

Meeting Agenda

Group/Team:	BOE Curriculum Committee						
Location:		Date of Meeting:	Start Time:	Finish Time:			
Superintendent's Conference Room Chase Building – 1 st floor 236 Grand Street Waterbury, CT		Thursday July 21, 2022	5:00 p.m.				
Team Norms:							
 All meetings will start on time All issues will be approached with a positive attitude A specific agenda will be set for all meetings All teams members will agree to stay on specific agenda topics Decisions regarding future directions will be based upon actual data 							

Purpose of Meeting – Instructional Focus:

Age	Agenda Items – (Items should reflect next steps from previous meeting.)						
	Agenda Item	Time Allotted	Person Responsible				
1.	Overview of Health Standards		D. Schwartz				
2.	Miscellaneous						

Healthy and Balanced Living Curriculum Framework

Health Education and Physical Education



Connecticut State Department of Education — 2021 (Updated May 2022)

Health Education and Physical Education

Introduction

Academic Standards provide a common set of expectations for what students will know and be able to do at the end of a grade for each subject area. While academic standards establish desired learning outcomes, curriculum provides instructional programming designed to help students reach these outcomes. They serve as goals for teaching, learning and assessment. The standards help ensure that students acquire the skills and knowledge they need to achieve personal and academic success. The CSDE's Healthy and Balanced Living Curriculum Framework Standards provides the required elements of instruction and are worded broadly to allow for local decision-making in designing specific curriculum.

Learning Goals, Standards, and Outcomes

These four learning goals are foundational in academic learning standards:

- 1. **Read** with comprehension, **write** effectively, and **communicate** successfully in a variety of ways and settings and with a variety of audiences.
- Know and apply the core concepts and principles of mathematics; social, physical, and life sciences; civics and history, including different cultures and participation in representative government; geography; arts; and health and physical education;
- 3. **Think** analytically, logically, and creatively, and integrate technology literacy and fluency as well as different experiences and knowledge to form reasoned judgments and solve problems; and
- 4. **Understand** the importance of work and finance and how performance, effort, and decisions directly affect future career and educational opportunities.

Health Education and Physical Education: Educating the Whole Child

The mission of the Connecticut State Board of Education is to ensure equal opportunity, equity, and excellence in education for all Connecticut students in preparation for college, career, and life. Health Education and Physical Education are essential academic subjects that support this mission through the physical, intellectual, and social-emotional development of students. Quality health education and physical education programs prepare students by providing them with:

- information and learning experiences to support and enhance their abilities to access, understand, appraise, apply, and advocate for health information and services to maintain or improve their own health and the health of others;
- the ability to move with competence and confidence in a wide variety of physical activities in multiple environments that benefit the healthy development of the whole person;
- learning experiences that lead to academic achievement;
- skills to improve focus, attention, concentration, and on-task behavior;
- skills and knowledge that encourage lifetime healthy behaviors and goal setting; and
- practices that foster effective cross-cultural communication, problem solving, negotiation, and conflict resolution skills.

Whole School, Whole Community, Whole Child: Link to Health Education and Physical Education

The Whole School, Whole Community, Whole Child (WSCC) model focuses on improving each child's cognitive, physical, social, and emotional development through the alignment, integration, and collaboration between education and health. The approach of the model focuses on the connection between the whole school and whole community, sharing resources and influences when addressing the needs of the whole child.

In the WSCC model, health education and physical education are two distinct academic disciplines that complement one another. These two disciplines foster the development of skills and competencies for academic and personal growth. For this reason, Connecticut focuses on the concept of the whole child that includes not only academic functioning, but also the components affecting the child's well-being and overall health, specifically as it relates to the social and emotional, behavioral, and physical health of the child (Association for Supervision and Curriculum Development [ASCD], 2017). Information regarding the components of health and physical education in the WSCC model is located on the <u>ASCD's website</u>.

Health Education Section

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Introduction to the Health Education Curriculum Framework

Research supports that students' health and well-being significantly influences learning and academic achievement (Basch, 2011). Comprehensive school health education positively affects student achievement by increasing health knowledge, improving health skills, positively influencing health behaviors, and decreasing risky behaviors (Michael, Merlo, Basch, Wentzel & Wechsler, 2015).

The Connecticut State Department of Education's (CSDE) Health Education Curriculum Framework provides districts with a best practice approach for implementing a planned, ongoing, and sequential PK-12 curriculum that addresses the physical, mental, social, and emotional dimensions of health. An effective, health education curriculum is research-based and theory driven and defines clear goals and behavioral outcomes for all students. Districts must ensure that the curriculum is standards- and skills based, developmentally and culturally appropriate. and designed to motivate students to maintain and improve their health and develop and demonstrate health-enhancing knowledge, attitudes, skills, and practices. In addition, health education is foundational to social and emotional learning and provides an opportunity for students to learn and practice these essential skills. Ultimately, an effective curriculum promotes the development of protective factors, supports healthy outcomes, and enables students to establish and practice healthenhancing behaviors and become productive, health literate citizens.

The Health Education Curriculum Framework represents a vision of the graduate that utilizes an integrated approach and alignment to key components of the health education curriculum including the following:

- 1. National Health Education Standards (Joint Committee on National Health Education Standards, 2007)
- 2. Essential core content
- 3. Grade level performance indicators
- 4. Social Emotional Learning Competencies (CASEL, 2019).

This framework structure allows for various points of entry given the different approaches to curriculum development while clearly showing the connections. The eight **National Health Education Standards (NHES)** provide concrete expectations of curriculum and are vital for assisting

students in learning how to apply knowledge and skills and develop health-enhancing behaviors. Essential core content provides legislatively mandated (see appendixes A and B) as well as recommended topic areas and developmentally appropriate subtopics for each grade level span. Core content should be infused into all seven skills-based standards. **Performance indicators** define grade level expectations of what students should know and be able to do. The Social and Emotional Learning Competencies (SEL) "provide a process through which children and adults acquire and effectively apply the knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions" (Education-first, p. 6). When delivered in a planned, ongoing, and systematic approach, the comprehensive health education program provides **TIER 1** education and skill development opportunities for all students. The synergy between the application of academic standards, performance indicators, and the SEL competencies into everyday instruction supports the optimal development of students

Acknowledgements

Numerous professionals contributed to the development of the Healthy and Balanced Living Curriculum Framework. It was through their leadership, hard work, dedication, and persistence that this document has become a dynamic resource to address and promote the health and wellness of students in Connecticut.

A special thank you to the following individuals who served as the core writing team for the Healthy and Balanced Living Curriculum Framework Health Education Section:

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Competencies of Social and Emotional Learning

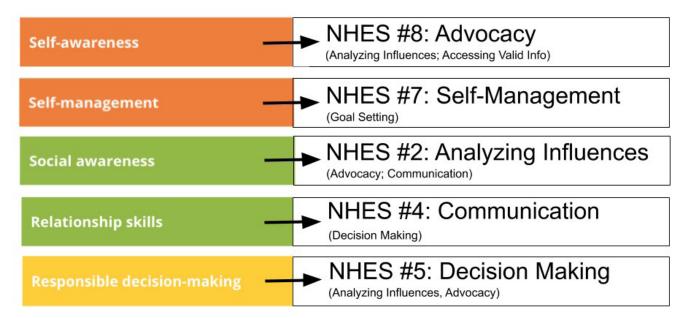
The strong interconnectedness between National Health Education Standards and CASEL's core SEL competencies build and nurture social and emotional skills and provide TIER 1 education for all students.

