

Alabama Course of Study

Health Education



Eric G. Mackey

State Superintendent of Education

ALABAMA STATE DEPARTMENT OF EDUCATION



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Alabama Course of Study: Health Education
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STATE SUPERINTENDENT OF EDUCATION'S MESSAGE
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Dear Educator:

Research indicates that health education makes a positive impact on students' academic achievement, behavior, attendance, and health outcomes. Quality health education programs enable students to prevent disease and injury and improve the overall well-being of our children and youth.

The 2019 *Alabama Course of Study: Health Education* promotes a collaborative Whole School, Whole Child, Whole Community partnership. It emphasizes students' participation in healthy choices and behaviors within the school, the family, and the community.

The goal of the Alabama health education program is to educate students so that they can achieve optimal health for life. The skills-based approach of the 2019 *Alabama Course of Study: Health Education* prepares students to obtain, interpret, and understand basic health information and services. This document focuses on increasing functional health knowledge and identifying key skills applicable to all aspects of healthy living.

Achieving optimal health and well-being among Alabama's children cannot be left to chance. It must be a planned outcome. Implementing the 2019 *Alabama Course of Study: Health Education* is a major step toward achieving this goal.

Eric G. Mackey
State Superintendent of Education

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Alabama Course of Study: Health Education

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Preface

Health is a dynamic, ever-changing field continually influenced by ongoing research on the teaching of health and by emerging threats to personal and community well-being. The 2019 *Alabama Course of Study: Health Education* draws on the most current knowledge to provide the framework for the health education program in Alabama’s public schools. It lists the knowledge and skills that should be mastered at each grade level, with the goal of producing health-literate students who are equipped to experience a healthy lifestyle for the rest of their lives.

In the 2019 *Alabama Course of Study: Health Education*, Anchor Standards, content standards, and sub-standards are minimum and required (*Code of Alabama*, 1975 § 16-35-4). While these are fundamental and specific skills that students should master, it is not an exhaustive list. Systems should develop curriculum guides and add resources and activities, which are beyond the scope of this document, to address current needs of their own communities.

To develop the minimum required content outlined in this document, the 2018-2019 Alabama State Health Education Course of Study Committee and Task Force leaned on the *National Health Education Standards*, the 2009 *Alabama Course of Study: Health Education*, and the 2019 *National Youth Risk Behavior Study* (YRBS) questionnaire and reports from the Centers for Disease Control and Prevention. In addition, committee members attended state, regional and national conferences; read articles in professional journals and other publications; reviewed courses of study from other states; considered comments submitted through public review; listened to and read statements from interested individuals and groups throughout Alabama; contributed academic and experiential knowledge; and discussed issues among themselves and with colleagues. Finally, the committee reached consensus and developed what it believes to be the best possible health education curriculum for Alabama’s K-12 students.

Research indicates that health risk behaviors or factors with the most damaging long-term effects on students are obesity, poor nutrition, physical inactivity, abuse of drugs, risky sexual activity, negligent parenting, poverty, and emotional issues that may lead to the consideration of suicide. Therefore, the *Code of Alabama* (1975) laws and Alabama State Board of Education resolutions and regulations relative to these and other destructive behaviors are included in this document. The Alabama State Board of Education strongly encourages the embodiment of these laws and regulations in all age- and content- appropriate contexts throughout this course of study.

Acknowledgments

This document was developed by the 2018-2019 Alabama Health Education Course of Study Subcommittee of the Health and Physical Education Committee and Task Force composed of early childhood, intermediate school, middle school, high school, and college educators appointed by the Alabama State Board of Education and business and professional persons appointed by the Governor (Code of Alabama, 1975, §16-35-1). The Committee and Task Force began work in March 2018 and submitted the document to the Alabama State Board of Education for adoption at the March 2019 meeting.

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Synopsis of Laws, Regulations, and Resolutions Relating to Health Education

Reference Information	
<p>The <i>Code of Alabama</i> contains laws passed by the state legislature. A reference to the <i>Code of Alabama</i> has three parts: Title, Chapter, and Paragraph. Laws related to education are located in (Title) § 16. The Chapters are numbered and organized by topic. Paragraphs may be located within the referenced Chapter. For example, the law requiring cardiopulmonary resuscitation (CPR) instruction is (Title) §16- (Chapter) 40-(Paragraph) 8.</p>	<p>Program Foundation</p> <p>The <i>Alabama Course of Study: Health Education</i> provides the legal foundation for the minimum content of a locally developed health education curriculum. Using this document, school superintendents direct the development and implementation of the curriculum for schools in their system. Local boards of education approve and make this curriculum available to each teacher and interested citizen. Textbooks are classroom resources selected to complement this document. The state textbook adoption process begins after the Alabama State Board of Education adopts the 2019 <i>Alabama Course of Study: Health Education (Code of Alabama, 1975: §16-8-28, §16-9-21, §16-12-8, §16-12-9)</i>.</p>
<p>The <i>Alabama Administrative Code (AAC)</i> contains policies and regulations adopted by the State Board of Education. For example, the Alabama High School Graduation Requirements (AAC r. 290-3-1-.02 (8)(a-b)) are found on pages 66-67.</p>	<p>Program Implementation</p> <p>Health education is required in Grades K-8, and one-half credit of health education is required for high school graduation. Instruction in health education must be provided by certified teachers. Additional health education courses may be prescribed by local boards of education (<i>Code of Alabama, 1975: §16-1-16, §16-23-1, §16-35-5, §16-6B-2(d), §16-6B-2(f); Alabama Administrative Code (AAC) r. 290-3-1-.02 (8.2)(e-2)</i>).</p>
<p>The <i>Alabama Course of Study: Health Education</i> contains minimum required content standards for health education.</p>	<p>Program Requirements</p> <p>Research indicates that the health risk behaviors or factors with the most damaging long-term effects on students are obesity, poor nutrition, physical inactivity, abuse of drugs, risky sexual activity, negligent parenting, poverty, and emotional issues that may lead to the consideration of suicide. Teachers who teach health education should incorporate concepts embodied in the laws, regulations, and resolutions that follow in age- and content-appropriate contexts throughout this document.</p>
<p>State Board of Education resolutions or directives from the State Superintendent of Education provide additional guidance for health education.</p>	<p>Acquired Immune Deficiency Syndrome (AIDS) Education</p> <p>Students in Grades 5-12 receive instruction about AIDS through the health education program (Alabama State Board of Education Resolution, August 27, 1987, and October 22, 1987, meetings).</p> <p>Cardiopulmonary Resuscitation (CPR) Education</p> <p>In the required, one-half-credit high school course, students are to receive instruction in CPR from instructors certified by the American Heart Association or the American Red Cross (<i>Code of Alabama, 1975, §16-40-8</i>).</p>

Character Education

The character education program focuses upon the development of courage, patriotism, citizenship, honesty, fairness, respect for others, kindness, cooperation, self-respect, self-control, courtesy, compassion, tolerance, diligence, generosity, punctuality, cleanliness, cheerfulness, school pride, respect for the environment, patience, creativity, sportsmanship, loyalty, and perseverance. These character education traits complement the goals of the *Alabama Course of Study: Health Education (Code of Alabama, 1975, §16-6B-2(h); Alabama State Board of Education Resolution, May 25, 1995, meeting)*.

Drug Abuse Prevention Education

Drug abuse prevention education is provided to all students as part of a comprehensive drug abuse education program. Funding is used from federal, state, local, or private resources. The program is age-appropriate and contains resistance skills and information pertaining to all aspects of illicit drug use, including legal, social, and health consequences. Students may be exempt without penalty from the drug education program if a parent or legal guardian presents to the school principal a signed statement indicating that the teaching of disease, its symptoms, its development and treatment, and the use of instructional aids and materials conflict with the religious preferences of the family (*Code of Alabama, 1975, §16-41*).

Parenting Education

Through existing required courses, students in Grades 7-12 receive instruction in parental responsibilities (*Code of Alabama, 1975, §16-40-1.1*).

Sex Education

The *Code of Alabama* states:

- (a) Any program or curriculum in the public schools in Alabama that includes sex education or the human reproductive process shall, as a minimum, include and emphasize the following:
 - (1) Abstinence from sexual activity is the only completely effective protection against unwanted pregnancy, sexually transmitted diseases, and acquired immune deficiency syndrome (AIDS) when transmitted sexually.
 - (2) Abstinence from sexual activity outside of lawful marriage is the expected social standard for unmarried school-age persons.

The *Code of Alabama* states further that materials and instruction selected and used at the local level shall be age-appropriate; shall emphasize abstinence, refusal skills, ethical conduct, and applicable laws (child support, sexual abuse, and homosexual conduct); and shall include information indicating the reliability and unreliability of contraceptives (*Code of Alabama, 1975, §16-40A-2*).

Suicide Prevention Education

An awareness program for suicide prevention must be implemented by each school system and must include mental and emotional health education in the one-half-credit health education course required for high school graduation (Alabama State Board of Education Resolution, June 12, 1986, meeting).

The Jason Flatt Act

The Jason Flatt Act requires public school personnel to receive annual training in suicide awareness and prevention. Local school systems will adopt policies on student suicide prevention that include consultation with school and community stakeholders, school-employed mental health professionals, and suicide prevention experts. These policies shall address procedures relating to suicide prevention, intervention, and postvention. [SB11]

Erin's Law

The Alabama Governor's Erin's Law Task Force established guidelines for the child sexual abuse prevention instructional program for students in kindergarten through Grade 12, in accordance with the Alabama Legislature. Public and private K-12 employees, teachers, and school officials are required to report any suspected abuse or neglect of a child. [*Code of Alabama* § 26-14-3]

Mandatory Reporting

Current law requires that the person who has direct knowledge or suspicion of abuse or neglect **must** be the one to make an immediate report orally, either by telephone or direct communication, followed by a written report, to the Department of Human Resources (DHR), law enforcement, or the District Attorney. Failure to make a required report is a misdemeanor punishable by six months in jail or a \$500 fine (or both); additional civil liabilities may be pursued. Abuse is defined as harm or threatened harm to a child's health and welfare. Neglect is defined as negligent or maltreatment of a child. Teachers are legally obligated to report incidents of obvious or suspected abuse or neglect, or observation of any child being subjected to conditions or circumstances that would reasonably result in abuse. They must report any such incidents to personnel who can take action. [*Code of Alabama* § 26-14-1]

Sexting

Sexting typically refers to using a cell phone to send or receive sexually explicit images. The images may be of the sender or someone else, either in the nude or engaged in sexual activity. In Alabama a person sending sexually explicit images of a teen may be charged with violating the state's child pornography law. A teen who is legally an adult (a 19-year-old) may face a lengthy prison sentence if convicted of a child pornography offense. Under Alabama juvenile law, a child is someone under 18 years old; or someone under 21 years old if accused of committing a crime before the child's 18th birthday. [*Code of Alabama* § 12-15-102].

Human Trafficking

Human trafficking in the first degree. (a) A person commits the crime of human trafficking in the first degree if:

- (1) He or she knowingly subjects another person to labor servitude or sexual servitude through use of coercion or deception.
- (2) He or she knowingly obtains, recruits, entices, solicits, induces, threatens, isolates, harbors, holds, restrains, transports, provides, or maintains any minor for the purpose of causing a minor to engage in sexual servitude.
- (3) For purposes of this section, it is not required that the defendant have knowledge of a minor victim's age, nor is reasonable mistake of age a defense to liability under this section.
- (4) A corporation, or any other legal entity other than an individual, may be prosecuted for human trafficking in the first degree for an act or omission only if an agent of the corporation or entity performs the conduct which is an element of the crime while acting within the scope of his or her office or employment and on behalf of the corporation or entity, and the commission of the crime was either authorized, requested,

commanded, performed, or within the scope of the person's employment on behalf of the corporation or entity or constituted a pattern of conduct that an agent of the corporation or entity knew or should have known was occurring.

(5) Any person who obstructs, or attempts to obstruct, or in any way interferes with or prevents the enforcement of this section shall be guilty of a Class C felony.

(b) Human trafficking in the first degree is a Class A felony.

(Act 2010-705, p. 1708, §3.) [*Code of Alabama* § 13A-6-152 (2012) Section 13A-6-152]

Jamari Terrell Williams Student Bullying Prevention Act

Renames and updates the “Student Harassment Prevention Act” as the “Jamari Terrell Williams Act”; changes the reference from harassment to bullying; incorporates cyberbullying into the act and specifically addresses conduct that occurs on or off school property, online or electronically, that substantially disrupts or interferes with the orderly operation of the school; requires a complaint form be prominently posted online, available at school and included in the student handbook; and requires each school programmatically address the issue with students and staff annually. Effective on June 1, 2018. (Act 2018-472 H.366)

Annalyn’s Law

Requires that notification provided to a school of a low-risk sex offender be expanded to include notification of the local superintendent of education with jurisdiction over the school. The State Board of Education is required to develop and local boards of education are to adopt a model policy (to be implemented beginning with the 2020-2021 school year) for monitoring juvenile sex offenders in school. The bill also requires that upon notification, the principal, as appropriate, shall follow the procedures and intervention actions detailed in the safety plan created pursuant to the act. (Act 2018-399)

Texting While Driving

(a) For purposes of this article, the following words have the following meanings:

(1) **WIRELESS TELECOMMUNICATION DEVICE.** A handheld cellular telephone, a text-messaging device, a personal digital assistant, a stand-alone computer, or any other similar wireless device that is readily removable from a vehicle and is used to write, send, or read text or data through manual input. The term "wireless telecommunication device" does not include a device which is voice-operated and which allows the user to send or receive a text-based communication without the use of either hand except to activate or deactivate a feature or function.

(2) **WRITE, SEND, OR READ A TEXT-BASED COMMUNICATION.** Using a wireless telecommunication device to manually communicate with any person using text-based communication, including, but not limited to, communications referred to as a text message, instant message, or electronic mail. The term does not include reading, selecting, or entering a telephone number or name in a cell or wireless telephone or communication device for the purpose of making a telephone call.

(b) A person may not operate a motor vehicle on a public road, street, or highway in Alabama while using a wireless telecommunication device to write, send, or read a text-based communication. [Act 2012-291, p. 585, §1.]

Alabama Course of Study: Health Education General Introduction

Health education is an essential component of the school curriculum for every child from kindergarten through grade 12. Literacy, behaviors, and skills addressed in this course of study are fundamental to understanding and developing optimal health for life. Health education contributes directly to the successful practice of behaviors that protect and promote a healthy population and avoid or reduce health risks to this population. A health-literate citizen obtains, interprets, and understands basic health information and services and is able to competently use health information and services in ways that enhance health.

