

COMMITTEE REPORT  
HOUSE

(11)

FURTHER:

3/3/84

Date: 4-5-1-84

The Committee on FINANCE has had CSRB 179 (R16)

"An Act relating to cardiopulmonary resuscitation (CPR) and early cancer detection instruction in the public schools."

under consideration and recommends:

do pass [ ] do not pass

[ ] do pass with attached amendments(s)

replace with <sup>4</sup>CS for CSRB 179 (1123) [  same title  
[ ] new title  
and recommends do pass

[ ] AND attaches a "Letter of Intent" [  New Fiscal Note  
[ ] reports it back without recommendation [  Zero Fiscal Note Attached

[ ] referred to the \_\_\_\_\_ Committee

MEMBERS SIGNING  
DO PASS

MEMBERS HAVING  
OTHER RECOMMENDATIONS:

[Signature]  
[Signature]  
[Signature]  
[Signature]  
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[Signature]  
CHAIRMAN

Offered: 3/8/84  
Referred: Finance

Original sponsors: Ziegler, Eliason  
and Ferguson

1 IN THE SENATE BY THE HEALTH, EDUCATION AND  
SOCIAL SERVICES COMMITTEE

2 HOUSE CS FOR CS FOR SENATE BILL NO. 129 (HESS)

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 THIRTEENTH LEGISLATURE - SECOND SESSION

5 A BILL

6 For an Act entitled: "An Act relating to cardiopulmonary resuscitation  
7 (CPR) and early cancer detection instruction in the  
8 public schools."

9 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

10 \* Section 1. AS 14.30.360(a) is amended to read:

11 (a) Each district in the state public school system shall be  
12 encouraged to initiate and conduct a program in health education for  
13 kindergarten through grade 12. The program should include instruction  
14 in physical health including alcohol and drug abuse education, cardio-  
15 pulmonary resuscitation (CPR), early cancer prevention and detection,  
16 dental health, family health, environmental health, and appropriate  
17 use of health services.

STATE OF ALASKA 1984 LEGISLATIVE SESSION  
FISCAL NOTE

Revision Date: \_\_\_\_\_

REQUEST

Bill/Resolution No.: HCSCSSB 129 (HES)  
 Title: CPR and cancer detection  
in the schools  
 Sponsor: Zeigler  
 Requestor: House Finance  
 Date of Request: 4/30/84

FISCAL DETAIL

Agency Affected: DHSS/DOE  
 Program Category Affected: \_\_\_\_\_  
 BRU, Program or Subprogram(s) Affected: \_\_\_\_\_

EXPENDITURES/REVENUES: (Thousands of Dollars)

	FY 84	FY 85	FY 86	FY 87	FY 88	FY 89
OPERATING						
100 PERSONAL SERVICES						
200 TRAVEL						
300 CONTRACTUAL						
400 SUPPLIES						
500 EQUIPMENT						
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS						
800 MISCELLANEOUS						
TOTAL OPERATING		----	0	0	0	0
CAPITAL						
REVENUE						

FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER						
TOTAL						

POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

~~SOURCE OF FUNDS TO OFFSET FISCAL IMPACT OF BILL~~

This bill does have fiscal impact in FY 85, however the funds necessary to implement the bill are provided for in SB 130 am. These funds are for CPR mannikens and film copying. No funds are necessary for the cancer detection portion of the legislation. There is no fiscal impact after FY 85.

ANALYSIS: Attach a separate page for analysis

Prepared By: Al Adams, Chair *ADA* Phone: 465-3706  
 Division: House Finance Committee Date: 4/30/84

Approved by Commissioner: \_\_\_\_\_ Date: \_\_\_\_\_  
 Agency: \_\_\_\_\_

Distribution (by Agency preparing fiscal note):

- Legislative Finance
- Legislative Sponsor
- Requestor
- Office of Management and Budget
- Impacted Agency(ies)

12/1/83

# Project CHOICE

## VOCABULARY

magnify  
scientist  
instrument  
microscope  
cell  
counselor  
check-up  
immunization  
abdomen  
vision  
booster shot  
enough  
excess

## STUDENT LEARNING OBJECTIVES

## KINDERGARTEN

1. The student names and locates various parts of the body.
2. The student names and locates various parts of the body.  
The student demonstrates the sense of interrelationship of the body parts.
3. The student identifies the smaller basic units of common items.
4. The student identifies the smallest basic unit of life as the cell.  
The student draws a picture of a single cell.
5. The student states that the body is made of many cells.  
The student draws a picture of cells together.
6. The student lists actions personally taken to maintain own health.  
The student discusses value of seeking help from other people for problems and concerns.  
The student identifies individuals in the community who help people stay healthy & safe.
7. The student names two ways the doctor can help people.  
The student names two things individuals must do to maintain own health.
8. The student draws a picture contrasting an example of "enough" and "too much".
9. The student predicts health consequences of certain excesses.  
The student defines excess as too much of something.
10. The student names ways to avoid the risk of excess for sun, smoking, diet, and safety.  
The student discusses how smoking is every individual's personal choice.