Health Education Academic Learning Standards	SEL Competencies	
Standard 2 Analyzing Influences Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors. Standard 3 Accessing Information	Self-awareness: The ability to accurately recognize one's own emotions, thoughts, and values and how they influence behavior. The ability to accurately assess one's strengths and limitations, with a well-grounded sense of confidence, optimism, and a "growth mindset."	
Students will demonstrate the ability to access valid information, products, and services to enhance health.		
Standard 7 Self-management Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks.		
Standard 8 Advocacy Students will demonstrate the ability to advocate for personal, family, and community health.		
Standard 6 Goal Setting Students will demonstrate the ability to use goal-setting skills to enhance health.	Self-management: The ability to successfully regulate one's emotions, thoughts, and behaviors in different situations, effectively managing stress, controlling	
Standard 7 Self-Management Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.	impulses, and motivating oneself. The ability to set and work toward personal and academic goals.	
Standard 2 Analyzing Influences Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.	Social awareness: The ability to take the perspective of and empathize with others, including those from diverse backgrounds and cultures. The ability to understand social and ethical norms for behavior and to recognize family, school	
Standard 3 Accessing Information Students will demonstrate the ability to access valid information, products, and services to enhance health.	and community resources and supports.	
Standard 4 Interpersonal Communication Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health.		
Standard 8 Advocacy Students will demonstrate the ability to advocate for personal, family, and community health.		

Health Education Academic Learning Standards	SEL Competencies
Standard 2 Analyzing Influences Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.	Relationship skills: The ability to establish and maintain healthy and rewarding relationships with diverse individuals and groups. The ability to communicate clearly, listen well, cooperate with others, resist inappropriate social pressure,
Standard 4 Interpersonal Communication Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health.	negotiate conflict constructively and seek and offer help when needed.
Standard 5 Decision Making Students will demonstrate the ability to use decision-making skills to enhance health.	
Standard 8 Advocacy Students will demonstrate the ability to advocate for personal, family, and community health	
Standard 2 Analyzing Influences Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.	Responsible decision-making: The ability to make constructive choices about personal behavior and social interactions based on ethical standards, safety concerns and social norms. The realistic evaluation of consequences of various
Standard 5 Decision Making Students will demonstrate the ability to use decision-making skills to enhance health.	actions, and a consideration of the well-being of oneself and others.
Standard 6 Goal Setting Students will demonstrate the ability to use goal setting skills to enhance health.	
Standard 7 Self-management Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks.	
Standard 8 Advocacy Students will demonstrate the ability to advocate for personal, family, and community health.	

The following graphic reflects a streamlined alignment of the National Health Education Standards (NHES) with the Social and Emotional Learning Competencies as defined by CASEL (CASEL, 2019, https://casel.org/what-is-sel/).

SEL/HE Alignment



(Todnem, 2019).

How to Use the Health Education Curriculum Framework

Today's state-of-the-art health education curricula reflect the growing body of research that emphasizes teaching functional health information (essential knowledge); shaping personal values and beliefs that support healthy behaviors; shaping group norms that value a healthy lifestyle; and developing the essential health skills necessary to adopt, practice, and maintain health-enhancing behaviors. (2012 HECAT Overview, p.4)

The Health Education Curriculum Framework provides guidance on essential health content and skills and a vision for student learning through the following:

National Health Education Standards

• **Core Content Standard 1** addresses the nine essential content areas that are the focus in school health education.

Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.

- Alcohol, Nicotine and Other Drugs
- Healthy Relationships
- Violence Prevention
- Healthy Eating and Physical Activity
- Sexual Health
- Optimal Wellness and Disease Prevention
- Sexual Assault and Abuse prevention
- Mental and Emotional Health
- Safety and Injury Prevention
- Skills-based Standards 2-8 contain the essential health related skills for contributing to healthy and balanced living.
 - 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, 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.
 - » Skills-based health education dictates that the focus and emphasis be on the selection of school health skills infused with essential content.
 - » This Framework does not prescribe the alignment of particular health skills to particular health content but allows for local decisions across the scope of skills and content of school health education.
 - » District leaders and teachers have the opportunity to choose skills that most appropriately align to particular content supporting the development of health literate students who are at the center of learning.
 - » District leaders and teachers should use this document as the foundation for creative and imaginative teaching. Users of this document should make data driven decisions on what is to be taught, and when, based on the particular needs of students and norms of the school community. The choices made about the content and skills taught at each grade level should reflect district and student needs as well as incorporate all state mandates related to school health education.
 - » The content and skill development progresses in complexity across grade clusters, PK-2, 3-5. 6-8 and 9-12.

Core Concepts PK-12

Standard 1:

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Alcohol, Nicotine and Other Drugs (ANOD)	 ANOD 1.1.2 Identify dangerous household products that are harmful if intentionally, swallowed, inhaled, or absorbed. ANOD 1.2.2 Explain that medicines are drugs that are helpful when needed and used correctly. ANOD 1.3.2 Identify family and school rules about medicine use. ANOD 1.4.2 Identify that using medicines requires adult supervision and identifying those adults (e.g., parents, school nurse, doctor, etc.). ANOD 1.5.2 Physical avoidance and reporting of dangerous drugs and paraphernalia (e.g., needles, candy like substances, vape pens, etc.). 	 ANOD 1.1.5 Explain why household products are harmful if intentionally absorbed or inhaled. ANOD 1.2.5 Explain the benefits and correct use of medicines and potential risks associated with inappropriate use of medicines. ANOD 1.3.5 Identify short- and long-term effects of alcohol and nicotine use, including second- hand effects. ANOD 1.4.5 Explain the dangers of experimenting with nicotine and alcohol. ANOD 1.5.5 Describe family rules about avoiding nicotine and alcohol use. ANOD 1.6.5 Identify the social impacts of ANOD use (e.g., family, friends, peers). 	 ANOD 1.1.8 Identify healthy coping mechanisms and alternatives to substance use. ANOD 1.2.8 Distinguish between proper use and abuse of overthe-counter and prescription medicines. ANOD 1.3.8 Summarize the negative consequences of using alcohol and other drugs. ANOD 1.4.8 Describe situations that could lead to the first time use of alcohol and other drugs. ANOD 1.5.8 Explain why using alcohol or other drugs is an unhealthy way to manage stress. ANOD 1.6.8 Explain school policies and community laws about alcohol, nicotine, and other drugs. ANOD 1.7.8 Determine the benefits of being alcohol, nicotine and other drugs. ANOD 1.8.8 Explain the risks associated with riding in a motor vehicle with someone who is under the influence of alcohol and other drugs. ANOD 1.9.8 Describe short- and long-term physical, social and emotional effects of using ANOD's (e.g., effects on organs, including brain, peer relationships, family relationships, self-esteem). 	 ANOD 1.1.12 Differentiate between proper use and abuse of over-the-counter (OTC) and prescription medicines. ANOD 1.2.12 Examine situations that could lead to the use of alcohol and other drugs. ANOD 1.3.12 Examine the resiliency skills that empower people to remain alcohol- and drug-free. ANOD 1.4.12 Summarize family rules, school rules, and laws about alcohol, nicotine, and other drug-use. ANOD 1.5.12 Compare the relationship between ANOD use and other risks, such as unintentional injuries, violence, suicide, sexual risk behaviors, decreased school and job performance, school and job absenteeism, and job loss. ANOD 1.6.12 Examine the dangers of driving and/or riding with a driver while under the influence of alcohol and other drugs. ANOD 1.8.12 Examine the ripple effects (e.g., financial, social, emotional, physical) costs of ANOD's use to the individual and society.

