



Iowa City Community School District

HEALTH PROGRAM AND CURRICULUM SELF STUDY

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**IOWA CITY COMMUNITY
SCHOOL DISTRICT**

All In for All Kids

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CURRICULUM REVIEW PROCESS: OVERVIEW

The Iowa City Community School District curriculum review process provides a systematic procedure to study existing curriculum areas and programs relative to internal and external standards as well as data from the curricular program.

Each year, at the district-wide level, a self-study committee is appointed for the areas under study for that particular school year. A curriculum review self-study committee has three primary tasks:

1. Review and affirm or modify the program's mission and belief statements.
2. Analyze relevant data related to the program.
3. Use the data analysis to determine program strengths and limitations, and develop a recommended action plan based on that analysis.

External standards utilized extensively by the self-study committee included state and national curriculum standards such as the K-12 Iowa Core Standards in Social Studies and the College, Career, and Civic Life (C3) Framework from the National Council for Social Studies. The Iowa City Community School District's Comprehensive Diversity, Equity, and Inclusion Plan was also used as an internal standard for the work of the team.

HEALTH SELF-STUDY COMMITTEE:

Thirty-two people served on the social studies self-study committee. Committee members included current ICCSD students, community members, a member of the ICCSD Board of Directors, professors from the University of Iowa Social Studies Education Department, elementary and secondary social studies teachers, teachers from the ICCSD special education, library, & ELL programs, members of the cultural proficiency team, and administrators from the central office as well as the elementary, junior high and senior high schools.

Applications to participate on the self-study team were sent to district families in May 2022 and were reviewed in early September. The application process followed ICCSD School Board policy by including an item on the application process that read: "According to board policy, 'to the extent possible, advisory committee membership shall have balanced representation with regard to race, color, national origin, sex, disability, religion, creed, age, marital status, sexual orientation, gender identity and socioeconomic status.' Please provide any information relevant to these identifiers that you feel comfortable sharing."

The self-study committee met on three separate occasions using a variety of formats (in-person and Zoom). Committee members were also given opportunities to provide feedback or ask questions outside of those meetings.

In addition to the tasks enumerated above, the self-study team analyzed and revised the survey questions that were used to gather input about the health program.

HEALTH MISSION STATEMENT

The ICCSD Health Education Program will provide students with the knowledge and skills to make the critical health choices they will face throughout their lives and enable them to establish lifelong healthy behaviors.

HEALTH BELIEF STATEMENTS

We believe that a quality comprehensive health education program should:

- Consist of learning that is relevant and applicable to students' daily lives through teaching of concepts and skills that are covered in a logical sequence
- Build essential skills-communication, refusal, assessing accuracy of information, decision-making, planning and goal setting, self-control, and self-management-that enable students to to build their personal confidence, deal with social pressures, and avoid or reduce risk behaviors
- Provide functional, research-based health knowledge that is accurate, reliable, credible, and directly contributes to health-promoting decisions and behaviors
- Provide opportunities for students to construct meaning and understanding as it relates to them and their lives
- Provide opportunities for students to analyze personal and social pressures
- Involve collaboration with a network of partnerships among school, family and community and include having certified and/or highly trained health educators teaching health at all levels
- Incorporate students'cultures, values, and identities

K-12 HEALTH STANDARDS:

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.

