

Student Learning comes from:

10% - READ

20% - HEAR

30% - SEE

50% - SEE & HEAR

70% - DISCUSS

80% - EXPERIENCE

95% -TEACH SOMEONE ELSE

To this end, students in health education classes are given the opportunity to apply essential skills to reduce health risks and promote wellness. Students, therefore will:

- Use interpersonal communication skills to enhance the health of self and others.
- Demonstrate the ability to use goal setting and decision making skills to enhance health.
- Comprehend concepts related to health promotion and disease prevention.
- Evaluate the validity of health information and health promoting products and services.
- Demonstrate the ability to advocate for personal, family, and community wellness.
- Demonstrate the ability to practice health enhancing behaviors and reduce health risks.
- Analyze the influence of culture, media, technology, and other factors that affect health decisions and behaviors.
- Use teamwork and leaderships skills to enhance health of self and others.
- Understand the scientific base of health and use technology to access valid health information and services.
- Demonstrate how academic knowledge and skills are applied in family, community, workplace, and other settings.

Health Education is designed to help students gain the skills, knowledge, and attitudes necessary to remain safe and healthy throughout their lives. Health Education at Shenendehowa follows the NYS Navigate by the Stars curriculum. Students learn and practice essential skills in the context of realistic health related situations that are relevant to adolescents. Students will be able to apply these skills when faced with issues that impact their current and future health. In addition, Health Education provides multiple opportunities for students to read, write, and compute in the context of real-life situations. Health Education at Shenendehowa is taught over three grade levels: grade 6, 10 weeks; grade 8, 20 weeks; grade 11, 20 weeks.

Essential Content and Competencies

The Essential Content and Competencies “provide a detailed framework, which enables educators to develop or refine their health education curriculum, instruction, and assessment practices in ways that are aligned with district, state and national standards” (New York State Education Department/Student Support Services Network Health Education Curriculum and Assessment Leadership Team [NYSED/SSS], 2005). The Essential Content and Competencies, provide definition to the design process by connecting the New York State and National Health Education Standards for Learning and the related Performance Indicators to the Essential Student Question, ‘What health knowledge and skills do I need to know and be able to do to be safe, healthy, and achieve the NYS and National Standards’” (NYSED/SSS, 2005).

What Are Our Students Learning?

Health Education instills in individuals the skills and knowledge necessary to enhance health and wellness of self and others across the lifespan. Drawing on knowledge and health issues from the biological, environmental, psychological, social, physical, and mental sciences, students are given the opportunity to apply essential skills to reduce health risks and promote wellness.

At Shenendehowa, 6th – 12th grade Health Education is designed to help students gain the skills, knowledge, and attitudes necessary to remain safe and healthy throughout their lives, in the context of real-life situations. Health classes at Shenendehowa emphasize health-enhancing, skills-based learning including units in Communication and Relationship Management, Decision Making, Planning and Goal Setting, Stress Management, Advocacy, and Self-Management. Additionally, students will emerge from health classes with functional knowledge in the following content areas: Unintentional Injury Prevention; Violence Prevention; Family Life and Parenting; Tobacco; HIV/AIDS/STI; Alcohol and Other Drugs; and, Physical Activity and Nutrition.

Why Are Our Students Learning it?

Throughout the past two decades, comprehensive school health education for grades K-12 has been cited by numerous health organizations and governmental agencies as an important component for promoting the health of the nation’s children. In 2004, the Office of Disease Prevention and Health Promotion (ODPHP) established the increased application of comprehensive school health education as one of the nation’s major health goals for the year 2010.

For the first time in the history of the United States children are less healthy than their parents were when they were adolescents, and the 12- to 17-year old age group is the only group that has not seen improvements in mortality rates since 1960 (Curtis, 1992). Although there are fewer cases annually of traditional

childhood diseases, such as measles, mumps, and whooping cough, there have been significant increases in adolescent morbidity and mortality linked to health behaviors and choices (Berneson, Arbeit, Hunter, Johnson, & Nicklas, 1991; McGinnis, 1993; ODPHP 2004).

These choices and behaviors may result in motor vehicle accidents, suicide, acts of violence, cardiovascular disease, obesity, poor nutrition, lack of exercise, teen pregnancy, STD, tobacco use, and drug and alcohol use (Arbeit et al., 1992; Berenson et al., 1991; Kann, Collins, Pateman, Small, Ross, & Kolbe, 1995; McGinnis, 1993; ODPHP 2004).

In addition to the short-term consequences of poor health in childhood, there are many long-term consequences that must be considered. Experts investigating the origins of the two leading causes of premature mortality and morbidity among the adult population, cardiovascular disease and cancer, have identified links between adolescent behavior and adult onset of disease (Arbeit et al., 1992; Berenson et al., 1991; ODPHP 2004).

Finally, poor health also adversely affects children through its impact on overall academic achievement. Good nutrition, absence of medical illness, and stress management skills have been linked to academic achievement (Lavin, Shapiro, & Weill, 1992; McGinnis, 1993; Stroble, 1997). According to McGinnis (1993), “a child needs to be health in order to learn, and a child need to be well-educated in order to stay healthy” (p. 493).

How Can Our Students Use What They Learn in the Future?

Through their middle and high school level Health Education Classes, students will learn health-related functional knowledge, health-enhancing skills, and positive character traits that will enable them to live healthy, productive, and rewarding lives. The health education learning experiences, in alignment with the Profile of a Shenendehowa Graduate, prepare students to live their lives as Responsible Individuals, Self-Directed Lifelong Learners, Critical Thinkers, Involved Citizens, Effective Communicators, Cooperative Participants, Culturally Appreciative Persons, and Mathematically, Scientifically, and Technologically Competent People.

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