Project  
Choice

A Curriculum in Disease Prevention  
and Health Care Concepts  
1974 Curriculum Series  
Seattle, WA 98104

DRAFT

VOCABULARY

communicate  
prevent  
cure  
counselor  
preventative  
curative  
cell  
microscope  
disease  
cancer  
contagious  
non-contagious  
diet  
nutrition  
cycle

STUDENT LEARNING OBJECTIVES

FIRST GRADE

1. The student names three factors which help him or her feel good about self.
2. The student gives examples of how the body communicates its needs.  
The student identifies ways to meet the needs of the body.
3. The student defines terms prevent and cure.  
The student distinguishes between preventative and curative health care actions.
4. The student identifies persons who can help when one is ill, hurt, or concerned.  
The student cites some ways community health care providers both protect and cure individuals from health problems.  
The student identifies tools used by health helpers to care for individuals.
5. The student states that the body is made of many cells that work together.  
The student states that body cells have similarities and differences.
6. The student identifies cancer as a non-contagious disease.  
The student names over-exposure to the sun as a cause of skin cancer.  
The student gives examples of how to limit exposure to the sun.
7. The student generalizes about smoking and its connections to cancer.  
The student discusses how smoke affects other people around the smoker.  
The student discusses how smoking is every individual's personal choice.
8. The student generalizes how good nutrition is a preventative health measure.  
The student gives examples of healthy meals.
9. The student identifies three ways he or she protects own health.

PROJECT  
CHOICES

A Curriculum in Cancer Prevention  
and Healthier Choices for our Future  
11240 - 1/1988 - 1/1989  
© 1988 by NCI

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## VOCABULARY

disease  
cancer  
habit  
prevention  
cure  
diet  
nutrition  
respiratory system  
cilia  
air sacs

## STUDENT LEARNING OBJECTIVES

## SECOND GRADE

1. The student discusses feelings about people with cancer.  
The student defines cancer as diseases which develop from a variety of causes.  
The student states that certain personal habits may be linked to cancers.
2. The student defines habit as an automatically repeated behavior.  
The student explains how habits may affect health.  
The student distinguishes between healthy and unhealthy habits.
3. The student generalizes about the process of habit formation.  
The student generalizes about ways to change habits.
4. The student explains the difference between prevention and cure in health issues.  
The student names three preventative health behaviors that second graders can do.
5. The student states that too much fat in the diet may be unhealthy because of a palpable association with heart disease and certain cancers.  
The student identifies foods with high fat content.
6. The student identifies foods with high, low, and no-fat content.
7. The student names immediate and long-term effects of over-exposure to the sun, including cancer.  
The student names behaviors which can prevent over-exposure to the sun.
8. The student summarizes the work of the respiratory system in providing clean air to the body.
9. The student names immediate and long term effects of smoking including cancer.  
The student discusses how smoking is every individual's personal choice.
10. The student discusses body changes, both healthy and unhealthy.  
The student identifies cancer warning signals as unhealthy body changes.  
The student names three areas linked to cancer and tells one preventative behavior in each area.

project  
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A Curriculum in Cancer Prevention

From Materials on Cancer Research Centers

1124 ...

... ..

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## VOCABULARY

alternatives  
consequences  
unique  
differences  
similarities  
cell  
membrane  
nucleus  
cytoplasm  
oxygen  
carbon dioxide  
urea  
cancer  
normal  
abnormal  
carcinogen  
cilia  
alveoli  
respiratory system  
melanin  
skin type

## STUDENT LEARNING OBJECTIVES

## THIRD GRADE

1. The student names self as health decision-maker.  
The student examines alternatives and consequences related to smoking.
2. The student contrasts types of decisions made at different age levels, including health choices.  
The student illustrates own uniqueness by recording past choices and predicting future ones.
3. The student labels and explains the function of these parts of a cell: Membrane, cytoplasm, and nucleus.
4. The student builds a model of a cell and describes cell's basic functions.  
The student explains that cells use food, water, and oxygen then dispose of carbon dioxide and urea.
5. The student explains that normal cells divide to create growth for a complete body.
6. The student defines cancer as a group of diseases which have in common abnormal cell growth and behavior.
7. The student defines cilia and alveoli.  
The student explains the function of the respiratory system.  
The student concludes that smoking interferes with the respiratory system, and is linked to cancer.
8. The student states that too much fat in the diet is unhealthy because it is associated with heart disease and certain cancers.  
The student lists examples of high, low, and no-fat food groups.
9. The student describes the role of melanin.  
The student explains that excessive exposure to the sun may cause skin cancer.  
The student names preventative behaviors that may protect against over exposure to the sun.
10. The student lists behaviors that may prevent cancer.

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A Curriculum in Cancer Prevention  
From The Teacher Council on Cancer Prevention  
1124 O. Douglas Street  
Seattle, WA 98101

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VOCABULARY

risk  
 values  
 self-image  
 peers  
 peer pressure  
 consequences  
 normal  
 abnormal  
 cell  
 membrane  
 nucleus  
 cytoplasm  
 specialize  
 tissues  
 organs  
 systems  
 cancer  
 cancerous  
 carcinogen  
 cancer risk  
 esophagus  
 larynx  
 scientist  
 experiment  
 observation  
 hypothesis  
 research plan  
 conclusion  
 alternatives

STUDENT LEARNING OBJECTIVES

FOURTH GRADE

1. The student states that cancer risk is associated with personal decisions an individual makes in daily life.  
 The student identifies all individuals as unique.
2. The student explains that choices have consequences.  
 The student states that self-image and peer pressure affect health choices.
3. The student labels basic parts of a cell.  
 The student explains that cells reproduce by dividing.  
 The student explains how cells specialize and organize into tissues, organs, and systems.
4. The student summarizes normal cell behavior.  
 The student describes abnormal cell behavior.  
 The student states that cancers are diseases of abnormal cell growth.  
 The student defines carcinogen as an agent proven to cause cancerous cell growth.
5. The student describes how smoking can cause cancers of the lung, esophagus, larynx, and oral area (lips, tongue, etc.).  
 The student describes how excessive sun exposure can cause skin cancer.  
 The student describes that too many fatty foods in the diet may increase cancer risk.
6. The student identifies choices which would lower personal cancer risk in the areas of smoking, sun exposure, and daily diet.
7. The student gives examples of how scientific experiments affect own life.  
 The student describes and uses the scientific research method.
8. The student describes steps in decision-making.  
 The student identifies self-images, peer pressure, and advertising as three factors which can influence decisions.
9. The student examines a personal health decision for the basic steps of decision-making.

