

Background

The Boulder Valley School District K – 12 Health Education Content Standards are general statements of what a student should know or be able to do relative to Health Education by the time they graduate. Teachers ensure that students achieve content standards by using a range of instructional strategies that they select based on their students' needs. A rationale statement accompanies each content standard. For each content standard there are benchmarks to help educators determine what health skills and knowledge students should have and be able to do at the end of 4th, 8th, and 12th grade. While the development and implementation of state content standards were mandated in May 1993 for other content areas, no such mandate was required for Health Education. Beginning in 2002 as part of a school-community collaboration, BVSD chose to develop content standards and benchmarks to correlate with nationally recognized documents on Health Education Content Standards and curricula.

To implement a new, comprehensive, skills-based K-12 health curriculum, BVSD in collaboration with the Boulder County Health Department and the Boulder Valley Health Education Partnership, hired a full-time health education coordinator in November 2001. A 50-member Health Education Partnership Advisory Committee comprised of BVSD administrators, teachers, parents, students, and a wide array of community members was formed to provide guidance and ensure the commitment and participation of key school and community partners. The National Youth Risk Behavior Survey was conducted in six of the district's high schools in November 2001 and results were released in February 2002. Follow-up qualitative research was conducted in May 2002 to gain additional insight from students about the causes of at-risk behaviors in BVSD and their ideas for solutions. Community forums and meetings with various district advisory groups were held in fall 2002 to gather feedback on the content standards and benchmarks. Information gathered from the combined quantitative and qualitative research and the Wyoming Health Content and Performance Standards were used along with input from parents, community members and the Advisory Committee by K-12 teachers to create the attached content standards and benchmarks.

Curriculum implementation will follow the adoption of content standards. Curriculum documents will include standards, rationale, benchmarks and the specific grade level or subject area curricula. A scope and sequence of skills and content will be developed for K-12 to illustrate how specific skills are introduced, practiced and independently applied throughout the student's educational career. Performance assessments will be developed and will provide a means for helping students demonstrate levels of proficiency in health content standards and indicate overall district performance patterns. These assessments will show whether a student has met, exceeded, or continues to need additional work to meet the content standards. Standards, assessment and curriculum ensure that the Boulder Valley Schools have a system that is accountable for student learning.

Introduction

Good health has long been seen as a pivotal factor in student learning. No doubt this knowledge prompted the following critical reflections from some of our nation's leading education groups:

“Students who are hungry, sick, troubled or depressed cannot function well in the classroom, no matter how good the school.”

Carnegie Council on Adolescent Development, 1989

“In the larger context, schools are society's vehicle for providing young people with the tools for successful adulthood. Perhaps no tool is more essential than good health.”

Council of Chief State School Officers

“No knowledge is more crucial than knowledge about health. Without it, no other life goal can be successfully achieved.”

The Carnegie Foundation Report on Secondary Education in America

For this reason and many more, the Boulder Valley School District Health Education Content Standards were created. These content standards were created through extensive input from educators, students, parents, and community members throughout the school district. With guidance and direction from the *National Health Education Standards: Achieving Health Literacy* (1995) and the *Wyoming Department of Education Health Content and Performance Standards* (2002), dedicated education professionals crafted and adapted these content standards in the hope of improving the health and well being of BVSD youth and future generations. Based on proven principles of education, these new content standards are intended to positively impact not only the health and well being of BVSD youth, but also their overall learning. The content standards promote health literacy, which is the capacity of individuals to obtain, interpret, and understand basic health information and services and the competence to use such information and services in ways that enhance health (Joint Committee, 1995, p.5).

Health education has specific content and skills that are crucial for students to understand and communicate in order to maximize good health and minimize negative health behaviors. The Health Education Partnership has identified seven content areas as necessary for a comprehensive BVSD health education program. These areas include:

1. wellness;
2. mental health and emotional wellness;
3. violence awareness;
4. substance use, abuse and addiction;
5. human growth and development (K - 4) and human growth and development and human sexuality (5 -12);
6. diversity awareness; and
7. personal safety.

Health education skills focus heavily on personal behaviors used in real-world interactions both inside and outside the school setting and throughout life. Because of this focus, essential skills that students require to become health literate are embedded in benchmarks at all levels. These skills include knowledge acquisition, problem-solving, decision-making, goal setting, interpersonal communication and resistance skills, and understanding consequences. Student development in these areas should be a major goal of any health education program and classroom teachers at all levels. Additionally, the most important skills with regard to health education are highlighted in Standards 2 – 7. The overall goal of these content standards and benchmarks is for students to be able to master the discipline of health education and apply the constructs of the discipline to a variety of different tasks and in a variety of different settings. Realistic uses of these skills require their application with the higher-level thinking skills of reasoning and problem-solving. Further proficiency in health education requires fluency or literacy in health education content and skills.