The 2019 *Alabama Course of Study: Health Education* describes the minimum required content for a curriculum that focuses on the development of health-literate citizens. This course of study reflects current evidence-based health information regarding disease prevention and health. The prior course of study was primarily topic-based, while the new course of study is skill-based with topics integrated within the standards. The instructional foundation for Alabama’s K-12 health education program provides guidance on the essential skills and knowledge that students should have at each grade level. The health education program incorporates national health education standards, the six dimensions of health, and the priority health-risk behaviors and experiences that most influence adolescent health, as identified by the Centers for Disease Control and Prevention. The sequence of content across grade levels provides for increasing degrees of complexity appropriate for students’ developmental levels from early childhood through adolescence.

Standards define what students should know and be able to do at the conclusion of a course or grade. Each content standard completes the stem “*Students can...*” Standards do not dictate curriculum or teaching methods. Content standards in this document contain minimum required content. The order in which standards are listed within a course or grade is not intended to convey a sequence for instruction. For example, one topic may appear before a second in the standards for a given grade, but this does not necessarily mean that the first must be taught before the second. A teacher might prefer to teach the second topic before the first topic or might choose to highlight connections by teaching both topics at the same time. In addition, a teacher might prefer to teach a topic of his or her own choosing that leads to students mastering the standards for both topics.

With the advancement of technology, social media, and current social issues, today’s youth face new pressures and challenges. By achieving the goal of optimal health and receiving the support of parents, schools, and communities, students will be prepared to face these challenges as productive, healthy citizens.

Conceptual Framework Narrative

The goal of Alabama’s K-12 health education program, **Optimal Health for Life**, is stated on the banner at the top of the conceptual framework graphic shown on the following page. Optimal health incorporates well-being and a high quality of life throughout a lifetime. In addition, the banner highlights the Whole School, Whole Community, Whole Child (WSCC) model, a collaborative approach to learning and health which is embedded throughout the content standards of the 2019 *Alabama Course of Study: Health Education*. WSCC combines and builds on elements of the traditional coordinated school health program.

The academic content standards in this course of study are organized around eight skills-based health education anchor standards: **Concepts Related to Health Promotion and Disease Prevention; Influences on Health Behaviors; Access to Information, Products, and Services; Interpersonal Communication Skills; Decision-Making Skills; Goal-Setting Skills; Self-Management Practices; and Advocacy**. In the graphic, these anchor standards are listed on the pathway. They serve as organizers of the content knowledge and skills from kindergarten through the high school courses and are aligned across the grades with increasing rigor.

The schoolhouse, the map of the state, and the diverse group of children represent the inclusive nature of the Whole School, Whole Community, Whole Child approach. The school works to ensure that each student is healthy, safe, supported, engaged, challenged, and poised for success. The school and community work collaboratively to support the healthy development of students.

The skills-based content, organization, and alignment of the academic content standards in the 2019 *Alabama Course of Study: Health Education* provide all Alabama students and teachers with a clearly-written, reasonable, measurable, and developmentally appropriate foundation of knowledge and skills. This course of study, when combined with effective instruction and curricula, enables students to achieve the overall goal for health education in Alabama—**Optimal Health for Life**.

Conceptual Framework Graphic



Directions for Interpreting the Standards

Anchor Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

Anchor Standard		Kindergarten	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Self-Management	Monitor Progress	K.7.1 Show healthy behaviors that improve personal health and wellness. Examples: demonstrating correct technique for hand washing, showing basic first aid procedures for bandaging a cut	1.7.1 Identify healthy practices and behaviors to maintain and improve personal health.	2.7.1 Predict how healthy behaviors can reduce health risks. Example: predicting how a healthy sleep routine promotes academic success	3.7.1 Develop a plan for responsible personal health behavior. Examples: keeping an activity log, planning activities that reduce stress	4.7.1 Demonstrate a variety of healthy practices and behaviors to maintain and improve personal health. Example: planning a daily menu based on the USDA food guidelines	5.7.1 Implement a variety of healthy practices and behaviors that avoid or reduce health risks. Example: executing a plan to manage academic, extracurricular, and family responsibilities.

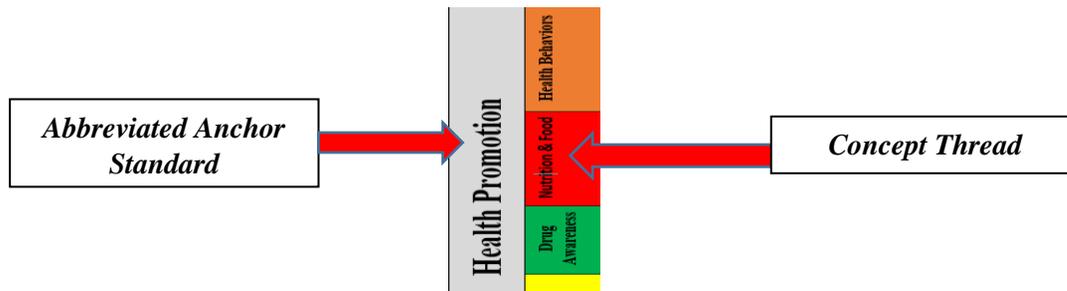
Anchor Standards are overarching guidelines based upon eight skills-based health education standards. These numbered standards appear in bold print at the top of each table.

Content Standards are statements that define what students should know and be able to do at the conclusion of a course or grade. Content standards are required to be taught. Each content standard completes the sentence stem “Students can...”

Content Sub-standards, indicated with *a, b, c, d*, are extensions of the content standard and are also required.

Examples are provided to clarify standards. Examples are not required to be taught.

Numbering of Content Standards – The grade level is listed first, followed by the anchor standard number and content standard. For example, 5.1.3 indicates grade 5, anchor standard 1, content standard 3. In high school courses, an abbreviation for the course title replaces the grade level.



Abbreviated Anchor Standards appear vertically in the far left column.

Concept Threads (K-5) organize content standards with common themes across elementary grade levels. The threads are indicated vertically at the left of each table. The 19 separate threads are lightly shaded to make them more readable. The number of threads varies from standard to standard.

Position Statements

Health Program Purpose

Research has shown a direct link between health and academic success. While children are young, they are able to establish healthy behaviors that are effective throughout life. Schools play a significant role in establishing these lifelong healthy behaviors. Schools and families working together have the greatest impact on the health, safety, and well-being of the student.

Whole School, Whole Community, Whole Child Model

The Whole School, Whole Community, Whole Child (WSCC) model is an expansion and update of the Coordinated School Health (CSH) approach. The Centers for Disease Control and Prevention (CDC) and the Association for Supervision and Curriculum Development (ASCD) developed this expanded model, in collaboration with key leaders from the fields of health, public health, education, and school health, to strengthen a unified and collaborative approach designed to improve learning and health in our nation's schools. The WSCC model focuses its attention on the child, emphasizes a school-wide approach, and acknowledges learning, health, and the school as being a part and reflection of the local community.

Health and education affect individuals, society, and the economy and, as such, must work together whenever possible. Schools are a perfect setting for this collaboration. Schools are one of the most efficient systems for reaching children and youth with health services and programs. Integrating health services and programs more deeply into the day-to-day life of schools and students represents an untapped tool for raising academic achievement and improving learning.

By focusing on students, addressing critical education and health outcomes, organizing collaborative actions through the Alabama Champions for Healthy Active Schools (ACHAS) statewide initiative, and strongly engaging community resources, the WSCC approach offers important opportunities that may improve healthy development and educational attainment for students.

The Role of Health Education in the Classroom

Current research indicates a positive correlation between health education, health outcomes, academic performance, student attendance, and student behavior. Given this undeniable connection, health education instruction is imperative for all K-12 Alabama students. It is highly recommended that a separate health education grade be included on the student report card for Grades K-8. Middle school health education when taught as a stand-alone course and high school health education must be taught by a certified health education teacher. Health education in middle school may not be taught as an elective course nor during the dedicated time allotted for physical education.



Health in the Integrated Curriculum

In the absence of a certified health teacher in the elementary and middle school grades, health education standards should be integrated into other subject, except physical education. Health education may not be taught during the designated time for daily physical education instruction for any grade level.

Alabama Champions for Healthy Active Schools

The Alabama Champions for Healthy Active Schools (ACHAS) statewide initiative is a collaborative effort involving key partners that share a vested interest in improving the health of Alabama students and school personnel. ACHAS helps local educational agencies (LEAs) and schools to develop successful wellness-promotion policies and to become champion schools. A champion LEA or school is driven by a working wellness policy that promotes nutritious meals, nutrition education, and physical activity before, during, and after school inclusive of students of all abilities, staff, and community involvement, in accordance with the United States Department of Agriculture (USDA) requirements, local educational agencies (LEAs) must develop and implement a local school wellness plan by June 30, 2017. The school wellness plan includes official statements that address the needs of a school system, school, or classroom. The Child Nutrition and WIC Reauthorization Act (Sec. 204 of Public Law 108-265) requires that these plans be developed and implemented by a wellness committee made up of parents, teachers, students, administrators, school food service personnel, school boards, and community members.

Sex Education Local Policy

It is highly recommended that local school systems develop and adopt a policy regarding the instruction of sex education content for their schools in accordance with laws, regulations, and resolutions in age- and content-appropriate contexts.

Cardiopulmonary Resuscitation (CPR) Education Clarification

- All students must receive instruction in CPR but are not required to become certified.
- CPR must be taught to all students enrolled in health classes in Alabama public high schools.
- CPR education does not need to cover all victim sizes (adult/child/infant) and **does not** require that a hands-on component be included in training.
- Only those standards prescribed by the American Heart Association or the American Red Cross shall be utilized in the instruction of CPR.

Option for CPR Certification

- CPR student certification requirement is a choice by the local school system/school.
- If a school system/school chooses to require students to become CPR-certified, the individual providing the certification training must be a CPR instructor certified through the American Heart Association or the American Red Cross.
- The person providing certification does not have to be an employee of the school system. Certified American Heart Association or American Red Cross trainers may be utilized for student certification purposes.

Technology

Technology in health education is growing and ever-changing. Technology skills can greatly enhance learning for students and teachers. The use of technology as a support tool enriches the quality of health education by delivering content through multiple methods. Utilization of appropriate technology must be included as an integral tool for planning and delivering the K-12 health education curriculum.

The Internet and other technology resources provide a wealth of reliable health materials. Sites for reliable and valid health information include government, non-profit organizations, and educational sites (.gov, .org, .edu) as opposed to commercial sites (.com). Students should be instructed on wise and appropriate use of technology and the consequences of the misuse and abuse of technology.

GRADES K-5 OVERVIEW

Students in Grades K-5 possess an inquisitive nature and are interested in themselves. These characteristics present both a challenge and an opportunity to connect classroom experiences to their emerging self-awareness. The 2019 *Alabama Course of Study: Health Education* provides a developmentally appropriate framework for Grades K-5. Students learn the importance of participating in healthy home, school, and community activities as they develop an awareness of the importance of making health decisions for a lifetime.

Health education in early childhood includes using the literacy, numerical, and critical-thinking skills that enable students to gather, analyze, and apply health information as their needs and priorities change. As K-2 students are provided opportunities to develop positive health practices, they become more aware of health risks for their age group and begin to comprehend some of the major influences on their health.

Instruction in Grades 3-5 emphasizes self-directed learning, decision-making skills, and strategies for recognizing and responding to potentially harmful situations in healthy ways. Students gain knowledge of the interrelationships among mental, emotional, social, physical, environmental, and spiritual health as they approach adolescence. In these grades, students may feel pressure to participate in negative behaviors, including experimentation with tobacco, alcohol, and other drugs. Health education ensures that students know the dangers of these and other behaviors and learn ways to respond when such situations arise. The Grades 3-5 standards are designed to provide students with a basic understanding of personal health habits, disease prevention, and health information products and services. The standards require instruction on the influences of media and technology, family, peers, and culture.

Teachers in Grades K-5 are challenged to design instructional programs that include the use of technological advances to reinforce the promotion of health, prevention of disease, and use of positive nutritional practices.

Each content standard completes the sentence stem “Students can...”

Grades K-5 Standards

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

		Kindergarten	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Health Promotion	Health Behaviors	K.1.1 Identify behaviors that impact personal health.	1.1.1 Explain how healthy behaviors impact personal health.	2.1.1 Describe behaviors that enhance physical and mental health.	3.1.1 Describe the relationship between healthy behaviors and personal health.	4.1.1 Describe school practices that promote a safe and healthy environment.	5.1.1 Draw conclusions about the relationship between healthy behaviors and personal health.
	Nutrition & Food	K.1.2. Identify healthy food choices. Example: MyPlate	1.1.2 List food safety precautions.	2.1.2 Summarize motivations for eating food. Examples: hunger, emotions	3.1.2 Illustrate the link between the six main nutrients and being healthy.	4.1.2 Compare unhealthy and healthy eating patterns, including eating in moderation.	5.1.2 Utilize information on various food labels to determine nutritional value.
	Drug Awareness	K.1.3 List everyday chemical products that can be used like a harmful drug. Examples: glue, laundry pods, aerosol sprays	1.1.3 Explain how over-the-counter and prescription medicines can be misused.	2.1.3 Describe why avoiding tobacco is a healthy behavior.	3.1.3 Examine the harmful effects of tobacco, drugs, and alcohol on the body.	4.1.3 Summarize short-term and long-term effects of cigarettes and smokeless tobacco products.	5.1.3 Research illnesses and diseases associated with the use and abuse of tobacco, drugs, and alcohol.
	Hygiene	K.1.4 Explain why healthy behaviors such as brushing teeth and getting adequate sleep are important.	1.1.4 Explain rationale for not sharing hygiene products. Examples: combs, brushes, toothbrushes	2.1.4 List ways to prevent germs from spreading. Examples: using soap and warm water when washing hands	3.1.4 Describe strategies and skills important to personal hygiene.	4.1.4 Summarize methods that prevent the spread of germs which cause communicable diseases.	5.1.4 Develop strategies and skills used to promote personal hygiene.