VOCABULARY

disease  
 capacity  
 cancer  
 scientist  
 community resources  
 cancer  
 cell  
 membrane  
 nucleus  
 cytoplasm  
 tissue  
 organ  
 systems  
 abnormal cell  
 tumor  
 benign  
 malignant  
 epidemiology  
 carcinogen  
 risk factor  
 melanin  
 melanocytes  
 fiber  
 respiratory system  
 trachea  
 epiglottis  
 capillaries  
 diaphragm  
 oxygen  
 bronchial tubes  
 alveoli  
 carbon dioxide  
 tar  
 oxygen  
 respiration  
 epidemiologist  
 trachea  
 pulse

STUDENT LEARNING OBJECTIVES

FIFTH GRADE

1. The student states that cancer is a disease not yet fully understood by scientists.  
 The student lists five community resources offering cancer information to the public.
2. The student explains the difference between normal and abnormal cells and their effects on the body.  
 The student defines cancer as many diseases of abnormal cell growth.  
 The student defines tumor, and states the difference between a benign and malignant tumor.
3. The student lists the following as cancer risk factors:  
 smoking, sun exposure, diet, and occupational exposure.  
 The student explains the function of melanin.  
 The student explains the relationship between sun exposure and skin cancer.  
 The student lists choices which would reduce risk of skin cancer.  
 The student identifies skin types according to cancer risk.
4. The student explains that a high-fat diet may increase risk for certain cancers.  
 The student identifies high fiber/low-fat diets as possible ways to reduce cancer risk.  
 The student identifies fat and fiber content of various foods.
5. The student describes the respiratory system and its parts.  
 The student traces the passages of air through the respiratory system.
6. The student describes the effect of smoking on the lungs.  
 The student states that smoking is linked to cancer.
7. The student demonstrates a smoking machine.  
 The student explains the effect of smoking on the respiratory and circulatory systems.
8. The student identifies choices which decrease risk of getting cancer.
9. The student defines early detection.  
 The student discusses eight cancer warning signals.  
 The student names three treatments for cancer.
10. The student lists ways to reduce cancer risk.  
 The student lists five sources of consumer information regarding health choices.

DRAFT

## VOCABULARY

cancer  
myth  
community resources  
cells  
nucleus  
cytoplasm  
membrane  
mutate  
mutation  
carcinomas  
lymphomas  
sarcoma  
localized  
metastasis  
leukemia  
lymph  
carcinogen  
cancer risk  
values  
alternatives  
consequences  
respiratory system  
epidemiology  
epidemiologist  
ethnic  
surgery  
radiotherapy  
chemotherapy  
early detection  
occupational hazards

## STUDENT LEARNING OBJECTIVES

## SIXTH GRADE

1. The student discusses the importance of cancer education.  
The student is able to name two cancer myths and provide the correct information.  
The student identifies five local resources which provide accurate cancer information and can assist in solving health problems.
2. The student defines cancer as many diseases of abnormal cell growth.  
The student lists ways abnormal cells damage the body.  
The student defines carcinogen and recognizes cancer risk as it relates to personal health decisions.
3. The student lists five steps in sound decision-making.
4. The student names five steps in sound decision-making.  
The student defines values; and names two personal values.  
The student makes a health choice after considering alternatives and consequences.
5. The student explains function of respiratory system.  
The student links cancer risk to smoking by graphing incidence of lung cancer to smokers and non-smokers.  
The student describes the effect of smoking on the lungs.
6. The student defines epidemiology.  
The student describes the function of melanin.  
The student links incidence of skin cancer to sun exposure.  
The student explains racial differences in skin cancer risk.  
The student explains sunscreen factor numbers.
7. The student states there may be a link between certain cancers and national dietary habits.
8. The student compares fat content of different food choices by making a bar graph.  
The student discusses daily decisions about food selection and identifies low-fat alternatives from the graphs.
9. The student names and defines three proven cancer treatments.  
The student explains why early detection is important for successful cancer treatment.
10. The student names behaviors that can be done to reduce personal risk of cancer.

Project  
Choice

A Curriculum in Cancer Prevention  
For Human Sciences Research Center  
1120 University Street  
Seattle, WA 98101

DRAFT

## VOCABULARY

oncology  
myth  
homeostasis  
mitosis  
tumor  
benign  
malignant  
cancer  
metastasis  
carcinogen  
risk factor  
asbestos  
radiation  
ultraviolet rays  
peer pressure  
melanin  
epidemiology  
hypothesis  
scientific method  
theory  
early detection  
biopsy  
mammography  
self-checks  
papsmear  
BSE  
TSE  
Hemoccult  
proven  
unproven  
chemotherapy  
radiation therapy  
surgery  
control  
cure  
side effects

## STUDENT LEARNING OBJECTIVES

## JUNIOR HIGH SCHOOL

1. The student defines oncology.  
The student identifies common myths about cancer.  
The student discusses why it is important to study cancer.  
The student recognizes that choices made early in life may influence cancer risk.
2. The student defines homeostasis as the balance among all the body systems.  
The student identifies and contrasts characteristics of normal cell behavior.  
The student recognizes that tumors are made of abnormal cells and may be benign or malignant.
3. The student defines the terms "risk factor" and "carcinogen."  
The student names five risk factors.  
The student lists behaviors which reduce cancer risk.
4. The student lists five steps used in decision-making.  
The student uses the process to make decisions.  
The student recognizes that information changes; therefore, a decision may have to be reconsidered.  
The student explains the importance of using decision-making skills in order to reduce cancer risk.
5. The student uses the decision-making process to make a personal decision.  
The student identifies some ways to change habits.  
The student recognizes the role of peer pressure in decision-making.
6. The student compares the scientific method to the rational decision-making process.  
The student learns criteria which distinguish reliable from unreliable information.
7. The student explains the importance of early detection in the control and cure of cancer.  
The student names eight cancer early warning signals.  
The student identifies personal self-checks and cancer tests used in early detection.
8. The student identifies experimental, proven, and unproven cancer treatments.  
The student recognizes that the individual plays an important role in maintaining health and preventing or detecting disease.

