

***FITNESSGRAM<sup>®</sup>***  
***New Health Fitness Zone<sup>®</sup> Standards***

***Key Points for Teachers & Administrators***

- Beginning in the fall of 2010, FITNESSGRAM will use new criterion-referenced standards to determine the Healthy Fitness Zone (HFZ) for Body Composition (BC) and Aerobic Capacity (AC).
- The new standards are based on research on children and adolescents and the risk of metabolic syndrome. Metabolic syndrome is a group of risk factors that increases the risk of developing diabetes and cardiovascular disease. The increasing prevalence of the metabolic syndrome is being driven by the growing obesity epidemic in the young. Metabolic syndrome risk factors are:
  - ◆ high fasting glucose,
  - ◆ high waist circumference,
  - ◆ high triglycerides,
  - ◆ low high density lipoprotein cholesterol. and
  - ◆ high blood pressure.
- Both the new BC and AC HFZ standards take into account normal changes during growth and maturation as well as health risk. The actual values between boys and girls are more similar at young ages and more different at older ages. The changes do not imply higher expectations for boys than girls, but reflect the same relative levels of fitness for boys and girls as they mature.
- The new standards maximize the probability that students will be classified the same by either the %BF and BMI assessments for BC or any of the run/walk tests for AC.
- It is likely that fewer younger boys and girls will achieve the new BC HFZ. Previously too many at risk children were not being identified at the younger ages. It is good to identify risk early.
- It is likely that fewer young girls will achieve the new AC HFZ standards. It is likely that more young boys but fewer older boys will achieve the new AC HFZ standards. Previously the standards were too easy for young girls relative to the young boys and the older boys standards did not sufficiently take into account maturation.
- The actual test items for BC (%BF or BMI based on HT and WT) and AC (PACER, One-mile run or One-mile walk) will not change, however BMI values (entry of height and weight) will need to be recorded in order to get an AC classification.

- There might be a difference in the way the PACER test or One-mile run or walk will be administered to the students. If students had previously been given a performance goal (# or PACER laps or time for the One-mile) and allowed to stop when that was achieved, this will no longer be possible because both performance and BMI are now used in calculating the outcome. This takes into account the impact BC has on performance but negates the possibility of pre-performance prediction. The outcome and classification will be judged solely on the basis of  $\dot{V} O_2\text{max}$ .
- The upper limits to the HFZ standards have been removed in accordance with the new US Physical Activity Guidelines that encourage higher levels of fitness for greater health benefit.
- In addition to the modification of the values representing the HFZ the Needs Improvement zone has been subdivided into “some” risk and “high” risk indicating the “possibility” and “probability” of serious future health problems if the student continues to track at these levels. The urgency for intervention is greater in the high risk category.