Oklahoma regarding her views on ESSA. She proclaimed:

That is why we have a federal education law [referring to ESSA] in the first place, to ensure that when the federal government gives money to buy a good education for kids, that states have to use that money to support all of our kids-especially kids who need those resources the most.

Senator Burr (D-NC) sponsored language in ESSA that addresses inequities in federal education funding. In a press release on December 9, 2016, he stated:

Making sure that low-income children regardless of where they live get their fair share of funding could be the education civil rights issue of our generation.

Congress has the obligation to properly fund schools that need this funding the most.

It is clear from these comments, as well as statements made from other members of the Congress, that federal funding for K-12 educational programs is intended to be directed to those schools and communities that are most in need.

Brian Moulton, a counsel for Senator Baldwin (D-WI) commented on the federal government's role in funding physical education in U.S. schools. In an interview on January 5, 2016, he said:

ESEA affords Congress the opportunity to incentivize states and localities to serve all of their students as well as possible and utilize programs and practices with strong evidence of success. Among those proven practices is access to quality physical education and Congress can incentivize it through grant funding as well as technical assistance.

Carly Wright, Senior Manager of Advocacy for SHAPE America reinforced this point in an interview on July 14, 2016. She stated, "Congress can make physical education an allowable use of federal education funding which they have done under ESSA." Karen Johnson, a policy advocate for SHAPE shared a similar perspective. In an interview on May 31, 2016, she said: "What Congress can do is make it easier for schools and school districts to provide physical education – allowable use of federal funds."

These points are supported by section 4108c-ii of ESSA, Activities to Support Safe and Healthy Students, where the following language was written and signed into law:

Subject to section 4106(f), each local educational agency, or consortium of such agencies, that receives an allocation under section 4105 (a) shall use a portion of such funds to develop, implement, and evaluate comprehensive programs and activities that—(ii) support a healthy, active lifestyle, including nutritional education and regular, structured physical education activities and programs, that may address chronic disease management with instruction led by school nurses,

nurse practitioners, or other appropriate specialists or professionals to help maintain the well being of students. (p. 1979)

However, the challenge going forward will be securing funding for health and physical education from the federal government. Karen Johnson, Advocacy Consultant for SHAPE America stated in an interview on May 31, 2016 that, “Securing funding for the subjects through the various titles will be the next and on-going step.” In ESSA, Congress authorized 1.5 billion to be spent on Title IV, Part A of the Student Support and Academic Enrichments Grants program (SHAPE America, 2016c). Yet, President Obama’s 2017 fiscal proposal only includes 500 million, which equates to less than one third of the authorized amount (SHAPE America, 2016c).

On March 17, 2016, over 75 national and regional associations across America including SHAPE America wrote a letter to Senator Blunt (R-MO), Chairman of the Subcommittee on Labor for Health and Human Services, Education, and Related Services (HHS) and Senator Murray (D-WA), Ranking Member of the Subcommittee on Labor for HHS. In this letter, they requested that the subcommittee properly fund Student Support and Academic Enrichment Grants (SSAEG). They indicated: “We make this request because we believe that the President’s FY17 budget request is grossly inadequate.” They go on to say, “This [referring to the President’s proposed budget] would have devastating consequences in all school districts.” Furthermore, they argued that,

Beyond the financial challenges of such a low funding level, the amount proposed in the President’s budget for SSAEG will not allow states and districts to make meaningful investments in a range of programs that, when combined, improve conditions for learning and help students receive a well-rounded education.

As President Obama’s proposal moves through the budgetary process, it will be important to see how much federal money is distributed to states and local districts for SSAEG.

Theme III: The Political Curtain

The third and final theme explicates those factors that influenced members of Congress to establish a separation of powers and to serve as the great equalizer in K-12 education. The term “political curtain” was used denote those factors that are often hidden or not apparent in policymaking process. These factors included: problems with NCLB, education as a civil right, ending federal control, empowering state and local levels, and bipartisan and bicameral support for ESSA. Other factors reflected leadership, constituents, lobbyists/interest groups, professional experiences, personal experiences, politics and political ideology, priorities, values, staff involvement, inclusion of smaller bills, and the authoring of provisions. Collectively, these factors influenced how members of Congress identified public policy problems, set agendas, formulated policy, and adopted policy with respect to ESSA.

Problems of NCLB

According to the data, although NCLB had good intentions, there were several prevailing problems with this piece of legislation. Chief among these was the one-size-fits-all model, an overemphasis on high stakes testing and accountability, unachievable proficiency goals, a top-down punitive approach to educational reform, and cutbacks to physical education programs. Representative Bonamici (D-OR) made a floor speech on December 2, 2015 to President Obama, congressional colleagues, residents of Oregon, and the American public. She acknowledged:

It was a well-intentioned law [NCLB]. Its goal was to create more equitable education for children across the country but it resulted in too much emphasis on one-size-fits-all mandates and interventions. And, the adequate yearly progress requirements caused too much focus on high stakes testing. Change is long overdue.

Senator Murkowski (R-AK) in a floor speech on December 9, 2015 stated: “What was wrong with NCLB was that it imposed one-size-fits-all solutions from more than 4,000 miles away.” Senator Collins (R-ME) added to this point in her floor speech on December 9, 2015. She replied:

The current system of unattainable standards and a patchwork of State waivers has led to confusion about Federal requirements. High-stakes testing and unrealistic 100 percent proficiency goals do not raise aspirations; instead, they dispirit those who are committed to a high-quality education for our students.

Carly Wright, Senior Manager of Advocacy for SHAPE America, commented on the cutbacks to physical education instructional time as a result of the passage of NCLB. In an interview on July 14, 2016, she stated: “The strong focus on standardized tests and adequate yearly progress put incredible pressure on schools to teach to the tests rather than focus on developing and supporting the whole child.” As evident by the data, NCLB caused a number of different problems for U.S. public schools.

Education: A Civil Right

In this study, education was viewed as a civil right regardless of an individual’s race, religion, sexual orientation, nationality, disability, and/or socio-economic status.

The participants felt that it was the responsibility of the Congress to ensure that states and

local school districts afford a free and appropriate education to all American children. Representative B. Scott (D-VA) made a floor speech to the Speaker of the House of Representatives, congressional colleagues, residents of Virginia, and the American public regarding his thoughts and views on Conference Report S. 1177. On December 2, 2015, he stated:

Simply put, Congress acknowledged that the right to an education is a civil right that knows no State boundaries and that the Federal Government has a role to ensure that all States are fulfilling their promises for all of America's children.

In a floor speech on December 2, 2015, Representative Curbelo (R-FL) acknowledged:

This agreement [ESSA] allows us to capture the spirit of that last ESEA reauthorization: that education is the great civil rights issue of our time. Now every child in this country can learn, no matter the color of their skin, the zip code they live in, the language their parents speak, or their income level.

Senator Murphy (D-CT) in a press release on December 9, 2015 stated: “Every child in Connecticut and across the country has the right to a first-rate education, regardless of their race, income, or learning ability.” In summary, the participants regard education as a civil right and believe it is the responsibility of the federal government to uphold this inalienable right.

Ending Federal Control

The data suggested that the federal government over-extended its authority in NCLB. The participants argued that the federal government needs to end its top down control of the education system and return authority and responsibility to the states and locales. The subjects believed ESSA achieved this goal. Chairman Kline (R-MN) offered

his thoughts and views following the Conference Committee meeting on the Elementary and Secondary Education Act. In a committee statement on November 18, 2015, he stated:

First, the framework [ESSA] reduces the federal role in K-12 education. One-size-fits-all federal policies dictating accountability and school improvement are eliminated. Dozens of ineffective and duplicative programs are repealed. New and unprecedented restrictions are placed on the secretary's authority. This proposal will significantly reduce the size of the federal footprint in our nation's schools.

Senator Robert (R-KS) communicated to the American public and the residents of Kansas his efforts to end Common Core and other federal mandates from interfering in U.S. public schools. He released an audio recorded statement on December 9, 2015 where he said:

This bill, the Every Student Succeeds Act, puts an end to Washington mandates and allows Kansans to make their own decisions about the best way to improve education restoring that responsibility back to states, local school districts, superintendents, principals, teachers, local school boards, parents and students.

Representative Bishop (R-MI) put forth his views following the passage of ESSA into law. In a hearing with Secretary of Education, Dr. King on February 25, 2016, he initiated the following point:

The law [ESSA] puts a firm end to the federal government's bullying states into submission when it comes to how they choose to teach their students. We have so many very qualified educators and parents who are involved that know best for

their students in their cities, and to have to teach to a federal template is counterproductive to say the very least.

For Republicans, ending federal control and returning authority to the states and local levels was the primary goal within ESSA.

Empowering State and Local Levels

A major shift in ESSA, as compared to NCLB, was to empower state and local levels with respect to K-12 education. There was consensus among the participants that empowerment at the state and local levels with regards to flexible funding, curriculum, and standards will lead to higher student achievement. There was also agreement that the path to an improved educational system is to allow parents, teachers, and educational leaders a stronger voice in the decision making process.

Representative Kline (R-MN) in a committee statement on November 18, 2015 stated: “The bill [ESSA] restores local control by protecting the right of states to opt-out of federal education programs and delivering new funding flexibility so taxpayer resources are better spent on local priorities.” Representative Bonamici (D-OR) in a floor speech on December 2, 2015 announced: “The new law [ESSA] will also...give educators, who know what’s best for their students, a voice in how to strengthen schools.” A few days later, Senator Hatch (R-UT) published a press release supporting these views. On December 9, 2015, he communicated that, “Empowering local leaders, teachers, and parents to make decisions about their education system is the right thing to do.” Chairman Alexander (R-TN) in a press release on January 22, 2015 summed it up saying:

The huge bipartisan vote in both the Senate and the House reverses the trend toward a national school board and makes clear that, in the future, the path to higher standards, better teaching and real accountability will be through states, communities and classrooms and not Washington, D.C.

The goal of empowering state and local levels with respect to K-12 education was a bipartisan and bicameral issue among the participants.

Bipartisan and Bicameral Support for ESSA

The data suggested that there was wide support for ESSA from both parties (i.e., Democrats, Republicans) and chambers (i.e., Senate, House of Representatives). The data also indicated that “K-12 education” as a whole has less divisiveness and partisanship as compared to other issues. Members of Congress from the Senate Health, Education, Labor, and Pensions Committee (HELP) and the Subcommittee on Early Childhood, Elementary, and Secondary Education truly worked together to craft a bill (ESSA) that improved the educational system while benefiting all American children. This level of cooperation and agreement is not typically seen in Congress as indicated by members of Congress.

Senator Bennet (D-CO) in a floor speech on November 18, 2015 to President Obama, members of Congress, residents of Colorado, and the American public stated: “This process [enacting ESSA] has been a rare exception around here of bipartisan work...” In a floor speech on December 8, 2015, Senator Murkowski (R-AK) shared:

It’s [passing a bill] hard work, it requires compromise, and an open amendment process in committee which we absolutely had, days and days of process in committee, on the floor, and in conference committee. We had a real, live, old-

fashioned conference committee. And, it was an absolute pleasure to be part of a process where you could go in with your colleagues from the House, on the other side of the table, going back and forth and further perfecting a bill.”

President Obama in a speech prior to signing ESSA into law on December 10, 2015 stated:

And, I just want to point out that it’s not as if there weren’t some significant ideological differences on some of these issues. (Laughter.) No, there were, but I think this is really a good example of how bipartisanship can work. People did not agree on everything at the outset, but they were willing to listen to each other in a civil, constructive way, and to work through these issues, compromise where necessary, while still keeping their eye on the ball. And I think it’s really a testament of the four leaders of the respective committees that they set that kind of tone. And, that’s something that we don’t always see here in Washington. There wasn’t a lot of grandstanding, not a lot of posturing—just a lot of really good, hard work.

Senator Casey (D-PA) followed up on President Obama’s comments in a press release on December 22, 2015 where he said, “I am pleased that members of the Senate worked together to put our differences aside [referring to ESSA] and do what is best for students and the future of our country.” ESSA received bipartisan and bicameral support because members of Congress see public education as a vital national interest.

Leadership

Throughout the reauthorization of ESEA, Chairman Alexander (R-TN), Chairman Kline (R-MN), Ranking Member Murray (D-WA), and Ranking Member B. Scott (D-

VA) played a pivotal leadership role in helping pass ESSA into law. They were the key players in identifying public policy problems (NCLB), setting the agenda (revising NCLB/ESEA), formulating policy (ESSA), and adopting policy (ESSA). Their leadership can be described as fostering a bipartisan mindset, not playing politics, building consensus, encouraging open debates, and holding several hearings and markup sessions to allow ideas and philosophies to be shared, and including physical education as part of the definition of a well-rounded education.

Senator Franken (D-MN) in a floor speech on December 8, 2015 verbalized, “I want to thank Representatives John Kline and Bobby Scott, and Senators Lamar Alexander and Patty Murray for building the bipartisan foundation to get this bill [ESSA] done and reform our national education system.” On the same day, Senator Warren (D-MA) opined: “This has been a really challenging process, but Senator Murray and Senator Alexander kept the door open for improvements, and I'm grateful for that.” The next day, December 9, 2016, Senator Murphy (D-CT) stated:

They [Senator Alexander & Senator Murray] were determined to get to a product [bill] that both parties could support, and when you start there, when you start with the idea that we can achieve a bipartisan solution rather than your starting point being having a debate in order to maximize political impact and political division, it's miraculous where we get; and listen, we can all be blamed for falling into that trap far too often.

Senator Mikulski (D-MD) in a floor speech as well on December 9, 2015 said:

They've [Senators Alexander & Murray] done an outstanding job in guiding the committee, encouraging open debate, extensive hearings, consultation with

members, committee markups that were long, hard, sometimes quite feisty, to say the least. But that's the way the Congress ought to be.

Carly Wright, Senior Manager of Advocacy for SHAPE America noted in an interview on July 14, 2016 that,

Senator Alexander and Senator Murray committed to making education reauthorization a bipartisan process and both were able to come to the table to agree on making sure physical education was recognized. Senator Baldwin was also a wonderful supporter and leader on the Senate HELP committee that pushed our [SHAPE America] priorities forward. Without their leadership, we [SHAPE America] wouldn't have been able to ensure the inclusion in the well-rounded definition.

Based on the data, it is clear that Chairman Alexander (R-TN), (R-MN), Ranking Member Murray (D-WA), and Ranking Member B. Scott (D-VA) played an influential role in shaping the policymaking process of ESSA into law.

Constituents

Members of Congress depending upon their state and district affiliation interact and respond to their constituents when making decisions concerning public policy. According to the data, members of Congress listened intently to their constituents when reauthorizing ESEA. For example, members of Congress spoke and/or met with educational leaders, teachers, students, and parents. They discussed the problems associated with NCLB, possible solutions, and the role the federal government should play in improving the education system. The combination of these ideas and experiences influenced their priorities and public policy decisions with respect to education.

Representative Bonamici (D-OR) in a floor speech on December 2, 2015 stated: “After hearing frequent concerns from students and teachers about the need for fewer, better assessments, I'm pleased that the Every Students Succeeds Act includes bipartisan provision I authored with congressman Ryan Costello to help school districts eliminate unnecessary testing.” On December 8, 2015, Senator Franken (D-MN) indicated in a floor speech that, “Over the last several years, I've met with principals, teachers, students, parents, and school administrators in Minnesota. These conversations have helped me develop my education priorities to help improve our schools, our communities, and our nation's future.”

Senator Mikulski (D-MD) reinforced Representative Bonamici (D-OR) and Senator Franken's views in a floor speech on December 9, 2015. She noted:

The second thing they [i.e., parents, teachers, administrators] said is, ‘Yes, you need accountability. Yes, you do metrics. You do need metrics.’ But what we've come up with is over-testing that still does not result in high performance. So, I worked in a bipartisan basis with the leadership to do what we could to get rid of those excesses of one-size-fits-all, all decisions that are made in Washington, and the fact that we shouldn't be racing to the test, we should be racing to the top.

The data suggests that members of Congress do listen to their constituents when engaging in the policymaking process.

Interest Groups

In the United States, interest groups have become prolific over the past few years (Anderson, 2011). Interest groups serve as a resource in which to communicate policy demands, ideas, and solutions to the policymaking process (Anderson, 2011). According

to the data, the Society for Health and Physical Educators (SHAPE) of America played a major role in having health and physical education included in the definition of a well-rounded education. When asked what factors led to this inclusion, Karen Johnson, an Advocacy Consultant for SHAPE America said:

Tenacious advocacy efforts and educating policy makers, staff and members of Congress on the impact NOT including health and physical education in federal education law had on student health and wellness. Building a large and strong coalition of interested parties.

Carly Wright, Senior Manager of Advocacy for SHAPE America replied to the same question by saying:

I think there were a number of factors that contributed to the inclusion of health and physical education as part of a well-rounded education in ESSA. I believe that the advocacy that SHAPE America has lead over the past seven years through SPEAK Out! Day, the introduction of the PHYSICAL Act, online advocacy, coalition building, etc. contributed significantly to the inclusion in ESSA. This advocacy and lobbying was vital in cultivating education champions on Capitol Hill who ultimately pushed and supported our efforts.

Both perspectives are supported by SHAPE America. In January of 2016, SHAPE America published a policy guide that stated:

Through SPEAK Out! Day meetings, organizational sign-on letters, communication with congressional champions and a constant flow of emails and calls from our members and supporters, SHAPE America led efforts to ensure that

school health and physical education were included as part of a student's 'well-rounded education' within the Every Student Succeeds Act (ESSA). (p. 2)

SHAPE America is the country's largest organization of health and physical education professionals whose mission is to promote healthy, physically active lifestyles through the development and expansion of professional practice and research (SHAPE, 2016a).

Professional Experiences

When making decisions on public policies, members of Congress receive their information from a variety of sources. In this study, the participants' decision making process and views on education were influenced, in part, by their previous professional experiences. These policy views and decisions included: the role of the federal government in K-12 education, K-12 educational reform, and conflicting decisions often made by policymakers, educational leaders, and parents. The professional experiences reflected that of a superintendent, a teacher, and an elected school committee member. Senator Bennet (D-CO) in a floor speech on November 18, 2015 stated:

As the former superintendent of the Denver Public Schools and as the parent of three daughters that attended Denver Public Schools, I know that there are many things the federal government cannot and should not do when it comes to education.

Representative Takano (D-CA), as cited on his congressional website on March 25, 2016 mentioned, "As a teacher for more than 20 years, I bring practical knowledge to Congress about which educational reforms will actually impact classroom performance positively, and I plan to work with my colleagues to implement them."

Representative Clark (D-MA) also cited on his congressional website on April 4, 2016 that:

In 2001, I first served in elected office as a member of the School Committee in my home town of Melrose. This position was one of the hardest I've ever had, but it gave me a profound understanding of the difficult, sometimes competing decisions faced by policymakers, school administrators, teachers, and parents.

As illustrated in the data, it is apparent that certain professional experiences shaped how members Congress view K-12 education.

Personal Experiences

Educational policy perspectives and decisions made by a few members of Congress were impacted, to a degree, by their personal experiences. These personal experiences situated around being a mother, father, and/or grandparent. The policy perspectives and decisions were internalized and formulated based upon how the educational system impacted their family. Senator Murray (D-WA) in a press release on November 19, 2015 said:

And, as a mom, and grandmother, and someone who got into politics to make sure ordinary families had a voice at the table when decisions about education were made—I am very proud that we can take this important step forward for our students.

Senator Murphy (D-CT) in a floor speech on December 9, 2015 stated:

Mr. President, I think, like you, my entire life has been spent in and around public education. I went to Connecticut's public schools. My mother grew up as a public school teacher. My wife is a former public school teacher, and, of course, I have

two beautiful boys, one of whom is in the public school system as well. So, as it is for many of us, this conversation is deeply personal, but it's also deeply personal for me as someone who is going to raise two boys into a country whose greatness really now depends more than ever on the quality of our public schools.

In the same speech, Senator Murphy (D-CT) went on to say:

Now, I'm a parent who is deeply involved now in looking at schools and deciding which one is right for my kid, and while I pay attention to the test scores that come out of that school that is not the beginning and the end of my analysis. I take careful pains to meet with the administrators, to talk to other parents, to look at their curriculum, to look at other measurements like attendance rates and graduation rates, to build a full picture of what a good school is.

The data suggested that members of Congress who experienced the education system on a personal level have emotional connections to its success.

Politics and Political Ideology

According to the data, there were two competing positions between Democrats and Republicans over the reauthorization of ESEA. These positions existed in the Senate and House of Representatives as well. On the one hand, Republicans wanted to reduce the federal government's role in K-12 education by devolving all authority and responsibility to the states and locales. The Democrats, on the other hand, wanted federal involvement and oversight, especially as it pertained to formula funding to ensure low socio-economic communities were receiving the necessary resources to provide high quality educational programs and services. In the Conference Committee, the final version of ESSA established a balance between the two viewpoints. The first two

comments illustrate the politics and political ideology behind ESSA, while the third response depicts the overall compromise.