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VOCABULARY

STUDENT LEARNING OBJECTIVES

JUNIOR HIGH SCHOOL

- 9. The student names community resources for cancer information.  
The student develops an individualized plan for cancer prevention.
- 10. The student discusses how cancer risk-reduction plans are influenced by individual differences.

Project  
Education

A Curriculum in Cancer Prevention  
and Education in Cancer Research  
1154 1/2 North 1st Street  
Tulsa, OK 74103

**DRAFT**

STUDENT LEARNING OBJECTIVES

SENIOR HIGH SCHOOL

The student will be able to:

1. Differentiate between normal and cancerous cell function and growth.  
Discuss the general characteristics of cancer.
2. Discuss the meaning of the phrase "the incidence of cancer," and define the term "epidemiology."  
Identify high incidence cancers in men and women.  
Read and interpret a cancer incidence table.  
Describe ways that incidence tables can be used to help identify possible causes of cancer.
3. Evaluate the extent to which they are "risk takers."  
Identify selected carcinogens and risk factors which may predispose individuals to cancer.  
Assess a selected carcinogen and/or risk factor.  
State ways to reduce cancer risk.
4. Identify characteristics of good research.  
Identify early detection procedures for specific cancers.
5. Identify characteristics of good research.  
Briefly discuss the three proven methods of cancer treatment.  
List guidelines for breast self-examination/testicular self-examination.  
Examine own lifestyles in relation to cancer risk.
6. Identify several factors which influence decisions:  
Describe some psychological effects of cancer on the individual and the family.  
Differentiate between experimental and unproven cancer treatment.  
Identify the difficulty of assessing information about cancer in news articles.

Project  
Choice

A Curriculum in Cancer Prevention  
First Edition, by Cancer Research Center  
1124 Columbia Street  
Seattle, WA 98101

DRAFT

PROJECT CHOICE: A SCHOOL CURRICULUM  
IN CANCER PREVENTION AND CANCER RISK-REDUCTION

1. Background

Project CHOICE is a cancer prevention and risk-reduction curriculum for students in grades kindergarten through twelve. Its curriculum units were developed by the staff of the Fred Hutchinson Cancer Research Center (FHRC) Cancer Control Program in cooperation with the Washington State Superintendent of Public Instruction and in response to a demand for such a program from educators and medical professionals who convened in 1976 at the Washington State Cancer Education Conference.

The Project CHOICE curriculum consists of comprehensive, gradesequentially coordinated units that promote three primary goals: acquiring cancer information, including the concept of health risk and the components of cancer risk; learning a rational process of information evaluation and decision-making; and assuming the responsibility for behaviors that promote cancer risk-reduction and wellness.

2. Program Development

Individual grade-specific units and kits of instructional materials were developed for grades kindergarten through sixth, and one unit was developed for junior high school and one for senior high school. There are approximately ten lessons per grade level in the curriculum units. The curriculum lessons for the elementary grades were designed so that they can be taught in twenty to forty minutes of classroom time each day for two weeks.

---

Robert W. Day, M.D., Ph.D., Director, Fred Hutchinson Cancer Research Center, Principal Investigator; David L. Docter, B.A., Co-Project Director; Carl Nickerson, Ed.D., Co-Project Director and Supervisor for Health Education, Office of the Washington State Superintendent of Public Instruction; Connie E. Hansen, B.S., Curriculum Specialist; and Terence Janicki, Ph.D., Evaluation Specialist.

This investigation was supported by PHS Grant Number 2 R18 CA 25523-03 CCE awarded by the National Cancer Institute, DHHS.

Students are informed that some of the cancer risk areas, e.g., stress and poor nutrition, have not been proven to cause cancer. Research in those areas has not yet provided sufficient evidence to label them carcinogenic. This concept - that information even from reliable sources, can be contradictory, ambiguous, and constantly changing - is an important component of the Project CHOICE curriculum.

Students are taught how to analyze health information in the news media. They also work with a health decision-making model to learn how to counter peer pressure and understand the subtleties of advertising, and are encouraged to make up their own minds about future health choices.

Because not all cancer can or will be eliminated by cancer risk-reduction practices, students are taught about the scientific method, understanding and recognizing cancer warning signs, methods of early detection, appropriate treatment, and unproven methods of cancer treatment. By developing personal cancer risk-reduction plans, students gain an awareness of their own responsibility for their health.

### 3. Grade Level Summaries

Students in grades kindergarten through three learn basic body appreciation: that body parts work together and that cells are the body's building blocks. The concepts of self-image and of positive health choices are linked to the students' roles as health decision-makers. Members of the health team are introduced, and their roles in cancer prevention and cancer risk-reduction are explained. Cancer is defined as a disease, and its impact on society is discussed. Students learn how choices they make may increase or decrease personal risk. Cancer warning signals are introduced, and sun exposure, smoking and nutrition are identified and discussed as cancer risk factors.

Students in grades four through six are introduced to cell biology and the characteristics of normal and abnormal cells. They discuss how daily decisions affect health - specifically how smoking, diet, and sun exposure relate to cancer risk. Hidden influences and persuaders that affect health choices, such as peer pressure, advertising, and the need to bolster one's self-image, are discussed in classroom sessions. Using knowledge about preventable risk factors, students develop personal cancer prevention plans. They learn about scientific research methods and compare them to a decision-making model. Students also examine several cancer myths, such as "everything causes cancer," "bumps and bruises cause cancer," and "everything causes cancer to spread." The value of early detection and methods of cancer treatment are discussed.