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

		Kindergarten	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Health Promotion	Disease Prevention & Health Care	K.1.5 Describe ways to prevent the spread of communicable diseases. Examples: coughing into elbow, washing hands	1.1.5 Apply measures for cleanliness and disease prevention.	2.1.5 Investigate how immunizations and regular care from health professionals prevent disease.	3.1.5 Identify symptoms which might need treatment from health care providers. Examples: fever, sore throat, toothache	4.1.5 Explain how to prevent or control common childhood illnesses and conditions. Examples: asthma, allergies, diabetes, epilepsy	5.1.5 Identify signs, symptoms, and risk factors for cancer, heart disease, obesity, and diabetes.
	Safety	K.1.6 List reasons to call for emergency assistance.	1.1.6 Demonstrate asking for assistance to enhance safety for self and others. Example: practice what to say when calling 911 or other emergency numbers.	2.1.6 List ways to prevent common childhood injuries. Examples: following playground safety rules, wearing protective equipment, practicing water safety	3.1.6 Identify personal protection equipment needed for sports or recreational activities.	4.1.6 Describe ways to prevent common childhood injuries. Examples: bicycle safety, wearing a seatbelt, ATV safety	5.1.6 Design a personal and class safety plan. Examples: home safety plan, fire drill, active shooter drill
	Dimensions of Health	K.1.7 Identify positive examples of physical health.	1.1.7 Identify positive examples of social and emotional health.	2.1.7 Identify positive examples of mental health.	3.1.7 Identify positive examples of environmental health.	4.1.7 Compare and contrast the six dimensions of health.	5.1.7 Design a personal health plan utilizing the six dimensions of health.

Anchor Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

		Kindergarten	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Analyzing Influences	Family, Peer, & Culture	K.2.1 Identify external factors that influence personal health. Examples: family, culture, media	1.2.1 Contrast tattling with reporting aggression, bullying, and violent behavior.	2.2.1 Identify ways the school supports personal health practices and behaviors.	3.2.1 Describe how family influences personal health practices and behaviors.	4.2.1 Explain the influence of culture on health practices and behaviors.	5.2.1 Describe how the school and community can support personal health practices and behaviors.
		K.2.1a List family rules and activities that promote health and safety. Example: limiting screen time, not talking to strangers	1.2.1a List healthy foods served by the school cafeteria.	2.2.1a Identify how hereditary and environmental factors influence family health.	3.2.1a Identify ways that peers can influence healthy and unhealthy behaviors.	4.2.1a Explain the importance of good communication within the family unit.	5.2.1a Describe how positive and negative influences from family, peers, and culture affect adolescents' body acceptance during the changes of puberty.
	Media & Technology	K.2.2 List types of media. Examples: television, radio, internet, advertisements	1.2.2 Describe how advertisements can influence food choices. Example: show healthy vs. unhealthy options	2.2.2 Discuss how advertisements can influence individuals to purchase certain products.	3.2.2 Compare a variety of media messages affecting consumer health decisions.	4.2.2 Explain how media influence thoughts, feelings, and health behaviors.	5.2.2 Describe ways that technology can influence personal health. Example: step tracker device, heart rate monitor, blood sugar monitor

Anchor Standard 3: Students will demonstrate the ability to access valid information, products, and services to enhance health.

		Kindergarten	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Access to Information	Information, Products, & Services	<p>K.3.1 Identify school and community health helpers who can assist in understanding health procedures. Examples: dentist, doctor, school nurse</p>	<p>1.3.1 Describe the roles of various health care professionals.</p>	<p>2.3.1 Explain the importance of identifying trusted adults and health professionals.</p>	<p>3.3.1 List reliable health-related information, products, and services. Examples: parent, school nurse, counselor</p>	<p>4.3.1 Locate reliable health resources from home, school, and community. Examples: parent, school nurse, counselor</p>	<p>5.3.1 Collect information about health choices from home, school, and community. Examples: DARE, SADD, MADD, health-related agencies</p>
		<p>K.3.2 Discuss the role of the school nurse in encouraging student wellness.</p>	<p>1.3.2 Identify school and community health helpers who can be contacted in emergencies. Examples: nurse, counselor, EMT</p>	<p>2.3.2 Identify adults and professionals who help to promote regular physical activity. Examples: PE teacher, coach, doctor, personal health coach</p>	<p>3.3.2 Identify sources of accurate information about health products, information, and services.</p>	<p>4.3.2 Compare health-related advertisements regarding “truth in advertising.”</p>	<p>5.3.2 Research factors to consider when selecting health products. Examples: cost, safety, effectiveness, side effects</p>

Anchor Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

		Kindergarten	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Interpersonal Communication	Social	K.4.1 Explain how a person can use good listening skills to enhance his or her health.	1.4.1 Identify ways listening skills can be used to build and maintain healthy relationships. Example: taking turns talking and listening	2.4.1 Demonstrate techniques of effective listening. Examples: body language, eye contact	3.4.1 Practice skills needed to develop and maintain personal relationships. Examples: conflict resolution, role play	4.4.1 Demonstrate skills that communicate care, consideration, and respect for self and others. Example: helping those with disabilities	5.4.1 Utilize effective verbal and nonverbal communication skills to build and maintain relationships and enhance health.
	Emotions & Feelings	K.4.2 Name various emotions and feelings. Examples: anger, sadness, joy, fear	1.4.2 Discuss ways to express feelings to peers in a healthy way. Example: speaking calmly	2.4.2 Explain ways that bullying and excessive teasing can be hurtful.	3.4.2 Discuss healthy ways to express needs, wants, and feelings. Examples: using appropriate refusal skills, manners, communication	4.4.2 Describe the various types of bullying and effects on the victim. Examples: types - through social media; effects - depression, suicide, eating disorders	5.4.2 Compare positive and negative ways to respond to conflict and bullying.
	Conflict Resolution	K.4.3 Describe how to express feelings to prevent a conflict from starting.	1.4.3 Interpret the feelings of and describe ways to show empathy for others.	2.4.3 Demonstrate how to communicate with others with kindness and respect.	3.4.3 Recognize causes of conflicts and apply nonviolent strategies to manage or resolve situations.	4.4.3 Demonstrate how to avoid conflict and explain when it is necessary for an adult to intervene.	5.4.3 Develop a class plan to prevent bullying in the school.

Anchor Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks. (Continued)

		Kindergarten	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Interpersonal Communications	Refusal Skills	<p>K.4.4 Tell ways to respond in an unwanted, threatening, or dangerous situation.</p>	<p>1.4.4 Demonstrate ways to respond in an unwanted, threatening, or dangerous situation. Example: run-hide-fight</p>	<p>2.4.4 Summarize strategies for reporting harmful acts. Example: reporting to trusted adult</p>	<p>3.4.4 State effective refusal skills to enhance health. Examples: responding effectively in refusing alcohol, tobacco, or other drugs</p>	<p>4.4.4 Model refusal skills that avoid or reduce health risks. Examples: role playing how to walk away, call for help, say no</p>	<p>5.4.4 Apply risk reduction behaviors to protect self and others from use of alcohol, tobacco, and other drugs.</p>
		<p>K.4.5 Identify characteristics of a trusted adult.</p>	<p>1.4.5 Identify appropriate and inappropriate touches. Example: recognizing touching in the bathing suit zone as inappropriate</p>	<p>2.4.5 Demonstrate how to tell a trusted adult if inappropriate touching occurs.</p>	<p>3.4.5 Explain that each person has the right to tell others not touch his or her body.</p>	<p>4.4.5 Describe how to avoid dangerous situations involving strangers and Internet safety. Example: refusing to go alone to meet online acquaintances</p>	<p>5.4.5 Apply the practice of keeping personal information private while online.</p>

Anchor Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.

		Kindergarten	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Decision-Making	Problem Solving	K.5.1 Discuss when and what assistance is needed for health-related situations. Examples: explaining when someone should call 911, asking for help when a student is ill, determining the difference between tattling and telling	1.5.1 Describe situations in which students must choose between healthy and risky behaviors.	2.5.1 Differentiate between situations when a health-related decision can be made individually or when assistance is needed. Example: when to tell trusted adults about bullying or other abuse	3.5.1 Discuss the consequences of possible choices when making a health decision. Examples: healthy snack vs. junk food, outdoor activity vs. video games, active vs. sedentary, implications of not following established rules	4.5.1 Research health-related situations that require a thoughtful decision. Examples: food choices, drug use, alcohol consumption, smoking	5.5.1 Predict the potential outcomes of possible options when making a health-related decision. Examples: sickness, death, suicide

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

		Kindergarten	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Goal-Setting	Self-Awareness	K.6.1 Define a goal and identify several potential age-appropriate, short-term health goals. Examples: brushing teeth daily, meeting or achieving ARI reading goal	1.6.1 Create an age-appropriate personal health goal.	2.6.1 Describe various ways to reach a personal health goal.	3.6.1 Set a personal, health-enhancing goal to pursue for several weeks. Examples: setting good morning and bedtime routines, eating more fruits and vegetables	4.6.1 Describe ways to put a plan into place to achieve a goal.	5.6.1 Create a personal health goal and track progress toward its achievement.
	Problem-Solving	K.6.2 Identify family members who can assist with achieving short-term health goals.	1.6.2 Describe ways that parents and other trusted adults can help a student achieve a health goal.	2.6.2 Identify school and community individuals who can help support personal health goals.	3.6.2 Identify barriers to achieving personal health goals, determine how to achieve, and monitor progress.	4.6.2 Identify resources to assist in achieving personal health goals. Examples: YMCA, Boys/Girls Clubs, recreation center, school clubs	5.6.2 Identify resources in the school that may assist with achieving personal health goals.

Anchor Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

		Kindergarten	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Self-Management	Monitor Progress	<p>K.7.1 Show healthy behaviors that improve personal health and wellness. Examples: demonstrating correct technique for hand washing, showing basic first aid procedures for bandaging a cut</p>	<p>1.7.1 Identify healthy practices and behaviors to maintain and improve personal health.</p>	<p>2.7.1 Predict how healthy behaviors can reduce health risks. Example: predicting how a healthy sleep routine promotes academic success</p>	<p>3.7.1 Develop a plan for responsible personal health behavior. Examples: keeping an activity log, planning activities that reduce stress</p>	<p>4.7.1 Demonstrate a variety of healthy practices and behaviors to maintain and improve personal health. Example: planning a daily menu based on the USDA food guidelines</p>	<p>5.7.1 Implement a variety of healthy practices and behaviors that avoid or reduce health risks. Example: executing a plan to manage academic, extracurricular, and family</p>
	Injury Prevention	<p>K.7.2 Demonstrate healthy behaviors that prevent injuries. Example: practicing safety precautions when crossing the street</p>	<p>1.7.2 Determine behaviors that avoid or reduce injury. Examples: importance of riding in the back seat, meaning of traffic signs, safe pedestrian behaviors</p>	<p>2.7.2 Describe personal behaviors that enhance safety at school, home, and within the community. Examples: staying seated on the bus; surfing the Internet with caution; practicing water safety; learning self-defense skills</p>	<p>3.7.2 Describe healthy practices that maintain or improve personal health. Examples: wearing appropriate footwear or clothing for outdoor activity</p>	<p>4.7.2 Apply safety rules for engaging in outdoor physical activities requiring the use of special equipment. Examples: using a baseball or bicycle helmet, catcher's mask, knee pads</p>	<p>5.7.2 Propose safety precautions for Internet use and electronic gaming.</p>

Anchor Standard 8: Students will demonstrate the ability to advocate for personal, family, and community health.							
		Kindergarten	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Advocacy	Promote Healthy Habits	K.8.1 Role play behaviors that promote personal healthy habits. Examples: requesting help when deciding on healthier snack options, asking for help when being teased at school	1.8.1 Encourage peers to make positive health choices. Examples: reminding peers to cover their nose and mouth when sneezing, offering helpful suggestions when peers are trying to resolve a conflict	2.8.1 Enlist family and community participation in positive health activities. Examples: Relay for Life, Run/Walk for Diabetes	3.8.1 Research public health and environmental laws that protect personal health. Examples: laws dealing with dumping, polluting, littering, secondhand smoke, recycling	4.8.1 Describe health advocacy strategies. Examples: writing and recording public service announcements for school or community broadcasts, writing letter or email to editors of local media	5.8.1 Implement a school health improvement project. Example: participating in the development of a school wellness policy, conducting survey of school health issues

GRADES 6-8 OVERVIEW

Middle school students exhibit a wide range of intellectual abilities, learning styles, talents, interests, and levels of maturity. Their cognitive, social, and emotional lives are affected by the onset of puberty, when physical growth can be rapid and uneven. Students struggle to establish their individual identities, yet yearn for acceptance from peers. Emotions during this grade span may be volatile and unpredictable. Anxiety over appearance, friendships, and social acceptance affects both girls and boys. Families continue to influence middle school students' values and beliefs, even though students are taking steps to distance themselves from their families and become more independent. Middle schoolers benefit from engaging in hands-on approaches to learning, tackling higher-level thinking tasks, and the incorporation of technology into daily class activities. A “whole child” approach, which ensures that each student is healthy, safe, engaged, supported, and challenged, produces long-term student success.

Health education standards in Grades 6-8 provide developmentally appropriate instruction that positively affects health-related knowledge, attitudes, skills, and behaviors. Students experience opportunities to work cooperatively to enhance their own health as well as the health of peers, family, and the community. Students learn to use the decision-making, goal-setting, advocacy, and communication skills important for enhancing relationships, reducing conflicts, expressing needs, and evaluating behavioral consequences. Standards focus on understanding health issues and personal responsibilities related to adolescent growth and development, promoting health-enhancing behaviors, and obtaining accurate information from a variety of sources. Health-literate students have opportunities to influence home, school, and community health.

