

PROPOSED NEW POLICY BP 5041: Health education

PURPOSE:

The Anchorage School Board recognizes that the delivery of comprehensive, effective, and age-appropriate K-12 health education in all District schools plays a critical role in supporting academic outcomes and reducing adolescent health risks.

The Board believes that all students should graduate with the knowledge and skills necessary to support a lifetime of health literacy and healthy behaviors. Graduates should be able to demonstrate comprehension of functional health knowledge—valid, reliable information and concepts that support health beliefs, skills, and behaviors as well as disease prevention—as well as observable health and safety practices. They should also be able to analyze determinants of health including the influence of family, peers, culture, social media, and technology; demonstrate health literacy through their ability to access valid and reliable health information, products and services; and demonstrate effective interpersonal communication, decision-making, and goal setting skills necessary to enhance their personal health.

To this end, health education provided by the Anchorage School District should entail comprehensive, effective, and age-appropriate experiences and opportunities for all students to acquire the information and skills needed to make lifelong health-enhancing and disease-preventing decisions.

DEFINITIONS:

The Board defines a comprehensive and effective health education program not as the piecemeal teaching of scientific facts and/or cautions against risky behaviors, but instead as a layered pedagogical approach—developed and reinforced throughout elementary and secondary learning experiences—which focuses on clear health goals and related behavioral outcomes; is research based and theory driven; addresses individual values, attitudes and beliefs; addresses individual and group norms that support health-enhancing behaviors; focuses on reinforcing protective factors; addresses social pressures and influences; builds personal competence, social competence, and self efficacy by addressing skills; provides functional health knowledge that is basic, accurate and directly contributes to health-promoting decisions and behaviors; uses strategies designed to personalize education and engage students; provides age-appropriate and developmentally-appropriate information learning strategies, teaching methods and materials; incorporates learning strategies, teaching methods and materials that are culturally inclusive; provides adequate time for instruction and learning; provides opportunities to reinforce skills and positive health behaviors; provides opportunities to make positive connections with influential others; and includes teacher information and plans for professional development and training that enhance effectiveness of instruction and student learning.

HEALTH EDUCATION

To the extent practicable, all schools will provide comprehensive, effective, and age-appropriate health education for all students, which shall be exclusive of physical education and available across the K-12 system.

Key components of a comprehensive health curriculum include the following:

- Injury Prevention & Personal Safety
- Functions of the Body
- Nutrition
- Community Health and Safety (Violence Prevention)
- Self-worth, Mental and Emotional health
- Growth and Development
- Substance Abuse Prevention
- Diseases and Illness Prevention
- Environmental and Consumer Health
- Physical Fitness

Health education will be closely coordinated with the overall school wellness program, especially physical education, so that students practice skills needed to adopt and maintain healthy behaviors throughout their lives.

The district will adopt a health education curriculum that aligns with the Alaska State Standards for Healthy Living for grades K-12, with grade level benchmarks. The information and skills embedded within the District's health education program shall address all requirements outlined by the State of Alaska, respond to all relevant Board policies, and reflect the functional health knowledge, beliefs, and skills necessary for students to adopt and maintain healthy behaviors, achieve health literacy, and enhance health and academic outcomes. The curriculum shall be reviewed in accordance with the regular curriculum review and adoption schedule of the district.

Students enrolled in a health education course shall be assessed based on health education standards. A written health education grade shall be reported for students according to the grading schedule of the district. Although exemption from health education is not permitted, parents may opt their student(s) out of particular lessons in accordance with applicable State statute(s) and district guidelines.

Elementary students will be provided at least 120 minutes, or two "special" blocks, of health education per month, unless school closure(s) due to weather and/or safety concerns render time for health instruction or a health "special" unfeasible.

At a minimum, 6th grade students enrolled in middle school shall be provided no less than one quarter of health education.

At a minimum, 8th grade students enrolled in middle school shall be provided one semester of health education.

To the extent practicable, health education shall be taught by a certified/endorsed health education teacher. Health education teachers shall receive annual professional development specific to health education content.