Junior high school or middle school students learn about cancer myths, cell biology, and homeostasis. Working with scenarios that present information about carcinogens and risk factors, students come to realize how decision-making skills may serve as tools for cancer risk-reduction. Through the introduction of the scientific method, students begin learning to distinguish reliable from unreliable information appearing in the news media. Students also learn about early detection and about experimental, proven, and unproven methods of cancer treatment. The unit is summarized by students developing a personal cancer risk-reduction plan.

Senior high school students review basic biology, are introduced to female and male cancer incidence rates, and examine epidemiologic evidence for possible etiologic factors. Students consider selected carcinogens and their personal exposure to those risk factors. Risk-reduction and early detection procedures are identified and taught. Cancer treatment methods are discussed within the context of proper medical research, and unproven treatment methods are reviewed as contrasting examples. Health consumerism, including rights and responsibilities, is discussed, and health decision-making and information evaluation skills are taught during the student discussions and debates. Scenarios are used to help students develop coping skills for real-life health dilemmas.

#### 4. Evaluation Design

Prototype curriculum units were developed during an eighteen month National Cancer Institute (NCI) planning grant. These prototype kindergarten-through twelfth-grade units were pilot-tested in ten schools (seventeen teachers, thirty classes, 900 students) in the Puget Sound/Seattle area in summer and winter 1980-81 (Bethel, Highline, and Edmonds school districts). Project CHOICE staff members observed each lesson as it was taught by the classroom teacher. The observer noted the learning process, methods of instruction, and student reactions to the lessons' content and materials. Based on this process evaluation, revisions were made in the curriculum and the project materials. To determine the appropriateness of the curriculum revisions, a second process evaluation sequence was conducted in five schools (nineteen teachers, thirty-five classes, 1,250 students) (Seattle and Tacoma school districts). This stage of the planning grant was completed in the fall of 1981.

In July 1981 a new two-year grant was awarded to evaluate the program's impact in the classroom and to implement the program statewide. Project CHOICE evaluation instruments were then developed, and were pilot-tested in Washington State classrooms during fall and winter 1981. The evaluation instruments were designed to measure cognitive, attitudinal, and locus-of-control changes, as well as student skills in health decision-making and information evaluation. Few or no such instruments currently exist elsewhere.

The statewide evaluation process to assess the effectiveness and impact of the Project CHOICE curriculum began in February 1982. It included pre and post-tests and a 30-day retention test, as well as classroom observations by Project CHOICE field monitors to document the most favorable conditions for teaching the curriculum. Demographic information was collected about teachers and students, and the effects of teacher in-service orientation were measured. Seven school districts throughout Washington state were selected to participate in the formal evaluation sequence

(Bellevue, Puyallup, Snoqualmie, Hoquiam, Tonasket, Tri-Cities, and Spokane). The selection was made on the basis of geographic distribution, community size and type, and other demographic variables. Sixty-three experimental classrooms (2,200 students) and twenty-seven control classrooms (950 students) are participating in the current study.

The Project CHOICE evaluation instrument package restricts itself to the above-mentioned instrument package and does not purport to measure behavioral change. To attempt to do so would place an inappropriate burden on health education, which is only one of several factors influencing a person's health behavior (and health behavior is only one factor that influences health status). Health education programs such as Project CHOICE can, however, provide a base for those conditions which must be present before behavior change is likely to occur, i.e., interest, knowledge, motivation to change, and decision-making skills. Thus, changes in health practices may not occur immediately, but a foundation will have been built that may possibly foster behavior conducive to a reduction in cancer (a total of five hours of instruction for each grade). The junior and senior high school lessons require from fifty to fifty-five minutes of classroom time each day for two weeks (a total of nine hours of instruction). The units have been developed so that the classroom teacher needs only a brief orientation to the concepts and materials. This is considered to be a distinct advantage of Project CHOICE when compared to other special curricula that require many hours or many days of teacher in-service.

The participation of teachers, students, and specialists in the curriculum development process, combined with continuous on-site classroom field testing of materials, ensures that the lessons are based on and responsive to the following instructional principles: 1) students learn at different rates; 2) students learn by different modes - visual, auditory, motor, kinesthetic; and 3) students learn best when they can discover concepts, rather than being told "right" answers.

The lessons are designed to be "student activity-oriented" rather than "teacher lecture-directed" Lessons attempt to parallel the students' frames of reference, and each unit's language, skills, and activities are based on the developmental level of the students in that grade.

Project CHOICE is a practical curriculum and considers typical classroom problems, including the fact that teachers have limited time for advance preparation. Teachers are provided with complete daily lesson plans, student learning objectives, a Cancer Resource Guide with information that corresponds to lesson content, and all other necessary teaching materials.

The curriculum kits include original filmstrips, worksheets, games, pamphlets, poster, experiments, decision-making scenarios, and other materials to stimulate classroom reports, group work, debates, discussions, and related "hands-on activities" The overall emphasis is on positive health promotion, personal responsibility for health, understanding the role of health professionals in cancer prevention and risk-reduction, and the application of cancer risk-reduction behaviors to daily life. Lesson themes attempt to replace the fear of cancer with a positive and active approach to maintaining health. At different grade levels, the units teach students about eight broad areas of cancer risk: host factors, occupational hazards; drugs, including tobacco and alcohol; nutrition; stress; environmental factors, including radiation exposure; sexual and reproductive behavior; and sun exposure.