Each content standard completes the sentence stem “*Students can...*”

Grades 6-8 Standards

<i>Anchor Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.</i>			
	Grade 6	Grade 7	Grade 8
Health Promotion	<p>6.1.1 Describe the interrelationship between social and emotional health in adolescence.</p> <p>a. Identify how positive relationships can enhance each dimension of health.</p> <p>b. Explain how stress can affect personal health.</p>	<p>7.1.1 Summarize the interrelationship of emotional, social, and physical health.</p> <p>a. Determine how peers may affect the six dimensions of health.</p> <p>b. Illustrate how changing family dynamics can affect health. Examples: divorce, relocating, death</p>	<p>8.1.1 Explain how emotional, intellectual, physical, spiritual, mental, and social health affect each other.</p> <p>a. Determine how social influences can affect physical health.</p> <p>b. Describe how risky health behaviors affect the emotional, physical, and social health of adolescents.</p>
	<p>6.1.2 List ways to reduce or prevent injuries and illness. Examples: stretching techniques, regular exercise, equipment safety, flu shot, obtaining immunizations against HPV and other conditions</p>	<p>7.1.2 Predict the risk of injury or illness if engaging in unhealthy behaviors. Examples: riding in the bed of a pick-up truck, biking without a helmet, riding without a seat belt</p> <p>a. Give examples of dangers associated with the use of alcohol, tobacco or other drugs.</p>	<p>8.1.2 Analyze how the environment, family history, personal behaviors, and health care can affect individual healthful living.</p> <p>a. Describe ways to reduce or prevent injuries and illness in adolescents as it pertains to family history, personal behaviors, and health care.</p>
	<p>6.1.3 Describe benefits of practicing healthy behaviors. Examples: using household products only for intended purposes, dietary choices, physical activity, drinking plenty of water</p>	<p>7.1.3 Determine barriers to practicing healthy behaviors. Examples: lack of finances, access to health services, social support</p> <p>a. Examine how nutritional choices and psychological issues may lead to eating disorders.</p>	<p>8.1.3 Create a plan for eliminating personal unhealthy behaviors. Examples: inappropriate use of needles, tobacco use, physical inactivity, sexual contact, alcohol consumption, inadequate sleep</p>

***Anchor Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.
(continued)***

Health Promotion	<p>6.1.4 Examine how personal health and wellness are affected positively or negatively by an individual's surroundings.</p>	<p>7.1.4 Predict the consequences of engaging in unhealthy behaviors.</p> <ul style="list-style-type: none"> a. Discuss ways to prevent obesity. b. Determine health risks associated with body piercings or tattoos. 	<p>8.1.4 Analyze the relationship between engaging in regular physical activity and healthy eating as ways to improve personal health.</p>
	<p>6.1.5 Identify how positive family practices and beliefs promote personal health. Examples: regular dental and vision check-ups, regular doctor visits</p>	<p>7.1.5 Research family medical history and how it impacts personal health now and in the future.</p> <ul style="list-style-type: none"> a. Discuss hereditary diseases that impact personal health and wellness. 	<p>8.1.5 Analyze family history to determine the effects of health conditions that may be chronic or acute diseases. Examples: diabetes, high-cholesterol, high blood pressure, cancer, mental health issues</p>

Anchor Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

	Grade 6	Grade 7	Grade 8
Analyzing Influences	<p>6.2.1 Examine how family and peers influence the health of adolescents. Examples: inactivity, fast food consumption</p> <ul style="list-style-type: none"> a. List personal family guidelines and rules that enhance health. b. List peer situations that enhance health. 	<p>7.2.1 Describe how family values and behaviors influence the health of adolescents. Examples: eating family meals daily, participating in physical activity, practicing open communication</p>	<p>8.2.1 Describe the influence of culture on health beliefs, practices, and behaviors. Examples: religious beliefs, gang activity, family customs</p>
	<p>6.2.2 Identify health services offered in the school.</p>	<p>7.2.2 Explain how communities can affect personal health practices and behaviors. Examples: public policies regarding water pollution, air quality, tobacco use</p>	<p>8.2.2 Examine ways the school and community encourage students to use appropriate life skills to improve health. Examples: participating in conflict resolution practices, Red Ribbon Week, Walk to School Day</p>
	<p>6.2.3 Investigate how messages from media influence health behaviors. Examples: social media, fast food advertisements, editing photos to enhance physical appearance</p>	<p>7.2.3 Describe how the media can send mixed messages about health. Examples: advertisements concerning tobacco, alcohol, and nutrition</p>	<p>8.2.3 Analyze the influences of technology on personal and family health. Examples: screen time, video game addictions, activity trackers, diabetes monitor, heart monitor, fitness assessment tools</p>
	<p>6.2.4 Explain the influence of values and beliefs on individual health practices and behaviors. Examples: family values, religious beliefs</p>	<p>7.2.4 Explain how school and public health policies can influence health promotion and disease prevention. Examples: vending machine selections, vaccination requirements, wellness check-ups</p>	<p>8.2.4 Explain how societal perceptions influence healthy and unhealthy behaviors. Examples: acceptance of teenage smoking and teenage pregnancy by peers, certain communities, and cultures</p>
	<p>6.2.5 Identify how bad health choices result in poor personal health. Example: excessive caloric intake resulting in excess poundage</p>	<p>7.2.5 Discuss how risky choices influence the likelihood of unhealthy behaviors, including tobacco use increasing the risk of using other drugs and peer pressure to consume alcohol.</p>	<p>8.2.5 Give examples of how substance abuse can increase the likelihood of other health risk behaviors. Examples: alcohol consumption lowering inhibitions, e-cigarettes or vaping leading to smoking</p>

Anchor Standard 3: Students will demonstrate the ability to access valid information, products, and services to enhance health.

	Grade 6	Grade 7	Grade 8
Access to Information/ Products/Services	<p>6.3.1 Analyze the validity of a variety of Internet sources for health information. Examples: valid sites -.edu (education), .org (non-profit), or .gov (government); unreliable health information sites - .com (commercial)</p> <p>a. Identify local resources for reliable health information. Examples: public health agencies, school nurse, health education teacher</p>	<p>7.3.1 Distinguish between facts and myths of health information.</p> <p>a. Examine beliefs concerning the transmission of HIV/AIDS; distinguish between fact and fallacy.</p>	<p>8.3.1 Analyze the validity of health claims made concerning health products and services. Examples: use of herbal medicines, nutritional supplements, weight loss supplements, steroids use</p>
	<p>6.3.2 Determine the accessibility of reliable resources, personnel, and services that enhance health. Examples: school counselor, school nurse, dentist, 911</p>	<p>7.3.2 Demonstrate the ability to locate valid school and community health resources. Examples: health clinic, school wellness committee, school nurse, local health department</p>	<p>8.3.2 Identify situations that may require professional health services, including self-harm, suicidal thoughts, substance abuse, sexual abuse, and harm toward others.</p>

Anchor Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

	Grade 6	Grade 7	Grade 8
Interpersonal Communication	<p>6.4.1 Apply effective verbal and nonverbal communication skills to enhance health. Examples: praise, high-five, fist bump, thumbs up</p> <p>a. Demonstrate appropriate nonverbal communication skills someone could use when upset. Examples: walking away, remaining calm and quiet</p>	<p>7.4.1 Discuss effective conflict management or resolution strategies. Example: five steps to resolve conflict: calm down, state and understand the problem, apologize, promote solution finding, follow-up</p>	<p>8.4.1 Analyze how strategies using verbal and nonverbal communication effectively can enhance health. Examples: verbal – using positive interpersonal communication to avoid conflict non-verbal – shaking hands, displaying positive facial expressions, making eye contact</p>
	<p>6.4.2 List refusal and negotiation skills to avoid or reduce health risks. Examples: saying no, suggesting alternative choices</p>	<p>7.4.2 Model refusal skills that avoid or reduce health risks. Examples: role playing how to effectively handle bullying, harassment, and peer pressure situations</p>	<p>8.4.2 Demonstrate negotiation skills which help resolve conflict in bullying situations.</p>
	<p>6.4.3 Determine when and how to utilize different communication strategies to deal with a variety of situations and conflicts. Examples: compromising, apologizing, addressing the issue</p>	<p>7.4.3 Demonstrate skills that avoid conflict. Examples: asking someone respectfully not to smoke, practice active listening, reacting sensibly, communicating clearly, practicing patience</p>	<p>8.4.3 Demonstrate effective communication when confronted with mental or emotional problems in others. Examples: respect vs. disrespect, empathy vs. complacency, calmness vs. excitability, confronting vs. non-confrontational</p>

Anchor Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.

	Grade 6	Grade 7	Grade 8
Decision-Making	<p>6.5.1 Describe situations that can help or hinder making a healthy decision. Examples: socio-economic status, access to medical services, availability of healthful foods, sedentary lifestyle</p>	<p>7.5.1 Distinguish when a self-decision should be made or if help should be sought from a responsible adult. Examples: friends begin drinking, unsafe situation arises at school, suicidal friend, suspected abuse, seat belt use, suicidal thoughts</p> <p>a. Determine when it is necessary to ask for assistance when making a health choice. Examples: friend begins to self-harm, negative peer pressure</p>	<p>8.5.1 Predict the impact on self and others when making a health-related decision. Examples: following a time-management plan, walking to school, limiting caffeine intake, riding with an impaired driver</p> <p>a. Analyze options as well as outcomes, when pressured by peers to perform illegal acts. Examples: underage drinking leading to being arrested, injury or death when not wearing a seat belt, riding a motorcycle without a helmet resulting in head injury</p>
	<p>6.5.2 Distinguish between healthy and unhealthy alternatives to health-related issues or problems. Example: role-playing healthy ways to express anger and frustration</p>	<p>7.5.2 Analyze healthy alternatives over unhealthy alternatives when making decisions. Examples: eating regular meals vs. skipping meals, choosing healthy snacks vs. junk food, getting proper exercise vs. too much screen time</p>	<p>8.5.2 Critique the positive and negative outcomes of a health-related decision. Examples: positive – keeping calendar to manage time, reading food labels, getting adequate sleep negative – tobacco use, eating disorders, drug use</p>

<i>Anchor Standard 6: Students will demonstrate the ability to use goal-setting skills to enhance health.</i>			
	Grade 6	Grade 7	Grade 8
Goal-Setting	6.6.1 Assess personal health practices. Examples: food choices, physical activity, hygiene	7.6.1 Assess current personal health practices and set a goal to adopt, maintain, or improve one or more health practices.	8.6.1 Apply strategies and skills needed to attain a personal health goal.
	6.6.2 Describe how setting goals to increase time for physical activity and academic study may reduce stress. a. List activities that can improve physical and mental health.	7.6.2 Describe changing abilities, priorities, and responsibilities that impact personal health goals. Examples: age, injuries, changing jobs, leaving active school life to work, sedentary to walking, walking to jogging, jogging to running; eating poorly to making healthy food choices leading to weight loss or weight gain	8.6.2 Analyze how keeping an activity record will help an individual to attain a personal health goal. Examples: using food journal to track nutritional intake, My Fitness Pal, Fitbit, digital tracking device, track daily activity with activity log
Self-Management	<i>Anchor Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.</i>		
	6.7.1 Critique examples of responsible behaviors that reduce health risks. Examples: choosing healthy foods, participating in healthy activities, having regular medical and dental check-ups	7.7.1 State the importance of assuming responsibility for personal health behaviors and avoiding risky behaviors. Examples: fast food vs. My Plate recommendations, screen time vs. active living	8.7.1 Perform overall self-assessments and identify behaviors that will impact personal health. Examples: assessing sleeping, eating, and exercising patterns
	6.7.2 Describe practices to avoid to reduce health risks to self and others. Examples: smoking or vaping, drinking alcohol, using illegal drugs, texting while driving	7.7.2 Demonstrate healthy practices and behaviors that will maintain or improve the health of self and others. Examples: practicing proper use of prescription medications, good nutrition, proper rest, regular exercise; avoiding driver distractions	8.7.2 Document healthy practices and behaviors that will improve the health of self and others. Example: maintaining a personal health journal

<i>Anchor Standard 8: Students will demonstrate the ability to advocate for personal, family, and community health.</i>			
	Grade 6	Grade 7	Grade 8
Advocacy	<p>6.8.1 State a health-enhancing position and support it with accurate information. Example: applying sunscreen has been proven to help prevent skin cancer</p>	<p>7.8.1 Create ways to influence and support others in making positive health choices. Examples: using social media campaigns, YouTube live campaign, posters; addressing local school board with the need for quality physical education and healthier food choices</p>	<p>8.8.1 Demonstrate ways to influence and support others in making positive health choices. Examples: public service announcements, persuasive writing, YouTube videos, skits</p>
	<p>6.8.2 Identify ways by which health messages can be altered to appeal to different audiences. Example: modifying a snack advertisement to target children, teenagers, or adults</p>	<p>7.8.2 Describe which advertising appeals are being used in various advertisements. Examples: bandwagon appeal, brand loyalty appeal, sex appeal</p>	<p>8.8.2 Work collaboratively to advocate for healthy individuals, families, and schools. Examples: designing healthy recipes, supporting the school wellness policy, school newscasts, school newsletters</p>

GRADES 9-12 OVERVIEW

Students experience significant growth and development during high school. Students in Grades 9-12 identify short- and long-term goals as they prepare for adulthood and its obligations, including pursuing higher education opportunities and making career choices. Many high school students learn to drive vehicles, seek employment for the first time, and refine academic and extracurricular interests. As they take on more complicated responsibilities, these students are defining their unique personalities and making positive and negative choices independently from their parents.

The required high school course, Health Education, encompasses the eight anchor standards with the ultimate goal of successful application and mastery of health-enhancing skills. Health education is addressed in a way that allows students to obtain and interpret basic health information and apply it effectively to their daily lives as they deal with such issues as bullying, substance abuse, mental health, and sexual activity. Students are encouraged to become health-literate and self-directed learners while establishing a basic understanding of health promotion and disease prevention. The maturation of the student, the intensity of instruction, and the level of integration of content across the high school curriculum all influence the impact of this course.

Health instruction leads high school students to understand basic concepts of health literacy. Students develop skills for accessing health information, products, and services to meet current and future health needs. They also distinguish between positive and negative impacts of family, culture, mass media, and technology on health. In addition, students gain knowledge of global environmental issues, learn to administer cardiopulmonary resuscitation (CPR) and other first aid procedures, and gain an understanding of the importance of recognizing, avoiding, and reporting types of abuse.

Other goals for fostering health literacy for students in Grades 9-12 include becoming competent in making health-enhancing decisions, such as avoiding substance use and abuse. Students become informed about factors that impact nutrition and gain knowledge of acute and chronic health conditions, including HIV and AIDS. They also apply decision-making skills, set goals, and work cooperatively to advocate for healthy students, schools, and communities.

It is suggested that students take *Health Education* in Grade 10. Students completing this class earn one-half credit toward graduation and meet the pre-requisite for enrolling in the two health education electives, *Leaders in Health Advocacy* and *World Health*.

HEALTH EDUCATION

This is a half-credit course which is required for graduation. It is recommended that students take this course in Grade 10.

Each content standard completes the sentence stem *Students can...*

<i>Anchor Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.</i>	
Health Promotion	HE.1.1 Predict how health literacy and behaviors can affect health status.
	HE.1.2 Describe the interrelationships of emotional, mental, physical, social, spiritual, and environmental health. a. Identify symptoms and methods of treatment of mental health disorders, including depression, and stress. b. Identify warning signs and prevention strategies for suicide.
	HE.1.3 Analyze how genetics and family history can impact personal health. Examples: family history of heart disease, diabetes, cancer, or addictions
	HE.1.4 Propose ways to prevent, reduce, and treat injuries and other health problems. a. Determine when professional health services may be required for injury or disease. b. Perform CPR, AED techniques, and First Aid procedures, including the principles of RICE (Rest, Ice, Compression, Elevation).
	HE.1.5 Analyze the relationship between access to health care and health status. Examples: relationship between health insurance coverage and life expectancy; access to medical care including primary care physician, hospital, vaccines
	HE.1.6 Compare and contrast the benefits of and barriers to practicing a variety of healthy behaviors. a. Identify factors that impact nutritional choices. Examples: planning healthy meals, accessibility of healthy and unhealthy foods
	HE.1.7. Analyze the potential susceptibility to and severity of injury or illness if engaging in unhealthy behaviors. Examples: possible consequences of driving under the influence, distracted driving, not taking required medications a. Explain the progression of HIV and AIDS. b. Explain the progression of Type II diabetes.

