

**HEALTH EDUCATION K-12**

**Teaching and Learning Framework**

**Introduction / Philosophy**

The health education program teaches about physical, mental, emotional and social health. The curriculum motivates students to improve and maintain their health, prevent disease, and reduce risk behaviors. Learning experiences help students learn skills they will use to make healthy choices throughout their lifetime and support students in developing *health literacy*, which aids them in obtaining, interpreting and understanding basic health information and services and in developing the competence to use such information and services in ways to enhance their health. The health literate person is a critical thinker and problem solver; a responsible, productive citizen; a self-directed learner; and an effective communicator (SHAPE, 2015).

**Legislation and National Standards Alignment**

**Ohio Legislation.** Ohio currently does not have health standards, however, Ohio law does direct schools and districts to include health education and other related topics at various times throughout the K-12 curriculum. The law does not dictate how or when health education is taught beyond the grade bands of K-6, 7-8, and 9-12: however, the Ohio Department of Education (ODE) provides resources to help support the development of a school or district’s health curriculum (ODE, 2019). The following includes the legislated grade-band content that informs the district’s K-12 health program:

Ohio Legislation (ORC 3313.60)		
K-6	7-8	9-12
<ul style="list-style-type: none"> <li>▪ Nutritive value of foods</li> <li>▪ Harmful effects of drugs</li> <li>▪ Personal safety and assault</li> <li>▪ Prescription opioid abuse prevention</li> </ul>	<ul style="list-style-type: none"> <li>▪ Nutritive value of foods</li> <li>▪ Harmful effects of drugs</li> <li>▪ Venereal disease education</li> <li>▪ Dating violence prevention and characteristics of unhealthy relationships</li> <li>▪ Prescription opioid abuse prevention</li> </ul>	<ul style="list-style-type: none"> <li>▪ Nutritive value of foods</li> <li>▪ Harmful effects of drugs</li> <li>▪ Venereal disease education</li> <li>▪ Dating violence prevention and characteristics of unhealthy relationships</li> <li>▪ Prescription opioid abuse prevention</li> <li>▪ Organ donation and process of making an anatomical gift under ORC 2108</li> <li>▪ First aid, CPR and AED training under ORC 3313.6021</li> </ul>

**National Standards.** Since Ohio does not have health education standards, the district’s health education program is informed by national standards to include the National Health Education Standards (Joint Committee on National Health Standards, 2007). These health standards are organized by grade bands and articulate what students should know by the end of grades 2, 5, 8 and 12. Each of the eight national standards includes multiple performance indicators. The following provides a general perspective on the National Health Education Standards:

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National Health Education Standards (2007)	
Standard 1	Students will comprehend concepts related to health promotion and disease prevention to enhance health.
Standard 2	Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.
Standard 3	Students will demonstrate the ability to access valid information and products and services to enhance health.
Standard 4	Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.
Standard 5	Students will demonstrate the ability to use decision-making skills to enhance health.
Standard 6	Students will demonstrate the ability to use goal-setting skills to enhance health.
Standard 7	Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.
Standard 8	Students will demonstrate the ability to advocate for personal, family, and community health.

Whereas the National Health Education Standards serve as the core foundation to the program, the portion of the curriculum that addresses human development and sexuality (grades 5 to high school) is informed by the National Sexuality Education Standards (2012). Additionally, the middle school curriculum (*Pathways to Success*) is informed by national core social and emotional learning competencies (CASEL, 2017). Ohio’s legislative requirements and the national standards and competencies all promote personal, family and community health.

### Learner Profile

The health education program aligns with the Bexley Learner Profile (engage, equip, empower). Health instruction supports students in developing health literacy, which aids them in obtaining, interpreting and understanding basic health information and services and in developing the competence to use such information and services in ways to enhance their health. Learning experiences foster awareness of physical, mental, emotional and social health, related to students’ personal lives and to community health and that may be linked to later educational and career choices.