# Alaska State Legislature

SENATOR  
ROBERT H. ZIEGLER, SR  
307 BAWDEN STREET  
KETCHIKAN, ALASKA 99901

*While in Juneau*  
POUCH V  
JUNEAU, ALASKA 99811

*Senate*

VICE CHAIRMAN  
SENATE RESOURCES COMMITTEE

MEMBER  
SENATE JUDICIARY COMMITTEE

WESTERN STATES LEGISLATIVE  
FORESTRY TASK FORCE

WESTERN CONFERENCE COUNCIL  
OF STATE GOVERNMENTS

March 6, 1984

TO: Representative Mae Tischer,  
Chairman - Health, Education &  
Social Services Committee

FROM: Senator Robert H. Ziegler, Sr.

RE: CPR Bills, SB 129 and SB 130.

Committee substitute for SB 129 adds CPR and cancer training to programs which schools are encouraged to include in their curriculum. SB 130 provides funds for purchase of manikins and films for CPR training.

The purpose of the original bills was to encourage CPR training by providing the training-manikins which the school district may otherwise not be able to afford.

As the bill is currently written, the school district is not required to implement a CPR program before receiving a manikin. Perhaps a letter of intent should be included with the bill stating that unless a school implements an approved CPR program, they are not eligible to receive the manikins.

On separate paper, I have taken the liberty to provide a draft of the letter for your consideration.

RHZ:lk

3 —

POSITION PAPER

Senate Bill No. 129

"An Act relating to cardiopulmonary resuscitation (CPR) instruction in the public schools."

This bill would amend AS. 14.30.360 (a) to add instruction in cardiopulmonary resuscitation (CPR) to health education programs which are encouraged by the state to be taught in public schools.

The Division of Public Health of the Department of Health and Social Services strongly supports this bill for the following reasons:

- 1) Numerous national studies have shown that if a victim of cardiac arrest receives basic CPR within four minutes of collapse and advanced cardiac life support within eight minutes, the victim has a good chance of survival;
- 2) CPR is the basic, initial recommended treatment for any condition resulting in cardiac arrest, including severe trauma, drowning, or electric shock;
- 3) Medical experts in the Division of Public Health believe that, if all able bodied citizens are trained in CPR, numerous lives can be saved each year; and
- 4) One good way to ensure that large numbers of citizens receive CPR instruction is to include it in school curricula.

Recommended by:

E. S. Rabeau, M.D.  
E.S. Rabeau, M.D., Director  
Division of Public Health

Date:

Feb. 23, 1983

Approved by:

Robert London Smith  
Robert London Smith  
Commissioner

Date:

2/25/83

WRANGELL EMERGENCY MEDICAL SERVICES COUNCIL  
P.O. Box 1192  
WRANGELL, ALASKA 99929

Senator Bob Ziegler  
Alaska State Legislature  
Pouch V (MS 3100)  
Juneau, Alaska 99811

Dear Senator Ziegler,

We want to take this opportunity to thank you for your continued support of E.M.S. programs in Southeast Alaska.

It has come to our attention that you and Senator Eliason are proposing legislation to encourage CPR and First Aid instruction in the schools. We heartily lend our support toward this endeavor, and would ask you to also seek changes through the Board of Education that would require teachers to be certified in CPR and First Aid in order to meet requirements for recertification. This could be accomplished through inservice, utilizing local instructors, and we feel it is important that those who deal every day with large numbers of children should have these skills.

Wallace "Butch" Schmidt, Wrangell High School Science and Computer teacher, became a CPR instructor in 1982 and certified seventy-three High School students in CPR from among his classes. Butch plans to become a First Aid instructor and is very enthusiastic about teaching these skills.

He has asked the Wrangell School Board to set aside funds in the 1983/84 Budget that he may continue to offer these skills to the students. He has proposed that funding be used for equipment needs and also that one period a day be funded to teach the skills. Butch would like to see ALL public school employees certified in First Aid and CPR.

The Wrangell EMS Council has also applied for grant monies to cover fifty percent of some equipment which can be used both for public school and Community classes.