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Healthy Relationships (HR)	HR 11.2 Describe different types of families (e.g., two-parent, single parent, blended, intergenerational, cohabitating, adoptive, foster, same-gender, mixed-race). HR 1.2.2 Identify the benefits of healthy family and peer relationships. HR 1.3.2 Identify qualities that make a good friend. HR 1.4.2 Demonstrate ways to treat all people with dignity and respect (e.g., race, ethnicity, socio-economic status, differing abilities, immigration status, family configuration). HR 1.5.2 Define consent (e.g., personal space and boundaries).	 HR 11.5 List healthy ways to express affection, love, and friendship. HR 1.2.5 Identify characteristics and benefits of healthy family and peer relationships. HR 1.3.5 Describe the value of others' talents and strengths. HR 1.4.5 Describe genderrole stereotypes and their potential impact on self and others. HR 1.4.5 Define and discuss consent as it relates to personal boundaries. 	 HR 1.1.8 Differentiate among gender expression, gender identity and sexual orientation. HR 1.2.8 Identify various types of relationships (peer, family, romantic, professional, etc.). HR 1.3.8 Describe characteristics of healthy relationships (communication, respect, trust, and boundaries). HR 1.4.8 Differentiate between healthy and unhealthy relationships. HR 1.5.8 Explain why it is wrong to tease others based on personal characteristics (such as body type, gender, appearance, mannerisms, and the way one dresses or acts). HR 1.6.8 Explore strategies to address unhealthy relationships. HR 1.7.8 Describe healthy ways to express affection, love, and friendship. HR 1.8.8 Describe how consent is a foundational principle in healthy relationships and in preventing sexual violence. HR 1.9.8 Discuss how affirmative consent mitigates confusion within a relationship. HR 1.1.8 Explain the importance of talking with parents and other substances) that can affect the ability to give or perceive consent to sexual activity. HR 1.1.8 Explain the importance of talking with parents and other trusted adults about issues related to relationships, growth and development and sexual health. HR 1.1.3.8 Identify the legal and social consequences of viewing and/or sending sexually explicit pictures or messages by email or cell phone or posting sexually explicit pictures on social media sites (e.g., chat groups, email, texting, websites, phone and tablet applications). 	 HR 1.1.12 Describe personal characteristics that make people unique and the benefits of living in a diverse society. HR 1.2.12 Identify characteristics of healthy and unhealthy relationships (communication, trust, boundaries, respect). HR 1.3.12 Identify how power and control differences in relationships can contribute to aggression and violence. HR 1.4.12 Describe the effects of viewing pornography, sexting, etc. on healthy relationships. HR 1.5.12 Demonstrate an understanding of how affirmative consent mitigates the impact and consequences of sexual pressure. HR 1.6.12 Evaluate effective strategies for handling challenges in relationships (e.g., family members, peers, and sig- nificant others). HR 1.7.12 Evaluate the legal and social consequences of sending sexually explicit pictures or messages by email or cell phone or posting sexually explicit pictures on social media sites (e.g., chat groups, email, texting, websites, and phone and tablet applications). HR 1.8.12 Summarize the benefits of respecting individual differences in aspects of sexuality (such as sexual activity, sexual abstinence, sexual ori- entation, gender expression, or gender identity), growth and development, and physical appearance. HR 1.9.12 Describe the consequences of prejudice, discrimination, racism, sexism on healthy relationships.

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Violence Prevention (VP)	VP 1.1.2 Describe the difference between bullying, teasing, and mean-spirited behavior. VP 1.2.2 Explain why it is wrong to tease or bully others. VP 1.3.2 Explain what to do if someone is being bullied.	VP 11.5 Summarize the impact of teasing or bullying others. VP 1.2.5 Identify nonviolent ways to manage anger. VP 1.3.5 Describe the difference between mean spirited behavior, bullying, and harassment. VP 1.4.5 Explain the difference between tattling and reporting aggressive or violent behavior. VP 1.4.6 Explain what to do if you see bullying, fighting, and/ or violence.	 VP 11.8 Explain the role of bystanders in escalating, preventing or stopping bullying, fighting, and violence. VP 1.2.8 Describe short- and long-term consequences of violence to perpetrators, victims, and bystanders. VP 1.3.8 Describe strategies to avoid physical fighting and violence. VP 1.4.8 Describe how the presence of weapons increases the risk of serious violent injuries. VP 1.5.8 Summarize how participation in gangs can lead to violence. VP 1.6.8 Describe actions to take if weapons are seen or suspected in school or outside the supervision of a parent or guardian. VP 1.7.8 Define prejudice, discrimination, and bias. 	 VP 1.1.12 Describe how prosocial behaviors can help prevent violence. VP 1.2.12 Identify the negative consequences of violence to perpetrators, victims, and bystanders. VP 1.3.12 Explain how bystanders can help prevent violence by reporting dangerous situations or actions. VP 1.4.12 Summarize why the presence of weapons increases the likelihood of violent injury. VP 1.5.12 Describe how gang involvement can contribute to violence. VP 1.6.12 Describe actions to take if weapons are seen or suspected in school or outside the supervision of a parent or guardian. VP 1.7.12 Describe federal, state, and local laws intended to prevent violence.