K-12 HEALTH PRIORITY STANDARDS							
ELEMENTARY (K-6)							
	Standard 1	Standard 2	Standard 3	Standard 4	Standard 5	Standard 6	Standard 7
	Health Promotion & Disease Prevention	Factors That Influence Health Behaviors & Practices	Information Products & Services	Interpersonal Communication	Health- Enhancing Decision- Making	Health- Enhancing Goal- Setting	Health- Enhancing & Risk- Reducing Behaviors
	K.1	K.2	K.3	K.4			K.7
K	1.2.1 Identify that healthy behaviors impact personal health.	2.2.1 Identify how the family influences personal health practices and behaviors.	3.2.1 Identify trusted adults and professionals who can help promote health.	4.2.2 Demonstrate listening skills to enhance health.			7.2.2 Demonstrate behaviors that avoid or reduce health risks.
	1.1	1.2	1.3	1.4	1.5	1.6	
1	1.2.2 Recognize that there are multiple dimensions of health.	2.2.2 Identify what the school can do to support personal health practices and behaviors.	3.2.2 Identify ways to locate school and community health helpers.	4.2.3 Demonstrate ways to respond in an unwanted, threatening, or dangerous situation.	5.2.1 Identify situations when a health-related decision is needed.	6.2.2 Identify who can help when assistance is needed to achieve a personal health goal.	
	1.2.4						
	1.2.4 List ways to prevent common childhood injuries.						
	2.1	2.2		2.4	2.5	2.6	2.7
2	1.2.3 Describe ways to prevent communicable diseases.	2.2.3 Describe how the media can influence health behaviors.		4.2.1 Demonstrate healthy ways to express needs, wants, and feelings.	5.2.2 Differentiate between situations when a health-related decision can be made individually or when assistance is needed.	6.2.1 Identify a short-term personal goal and take action toward achieving the goal.	7.2.1 Demonstrate healthy practices and behaviors to maintain or improve personal health.
	1.2.5						
	1.2.5 Describe why it is important to seek health care.						
	3.1	3.2		3.4	3.5	3.6	3.7
3	1.5.1 Describe the relationship between healthy behaviors and personal health.	2.5.1 Describe how the family influences personal health practices and behaviors.		4.5.4 Demonstrate how to ask for assistance to enhance personal health.	5.5.5 Choose a healthy option when making a decision.	6.5.2 Identify resources to assist in achieving a personal health goal.	7.5.1 Identify responsible personal health behaviors.
	1.5.2						
	1.5.2 Identify examples of emotional, intellectual, physical, and social health.						
	4.2			4.4	4.5		4.7
4	2.5.3 Identify how peers can influence healthy and unhealthy behaviors.			4.5.1 Demonstrate effective verbal and nonverbal communication skills to enhance health.	5.5.3 List healthy options to health-related issues or problems.		7.5.1 Identify responsible personal health behaviors.
	2.5.4			4.5.3	5.5.4		
	2.5.4 Describe how the school community can support personal health practices and behaviors.			4.5.3 Demonstrate nonviolent strategies to manage or resolve conflict.	5.5.4 Predict the potential outcomes of each option when making a health-related decision.		
	5.2	5.3	5.4		5.6	5.7	5.8
5	2.5.5 Explain how media influences thoughts, feelings, and health behaviors.	3.5.1 Identify characteristics of valid health information, products, and services.	4.5.2 Demonstrate refusal skills that avoid or reduce health risks.		6.5.1 Set a personal health goal and track progress toward achievement.	7.5.2 Demonstrate a variety of healthy practices and behaviors to maintain or improve personal health.	8.5.2 Encourage others to make positive health choices.
	6.1	6.2	6.3	6.4			6.8
6	1.5.5 Describe when it is important to seek health care.	2.5.2 Identify the influence of culture on health practices and behaviors.	3.5.2 Locate resources from home, school, and community that provide valid health information.	4.5.2 Demonstrate refusal skills that avoid or reduce health risks.			4.5.2 Demonstrate refusal skills that avoid or reduce health risks.
	2.5.6						
	2.5.6 Describe ways that technology can influence personal health.						