Anchor Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

Analyzing Influences	<p>HE.2.1 Analyze the influence of external factors on health beliefs and behaviors.</p> <p>a. Analyze how family, culture, school, and community influence the health practice and behaviors of individuals. Examples: explaining how holiday celebrations and traditions such as over indulgence in eating and consuming alcohol affect health behaviors; explaining how extra-curricular activities and schedules result in over-consumption of fast food</p> <p>b. Examine how peers influence healthy and unhealthy behaviors.</p> <p>c. Critique the effect of media on personal and family health. Example: influence of media on teen body image, sexual activity, drugs, alcohol, violence, cyber-bullying</p> <p>d. Cite evidence of how public health policies and government regulations can influence health promotion and disease prevention.</p>
	<p>HE.2.2 Describe the pros and cons of the use of technology as it affects personal, family, and community health. Examples: positive and negative influences on self-esteem, addiction to technology, personal interactions and relationships</p>
	<p>HE.2.3 Analyze how the perceptions of norms influence healthy and unhealthy behaviors. Examples: addressing topics such as wearing safety equipment, teen pregnancy, drug abuse, suicide, cyber-bullying, weight management, potentially dangerous social media trends</p>
	<p>HE.2.4 Critique the influence of personal values and beliefs on individual health practices and behaviors.</p>
	<p>HE.2.5 Analyze how some health risk behaviors can influence the likelihood of engaging in unhealthy behaviors. Examples: assessing the effects of driving under the influence, drinking alcohol which can lead to poor choices such as sexual behavior, poor nutrition, sedentary lifestyle</p>

<i>Anchor Standard 3: Students will demonstrate the ability to access valid information, products, and services to enhance health.</i>	
Access to Information/Products/ Services	HE.3.1 Evaluate the accessibility and validity of health information, products, and services. Example: determining the credibility of resources both online and offline
	HE.3.2 Analyze valid resources from home, school, and community that provide health information. Examples: websites, phone apps, media ads; rape, crisis, and suicide centers
	HE.3.3 Explain laws relating to child pornography, age of consent, and sexual exploitation. Examples: information concerning the laws prohibiting sexual abuse; the need to report sexual abuse and legal options available to victims; laws relating to sexting and child pornography
	HE.3.4 Explain current laws related to underage drinking, distracted driving, and driving under the influence.
	HE.3.5 Identify the necessity to seek help for mental and emotional health problems Examples: mood disorders, depression, anxiety and suicidal ideation; a. Locate information on how to cope with and rebuff unwanted physical and verbal exploitation by other persons.
<i>Anchor Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.</i>	
Interpersonal Communication	HE.4.1 Describe skills for communicating effectively with family, peers, and others to enhance health. Examples: active listening, friendliness, confidence, positive feedback, empathy, respect, understanding nonverbal cues, responsiveness
	HE.4.2 Demonstrate refusal, negotiation, and collaboration skills to enhance health and avoid or reduce health risks.
	HE.4.3 Develop strategies to prevent, manage, or resolve interpersonal conflicts without harming self or others. a. Identify warning signs of unhealthy relationships. b. Differentiate between negative and positive behaviors used in conflict situations.
	HE.4.4 Demonstrate how to ask for and offer assistance to enhance the health of self and others. Examples: accessing crisis hotlines for suicide, sexual and physical abuse, and human trafficking; community resource materials

<i>Anchor Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.</i>	
Decision-Making	HE.5.1 Examine barriers that can hinder healthy decision-making. Examples: peer pressure, cultural pressures, socio-economic status
	HE.5.2 Develop a thoughtful decision-making process in health-related situations. a. Predict the potential short-term and long-term impact of various alternatives on self and others. b. Identify warning signs of suicide in self and others and discuss effective coping skills. c. Demonstrate refusal skills and explain when to use them in high risk situations. Examples: Saying no to sex, alcohol, and other drugs
	HE.5.3. Justify the appropriateness of individual vs. collaborative decision-making in various situations. Example: explaining when input from a health professional, counselor, or trusted adult would be helpful
	HE.5.4 Analyze the benefits of practicing sexual abstinence. a. Identify the types, symptoms, and risks of sexually transmitted diseases (STDs). b. Assess the consequences of teen pregnancy.
	HE.5.5 Recommend personal strategies to avoid violence or criminal activities.
<i>Anchor Standard 6: Students will demonstrate the ability to use goal-setting skills to enhance health.</i>	
Goal-Setting	HE.6.1 Assess personal health status and health practices to establish a baseline for setting health and fitness goals. Examples: blood pressure, resting heart rate, BMI, vaccination status
	HE.6.2 Set long-term goals for achieving optimal health and implement short-term steps to reach the goals. Examples: assess current health and fitness status, develop plans based on assessment results, implement and monitor plans

Anchor Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

Self-Management	<p>HE.7.1 Analyze the role of individual responsibility for enhancing health.</p> <p>a. Describe healthy practices and behaviors that will maintain or improve the health of self and others. Examples: effective communication skills and safety techniques, reading and understanding medicine labels, immunizations, wellness checkups and compliance</p> <p>b. Identify negative behaviors that increase health risks to self and others. Examples: distracted driving, drinking and driving, illegal drug use, vaping, smoking, unprotected sex, behaviors resulting in intentional or unintentional injuries, poor eating habits, physical inactivity</p> <p>c. Compare and contrast the responsibilities of both parents in teen parenting. Examples: shared responsibilities; social, financial and educational challenges</p>
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Anchor Standard 8: Students will demonstrate the ability to advocate for personal, family, and community health.

Advocacy	<p>HE.8.1 Utilize accurate peer and societal norms to formulate a health enhancing message. Example: using data on local health issues to develop a positive message concerning a topic</p>
	<p>HE.8.2 Formulate and implement a list of innovative ways to influence and support others in making positive health choices. Examples: wearing colors for awareness, speaking to a group or individuals, making good nutritional choices</p>
	<p>HE.8.3 Work cooperatively as an advocate for improving personal and community health. Examples: student-led events, community fundraisers, national events, signing a pledge to abstain from alcohol</p>
	<p>HE.8.4 Adapt health messages and communication techniques to a specific target audience. Example: producing a social media post to encourage a positive health behavior</p>

HIGH SCHOOL HEALTH ELECTIVE COURSES OVERVIEW

After successfully completing the *Health Education* course required for graduation, two additional health electives may be taken by Grades 10-12 students. These electives are *Leaders in Health Advocacy*, which focuses on becoming advocates for health, and *World Health*, which focuses on learning about health on a global scale. These courses may introduce students to possible career paths in the health field and help them to become more informed and to be effective voices for improved health in society as a whole. Students may take either or both courses, in any order. ***Health Education* is the prerequisite for both elective courses.**

LEADERS IN HEALTH ADVOCACY OVERVIEW

Prerequisite: ½ Unit of *Health Education*

Leaders in Health Advocacy provides an opportunity for students in Grades 10-12 to become advocates for themselves, their peers, and society as a whole by engaging in activities that promote personal and community health. The class assists the school in meeting the state mandates of character education, Erin’s Law, HIV/AIDS requirements, and the Jason Flatt Act through peer helping and student-led planning of schoolwide awareness, education, and prevention activities.

The standards for the health advocacy course are designed to incorporate into locally-designed curriculum information about the following six priority adolescent risk behaviors identified by the Centers for Disease Control and Prevention (CDC) Youth Risk Behavior Survey (YRBS):

- behaviors that contribute to unintentional injuries and violence
- sexual behaviors that contribute to unintended pregnancy and sexually transmitted infections
- alcohol, tobacco, and other drug use
- vaping
- unhealthy dietary behaviors
- inadequate physical activity

Based upon a model of student-led prevention of adolescent risk behaviors, this elective class provides students with opportunities to engage in positive youth development through peer helping, leading focus groups, and planning awareness activities, health fairs, community service projects, and local events aligned with national health observances.

LEADERS IN HEALTH ADVOCACY STANDARDS

<i>Anchor Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.</i>	
Health Promotion	<p>HA.1.1 Research national, state and local data from the Centers for Disease Control and Prevention and the Youth Risk Behavior Survey for prioritizing prevention activities for the school and community.</p> <ol style="list-style-type: none"> a. Interpret the Youth Risk Behavior Survey data on the six priority adolescent risk behaviors. b. Recognize the adolescent risk behaviors of high incidence among Alabama’s students.
<i>Anchor Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.</i>	
Influences	<p>HA.2.1 Analyze how health risk behaviors in the local school and community are influenced by family, peers and other factors. Examples: availability of alcohol and drugs; trends in adolescent sexual behavior; availability of fast food; access to fitness and recreational facilities</p>
<i>Anchor Standard 3: Students will demonstrate the ability to access valid information, products, and services to enhance health.</i>	
Access to Information	<p>HA.3.1 Gather information and interpret data for planning prevention activities.</p> <ol style="list-style-type: none"> a. Identify concerns, beliefs, and areas of misinformation among peers. b. Design program goals based on addressing misinformation, beliefs, and concerns among peers. c. Utilize a focus group to change their school climate

<i>Anchor Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.</i>	
Interpersonal Communication	<p>HA.4.1 Execute communication and leadership skills to empower other students to be physically, socially, behaviorally, emotionally, and intellectually successful.</p> <ol style="list-style-type: none"> a. Examine the varied roles and responsibilities of student leaders. b. Design program goals based on YRBS data and focus group results. c. Research various leadership and peer training programs and opportunities. d. Apply peer helping training skills in assigned schools settings. c. Demonstrate leadership skills by advocating for health-related changes in the school or community.
<i>Anchor Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.</i>	
Decision-Making	<p>HA.5.1 Identify decision-making skills used in situations that put adolescents and teens at risk. Examples: recording a fight and posting it on a social media; seeing a friend smoking marijuana or drinking alcohol; hearing a friend talk about shoplifting; hearing plans about a weekend party that will include drugs and/or alcohol; pressure to have sexual relations</p> <ol style="list-style-type: none"> a. Identify consequences of making poor decisions to join in or ignore risky situations. b. Recognize the differences between situations in which one has control vs. a lack of control. c. Review the importance of successfully managing decision-making skills when confronted with uncomfortable, risky, or dangerous situations. <p>HA.5.2 Develop and implement a school-wide plan or campaign to encourage good decision-making skills.</p>

<i>Anchor Standard 6: Students will demonstrate the ability to use goal-setting skills to enhance health.</i>	
Goal-Setting	<p>HA.6.1 Conduct a school-wide survey to assess the use of personal health practices.</p> <p>HA 6.2 Compile survey results to develop a school-wide campaign to advocate the use of beneficial personal health practices.</p> <p>HA 6.3 Implement strategies to address weak areas and critical needs based on survey results.</p>
<i>Anchor Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.</i>	
Self-Management	<p>HA.7.1 Analyze the role of individual responsibility for enhancing health.</p> <p>HA.7.2 Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and peers.</p> <p>HA.7.3 Identify a variety of behaviors to avoid or reduce health risks to self and others.</p> <p style="padding-left: 20px;">a. Plan a school or community campaign designed to encourage health-enhancing behaviors.</p>
<i>Anchor Standard 8: Students will demonstrate the ability to advocate for personal, family, and community health.</i>	
Advocacy	<p>HA.8.1 Use school-wide survey data to develop positive messages concerning health topics, including exercise, adequate sleep, and healthy eating.</p> <p>HA.8.2 Lead or participate in community-wide health-related events. Examples: Relay for Life, 5K run, Longest Day activities (Alzheimer’s Association)</p> <p>HA 8.3 Communicate to peer or community groups on health-related topics.</p>

WORLD HEALTH OVERVIEW

World Health is an introduction to the important health challenges facing the world of global health: the burden of disease, health care cost-effectiveness, and health-care systems. The standards allow students in Grades 10-12 to gain knowledge of interventions to improve global health, identify available resources for world-wide health issues, examine the effects of technology on health, and explore ways to manage pandemic diseases. The course will incorporate public health, economics, health management, and sociology as related to global health.

WORLD HEALTH STANDARDS

Prerequisite: ½ Unit of Health Education

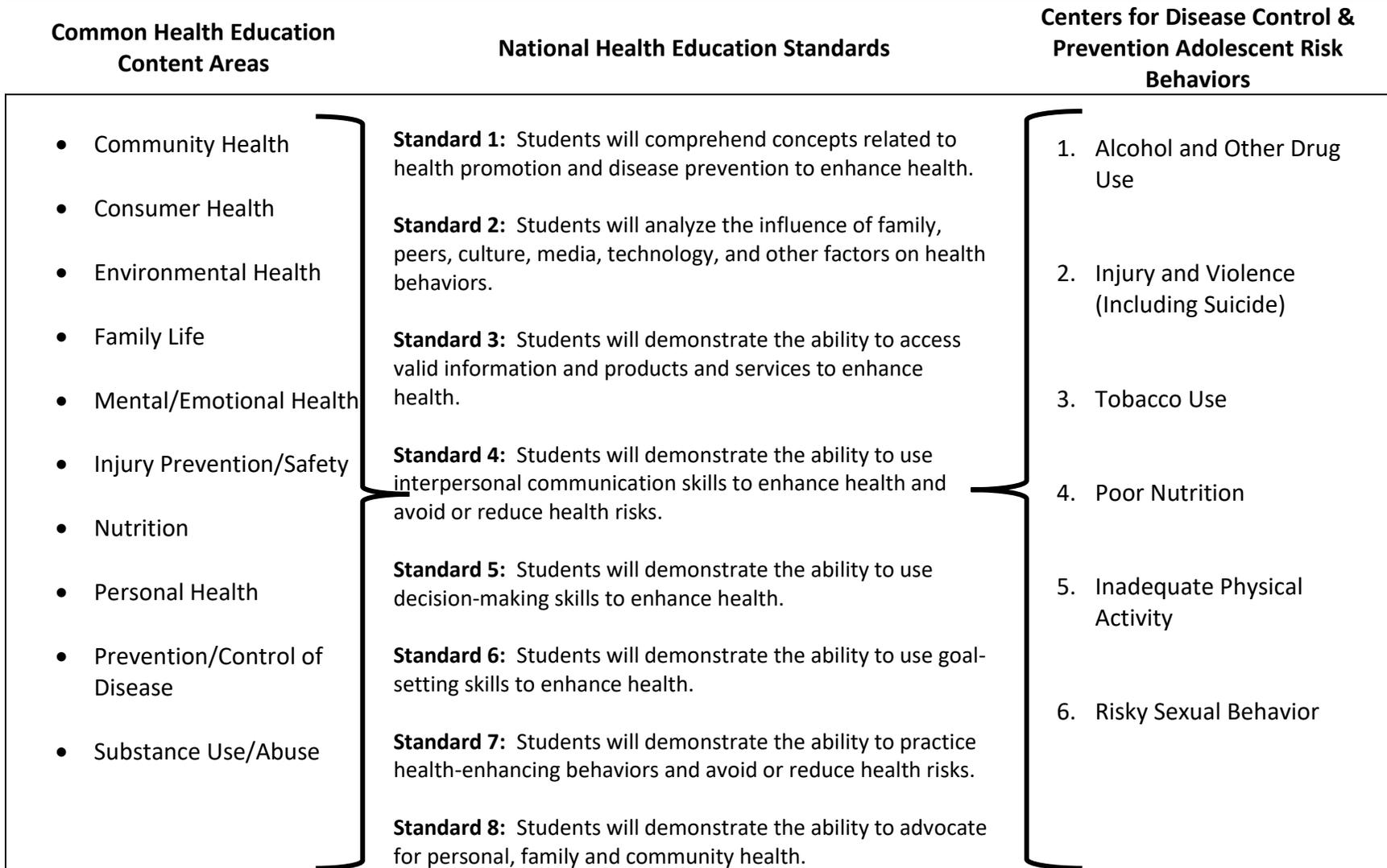
Each content standard completes the sentence stem *Students can...*