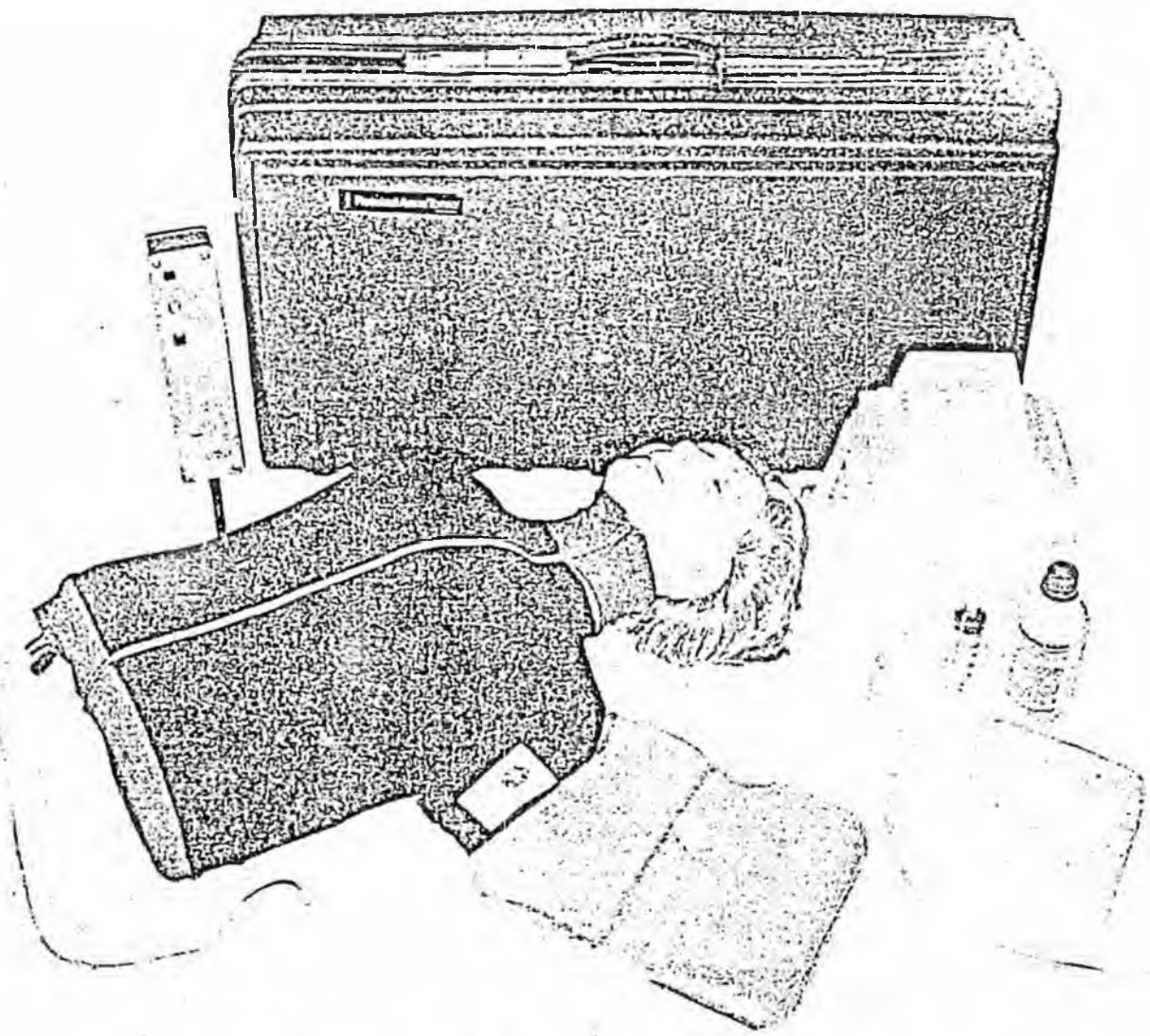
We hope that you will continue to support us in this worthwhile effort. If you have any questions, please do not hesitate to contact either Butch or myself.

Sincerely,

*Trudy Johnson R.N.*

Trudy Johnson, R.N.  
Wrangell EMS Council

GSJ/skj



## RESUSCI ANNE TORSO

Resusci Anne Torso has most of the features of the full-sized Resusci Anne. The manikin, which comes without arms and legs, is light weight, easy to maintain and economically priced. It is an ideal companion to full-sized CPR manikins like Resusci Anne and Recording Resusci Anne. Resusci Anne Torso comes with the same accessories as the full-sized Resusci Anne, and is available both with and without the signal box (same box used for Resusci Anne).

**PART No. 5411101**

Resusci Anne Torso complete with electronics, in a sturdy, plastic molded carrying case, disinfection kit, spare lungs and instruction manual. . . . . \$435.00

**PART No. 5402001**

Resusci Anne Torso Practice without electronics, in a sturdy, plastic molded carrying case, disinfection kit, spare lungs and instruction manual. . . . . \$290.00

To Convert Torso Models: To full body models

**PART No. 5411240**

Signal Box and Electronics  
(For Torso Practice Models) . . . . . \$229.50

**PART No. 5411255**

Full-Body Kit  
(Arms, Legs, and Trousers) . . . . . \$160.00

**PART No. 5411210**

Full Body Carrying Case . . . . . \$113.50

*(last year's catalog price. has increased)*

Community EMT Classes - Although we are working with communities the size of Craig & larger to develop their own EMT Instructor capabilities; our staff expects to continue to provide EMT classes for the very small communities. During January, Donna will be teaching in Elfin Cove & Tenakee, We are also expecting to offer an EMT class in Meyers Chuck this winter, and Port Alexander this Spring.

Thorne Bay Ambulance - The now completed Green Lakes Hydro Project donated to us their ambulance which we, in turn, donated to the newly incorporated town of Thorne Bay. Through fundraising events & matching funds from our office, Thorne Bay now has the ambulance equipped & in service. Since Thorne Bay is connected by road to a physician staffed clinic in Craig, the ferry terminal in Hollis, and several logging camps; an ambulance based there should prove valuable.

In-Service Coordinators Meeting - Nursing In-service Coordinators from Southeast Hospitals met with Cindy Jimmerson in Anchorage the evening before the Symposium. One of the topics discussed was the planned EMT course for nurses to be provided at each hospital this winter. In-service Coordinators plan to explore with local fire depts. the possibility of their observing during runs as a follow up to the training.

Introduction to Legislators - Letters introducing our program have been sent to newly elected legislators in Southeast. Programs being offered in their district this winter were summarized.

Prince of Wales EMT - During October, Steve Tuthill & Donna Limbeam offered an EMT Class in Klawock. Trainees from Southeast, primarily from Prince of Wales communities & logging camps, attended. Instructional assistance was provided by Dr. Gary Carlson from Ketchikan; Joan Nugent, Itinerant PHN; and Kurt Welser, RN (though not presently employed as such) from Thorne Bay. John Saito from SEARHC concurrently offered an EMT refresher class for Craig & Klawock EMT's. Steve & Donna also trained a few Craig & Klawock residents as CPR Instructors during their visit.

CPR in the Schools - Next weeks, I will be offering a presentation on CPR curricula for the schools at the "Small Schools Conference" in Anchorage. Barbara Johnson of the Heart Association will be assisting & Glória Way of the State EMS Office will introduce a packet she developed on watersafety instruction. The conference will include administrators & teachers from small schools throughout Alaska. Senator Eliason has expressed an interest in introducing legislation geared toward encouraging CPR inclusion in school curricula. This conference should offer an opportunity to find out how widespread CPR in the schools is at present, & what obstacles are being encountered.