Representative Rokita (R-IN) in a press release on November 18, 2015 stated: “My goal is to make sure the conservative reforms and policies of the Student Success Act that put parents, teachers, school boards, and states in control, are incorporated as much as possible into the final proposal.” Representative Grijalva (D-AZ) in a press release on December 2, 2015 argued a different view. He said:

This bill [ESSA] is far from perfect, but it’s a vast improvement over the version House Republicans pushed through in July, which undermined important federal protections for students, and would have allowed for ‘portability’ – the syphoning of vital funds away from schools with high concentrations of low-income students.

Brian Moulton, a counsel for a member of Congress who sat on one of the education committees, offered a perspective on the ESSA compromise between the Democrats and Republicans. In an interview on January 5, 2016, he stated:

During the committee’s consideration of ESEA reauthorization, there was significant tension between two general positions – the Democratic members desire to maintain a strong federal role in K-12 education to ensure that the most disadvantaged students were not left behind, and the Republican members desire to revert the greatest amount of authority to state and local governments and minimize the federal footprint in this area. This same tension also existed between the House and Senate reauthorization measures. ESSA struck a balance between these two approaches, by maintaining significant federal accountability

requirements while granting states greater control over what metrics and timelines were involved.

Regardless of the issue, politics and political ideology always play a role in the policymaking process.

Priorities

Like all civil servants, members of Congress have a variety of priorities. Sometimes these priorities overlap and compete with one another. Other times, they do not. These priorities, as a whole, are viewed as those areas that individuals assign a level of importance and then act accordingly. Priorities are often distinct in nature and germane to each individual. In this study, they focused on supporting English language learners (ELL), fixing NCLB, increasing localized decision making, preparing and recruiting principals, and a lack of knowledge and understanding about the difference between physical activity and physical education. Although the provenance of these priorities cannot be determined, these priorities by themselves, played a role in how members of Congress identify public policy problems, set agendas, formulate policy, and adopt policies with respect to K-12 education.

Representative Curbelo (R-FL) in a press release on November 18, 2015 stated: “As a Member of the Conference Committee, I will fight...to protect the interests of English language learners and the teachers and districts who serve these students - a major priority for our schools in Miami-Dade and Monroe counties.” Several weeks later, Senator Franken (D-MN) in a floor speech on December 8 stated:

Again, I'm very pleased that these priorities [e.g., STEM education, mental health services, principal preparation and recruitment, 21st century learning centers,

computer adaptive tests, native language immersion, and foster care] have been included in the legislation we are considering today, and I thank my colleagues for working with me on them.

On December 9, 2015 Senator Baldwin (D-WI) published this press release statement:

I remain committed to my work on these priorities [fixing NCLB, incentivizing localized decision-making, holding states and schools accountable, offering a well-rounded education, reducing the number of standardized tests, enhancing technology, and providing a high-quality, free public education] and others as Congress continues its work on behalf of children and families in Wisconsin and all across this country.

In an interview with Carly Wright, Senior Manager of SHAPE America, on July 14, 2016 about the dichotomy between the public's and policymaker's perception of the increased importance of proper nutrition and physical activity in leading a healthy lifestyle and the low status of physical education in schools, she offered this viewpoint:

I believe that the public and decision makers still do not see the difference between physical education and physical activity. Many still believe that providing opportunities for recess and other physical activity breaks or time is sufficient. Many states and school districts also continue to allow substitutions for physical education class time or credit – such as interscholastic sports, physical activity clubs, JROTC, marching band, cheerleading, etc. This also points to the disconnect for decision makers about the difference between physical activity and physical education and the value of effective, high-quality physical education delivered by a certified physical educator.

The data above suggests that members of Congress have a variety of priorities, all of which are based on what they know and how they see and internalize the world.

Values

Members of Congress rely on certain values when deciding on issues related to public policy. These values can range from organizational, professional, personal, and/or policy-related (Anderson, 2011). In this study, one such value that was preponderant was that of education. The participants believed that education is critical to each child and the nation's success. They viewed education as a means to offer socio-economic mobility and establish a robust and cutting-edge economy. They also saw education as a way for each child to reach their full potential and achieve the American dream.

In a floor speech on November 18, 2015 to President Obama, members of Congress, residents of Colorado, and the American public, Senator Bennet (D-CO) proffered his views and beliefs on ESSA and public education. He said:

And, I can appreciate that we should have a debate about what level of government should do what, but I believe that there is no doubt that we have a vital national interest in making sure that education liberates all children to fulfill their potential.

Senator Murray (D-WA) published a press release to the American people and, in particular, the residents of Washington on the need to name conferees and allow the Senate and House of Representatives to move to conference. On November 19, 2015, he stated:

We know education is one of the best investments we can make in our children and our future, that it's the most important tool we have to help people climb the

economic ladder—and that our businesses depend on a strong education system to remain innovative, vibrant, and strong.

Representative Sablan (D-MP) in a press release on December 11, 2015 regarding his procurement of more federal aid for the Northern Mariana Islands said, “I remain convinced that education is key to the success of our people and our economy now, and 10, 20, 30 years into the future.” Representative Grijalva (D-AZ) shared his values toward education in an Opposite Editorial. On December 15, 2015, he said:

President Johnson knew that education is about more than a grade. The right to learn is as fundamental as our rights to life, liberty and the pursuit of happiness. It dictates a child’s future opportunities and their ability to contribute to our society. LBJ understood this, which is why he considered ESEA the most important law he ever put his name to.

Members of Congress have a variety of values. However, one such value that appears to be constant in the data is the need and importance for a quality public education system.

Staff Involvement

Each member of Congress has a team of staffers who work on certain policy related issues such as education, defense, energy, environment, healthcare, and budgets. According to the data, staff members from senators and representatives who sat on the HELP Committee and Subcommittee on Early Childhood, Elementary, and Secondary Education worked behind the “scenes” to negotiate, compromise, build consensus, and draft amendments. In addition, they worked closely with other staffers from members of Congress to help pass ESSA into law.

Senator Murkowski (R-AK) in a press release on November 2, 2015 said:

I want to acknowledge the good work of the members of the Senate HELP Committee, and their staffs—we all know that their staffs just put in amazing hours to get the bill to this point—working together, compromising, negotiating, and making their cases for the priorities of their constituents.

Senator Franken (D-MN) in a floor speech on December 8, 2015 stated:

I want to thank my dedicated staff, both present and past, who've worked hard to move my education priorities [e.g., STEM education, mental health services, principal preparation and recruitment, 21st century learning centers, computer adaptive tests, native language immersion, and foster care] forward – Sherry Lachman, Amanda Beaumont, and Gohar Sedighi.

Carly Wright, Senior Manager for Advocacy for SHAPE America, said in an interview on July 16, 2016 that, “SHAPE America was able to work closely with their staff [Senators Alexander, Murray, and Baldwin] throughout the reauthorization process.” This work pertained to the inclusion of health and physical education as part of the definition of a well-rounded education with ESSA. Based on the data, staffers play an instrumental role working out the finite details of a piece of legislation garnering support for these provisions.

Authoring Provisions

When a major piece of legislation is set to be reauthorized, such as ESEA, members of Congress will take the initiative to author certain provisions that is aligned with their priorities, values, constituents, and/or state or district needs. In this study, members of Congress authored provisions on a variety of topics. Some of these included: the rural education achievement program (REAP); science, technology, engineering, and

math (STEM) education; mental health services; and the inclusion of block grants for physical education within ESSA. The purpose of authoring such provisions was to bring to the fore those issues that members of Congress want addressed and included in federal education law.

In a press release dated November 19, 2015, Senator Collins (R-ME) communicated to the American people and residents of Maine her thoughts and views following the adoption of the conference report for the rewrite of No Child Left Behind. She stated:

I was honored to serve on the conference committee for this important education legislation and successfully advocate for the retention of two provisions I authored in the Senate bill: an extension of the critically important Rural Education Achievement Program (REAP) and authorization for an Innovative Assessment and Accountability pilot program.

Senator Franken (D-MN), in a press release on December 9, 2015, communicated to the residents of Minnesota, and the American people his support of ESSA and the end of NCLB. He indicated:

And, I am proud that so many of the provisions I authored are included in this bill—things like strengthening STEM education, expanding student mental health services, increasing access to accelerated learning courses that help high school students earn college credit, and improving the recruitment and preparation of quality school principals.

In a press release on December 9, 2015, Senator Baldwin (D-WI) offered members of Congress, residents of Wisconsin, and the American people her provisions for ESSA.

One of these major provisions included physical education. The press release indicated that,

ESSA includes support for physical and health education as an allowable use of a 20% mandatory set-aside for “safe and healthy student” initiatives under a new formula-based block grant. During markup, the Senate HELP Committee approved an amendment, offered by Senator Baldwin, to include a standalone physical education program in its ESEA reauthorization bill.

Members of Congress author provisions in major pieces of legislation as a way to move their policy agenda forward and influence the way policies are formulated and adopted.

Inclusion of Smaller Bills

In several interviews with the participants, they were asked about the Fitness Integrated with Teaching Kids (FIT) Act or S. 1033, H.R. 2178. The purpose of this act was to help address the childhood obesity epidemic by improving the way physical education data was collected and reported at the state and local levels. This act was introduced in the 110th, 111th, 112th, and 113th Congress and read in the Senate and House of Representatives only to have it die in committee. According to the participants, there are a number of political and social factors that influence the inclusion of smaller bills as part of larger vehicles. Chief among them are temper of the times, political compromises, national priorities, policy windows, and public awareness.

Alicia Kielmovitch, an Education Policy Fellow for Senator Hatch, stated: “Based on my knowledge and understanding, the political factors that influence the inclusion of smaller bills as part of larger vehicles are political climate, negotiation around certain priorities, timing, and luck.” She concluded, “As for the social factors, they are

contingent upon what new priorities arise from the national conversation around education and ways to improve achievement.” Jonathan Anderson (pseudonym name), a legislative assistant responded:

Introducing a bill multiple Congresses in a row will show that, to someone, the issue remains important and unfixed. If it is included after a long time of being prioritized by some, the best way to describe it is as ‘a policy whose time has come.’

Brian Moulton, a counsel for Senator Baldwin argued the following:

It is often politically easier to advance issues that are either controversial or lack a significant, vocal constituency as part of a larger vehicle, particularly when that is a relevant measure that is perceived as necessary to pass. In the current case, reauthorization of ESEA – and more to the point, replacing NCLB – was one such measure and an obvious opportunity to address federal policy regarding physical education.

Karen Johnson, a policy advocate for SHAPE America shared this perspective:

They [smaller bills] help raise awareness and provide a platform for messaging around an issue. The FIT Kids Act, however, almost derailed our effort to include health and physical education as core subjects – members of Congress felt that through FIT kids they had already checked the health and physical education box. Additionally, some stakeholders were so wedded to FIT Kids that they refused to engage in other legislative efforts.

Political and social factors influencing the inclusion of smaller bills as part of larger vehicles vary in scope and complexity. As indicated in the data, there is no single factor

or reason behind these decisions. Rather, they are an amalgamation of things that spur political activity, some of which are still unknown to this day.

Conclusion

The purpose of this chapter was to display the results in connection to the research questions and phenomenon being explored in this study. Chapter four reflected three major themes. These themes focused on a separation of powers, the great equalizer, and the political curtain. Within each theme, there were several subthemes. These subthemes focused the results and provided the organization and structure that was needed to answer the research questions. Chapter five will discuss the results and implications for policy, practice, and research.

Chapter 5

Discussion and Implications

The purpose of this chapter is to discuss the results and implications of this study. Chapter five presents a summary and critique of each of the three themes. Specific attention is directed to what the data means, what led to the conclusions, what are alternative viewpoints, and how the research questions were answered. Within these areas are connections to the literature to help contextualize and support the conclusions. Implications for policy, practice, and research are presented. Thereafter, a discussion ensues regarding trustworthiness of the data. That is, how were credibility, transferability, dependability, and confirmability achieved. Finally, chapter five closes with the limitations of the study.

Theme I: A Separation of Powers

Members of Congress ($n = 35$), national policymakers ($n = 3$), staffers ($n = 6$), and legislative liaisons ($n = 2$) from this study viewed physical education as a state and local issue when it pertained to curriculum, instruction, assessment, subject-related policy decisions, program requirements, subject emphasis, and specific program resource allocations at the state and local levels. This viewpoint was based on the perspective that the federal, state, and local levels have different roles and responsibilities governing public education. This belief emanates from the maxims that underscore the Constitution: limited government, separation of powers, checks and balances, and federalism (Oleszek, Oleszek, Rybicki, & Heniff, 2016).

The overarching research question in this study focused on what role, if any, should members of Congress play in requiring effective physical education in U.S.

schools? When the founding fathers constructed our system of government, they did not address public education directly. Instead, they acknowledged it indirectly through the 10th Amendment. Through its language, the 10th Amendment implies that public education is a state and local responsibility. Over the years, as the nation and our society evolved, these roles and responsibilities at the federal, state, and local levels became blurred with passage of the Elementary and Secondary Education Act (ESEA) of 1965. This piece of legislation, signed by President Johnson, was the first time in our nation's history that the federal government assumed a direct role in K-12 public education.

Since that time, the federal government has increased its involvement in public education. The No Child Left Behind Act of 2001, signed by President Bush, permitted more federal oversight and power in public education. This involvement led to a one-size-fits-all approach to educational reform, a major emphasis on standardized testing, adequate yearly progress, school sanctions, and the identification of core subjects. Although ESEA is earmarked to be reauthorized every seven years, it took Congress 15 years to meet this obligation. On December 10, 2015, President Obama signed the Every Student Achieves Act (ESSA), which returned much of the authority and responsibility back to the state and local levels. In a press release on December 9, 2015, Senator Hatch (R-UT) quoted the Wall Street Journal as saying that ESSA 'represent[s] the largest devolution of federal control to the states in a quarter-century.'

In ESSA, health and physical education was included in the definition of a well-rounded education. This groundbreaking step has led to increased subject value and status, as well as improved access, opportunity, and funding for health and physical education programs throughout the nation. However, there is no federal law that

mandates certain requirements or standards for physical education in U.S. public schools, nor are there any federal edicts to state and local school districts to provide physical education (SHAPE, 2016). As a result, physical education remains a state and local issue, especially as it relates to curriculum, instruction, assessment, subject-related policy decisions, program requirements, subject emphasis, and specific program resource allocations.

There are several implications that need to be considered because health and physical education is primarily a state and local issue. According to the 2016 Shape of the Nation report, there still remains gaps in strength and comprehensiveness regarding physical education policies at the state and local levels, which impact students' abilities to participate and benefit from these programs (SHAPE, 2016). Based on this report, it appears that education and policymaking leaders at the state and local levels are either not informed and/or not convinced of the benefits of effective daily physical education in schools. Therefore, physical education policy experts, administrators of physical education, physical education teachers, and physical education teacher educators need to advocate for stronger policies within their respective states, schools, and universities.

While advocacy is part of the solution, educational leaders and policymakers at these levels need to be made aware of and educated on the difference between physical education, physical activity, exercise, and recess. Otherwise, it could be argued that the varying degrees of strength and comprehensiveness of physical education policies are due to a lack of knowledge and understanding in this area. Simply put, they see these terms as synonymous even though they possess very different meanings. This lack of clarity and understanding can impact how physical education policies are formulated, adopted, and

implemented at the state and local levels. Consequently, the following terms and their definitions serve to address this need.

Physical education is defined as “a planned, sequential, K-12 standards-based program of curricula and instruction designed to develop motor skills, knowledge and behaviors for active living, physical fitness, sportsmanship, self-efficacy and emotional intelligence” (SHAPE, 2015a, p. 3). Physical activity is any type of movement in the body that involves the release of energy (SHAPE, 2015a), while exercise is defined as “any physical activity that is planned, structured and repetitive for the purpose of improving or maintaining one or more components of fitness” (SHAPE, 2015a, p. 3). Recess is a time in the school day where unstructured physical activity can occur in a safe, supervised environment that leads to strong bodies and positive movement experiences (NASPE, 2006).

For state policymakers and local educational leaders, it is important to know that physical activity and exercise are the mediums used to achieve programmatic goals and outcomes in physical education; they are not the content in and of themselves.

Additionally, recess is not a form of physical education because there are no specific learning objectives, content, standards, and assessments taking place. The aim of physical education is to “develop physically literate individuals who have the knowledge, skills, and confidence to enjoy a lifetime of healthful physical activity” (SHAPE, 2014). In order for physical education policies to be improved and strengthened at the state and local levels, conversations with education and policymakers who govern these policies need to occur surrounding aforementioned terms and concepts. In doing so, this has the

potential to lead to better support and understanding for effective, daily physical education.

Finally, because physical education is a state and local issue, practitioners need to demonstrate to educational leaders and policymakers their return on investment. That is, the investment of school time and resources into physical education programs. SHAPE America created a 50 million strong initiative, which was a call to action by SHAPE America to make certain that students who graduate from high school in 2029 possess the knowledge, skills, and dispositions needed to lead healthy, active lifestyles as a result of effective health and physical education programs (SHAPE America, 2015b). Dr. Steven Jefferies, former SHAPE America president, who played a significant role in this initiative issued these comments to me in a personal email on August 24, 2015. He said:

The big change proposed with 50 MS is that health and physical educators need to provide evidence of their effectiveness. We've had for years claimed to be doing [these] things but [have] been very poor at providing evidence. My perspective is that if we can get public school health and physical educators to get their kids physically active and healthy – supported by evidence - we will not need to depend on legislation to get school support for what we do. If it is indeed true that healthy and physically active kids perform better academically, school administrators will naturally want to support our work.

This comment came at a time when the House of Representatives Education and Workforce Committee and the Senate Health, Education, Labor, and Pensions Committee were debating the reauthorization of ESEA.

Dr. Jefferies presented a valid argument for the need for practitioners to provide evidence of effective physical education in schools. However, it is equally important to recognize the difficulty in reaching this goal when institutional barriers inhibit effective physical education from taking place in schools. Some of these include: access to and lack of facilities (Barroso et al., 2005; Morgan & Hansen, 2008), lack of time (Barroso et al., 2005; Morgan & Hansen, 2008), crowded curriculum (Morgan & Hansen, 2008), access to and lack of equipment (Barroso et al., 2005), large class sizes (Barroso et al., 2005; Morgan & Hansen, 2008), budget constraints (Morgan & Hansen, 2008), quality of facilities (Barroso et al., 2005), and insufficient number of physical education staff (Barroso et al., 2005; Dwyer et al., 2005). Therefore, state and local policy changes need to be made in these areas, in conjunction and concurrently with the collection of evidenced-based achievement where appropriate. Once these policy changes are made, it will be easier for health and physical educators to provide the necessary evidence needed to demonstrate program effectiveness at the state and local levels.

Theme II: The Great Equalizer

Members of Congress ($n = 35$), national policymakers ($n = 3$), staffers ($n = 6$), and legislative liaisons ($n = 2$) in this study believed it is the responsibility of the federal government to provide all Americans, regardless of race, gender, zip code, sexual orientation, and/or socioeconomic status equal access, opportunity, and funding to public education. In this study, access was defined as the ability, right, and/or permission to use, borrow, or acquire educational programs and services in U.S. public schools. Opportunity was described as a set of conditions that allows and encourages equal educational programs and services to exist in U.S. public schools. Funding was viewed as the fair

distribution of resources from the federal government to states in the form of block grants.

As a result of the passage of the Every Student Succeeds Act (ESSA), Congress granted more access, opportunity, and funding for health and physical education programs throughout the country. This is due to health and physical education being included in the definition of a well-rounded education, which permits Title I, II, and IV funding to be used for these programs (SHAPE, 2016). Education and policymakers at the state and local levels can use Title I, II, and IV to support these programs in a variety of ways, such as program enhancement, professional development, facility construction, technology upgrades, and the purchasing of curriculum, instruction, and assessment materials. However, this was not a mandate to be imposed on states and locales from the federal government.

Furthermore, the federal government cannot dictate how states and local districts utilize these funding mechanisms. Hence, the first theme--physical education is primarily a state and local issue. Notwithstanding, the federal government can require states and school districts to perform a “needs assessment” prior to receiving federal funds in order to demonstrate the need for greater access and opportunity to a well-rounded education (SHAPE, 2016). One of the roles of the federal government in this process is to determine how much money gets appropriated. The Congressional Budget Office and the U.S. Department of Education work together in conjunction with Congress to determine how the money is allocated to the states within the president’s budget. Currently, states, departments of education, budget offices, and local education agencies are collaborating as to how ESSA gets fully funded and implemented.

Since ESSA decentralized much of the power and authority of the federal government to the states and locales, leaders at this level have more responsibility and autonomy to effectuate change at the K-12 level. This power and authority lends itself to how public policy problems in education are identified, agendas are set, and policies are formulated and adopted. Underscoring this policymaking process in the education sector is the principle of equal access, opportunity, and funding. This principle guides the decision making process of educational leaders and policymakers at all levels of government.