Health education is unique in that it typically occurs in multiple arenas throughout the school setting. Students learn about health concepts in other classes such as science, social studies, and physical education as well as from other school service providers, e.g., food service, counselors, school nurses, and other staff. These learning experiences often occur in structured class settings or through observation of and learning from adult examples. Ultimately, for health and well being to be impacted in the greatest manner, health education and health promotion efforts need to be integrated and coordinated throughout the school, community, and home environments. This document, however, will focus on Health Education Standards, one piece in the coordinated effort to promote health education in the Boulder Valley School District.

Comparison of National Health Standards and BVSD Content Standards

National Health Education Standards (Developed 1995)	BVSD Health Content Standards
1. Students will comprehend concepts related to health promotion and disease prevention.	1. Students will comprehend concepts related to health promotion and disease prevention.
2. Students will demonstrate the ability to access valid health information and health-promoting products and services.	2. Students will demonstrate the ability to access valid health information and health-promoting products and services.
3. Students will demonstrate the ability to practice health-enhancing behaviors and reduce health risks.	3. Students will demonstrate the ability to practice health-enhancing behaviors and reduce health risks.
4. Students will analyze the influence of culture, media, technology and other factors on health.	4. Students will analyze the influence of culture, media, technology and other factors on health.
5. Students will demonstrate the ability to use interpersonal communication skills to enhance health.	5. Students will demonstrate the ability to use interpersonal communication skills to enhance health.
6. Students will demonstrate the ability to use goal-setting and decision-making skills to enhance health.	6. Students will demonstrate the ability to use goal-setting and decision-making skills to enhance health.
7. Students will demonstrate the ability to advocate for personal, family and community health	7. Students will demonstrate the ability to advocate for personal, family and community health

BVSD Health Education Content Standards

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

***RATIONALE:** Basic to health education is a foundation of knowledge about the interrelationship of behavior and health, interactions within the human body, and the prevention of disease and other health problems. Experiencing physical, mental, emotional and social changes as one grows and develops, provides a self-contained learning laboratory. Comprehension of health-promotion strategies and disease prevention concepts enables students to become health-literate, self-directed learners which establishes a foundation for leading a healthy and productive life.*

In **Grades K-4**, what the students know and are able to do includes

- identifying relationships between wellness and healthy lifestyles, health behaviors and health risks.
- identifying relationships between mental health and emotional wellness and healthy lifestyles, health behaviors and health risks.
- identifying relationships between violence awareness and healthy lifestyles, health behaviors and health risks.
- identifying relationships between substance use, abuse & addiction and healthy lifestyles, health behaviors and health risks.
- Identifying relationships between human growth and development and healthy lifestyles, health behaviors and health risks.
- identifying relationships between diversity awareness and healthy lifestyles, health behaviors and health risks.
- identifying relationships between personal safety and healthy lifestyles, health behaviors and health risks.

As students in **Grades 5–8** extend their knowledge, what they know and are able to do includes

- explaining relationships between wellness and healthy lifestyles, health behaviors and health risks.
- explaining relationships between mental health and emotional wellness and healthy lifestyles, health behaviors and health risks.
- explaining relationships between violence awareness and healthy lifestyles, health behaviors and health risks.

- explaining relationships between substance use, abuse & addiction and healthy lifestyles, health behaviors and health risks.
- explaining relationships between human growth and development and human sexuality and healthy lifestyles, health behaviors and health risks.
- explaining relationships between diversity awareness and healthy lifestyles, health behaviors and health risks.
- explaining relationships between personal safety and healthy lifestyles, health behaviors and health risks.

As students in **Grades 9-12** extend their knowledge, what they know and are able to do includes

- analyzing relationships between wellness and healthy lifestyles, health behaviors and health risks.
- analyzing relationships between mental health and emotional wellness and healthy lifestyles, health behaviors and health risks.
- analyzing relationships between violence awareness and healthy lifestyles, health behaviors and health risks.
- analyzing relationships between substance use, abuse & addiction and healthy lifestyles, health behaviors and health risks.
- analyzing relationships between human growth and development and human sexuality and healthy lifestyles, health behaviors and health risks.
- analyzing relationships between diversity awareness and healthy lifestyles, health behaviors and health risks.
- analyzing relationships between personal safety and healthy lifestyles, health behaviors and health risks.

Standard 2: Students will demonstrate the ability to access valid health information and health-promoting products and services.