<i>What should a Bexley Health Education do for students?</i>	
Knowledge (engage)	Each student will understand concepts related to health promotion and disease prevention.
Skills (equip)	Each student will demonstrate the ability to access valid health information and services, analyze various influences on personal and community health (e.g., culture, media, technology), and practice health-enhancing behaviors to reduce health risks.
Mindsets (empower)	Each student will have the ability to use effective interpersonal communication skills to enhance health, use goal-setting and decision-making skills, and advocate for personal, family, and community health.

**Conditions that Support Learning**

High-quality health programs engage students in learning experiences that help them to develop health literacy. Effective health education curriculum doesn't just simply teach scientific facts to increase knowledge but engages students in having health goals related to behavioral outcomes, addressing social pressures and influences, and building personal and social competency and self-efficacy by addressing skills (Benes & Alperin, 2016; CDCP, 2012, 2013; Joint Committee on National Health Standards, 2007).

Curriculum and learning experiences are informed by evidence-based research archived by the U.S. Department of Health and Human Resources and the Centers for Disease Control and Prevention, including resources regarding health and academics, effective curriculum and instruction for reducing youth risk behaviors, and pregnancy and disease prevention. Instruction is informed by evidence-based programs [e.g., *Get Real* sex education program for middle and high school (2015/ETR)]. Culturally-inclusive materials also are used to personalize information and engage students in developmentally-appropriate learning experiences that provide opportunities to reinforce skills and positive health behaviors.

Each student will...	Teachers will involve students in...
Understand concepts related to health promotion and disease prevention and analyze various influences on health.	Sharing personal thoughts, feelings and opinions and considering new arguments.
Demonstrate the ability to access valid health information and services, analyze various influences on personal and community health, and practice health-enhancing behaviors to reduce health risks.	Critical thinking, problem solving, and decision-making skills and reflecting on these as they promote health-enhancements that reduce health risks.
Have the ability to use effective interpersonal communication skills to enhance health, use goal-setting and decision-making skills, and advocacy for personal, family and community health.	Using communication, goal setting, and decision-making skills that enhance personal, family and community health.

**Overview of Program**

At all levels of the program, students develop health knowledge to reduce risk behaviors and explore personal attitudes and beliefs about health and being healthy. The program includes lessons on nutrition and wellness; mental and emotional health; growth and development; personal health; alcohol, tobacco and other drugs; communicable and chronic diseases; injury prevention and safety; and consumer and community health. Decision-making is taught to ensure students know how to make health decisions based on knowledge and their personal values.

In alignment with Board of Education Policy IGAH/IGAI, Family Life Education/Sex Education, the health curriculum is in addition to education that students receive at home that reflects their family and cultural values: "Parents have the primary responsibility to assist their children in developing moral values. The schools should support and supplement parents' efforts in these areas by offering students factual information and opportunities to discuss concerns, issues and attitudes."

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Health Education K-12 Overview		
Elementary (K-5)	Middle School (6-8)	High School (9-12)
<p>Health education content is integrated with instruction in English language arts, math, science, and social studies. The P.E. teacher, school counselor, and health clinic nurse also instruct portions of the health curriculum.</p>	<p>Health education is offered at each grade and is part of a nine-week rotation with P.E. Students at each grade level receive approximately 20 days of health education instruction.</p> <p>Additionally, all grade 7 students enroll in the nine-week course <i>Pathways to Success</i>; a school counselor may instruct portions of this course in addition to implementing the counseling curriculum.</p>	<p>All students are required to complete one semester of health education as a graduation requirement.</p> <p>Further, ORC 3313.60 requires students to have training on first aid, CPR and use of AED. This non-certificated training occurs in April during state testing and is provided to all seniors unless students can produce evidence of receiving prior training.</p> <p>Additionally, students may enroll in the elective course <i>Wellness</i> that engages them in self-awareness and actions to enhance their health.</p>

### References

Benes, S., & Alperin, H. (2016). *The essentials of teaching health education: Curriculum, instruction and assessment*. Reston, VA: SHAPE America – Society of Health and Physical Educators.