According to the 2016 Shape of the Nation Report, there remains varying degrees of strength and comprehensiveness regarding equal access, opportunity, and funding for health and physical education programs (SHAPE, 2016). However, this may change in the light of the passage of ESSA. Nevertheless, state policymakers and local educational leaders who are in charge of these programs may want to be aware of national trends. These address current grade level and time requirements, funding and equipment, substitutions, exemption, and waivers, local school wellness policies, standards and curriculum, assessment and accountability, teacher certification, licensure, and professional development. These can play a role in how these policies can be strengthened in their state and respective schools.

The Society of Health and Physical Educators (SHAPE) of America has been conducting regular reports to evaluate physical education policies throughout U.S. public schools since 1987 (SHAPE, 2016). The purpose of this report is to provide data that successfully advocates for effective physical education and physical activity policies in schools. The report frequently evaluates and assesses the degree of progress made toward

this goal (SHAPE, 2016). The 2016 report was conducted during the winters of 2015-2016. The participants were 51 physical education coordinators from each state, including the District of Columbia (SHAPE, 2016). An online survey was sent to participants to gather data on their state's physical education and physical activity requirements and practices. The data was collated into state profiles and charts (SHAPE 2016). The findings and descriptive statistics (percent and ratios) from this report vary from section to section and question to question. Consequently, not every question was answered by the participants or were relevant to each state. The report reflects a percent and ratio of those that answered the question.

Grade Level and Time Requirements

Across the United States, grade level and time requirements vary from state to state. For instance, 86.3% of states provide elementary physical education, but only 37% of states mandate a certain number of minutes per week of physical education (SHAPE, 2016). Alabama, Florida, Louisiana, New Jersey, Oregon, and the District of the Columbia (SHAPE, 2016) were the only states and province identified as meeting the national recommendations for 150 minutes for the elementary grades. Compared to the 2012 Shape of the Nation report, this number represents a minor increase.

For students in middle and junior high school, grade level and time requirements are varied. About 80% of states demanded that physical education be offered at this level (SHAPE, 2016). Yet, 29% percent mandated a specific amount of instructional time in physical education for these grade levels (SHAPE, 2016). According to the 2016 Shape of the Nation, Montana, Oregon, and the District of Columbia fulfill the national

recommendation of 225 minutes for these grades. The number of states that meet this recommendation is similar to the 2012 report.

At the high school level, grade level and time requirements also differ.

Approximately 90% of states required that physical education be made available (SHAPE, 2016). Statistics suggested that 77% of states expect students to earn credit in physical education class for graduation (SHAPE, 2016). Roughly 12% of states have compulsory time requirements for physical education (SHAPE, 2016). California and Hawaii are the only two states that come near the 225 nationally recommended minutes for this grade level (SHAPE, 2016).

Funding and Equipment

Similar to grade level and time requirements, funding and equipment differ among the 50 states. South Carolina is the only state to regularly assess adequate equipment and facilities for students who participate in required physical education class (SHAPE, 2016). While, Oregon does evaluate annually the facilities that offer physical education instruction (SHAPE, 2016). In terms of funding, 58% of states were given general education funding for physical education, 29% were afforded school district resources, and Colorado was the only state that allotted special education money (SHAPE, 2016). Thirty-one percent of the states surveyed communicated that more funding was available through competitive grants for physical education (SHAPE, 2016). But, the median budget in schools for physical education at all grade levels was only \$764.00 per year (SHAPE, 2016).

Substitutions, Exemptions, and Waivers

Throughout the United States, certain states, school districts, and schools permit students to substitute, waive, or become exempt from physical education time and credit. The 2016 Shape of the Nation suggested that, 62% of states grant school districts permission to substitute various activities for physical education credit. Some of these activities include: Junior Reserve Officer Training Corps, interscholastic sports, marching band, cheerleading, community sports, drill team, and dance (SHAPE, 2016). The report also disclosed that roughly 29% of states authorize school districts to request waivers for physical education requirements, which does not always correspond with states that allow exemptions and waivers (SHAPE, 2016). And, 60% of states let school districts permit students to apply for exemptions for physical education credit (SHAPE, 2016). Medical reasons, advanced placement courses, work study, and religious beliefs are the main reasons cited for exemptions (SHAPE, 2016). Students with disabilities are not permitted to be exempted from physical education time or credit requirements, and they should be afforded adapted physical education when and where appropriate (SHAPE, 2016).

Local School Wellness Policies

The adoption of local school wellness policies began with the passage of the 2004 Child Nutrition and Special Supplemental Nutrition Program for Women, Infants and Children (WIC) Reauthorization Act (PL 108 – 265, section 204). This law required that schools participating in the National School Lunch Program or similar child-centered nutrition programs establish a local school wellness policy. The 2016 Shape of the Nation found that about 59% of school districts submit their school wellness policy to the state department of education. Approximately 51% of the state's mandate that these local

school wellness policies are posted online; thus, making them publicly available and accessible (SHAPE, 2016). Typically, the state oversees the implementation of these policies at the local level. Currently, 60% of states fulfill this requirement (SHAPE, 2016).

Standards and Curriculum

When it pertains to standards and curriculum, 98% of states have formally approved state standards for physical education (SHAPE, 2016). Of these states, about 87% of them mandate that schools adhere to these standards (SHAPE, 2016). Within these state standards, the five national standards that define a physically literate person are addressed (SHAPE, 2016). Forty-eight states incorporate national standards one, two, and five into their state standards, and 47 states include national standards three and four (SHAPE, 2016). Furthermore, about 63% of states encourage school districts to use the Physical Education Curriculum Analysis Tool (PECAT) (SHAPE, 2016). PECAT is a self-assessment and planning sheet to assist schools in carrying out consistent and lucid analyses of physical education curricula in accordance with the national physical education standards (Centers for the Disease Control and Prevention [CDC], 2006). Finally, only 16 states require a specific student-teacher ratio in physical education class (SHAPE, 2016).

Assessment and Accountability

In the area of assessment and accountability, close to 33% of states insisted on student assessments that are clearly connected to physical education standards (SHAPE, 2016). About 57% sent student reports to parents/guardians (SHAPE, 2016). Almost 27% mandated a physical fitness assessment for students, and roughly 13% collected Body

Mass Index (BMI) (SHAPE, 2016). Alabama is the only state that does not permit schools to collect data on students' BMIs (SHAPE, 2016). There are additional areas where assessment and accountability mechanisms were reported. For instance, 30.4% use the collection of data to communicate long-term strategic planning of schools; 26.1% use the collection of data to impact school wellness policies; 21.7% use the collection of data to influence school improvement plans; 17.4% use the collection of data to communicate school district results to the state departments of education; and 13.4% disseminate the collection of data to the public (SHAPE, 2016).

Teacher Certification/Licensure and Professional Development

Teacher certification and licensure vary by state and grade levels. Approximately 98% of the states require a stated certified/licensed physical education teacher at the high school level; 88% of states require this certification at the middle school level; and 71% demand it at the elementary level (SHAPE, 2016). However, at the elementary level, 66% of states permit classroom teachers to teach physical education (SHAPE, 2016). Teacher certification and licensure exams are also required in many states. Among the states surveyed, 44% indicated that they require passage of a state certificate and licensure exam to teach physical education (SHAPE, 2016).

In terms of professional development, about 86% of states require physical educators to participate in professional development as a way to maintain or renew their certification and license an increase from 73% in 2012 (SHAPE, 2016). Additionally, about 65% of states are providing professional development funding specifically for physical education, compared to only 20% in 2012 (SHAPE, 2016). The majority of the

states (82%) have teacher evaluation systems, and close to 98% of physical education teachers are included in these evaluations.

Overall, these results are fairly consistent with the 2010 and 2012 Shape of the Nation reports. More than half of the states permit substitutions, waivers, and exemptions, thereby reducing the effectiveness of physical education and its derived benefits (SHAPE, 2016). Yet, quite a few states have made strides in developing stronger policies in each of the above areas, which is an improvement from previous reports (SHAPE, 2016). As observed in the data, state policymakers and local education leaders have the authority and responsibility to ensure equal access, opportunity, and funding for these programs in each of their respective states and schools. Moreover, they have the power and influence to close these policy loopholes and make certain students are receiving effective, daily physical education in schools.

Theme III: The Political Curtain

The third and final theme focused on factors that influenced members of Congress policy decisions to defer physical education to the state and local levels, and to provide equal access, opportunity, and funding to all K-12 public schools. The factors that impacted these decisions included: problems of NCLB, education as a civil right, ending federal control, empowering state and local levels, bipartisan and bicameral support for ESSA, leadership, constituents, lobbyists/interest groups, professional experiences, personal experiences, politics and political ideology, priorities, values, staff involvement, inclusion of smaller bills, and authoring provisions. Taken together, these factors played a significant role in how members of Congress identified public policy problems, set agendas, formulated policy, and adopted policy with respect to ESSA.

Based on the data illustrated from this theme, several insights can be gleaned. Chief among these is that the policymaking process is highly complex and difficult to evaluate. Oleszek, Oleszek, Rybicki, and Heniff (2016) argued that lawmaking in Congress is not neat, precise, and static because there are a multitude of forces occurring on Capitol Hill. Part of this reason pertains to the growing number of members who come to Congress with new and different ideas about the policymaking process (Oleszek, Oleszek, Rybicki, & Heniff, 2016). Other reasons pertain to the interests, pressures, perceptions, and prejudices of Members of Congress. These attitudes and perspectives are constantly evolving because of election cycles, mandates from the executive and judicial branches, international situations, special interest groups, and the media (Oleszek, Oleszek, Rybicki, & Heniff, 2016).

In addition, there is no formula that can explain how members of Congress identify public policy problems, set agendas, formulate policy, and adopt policy in education. Anderson (2011) argued that the policymaking process is fundamentally a “political process” that encompasses disagreements and exchanges among public officials and the citizenry over competing interests, values, and priorities (p. 2). The process represents conflict, negotiation, power, bargaining, compromise, and even deception and bribery (Anderson, 2011). However, the “politics” within the policymaking process, albeit inauspicious at times, permits members of a democratic society to reconcile different viewpoints (Anderson, 2011). This is what makes our country and system of government unique.

In spite of this point, there are rules, procedures, precedents, and customs that inform the strategies and tactics used by members of Congress in the policymaking

process (Oleszek, Oleszek, Rybicki, & Heniff, 2016). However, sometimes these rules and procedures are changed, modified, or even ignored (Oleszek, Oleszek, Rybicki, & Heniff, 2016). A case in point is the House of Representatives and Senate. Article I, section 5 of the U.S. Constitution states, “Each House may determine the Rules of its Proceedings” (U.S. Constitution, Article 1, Section 5 1789). The purpose of having rules and procedures is to offer stability, substantiate decisions, share responsibility, protect minority rights, dissolve conflict, and delegate power (Oleszek, Oleszek, Rybicki, and Heniff, 2016). The key, however, is knowing how to operate within these rules and procedures because they can have a profound impact on the outcomes of policies (Oleszek, Oleszek, Rybicki, & Heniff, 2016).

This leads to the following insight, which revolves around the three dimensions of power (Lukes 2005; Gaventa, 1980). Power can be described as difficult to pinpoint (Bachrach & Baratz, 1962), amorphous, occurring between individuals or groups, and presupposes certain values (Lukes, 2005). Lukes (2005) defines power as, “A exercises power over B when A affects B in a manner contrary to B’s interest” (p. 30). The first dimension of power is concerned with analyzing specific, overt behavior that represents decisions on key issues (Lukes, 2005). These key issues center on policy preferences, which can be achieved through explicit mechanisms such as political resources—votes, jobs, and influence (Gaventa, 1980).

This first dimension can be seen through passage of ESSA into law. In order for a bill to become a law, it must pass through a series of decision points between the House of Representatives, Senate, and the President of the United States. For example, on July 8, 2015, the House of Representatives passed the Student Success Act on a vote of 218-

213. On July 16, 2015, the Senate passed the Every Child Achieves Act on a vote of 81-17. On November 19, 2015, the Conference Committee met and passed the Every Student Succeeds Act (ESSA) by a vote of 39-1. On December 2, 2015, the House of Representatives passed ESSA by a vote of 359-64, and the Senate passed ESSA on a vote of 85-12. President Obama signed ESSA into law on December 10, 2015. The first dimension of power was seen in ESSA as evidenced by the rules and procedures of signing a bill into law.

The second dimension of power focuses on a mobilization of bias. A mobilization of bias can be viewed as a framework of major values, beliefs, norms, rules, procedures that work to the advantage of some people and at the cost of others (Bachrach & Baratz, 1970). This framework is seen from the perspective of decisions and non-decisions by ensuring compliance over the non-powerful. For example, the powerful can bring some issues up for debate (decisions), while at the same time avoid other issues (non-decisions). The mechanisms used to achieve a mobilization of bias can be either direct or indirect. Direct mechanisms include values, beliefs, rules, norms, and institutional procedures, while indirect mechanisms can be institutional inaction and anticipated reaction of the powerful directed to the powerless (Gaventa, 1980).

In the second dimension, Chairman Alexander (R-TN), Chairman Kline (R-MN), Ranking Member Murray (D-WA), and Ranking Member B. Scott (D-VA) used their positions in the committee to identify public policy problems (NCLB), set the agenda (revising NCLB/ESEA), formulate policy (ESSA), and adopt policy (ESSA) with respect to ESSA. In regards to physical education, Chairman Alexander and Ranking Member Murray made the decision to include health and physical education as part of the

definition of a well-rounded education. The data indicated that they were committed to recognizing health and physical education in ESSA. Therefore, it was reflected in the list of agenda items among the leadership. The inference that can be drawn is that rank on the committee plays a significant role in how some items make the agenda (decisions), while others do not (non-decisions).

The third dimension of power focuses on the shaping of consciousness. That is, it is centered on influencing the metacognition of the non-powerful by controlling or alternating the schemas behind their decisions (Lukes, 2005). It is grounded in various issues, overt and covert conflict, and theoretical or concrete interests (Lukes, 2005). The mechanisms used to achieve a shaping of consciousness are social myths, language, and symbols (Gaventa, 1980). However, there are direct and indirect ways that these mechanisms can be achieved. Direct ways are the dissemination of information, the mass media, and/or the socialization process (Gaventa, 1980). Indirect ways include: constant defeat, lack of knowledge and understanding of the issues, and the manipulation of myths and symbols (Gaventa, 1980).

In this study, the third dimension of power can be seen in floor debates, press releases, audio recordings, and letters among members of Congress. The various data sources revealed that members of Congress attempted to persuade their colleagues on both sides of the aisle, as well as ranking members on the education committees, and the President of the United States, to accept their viewpoints on ESSA. As indicated in the data, Democrats wanted to make sure that ESSA included certain federal guidelines that helped lower socioeconomic students receive the financial resources needed for a quality education. On the other hand, the Republicans wanted to end federal control and return

much of the authority and responsibility of education to the state and local levels. In the Conference Committee, the two parties compromised on these positions, passed it in each chamber respectively, and sent a bipartisan bill to the President's desk.

The final insight that can be gleaned from the third theme is the omission of three major factors that could have influenced the policymaking process within ESSA. They are research, time constraints, and scheduling deadlines. Morandi (2009) argued that research is a major factor influencing the decisions behind the legislative process. Based on the data collected in this study, members of Congress did not cite nor make reference to the use of data and research to inform their policy decisions regarding education or ESSA. Morandi (2009) stated that part of the reason may be the way the research is presented and communicated. He also suggested that the timing of the research plays a critical role in how legislation gets drafted (Morandi, 2009).

The other two factors that were not mentioned in the data were time constraints and deadlines (Oleszek, Oleszek, Rybicki, & Heniff, 2016). Oleszek, Oleszek, Rybicki, and Heniff (2016) posited that breaks, adjournments, and Congressional cycles (two-year) can impact the legislative process. More specifically, time constraints can contribute to brinkmanship among political parties, chambers, and the different branches of government (Oleszek, Oleszek, Rybicki, & Heniff, 2016). On the other hand, deadlines can encourage logrolling between members of Congress and political parties in order to move legislation (Oleszek, Oleszek, Rybicki, & Heniff, 2016). Taken together, these factors were not unearthed in the data.

Implications: Policy, Practice, and Research

In light of the data collected and discussion surrounding themes one, two, and three, there are several implications for policy, practice, and research. These implications should be viewed as recommendations or suggestions for helping to advance the field of health and physical education.

Policy

In the area of policy, it is recommended that states require school districts to report on physical education programs and adherence to state laws and regulations governing physical education. This suggestion is supported by prominent physical education scholars (e.g., Siedentop, 2009; Sanchez-Vaznaugh et al., 2012). According to the 2016 Shape of the Nation Report, there still remains varying degrees of strength and comprehensiveness regarding physical education policies and implementation approaches at the state and local levels. As a result, state policies are often ambiguous, thereby allowing local levels discretion over implementation details (SHAPE, 2016). This variability and ambiguity can lead to policy “loopholes,” which can detract from program effectiveness. Thompson, Vittinghoff, Linchey, and Madsen (2015) found that public disclosure of physical education policy compliance could be a viable strategy to improve adherence to physical education policies in K-12 schools.

Because physical education is primarily a state and local issue, data is needed to properly track and monitor individual schools and school districts. To facilitate this, it is suggested that state departments of education, specifically the state physical education coordinator, establish, update, and monitor a database on various reporting requirements. For example, school districts should report on the following for physical education: time

requirements, high school graduation requirements, exemptions, waivers, substitutions, standards, curriculum, funding, equipment, facilities, class size, student assessment, accountability, teacher certification/licensure, professional development, and teacher evaluations. In doing so, this data would allow state departments of education to properly assess and evaluate compliance to state regulations and laws. It would also permit state policymakers and local education leaders to compare and contrast policies both within and outside their state, develop and implement policies with evidenced-based elements (Eyler et al., 2007), identify areas in need of programmatic improvement and funding, and provide evidence of overall program effectiveness for communities.

Practice

The Society of Health and Physical Educators of America (SHAPE) established an initiative entitled, “50 Million Strong by 2029.” The purpose of this initiative is for all students who attend America’s elementary and secondary schools to graduate from high school with the knowledge, skills, and dispositions needed to live healthy, active lifestyles as result of comprehensive health and physical education programs (SHAPE, 2015b). One aspect to meeting this goal is that K-12 health and physical educators need to collect data on their students’ progress toward meeting the national standards that define a physically literate person. By doing so, state policymakers and local educational leaders will be more willing to support physical education in schools by providing the necessary time and resources needed to meet SHAPE America’s goal.

However, practitioners face barriers to this goal. They include: access to and lack of facilities (Barroso et al., 2005; Morgan & Hansen, 2008), limited class time (Barroso et al., 2005; Morgan & Hansen, 2008), over packed curriculum (Morgan & Hansen,

2008), access to and shortage of equipment (Barroso et al., 2005), large class sizes (Barroso et al., 2005; Morgan & Hansen, 2008), budget restrictions (Morgan & Hansen, 2008), quality of facilities (Barroso et al., 2005), and insufficient number of physical education staff (Barroso et al., 2005; Dwyer et al., 2005). Thus, state policymakers and local education leaders need to mitigate these problems by using the power and authority afforded to them by the federal government in the wake of ESSA. Since ESSA delegated much authority and control to state and local leaders, they have a moral and professional obligation to fix the problems impacting K-12 education, including physical education.

Research

Future research needs to focus on how state policymakers and local education leaders identify policy problems, set agendas, formulate, adopt, implement, fund, and evaluate policies with respect to physical education in schools. Both qualitative and quantitative research approaches are needed to explore this area. For example, interviews and focus groups could be conducted with state policymakers and local educational leaders over those issues that would persuade them to support physical education in schools (SHAPE, 2016). Environmental observations in local schools could be carried out to evaluate and assess the implementation and compliance of physical education policies (SHAPE, 2016). Artifacts could be collected in the form of building level schedules and board of education approved physical education policies. Surveys could be conducted to determine if schools are providing the essential components of a physical education program, which include policy and environment, curriculum, appropriate instruction, and student assessment (SHAPE, 2015a).

Trustworthiness of the Data

Throughout the research process, trustworthiness of the data was established. This was achieved through credibility, transferability, dependability, and confirmability. Within each of these strategies, several techniques were utilized, such as prolonged engagement, triangulation, negative case analysis, member checking, analytic memorandums, rich, thick description, audit trails, a research journal, a codebook, a network display, and reflexive bracketing.

Credibility

In naturalistic inquiry, credibility is concerned with the accuracy and believability of the results by those that were studied (Toma, 2006). In this study, credibility was accomplished through prolonged engagement, triangulation, negative case analysis, and member checking. Prolonged engagement occurred through several in-person trips to Washington D.C., phone calls, and email exchanges with various staffers who were directly and indirectly affiliated with the congressional education committees. The outcome of these conversations led to greater understanding of the hidden complexities and dynamics associated with the policymaking process at the national level. A case in point was the recruitment process. Prolonged engagement also occurred by attending SHAPE America's 2016 Policy Summit, participating in the 2014, 2015, and 2016 Speak Out Day events, and constantly reading the literature on physical education policy.