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Healthy Eating and Physical Activity (HEPA)	 HEPA 1.1.2 Explain the importance of trying new foods. HEPA 1.2.2 Explain the importance of choosing healthy foods and beverages and daily physical activity. HEPA 1.3.2 Identify a variety of healthy snacks. HEPA 1.4.2 Describe body signals that tell a person when they are hungry and when they are full. HEPA 1.5.2 Identify healthy eating patterns that provide energy and help the body grow and develop. 	 HEPA 1.1.5 Name the food groups and variety of nutritious food choices for each food group. HEPA 1.2.5 Explain the importance of eating a variety of foods from all the food groups. HEPA 1.3.5 Describe the physical, mental, social, and academic benefits of healthful eating habits and physical activity. HEPA 1.4.5 Identify nutritious and non- nutritious beverages. HEPA 1.5.5 Describe the benefits of consuming plenty of water. HEPA 1.6.5 Describe the benefits of limiting the consumption of solid fat, added sugar, and sodium. HEPA 1.7.5 Explain the concept of eating in moderation. HEPA 1.8.5 Explain body signals that tell a person when they are hungry and when they are full. 	 HEPA 1.1.8 Identify the importance of each macronutrient (fats, proteins, carbohydrates) and eating a variety of foods from each category. HEPA 1.2.8 Summarize the physical, mental, social, and academic benefits of healthful eating habits and physical activity. HEPA 1.3.8 Describe how to make healthy food choices when given options. HEPA 1.4.8 Summarize the benefits of consuming adequate amounts of water. HEPA 1.5.8 Describe the relationship and impact of what we eat and our physical activity levels to maintaining a healthy weight. HEPA 1.6.8 Explain the importance of a healthy relationship with food (i.e., intuitive eating, moderation, food as fuel). HEPA 1.8.8 Recognize the importance of respecting food allergy needs in self and others. HEPA 1.9.8 Understand how to read food labels for the purpose of limiting the consumption of fats, added sugar, and sodium. HEPA 110.8 Explain the relationship between access to healthy foods and personal food choices. 	 HEPA 1.1.12 Describe the recommendations of the U.S. Dietary Guidelines for Americans and explain how they are useful in planning a healthy diet. HEPA 1.2.12 Describe the relationship between nutrition, physical activity, and overall health. HEPA 1.3.12 Describe the relationship between diet, physical activity, and chronic diseases such as heart disease, cancer, diabetes, hypertension, and osteoporosis. HEPA 1.4.12 Describe the effects of hydration and dehydration on physical performance and health. HEPA 1.5.12 Define and describe the benefits of a holistic diet (increasing the amount of whole foods that one eats and decreasing the amount of processed foods). HEPA 1.6.12 Distinguish food sources that provide key nutrients. HEPA 1.6.12 Describe the importance of eating a variety of appropriate foods to meet nutrient requirements that align with individual needs (caloric output). HEPA 1.8.12 Summarize the importance of healthy eating and physical activity in maintaining health. HEPA 1.9.12 Summarize the physical, mental, social, and academic benefits of healthful eating habits and physical activity. HEPA 1.11.2 Describe the benefits of limiting the consumption of high sugar, including soft drinks, energy drinks, fruit juices, and sports drinks. HEPA 1.13.12 Describe the difference between a healthy relationship with food and an unhealthy relationship with food. HEPA 1.14.12 Identify healthy and risky approaches to eating and exercise. HEPA 1.15.12 Identify the physical and psychological effects of food allergies.

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Sexual Health (SH)	SH 11.2 Identify and describe functions of body parts (e.g., stomach, feet, hands, ears, eyes, mouth). SH 1.2.2 Identify those parts of the body that are considered private by using medically accurate names.	SH 11.5 Describe basic reproductive body parts and their functions. SH 1.2.5 Explain common human sexual development and the role of hormones. SH 1.3.5 Describe the range of physical, social, and emotional changes that occur during puberty. SH 1.4.5 Explain how puberty and development can vary greatly and still be normal. SH 1.5.5 Describe how people are similar and different.	 SH 11.8 Identify resources, products, services related to supporting sexual health. SH 12.8 Explain sexual activity and their associated risks. SH 13.8 Describe reproductive body parts and their functions. SH 13.8 Describe the menstrual cycle, the process of sperm production and the relationship to conception. SH 15.8 Determine the benefits of being sexually abstinent. SH 16.8 Explain how the most common STDs and HIV are transmitted. SH 17.8 Describe the usual signs and symptoms of common STDs and HIV are transmitted. SH 1.8.8 Summarize which STDs can be cured and which can be treated. SH 1.9.8 Summarize ways to decrease the spread of STDs and HIV by not having sex, using condoms consistently and correctly if having sex, not touching blood, and not touching used hypodermic needles. SH 11.0.8 Describe how the effectiveness of condoms can reduce the risk of HIV, and other STDs including HPV (human papillomavirus). SH 11.1.8 Explain the significance of the physical changes in puberty. SH 11.2.8 Define and explain differences between cisgender, transgender, gender nonbinary, gender expansive, and gender identity 	 SH 1.112 Summarize the use of contraceptives and their relationship to the process of fertilization and conception. SH 1.2.12 Explain the importance of and ability to access contraceptive, STD and HV counseling and services if sexually active. SH 1.3.12 Discuss state and federal laws and guidelines (e.g., CDC) that address sexual healthcare services for minors (e.g., contraception, emergency contraception, prenatal care, adoption, abortion, STD, including HIV, prevention, testing, and treatment. SH 1.4.12 Examine the factors that protect one against engaging in sexual risk behaviors (e.g., values clarification, planning ahead, being prepared, communicating and respecting boundaries). SH 1.5.12 Summarize ways to reduce the risk of pregnancy, HIV, and other STD's (e.g., abstinence, avoiding alcohol and other drugs, limiting sexual partners, using protection). SH 1.6.12 Compare and contrast the advantages and disadvantages of contraceptive and disease prevention methods (e.g., abstinence, condoms, emergency contraception). SH 1.7.12 Justify why abstinence from sex and drugs are the safest, most effective risk avoidance methods of protection from HIV, other STDs, and pregnancy. SH 1.8.12 Examine the effectiveness of typical use of condoms and other barrier methods in reducing the risk of pregnancy, HIV, and other infection by STDs, including HPV (human papillomavirus). SH 1.9.12 Explain the importance of lowering the viral load of a person living with HIV to undetectable and maintaining viral suppression. SH 1.1.12 Examine the effectiveness of typical use of a variety of contraceptives in preventing pregnancy, HIV and STDs. SH 1.1.12 Explain the steat and federal alws related to Safe Haven Law, parenting, and sterilization, including their impacts on oppressed communities. SH 1.1.12 Explain the state and federal alws related to Safe Haven Law, parenting, and sterilization, including their impacts on oppressed

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Optimal Wellness and Disease Prevention (OWDP)	OWDP 1.1.2 Identify different ways that disease-causing germs are transmitted (i.e., skin, mucus membranes, coughing, and contact with bodily fluids). OWDP 1.2.2 Identify ways to prevent the spread of germs that cause common communicable diseases (e.g., cover wounds, cover mouth when sneezing/ coughing, wash hands, and do not touch other bodily fluids).	 OWDP 11.5 Describe ways to prevent the spread of germs that cause infectious diseases. OWDP 1.2.5 Describe the benefits of personal health care practices such as tooth brushing and flossing, hand washing, covering a cough and sneeze, washing hair, and bathing regularly. OWDP 1.3.5 Define the terms communicable and non-communicable disease and identify ways to help prevent disease (e.g., HIV, diabetes, cancer, heart disease). OWDP 1.4.5 Describe symptoms that prevent a person from daily activities (i.e., going to school, practices, playing with friends, etc.). OWDP 1.5.5 Develop an awareness and empathy for health problems associated with common childhood chronic diseases or conditions such as asthma, allergies, diabetes, and epilepsy. OWDP 1.6.5 Describe the importance of seeking help and treatment for diseases. 	OWDP 11.8 Describe the benefits of good hygiene practices. OWDP 1.2.8 Explain the difference between infectious, noninfectious, acute and chronic diseases, and the importance of seeking treatment. OWDP 1.3.8 Describe the controllable factors that contribute to optimal wellness and chronic diseases (i.e., heart disease, cancer, diabetes, hypertension, and osteoporosis). Intake (food, air, water, substances) Output (physical activity and movement; elimination of waste) Sleep Stress Management OWDP 1.4.8 Summarize the symptoms of someone who is sick or getting sick and how that may prevent daily activities. OWDP 1.5.8 Summarize modes of transmission and health practices to prevent the spread of infectious diseases that are transmitted by food, air, indirect contact, and person-to-person contact.	OWDP 1.1.12 Summarize important health screenings, immunizations, checkups, examinations, and health screenings necessary to maintain good health including breast and testicular self-exams. OWDP 1.2.12 Examine the wellness continuum (i.e., absence of sickness does not indicate optimal wellness). OWDP 1.3.12 Examine the controllable factors that contribute to optimal wellness and chronic diseases (i.e., heart disease, cancer, diabetes, hypertension, and osteoporosis). Intake (food, air, water, substances) Output (physical activity and movement; elimination of waste) Sleep Stress Management OWDP 1.4.12 Discuss using family history gender, and age to make informed health related decisions. OWDP 1.5.12 Differentiate between communicable and noncommunicable diseases. OWDP 1.6.12 Justify why it is important to seek help and treatment for common infectious diseases and chronic diseases.