Centers for Disease Control and Prevention (CDCP). (2012). *Health education curriculum analysis tool (HECAT)*. Retrieved Feb. 20, 2019 from <https://www.cdc.gov/healthyyouth/hecat/index.htm>

Centers for Disease Control and Prevention (CDCP). (2013). *Characteristics of effective health education curriculum*. Retrieved Jan. 9, 2019 from <https://www.cdc.gov/healthyschools/sher/characteristics/index.htm>

Collaborative for Academic, Social, and Emotional Learning (CASEL). (2017). *Core social emotional learning competencies*. Chicago: Author. Retrieved Jan. 8, 2019 from <https://casel.org/core-competencies/>

Joint Committee on National Health Standards. (2007). *National health education standards: Achieving excellence* (2<sup>nd</sup> Ed.). Washington, DC: The American Cancer Society. Retrieved March 21, 2019 from <https://www.cdc.gov/healthyschools/sher/standards/index.htm>

Society of Health and Physical Educators (SHAPE). *Appropriate practices in school-based health education: Guidance document* – retrieved Jan. 30, 2019 from <https://www.shapeamerica.org/uploads/pdfs/Appropriate-Practices-in-School-Based-Health-Education.pdf>

## Background Texts

Centers for Disease Control and Prevention (CDCP). Adolescent and school health (resources). Retrieved Jan. 30, 2019 from <https://www.cdc.gov/healthyyouth/resources.htm>

Centers for Disease Control and Prevention (CDCP). (2014). Youth risk behavior surveillance survey. Retrieved Jan. 29, 2019 from <https://www.cdc.gov/mmwr/volumes/67/ss/ss6708a1.htm>

Coalition of National Health Education Organizations. (2011). *Code of ethics for the health education profession*. Retrieved Jan. 29, 2019 from <https://www.nchec.org/code-of-ethics>

Future of Sex Education Initiative. (2012). *National sexuality education standards: Core content and skills, K-12* (a special publication of the *Journal of School Health*). Retrieved Jan. 30, 2019 from <http://www.futureofsexed.org/documents/josh-fose-standards-web.pdf>

Health Education Curriculum Analysis Tool (HECAT). (2012). Module MEH: *Mental and emotional curriculum*. Retrieved Feb. 20, 2019 from [https://www.cdc.gov/healthyyouth/hecat/pdf/HECAT\\_Module\\_MEH.pdf](https://www.cdc.gov/healthyyouth/hecat/pdf/HECAT_Module_MEH.pdf)

Ohio Department of Education (ODE). (2017). CPR and AED curriculum. Retrieved Jan. 29, 2018 from <http://education.ohio.gov/getattachment/Topics/Learning-in-Ohio/Grades-9-12-High-School-CPR-and-AED-Requirements/CPR-and-AED-Guidance.pdf.aspx>

Ohio Department of Education (ODE). K-12 Health education curriculum/Ohio legislative requirements – retrieved Jan. 30, 2019 from <http://education.ohio.gov/Topics/Learning-in-Ohio/Health-Education>

Ohio Department of Education (ODE). (2015). *Ohio's new learning standards: Physical education standards*. Columbus, OH: Author. Retrieved March 21, 2019 from <http://education.ohio.gov/getattachment/Topics/Ohios-Learning-Standards/Physical-Education/Updated-Physical-Education-Standards-Evaluations-2/Updated-Physical-Education-Standards.pdf.aspx>

Ohio Department of Education (ODE). Opioid abuse prevention (resources). Retrieved Jan. 29, 2019 from <http://education.ohio.gov/Topics/Learning-in-Ohio/Health-Education/Opioid-Abuse-Prevention>

U.S. Department of Health and Human Resources/Office of Adolescent Health. Adolescent development. Retrieved Feb. 20, 2019 from <https://www.hhs.gov/ash/oah/adolescent-development/index.html>

**Board of Education Policies**

ACAB, Gender Identity and Expression

EFG, Student Wellness Program

IGAE, Health Education

IGAF, Physical Education

IGAG, Drugs, Alcohol and Tobacco Education

IGAH/IGAI, Family Life Education/Sex Education

JFCF, Hazing and Bulling (Harassment, Intimidation, Dating Violence)

JHF, Student Safety

JHG, Reporting Child Abuse