RATIONALE: Accessing valid health information and health-promoting products and services is important in the prevention, early detection, and treatment of most health problems. Critical thinking involves the ability to identify valid health information and to analyze, select and access health-promoting services and products. Applying the skills of information analysis, organization, comparison, synthesis, and evaluation to health issues provides a foundation for individuals to move toward becoming health literate and responsible, productive citizens.

In **Grades K-4**, what the students know and are able to do includes

- demonstrating the ability to locate health-related information and resources, especially through home and school within the applicable areas identified in Standard #1.

As students in **Grades 5–8** extend their knowledge, what they know and are able to do includes

- demonstrating the ability to locate and evaluate health-related information and resources through home, school and community within the applicable areas identified in Standard #1.
- demonstrating the ability to utilize health-related information and resources within the applicable areas identified in Standard #1.

As students in **Grades 9-12** extend their knowledge, what they know and are able to do includes

- demonstrating the ability to locate and utilize health-related information and resources within the applicable areas identified in Standard #1.
- evaluating the accuracy, reliability and accessibility of health-related information and resources within the applicable areas identified in Standard #1.

Standard 3: Students will demonstrate the ability to practice health-enhancing behaviors and reduce health risks.

RATIONALE: Research confirms that many diseases and injuries can be prevented by reducing harmful and risk-taking behaviors. More importantly, recognizing and practicing health-enhancing behaviors can contribute to a positive quality of life. Strategies used to maintain and improve positive health behaviors will utilize knowledge and skills that help students become critical thinkers and problem solvers. By accepting responsibility for personal health, students will have a foundation for living a healthy, productive life.

In **Grades K-4**, what the students know and are able to do includes

- identifying health risks within the applicable areas identified in Standard #1.
- identifying and demonstrating health enhancing behaviors and strategies within the applicable areas identified in Standard #1.

As students in **Grades 5–8** extend their knowledge, what they know and are able to do includes

- describing adolescent health risks within the applicable areas identified in Standard #1.
- explaining the importance of assuming responsibility for health behaviors within the applicable areas identified in Standard #1.
- demonstrating healthy adolescent behaviors and appropriate strategies to improve and maintain health within the applicable areas identified in Standard #1.
- analyzing the short-term and long-term consequences of safe, risky and harmful behaviors within the applicable areas identified in Standard #1.

As students in **Grades 9-12** extend their knowledge, what they know and are able to do includes

- describing adolescent health risks within the applicable areas identified in Standard #1.
- demonstrating appropriate strategies for improving and maintaining personal health within the applicable areas identified in Standard #1.
- analyzing the short-term and long-term consequences of safe, risky, and harmful behaviors within the applicable areas identified in Standard #1.

- demonstrating the importance of assuming responsibility for their health choices and decisions within the applicable areas identified in Standard #1.

Standard 4: Students will analyze the influence of culture, media, technology, and other factors on health.

RATIONALE: Health is influenced by a variety of factors that co-exist within society. These include cultural context as well as media and technology. A critical thinker and problem solver is able to analyze, evaluate, and interpret the influence of these factors on health. The health-literate, responsible and productive citizen draws upon the contributions of culture, media, technology, and other factors to strengthen individual, family and community health.

In **Grades K-4**, what the students know and are able to do includes

- questioning and describing how culture, media, technology, peers and other factors influence health behavior within the applicable areas identified in Standard #1.

As students in **Grades 5–8** extend their knowledge, what they know and are able to do includes

- describing the influence of culture on health behaviors and the use of health services within the applicable areas identified in Standard #1.
- analyzing how messages from media and other sources influence thoughts, feelings, health behaviors and selection of health products and services within the applicable areas identified in Standard #1.
- analyzing how information from peers, individuals, family and community influences health decisions and behaviors within the applicable areas identified in Standard #1.
- analyzing the influence of technology on health decisions and behaviors within the applicable areas identified in Standard #1.

As students in **Grades 9-12** extend their knowledge, what they know and are able to do includes

- analyzing how culture enriches and challenges health behaviors and the use of health services within the applicable areas identified in Standard #1.
- evaluating how messages from the media and other sources influence thoughts, feelings, health behaviors and selection of health products and services within the applicable areas identified in Standard #1.
- analyzing the influence of technology, research and medical advances on health within the applicable areas identified in Standard #1.

- evaluating how information from peers, individuals, family and community influence health decision and behaviors within the applicable areas identified in Standard #1.

Standard 5: Students will demonstrate the ability to use interpersonal communication skills to enhance health.

RATIONALE: Personal, family and community health are enhanced through effective communication. A responsible individual will use verbal and non-verbal skills in developing and maintaining healthy personal relationships. Ability to organize and convey information, beliefs, opinions and feelings are skills which strengthen interactions and can reduce or avoid conflict. When communication, individuals who are health literate demonstrate care, consideration and respect for self and others.