JUNIOR HIGH (7-8)								
7	2.8.3 - Describe how peers influence healthy and unhealthy behaviors.	2.8.8 - Explain the influence of personal values and beliefs on individual health practices and behaviors.	4.8.1 - Apply effective verbal and nonverbal communication skills to enhance health.	1.8.9 - Examine the potential seriousness of injury or illness if engaging in unhealthy behaviors.	4.8.2 - Demonstrate refusal and negotiation skills that avoid or reduce health risks.	5.8.6 - Choose healthy alternatives over unhealthy alternatives when making a decision	3.8.3 - Determine the accessibility of products that enhance health.	2.8.7 - Explain how the perceptions of norms influence healthy and unhealthy behaviors.
	1.8.3 - Analyze how the environment affects personal health.	1.8.4 - Describe how family history can affect personal health.	3.8.1 - Analyze the validity of health information, products, and services.					
8	1.8.2 - Describe the interrelationships of emotional, intellectual, physical, and social health in adolescence.	2.8.3 - Describe how peers influence healthy and unhealthy behaviors.	2.8.5 - Analyze how messages from media influence health behaviors.	2.8.3 - Describe how peers influence healthy and unhealthy behaviors.	2.8.3 - Describe how peers influence healthy and unhealthy behaviors.	7.8.1 - Explain the importance of assuming responsibility for personal health behaviors.	7.8.3 - Demonstrate behaviors that avoid or reduce health risks to self and others.	3.8.5 - Locate valid and reliable health products and services.
	1.8.1 - Analyze the relationship between healthy behaviors and personal health.	5.8.6 - Choose healthy alternatives over unhealthy alternatives when making a decision.	8.8.1 - State a health-enhancing position on a topic and support it with accurate information.					
HIGH SCHOOL (9-12)								
HS	1.12.4 - Analyze how genetics and family history can affect personal health.	5.12.1 - Examine barriers that can hinder healthy decision making.	8.12.1 - Utilize accurate peer and societal norms to formulate a health-enhancing message.	1.12.9 - Analyze the potential severity of injury or illness if engaging in unhealthy behaviors.	5.12.2 - Determine the value of applying a thoughtful decision-making process in health-related situations.	7.12.1 - Analyze the role of individual responsibility for enhancing health.	6.12.1 - Assess personal health practices and overall health status.	6.12.2 - Develop a plan to attain a personal health goal that addresses strengths, needs, and risks.
	5.12.5 - Predict the potential short-term and long-term impact of each alternative on self and others	3.12.4 - Determine when professional health services may be required.	2.12.9 - Analyze how some health risk behaviors can influence the likelihood of engaging in unhealthy behaviors.	7.12.2 - Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.				

STRENGTHS

Elementary	Secondary
Stakeholders see value in health education.	High school students have the opportunity to choose between three different health course offerings.
Teachers view health lessons as generally easy to teach and user friendly.	Teachers feel equipped to support students who are struggling in health.
The take home portions of lessons help to create a partnership between school and home.	Health teachers are knowledgeable about the content.
	Stakeholders believe that health teaches students to understand situations that require thoughtful decision-making in all areas of their lives.
	Stakeholders believe that health teaches students to analyze the different factors that impact health behaviors.
	Stakeholders believe that the health program prepares students for the future.

Limitations & Recommendations

Curriculum		
Program Limitations	Recommended Plan of Action	Responsible Party
• Limited understanding of and knowledge about what is taught in health, when, and why • Classes need to address many different ways of dealing with health-related needs in order to feel inclusive and relevant • Materials need to be more easily accessible to teachers (elementary) • Need for more comprehensive health programming (elementary) • Curriculum & Courses feel repetitive/redundant • Need for clear, consistent curricular resources aligned with priority standards and up-to-date health related issues	• Create a bank of resources that teachers can use to access reliable, current instructional materials • Use health priority standards to highlight natural cross-curricular learning opportunities to showcase multi-cultural connections (social studies & ELA connections). • Pilot alternative curriculum at elementary level in order to assess improved ease of use/accessibility • Provide learning for building leaders re: where to access materials • Commit to approved cross-district vocabulary and definitions (Priority Standards, High Reliability Schools) • Ensure health teachers are aware of and using common language around district suicide prevention and awareness and Social-Emotional Behavioral Health efforts and resources • Introduce recent topics like finding factual information online, safety in online relationships (both romantic and friendships) • Create space for students to bring questions about topics they care about or areas where they want additional information	• School Board • Director of Curriculum, Instruction, and Assessment • Curriculum Coordinators • School Counselors • Health Teachers • Elementary Teachers • Building Admin & IDS • Equity Department