Triangulation was achieved through the collection and analysis of various primary sources. Among these were the participants: members of Congress who sat on the Health, Education, Labor, and Pensions Committee (HELP) ($n = 21$), the Subcommittee on Early Childhood, Elementary, and Secondary Education ($n = 14$),

national policymakers who met the inclusion/exclusion criteria for participation ($n = 3$), staffers ($n = 6$), and legislative liaisons ($n = 2$). Another source was semi-structured interviews ($n = 6$) using a variety of formats: face-to-face ($n = 0$), email ($n = 6$), and telephone ($n = 1$). Still, other sources included: the researcher's reflective journal entries ($n = 32$), press releases ($n = 60$), floor speeches ($n = 13$), press conferences ($n = 1$), a hearing ($n = 1$), an op-editorial piece ($n = 1$), first person statements derived from members of Congress websites ($n = 5$), letters ($n = 3$), a committee statement ($n = 1$), enacted legislation ($n = 1$), and a policy guide ($n = 1$). Together, each of these sources helped achieve triangulation of the data.

Negative case analysis was accomplished by refining the central research question and writing analytical memorandums. The central research question changed from what role, if any, do members of Congress require quality physical education in U.S. schools from a public policy perspective to what role, if any, do members of Congress require daily physical education in U.S. schools from a public policy perspective? The word quality was supplanted by the word daily because the former gave the indirect impression that poor physical education programs exist in the U.S. schools. Also, the co-investigator felt it would be extremely difficult for members of Congress to regulate the quality of a specific subject matter from a public policy perspective.

The second way negative case analysis was achieved was through analytic memorandums written in the researcher's journal. The aim of writing memorandums is to record and ponder the coding choices, the research process itself, and the outcome of the results (Saldaña, 2009). Throughout the data collection and analysis process, the co-investigator wrote analytic memorandums in the form of journal entries. These

memorandums assisted in analyzing the research process from various viewpoints looking for alternative ways of interpreting the data and answering the research questions. The topics ranged from recruitment strategies to non-responsive participants, participant interviews, protocols, and data analysis procedures.

Member checking was used to achieve credibility as well. Given the nature and preferences of the participants, the majority of interview data came from emails ($n = 5$). Therefore, minimal member checking occurred because the participants had full autonomy and control over the written word or text. As a cautionary measure, the co-investigator did inform the participants they could alter or change the wording of the interviews at any time. No participants chose a face-to-face interview despite the co-investigator's willingness to travel to Washington D.C. One participant elected for a telephone interview, which was transcribed by the co-investigator. No audio recording device was used. At the conclusion of the interview, the co-investigator spent four hours reviewing and revising the notes for accuracy, detail, and authenticity. Upon completion, the co-investigator sent the transcript to the participant where it was reviewed and edited. The co-investigator received the revised transcript two days after the initial interview.

Transferability

Transferability is concerned with providing scholars with enough rich, thick description of the phenomenon that will allow them to apply to other cases or settings (Shenton, 2004). In this study, transferability was achieved by culling through thousands of pages of textual data in order to identify pertinent quotes and information related to the research questions. Once this was achieved, the data was systematically coded and stored in a database. From here, additional coding cycles occurred to refine the data segments

based on the works of Ponterotto's (2006) and Rubin and Rubin (2012). The process of formally ensuring rich, thick description occurred in the fifth cycle of coding once all the coding names were finalized. The following question was posed to each data segment: Does the data answer the research questions with depth, detail, vividness, nuance, and richness? Each term was defined by the work of Rubin and Rubin (2012). The purpose of defining each of these terms was to allow the co-investigator to compare and contrast the raw data with the definitions. If the data met each of the definitions, it was retained. If the data did not meet the definitions, it was omitted. Once all the data was analyzed, it was then copied and pasted onto a separate spreadsheet identifying each of the different themes and subthemes.

Dependability

Dependability in qualitative research is the process by which the investigator identifies and describes how the research was planned and conducted, what situations arose in the field, and how the study met its goals and objectives (Shenton, 2004). In this study, dependability was achieved by establishing two audit trails. The first audit trail surrounded the recruitment database. This database was created in Microsoft excel and contained nine spreadsheets: Senate, House of Representatives, supporters of physical education (members of Congress), gatekeepers, press secretaries, policy artifacts, SHAPE America, Senate buildings, and House of Representative buildings.

In the spreadsheets that involved the Senate, House of Representatives, gatekeepers, supporters of physical education, and press secretaries, several items were documented and recorded over a seven month period (November, 2015 - April, 2016). They included: names, ranks, party affiliations, state affiliations, email addresses,

phone/fax numbers, office locations, contact forms, general comments, and conversational outcomes. The conversational outcomes were divided into eight areas: office policy, too busy/unavailable, unresponsive, openly declined participation, referral, data could not be retained, perceived lack of knowledge and understanding of the topic, and agreed to participate. The purpose of doing this was to accurately record and facilitate the recruitment process.

In the spreadsheet containing the policy artifacts, names, parties, states, and conversational outcomes were documented. The co-investigator recorded how many and what types of documents were collected from each participant; the dates they were collected and coded; and whether or not they were uploaded to the codebook. In the spreadsheet on SHAPE America, names, titles, phone/fax numbers, emails, office locations, and conversational outcomes were documented as well. It included many prominent individuals affiliated with this organization, such as Dr. Dolly Lambdin, Mrs. Carly Braxton, Mrs. Katie Grady, Mrs. Karen Johnson, Dr. Steven Jefferies, and Dr. Paul Roetert. In the spreadsheet on buildings associated with the Senate and House of Representatives, the office locations of members of Congress who participated on the various education committees were documented. The dates of when the co-investigator personally visited each office were recorded.

The second audit trail pertained to the researcher's journal. Thirty-two entries were written over a 12 month period (September, 2015-August, 2016). The journal entries reflected different topics as experienced by the co-investigator in the field. Some of these included: interview reflections, data collection concerns, policy summit, Speak Out Day events, recruitment issues, and personal visits to Washington D.C. As a whole,

these journal entries provided insight into how the study unfolded from its inception to its conclusion. As Janesick (1999) pointed out, a research journal helps to better understand the phenomenon being explored. Borg (2001) argued that it can encourage more “metacognitive awareness and reflective depth” (p. 170). In this study, the research journal achieved both of these goals, while simultaneously providing a record of decisions for future scholars to review and analyze.

Confirmability

Confirmability in qualitative research is about reporting the findings of the participants and not the researcher’s predilections (Shenton, 2004). In this study, confirmability was accomplished through a codebook, network displays, and the researcher’s journal. The co-investigator’s codebook served as an audit trail and was organized into eight tabs or spreadsheets: first cycle, second cycle, third cycle, fourth cycle, fifth cycle, a separation of powers (theme 1), the great equalizer (theme 2), and the political curtain (theme 3). Within each spreadsheet, the data was generally organized by source, type of data, position, party, committee, data segments (quotes), and code. Each spreadsheet, however, was designed for a specific purpose.

The purpose of the first cycle spreadsheet was to systematically collect and code all of the attribute, descriptive, in-vivo, and process codes. The goal of the second cycle spreadsheet was to convert the first cycle codes to pattern codes. The aim of the third cycle spreadsheet was to create basic themes and subthemes from the pattern codes. The objective of the fourth cycle spreadsheet was to test the themes and subthemes using a set of inclusion-exclusion criteria. The criteria consisted of the definitions associated with each of the different themes and subthemes. The focus of the fifth cycle spreadsheet was

to evaluate whether or not the data answered the research questions with depth, detail, vividness, and richness. The final three spreadsheets (i.e., 6, 7, 8) displayed the data contained in themes one, two, and three. In short, the purpose of having a codebook was to organize, manage, and analyze the data in a rigorous and systematic way that led to confirmability.

Once the codebook was completed, a network display was developed to further achieve confirmability. Please see figure 1 as it provides a graphical representation of the three major themes and subthemes in this study. They are theme I: a separation of powers; theme II: the great equalizer; and theme III: the political curtain. The first theme contains two sub-themes: federal education law as defined in ESSA and ESEA; and the federal government's role in K-12 education. The second theme focuses on the federal government's responsibilities in K-12 education, which reflects equal access, opportunities, and funding to all Americans. The third and final theme addresses those factors or reasons that influenced members of Congress policy decisions behind themes one and two. Figure 1 helped achieve confirmability because it offers a pictorial representation of the results.

Miles and Huberman (1994) argued that part of achieving confirmability involves disclosing the researcher's biases and beliefs about the topic under investigation. The following are the co-investigator's beliefs, attitudes, assumptions, values, and/or perceptions about the research prior to data collection and analysis:

- National policymakers lack an in-depth understanding and awareness of the benefits of physical education programs in schools.

- Policymakers are preoccupied with improving mathematics and language arts standardized test scores at the expense of other subjects because they are the criteria by which our nation’s public schools are measured and evaluated.
- National policymakers lack the care and interest in addressing the obesity epidemic through school-based programs such as health and physical education.
- Even though obesity was recently labeled a disease in 2013 by the American Medical Association (Pollack, 2013) and is considered a global public health crisis (Karick & Kanekar, 2012), national policymakers still believe it is a state and local issue.
- Policymakers are not convinced that health and physical education in schools is a viable solution to addressing America’s obesity-related health care costs.
- Members of Congress believe that physical education in U.S. schools is a state and local issue and that the policymaking process should be deferred to this level.
- Health and physical education is an important and vital subject in a school’s curriculum because it is the only subject that teaches students the knowledge, skills, and dispositions needed to live a healthy, active lifestyle.

To address these biases and beliefs, the co-investigator engaged in the process of reflexive bracketing. Reflexivity is defined as the “ongoing process of self-awareness adopted by researchers in an attempt to demonstrate the trustworthiness of their findings” (Kingdon, 2005, p. 622). Bracketing is the process of ensuring that the steps taken during the data collection and analysis were warranted and justified (Ahern, 1999). Reflexive bracketing was accomplished on the first journal entry and revisited throughout the research process. However, methodological decisions are never completely free of one’s

values (Griffin, 1994). The expectation though is that qualitative researchers are expected to stow away these values, to the greatest extent possible, throughout the research process.

Limitations of the Study

According to Thomas, Nelson, and Silverman (2011), all research studies have limitations. Thomas, Nelson, and Silverman (2011) described them as “a possible shortcoming or influence that either cannot be controlled or is the result of the delimitations imposed by the investigator” (p. 60). Ellis and Levy (2009) argued that limitations are unintended consequences that impact the internal validity of a study. Internal validity is the process where the researcher attempts to gather, analyze, and report the results in a manner in which they were originally intended (Ellis & Levy, 2009).

The limitations of this study focused on access to the participants and the sample size of the interviews. In this study, gaining access to the participants for interview data was the most difficult part of the data collection process. The participants used to explore this phenomenon were senators and representatives from the 114th-115th Congress who sat on the Senate HELP Committee ($n = 21$), and the Subcommittee on Early Childhood, Elementary, and Secondary Education ($n = 16$). Additional participants were national policymakers ($n = 3$), staffers ($n = 52$), gatekeepers ($n = 10$), press secretaries ($n = 40$), and legislative liaisons ($n = 2$) who met the inclusion/exclusion criteria for participation. The sampling procedures included: key informants, key knowledgeable, and reputational sampling, as well as snowball or chain sampling (Patton, 2015).

Of the 52 members of Congress surveyed, zero answered the interview questions. Of the 52 staffers from the members of Congress who sat on the aforementioned committees, six answered the interview questionnaire. Similarly, of the 53 national policymakers, gatekeepers, and press secretaries solicited for interviews, zero participated. Of the two legislative liaisons asked to volunteer, two completed the interview questionnaire. Thus, of 159 total participants surveyed, eight completed the interview questionnaire. Reasons for these numbers can be attributed to one or more of the following: a) office policy ($n = 15$), b) too busy/unavailable ($n = 61$), c) unresponsive ($n = 48$), d) openly declined participation ($n = 11$), e) referral ($n = 4$), data could not be obtained ($n = 12$), and lack of knowledge and understanding of the topic ($n = 3$).

Peabody et al., (1990) suggested several approaches to gaining access to political elites. First, write a letter on department letterhead explaining the goals and objectives of the project. Second, follow up with telephone calls. Third, when all else fails, visit these political elites personally. Finally, include a former political official into one's study based on their experience and knowledge of the topic. The co-investigator followed Peabody et al.'s (1990) recommendations. In addition, the co-investigator included the use of gatekeepers to improve the recruitment efforts. They included staff members from Senator Booker (D-NJ) and Representative Chris Smith's (R-NJ) offices. Despite these approaches, only eight interviews could be collected.

Another limitation of the study pertained to the unit of analysis, which focused on the policymaking process at the national level. The policymaking process at the state and local levels were not considered for this research study. For example, state policymakers and local educational leaders, such as governors, assemblyman/women, superintendents,

principals, and board of education members were not solicited for interviews or policy artifacts. Rather, the study focused on collecting and analyzing data from members of Congress who sat on the Senate HELP Committee and House of Representatives Subcommittee on Early Childhood, Elementary, and Secondary Education. Additional data was collected and analyzed from staffers and legislative liaisons who were affiliated with the policymaking process at the national level, but not at the state and local levels.

The final limitation pertained to the policy artifacts. Due to the voluminous amounts of publicly available documents, especially from those members of Congress who resided on the Senate HELP Committee and the House of Representatives Subcommittee on Early Childhood, Elementary, and Secondary Education, certain inclusion/exclusion criteria needed to be applied. All artifacts collected in this study had to be written in English and reflect a primary source; the artifact had to originate from the target population or subpopulation; the artifact had to have a direct or indirect connection to physical education in U.S. schools at the national level; the artifact had to have a direct or indirect connection to the policymaking steps of problem identification, agenda setting, policy formulation, and policy adoption; and the artifact had to be published between November 1, 2015 and March 3, 2016. This time period was selected because ESSA was being debated and signed into law. In summary, three limitations enveloped this study: access to participants, unit of analysis, and the inclusion-exclusion criteria for gathering artifacts.

Conclusion

The purpose of this chapter was to discuss the results and implications of the study. Areas addressed were themes one, two, and three; recommendations for policy,

practice, and research; trustworthiness of the data; and the limitations surrounding the research. The themes or results were presented from the perspective of what the data meant, what were alternative ways of viewing the data, and how does the data fit into current thinking and research. Particular attention was directed toward the 2016 Shape of the Nation report. Recommendations for policy, practice, and research focused on state policymakers, local educational leaders, physical education teachers, and state reporting systems. Trustworthiness of the data was achieved through the constructs of credibility, dependability, transferability, and confirmability. The limitations of the study surrounded access to the participants, unit of analysis, and the inclusion-exclusion criteria of the policy artifacts.

References

- Agron, P., Berends, V., Ellis, K., & Gonzales, M. (2010). School wellness policies: Perceptions, barriers, and needs among school leaders and wellness advocates. *Journal of School Health, 80*(11), 527-535.
- Ahern, K. J. (1999). Pearls, pith, and provocation: Ten tips for reflexive bracketing. *Qualitative Health Research, 9*(3), 407-411.
- Altheide, D., & Johnson, J. (2011). Reflections on interpretative adequacy in qualitative research. In N. Denzin & Y. Lincoln (Eds.), *The sage handbook of qualitative research* (4th ed., pp. 581-594). Thousand Oaks, CA: Sage.
- American College of Sports Medicine. (1993). Position stand: Physical activity, physical fitness, and hypertension. *Medicine and Science in Sports and Exercise, 25*(10), i-x.
- American Educational Research Association. (2006). Standards for reporting on empirical social science research in AERA publications. *Educational Researcher, 35*(6), 33-40.
- Amis, J., Wright, P., Dyson, B., Vardaman, J., & Ferry, H. (2012). Implementing childhood obesity policy in a new educational environment: The cases of Mississippi and Tennessee. *American Journal of Public Health, 102*(7), 1406-1413.
- Anderson, J.E. (2011). *Public policymaking: An introduction* (7th ed.). United States of America: Wadsworth Cengage Learning.
- Association for Supervision and Curriculum Development, & Centers for Disease Control and Prevention. (2014). *The whole school, whole community, and whole child: A collaborative approach to learning and health*. Retrieved from <http://www.ascd.org/ASCD/pdf/siteASCD/publications/wholechild/wsc-a-collaborative-approach.pdf>

- Association of Supervision and Curriculum Development. (2015). Whole school, whole community, whole child. Retrieved April 12, 2015, from Association for Supervision, Curriculum, and Development website:
<http://www.ascd.org/programs/learning-and-health/wsccl-model.aspx>
- Aud, S., Wilkson-Flicker, S., Kristapovich, P., Rathbun, A., Wang, X., & Zhang, J. (2013). *The condition of education 2013*. Washington, D.C.: U.S. Department of Education, National Center for Education Statistics.
- Bachrach, P., & Baratz, M. (1962). Two faces of power. *The American Political Science Review*, 56(4), 947-952.
- Bachrach, P., & Baratz, M. (1970). *Power and poverty: Theory and practice*. New York, NY: Oxford University Press.
- Bampton, R., & Cowton, C. (2002). The e-interview. *Forum: Qualitative Social Research*, 3(2). Retrieved from <http://www.qualitative-research.net/index.php/fqs/article/view/848/1843>
- Barroso, C.S., McCullum-Gomez, C., Hoelscher, D.M., Kelder, S.H., & Murray, N.G. (2005). Self-reported barriers to quality physical education by physical education specialists in Texas. *Journal of School Health*, 75(8), 313-319.
- Basch, C. (2011). Healthier students are better learners: A missing link in school reforms to close the achievement gap. *Journal of School Health*, 81(10), 593-598.
- Beddoes, Z., Prusak, K., & Hall, A. (2014). Overcoming marginalization of physical education in America's schools with professional learning communities. *Journal of Physical Education, Recreation, and Dance*, 85(4), 21-27.
- Bernard, H. R. (2011). *Research methods in anthropology: Qualitative and quantitative approaches* (5th ed.). New York, NY: AltMira.
- Biro, F., & Wien, M. (2010). Childhood obesity and adult morbidities. *American Journal of Clinical Nutrition*, 91(5), 1499S-1505S.

- Blair, S. (2009). Physical inactivity: The biggest public health problem of the 21st century. *British Journal of Sports Medicine*, 43(1), 1-2.
- Bodgen, J. (2003). *How schools work and how to work with schools: A primer for professionals who serve children and youth*. Alexandria, VA: National Association of State Boards of Education.
- Booth, W., Colomb, G., & Williams, J. (2008). *The craft of research* (3rd ed.). Chicago & London: The University of Chicago Press.
- Borg, S. (2001). The research journal: A tool for promoting and understanding researcher development. *Language Teaching Research*, 5(2), 156-177.
- Bouie, L., Bodgen, J., Conley, S., Gleason-Senior, J., Haggerty, R., Haley, M., . . . Zavacky, F. (Eds.). (2013). *The wellness impact: Enhancing academic success through healthy school environments*. Retrieved from GenYouth Foundation website:
<http://www.nationaldairycouncil.org/ChildNutrition/Documents/Wellness%20Impact%20Report.pdf>
- Bradley, B., & Green, A. (2013). Do health and education agencies in the United States share responsibility for academic achievement and health: A review of 25 years of evidence about the relationship of adolescents' academic achievement and health behaviors. *Journal of Adolescent Health*, 52(5), 523-532.
- Braveman, P., & Egerter, S. (2008). *Overcoming obstacles to health: Report from the Robert Wood Foundation to the commission to build a healthier America*. Retrieved from <http://www.commissiononhealth.org/PDF/ObstaclesToHealth-Report.pdf>
- Brosnahan, J., Steffen, L., Lytle, L., Patterson, J., & Boostrom, A. (2004). The relation between physical activity and mental health among Hispanic and Non-Hispanic White adolescents. *Archives of Pediatrics and Adolescent Medicine*, 158(8), 818-823.