<i>Anchor Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health</i>	
Health Promotion	<p>WH.1.1 Research the history of disease in the world.</p> <ul style="list-style-type: none"> a. Identify causes of major outbreaks and epidemics in the history of the world. b. List major breakthroughs in the prevention and cure of disease. c. Assess the effects of current health issues on world populations.
<i>Anchor Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.</i>	
Analyzing Influences	<p>WH.2.1 Examine the health challenges facing the world today.</p> <ul style="list-style-type: none"> a. Collect statistical data about health issues within various countries. b. Investigate the influence of family, peers, and culture on possible solutions to world health issues. c. Examine the links among health, economic development, media, and technology. d. Research how disparities in socio-economic status can adversely affect health and access to health care globally. e. Analyze the roles and responsibilities of government and non-governmental organizations in achieving global health.
<i>Anchor Standard 3: Students will demonstrate the ability to access valid information, products, and services to enhance health.</i>	
Access to Information, Products, and Services	<p>WH.3.1 Critique health intervention programs worldwide.</p> <ul style="list-style-type: none"> a. Examine possible solutions to world health issues through available intervention programs.

<i>Anchor Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.</i>	
Interpersonal Communication	<p>WH.4.1 Communicate with professionals who support world health to learn about the roles and responsibilities of their jobs.</p> <p>WH.4.2 Research the effectiveness of communicating prevention and management strategies to resolve world health issues. Examples: HIV/AIDS, mental health, substance abuse, obesity, physical activity, nutrition, hunger</p>
<i>Anchor Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.</i>	
Decision- Making	<p>WH.5.1 Evaluate alternatives to current world health programs and practices.</p> <p>WH.5.2 Examine barriers that hinder decision-making skills related to world health issues. Examples: politics, religious beliefs, culture</p> <p>WH.5.3 Predict the potential short- and long-term impacts of poor decision-making on world health issues. Examples: rising cost of medical care</p>
<i>Anchor Standard 6: Students will demonstrate the ability to use goal-setting skills to enhance health.</i>	
Goal-Setting	<p>WH.6.1 Research the needs, strengths, and risks of long-term goals for addressing world health issues.</p>

<i>Anchor Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.</i>	
Self-Management	<p>WH.7.1 Analyze individual responsibility for enhancing global health. Example: explaining how individual actions can help or hinder the eradication of communicable diseases</p> <p>WH.7.2 Compare healthy practices and behaviors of people from various world-wide locations. Examples: immunizations, wellness checkups</p>
<i>Anchor Standard 8: Students will demonstrate the ability to advocate for personal, family, and community health.</i>	
Advocacy	<p>WH.8.1 Formulate innovative ways to influence and support people in other countries in making positive health choices.</p> <p>WH.8.2 Work cooperatively as an advocate for improving world-wide health. Examples: participating in international events such as Earth Day and World AIDS Day</p> <p>WH.8.3 Adapt health messages and communication techniques to a specific global audience.</p>

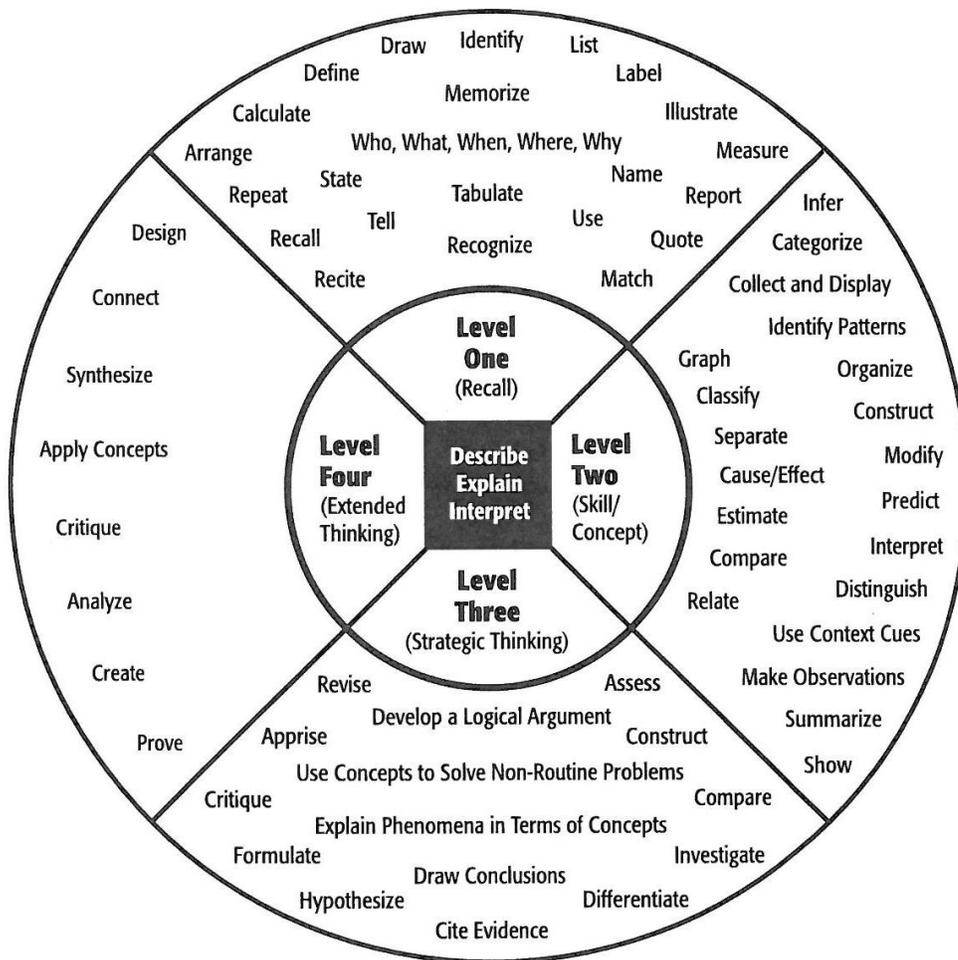
Appendix A Relationship of Common Health Education Areas



The relationship of common health education content and CDC Adolescent Risk Behaviors to the National Health Education Standards.

Source: *National Health Education Standards Achieving Excellence* by Joint Committee on National Health Education Standards [American Cancer Society, 2002] Second edition

Appendix B Depth of Knowledge (DOK) Levels



Level One Activities	Level Two Activities	Level Three Activities	Level Four Activities
Recall elements and details of story structure, such as sequence of events, character, plot and setting.	Identify and summarize the major events in a narrative.	Support ideas with details and examples.	Conduct a project that requires specifying a problem, designing and conducting an experiment, analyzing its data, and reporting results/solutions.
Conduct basic mathematical calculations.	Use context cues to identify the meaning of unfamiliar words.	Use voice appropriate to the purpose and audience.	Apply mathematical model to illuminate a problem or situation.
Label locations on a map.	Solve routine multiple-step problems.	Identify research questions and design investigations for a scientific problem.	Analyze and synthesize information from multiple sources.
Represent in words or diagrams a scientific concept or relationship.	Describe the cause/effect of a particular event.	Develop a scientific model for a complex situation.	Describe and illustrate how common themes are found across texts from different cultures.
Perform routine procedures like measuring length or using punctuation marks correctly.	Identify patterns in events or behavior.	Determine the author's purpose and describe how it affects the interpretation of a reading selection.	Design a mathematical model to inform and solve a practical or abstract situation.
Describe the features of a place or people.	Formulate a routine problem given data and conditions.	Apply a concept in other contexts.	
	Organize, represent and interpret data.		

Webb, Norman L. and others. "Web Alignment Tool" 24 July 2005. Wisconsin Center of Educational Research. University of Wisconsin-Madison. 2 Feb. 2006. <<http://www.wcer.wisc.edu/WAT/index.aspx>>

Appendix C Literacy Standards

LITERACY STANDARDS FOR GRADES 6-12: HISTORY/SOCIAL STUDIES, SCIENCE, AND TECHNICAL SUBJECTS

College and Career Readiness Anchor Standards for Reading

The Grades 6-12 standards on the following pages define what students should understand and be able to do by the end of each grade span. They correspond to the College and Career Readiness (CCR) anchor standards below by number. The CCR and grade-specific standards are necessary complements—the former providing broad standards, the latter providing additional specificity—that together define the skills and understandings that all students must demonstrate.

Key Ideas and Details

1. Read closely to determine what the text says explicitly and to make logical inferences from it; cite specific textual evidence when writing or speaking to support conclusions drawn from the text.
2. Determine central ideas or themes of a text and analyze their development; summarize the key supporting details and ideas.
3. Analyze how and why individuals, events, or ideas develop and interact over the course of a text.

Craft and Structure

1. Interpret words and phrases as they are used in a text, including determining technical, connotative, and figurative meanings, and analyze how specific word choices shape meaning or tone.
2. Analyze the structure of texts, including how specific sentences, paragraphs, and larger portions of the text (e.g., a section, chapter, scene, or stanza) relate to each other and the whole.
3. Assess how point of view or purpose shapes the content and style of a text.

Integration of Knowledge and Ideas

1. Integrate and evaluate content presented in diverse formats and media, including visually and quantitatively, as well as in words. *
2. Delineate and evaluate the argument and specific claims in a text, including the validity of the reasoning as well as the relevance and sufficiency of the evidence.
3. Analyze how two or more texts address similar themes or topics in order to build knowledge or to compare the approaches the authors take.

Range of Reading and Level of Text Complexity

Read and comprehend complex literary and informational texts independently and proficiently.

*See College and Career Readiness Anchor Standards for Writing, “Research to Build and Present Knowledge,” on page 60 for additional standards relevant to gathering, assessing, and applying information from print and digital sources.

Reading Standards for Literacy in History/Social Studies 6-12

The standards below begin at Grade 6; standards for K-5 reading in history/social studies, science, and technical subjects are integrated into the K-5 Reading standards. The CCR anchor standards and high school standards in literacy work in tandem to define college and career readiness expectations—the former providing broad standards, the latter providing additional specificity.

Grades 6-8 Students:	Grades 9-10 Students:	Grades 11-12 Students:
Key Ideas and Details		
1 Cite specific textual evidence to support analysis of primary and secondary sources.	1 Cite specific textual evidence to support analysis of primary and secondary sources, attending to such features as the date and origin of the information.	1 Cite specific textual evidence to support analysis of primary and secondary sources, connecting insights gained from specific details to an understanding of the text as a whole.
2 Determine the central ideas or information of a primary or secondary source; provide an accurate summary of the source distinct from prior knowledge or opinions.	2 Determine the central ideas or information of a primary or secondary source; provide an accurate summary of how key events or ideas develop over the course of the text.	2 Determine the central ideas or information of a primary or secondary source; provide an accurate summary that makes clear the relationships among the key details and ideas.
3 Identify key steps in a text’s description of a process related to history/social studies (e.g., how a bill becomes law, how interest rates are raised or lowered).	3 Analyze in detail a series of events described in a text; determine whether earlier events caused later ones or simply preceded them.	3 Evaluate various explanations for actions or events and determine which explanation best accords with textual evidence, acknowledging where the text leaves matters uncertain.
Craft and Structure		
4 Determine the meaning of words and phrases as they are used in a text, including vocabulary specific to domains related to history/social studies.	4 Determine the meaning of words and phrases as they are used in a text, including vocabulary describing political, social, or economic aspects of history/social studies.	4 Determine the meaning of words and phrases as they are used in a text, including analyzing how an author uses and refines the meaning of a key term over the course of a text (e.g., how Madison defines <i>faction</i> in <i>Federalist</i> No. 10).
5 Describe how a text presents information (e.g., sequentially, comparatively, causally).	5 Analyze how a text uses structure to emphasize key points or advance an explanation or analysis.	5 Analyze in detail how a complex primary source is structured, including how key sentences, paragraphs, and larger portions of the text contribute to the whole.
6 Identify aspects of a text that reveal an author’s point of view or purpose (e.g., loaded language, inclusion or avoidance of particular facts).	6 Compare the point of view of two or more authors for how they treat the same or similar topics, including which details they include and emphasize in their respective accounts.	6 Evaluate authors’ differing points of view on the same historical event or issue by assessing the authors’ claims, reasoning, and evidence.

Integration of Knowledge and Ideas

7. Integrate visual information (e.g., in charts, graphs, photographs, videos, or maps) with other information in print and digital texts.	7. Integrate visual information (e.g., in charts).	7. Integrate and evaluate multiple sources of information presented in diverse formats and media (e.g., visually, quantitatively, as well as in words) in order to address a question or solve a problem.
8. Distinguish among fact, opinion, and reasoned judgment in a text.	8. Assess the extent to which the reasoning and evidence in a text support the author's claims.	8. Evaluate an author's premises, claims, and evidence by corroborating or challenging them with other information.
9. Analyze the relationship between a primary and secondary source on the same topic.	9. Compare and contrast treatments of the same topic in several primary and secondary sources.	9. Integrate information from diverse sources, both primary and secondary, into a coherent understanding of an idea or event, noting discrepancies among sources.