	• Use available student data and local statistics to inform instruction related to relevant needs/issues • Create Vertical Alignment document for K-12 health	
Instruction		
Program Limitations	Recommended Plan of Action	Responsible Party
• Inconsistent delivery (elementary) • Not enough instructional time protected for health instruction across all levels • Need for more planning/teaching time. • Need more project based learning opportunities in health (current instruction feels too lecture heavy and too reliant on notes, quizzes, and tests) • Classes need to make room for many different ways of dealing with health-related needs in order to feel inclusive and relevant • Need to move beyond general knowledge and into application-based learning at secondary level • Students desire more learning about how to deal w/ social issues (bullying, conflicts, disruptive behavior (elementary)	• Ensure there is protected time in schedule for teaching health • Ensure teachers are aware of health priority standards and aligning instruction to these • Create crosswalk to highlight other content areas that provide instruction aligned with priority standards • Incorporate more health education in PE class (elementary) • Consider use of advisory time (secondary) for addressing additional health topics • Focus instruction and assessment on priority standards to ensure course instruction is targeted and viable • Use central hub/shared drive to save on prep time via shared lesson plans • Ensure there is protected time for PLCs for health and grade-level teachers • Brainstorm topic related projects and activities for higher level learning (aligned with priority standards) • Utilize innovative teaching strategies to increase student engagement	• Director of Curriculum, Instruction, and Assessment • Curriculum Coordinators • School Counselors • Health Teachers • Elementary Teachers • Building Admin & IDS • Equity Department

	• Increase opportunities for student led learning/discussions • Emphasize performance-based assessments • Ensure instruction reflects holistic approach to health & wellness through the inclusion of functional information on a variety of health topics • Increase connections & collaboration between health teachers and other school staff who have expertise with diverse student needs and with health (IDS, ELL and Sped teachers, School Nurse) • Ensure instruction includes modifications so that all learners can be successful • Provide opportunities for students to construct meaning and understanding as it relates to them and their lives • Provide opportunities for students to share their culture and use it in scenarios/prompts • Partner with and invite approved experts from the community into health classes to support curriculum and student learning • Include risk reduction topics for peer support within health courses • Ensure curriculum/instruction is skills-based with an emphasis on developing health literacy • Ensure that health courses include multiple opportunities for students to	
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	practice developing and applying health-related skills • Implementation of HRS level 1: Safe, supportive, collaborative environments • Partner with school counselors to extend the learning from guidance lessons around bullying reduction and conflict resolution	
Communication		
Program Limitations	Recommended Plan of Action	Responsible Party
• Need for more comprehensive communication around curriculum & instruction for families • Perceived lack of transparency between district & families regarding health education (what is taught, by whom, when, & why) • Limited understanding amongst stakeholders of and knowledge about what is taught in health and when	• Provide a webinar for families with clear information about what to expect at different grade levels • Create a resource for families (welcome book per elementary grade level) that includes the standards and topics taught in the year (scope and sequence) • Use purposeful phrasing and content choices to emphasize student safety and what age-appropriate means • Develop marketing materials, explainers, one-pagers, etc. to distribute on a consistent basis through social media and via school administration (i.e. Peach Jar) that touch on various parts of the curriculum and aid in expanding parent/guardian understanding • Adjust board policy such that families have access to curricular materials without needing to set up a meeting	• Director of Curriculum, Instruction, and Assessment • Curriculum Coordinators • School Counselors • Health Teachers • Elementary Teachers • Building Admin & IDS • Equity Department

	• Host open forums, town halls, &/or orientations where parents/guardians can learn about the programs and gain access to vocabulary or strategies to use at home • Utilize ice cream social, back to school night, and conferences to showcase health priority standards and scope and sequence for each grade level/course	
Professional Development		
Program Limitations	Recommended Plan of Action	Responsible Party
• Inconsistent delivery of health at elementary level • Need for scaffolded instruction that builds each year rather than being repetitive • Need for targeted, individualized learning for teachers • Limited health-specific PD time K-12	• Increase PD time for team work/planning • Provide professional development time for grade level teams to complete curriculum crosswalks (i.e. where can health standards be embedded into other curricular areas) • Create vertical alignment linked to HRS Level 3 & Priority Standards/Pacing guides • Provide micro/eLearning for staff delivered via LMS or other online PD system	• Director of Curriculum, Instruction, and Assessment • Curriculum Coordinators • School Counselors • Health Teachers • Elementary Teachers • Building Admin & IDS • Equity Department