

INTRODUCTION

- Mental health concerns have increased tremendously with rising rates of stress, anxiety, and depression.
- Consistent feelings of sadness in students has increased 40%
- Physical education (PE) is linked to physical health and has many positive effects on mental and emotional wellbeing.
- PE classes provide a structured and predictable environment

AIM

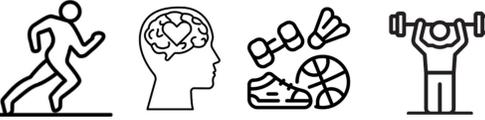
- To examine how physical education policies across the United States impacts the mental health of K-12 students.

KEY TAKEAWAYS/FINDINGS

- Stricter PE policies that mandate frequency, duration, and quality of instruction are directly linked to better mental health outcomes as shown in Illinois compared to California
- Illinois adheres to SHAPE America and CDC PE Standards
- Consistent PE and physical activity benefits students mental well being along with their physical health compared to only some physical activity
- Illinois has comprehensive PE policies which shows more consistent student access to physical activity in PE which benefits students directly
- Both states recognize the importance of physical education on mental health

RESULTS

- Students reported elevated mood and feelings better after PE classes
- PE promotes emotional literacy, especially in younger students.
- Consistent physical activity has been linked with lower depressive symptoms
- Limited access to quality PE in underserved areas reduces mental health benefits



CONCLUSION

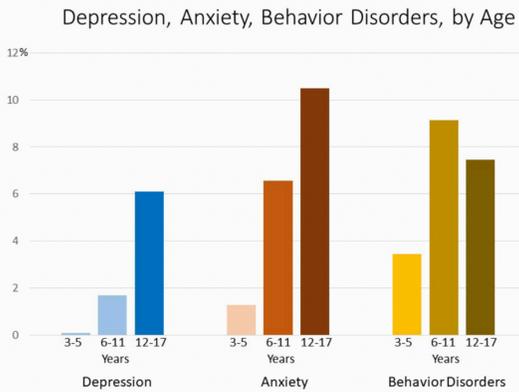
- PE policies play a critical role in supporting student mental health
- Strong, well enforced policies are linked to lower stress, anxiety, and depression
- Policies must be inclusive, addressing marginalized students, disabilities, and the mentally challenged
- Ongoing research and consistent policy implementation are essential for long term impact
- PE should be a key component of mental health support and not just a physical requirement

METHODS

- Qualitative review of literature on PE policies and student mental health (K-12 in the U.S.)
- Included qualitative, mixed-methods studies, policy analyses, and educational reports
- Searched databases: PubMed, Google Scholar
- Key terms: “physical education,” “mental health,” “K-12,” “school policy,” etc.
- Policy frameworks: SHAPE America standards, CDC school activity guidelines

TABLES

- The older the students get the more they experience depression, anxiety, and behavior disorders
- Comparison of states with strict and not strict physical education policies



Physical Education Requirements

Students K-12 in the United States

	ILLINOIS	CALIFORNIA
FREQUENCY	Mandated daily PE for K-12. Now minimum 3 days/week	Grades 1-6: 200 minutes/10 days Grades 7-12: 400 minutes/10 days
TIME REQUIREMENT	~225 minutes/week	~200 minutes/10 days
WAIVERS	Limited waivers: only for medical/religious reasons OR school board approval	More flexible: 2 year exemptions allowed for grades 10-12
STATE POLICY ENFORCEMENTS	Mandated and monitored by Illinois State Board of Education (ISBE)	Enforcement varies by district; less centralized accountability
PE EVALUATION	Illinois Enhanced PE Standards aligned with CDC & SHAPE America guidelines	Based on California Content Standards; evaluation varies locally

Mental Health Outcomes

Students K-12 in the United States

	ILLINOIS	CALIFORNIA
YOUTH (12-17) MAJOR DEPRESSIVE EPISODE	15.2% (2019, NSDUH)	24.9% (2020, CA Health Interview Survey)
PERSISTENT SADNESS/HOPELESSNESS	40.4% (2022)	43.6% (2021)
CONSIDERED & ATTEMPTED SUICIDE	Considered: 17.1% Attempted: 7.4	Considered: 20.7% Attempted: 9.8%
PARTICIPATION ≥3 DAYS/WEEK	52-58%	38-44%
MET CDC PHYSICAL ACTIVITY GUIDELINES	~27-30%	~19-23%