In **Grades K-4**, what the students know and are able to do includes

- demonstrating refusal skills that enhance health and reduce risks within the applicable areas identified in Standard #1.
- demonstrating healthy ways to express needs and emotions within the applicable areas identified in Standard #1.
- demonstrating conflict resolution skills that enhance health and reduce risks within the applicable areas identified in Standard #1.
- identifying interpersonal communication skills to build and maintain healthy relationships within the applicable areas identified in Standard #1.

As students in **Grades 5–8** extend their knowledge, what they know and are able to do includes

- demonstrating refusal skills that enhance health and reduce risks within the applicable areas identified in Standard #1.
- demonstrating healthy ways to express needs and emotions within the applicable areas identified in Standard #1.
- demonstrating conflict resolution skills that enhance health and reduce risks within the applicable areas identified in Standard #1.
- developing interpersonal communication skills to build and maintain healthy relationships within the applicable areas identified in Standard #1.

As students in **Grades 9-12** extend their knowledge, what they know and are able to do includes

- demonstrating refusal skills that enhance health and reduce risks within the applicable areas identified in Standard #1.
- demonstrating healthy ways to express needs and emotions within the applicable areas identified in Standard #1.
- demonstrating conflict resolution skills that enhance health and reduce risks within the applicable areas identified in Standard #1.
- demonstrating interpersonal communication skills to build and maintain healthy relationships within the applicable areas identified in Standard #1.

Standard 6: Students will demonstrate the ability to use goal-setting and decision-making skills to enhance health.

RATIONALE: Decision-making and goal-setting are essential lifelong skills needed in order to implement and sustain health-enhancing behaviors. These skills make it possible for individuals to transfer health knowledge into healthy lifestyles. When applied to health issues, decision-making and goal-setting skills will enable individuals to collaborate with others to improve the quality of life in their families, schools and communities.

In **Grades K-4**, what the students know and are able to do includes

- identifying and developing goal setting strategies to enhance health within the applicable areas identified in Standard #1.
- identifying and demonstrating decision-making strategies to enhance health within the applicable areas identified in Standard #1.

As students in **Grades 5–8** extend their knowledge, what they know and are able to do includes

- demonstrating goal setting strategies to enhance health within the applicable areas identified in Standard #1.
- explaining and demonstrating decision-making strategies to enhance health within the applicable areas identified in Standard #1.
- demonstrating the ability to apply collaborative goal setting and decision-making strategies to health issues and problems within the applicable areas identified in Standard #1.

As students in **Grades 9-12** extend their knowledge, what they know and are able to do includes

- demonstrating personal goal setting strategies to enhance health with an emphasis on life-long wellness within the applicable areas identified in Standard #1.
- demonstrating decision-making strategies to enhance health with an emphasis on life-long wellness within the applicable areas identified in Standard #1.
- demonstrating the ability to collaboratively apply goal setting or decision-making strategies to health issues and problems within the applicable areas identified in Standard #1.

Standard 7: Students will demonstrate the ability to advocate for personal, family, and community health.

RATIONALE: Quality of life is dependent on an environment that protects and promotes the health of individuals, families and communities. Responsible citizens, who are health literate, are characterized by advocating and communicating for positive health in their communities. A variety of health advocacy skills are critical to these activities.

In **Grades K-4**, what the students know and are able to do includes

- examining and expressing individual opinions about health issues within the applicable areas identified in Standard #1.
- identifying people or groups that advocate for healthy individuals, families, and communities within the applicable areas identified in Standard #1.
- demonstrating the ability to influence and support others in making positive health choices within the applicable areas identified in Standard #1.

As students in **Grades 5–8** extend their knowledge, what they know and are able to do includes

- examining and expressing individual opinions about health issues within the applicable areas identified in Standard #1.
- identifying barriers to creating positive personal, family and community health within the applicable areas identified in Standard #1.
- identifying effective methods and resources to advocate for personal, family and community health within the applicable areas identified in Standard #1.
- demonstrating the ability to work cooperatively when advocating for personal, family and community health within the applicable areas identified in Standard #1.
- demonstrating the ability to influence and support others in making positive health choices within the applicable areas identified in Standard #1.

As students in **Grades 9-12** extend their knowledge, what they know and are able to do includes

- examining and expressing individual opinions about health issues within the applicable areas identified in Standard #1.
- identifying barriers to creating positive personal, family and community health within the applicable areas identified in Standard #1.
- identifying and implementing effective methods and resources to advocate for personal, family and community health within the applicable areas identified in Standard #1.
- working cooperatively to advocate for personal, family and community health within the applicable areas identified in Standard #1.
- demonstrating the ability to influence and support others in making positive health choices within the applicable areas identified in Standard #1.