- Brownson, R., Chiqui, J., & Stamatakis, K. (2009). Understanding evidence-based public health policy. *American Journal of Public Health, 99*(9), 1576-1583.
- Cale, L., & Harris, J. (2013). 'Every child (of every size) matters' in physical education! Physical education's role in childhood obesity. *Sport, Education, and Society, 18*(4), 433-452.
- Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, and Social Sciences and Humanities Research Council of Canada. (2014). *Tri-council policy statement: Ethical conduct for research involving humans*.
- Carlson, S., Fulton, J., Lee, S., Maynard, L., Brown, D., Kohl, H., & Dietz, W. (2008). Physical education and academic achievement in elementary school: Data from the early childhood longitudinal study. *American Journal of Public Health, 98*(4), 721-727.
- Carnoy, M., & Rothstein, R. (2013). *What do international tests really show about U.S. student performance*. Retrieved from Economic Policy Institute website: <http://s2.epi.org/files/2013/EPI-What-do-international-tests-really-show-about-US-student-performance.pdf>
- Carter, N., Khan, K., McKay, H., Petit, M., Waterman, C., Heinonen, A., . . . Flicker, L. (2002). Community-based exercise program reduces risk factors for falls in 65 to 75 year-old women with osteoporosis: Randomized controlled trial. *Canadian Medical Association Journal, 167*(9), 997-1004.
- Caspersen, C., Powell, K., & Christenson, G. (1985). Physical activity, exercise, and physical fitness: Definitions and distinctions for health-related research. *Public Health Report, 100*(2), 126-131.
- Castelli, D., Hillman, C., Buck, S., & Erwin, H. (2007). Physical fitness and academic achievement in third and fifth grade students. *Journal of Sport and Exercise Physiology, 29*(2), 239-252.
- Cawley, J., Frisvold, D., & Meyerhoefer, C. (2013). The impact of physical education on obesity among elementary school children. *Journal of Health Economics, 32*(4), 743-755.

Cawley, J., & Meyerhoefer, C. (2012). The medical care costs of obesity: An instrumental variables approach. *Journal of Health Economics*, 31(1), 219-230.

Center of Academic Integrity by the Office of College Relations. (1999). *The fundamental values of academic integrity*. Retrieved from <http://www.academicintegrity.org/icai/assets/FVProject.pdf>

Center on Educational Policy. (2007). *Choices, changes, and challenges: Curriculum and instruction in the NCLB era*. Washington, D.C.: Center on Educational Policy.

Centers for Disease Control and Prevention. (2008). *Make a difference at your school*. Retrieved from <http://www.cdc.gov/HealthyYouth/keystrategies/pdf/make-a-difference.pdf>

Centers for Disease Control and Prevention. (2010). *The association between school-based physical activity, including physical education, and academic performance*. Atlanta, GA: U.S. Department of Health and Human Services.

Centers for Disease Control and Prevention. (2013). A growing problem: What causes childhood obesity? Retrieved November 23, 2014, from Centers for Disease Control and Prevention website: <http://www.cdc.gov/obesity/childhood/problem.html>

Centers for Disease Control and Prevention. (2014a). About BMI for adults. Retrieved from Centers for Disease Control and Prevention website: http://www.cdc.gov/healthyweight/assessing/bmi/adult_bmi/index.html?s_cid=tw_ob064

Centers for Disease Control and Prevention. (2014a). *Health and academic achievement*. Retrieved from http://www.cdc.gov/healthyyouth/health_and_academics/pdf/health-academic-achievement.pdf

Centers for Disease Control and Prevention. (2014b). About BMI for children and teens. Retrieved from Centers for Disease Control and Prevention website: http://www.cdc.gov/healthyweight/assessing/bmi/childrens_bmi/about_childrens_bmi.html

Centers for Disease Control and Prevention. (2014b). Health and academics. Retrieved July 27, 2014, from Centers for Disease Control and Prevention website: http://www.cdc.gov/healthyyouth/health_and_academics/index.htm

Centers for Disease Control and Prevention and Bridging the Gap Research Program. (2014). *Strategies for supporting quality physical education and physical activity in schools*. Retrieved from Bridging the Gap website: http://www.bridgingthegapresearch.org/_asset/7bm7jq/BTG_LWP_PEPA_brief_Jun_14.pdf

Centers for the Disease Control and Prevention. (2006). *Physical education curriculum analysis tool*. Retrieved from <http://www.cdc.gov/healthyschools/pecat/pdf/pecat.pdf>

Centers for the Disease Control and Prevention. (2014c). *Physical activity facts* [Fact sheet]. Retrieved July 10, 2014, from <http://www.cdc.gov/healthyyouth/physicalactivity/facts.htm>

Child Nutrition and Women, Infant, and Children (WIC) Reauthorization Act of 2004, 42 U.S.C. §§ Pub. L. No. 108 - 265, sect. 204.

Chomitz, V., Slining, M., McGowan, R., Mitchell, S., Dawson, G., & Hacker, K. (2009). Is there a relationship between physical fitness and academic achievement? Positive results from public school children in the Northeastern United States. *Journal of School Health*, 79(1), 31-37.

Chriqui, J. (2012). *It's time to update your wellness policy: How does your policy compare to policies nationwide?* Retrieved from Bridging the Gap: Research Informing Policies and Practices for Healthy Youth website: http://www.bridgingthegapresearch.org/_asset/68byty/Chriqui_IDPH_2012_wellness_18Dec12.pdf

Chriqui, J., Resnick, E., Schneider, L., Schermbeck, R., Adcock, T., Carrion, V., & Chaloupka, F. (2013). *School district wellness policies: Evaluating progress and potential for improving children's health five years after the federal mandate*. Retrieved from Bridging the Gap website: http://www.bridgingthegapresearch.org/_asset/r08bgt/WP_2010_report.pdf

- Christeson, W., Taggart, A., & Messner-Zidell, S. (2010). *Too fat to fight: Retired military leaders want junk food out of America's schools*. Retrieved from http://cdn.missionreadiness.org/MR_Too_Fat_to_Fight-1.pdf
- Coe, D., Peterson, T., Blair, C., Schutten, M., & Peddie, H. (2013). Physical fitness, academic achievement, and socioeconomic status in school-age youth. *Journal of School Health, 83*(7), 500-507.
- Collier, D. (2011). Increasing the value of physical education: The role of assessment. *Journal of Physical Education, Recreation, and Dance, 82*(7), 38-41.
- Cook, B., Li, D., & Heinrich, K. (2014). Obesity, physical activity, and sedentary behavior of youth with learning disabilities and ADHD. *Journal of Learning Disabilities, 1-14*. Advanceonlinepublication.doi:10.1177/0022219413518582
- The Cooper Institute. (2014). Healthy fitness zone standards. Retrieved August 15, 2014, from FitnessGram website: <http://www.fitnessgram.net/program-overview/healthy-fitness-zone-standards>
- Corbin, C. B., & Lindsey, R. (2002). *Fitness for life* (4th ed.). Human Kinetics.
- Couturier, L., Chepko, S., & Holt/Hale, S. (2014). *National standards and grade level outcomes for K-12 physical education*. Champaign, IL: Human Kinetics.
- Cox, L., Berends, V., Sallis, J., John, J., McNeil, B., Gonzalez, M., & Agron, P. (2011). Engaging school governance leaders to influence physical activity policies. *Journal of Physical Activity and Health, 8*(supplement 1), S40-S48.
- Creswell, J. (2013). *Qualitative inquiry and research design: Choosing among five approaches* (3rd ed.). Los Angeles, CA: Sage.
- Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches*. Los Angeles, CA: Sage.
- Dahl, R. (1957). The concept of power. *Behavioral Science, 2*(3), 201-215.
- Dahl, R. (1958). A critique of the ruling elite model. *The American Political Science Review, 52*(2), 463-469.

- Dahl, R. (1961). *Who governs? Democracy and power in an American city*. New Haven, CT: Yale University Press.
- Dale, D., & Corbin, C. (2000). Physical activity participation of high school graduates following exposure to conceptual or traditional physical education. *Research Quarterly for Exercise and Sport*, 71(1), 61-68.
- Dale, D., Corbin, C., & Dale, K. (2000). Restricting opportunities to be active during school time: Do children compensate by increasing physical activity levels after school? *Research Quarterly for Exercise and Sport*, 71(3), 240-248.
- Daniels, S., Arnett, D., Eckel, R., Gidding, S., Hayman, L., Kumanyika, S., . . . Williams, C. (2005). Overweight in children and adolescents: Pathophysiology, consequences, prevention, and treatment. *Circulation*, 115(15), 1999-2012.
- Datar, A., & Sturm, R. (2004). Physical education in elementary school and body mass index: Evidence from the early childhood longitudinal study. *American Journal of Public Health*, 94(9), 1501-1506.
- Denzin, N. (1978). *Sociological methods*. New York, NY: McGraw-Hill.
- Denzin, N., & Lincoln, Y. (2011). The discipline and practice of qualitative research. In N. Denzin & Y. Lincoln (Eds.), *The sage handbook of qualitative research* (4th ed., pp. 1-19). Thousand Oaks, CA: Sage.
- Denzin, N.K. (1989). *Interpretive interactionism*. Newbury Park, CA: Sage.
- Dialsingh, I. (2008). Face-to-face interviewing. In P. Lavrakas (Ed.), *Encyclopedia of survey research methods* (pp. 260-262). Thousand Oaks, Ca: Sage.
- Dimeo, F., Bauer, M., Varahram, I., Proest, G., & Halter, U. (2001). Benefits from aerobic exercise in patients with major depression: A pilot study. *British Journal of Sports Medicine*, 35(2), 114-117.

- Dishman, R., Motl, R., Saunders, R., Felton, G., Ward, D., Dowda, M., & Pate, R. (2004). Self-efficacy partially mediates the effect of a school-based physical-activity intervention among adolescent girls. *Preventive Medicine, 38*(5), 628-636.
- Dishman, R., Motl, R., Saunders, R., Felton, G., Ward, D., Dowda, M., & Pate, R. (2005). Enjoyment mediates effects of a school-based physical-activity intervention. *Medicine and Science in Sports and Exercise, 37*(3), 478-487.
- Doak, C.M., Visscher, L.S., Renders, C.M., & Seidell, J.C. (2006). The prevention of overweight and obesity in children and adolescents: A review of interventions and programmes. *Obesity Reviews, 7*(1), 111-136.
- Down-Wamboldt, B. (1992). Content analysis: Method, applications, and issues. *Health Care for Women International, 13*(3), 313-321.
- Duncan, C. A., Nolan, J., & Wood, R. (2002). See you in the movies? We hope not! *Journal of Physical Education, Recreation and Dance, 73*(8), 38-44.
- Dunn, A., Trivedi, M., & O'Neal, H. (2001). Physical activity dose-response effects on outcomes of depression and anxiety. *Medicine and Science in Sports & Exercise, 33*(6), S587-S597.
- Dwyer, J.J., Allison, K.R., Barrera, M., Hansen, B., Goldenberg, E., & Boutilier, M.A. (2003). Teachers' perspective on barriers to implementing physical activity curriculum guidelines for school children in Toronto. *Canadian Journal of Public Health, 94*(6), 448-452.
- Dwyer, T., Coonan, W., Leitch, D., Hetzel, B., & Baghurst, R. (1983). An investigation of the effects of daily physical activity on the health of primary school students in South Australia. *International Journal of Epidemiology, 12*(3), 308-313.
- The Elementary and Secondary Education Act, 20 U.S.C. §§ 89-110 (1965). Retrieved from <https://www.gpo.gov/fdsys/pkg/STATUTE-79/pdf/STATUTE-79-Pg27.pdf>

- Ellis, T., & Levy, Y. (2009). Towards a guide for novice researchers on research methodology: Review and proposed methods. *Issues in Informing Science and Information Technology*, 6(1), 323-337.
- Emmanouel, C., Zervas, Y., & Vagenas, G. (1992). Effects of four physical education teaching methods on development of motor skill, self-concept, and social attitudes of fifth-grade children. *Perceptual and Motor Skills*, 74(3 part 2), 1151-1167.
- Ennis, C. D. (2006). Curriculum: Forming and reshaping the vision of physical education in a high need, low demand world of schools. *Quest*, 58(1), 41-59.
- Every Student Succeeds Act, 20 U.S.C. §§ 114-95 (2015). Retrieved from <https://www.congress.gov/114/plaws/publ95/PLAW-114publ95.pdf>
- Ewart, C., Young, D., & Hagberg, J. (1998). Effects of school-based aerobic exercise on blood pressure in adolescent girls. *American Journal of Public Health*, 88(6), 949-951.
- Ewart, C., Young, D., & Hamberg, J. (1998). Effects of school-based aerobic exercise on blood pressure in adolescent girls. *American Journal of Public Health*, 88(6), 949-951.
- Eyler, A., Brownson, R., Aytur, S., Craddock, A., Doescher, M., Evenson, K., . . . Schmid, T. (2010). Examination of trends and evidence-based elements in state physical education legislation: A content analysis. *Journal of School Health*, 80(7), 326-332.
- Fakhouri, T., Hughes, J., Burt, V., Song, M., Fulton, J., & Ogden, C. (2014). *Physical activity in U.S. youth aged 12-15 years, 2012*. United States Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics.
- Fedewa, A., & Ahn, S. (2011). The effects of physical activity and physical fitness on children's achievement and cognitive outcomes: A meta-analysis. *Research Quarterly for Exercise and Sport*, 82(3), 521-535.

- Filho, A. (2000). *In search of academic identity: Physical education, sport science and the field of human movement studies* (Unpublished doctoral dissertation). The University of Leeds, England.
- Finkelstein, E., Trogon, J., Cohen, J., & Dietz, W. (2009). Annual medical spending attributable to obesity: Payer-and service specific estimates. *Health Affairs*, 28(5), 822-831.
- Fitness Integrated with Teaching Kids Act, S. S.1033, 113th, 1st. (2013).
- Flegal, K., Carroll, M., Ogden, C., & Curtin, L. (2010). Prevalence and trends in obesity among U.S. adults, 1999-2008. *Journal of the American Medical Association*, 303(3), 235-241.
- Fontaine, K., Redden, D., Wang, C., Westfall, A., & Allison, D. (2003). Years of life lost due to obesity. *Journal of the American Medical Association*, 289(2), 187-193.
- France, T., Moosbrugger, M., & Brockmeyer, G. (2011). Increasing the value of physical education in schools and communities. *Journal of Physical Education, Recreation, and Dance*, 82(7), 48-51.
- Fryar, C., Carroll, M., & Ogden, C. (2012). *Prevalence of obesity among children and adolescents: United States, trends 1963-1965 through 2009-2010*. Retrieved September 11, 2013, from Center for Disease Control and Prevention website: http://www.cdc.gov/nchs/data/hestat/obesity_child_09_10/obesity_child_09_10.pdf
- Gaventa, J. (1980). *Power and powerlessness: Quiescence and rebellion in an Appalachian Valley*. John Gaventa.
- Gaventa, J. (1980). *Power and powerlessness: Quiescence and rebellion in an Appalachian Valley*. Urbana and Chicago, USA: University of Illinois Press.
- Geertz, C. (1973). *The interpretation of cultures: Selected essays*. Basic Books.

- Georgesesen, S. (2014). The complex problem of childhood obesity. *Western Journal of Nursing Research, 36*(5), 579-580.
- Glassick, C.E., Huber, M.T., & Maeroff, G.I. (1997). *Scholarship assessed: Evaluation of the professoriate*. San Francisco, CA: Jossey-Bass.
- Goetzal, R., & Ozminkowski, R. (2008). The health and cost benefits of worksite health-promotion programs. *Annual Review of Public Health, 29*(1), 303-323.
- Goñi, A., & Zulaika, L. (2000). Relationships between physical education classes and the enhancement of fifth grade pupils' self-concept. *Perceptual and Motor Skills, 91*(1), 246-250.
- Gostin, L. (1991). Ethical principles for the conduct of human subject research: Population-based research and ethics. *Law, Medicine, and Health Care, 19*(3-4), 191-201.
- GovTrack.us. (2014a). S. 392: Promoting Health as Youth Skills In Classrooms And Life Act. Retrieved November 1, 2014, from GovTrack.us: Tracking the United State Congress website: <https://www.govtrack.us/congress/bills/113/s392>
- GovTrack.us. (2014b). S. 1033: FIT Kids Act. Retrieved November 1, 2014, from GovTrack.us: Tracking United States Congress website: <https://www.govtrack.us/congress/bills/113/s1033>
- Greene, J. (2007). *Mixed methods in social inquiry*. San Francisco, CA: Jossey-Bass.
- Griffin, C. (2004). The advantages and limitations of qualitative research in psychology and education. *Scientific Annals of the Psychological Society of Northern Greece, 2*(1), 3-15.
- Grissom, J. (2005). Physical fitness and academic achievement. *Journal of Exercise Physiology, 8*(1), 11-25.
- Grynbaum, M. (2013). Judge blocks New York City's limits on big sugary drinks. *New York Times*.

- Halfon, N., Verhoef, P., & Kuo, A. (2012). Childhood antecedents to adult cardiovascular disease. *Pediatrics in Review*, 33(2), 51-61.
- Halpern, E.S. (1983). *Auditing naturalistic inquiries: The development and application of a model* (Unpublished doctoral dissertation). Indiana University.
- Hardman, K., & Marshall, J. (2009). *Second world-wide survey of school physical education: Final report*. International Council of Sport Science and Physical Education (ICSSPE).
- Hatch, J.A. (2002). *Doing qualitative research in education settings*. Albany, NY: State University of New York Press.
- Hatch, J.A. (2002). *Doing qualitative research in education settings*. New York, NY: State University New York Press.
- Healthy, Hunger-Free Kids Act of 2010, 42 U.S.C. §§ Pub. L. No. 111-296, sect. 204.
- Healthy People-2020. (2014). Physical activity. Retrieved November 23, 2014, from Healthy People 2020 website: <http://www.healthypeople.gov/2020/topics-objectives/topic/physical-activity>
- Healthy Schools Campaign, & Trust for America's Health. (2013). *Health in mind: Improving education through wellness*. Retrieved from [http://healthamericans.org/assets/files/Health in Mind Report.pdf](http://healthamericans.org/assets/files/Health_in_Mind_Report.pdf)
- Helmrich, S., Ragland, D., Leung, R., A.B., & Paffenbarger, R. (1991). Physical activity and reduced occurrence of non-insulin-dependent diabetes mellitus. *New England Journal of Medicine*, 325(3), 147-152.
- Henry, F. (1978). The academic discipline of physical education. *Quest*, 29(1), 13-29.
- Henry, F. M. (1964). Physical education: An academic discipline. *Journal of Health, Physical Education, Recreation*, 35(7), 32-33, 69.

- Hesse-Biber, S., & Leavy, P. (2011). The ethics of social research. In *The practice of qualitative research* (2nd ed., pp. 59-89). Thousand Oaks, CA: Sage.
- Hillman, C., Erickson, K., & Kramer, A. (2008). Be smart, exercise your heart: Exercise effects on brain and cognition. *Science and Society*, 9(1), 58-65.
- Hillman, C., Pontifex, M., Raine, L., Castelli, D., Hall, E., & Kramer, A. (2009). The effect of acute treadmill walking on cognitive control and academic achievement in preadolescent children. *Neuroscience*, 159(3), 1044-1054.
- Hodder, I. (1994). The interpretation of documents and material culture. In N. K. Denzin & Y. Lincoln (Eds.), *Handbook of qualitative research* (pp. 393-402). Thousand Oaks, CA: Sage.
- Holloway, I. (1997). *Basic concepts for qualitative research*. Blackwell Science.
- Holstein, J., & Gubrium, J. (2003). In-person versus telephone interviewing. In J. Holstein & J. Gubrium (Eds.), *Inside interviewing* (pp. 175-194). Thousand Oaks, CA: Sage.
- Hostetler, K. (2005). What is "good" education research? *American Educational Research Association*, 34(6), 16-21.
- Hostetler, K. (2005). What is "good" education research? *Educational Researcher*, 34(16), 16-21.
- Hsieh, H.-F., & Shannon, S. (2005). Three approaches to qualitative content analysis. *Qualitative Health Research*, 15(9), 1277-1288.
- Institute of Medicine. (2012). *Accelerating progress in obesity prevention: Solving the weight of the nation*. Washington, D.C.: The National Academies Press.
- Institute of Medicine. (2013). *Educating the student body: Taking physical activity and physical education to school*. Washington, D.C.: National Academies Press.

International Council of Sport Science and Physical Education. (2010). *International position statement on physical education*. Retrieved November 23, 2014, from International Council of Sport Science and Physical Education website: <http://www.icsspe.org/sites/default/files/International%20Position%20Statement%20on%20Physical%20Education.pdf>

Isaac, E. (2012). What does it mean to be a scholar in the 21st century? *Conference Proceeding: Speech Presented at the Lewis University Celebration of Scholarship*, 78(7), pp. 238-243.

Israel, M., & Hay, I. (2006). *Research ethics for social scientists*. Los Angeles, CA: Sage.

Jackson II, R., Drummond, D., & Camara, S. (2007). What is qualitative research? *Qualitative Research Report in Communication*, 8(1), 21-28.

Jackson II, R., Drummond, D., & Camara, S. (2007). What is qualitative research? *Qualitative Research Reports in Communication*, 8(1), 21-28.

James, A. R. (2011). The marginalization of physical education: Problems and solutions-- Introduction. *Journal of Physical Education, Recreation, and Dance*, 82(6), 15-16.

Janesick, V. (1999). A journal about journal writing as a qualitative research technique: History, issues, and reflections. *Qualitative Inquiry*, 5(4), 505-524.