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Sexual Assault and Abuse Prevention (SAAP)	 SAAP 1.1.2 Identify "appropriate" and "inappropriate" or "safe" and "unsafe" touches. SAAP 1.2.2 Explain why inappropriate touches should be reported to a trusted adult. SAAP 1.3.2 Explain that a child is not at fault if someone touches him or her in an inappropriate way. SAAP 1.4.2 Explain why everyone has the right to tell others not to touch his or her body. SAAP 1.5.2 Explain the importance of respecting the personal space and boundaries of others. 	SAAP 1.1.5 Define consent in a variety of settings (e.g., social interactions, physical contact, holding hands, kissing, etc.) SAAP 1.2.5 Distinguish between "appropriate" and "inappropriate" touch. SAAP 1.3.5 Explain that inappropriate touches should be reported to a trusted adult. SAAP 1.4.5 Explain why it is not the child's fault if someone touches him or her in an inappropriate way. SAAP 1.5.5 Explain that everyone has the right to tell others not to touch his or her body.	 SAAP 1.1.8 Explain that acquaintance rape and sexual assault are illegal. SAAP 1.2.8 Describe how power and control differences in relationships can contribute to aggression and violence. SAAP 1.3.8 Explain that a person who has been sexually assaulted or raped is not at fault. SAAP 1.4.8 Explain the term affirmative consent and what it looks like in words and/or actions. SAAP 1.5.8 Describe situations and behaviors that constitute sexual mistreatment, grooming, harassment, abuse, assault, and exploitation. SAAP 1.6.8 Explain that no one has the right to touch anyone else in a sexual manner if they do not want to be touched. SAAP 1.7.8 Explain why a person who has been sexually mistreated, groomed, harassed, abused, assaulted, or exploited is not at fault. SAAP 1.8.8 Explain the role of bystanders in escalating, preventing, or stopping violence, or supporting the victim. SAAP 1.0.8 Describe the positive and negative ways in which technology and social media can impact physical and emotional safety. SAAP 1.1.8 Identify the process for reporting incidents of sexual mistreatment, grooming, harassment, abuse, assault, and exploitation. 	 SAAP 1.1.12 Explain why it is wrong to trick, threaten, or coerce another person into having sex. SAAP 1.2.12 Explain why a person who has been sexually mistreated, groomed, harassed, abused, assaulted, or exploited is not at fault and should not be blamed. SAAP 1.3.12 Demonstrate strategies for avoiding and dealing with sexual health situations that involve personal risk or danger (e.g., sexual mistreatment, grooming, harassment, abuse, assault, exploitation, or trafficking). SAAP 1.4.12 Differentiate between respectful (healthy) and disrespectful (unhealthy) relationships including active consent. SAAP 1.5.12 Explain why rape and sexual assault should be reported to a trusted adult. SAAP 1.6.12 Demonstrate the ability to access reliable school and community service providers and resources for health care services related to sexual health and violence prevention (e.g., counseling, testing, school-based health centers, pediatrician, reproductive health community centers). SAAP 1.5.12 Explain why it is an individual's responsibility to verify that all sexual contact is consensual. SAAP 1.8.12 Determine laws and policies related to sexual mistreatment, grooming, harassment, abuse, assault, exploitation, and trafficking which are designed to protect young people.