Range of Reading and Level of Text Complexity

1 0. By the end of Grade 8, read and comprehend history/social studies texts in the Grades 6-8 text complexity band independently and proficiently.	1 0. By the end of Grade 10, read and comprehend history/social studies texts in the Grades 9-10 text complexity band independently and proficiently.	1 0. By the end of Grade 12, read and comprehend history/social studies texts in the Grades 11-CCR text complexity band independently and proficiently.
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Reading Standards for Literacy in Science and Technical Subjects 6-12

Grades 6-8 Students:

Grades 9-10 Students:

Grades 11-12 Students:

Key Ideas and Details

- | | | |
|---|--|---|
| 1. Cite specific textual evidence to support analysis of science and technical texts. | 1. Cite specific textual evidence to support analysis of science and technical texts, attending to the precise details of explanations or descriptions. | 1. Cite specific textual evidence to support analysis of science and technical texts, attending to important distinctions the author makes and to any gaps or inconsistencies in the account. |
| 2. Determine the central ideas or conclusions of a text; provide an accurate summary of the text distinct from prior knowledge or opinions. | 2. Determine the central ideas or conclusions of a text; trace the text's explanation or depiction of a complex process, phenomenon, or concept; provide an accurate summary of the text. | 2. Determine the central ideas or conclusions of a text; summarize complex concepts, processes, or information presented in a text by paraphrasing them in simpler but still accurate terms. |
| 3. Follow precisely a multistep procedure when carrying out experiments, taking measurements, or performing technical tasks. | 3. Follow precisely a multistep procedure when carrying out experiments, taking measurements, or performing technical tasks, attending to special cases or exceptions defined in the text. | 3. Follow precisely a multistep procedure when carrying out experiments, taking measurements, or performing technical tasks; analyze the specific results based on explanations in the text. |

Craft and Structure

- | | | |
|---|--|---|
| 4. Determine the meaning of symbols, key terms, and other domain-specific words and phrases as they are used in a specific scientific or technical context relevant to <i>Grades 6-8 texts and topics</i> . | 4. Determine the meaning of symbols, key terms, and other domain-specific words and phrases as they are used in a specific scientific or technical context relevant to <i>Grades 9-10 texts and topics</i> . | 4. Determine the meaning of symbols, key terms, and other domain-specific words and phrases as they are used in a specific scientific or technical context relevant to <i>Grades 11-12 texts and topics</i> . |
| 5. Analyze the structure an author uses to organize a text, including how the major sections contribute to the whole and to an understanding of the topic. | 5. Analyze the structure of the relationships among concepts in a text, including relationships among key terms (e.g., <i>force, friction, reaction force, energy</i>). | 5. Analyze how the text structures information or ideas into categories or hierarchies, demonstrating understanding of the information or ideas. |
| 6. Analyze the author's purpose in providing an explanation, describing a procedure, or discussing an experiment in a text. | 6. Analyze the author's purpose in providing an explanation, describing a procedure, or discussing an experiment in a text, defining the question the author seeks to address. | 6. Analyze the author's purpose in providing an explanation, describing a procedure, or discussing an experiment in a text, identifying important issues that remain unresolved. |

Integration of Knowledge and Ideas

- | | | |
|--|---|--|
| 7. Integrate quantitative or technical information expressed in words in a text with a version of that information expressed visually (e.g., in a flowchart, diagram, model, graph, or table). | 7. Translate quantitative or technical information expressed in words in a text into visual form (e.g., a table or chart) and translate information expressed visually or mathematically (e.g., in an equation) into words. | 7. Integrate and evaluate multiple sources of information presented in diverse formats and media (e.g., quantitative data, video, multimedia) in order to address a question or solve a problem. |
| 8. Distinguish among facts, reasoned judgment based on research findings, and speculation in a text. | 8. Assess the extent to which the reasoning and evidence in a text support the author's claim or a | 8. Evaluate the hypotheses, data, analysis, and conclusions in a science or technical text, verifying the data when possible and |

	recommendation for solving a scientific or technical problem.	corroborating or challenging conclusions with other sources of information.
9.	Compare and contrast the information gained from experiments, simulations, video, or multimedia sources with that gained from reading a text on the same topic.	9. Compare and contrast findings presented in a text to those from other sources (including their own experiments), noting when the findings support or contradict previous explanations or accounts.
		9. Synthesize information from a range of sources (e.g., texts, experiments, simulations) into a coherent understanding of a process, phenomenon, or concept, resolving conflicting information when possible.

Range of Reading and Level of Text Complexity

1	By the end of Grade 8, read and comprehend science/technical texts in the Grades 6-8 text complexity band independently and proficiently.	1	By the end of Grade 10, read and comprehend science/technical texts in the Grades 9-10 text complexity band independently and proficiently.	1	By the end of Grade 12, read and comprehend science/technical texts in the Grades 11-CCR text complexity band independently and proficiently.
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College and Career Readiness Anchor Standards for Writing

The Grades 6-12 standards on the following pages define what students should understand and be able to do by the end of each grade span. They correspond to the College and Career Readiness (CCR) anchor standards below by number. The CCR and grade-specific standards are necessary complements—the former providing broad standards, the latter providing additional specificity—that together define the skills and understandings that all students must demonstrate.

Text Types and Purposes*

1. Write arguments to support claims in an analysis of substantive topics or texts using valid reasoning and relevant and sufficient evidence.
2. Write informative/explanatory texts to examine and convey complex ideas and information clearly and accurately through the effective selection, organization, and analysis of content.
3. Write narratives to develop real or imagined experiences or events using effective technique, well-chosen details, and well-structured event sequences.

Production and Distribution of Writing

1. Produce clear and coherent writing in which the development, organization, and style are appropriate to task, purpose, and audience.
2. Develop and strengthen writing as needed by planning, revising, editing, rewriting, or trying a new approach.
3. Use technology, including the Internet, to produce and publish writing and to interact and collaborate with others.

Research to Build and Present Knowledge

1. Conduct short as well as more sustained research projects based on focused questions, demonstrating understanding of the subject under investigation.
2. Gather relevant information from multiple print and digital sources, assess the credibility and accuracy of each source, and integrate the information while avoiding plagiarism.
3. Draw evidence from literary or informational texts to support analysis, reflection, and research.

Range of Writing

Write routinely over extended time frames (time for research, reflection, and revision) and shorter time frames (a single sitting or a day or two) for a range of tasks, purposes, and audiences.

Writing Standards for Literacy in History/Social Studies, Science, and Technical Subjects 6-12

The standards below begin at Grade 6; standards for K-5 writing in history/social studies, science, and technical subjects are integrated into the K-5 Writing standards. The CCR anchor standards and high school standards in literacy work in tandem to define college- and career-readiness expectations—the former providing broad standards, the latter providing additional specificity.

Grades 6-8 Students:	Grades 9-10 Students:	Grades 11-12 Students:
Text Types and Purposes		
<p>1. Write arguments focused on <i>discipline-specific content</i>.</p> <p>a. Introduce claim(s) about a topic or issue, acknowledge and distinguish the claim(s) from alternate or opposing claims, and organize the reasons and evidence logically.</p> <p>b. Support claim(s) with logical reasoning and relevant, accurate data and evidence that demonstrate an understanding of the topic or text, using credible sources.</p> <p>c. Use words, phrases, and clauses to create cohesion and clarify the relationships among claim(s), counterclaims, reasons, and evidence.</p> <p>d. Establish and maintain a formal style.</p> <p>e. Provide a concluding statement or section that follows from and supports the argument presented.</p>	<p>1. Write arguments focused on <i>discipline-specific content</i>.</p> <p>a. Introduce precise claim(s), distinguish the claim(s) from alternate or opposing claims, and create an organization that establishes clear relationships among the claim(s), counterclaims, reasons, and evidence.</p> <p>b. Develop claim(s) and counterclaims fairly, supplying data and evidence for each while pointing out the strengths and limitations of both claim(s) and counterclaims in a discipline-appropriate form and in a manner that anticipates the audience's knowledge level and concerns.</p> <p>c. Use words, phrases, and clauses to link the major sections of the text, create cohesion, and clarify the relationships between claim(s) and reasons, between reasons and evidence, and between claim(s) and counterclaims.</p> <p>d. Establish and maintain a formal style and objective tone while attending to the norms and conventions of the discipline in which they are writing.</p> <p>e. Provide a concluding statement or section that follows from or supports the argument presented.</p>	<p>1. Write arguments focused on <i>discipline-specific content</i>.</p> <p>a. Introduce precise, knowledgeable claim(s), establish the significance of the claim(s), distinguish the claim(s) from alternate or opposing claims, and create an organization that logically sequences the claim(s), counterclaims, reasons, and evidence.</p> <p>b. Develop claim(s) and counterclaims fairly and thoroughly, supplying the most relevant data and evidence for each while pointing out the strengths and limitations of both claim(s) and counterclaims in a discipline-appropriate form that anticipates the audience's knowledge level, concerns, values, and possible biases.</p> <p>c. Use words, phrases, and clauses as well as varied syntax to link the major sections of the text, create cohesion, and clarify the relationships between claim(s) and reasons, between reasons and evidence, and between claim(s) and counterclaims.</p> <p>d. Establish and maintain a formal style and objective tone while attending to the norms and conventions of the discipline in which they are writing.</p> <p>e. Provide a concluding statement or section that follows from or supports the argument presented.</p>

Writing Standards for Literacy in History/Social Studies, Science, and Technical Subjects 6-12 (Continued)

Grades 6-8 Students:	Grades 9-10 Students:	Grades 11-12 Students:
Text Types and Purposes (continued)		
<p>2. Write informative/explanatory texts, including the narration of historical events, scientific procedures/ experiments, or technical processes.</p> <p>a. Introduce a topic clearly, previewing what is to follow; organize ideas, concepts, and information into broader categories as appropriate to achieving purpose; include formatting (e.g., headings), graphics (e.g., charts, tables), and multimedia when useful to aiding comprehension.</p> <p>b. Develop the topic with relevant, well-chosen facts, definitions, concrete details, quotations, or other information and examples.</p> <p>c. Use appropriate and varied transitions to create cohesion and clarify the relationships among ideas and concepts.</p> <p>d. Use precise language and domain-specific vocabulary to inform about or explain the topic.</p> <p>e. Establish and maintain a formal style and objective tone.</p> <p>f. Provide a concluding statement or section that follows from and supports the information or explanation presented.</p>	<p>2. Write informative/explanatory texts, including the narration of historical events, scientific procedures/ experiments, or technical processes.</p> <p>a. Introduce a topic and organize ideas, concepts, and information to make important connections and distinctions; include formatting (e.g., headings), graphics (e.g., figures, tables), and multimedia when useful to aiding comprehension.</p> <p>b. Develop the topic with well-chosen, relevant, and sufficient facts, extended definitions, concrete details, quotations, or other information and examples appropriate to the audience’s knowledge of the topic.</p> <p>c. Use varied transitions and sentence structures to link the major sections of the text, create cohesion, and clarify the relationships among ideas and concepts.</p> <p>d. Use precise language and domain-specific vocabulary to manage the complexity of the topic and convey a style appropriate to the discipline and context as well as to the expertise of likely readers.</p> <p>e. Establish and maintain a formal style and objective tone while attending to the norms and conventions of the discipline in which they are writing.</p> <p>f. Provide a concluding statement or section that follows from and supports the information or explanation presented (e.g., articulating implications or the significance of the topic).</p>	<p>2. Write informative/explanatory texts, including the narration of historical events, scientific procedures/ experiments, or technical processes.</p> <p>a. Introduce a topic and organize complex ideas, concepts, and information so that each new element builds on that which precedes it to create a unified whole; include formatting (e.g., headings), graphics (e.g., figures, tables), and multimedia when useful to aiding comprehension.</p> <p>b. Develop the topic thoroughly by selecting the most significant and relevant facts, extended definitions, concrete details, quotations, or other information and examples appropriate to the audience’s knowledge of the topic.</p> <p>c. Use varied transitions and sentence structures to link the major sections of the text, create cohesion, and clarify the relationships among complex ideas and concepts.</p> <p>d. Use precise language, domain-specific vocabulary and techniques such as metaphor, simile, and analogy to manage the complexity of the topic; convey a knowledgeable stance in a style that responds to the discipline and context as well as to the expertise of likely readers.</p> <p>e. Provide a concluding statement or section that follows from and supports the information or explanation provided (e.g., articulating implications or the significance of the topic).</p>
<p>3. (See note; not applicable as a separate requirement)</p>	<p>3. (See note; not applicable as a separate requirement)</p>	<p>3. (See note; not applicable as a separate requirement)</p>

Note: Students’ narrative skills continue to grow in these grades. The Standards require that students be able to incorporate narrative elements effectively into arguments and informative/explanatory texts. In history/social studies, students must be able to incorporate narrative accounts into their analyses of individuals or events of historical import. In science and technical subjects, students must be able to write precise enough descriptions of the step-by-step procedures they use in their investigations or technical work so others can replicate them and (possibly) reach the same results.

Writing Standards for Literacy in History/Social Studies, Science, and Technical Subjects 6-12 (Continued)

Grades 6-8 Students:	Grades 9-10 Students:	Grades 11-12 Students:
Production and Distribution of Writing		
4. Produce clear and coherent writing in which the development, organization, and style are appropriate to task, purpose, and audience.	4. Produce clear and coherent writing in which the development, organization, and style are appropriate to task, purpose, and audience.	4. Produce clear and coherent writing in which the development, organization, and style are appropriate to task, purpose, and audience.
5. With some guidance and support from peers and adults, develop and strengthen writing as needed by planning, revising, editing, rewriting, or trying a new approach, focusing on how well purpose and audience have been addressed.	5. Develop and strengthen writing as needed by planning, revising, editing, rewriting, or trying a new approach, focusing on addressing what is most significant for a specific purpose and audience.	5. Develop and strengthen writing as needed by planning, revising, editing, rewriting, or trying a new approach, focusing on addressing what is most significant for a specific purpose and audience.
6. Use technology, including the Internet, to produce and publish writing and present the relationships between information and ideas clearly and efficiently.	6. Use technology, including the Internet, to produce, publish, and update individual or shared writing products, taking advantage of technology’s capacity to link to other information and to display information flexibly and dynamically.	6. Use technology, including the Internet, to produce, publish, and update individual or shared writing products in response to ongoing feedback, including new arguments or information.
Research to Build and Present Knowledge		
7. Conduct short research projects to answer a question (including a self-generated question), drawing on several sources and generating additional related, focused questions that allow for multiple avenues of exploration.	7. Conduct short as well as more sustained research projects to answer a question (including a self-generated question) or solve a problem; narrow or broaden the inquiry when appropriate; synthesize multiple sources on the subject, demonstrating understanding of the subject under investigation.	7. Conduct short as well as more sustained research projects to answer a question (including a self-generated question) or solve a problem; narrow or broaden the inquiry when appropriate; synthesize multiple sources on the subject, demonstrating understanding of the subject under investigation.
8. Gather relevant information from multiple print and digital sources, using search terms effectively; assess the credibility and accuracy of each source; and quote or paraphrase the data and conclusions of others while avoiding plagiarism and following a standard format for citation.	8. Gather relevant information from multiple authoritative print and digital sources, using advanced searches effectively; assess the usefulness of each source in answering the research question; integrate information into the text selectively to maintain the flow of ideas, avoiding plagiarism and following a standard format for citation.	8. Gather relevant information from multiple authoritative print and digital sources, using advanced searches effectively; assess the strengths and limitations of each source in terms of the specific task, purpose, and audience; integrate information into the text selectively to maintain the flow of ideas, avoiding plagiarism and overreliance on any one source and following a standard format for citation.
9. Draw evidence from informational texts to support analysis, reflection, and research.	9. Draw evidence from informational texts to support analysis, reflection, and research.	9. Draw evidence from informational texts to support analysis, reflection, and research.