Janis, J.L. (2005). Groupthink: The desperate drive for consensus at any cost. In J. M. Shafritz, J. Ott, & Y. S. Jang (Eds.), *Classics of organizational theory* (6th ed., pp. 185-192). Belmont, CA: Wadsworth, Cengage Learning.

Johnston, L.D., O'Malley, P.M., Terry-McElrath, Y.M., & Colabianchi, N. (2014). *School policies and practices to improve health and prevent obesity: National secondary school survey results: School years 2006-07 through 2011-12*. Ann Arbor, MI: Bridging the Gap Program, Survey Research Center, Institute for Social Research.

Jorgensen, D. (1989). *Participant observation: A methodology for human studies*. Newbury, CA: Sage.

- Kann, L., Kinchen, S., Shanklin, S., Flint, K., Hawkins, J., Harris, W., . . . Zaza, S. (2014). *Youth risk behavior surveillance - United States, 2013*. United States Department of Health and Human Services, Centers for Disease Control and Prevention.
- Karnik, S., & Kanekar, A. (2012). Childhood obesity: A global public health crisis. *International Journal of Preventive Medicine*, 3(1), 1-7.
- Kids Health. (2013). Survey: Parents and teachers want mandatory health and physical education classes. Retrieved April 28, 2015, from Kidshealth.org website: http://kidshealth.org/parent/kh_misc/health-pe-survey.html#
- Kingdom, C. (2005). Reflexivity: Not just a qualitative methodological research tool. *British Journal of Midwifery*, 13(10), 622-627.
- Kliebard, H. (1987). *The struggle for American curriculum 1893-1958*. London: Routledge.
- Koch, T. (2006). Establishing rigour in qualitative research: The decision trail. *Journal of Advanced Nursing*, 53(1), 976-986.
- Kondracki, N., Wellman, N., & Amundson, D. (2002). Content analysis: Review of methods and their applications in nutrition education. *Journal of Nutrition Education and Behavior*, 34(4), 224-230.
- Lamb, D. (2013). Promoting the case for using a research journal to document and reflect on the research experience. *The Electronic Journal of Business Research Methods*, 11(2), 84-91.
- Lather, P. (1986). Issues of validity in openly ideological research: Between a rock and soft place. *Interchange*, 17(4), 63-84.
- Lee, S., Burgeson, C., Fulton, J., & Spain, C. (2007). Physical education and physical activity: Results from the school health policies and programs study 2006. *Journal of School Health*, 77(8), 435-463.

- LeMasurier, G., & Corbin, C. (2006). Top 10 reasons for quality physical education. *Journal of Physical Education, Recreation, and Dance*, 77(6), 44-54.
- Lengler, R., & Eppler, M. (2007). Toward a periodic table of visualization methods for management. *Proceedings of the IASTED Conference on Graphics and Visualization in Engineering*. Retrieved from http://www.visual-literacy.org/periodic_table/periodic_table.pdf
- Li, C., Ford, E., Zhao, G., & Mokdad, A. (2009). Prevalence of pre-diabetes and its association with clustering of cardiometabolic risk factors and hyperinsulinemia among U.S. adolescents. *Diabetes Care*, 32(2), 342-347.
- Lim, S.S., Vos, T., & Flaxman, A.D. (2012). A comparative risk assessment of burden of disease and injury attributable to 67 risk factors and risk factor clusters in 21 regions, 1990-2010: A systematic analysis for the global burden of disease study 2010. *The Lancet*, 380(9859), 2224-2260.
- Lincoln, Y., & Guba, E. (1981). Do evaluators wear grass skirts? "Going native" and ethnocentrism as problems in utilization. *Paper presented at the joint annual meeting of the Evaluation Network and the Evaluation Research Society*, pp. 1-24.
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. London, UK: Sage.
- Lounsbury, M. (2007). A tale of two cities: Competing logics and practice variation in the professionalizing of mutual funds. *The Academy of Management Journal*, 50(2), 289-307.
- Lukes, S. (2005). *Power: A radical view* (2nd ed.). New York, NY: Palgrave Macmillan.
- Mâsse, L., Chiqui, J., Igoe, J., Atienza, A., Kruger, J., Kohl III, H., . . . Yaroch, A. (2007). Development of a physical education-related state policy classification system. *American Journal of Preventive Medicine*, 33(4 supplement), S264-S276.
- MacKelvie, K., Khan, K., Petit, M., Janssen, P., & McKay, H. (2003). A school-based exercise intervention elicits substantial bone health benefits: A two-year randomized controlled trial in girls. *Pediatrics*, 112(6), 447-452.

- Manahan, K. (2011). Paying math teachers more than gym teachers makes sense. *The Star-Ledger*, Opinion/NJ Voices. Retrieved from http://www.nj.com/njvoices/index.ssf/2011/11/paying_math_teachers_more_than.html
- Manson, J., Rimm, E., Stampfer, M., Colditz, G., Willett, W., & Krolewski, A. (1991). Physical activity and incidence of non-insulin-dependent diabetes mellitus in women. *Lancet*, 338(8770), 774-778.
- Marshall, M. (1996). Sampling for qualitative research. *Family Practice*, 13(6), 522-525.
- Martin, M., Mullis, I., Foy, P., & Stanco, G. (2012). *Trends in international mathematics and science study: 2011 international results in science*. Retrieved from TIMSS & PIRLS International Study Center website: http://timss.bc.edu/timss2011/downloads/T11_IR_Science_FullBook.pdf
- Mattke, S., Liu, H., Caloyeras, J., Huang, C., Van Busum, K., Khodyakov, D., & Shier, V. (2013). *Workplace wellness programs study: Final report*. Santa Monica, CA: Rand.
- Mawere, M. (2012). Critical reflections on the principle of beneficence in biomedicine. *Pan African Medical Journal*, 11(29).
- Maxwell, J. A. (2013). *Qualitative research design: An interactive approach* (3rd ed.). Los Angeles, CA: Sage.
- Mayring, P. (2000). Qualitative content analysis. *Forum Qualitative Sozialforschung/Forum: Qualitative Social Research*, 1(2), 28 paragraphs. Retrieved from <http://www.qualitative-research.net/index.php/fqs/article/view/1089/2385>
- McCabe, A. (2013). *A three dimensional analysis of power and engaged scholarship* (Unpublished doctoral dissertation). Queensland University of Technology, Brisbane, Australia.

- McCoyd, J., & Kerson, T. (2006). Conducting intensive interviews using email: A serendipitous comparative opportunity. *Qualitative Social Work: Research and Practice*, 5(3), 389-406.
- McCullick, B., Baker, T., Tomporowski, P., Templin, T., Lux, K., & Isaac, T. (2012). An analysis of state physical education policies. *Journal of Teaching in Physical Education*, 31(2), 200-210.
- Meho, L. (2006). Email interviewing in qualitative research: A methodological discussion. *Journal of the American Society for Information Science and Technology*, 57(10), 1284-1295.
- Melograno, V. (2007). Grading and report cards for standards-based physical education. *Journal of Physical Education, Recreation, and Dance*, 78(6), 45-53.
- Menschik, D., Ahmed, S., Alexander, M., & Blum, R. (2008). Adolescent physical activities as predictors of young adult weight. *Archives of Pediatrics and Adolescent Medicine*, 162(1), 29-33.
- Miles, M., Huberman, A.H., & Saldaña, J. (2014). *Qualitative data analysis: A methods sourcebook* (3rd ed.). Thousand Oaks, CA: Sage.
- Miles, M. B., & Huberman, M. (1994). *Qualitative data analysis: An expanded sourcebook*. Thousand Oaks, CA: Sage.
- Molloy, A. (2010). Case study research in public policy. In A. Mills, G. Durepos, & E. Wiebe (Eds.), *Encyclopedia of case study research* (pp. 118-122). Thousand Oaks, CA: Sage.
- Morandi, L. (2009). The role of state policy in promoting physical activity. *Preventive Medicine*, 49(4), 299-300.
- Morgan, P.J., & Hansen, V. (2008). Classroom teachers' perceptions of the impact of barriers to teaching physical education on the quality of physical education programs. *Research Quarterly for Exercise and Sport*, 79(4), 506-516.

- Morris, J., Clayton, D., Everitt, M., & Semmence, A. (1990). Exercise in leisure time: Coronary attack and death rates. *British Heart Journal*, 63(6), 325-334.
- Morrison, E. (2011). Nonmalficence and beneficence. In *Ethics in health administration: A practical approach for decision makers* (2nd ed., pp. 47-64). Sudbury, MA: Jones and Bartlett.
- Mullis, I., Martin, M., Foy, P., & Arora, A. (2012a). *Trends in international mathematics and science study: 2011 international results in mathematics*. Retrieved from TIMSS & PIRLS International Study Center website: http://timssandpirls.bc.edu/timss2011/downloads/T11_IR_Mathematics_FullBook.pdf
- Mullis, I., Martin, M., Foy, P., & Drucker, K. (2012b). *Progress in international reading literary study: 2011 international reading results*. Retrieved from TIMSS & PIRLS International Study Center website: http://timssandpirls.bc.edu/pirls2011/downloads/P11_IR_FullBook.pdf
- Must, A., Jacques, P., Dallal, G., Bajema, C., & Dietz, W. (1992). Long-term morbidity and mortality of overweight adolescents: A follow-up of third Harvard growth study participants of 1922 to 1935. *New England Journal of Medicine*, 327(19), 1350-1355.
- Nader, P., Bradley, R., Houts, R., McRitchie, S., & O'Brien, M. (2008). Moderate-to-vigorous physical activity from ages 9 to 15 years. *Journal of the American Medical Association*, 300(3), 295-305.
- National Association for Sport and Physical Education. (2009). *Physical education trends in our nation's schools: A survey of practicing K-12 physical education teachers*. Port Washington, NY: Roslow Research Group. 10.
- National Association for Sport and Physical Education. (2009a). *Physical education trends in our nation's schools: A survey of practicing K-12 physical education teachers*. Port Washington, NY: Roslow Research Group. 10.
- National Association of Sport and Physical Education. (2000). *Public attitudes toward physical education: Are schools providing what the public wants?* Retrieved from <http://www.pelinks4u.org/naspe/pubattpe.htm>

- National Association of Sport and Physical Education. (2002). *Adult/teens attitudes toward physical activity and physical education*. Retrieved from <http://www.pelinks4u.org/articles/110102executivesummary.htm>
- National Association of Sport and Physical Education. (2004). *Moving into the future: National standards for physical education* (2nd ed.). Oxon Hill, MD: McGraw Hill.
- National Association of Sport and Physical Education. (2006). *Recess for elementary school students: Position statement*. Retrieved from <http://www.shapeamerica.org/advocacy/positionstatements/pa/loader.cfm?csModule=security/getfile&pageid=4630>
- National Association of Sport and Physical Education. (2009b). *NASPE resource brief: Quality physical education*. Retrieved January 20, 2014, from SHAPE America website: <http://www.shapeamerica.org/advocacy/resources/upload/resource-brief-QPE.pdf>
- National Association of Sport and Physical Education. (2011). *Physical education is critical to educating the whole child*. Retrieved from <http://www.wssd.org/cms/lib02/PA01001072/Centricity/Domain/581/NASPE%20-%20PE%20Critical%20to-Educating-the-Whole-Child-5-19-2011.pdf>
- National Association of Sport and Physical Education. (2011). *Physical education is critical to educating the whole child: Position statement*. Retrieved November 23, 2014, from Society of Health and Physical Educators website: <http://www.shapeamerica.org/advocacy/positionstatements/pe/loader.cfm?csModule=security/getfile&pageid=4650>
- National Association of Sport and Physical Education and American Heart Association. (2012). *Shape of the nation report: Status of physical education in the USA*. Reston, VA: American Alliance for Health, Physical Education, Recreation, and Dance.
- National Commission on Excellence in Education. (1983). *A nation at risk: The imperative for educational reform*. Retrieved from http://datacenter.spps.org/uploads/sotw_a_nation_at_risk_1983.pdf

Naydeck, B., Pearson, J., Ozminkowski, R., Day, B., & Goetzel, R. (2008). The impact of the highmark employee wellness programs on 4-year healthcare costs. *Journal of Occupational and Environmental Medicine*, 50(2), 146-156.

"New workplace wellness campaign" launched in New Jersey. (2012). Retrieved September 27, 2012, from Workplace Wellness Campaign website: http://www.njbia.org/Libraries/News_Releases/News_2012_09_21.sflb.ashx

Ng, M., Robinson, M., Thomson, B., & Graetz, N. (2014). Global, regional, and national prevalence of overweight and obesity in children and adults during 1980-2013: A systematic analysis for the global burden of disease study 2013. *The Lancet*. doi.10.1016/S0140-6736(14)60460-8

No Child Left Behind Act of 2001, 20 U.S.C. §§ 107-110 (2002). Retrieved from <https://www.congress.gov/107/plaws/publ110/PLAW-107publ110.pdf>

Ogden, C., Carroll, M., Kit, B., & Flegal, K. (2014). Prevalence of childhood and adult obesity in the United States, 2011-2012. *Journal of the American Medical Association*, 311(8), 806-814.

Ogden, C.L., Carroll, M.D., Kit, B.K., & Flegal, K.M. (2012). Prevalence of obesity and trends in body mass index among U.S. children 1999-2010. *Journal of the American Medical Association*, 307(5), 483-490.

Okely, A. (1999). *The relationship of participation in organized sports and games, participation in nonorganized physical activity, and cardiorespiratory endurance to fundamental motor skills ability among adolescents* (Doctoral dissertation, University of Wollongong, Australia).

Oleszek, W., Oleszek, M., Rybicki, E., & Heniff, B. (2016). *Congressional procedures and the policy process* (10th ed.). Thousand Oaks, CA: Sage.

Olshansky, S., Passaro, D., Hershow, R., Layden, J., Carnes, B., Brody, J., . . . Ludwig, D. (2005). A potential decline in life expectancy in the United States in the 21st century. *New England Journal of Medicine*, 352(11), 1,138-1,450.

- Opdenakker, R. (2006). Advantages and disadvantages of four interview techniques in qualitative research. *Forum: Qualitative Social Research*, 7(4). Retrieved from <http://www.qualitative-research.net/index.php/fqs/article/view/175/391#gcit>
- Paffenbarger, R., Hyde, R., Wing, A., & Hsieh, C. (1986). Physical activity, all-cause mortality, and longevity of college alumni. *New England Journal of Medicine*, 314(10), 605-613.
- Paffenbarger, R., Wing, A., Hyde, R., & Jung, D. (1983). Physical activity and incidence of hypertension in college alumni. *Journal of Epidemiology*, 117(3), 245-257.
- Page, A., Cooper, A., Stamatakis, E., Foster, L., Crowne, E., Sabin, M., & Shield, J. (2005). Physical activity patterns in nonobese and obese children assessed using minute-by-minute accelerometry. *International Journal of Obesity*, 29(9), 1070-1076.
- Parson, T.J., Power, C., Logan, S., & Summerbell, C. (1999). Childhood predictors of adult obesity: A systematic review. *International Journal of Obesity*, 23(Supplement 8), S1-S107.
- Pate, R., Davis, M., Robinson, T., Stone, E., McKenzie, T., & Young, J. (2006). Promoting physical activity in children and youth: A leadership role for schools. *Journal of the American Heart Association*, 114(11), 1214-1224.
- Pate, R., Freedson, P., Sallis, J., Taylor, W., Sirard, J., Trost, S., & Dowda, M. (2002). Compliance with physical activity guidelines: Prevalence in a population of children and youth. *Annals of Epidemiology*, 12(5), 303-308.
- Pate, R., O'Neill, J., & McIver, K. (2011). Physical activity and health: Does physical education matter? *Quest*, 63(1), 19-35.
- Pate, R., Pratt, M., Blair, S., Haskell, W., Macera, C., & Bouchard, C. (1995). Physical activity and public health: A recommendation from the Centers for Disease Control and Prevention and the American College of Sports Medicine. *Journal of the American Medical Association*, 273(3), 402-427.

- Patton, M. (2015). *Qualitative research and evaluation methods* (4th ed.). Thousand Oakes, CA: Sage.
- Peabody, R. (1990). Interviewing political elites. *Political Science and Politics*, 23(3), 451-455.
- Pekruhn, C. (2009). *Preventing childhood obesity: A school health policy guide*. Retrieved from <http://www.rwjf.org/content/dam/web-assets/2009/01/preventing-childhood-obesity->
- Phellas, C., Bloch, A., & Seale, C. (2012). Structured methods: Interviews, questionnaires, and observation. In C. Seal (Ed.), *Researching society and culture* (3rd ed., pp. 181-205). Sage.
- Physical Activity Guidelines Midcourse Report Subcommittee of the President's Council on Fitness, Sports, and Nutrition. (2012). *Physical activity guidelines for Americans midcourse report: Strategies to increase physical activity among youth*. Washington, D.C.: United States Department of Health and Human Services.
- Plasqui, G., Bonomi, G., & Westerterp, R. (2013). Daily physical activity assessment with accelerometers: New insights and validation studies. *Obesity Review*, 14(6), 451-462.
- Pollack, A. (2013, June 13). American medical association recognizes obesity as a disease. *New York Times*. Retrieved from <http://www.nytimes.com/2013/06/19/business/ama-recognizes-obesity-as-a-disease.html>
- Polsby, N. (1963). *Community power and political theory*. New Haven, CT: Yale University Press.
- Ponterotto, J. G. (2006). Brief note on the origins, evolution, and meaning of the qualitative research concept "thick description." *The Qualitative Report*, 11(2), 539-549.

- Popkin, B.M., Adair, L.S., & Ng, S.W. (2012). Global nutrition transition and the pandemic of obesity in developing countries. *Nutrition Review*, 70(1), 1-27.
- Prior, J., Barr, S., Chow, R., & Faulkner, R. (1996). Physical activity as therapy for osteoporosis. *Canadian Medical Association Journal*, 155(7), 940-944.
- Promoting Health as Youth Skills in Classrooms and Life Act, S. S.392, 113th, 1st. (2013).
- Prown, J. D. (1982). Mind in matter: An introduction to material culture theory and method. *Winterthur Portfolio*, 17(1), 1-19.
- Prusak, K., Treasure, D., Darst, P., & Pangrazi, R. (2004). The effects of choice on the motivation of adolescent girls in physical education. *Journal of Teaching in Physical Education*, 23(1), 19-29.
- Randall, L. (2014). Physical education's contribution to health and wellness: Part 2. *Antistasis*, 4(1), 1-5.
- Richardson, K. P. (2011). Physical education teacher education: Creating a foundation to increase the status of physical education in schools. *Journal of Physical Education, Recreation, and Dance*, 82(7), 45-47, 56.
- Robertson-Wilson, J., Dargavel, M., Bryden, P., & Giles-Corti, B. (2012). Physical activity policies and legislation in schools: A systematic review. *American Journal of Preventive Medicine*, 43(6), 643-649.
- Ross, C., & Wu, C. (1995). The links between education and health. *American Sociological Review*, 60(5), 719-745.
- Rossman, G., & Rallis, S. (2012). *Learning in the field: An introduction to qualitative research* (3rd ed.). Thousand Oaks, CA: Sage.
- Roth, J., Qiang, X., Marbán, S.L., Redelt, H., & Lowell, B.C. (2004). The obesity pandemic: Where have we been and where are we going? *Obesity Research*, 12(Supplement), 88s-101s.

- Rubin, H.J., & Rubin, I.S. (2012). *Qualitative interviewing: The art of hearing data* (3rd ed.). Los Angeles, CA: Sage.
- Ryle, G. (1971). *Collected papers: Volume II collected essays, 1929-1968*. London: Hutchinson.
- Saldaña, J. (2009). *The coding manual for qualitative researchers*. Los Angeles, CA: Sage.
- Sallis, J., McKenzie, T., Kolody, B., Lewis, M., Marshall, S., & Rosengard, P. (1999). Effects of health-related physical education on academic achievement: Project spark. *Research Quarterly for Exercise and Sport*, 70(2), 127-134.
- Sanchez-Vaznaugh, E., Sánchez, B., Rosas, L., Baek, J., & Egerter, S. (2012). Physical education policy compliance and children's fitness. *American Journal of Preventive Medicine*, 42(5), 452-459.
- Sandelowski, M. (1986). The problem of rigor in qualitative research. *Journal of Advances in Nursing Science*, 8(3), 27-37.
- Sandelowski, M. (1995). Sample size in qualitative research. *Research in Nursing and Health*, 18(2), 179-183.
- Sargeant, J. (2012). Qualitative research part II: Participants, analysis, and quality assurance. *Journal of Graduate Medical Education*, 4(1), 1-3.
- Schattschneider, E. (1960). *The semi-sovereign people: A realist's view of democracy in America*. New York, NY: Holt, Rhinehart, and Winston.
- Schmid, T., Pratt, M., & Witmer, L. (2006). A framework for physical activity policy research. *Journal of Physical Activity and Health*, 3(Supplement 1), S20-S29.
- Schwandt, T.A. (2001). *Dictionary of qualitative inquiry* (2nd ed.). Thousand Oaks, CA: Sage.