Emotional Health (MEH)and rest are important for proper growth and good health.(comparisons, perceptions, serielty, social media, technology, internalizing negative setteral mes- sages from media and peers).(J) and emotionally healthy person.Health (MEH)MEH 12.2 Explain the relationship between feelings and behavior, the Hingortance of taking with parents and other feelings.MEH 12.5 Explain hub importance emotionally healthy emotionally healthy emotional health.(comparisons, perceptions, rearily, social media, inchnological stress, sering social stress, and and emotional health.(comparisons, perceptions, realthy, social media, inchnological stress, sering, realthy, social media, inchnological stress, and and series and and problems and indication, feelings (i.e., nepping, harping the social behaviors (c). MEH 14.5 Locatify feelings, MEH 15.5 Describe therems and other trusted adults about feelings.MEH 13.5 Describe therematicing negative series and emotional health.MEH 13.5 Describe therematicing negative series and emotional health.MEH 15.5 Describe therematicing represents and other trusted adults about feelings.MEH 13.5 Describe therematicing represents and other trusted adult it fhere are people who are in adult it means and other trusted adult and other trusted adults about feelings.MEH 13.5 Describe health and emotional health. <th>Content</th> <th>PK-2 Core Content Indicators</th> <th>3-5 Core Content Indicators</th> <th>6-8 Core Content Indicators</th> <th>9-12 Core Content Indicators</th>	Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
portance of telling an adult if someone is in danger of hurting themselves or others. School, and with mends. MEH 1.13.12 Summarize impulsive behaviors that can lead to violence and strategies for controlling them. MEH 1.17.8 Identify trusted adults and resources for assistance. MEH 1.14.12 Identify trusted adults and	Mental and Emotional	MEH 1.1.2 Identify a variety of feelings that people experience MEH 1.2.2 Explain the relationship between feelings and behavior. MEH 1.3.2 Explain the importance of talking with parents and other trusted adults about	 MEH 11.5 Explain why sleep and rest are important for proper growth and good health. MEH 1.2.5 Explain what it means to be mentally or emotionally healthy. MEH 1.3.5 Describe the relationship between feelings and behavior and describe appropriate ways to express a variety of feelings (i.e., anger, happiness, sadness, frustration, excitement, etc.). MEH 1.4.5 Identify feelings and emotions associated with loss and grief. MEH 1.5.5 Identify role models who demonstrate positive emotional health. MEH 1.6.5 Explain the importance of talking with parents and other trusted adults about feelings. MEH 1.7.5 Describe the importance of being aware of one's own feelings and of being sensitive to the feelings of others. MEH 1.8.5 Give examples of pro-social behaviors (e.g., helping others, being respectful of others, coop- eration, consideration). MEH 1.9.5 Explain the im- portance of telling an adult if someone is in danger of hurting themselves or 	 MEH 1.1.8 Recognize factors that lower self-worth (comparisons, perception vs. reality, social media, technology, internalizing negative external messages from media and peers). MEH 1.2.8 Recognize factors that increase selfworth (recognizing strengths, growth mindset, confidence, competence). MEH 1.3.8 Recognize the connection between depression and suicidal ideation. MEH 1.4.8 Explain the importance of telling an adult if there are people who are in danger of hurting themselves or others. MEH 1.5.8 Recognizing stressors, their impact on mind and body, and effective coping strategies. MEH 1.6.8 Describe characteristics of a mentally and emotionally healthy person. MEH 1.8.8 Describe characteristics of positive mental and emotional health. MEH 1.9.8 Summarize the benefits of talking with parents and other trusted adults about feelings. MEH 1.10.8 Describe a variety of appropriate ways to respond to stress when angry or upset. MEH 1.11.8 Summarize feelings and emotional health can affect health-related behaviors. MEH 1.13.8 Describe how mental and emotional health can affect health-related behaviors. MEH 1.13.8 Describe how mental and emotional health can affect health-related behaviors. MEH 1.13.8 Describe how mental and emotional health can affect health-related behaviors. MEH 1.14.8 Explain the importance of a positive body image. MEH 1.15.8 Describe personal stressors at home, in school, and with friends. MEH 1.16.8 Examine the risks of impulsive behaviors. 	 MEH 11.12 Examine characteristics of a mentally and emotionally healthy person. MEH 1.2.12 Examine how mental and emotional health can affect health-related behaviors. MEH 1.3.12 Determine when to seek help for mental and emotional health problems and the barriers to doing so, including stigma. MEH 1.4.12 Examine the causes, symptoms, and effects of depression, stress, and anxiety, including physical and psychological response. MEH 1.5.12 Examine strategies for mitigating the effects of chronic stress and trauma on mental health and learning. MEH 1.6.12 Summarize why it is important to tell an adult if there are people who are in danger of hurting themselves or others (suicide prevention awareness). MEH 1.7.12 Summarize personal stressors at home, in school, and with friends. MEH 1.8.12 Evaluate effective strategies for dealing with stress (e.g., avoidance, active problem solving, emotion focused [reframing problem], self-care). MEH 1.10.12 Examine the negative, neutral, and positive effects of technology and social media on mental and emotional health. MEH 1.11.12 Explain the impact of a variety of mental health disorders on behavior (e.g., mood, anxiety, psychotic, and eating disorders). MEH 1.13.12 Summarize impulsive behaviors that can lead to violence and strategies for controlling them.

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Content Safety and Injury Prevention (SIP)	 PK-2 Core Content Indicators SIP 1.1.2 State the benefits of riding in the back seat when a passenger in a motor vehicle. SIP 1.2.2 Describe the importance of using safety belts, child safety restraints, and motor vehicle booster seats. SIP 1.3.2 Identify safe behaviors when getting on and off and while riding on a bus. SIP 1.4.2 Identify safety rules for playing on a playground, swimming, and playing sports. SIP 1.5.2 Describe how injuries can be prevented. 	 3-5 Core Content Indicators SIP 11.5 Identify ways to reduce risk of injuries while riding in a motor vehicle. SIP 1.2.5 List examples of dangerous or risky behaviors that might lead to injuries. SIP 1.3.5 Describe how to ride a bike, skateboard, ride a scooter, and/or inline skate safely. SIP 1.4.5 Identify ways to reduce risk of injuries in case of a fire, around water, and from falls. SIP 1.5.5 Identify ways to protect vision or hearing from injury. SIP 1.6.5 Identify ways to reduce injuries from firearms. SIP 1.7.5 Identify ways to reduce injuries as a pedestrian. 	 SIP 11.8 Demonstrate how to provide basic First Aid and CPR in a variety of emergency situations. SIP 1.2.8 Define Digital Wellness and its impact on overall health. SIP 1.3.8 Identify the potential for injury in a variety of situations and environments. SIP 1.4.8 Describe ways to reduce risk of injuries while riding in or on a motor vehicle. SIP 1.5.8 Explain the importance of helmets and other safety gear for biking, riding a scooter, skateboarding, and inline skating. SIP 1.6.8 Identify actions to take 	 SIP 1.1.12 Demonstrate how to provide basic First Aid and CPR in a variety of emergency situations. SIP 1.2.12 Digital Wellness and its impact on overall health. SIP 1.3.12 Safe Driving (Texting, seat belt). SIP 1.4.12 Unintentional Injury. SIP 1.5.12 Summarize ways to reduce the risk of injuries while riding in or driving a motor vehicle. SIP 1.6.12 Summarize the necessary protective gear for biking, motorcycling, snowmobiling, inline skating, riding a scooter, and/or skateboarding.
	 SIP 1.6.2 Identify safety rules for being around fire. SIP 1.7.2 Describe how to be a safe pedestrian. SIP 1.8.2 Identify safety hazards in the home. SIP 1.9.2 Identify how household products are harmful if ingested or inhaled. SIP 1.10.2 Identify safety hazards in the community. SIP 1.11.2 Identify people who can help when someone is injured or suddenly ill. 	 SIP 1.8.5 Identify safety precautions for playing and working outdoors in different kinds of weather and climates. SIP 1.9.5 List ways to prevent injuries at home, school, and community. SIP 1.10.5 Identify ways to reduce risk of injuries from animal and insect bites and stings. SIP 1.11.5 Explain why household products are harmful if ingested or inhaled. SIP 1.12.5 Explain what to do if someone is poisoned or injured and needs help. SIP 1.13.5 Identify equipment needed for protection in sports and recreational activities, such as mouthpieces, pads, and helmets. SIP 1.15.5 Describe how vision can be damaged. SIP 1.16.5 Describe ways to prevent vision or hearing damage. SIP 1.17.5 Describe ways to prevent harmful effects of the sun. 	to prevent injuries during severe weather. SIP 1.7.8 Describe ways to reduce risk of injuries from falls, around water and in case of fire. SIP 1.8.8 Explain climate-related physical conditions that affect personal safety, such as heat exhaustion, sunburn, heat stroke, and hypothermia. SIP 1.9.8 Describe ways to reduce risk of injuries as a pedestrian. SIP 1.10.8 Describe actions to change unsafe situations at home, in school and in the community. SIP 1.11.8 Describe ways to reduce risk of injuries from firearms.	a scooter, and/or skateboarding. SIP 1.7.12 Prioritize actions to take to prevent injuries during severe weather. SIP 1.8.12 Summarize ways to reduce the risk of injuries from firearms. SIP 1.9.12 Summarize ways to reduce safety hazards in the home, school or in the community. SIP 1.10.12 Describe actions to take in case of mass trauma. SIP 1.11.12 Explain accepted procedures for basic emergency care and lifesaving. SIP 1.12.12 Summarize personal strategies for reducing hearing damage due to exposure to loud sounds.