Range of Writing

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| 10. Write routinely over extended time frames (time for reflection and revision) and shorter time frames (a single sitting or a day or two) for range of discipline-specific tasks, purposes, and audiences. | 1 Write routinely over extended time frames (time for reflection and revision) and shorter time frames (a single sitting or a day or two) for range of discipline-specific tasks, purposes, and audiences. | 1 Write routinely over extended time frames (time for reflection and revision) and shorter time frames (a single sitting or a day or two) for range of discipline-specific tasks, purposes, and audiences. |
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Resources

AIDS (Acquired Immune Deficiency Syndrome) - <https://www.cdc.gov/nchhstp/>

Alabama Champions for Healthy, Active Schools - <http://alabamapublichealth.gov/npa/alabama-champions-schools.html>

Alabama Department of Public Health - <http://alabamapublichealth.gov/>

Alabama Learning Exchange (ALEX) - <https://www.alex.state.al.us/>

Alabama State Alliance of Health, Physical Education, Recreation, and Dance (ASAHPERD) - <https://www.asahperd.org/>

Alabama State Nurses Association - <https://alabamanurses.org/>

Al-Anon and Alateen - www.al-anon.alateen.org

Alliance for Strong Families and Communities - www.alliance1.org

American Association for Health Education - <http://www.aahperd.org/AAHE/>

American Association of Anorexia Nervosa and Associated Disorders - www.anad.org

American Association of Poison Control Centers - <http://www.aapcc.org>

American Association of Suicidology - www.suicidology.org

American Burn Association - www.ameriburn.org

American Cancer Society - <https://www.cancer.org/>

American Dental Association - <http://ada.org>

American Diabetes Association - <http://www.diabetes.org/>

American Dietetic Association - <http://www.eatright.org>

American Foundation for Suicide Prevention - www.afsp.org

American Heart Association – www.heart.org

American Lung Association - <http://www.lung.org/>

American Psychological Association (APA) - www.apa.org

American Public Health Association - <http://www.apha.org>

American Red Cross - <http://www.redcross.org>

American Stroke Association - www.StrokeAssociation.org

Association for Supervision and Curriculum Development - <http://www.ascd.org/Default.aspx>

Better Business Bureau - www.bbb.org

Bicycle Helmet Safety Institute - www.bhsi.org

Boys and Girls Town - <https://www.girlsandboystown.org.za/>

Bullying - <https://www.cdc.gov/violenceprevention/youthviolence/bullyingresearch/index.html>

Center on Birth Defects and Developmental Disabilities - www.cdc.gov/ncbddd

Centers for Disease Control and Prevention (CDC) - <http://www.cdc.gov/>

Child Nutrition and WIC Reauthorization Act of 2004 - <https://www.govtrack.us/congress/bills/108/s2507>

Class Safety Plan (D.A.R.E.) - <https://dare.org/>

Crisis Text - <https://www.crisistextline.org/>

Cybersmart! Education (2018) - Retrieved from: <http://www.cybersmart.org>

GO ASK Alice! Columbia University's Health Question and Answer Internet Service - <http://www.goaskalice.columbia.edu>

Healthy People - <http://www.health.gov/healthypeople>

HHS (Health and Human Services) Pages for Kids, U. S. Dept. of Health and Human Services - <http://www.hhs.gov>

Kids Health - <http://www.kidshealth.org>

Kids Health – Choking - <https://kidshealth.org/en/kids/choking.html?WT.ac=ctg#cater>

Kids Health - Treatment for Sickness - <https://kidshealth.org/en/kids/ill-injure/#cater>

Mothers Against Drunk Driving - www.madd.org

My Fitness Pal - <https://www.myfitnesspal.com/>

MyPlate - <https://www.choosemyplate.gov/>

National Adoption Center - www.adopt.org

National Association for Self Esteem - www.self-esteem-nase.org

National Association of School Nurses - www.nasn.org

National Center for Homeless Education at SERVE Helpline - www.serve.org/nche -1-800-308-2145

National Council of Alcoholism and Drug Dependence - www.ncadd.org

National Federation of Families for Children’s Mental Health - www.ffcmh.org

National Health Council - www.nhcouncil.org

National Institute of Drug Abuse - www.nida.nih.gov

National Institutes of Health - <https://www.nih.gov/>

National Institute of Mental Health (NIMH) - www.nimh.nih.gov

National Sexual Assault Hotline (free) - www.rainn.org

National Suicide Prevention Lifeline - www.SuicidePreventionLifeline.org -1-800-273-8255

Nutrition - <https://www.nutrition.gov/>

Overeaters Anonymous - www.oa.org

Overweight and Obesity- www.cdc.gov/obesity

Safe Kids Worldwide - www.safekids.org

SAVE - Suicide Awareness Voices of Education <http://save.org>

SHAPE America (Society of Health and Physical Educators) - www.shapeamerica.org

Smokefree - www.smokefree.gov

United State Department of Agriculture - <https://www.usda.gov/>

United States Food and Drug Administration - www.fda.gov

Whole School, Whole Community, Whole Child - <https://www.cdc.gov/healthyyouth/wsc/>

World Health Organization (WHO) - <http://www.who.int>

Youth Risk Behavior Survey (YRBS) - <https://www.cdc.gov/features/yrbs/index.html>

Glossary

Abstinence - self-enforced restraint from indulging in bodily activities that are widely experienced as giving pleasure. Most frequently, the term refers to sexual abstinence or abstinence from alcohol, drugs, or food.

Acquired immunodeficiency syndrome (AIDS) - A chronic, potentially life-threatening condition caused by the human immunodeficiency virus (HIV). By damaging the immune system, HIV interferes with the body's ability to fight the organisms that cause disease.

Acute disease - Disease lasting for a short time but may begin rapidly and have intense symptoms. Acute diseases can be mild, severe, or even fatal.

Addiction - A primary, chronic disease of brain reward, motivation, memory and related circuitry. Dysfunction in these circuits leads to characteristic biological, psychological, social, and spiritual manifestations. This is reflected in an individual pathologically pursuing reward and/or relief by substance use and other behaviors.

Advocate - A person who publicly supports or recommends a particular cause or policy.

Age of consent - The ages below which a minor is considered to be legally incompetent to consent to sexual acts. Age of consent laws vary widely from jurisdiction to jurisdiction, though most jurisdictions set the age of consent in the range 14 to 18. Alabama statutory rape law is violated when an individual over age **18** (or **16** or older if the victim is at least 2 years younger than the offender) engages in sexual intercourse with a person over the age of **12** and under age **16**.

Anchor standard - Standards that contain the minimum required content to be taught and students must master to pass a course.

Automated external defibrillator (AED) - A portable electronic device that automatically diagnoses the life-threatening cardiac arrhythmias of ventricular fibrillation and pulseless ventricular tachycardia, and is able to treat them through defibrillation (the application of electricity) which stops the arrhythmia.

Body mass index (BMI) - A person's weight in kilograms (kg) divided by his or her height in meters squared. The National Institutes of Health (NIH) now defines normal weight, overweight, and obesity according to BMI rather than the traditional height/weight charts. Overweight is a BMI of 27.3 or more for women and 27.8 or more for men.

Bullying - Use of superior strength or influence to intimidate someone, typically to force him or her to do what one wants.

Centers for Disease Control and Prevention (CDC) - Primary federal agency responsible for protecting the health of residents of the United States through health promotion; prevention of disease, injury, and disability as well as preparedness for new health threats.

Chronic disease – A disease lasting three months or more, by the definition of the U.S. National Center for Health Statistics. Chronic diseases generally cannot be prevented by vaccines or cured by medication, nor do they just disappear.

Communicable disease – A disease that is spread from one person to another through a variety of ways that include contact with blood, bodily fluids, breathing in an airborne virus, or by being bitten by an insect.

Conflict resolution - The methods and processes involved in facilitating the peaceful ending of conflict without retribution.

Content standard - Statements that define what students should know and be able to do at the conclusion of a course or grade.

Cardio-Pulmonary Resuscitation (CPR) - A procedure to support and maintain breathing and circulation for a person who has stopped breathing (respiratory arrest) and/or whose heart has stopped (cardiac arrest).

Cyberbullying - The use of technology to harass, threaten, embarrass, or target another person. By definition, it occurs among young people. When an adult is involved, it may meet the definition of cyber-harassment or cyberstalking, a crime that can have legal consequences and involve jail time.

E-cigarette - A handheld electronic device that simulates the feeling of tobacco smoking. It works by heating a liquid to generate an aerosol, commonly called a “vapor,” that the user inhales.

Emotional health - An important part of overall health. People who are emotionally healthy are in control of their thoughts, feelings, and behaviors.

Empathy - The ability to understand and share the feelings of another.

Fallacy - A false or mistaken idea.

First aid - Initial care given to a sick or injured person until full medical treatment is available.

Harassment – Ongoing torment often known as bullying that creates an unpleasant or hostile situation by uninvited and unwelcome verbal or physical conduct.

Health literacy - Capacity of an individual to obtain, interpret, and understand basic health information and services, including the competence to use such information and services in health-enhancing ways.

Healthful living - Daily activities and competencies that demonstrate resilience and actions that enhance health, quality of life, disease prevention, and avoidance of risk behaviors that contribute to injury, illness, and premature death.

Health risk behaviors - Six priority health behaviors identified by the Centers for Disease Control, which are linked to the leading causes of illness and death among Americans. The six priority behaviors are behaviors that contribute to unintentional injuries and violence, sexual behaviors that lead to unwanted pregnancies or sexually transmitted diseases, alcohol or drug use, tobacco use, unhealthy dietary behaviors, and inadequate physical activity.

Health screenings - Medical and biometric tests that are offered to a group, or population, for the purpose of detecting or ruling out the presence of diseases, conditions, and general health risks.

Health promotion - The process of enabling people to increase control over and improve their health. It moves beyond a focus on individual behavior through a wide range of social and environmental interventions.

Human immunodeficiency virus (HIV) - The virus that can lead to acquired immunodeficiency syndrome, or AIDS, if not treated. HIV can be transmitted through unprotected sexual activity, contaminated needles, breast milk, and transmission from an infected mother to her baby at birth.

Human trafficking - The trade of humans for the purpose of forced labor, sexual slavery, or commercial sexual exploitation for the trafficker or others.

Ideation - The capacity for or act of forming or entertaining ideas.

Interpersonal communication - An exchange of information between two or more people to convey appropriate and effective verbal and nonverbal information; the expression of needs and ideas to develop and maintain healthy relationships.

Interrelationship – The way in which each of two or more things is related to the other or others.

Life skills - Abilities for adaptive and positive behavior that enable humans to deal effectively with the demands and challenges of life. Examples are communication, cooperation, decision making, handling criticism, and information technology.

Mental health - A person's condition with regard to their psychological and emotional well-being.

MyPlate - Current nutrition guide published by the United States Department of Agriculture Center for Nutrition Policy and Promotion that depicts a place setting with a plate and glass divided into five food groups. It replaced the USDA's MyPyramid guide on June 2, 2011, ending 19 years of USDA food pyramid diagrams. The five food groups are fruits, grains, protein, vegetables, and dairy.

Nonverbal communication - Communication that does not involve verbal communication but may include gestures, facial expressions, body language, and touch.

Obesity - A condition characterized by the excessive accumulation and storage of fat in the body.

Peer pressure (or social pressure) - The direct influence on people by peers, or the effect on an individual who gets encouraged to follow their peers by changing attitudes, values, or behaviors to conform to those of the influencing group or person.

Reliable - Consistently good in quality or performance; able to be trusted.

Refusal skills - Methods and strategies for saying “no” which can help to avoid situations a person doesn't want to be a part of, or prevent a recovering addict from relapsing.

Rest, Ice, Compression, and Elevation (RICE) - The RICE treatment is recommended by health professionals for the early treatment of bone injury or acute soft tissue injuries such as a sprain or strain.

Risky behaviors - Ill-advised practices and actions that are potentially detrimental to a person's health or general well-being.

Screen time - Time spent using a device such as a phone, computer, television, or games console.

Self-directed learners - Learner takes responsibility for their learning, choosing the content, resources, time, place, activities, and pace of their learning.

Sexting - Sending, receiving, or forwarding sexually explicit messages, photographs, or images, primarily between mobile phones, of oneself or other individuals to another person or group. The State of Alabama does not have a specific sexting statute. Teenagers caught sending or receiving explicit images of a minor, including images of themselves, could be prosecuted under the state's child pornography laws, obscenity laws, or material harm to minors law.

Sexual health – A state of physical, emotional, mental and social well-being in relation to sexuality.

Sexually transmitted diseases (STDs) - Any diseases or infections that can be transmitted by direct sexual contact such as syphilis, gonorrhea, chlamydia, and genital herpes chiefly spread by sexual means. Others such as hepatitis B and AIDS are often contracted by nonsexual means.

Social health - The ability to form satisfying interpersonal relationships with others, to adapt comfortably to different social situations and act appropriately in a variety of settings.

Stress - A state of mental tension caused by problems in life, school, work, etc., that result in strong feelings of worry or anxiety which affect mental, emotional, physical tension, strain, or distress.

Valid - Legally sound, effective, or binding; having legal force; having a sound basis in logic or fact; reasonable or cogent.

Vape/Vaping - Inhale and exhale the vapor produced by an electronic cigarette or similar device.

Verbal communication - The use of sounds and words to express ideas and emotions.

Wellness - An active process of becoming aware of and making choices toward a healthy, fulfilling life.

Whole School, Whole Community, Whole Child (WSCC) model - An expansion and update of the Coordinated School Health (CSH) approach that focuses its attention on the child, emphasizes a school-wide approach, and acknowledges learning, health, and the school as being a part and reflection of the local community.

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