SHAPE America. (2014). *Promoting health as youth skills in the classroom and life act talking points*. Retrieved November 1, 2014, from Society of Health and Physical Educators website: <http://www.shapeamerica.org/advocacy/upload/PHYSICAL-Act-Talking-Points.pdf>

SHAPE America. (2016a). About SHAPE America. Retrieved July 12, 2016, from <http://www.shapeamerica.org/about/>

SHAPE America. (2016b). *Getting started with ESSA: A guide for health and physical educators*. Retrieved from http://www.mahperd.org/Every%20Student%20Succeeds%20Act/Getting_Started_with_ESSA_e_guide.pdf

SHAPE America. (2016c). *Every student succeeds act fact sheet: Title IV, part A: Student support and academic enrichment grants*. Retrieved July 15, 2016, from <http://www.shapeamerica.org/events/speakoutday/upload/TITLE-IV-fact-sheet-SHAPE-America-temp.pdf>

Shenton, A. K. (2004). Strategies for ensuring trustworthiness in qualitative research projects. *Education for Information*, 22(2), 63-75.

Shephard, R. J. (1996). Habitual physical activity and academic performance. *Nutrition Reviews*, 54(4), 32-36.

Siedentop, D. (2009). National plan for physical activity: Education sector. *Journal of Physical Activity and Health*, 6(Supplement 2), S168-S180.

Siedman, I. (2006). *Interviewing as qualitative research: A guide for researchers in education and the social sciences*. New York, NY, USA: Teachers College.

Silva, E. (2007). *On the clock: Rethinking the way schools use time*. Washington, D.C., USA: Education Sector.

Simons-Morton, B., McKenzie, T., Stone, E., Mitchell, P., Osganian, V., Strikmiller, P., . . . Nader, P. (1997). Physical activity in a multiethnic population of third graders in four states. *American Journal of Public Health*, 87(1), 45-50.

- Society of Health and Physical Educators. (2014). *National standards and grade-level outcomes for K-12 physical education*. Champaign, IL: Human Kinetics.
- Society of Health and Physical Educators. (2015). *The essential components of physical education*. Reston, VA: Society of Health and Physical Educators. Retrieved from <http://www.shapeamerica.org/upload/TheEssentialComponentsOfPhysicalEducation.pdf>
- Society of Health and Physical Educators. (2015b). *50 million strong by 2029* [Brochure]. Retrieved from http://50million.shapeamerica.org/wp-content/uploads/2016/03/shape_50MillionStrong_Brochure9x6_WEB.pdf
- Society of Health and Physical Educators. (2016). *SHAPE of the nation: Status of physical education in the USA*. Retrieved from http://www.shapeamerica.org/advocacy/son/2016/upload/Shape-of-the-Nation-2016_web.pdf
- Sparkes, A., Schempp, P., & Templin, T. (1993). Exploring dimensions of marginality: Reflecting on the life histories of physical education teachers. *Journal of Teaching in Physical Education*, 12(4), 386-398.
- Stake, R. (1995). *The art of case study research*. Thousand Oaks, Ca: Sage.
- Steele, C., Kalnins, I., Rossen, B., Biggar, D., Bortolussi, J., & Jutai, J. (2004). Age-related health risk behaviors of adolescents with physical disabilities. *Soz Praventivmed*, 49(2), 132-141.
- Stewart, M.J., & Green, S.R. (1987). Parental attitudes toward physical education. *Physical Educator*, 44(3), 344-348.
- Strong, W., Malina, R., Blimkie, C., Daniels, S., Dishman, R., Gutin, B., . . . Trudeau, F. (2005). Evidence base physical activity for school-age youth. *Journal of Pediatrics*, 146(6), 732-737.
- Swartz, D. (2007). Recasting power in its third dimension. *Theory and Society*, 36(1), 103-109.

- Swinburn, B.A., Sacks, G., & Hall, K.D. (2011). The global obesity pandemic: Shaped by global drivers and local environments. *The Lancet*, 378(9793), 804-814.
- Taras, H. (2005a). Nutrition and student performance at school. *Journal of School Health*, 75(6), 199-213.
- Taras, H. (2005b). Physical activity and student performance at school. *Journal of School Health*, 75(6), 214-218.
- Task Force on Community Preventive Services. (2002). Recommendations to increase physical activity in communities. *American Journal of Preventive Medicine*, 22(4S), 67-72.
- Tausig, J., & Freeman, E. (1988). The next best thing to being there: Conducting the clinical research interview by telephone. *American Journal of Orthopsychiatry*, 58(3), 418-427.
- Thomas, J., & Brady, K. (2005). The elementary and secondary education act at 40: Equity, accountability, and the evolving federal role in public education. *Review of Research in Education*, 29(51), 51-67. Retrieved from <http://isites.harvard.edu/fs/docs/icb.topic460284.files/ESEA%20at%2040.pdf>
- Thomas, J., Nelson, J., & Silverman, S. (2011). *Research methods in physical activity* (6th ed.). Champaign, IL: Human Kinetics.
- Thompson, H.R., Vittinghoff, E., Linchey, J.K., & Madsen, K.A. (2015). Public disclosure to improve physical education in an urban school district: Results from a 2-year quasi-experimental study. *Journal of School Health*, 85(9), 604-610. Retrieved from <http://eds.b.ebscohost.com.ezproxy.rowan.edu/ehost/pdfviewer/pdfviewer?sid=63692232-515b-4b5b-ab2c-7c939b595cd0%40sessionmgr101&vid=1&hid=103>
- Timpka, S., Petersson, I., & Englund, M. (2010). The grade in physical education in adolescence as predictor for musculoskeletal pain diagnoses three decades later. *Pain*, 150(3), 414-419.

- Toma, J. D. (2006). Approaching rigor in applied qualitative research. In C. F. Conrad & R. C. Serlin (Eds.), *The sage handbook for research in education: Engaging ideas and enriching inquiry* (pp. 405-423). Thousand Oakes, CA: Sage.
- Trasande, L., & Chatterjee, S. (2009). The impact of obesity on health service utilization and costs in childhood. *Obesity, 17*(9), 1749-1754.
- Troiano, R., Berrigan, D., Dodd, K., Mâsse, L., Tilert, T., & McDowell, M. (2007). Physical activity in the United States measured by accelerometer. *Medicine and Science in Sports and Exercise, 40*(1), 181-188.
- Trost, S., & Van Der Mars, H. (2010). Why we should not cut P.E. *Educational Leadership, 67*(4), 60-65.
- Trudeau, F., Laurencelle, L., & Shephard, R.J. (2004). Tracking of physical activity from childhood to adulthood. *Medicine and Science in Sports and Exercise, 36*(11), 1937-1943.
- Trudeau, F., Laurencelle, L., Trembley, J., Rajic, M., & Shepard, R.J. (1998). A long-term follow-up of participants in the Trois-Rivieres semi-longitudinal study of growth and development. *Pediatric Exercise Science, 10*(4), 366-377.
- Trudeau, F., & Shepard, R. (2008). Physical education, school physical activity, school sports and academic performance. *International Journal of Behavioral Nutrition and Physical Activity, 5*(10), n/a. <http://dx.doi.org/10.1186/1479-5868-5-10>
- Turner, L., Chaloupka, F.J., & Sandoval, A. (2012). *School policies and practices to improve health and prevent obesity: National elementary school survey results: School years: 2006-07 through 2009-10*. Chicago, IL: Bridging the Gap Program, Health Policy Center, Institute for Health Research and Policy, University of Illinois.
- Tyler, K., MacDonald, M., & Menear, K. (2014). Physical activity and physical fitness of school-aged children and youth with autism spectrum disorders. *Autism Research and Treatment, 2014*, 1-6. <http://dx.doi.org/10.1155/2014/312163>

- U.S. Const. amend. X. Retrieved from http://www.archives.gov/exhibits/charters/bill_of_rights_transcript.html
- U.S. Const. art. I, § 5. Retrieved from http://www.archives.gov/exhibits/charters/constitution_transcript.html
- United States Department of Education. (2004). [United States Department of Education home page]. Retrieved July 1, 2016, from <http://www.ed.gov/>
- U.S. Department of Education. (2012). Statement by U.S. secretary of education Arne Duncan on the release of the 2011 TIMSS and PIRLS assessments [Press release].
- U.S. Department of Health and Human Services. (2008). *2008 physical activity guidelines for Americans* (U.S. Department of Health and Human Services, Author). Retrieved from <http://health.gov/paguidelines/pdf/paguide.pdf>
- U.S. Department of Health and Human Services. (2010). *The surgeon general's vision for a healthy and fit nation*. Retrieved from <http://www.surgeongeneral.gov/initiatives/healthy-fit-nation/obesityvision2010.pdf>
- U.S. Department of Health and Human Services, & Centers for Disease Control and Prevention. (2013). *Results from the school health policies and practices study 2012*. Centers for Disease Control and Prevention.
- U.S. Department of Health and Human Services Centers for Disease Control and Prevention. (2008). *Make a difference at your school: CDC resources can help you implement strategies to prevent obesity among children and adolescents*. Retrieved from <http://www.cdc.gov/healthyyouth/keystrategies/pdf/make-a-difference.pdf>
- Van Beurden, E., Barnett, L., Zask, A., Dietrich, U., Brooks, L., & Beard, J. (2003). Can we skill and activate children through primary school physical education lessons? "Move it grove it" - a collaborative health promotion intervention. *Preventive Medicine*, 36(4), 493-501.

- Veal, M. (1990). Measurement and evaluation curricula in professional physical education preparation programs--A view from the practitioner. *Journal of Physical Education, Recreation, and Dance*, 61(3), 36-38.
- Verdinelli, S., & Scagnoli, N. (2013). Data display in qualitative research. *International Journal of Qualitative Methods*, 12(1), 359-381.
- Wessel, T., Arant, C., Olson, M., Johnson, B., Reis, S., Sharaf, B., . . . Merz, C. (2004). Relationship of physical fitness vs body mass index with coronary artery disease and cardiovascular events in women. *The Journal of the American Medical Association*, 292(10), 1179-1187.
- Weuve, J., Kang, J., Manson, J., Breteler, M., Ware, J., & Grodstein, F. (2004). Physical activity, including walking, and cognitive function in older women. *Journal of American Medical Association*, 292(12), 1454-1461.
- Whitehead, M., Petticrew, M., Graham, H., Macintyre, S., Bambra, C., & Egan, M. (2004). Evidence for public health policy on inequalities: 2: Assembling the evidence jigsaw. *Journal of Epidemiology and Community Health*, 58(10), 817-821.
- White House Task Force on Childhood Obesity. (2010). *Solving the problem of childhood obesity within a generation*. Retrieved from http://www.letsmove.gov/sites/letsmove.gov/files/TaskForce_on_Childhood_Obesity_May2010_FullReport.pdf
- Wilkins, J., Graham, G., Parker, S., Westfall, S., Fraser, R., & Tembo, M. (2003). Time in the arts and physical education and school achievement. *Journal of Curriculum Studies*, 35(6).
- Williamson, T., & Long, A.F. (2005). Qualitative data analysis using data displays. *Nurse Researcher*, 12(3), 7-19.
- Wolfinger, R. (1971a). Nondecisions and the study of local politics. *American Political Science Review*, 65(4), 1063-1080.

Wolfinger, R. (1971b). Rejoinder to Frey's "comment". *American Political Science Review*, 65(4), 1102-1104.

World Health Organization. (2014). Global strategy on diet, physical activity, and health: What are the causes? Retrieved November 23, 2014, from World Health Organization website: http://www.who.int/dietphysicalactivity/childhood_why/en/

World Health Organization. (2014). *Obesity and overweight* [Fact sheet]. Retrieved July 10, 2014, from World Health Organization website: <http://www.who.int/mediacentre/factsheets/fs311/en/>

Yin, R. (2011). *Qualitative research from start to finish*. New York, NY: The Guilford Press.

Yin, R. (2014). *Case study research: Design and methods* (5th ed.). Los Angeles, CA: Sage.

Yin, R. K. (2009). *Case study research: Design and methods* (4th ed.). Los Angeles, CA: Sage.

Appendix A

Recruitment Letter to Participants

October 1, 2015

The Honorable [insert senator/representative's name]
United States Senate or House of Representatives
Room # and Office Building of Rep. or Senator
Washington, D.C. 20515 (for House) 20510 (for Senate)

Dear Senator [insert last name]:

My name is Edward “Ted” Olsen, and I reside at 63 Salem Lane in Little Silver, New Jersey. I am a doctoral candidate at Rowan University, and a health and physical education teacher at Laura Donovan Elementary School in Freehold Township, New Jersey.

The purpose of this correspondence is to ask for your assistance. For the past five years, I have been working to complete my Doctor of Education degree in Educational Leadership from Rowan University. To date, I have completed all coursework and am in the middle of completing my dissertation. My topic is entitled: “Exploring the Policymaking Process of School-Based Physical Education: A Congressional Perspective.” The goal of my dissertation is to understand the policymaking process (i.e., problem identification, agenda setting, policy formulation, policy adoption) of physical education in U.S. schools from a national perspective. Ultimately, I hope my research will help improve the quality and quantity of physical education programs across the country.

With your assistance, I would like to interview members of Congress, staffers, and/or legislative liaisons who are both knowledgeable about this topic and willing to participate in this study. My initial target audience is the House Subcommittee on Early Childhood, Elementary, and Secondary Education, and the Senate Health, Education, Labor, and Pensions Committee. Enclosed, please see a copy of my interview questions for your review. If possible, could you answer my questions or direct me to someone who would be willing and able to answer them? It would be greatly appreciated. In addition, I would be willing to travel to Washington D.C. to meet with you or someone else in person in order to explain, in more detail, the purpose of my research and what I hope to accomplish.

If you have any questions or concerns, the chair of my committee is Dr. Stephen L. Cone from Rowan University. His contact information is as follows: Dr. Stephen L. Cone, Professor, Department of Health and Exercise Science, Rowan University, Glassboro, New Jersey 08028. His office phone is (856) 256-4500 ext. 3704, and his email is cone@rowan.edu. If you should contact him, he would be able to validate my character, doctoral candidacy, and goals of this research study.

Thank you in advance for assisting me with my dissertation. I hope to hear from you in the near future.

Sincerely,

Ted Olsen

Appendix B

Interview, Material Culture, and Research Journal Protocols

Principal Investigator: Dr. Stephen L. Cone

Co-Investigator: Mr. Edward B. Olsen

Participant's Name: (if applicable)

Participant's Pseudonym Name: *(if applicable)*

Date(s):

Time(s):

Location(s) of the Interview:

Telephone Interview: yes or no

Email (Internet) interview: yes or no

Face-to-Face Interview: yes or no

Audio Recorded: yes or no

Purpose of the Interview: The purpose of this interview is to collect data on the policymaking process at the national level as it relates to physical education in U.S. schools.

Central Research Question: What role, if any, should members of Congress play in requiring physical education in U.S. schools from a public policy perspective?

General Participant Information

Gender:

Ethnicity:

Position/Title:

Party Affiliation:

Total Years in Position/Title:

Total Years in Public Service:

Age Range: 25-29_____ 30-34_____ 35-39_____ 40-44_____ 45-49_____ 50-54_____ 55-59_____ 60-64_____ 65-69_____ 70-74_____

Degrees Conferred:

Introduction

Thank you for taking time out of your busy schedule to assist me with my research. Please remember that any and all information will be kept confidential. Your participation is voluntary and you are free to withdraw from this study at any time. Thank you again for your time and support in this project.

Interview Questions

1. According to the 2009-2010 National Health and Nutrition Examination Survey, roughly 17% or 12.5 million children and adolescents in the U.S. between ages 2-19 are obese. These prevalence rates represent a tripling effect since 1980 (Ogden, Carroll, Kit, & Flegal, 2012). **What does the [senator, representative, committee or you] think the federal government's role should be, if at all, in addressing the childhood obesity epidemic?**

2. Research indicates that school-based physical education can have positive short and long-term outcomes on individual lifestyle and health (Trudeau et al., 1998; Trudeau, Laurencelle, & Shepard, 2004; Pate, O’Neill, & McIver, 2011). Yet, more research is needed in the relationship between motor skills learned in physical education class and their applicability throughout adulthood (NASPE & AHA, 2012). **What are the [senator, representative, committee, or your] thoughts and feelings of school-based physical education as a potential solution to the childhood obesity epidemic in the U.S.?**

3. Today, the public has become aware, more so than ever before, that proper nutrition and exercise are important components to living a healthy lifestyle. In addition, First Lady Michelle Obama has been instrumental in getting children to be more active through her “Let’s Move!” programs in schools. However, research suggests that the discipline of physical education remains undervalued and viewed as a low-status subject in U.S. schools (Ennis, 2006; Hardman & Marshall, 2009; James, 2011; Beddoes, Prusak, Hall, 2014). **From a policy perspective, what are the [senator, representative, committee, or your] thoughts and views on this dichotomy?**

4. Since the passage of the Elementary and Secondary Education Act (ESEA) of 1965, the federal government has found ways to support public education at the local level. However, there is no federal law that requires students to take physical education in U.S. schools. A study done in 2006 found that only 3.8 percent of elementary schools, 7.9 percent of middle schools, and 2.1 percent of high schools provided daily physical education or its equivalent (Lee, Burgeson, Fulton, & Spain 2007). **What role, if any, should members of Congress play in ensuring that students receive daily physical education in U.S. schools?**

5. In 2013 and 2015, the Promoting Health as Youth Skills in Classrooms and Life Act (PHYSICAL Act, S. 418 – current version) was introduced by Senator Tom Udall and Representative Marcia Fudge. The purpose of this legislation is to amend the Elementary and Secondary Education Act and to designate health and physical education as “core” subjects. This status would increase the importance of health and physical education in schools, as well as allow public schools the option to use Title I and Title II funds to help support health physical education programs. **From a policy perspective, what are the [senator, representative, committee or your] feelings and views on this piece of legislation?**

6. Over the years, various pieces of legislation pertaining to physical education in schools have been introduced in Congress. A case in point is the Fitness Integrated with Teaching Kids Act (Fit Kids Act, S. 1033, H.R. 2178), which was introduced to the 110th, 111th, 112th, and 113th Congress. The purpose of this act was to help address the childhood obesity epidemic by improving the way physical education data was collected and reported at the state and local levels. For example, the amount of time students participate in physical education class versus the national recommendations. **What social and political factors influence the inclusion of smaller bills as part of larger vehicles?**

7. According to the literature (e.g. Chrique, 2012, Chrique 2013; NASPE & AHA, 2012; CDC & BGRP, 2014), there appears to be varying degrees of strength and comprehensiveness regarding physical education policies at all levels of government. For example, although 74.5% of states require students to enroll in physical education from elementary to high school, 28 states permit exceptions or waivers. In addition, only six states require physical education in every grade level: Illinois, Hawaii, Massachusetts, Mississippi, New York, and Vermont (NASPE & AHA, 2012). **To what extent, if any, should members of Congress play in strengthening the policy language and improving the consistency and transparency by which all levels of government interact and respond to physical education at the K-12 level?**

8. Since the adoption of the No Child Left Behind Act of 2001, local school administrators have been under increasing pressure to improve standardized tests scores in English language arts and mathematics for a myriad of reasons. As a result, many physical education programs have either been eliminated or significantly reduced in instructional time in favor of the “core” classes. **From a policy perspective, what are the [senator, representative, committee or your] thoughts and views regarding cutbacks in physical education?**

9. Based on current discussions regarding the reauthorization of Elementary and Secondary Education Act, is there any additional information that the committee could share that would give insight into the policymaking process (i.e., agenda setting, policy formulation and adoption) with respect to physical education in U.S. schools?

Conclusion

Thank you for talking with me today. If you would like a copy of the references mentioned in the questions, please feel free to contact me. An overview of this interview will be provided to you. In addition, if you know of other subjects who are knowledgeable on this topic as well as interested in participating in this study, could you please provide me with their name and contact information? It would be greatly appreciated. Thank you again for your time and support in this project.