Skills-Based PK-12 Health Education Standards 2-8

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Standard 2: Analyzing Influences Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.	 INF 2.1.2 Identify relevant influences of family, peers, school and community on health practices and behaviors. INF 2.2.2 Identify relevant influences of media and technology on health practices and behaviors. INF 2.3.2 Describe positive and negative influences on personal health practices and behaviors. 	INF 2.1.5 Identify and describe influences of peers, family, school, and community on health practices and behaviors. INF 2.2.5 Identify and describe influences of media and technology that affect personal health practices and behaviors.	 INF 2.1.8 Explain how perceptions of norms influence healthy and unhealthy practices and behaviors. INF 2.2.8 Explain how personal values and beliefs influence personal health practices and behaviors. INF 2.3.8 Describe how some health risk behaviors influence the likelihood of engaging in other unhealthy behaviors (e.g., how alcohol use influences sexual risk behavior). INF 2.4.8 Analyze how relevant influences of family, peers, culture, school, community, along with media and technology, affect personal health practices and behaviors. 	 INF 2.1.12 Analyze how peers and perceptions of norms influence healthy and unhealthy behaviors. INF 2.2.12 Analyze how personal attitudes, values, and beliefs influence healthy and unhealthy behaviors. INF 2.3.12 Analyze how some health risk behaviors influence the likelihood of engaging in other unhealthy behaviors. INF 2.4.12 Analyze how laws, rules, and regulations influence health promotion and disease prevention. INF 2.5.12 Analyze the effect of media and technology on personal, family, and community health. INF 2.6.12 Analyze the factors that influence opportunities to obtain safe, accessible, equitable, and affordable products and services that support health practices and behaviors for oneself and others.
Standard 3: Accessing Information Students will demonstrate the ability to access valid information, products, and services to enhance health.	Al 3.1.2 Identify trusted adults at home, school and the community who can help promote health (e.g., parents, adult family mem- bers, nurse, counselor, teacher, healthcare provider, police officer, etc.). Al 3.2.2 Explain and/or demon- strate how to locate school and community health helpers (e.g., school nurse, teacher, healthcare provider, police officer, etc.).	 AI 3.1.5 Describe characteristics of accurate health information. AI 3.2.5 Describe characteristics of appropriate and reliable health products. AI 3.3.5 Describe characteristics of appropriate and trustworthy health services. AI 3.4.5 Demonstrate how to locate sources of accurate health information. 	 AI 3.1.8 Analyze the validity and reliability of health information, products, and services. AI 3.2.8 Describe situations that call for professional health services. AI 3.3.8 Determine the availability of valid and reliable health products. AI 3.4.8 Access valid and reliable health information from home, school, or community. 	 AI 3.1.12 Evaluate the validity and reliability of health information, products, and services. AI 3.2.12 Determine the accessibility of valid and reliable health products and services. AI 3.3.12 Determine when professional health services may be required. AI 3.4.12 Use resources that provide valid and reliable health information, products, and services.

	PK-2	3-5	6-8	9-12
Standard 4: Interpersonal Communica- tion Students will demonstrate the ability to use interper- sonal commu- nication skills to enhance health and avoid or reduce health risks.	IC 4.1.2 Demonstrate how to effectively communicate needs, wants, and feelings in healthy ways. IC 4.2.2 Demonstrate effective active listening skills including paying attention, and verbal and nonverbal feedback. IC 4.3.2 Demonstrate effective refusal skills including firmly saying "no" and getting away. IC 4.4.2 Demonstrate how to effectively tell a trusted adult when feeling threat- ened or harmed.	IC 4.1.5 Demonstrate effective verbal and nonverbal communi- cation skills. IC 4.2.5 Demonstrate empathet- ic, compassionate, and support- ive behavior toward others. IC 4.3.5 Demonstrate refusal skills to avoid or reduce health risk. IC 4.4.5 Demonstrate healthy ways to manage or resolve conflict. IC 4.5.5 Demonstrate how to ef- fectively ask for help to improve personal health.	 IC 4.1.8 Demonstrate the use of effective verbal and nonverbal communication skills to enhance health. IC 4.2.8 Demonstrate how to manage personal information in electronic communications and when using social media to protect the personal health and safety of oneself and others. IC 4.3.8 Demonstrate effective peer resistance and negotiation skills to avoid or reduce health risks. IC 4.4.8 Demonstrate healthy ways to manage or resolve conflict. IC 4.5.8 Demonstrate how to effectively ask for assistance to improve personal health. IC 4.6.8 Demonstrate how to effectively communicate empathy and support for others. 	IC 4.1.12 Demonstrate how to man- age personal information in elec- tronic communications and when using social media (e.g., chat groups, email, texting, websites, phone and tablet applications) to protect the personal health and safety of one- self and others. IC 4.2.12 Demonstrate effective peer resistance (refusal skills), negotia- tion, and collaboration skills to avoid engaging in unhealthy behaviors. IC 4.3.12 Demonstrate effective com- munication strategies to prevent, manage, or resolve interpersonal conflict. IC 4.4.12 Demonstrate how to effec- tively ask for assistance to improve personal health. IC 4.5.12 Demonstrate how to effec- tively offer assistance to improve the health of others.
Standard 5: Decision Making Students will demonstrate the ability to use decision- making skills to enhance health.	DM 5.1.2 Identify situations which need a health-relat- ed decision. DM 5.2.2 Identify how family, peers or media influence a health-related decision. DM 5.3.2 Explain the potential positive and negative outcomes from health-related decisions. DM 5.4.2 Describe when help is needed and when it is not needed to make a healthy decision.	 DM 5.1.5 Identify situations which need a health-related decision. DM 5.2.5 Decide when help is needed and when it is not needed to make a healthy decision. DM 5.3.5 Explain how family, culture, peers, or media influence a health-related decision. DM 5.4.5 Identify options and their potential outcomes when making a health-related decision. DM 5.5.5 Choose a healthy option when making a decision. DM 5.6.5 Describe the final outcome of a health-related decision. 	 DM 5.1.8 Determine when situations require a health-related decision. DM 5.2.8 Distinguish when health-related decisions should be made individually or with the help of others. DM 5.3.8 Explain how family, culture, media, peers, and personal beliefs affect a health-related decision. DM 5.4.8 Distinguish between healthy and unhealthy alternatives of a health-related decision. DM 5.5.8 Predict the potential outcomes of healthy and unhealthy alternatives to a health-related decision. DM 5.6.8 Choose a healthy alternative when making a health-related decision. DM 5.7.8 Analyze the effectiveness of a final outcome of a health-related decision. 	 DM 5.1.12 Examine barriers to healthy decision making. DM 5.2.12 Analyze how family, culture, media, peers, and personal beliefs affect a health-related decision. DM 5.3.12 Generate alternatives when making a health-related decision. DM 5.4.12 Predict potential shortand long-term consequences of alternatives to health-related decisions. DM 5.5.12 Choose a healthy alternative when making a health-related decision. DM 5.5.12 Choose a healthy related decision. DM 5.5.12 Choose a healthy alternative when making a health-related decision. DM 5.6.12 Evaluate the effectiveness of health-related decisions.

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Standard 6: Goal Setting Students will demonstrate the ability to use goal- setting skills to enhance health.	GS 6.1.2 Identify a realistic personal short-term health goal. GS 6.2.2 Take steps to achieve the personal health goal. GS 6.3.2 Identify people who can help achieve a personal health goal.	GS 6.1.5 Set a realistic personal health goal. GS 6.2.5 Track progress toward achieving a personal health goal. GS 6.3.5 Identify resources that can help achieve a personal health goal.	 GS 6.1.8 Assess the impact and power of embracing a growth mindset in order to determine and reach one's goals. GS 6.2.8 Assess personal health practices. GS 6.3.8 Set a realistic personal health goal. GS 6.4.8 Assess the barriers to achieving a personal health goal. GS6.5.8 Apply strategies to overcome barriers to achieving a personal health goal. 	 GS 6.1.12 Assess personal health practices and behaviors. GS 6.2.12 Set a realistic personal health goal. GS 6.3.12 Assess the barriers to achieving a personal health goal. GS 6.4.12 Develop a plan to attain a personal health goal. GS 6.5.12 Implement strategies, including self-monitoring, to achieve a personal health goal. GS 6.6.12 Use strategies to overcome barriers to achieving a personal health goal. GS 6.6.12 Formulate an effective long-term plan to achieve a health goal.
Standard 7: Self-Manage- ment Students will demonstrate the ability to practice health- enhancing behaviors and avoid or reduce health risks.	SM 7.1.2 Identify practices that reduce or prevent health risks. SM 7.2.2 Demonstrate healthy practices.	SM 7.1.5 Describe practices and behaviors that reduce or prevent health risks. SM 7.2.5 Demonstrate healthy practices and behaviors. SM 7.3.5 Make a commitment to practice healthy behaviors.	 SM 7.1.8 Explain the importance of being responsible for one's personal health behaviors. SM 7.2.8 Analyze personal practices and behaviors that reduce or prevent health risks. SM 7.3.8 Demonstrate healthy practices and behaviors to improve the health of oneself and others. SM 7.4.8 Make a commitment to practice healthy behaviors. 	SM 7.1.12 Analyze the role of individual responsibility in enhancing personal health. SM 7.2.12 Evaluate and assess personal practices and behaviors that reduce or prevent health risks. SM 7.3.12 Demonstrate healthy practices and behaviors to improve the health of oneself and others. SM 7.4.12 Make a commitment to practice healthy behaviors.
Standard 8 Advocacy Students will demonstrate the ability to advocate for personal, family, and community health.	AV 8.1.2 Demonstrate how to encourage self and others to make healthy choices.	AV 8.1.5 Give factual information to improve the health of self and others. AV 8.2.5 State personal beliefs to improve the health of self and others. AV 8.3.5 Demonstrate how to support self and others to make positive health choices.	 AV 8.1.8 State a health-enhancing position, supported by accurate information, to improve the health of others. AV 8.2.8 Persuade others to make positive health choices. AV 8.3.8 Collaborate with others to advocate for healthy individuals, families, and schools. AV 8.4.8 Demonstrate how to adapt positive health-related messages for different audiences. 	AV 8.1.12 Use peer and societal norms, based on accurate health information, to formulate health-enhancing messages. AV 8.2.12 Persuade and support others to make positive health choices.

Appendix A: Connecticut Health Education Laws

C.G.S Section 10-16b: Prescribed courses of study -

(a) In the public schools the program of instruction offered shall include at least the following subject matter, as taught by legally gualified teachers, the arts; career education; consumer education; health and safety, including, but not limited to, human growth and development, nutrition, first aid, including cardiopulmonary resuscitation training in accordance with the provisions of section 10-16gg, disease prevention and cancer awareness, including, but not limited to, age and developmentally appropriate instruction in performing self-examinations for the purposes of screening for breast cancer and testicular cancer, community and consumer health, physical, mental and emotional health, including youth suicide prevention, substance abuse prevention, including instruction relating to opioid use and related disorders, safety, which shall include the safe use of social media, as defined in section 9-601, and may include the dangers of gang membership, and accident prevention; language arts, including reading, writing, grammar, speaking and spelling; mathematics; physical education; science, which may include the climate change curriculum described in subsection (d) of this section; social studies, including, but not limited to, citizenship, economics, geography, government, history and Holocaust and genocide education and awareness in accordance with the provisions of section 10-18f; computer programming instruction; and in addition, on at least the secondary level, one or more world languages and vocational education. For purposes of this subsection, world languages shall include American Sign Language, provided such subject matter is taught by a qualified instructor under the supervision of a teacher who holds a certificate issued by the State Board of Education. For purposes of this subsection, the "arts" means any form of visual or performing arts, which may include, but not be limited to, dance, music, art and theatre.

(b) If a local or regional board of education requires its pupils to take a course in a world language, the parent or guardian of a pupil identified as deaf or hard of hearing may request in writing that such pupil be exempted from such requirement and, if such a request is made, such pupil shall be exempt from such requirement.

(c) Each local and regional board of education shall on September 1, 1982, and annually thereafter at such time and in such manner as the Commissioner of Education shall request, attest to the State Board of Education that such local or regional board of education offers at least the program of instruction required pursuant to this section, and that such program of instruction is planned, ongoing and systematic. (d) The State Board of Education shall make available curriculum materials and such other materials as may assist local and regional boards of education in developing instructional programs pursuant to this section. The State Board of Education, within available appropriations and utilizing available resource materials, shall assist and encourage local and regional boards of education to include:

(1) Holocaust and genocide education and awareness; (2) the historical events surrounding the Great Famine in Ireland; (3) African-American history; (4) Puerto Rican history; (5) Native American history; (6) personal financial management, including, but not limited to, financial literacy as developed in the plan provided under section 10-16pp; (7) training in cardiopulmonary resuscitation and the use of automatic external defibrillators; (8) labor history and law, including organized labor, the collective bargaining process, existing legal protections in the workplace, the history and economics of free market capitalism and entrepreneurialism, and the role of labor and capitalism in the development of the American and world economies; (9) climate change consistent with the Next Generation Science Standards; (10) topics approved by the state board upon the request of local or regional boards of education as part of the program of instruction offered pursuant to subsection (a) of this section; and (11) instruction relating to the Safe Haven Act, sections 17a-57 to 17a-61, inclusive. The Department of Energy and Environmental Protection shall be available to each local and regional board of education for the development of curriculum on climate change as described in this subsection.

C.G.S. Section 10-16qq: Cardiopulmonary resuscitation instruction –

(a) For the school year commencing July 1, 2016, and each school year thereafter, each local and regional board of education shall include cardiopulmonary resuscitation instruction as part of the health and safety curriculum for the school district. Such instruction shall be based on guidelines for emergency cardiovascular care issued by the American Heart Association, and include, but need not be limited to, hands-on training in cardiopulmonary resuscitation.

(b) A local or regional board of education may accept gifts, grants and donations, including, but not limited to, in-kind donations, designated for the purchase of equipment or materials needed to provide cardiopulmonary resuscitation instruction under this section.