Material Culture Protocol

Artifact Name:

Date Collected:

Descriptive Notes	Analytic Notes
<p>Purpose of the Artifact:</p> <p>The purpose of this artifact was to</p>	
<p>Contextual Information: Artifact</p> <p>What is the artifact?</p> <p>Who created the artifact?</p> <p>When was artifact created?</p> <p>Where was the artifact created?</p> <p>Why was the artifact created?</p> <p>How was the artifact created?</p> <p>Who is the target audience of the artifact?</p>	N/A
<p>Data Analysis and Coding: Artifact <i>(Identify salient areas for data analysis & coding)</i></p> <p>Several attribute, in vivo, descriptive, and process codes were identified. They are listed in ascending order as they appear in the document.</p>	N/A
<p>Relationship of Artifact to the Research Questions</p> <p>This artifact is connected to the research questions because...</p>	N/A

<p>Meets Inclusion/Exclusion Criteria:</p> <p style="text-align: center;">(Yes) / No</p> <p style="text-align: center;"><u>Inclusion Criteria</u></p> <p><u>Types of Documents</u></p> <ul style="list-style-type: none"> • English language • Primary sources, e.g., speeches, press releases, transcripts • Collection period: November 1, 2015 – March 3, 2016 • The document has a direct or indirect connection to physical education policy at the national level. • The document has a direct or indirect connection to physical education in U.S. schools. <p><u>Types of Participants</u></p> <ul style="list-style-type: none"> • Target snowball population, e.g. House of Representatives Subcommittee on Education and Workforce, Senate HELP Committee, Gatekeepers, policymakers who support physical education, and SHAPE America <p><u>Type of Outcome Measures:</u></p> <ul style="list-style-type: none"> • Problem identification, agenda setting, policy formulation 	<p>N/A</p>
--	------------

<p style="text-align: center;"><u>Exclusion Criteria</u></p> <p><u>Types of Documents</u></p> <ul style="list-style-type: none"> • Non-English language • Secondary sources, e.g., biographies, interpreted newspaper articles, commentaries, magazines • Collection period: Before November 1, 2015 – After March 3, 2016 • The document only connects to physical education policy at the state and local levels. • The document only connects to general health and physical activity. <p><u>Types of Participants</u></p> <ul style="list-style-type: none"> • Outside Target snowball population (see above) <p><u>Types of Outcome Measures</u></p> <ul style="list-style-type: none"> • Policy adoption, policy implementation, budgeting, policy evaluation 	
<p>Document attached: <input checked="" type="radio"/> Yes / No</p>	<p>N/A</p>
<p>Other: N/A</p>	<p>N/A</p>

Research Journal Protocol

Step 1: Identify the journal entry number and date written.

Step 2: Identify in the subject header the area of concern, issue, concept, or central phenomenon being investigated.

Step 3: Explain and discuss the researcher's experience with the area of concern, issue, concept, or central phenomenon. Within this section, engage in self-reflection; that is, think deeply, question, and form an internal dialogue. If applicable, reiterate the goals of the study.

Step 4: Reflect on how this experience has influenced researcher's beliefs, attitudes, values, biases, perceptions, etc. toward research. If applicable, identify and describe possible solutions and actions.

Journal: Entry # 1

Date:

Subject:

Appendix C

Informed Consent Form

TITLE OF STUDY: Exploring the Policymaking Process of School-Based Physical Education: A Congressional Perspective

Principal Investigator: Dr. Stephen L. Cone

Co-Investigator: Mr. Edward B. Olsen

This consent form is part of an informed consent process for a research study and it will provide information that will help you to decide whether you wish to volunteer for this research study. It will help you to understand what the study is about and what will happen in the course of the study.

If you have questions at any time during the research study, you should feel free to ask them and should expect to be given answers that you completely understand.

After all of your questions have been answered, if you still wish to take part in the study, you will be asked to sign this informed consent form.

The Principal Investigator, Stephen L. Cone or the Co-Investigator, Edward B. Olsen will also be asked to sign this informed consent. You will be given a copy of the signed consent form to keep.

You are not giving up any of your legal rights by volunteering for this research study or by signing this consent form.

Why is this study being done?

This study is being done in partial fulfillment of the degree of Doctor of Education at Rowan University. The purpose of this study is to investigate and analyze the policymaking process of physical education at the national level.

Why have you been asked to take part in this study?

You have been invited to take part in this study because you have knowledge and understanding of the policymaking process in the United States at the national level. You are appropriate for recruitment because your experience can offer insight on how national policymakers identify public policy problems, set agendas, formulate, adopt, implement, and evaluate policies in U.S. schools. The requirements for participation are as follows: a) knowledge, understanding, and experience in U.S. public policymaking, b) knowledge, understanding, and experience in education-related policy decisions, c) knowledge, understanding, and experience in U.S. politics.

Who may take part in this study? And who may not?

The inclusion criteria are as follows:

- The individual is knowledgeable and informed about school-based health and physical education.
- The individual is knowledgeable and informed about public policymaking at the national level.
- The individual is a national policymaker, legislative staffer, and/or a person who can answer the interview questions with depth, detail, and richness.

The exclusion criteria are as follows:

- The individual only understands general health, nutrition, and physical activity.
- The individual only understands state and local public policymaking.

How many subjects will be enrolled in the study?

Approximately 20 participants will be enrolled in this study.

How long will my participation in this study take?

The study will take place over a period of 6 months – October - December, 2015, and January - March, 2016. As a participant, I ask you to spend one day a month for two months participating in this study. Each session will last approximately 30 minutes.

How many subjects will participate?

Approximately 20 subjects will participate in this study. Therefore, your participation—although voluntary—is crucial to the success of this study.

Where will the study take place?

This study will take place over the internet, telephone, and/or through face-to-face meetings in Washington, D.C. For in-person meetings and interviews, the exact date, time, and location will be coordinated between you and the co-investigator, Edward B. Olsen. This will occur through email or phone and will be agreed to 10 days prior to the meeting. During the meeting, you will be asked to participate in a semi-structured interview. Where applicable, approval to conduct research at a specific location will be acquired prior to data collection.

What will you be asked to do if you take part in this research study?

You will be asked to provide insight on how members of Congress identify public policy problems, set agendas, formulate policy, and adopt policy with respect to physical education in U.S. public schools.

You will be presented with 9 interview questions. These questions focus on the concepts mentioned above. You will be asked to respond to each question. You will have several options for how you would like to respond. These include: face-to-face meetings (audio or no audio recording), email, telephone, or a combination thereof. Upon completion, you will be asked follow-up questions which may occur through email, telephone, and/or face-to-face meetings.

What are the risks and/or discomforts you might experience if you take part in this study?

There are a few risks and/or discomforts you might experience if you take part in this study. For the interview, they include: time, inconvenience, deep analytical thinking, and exposure of certain policy decisions and viewpoints. The result could be a higher degree of tiredness, anxiety, and/or stress. The incidence of these risks occurring are rare; for example 1 out of 10 or 10%.

Are there any benefits for you if you choose to take part in this research study?

The benefits of taking part in this study may be: personal satisfaction and fulfillment, a greater sense of purpose, and/or intellectual curiosity and enlightenment.

The direct benefits to you may be: personal satisfaction and fulfillment, a greater sense of purpose, and/or intellectual curiosity and enlightenment.

However, it is possible that you might receive no direct personal benefit from taking part in this study. Your participation may help us understand which can benefit you directly, and may help other people to strengthen the policy language and improve the consistency and transparency by which all levels of government interact and respond to physical education at the K-12 level. Moreover, you will play a significant role in improving the quality and quantity of physical education programs across the country.

What are your alternatives if you don't want to take part in this study?

There are no alternative treatments available. Your alternative is not to take part in this study.

How will you know if new information is learned that may affect whether you are willing to stay in this research study?

During the course of the study, you will be updated about any new information that may affect whether you are willing to continue taking part in the study. If new information is learned that may affect you, you will be contacted.

Will there be any cost to you to take part in this study?

No, there will be no cost to you to take part in this study.

Will you be paid to take part in this study?

You will not be paid for your participation in this research study.

How will the information you provide be kept confidential?

All efforts will be made to keep your personal information in your research record confidential, but total confidentiality cannot be guaranteed. Your personal information may be given out, if required by law. Presentations and publications to the public and at scientific conferences and meetings will not use your name and other personal information unless specified by you.

To ensure confidentiality of the data, the co-investigator will utilize Microsoft's One-Drive system. The one drive system is password protected and no individual has access to the password other than the investigator. This system is password protected. The co-investigator is the only one who has access to this account. For security and confidentiality purposes, the co-investigator will change the password every 15 days beginning at the start of the study. A breach of confidentiality is possible by employees of Microsoft, as they own and administer the one-drive application that is housing this data. At the conclusion of the study, all identifiers and pseudonym names will be destroyed electronically and permanently removed the system.

Proper data security and storage will come in the form of Microsoft's one drive system (password protected). Information collected and saved from interviews, policy artifacts, and the researcher's journal will be stored in the co-investigator's one drive only. Seven years following the conclusion of the study, all raw data and identifiers will be destroyed. The server will be privately purchased and will use the security mechanisms offered by the company. The service provider will be Verizon Fios. Correspondence with various legislative staffers will come from the investigator's private email account with Verizon. The email address is eolsen27@verizon.net. The security mechanisms associated with this account will be utilized.

How will my identity be protected?

Participant anonymity will be established in several ways. On the consent forms, the participants will have the opportunity to determine their degree of anonymity. On the consents, there are two statements that participants have to read and answer through a check mark. The first one states, "Yes, I wish to have my identity protected to the best extent possible. Please use a pseudonym in place of my birth name." They will be given a space on the consent form in which to determine their own pseudonym name. This name will be applied across all three protocols: interview, material culture, and the researcher's journal. The pseudonym names and the participants public names will be organized on a MS excel spreadsheet and stored on the co-investigator's Microsoft One-Drive system. For participants who wish to have their identities revealed, they will check the statement, "No, I do not wish to hide my identity or birth name." Because members of Congress are in the public domain, some participants may wish to have their positions openly heard. In these cases, the principal investigator and co-investigator will honor their request.

As for the former participants, the co-investigator will establish participant anonymity through one or more of the following: a) not revealing an individual's political affiliation or committee memberships, b) not revealing specific locations of face-to-face interviews, c) not revealing participants religious and cultural backgrounds, as well as specific job titles, and d) not revealing the exact target population. In other words, the co-investigator will not specify that the initial target audience came from the Senate Health, Education, Labor, and Pensions Committee and the House of Representatives Subcommittee on Early Childhood, Elementary, and Secondary Education. Simply, the co-investigator will communicate that the participants were chosen through a purposeful sampling approach that utilized reputational and snowball sampling. The sample population included only members of Congress, staffers, and legislative liaisons from the 114th-115th Congress who met the inclusion/exclusion criteria for participation.

In addition, the co-investigator will protect participant identity by reviewing all quotations prior to dissemination. In cases where information can be identifiable, the co-investigator will redact the information. However, all measures will be taken to ensure the integrity and fidelity of the data is maintained. Furthermore, the co-investigator will select a variety of quotations from a wide range of participants. This will make it difficult to identify any one particular individual by cross referencing a pattern of quotes from the sample population. Demographic information will only be revealed in summative form, such as gender, age range, total years of public service, and party affiliation, as a means to improve subject privacy.

What will happen if you do not wish to take part in the study or if you later decide not to stay in the study?

Participation in this study is voluntary. You may choose not to participate or you may change your mind at any time.

If you do not want to enter the study or decide to stop participating, your relationship with the study staff will not change, and you may do so without penalty and without loss of benefits to which you are otherwise entitled.

You may also withdraw your consent for the use of data already collected about you, but you must do this in writing to:

Dr. Stephen L. Cone, Principal Investigator
Department of Health and Exercise Science
School of Biomedical Science & Health Professions
Herman D. James Hall, Room 1041
Rowan University, Glassboro, NJ 08028
Phone: (856) 256-4500 ext. 3704 (w) (856) 256-5613 (fax)
Email: cone@rowan.edu

Or

Mr. Edward B. Olsen, Co-Investigator
Health and Physical Education Teacher
Laura Donovan Elementary School
237 Stonehurst Blvd.
Freehold, NJ 07728
Phone: (610) 291-3502 (c)
Email: eolsen27@verizon.net

If you decide to withdraw from the study for any reason, you may be asked to participate in one meeting with the Principal Investigator.

Who can you call if you have any questions?

If you have any questions about taking part in this study or if you feel you may have suffered a research related injury, you can call the study doctor:

Dr. Stephen L. Cone, Principal Investigator
Department of Health and Exercise Science
School of Biomedical Science & Health Professions
Herman D. James Hall, Room 1041
Rowan University, Glassboro, NJ 08028
Phone: (856) 256-4500 ext. 3704 (w) (856) 256-5613 (fax)
Email: cone@rowan.edu

If you have any questions about your rights as a research subject, you can call:

Office of Research
201 Mullica Hill Road Glassboro, NJ 08028-1701
(856) 256-5150 – Glassboro/CMSRU

What are your rights if you decide to take part in this research study?

You have the right to ask questions about any part of the study at any time. You should not sign this form unless you have had a chance to ask questions and have been given answers to all of your questions.

How do I agree to participate?

You have several options for how you would like to agree to participate. The first option is to please sign, date, scan, and email the “agree to participate” document located on the next page to the co-investigator, Edward B. Olsen. His email address is eolsen27@verizon.net. In the subject header, please write, “Consent Forms.” Upon receipt of the email and forms, the co-investigator will email you and state that he has received your forms. A follow up email will occur with a general timeline for how and when the interview will take place. The second option is to please sign, date, and mail the “agree to participate” document located on the next page to the co-investigator, Edward B. Olsen. His address is 63 Salem Lane, Little Silver, New Jersey, 07739. The third option is submit the “agree to participate form” in person. This can take place prior to the interview. However, the participant must read through the form prior to the interview so that the co-investigator can answer any and all questions.

AGREEMENT TO PARTICIPATE

I have read this entire form, or it has been read to me, and I believe that I understand what has been discussed. All of my questions about this form or this study have been answered.

Subject Name: _____

Subject Signature: _____ Date: _____

PARTICIPANT IDENTITY

On the blank space provided, please put an "X" if you would like the principal investigator and co-investigator to use a pseudonym name as a means to protect your identity.

_____ Yes, I wish to have my identity protected to the best extent possible.
Please use a pseudonym in place of my birth name.

_____ No, I do not wish to hide my identity or birth name.

On the space provided, please print a pseudonym name of your choosing.

Pseudonym Name: _____ Date: _____

SIGNATURE OF INVESTIGATOR

To the best of my ability, I have explained and discussed the full contents of the study including all of the information contained in this consent form. All questions of the research subject and those of his/her parent or legal guardian have been accurately answered. Thank you for taking time out of your busy schedule to participate in this study.

Investigator Consent: _____ Date: _____

Signature: _____ Date: _____

Appendix D

Tables and Figures

Table 1

Body Mass Index Classifications and Descriptions for Adults, Children, and Teens

Weight Status Category	BMI Range
Adults	
Underweight	≤ 18.5
Healthy Weight	18.5 – 24.9
Overweight	25.0 – 29.9
Obese	≥ 30.0
Children and Teens	
Underweight	Less than the 5 th percentile
Healthy Weight	5 th percentile to less than the 85 th percentile
Overweight	85 th to less than the 95 th percentile
Obese	Equal to or greater 95 th percentile

Note. BMI age percentile for adolescents is 2-19 years of age. These classifications and descriptions are based on CDC guidelines. Source CDC, (2014a), CDC (2014b).

Table 2

Health Benefits Associated with Regular Physical Activity

Children/Adolescents	Adults/Older Adults
Increase cardiorespiratory fitness	Lower risk of early death
Increase muscular fitness	Lower risk of heart disease
Increase cardiovascular and metabolic	Lower risk of stroke health markers
Improved body composition	Lower risk of high blood pressure
	Lower risk of type 2 diabetes
	Lower risk of metabolic syndrome
	Lower risk of colon cancer
	Lower risk of breast cancer
	Prevention of weight gain
	Promotion of weight loss
	Prevention of falls
	Reduced depression
	Improved cognitive function

Note. The information was adopted from the 2008 Physical Activity Guideline for Americans

Table 3

Coding Cycles, Coding Methods, and Data Sources

Coding Cycle	Coding Method	Data Source
First Cycle	Attribute, Descriptive, In Vivo, Process Coding	Participant Interviews, Policy Artifacts, Research Journal Entries
Second Cycle	Pattern Coding	Participant Interviews, Policy Artifacts, Research Journal Entries
Third Cycle	Themes and Subthemes	Participant Interviews, Policy Artifacts, Research Journal Entries
Fourth Cycle	Test Themes and Subthemes against an inclusion-exclusion criteria	Participant Interviews, Policy Artifacts, Research Journal Entries
Fifth Cycle	Data – depth, detail, vividness, richness	Participant Interviews, Policy Artifacts, Research Journal Entries

Note. Cycles three, four, and five evolved during the data analysis phases.

Table 4

Establishing Trustworthiness of the Data

Criteria	Technique	Strategies
Credibility	Prolong Engagement	Trips to Washington D.C., phone calls and emails with staffers, SHAPE America 2016 Policy Summit, 2014, 2015, 2016 Speak Out Day events, reading the literature
	Triangulation	Sources, Methods
	Negative Case Analysis	Research Questions, Research Journal (Analytic Memorandums)
	Member Checks	Participant Reviews
Transferability	Rich, Thick Description	Fifth Coding Cycle
Dependability	Audit Trail	Database, Journal
Confirmability	Audit Trail	Codebook
	Network Display	Database
	Bracketing	Research Journal

Note. The following criteria, techniques, and strategies were used to achieve trustworthiness of the data.

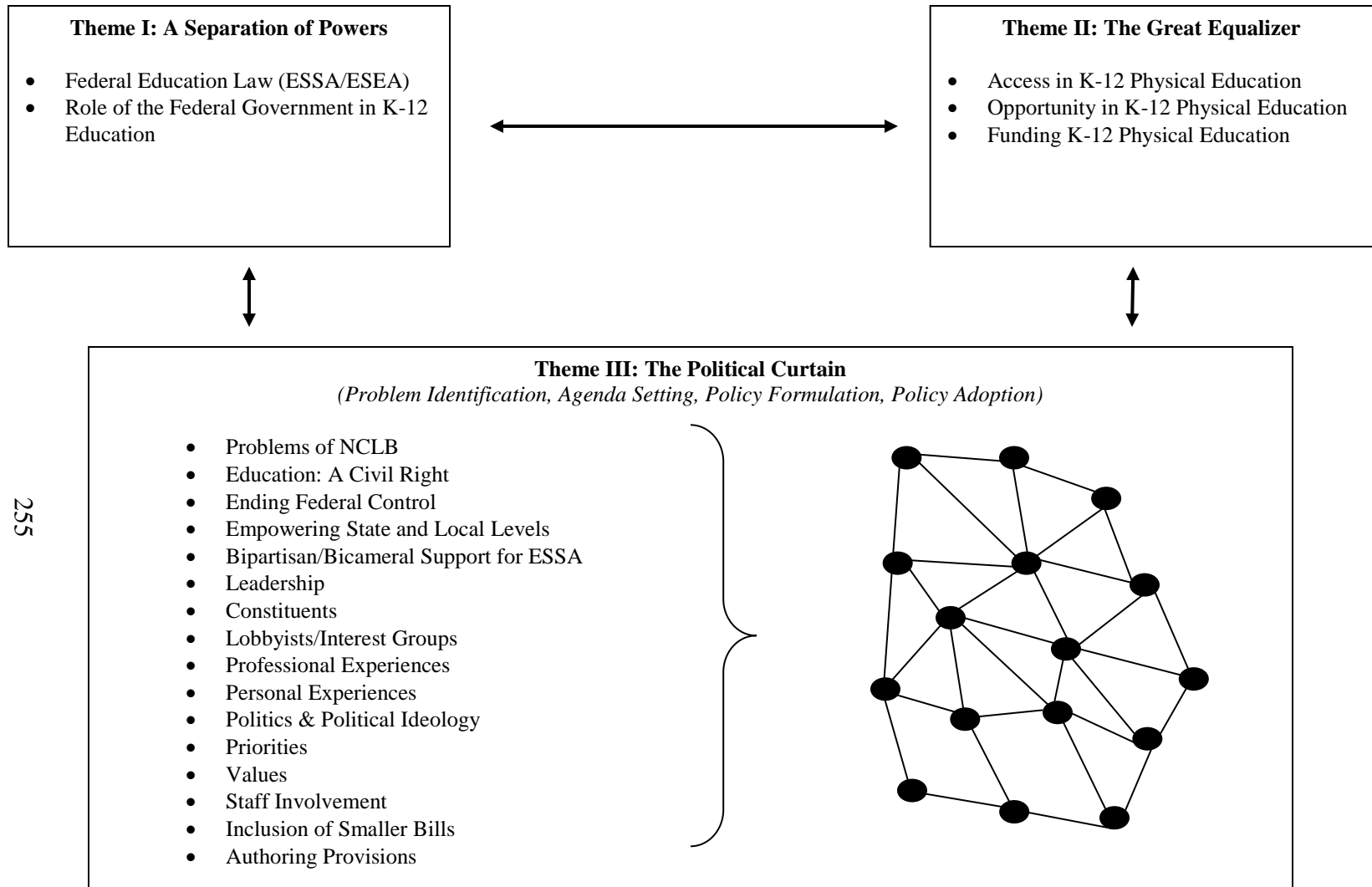


Figure 2. Policymaking Process of School-Based Physical Education. In this study, three themes emerged from the data: Theme I: A Separation of Powers; Theme II: The Great Equalizer; and Theme III: The Political Curtain. Themes one and two were influenced by theme three. Theme three consisted of several factors that impacted the policymaking process at the national level. Although these factors appear linear, they are, in fact, interconnected.