EMS Supplement - We plan to put together a news supplement on EMS in Southeast during January. Cindy will be serving as editor for this collection of articles which will then be inserted in all Southeast newspapers. If you have ideas for good articles or are willing to write one, please contact Cindy.

# Southwest Region Emergency Medical Services Council

BOX 2170

SITKA, ALASKA 99835

TELEPHONE 747.8005  
747.6370

December 16, 1982

Senator Richard Eliason  
P.O. Box 143  
Sitka, Alaska 99835

Dear Senator Eliason:

I'm really pleased that you are interested in promoting the inclusion of CPR in school curricula. I consider knowledge of the technique to be critical for anyone living in Alaska. CPR has to be started within 4 - 6 minutes once the heartbeat stops if the victim is to survive which isn't enough time for an ambulance to arrive.

I think that the most exciting news in emergency medicine in the past few years, and particularly relevant to Southeast Alaska, is that people who drown in cold water can be resuscitated with no resulting brain damage even after submersion for long periods. Cases have been documented after submersion for up to 45 minutes. As soon as the victim is pulled out of the water, however, CPR must be initiated immediately. Just a few years ago, rescuers would not have known to try resuscitation on such victims. We have an excellent videotape on this topic that we show in all CPR classes. If you have a chance before the session begins, you may want to stop by our office to see it.

As we discussed, I found through speaking to several people from the State Department of Education that Alaska has a fairly strong policy of local determination over school curricula. The enclosed statute, however, provides a very appropriate place to add cardiopulmonary resuscitation as a health related subject that school districts should be encouraged to provide. I understand that when this paragraph was first added, it led to the Department's development of health education curricular materials for use by school districts. The addition of CPR to this paragraph should help us in establishing this as a priority subject for their attention.

In order to teach CPR, school districts must have available a certified CPR instructor, an adult mannikin, a baby mannikin and a film depicting the technique.

Our office, over the past few years, has been training CPR instructors and now have instructors available in most Southeast communities. We have used part of our operating grant funds to cover travel costs to provide this training. EMS programs that parallel ours in other

regions of the State have been doing the same to varying degrees.

One of the obstacles encountered by these volunteer instructors is the availability of the mannikins and film. In the past, we have loaned out mannikins but availability as well as the cost of shipping them (they are quite heavy) posed a problem. With some of the capitol funds you helped to provide last session, we were able to provide matching funds for several communities but gaps remain, especially on a Statewide basis.

In talking to teachers and administrators, I found little resistance to offering CPR as long as they could work out the logistics of having the instructor and training equipment available. I think that an effective approach would be to provide, as an incentive, a CPR mannikin, torso style, for any school district that incorporates CPR into it's curriculum.

*forcing info*  
There are 53 school districts in the State. Safety Inc., an Anchorage supplier, quote the price after April 1, 1983 of \$420 per mannikin plus shipping which I consider a good price. The maximum cost for the program, allowing \$30 per mannikin for shipping, would be \$23,850. If a school district had already purchased an adult mannikin, they could use the funds instead to buy a baby mannikin (\$350) or a second adult as it is much easier if more than one is available for students to practice on.

The film we can loan from our office. We already have two copies but they are booked up for months in advance so I'll be requesting a couple more copies in our agency's capitol budget request this session. I will also talk to the other EMS programs to make sure they have it available to loan.

I think that this approach is one that for a relatively small amount of State funds, a great deal of local commitment might be generated. Since Regional EMS programs are involved in CPR instruction and coordination, I think that the funds would best be allocated to us through the State EMS Office. As we receive copies of all CPR class rosters, we can easily identify which schools are offering CPR or, for school districts that are not, we can assist them in getting programs started.

I just wrote a memo to our Board members on some of our current projects which I've enclosed for your information.

Hope you have a nice Christmas.

Yours Truly,

*Laurel*

Laurel Anderson  
Executive Director

Joanne Wallington, M.D.

Pediatric Cardiology

"Children's Heart Doctor"

January 30, 1984

Suite 209  
4001 Dale Street  
Anchorage, Alaska 99504  
(907) 278-1915

Representative Walt Furnace  
Pouch V  
Juneau, AK 99811

Dear Mr. Furnace:

I would like to express my support for Senate bill 129 and Senate bill 130 which will provide for the teaching of cardiopulmonary resuscitation in the schools and provide funds for the necessary instructional materials. I believe this life saving information should be known by as many people as possible. Providing this instruction in the schools will give a large and ever growing number of individuals capable of providing resuscitation and I think the cost is quite small compared to the benefits.

Sincerely,

Joanne Wallington, M.D.

JW:ken

cc: Senator Ziegler  
Senator Eliason  
Senator Ferguson

2/10  
Dear Representative: Sen. Ziegler thought  
this additional backup might  
be helpful to you  
Linda Krause

Sec. 14.30.360. Curriculum. (a) Each district in the state public school system shall be encouraged to initiate and conduct a program in health education for kindergarten through grade 12. The program should include instruction in physical health including alcohol and drug abuse education, dental health, family health, environmental health, and appropriate use of health services.

← d  
CPR  
instructio

(b) The state board shall establish by regulation guidelines for a health education program. A school health education specialist position shall be established and funded in the department to coordinate the program statewide. Adequate funds to enable curriculum and resource development, adequate consultation to school districts, and a program of teacher training in health education shall be provided. (§ 1 ch 188 SLA 1976; am § 1 ch 106 SLA 1978)

Revisor's notes. — The words "of education" were deleted following "board" and "department" by the revisor of statutes under AS 01.05.031 and 14.60.010.

Editor's notes. — Section 2, ch. 106, SLA 1978, provides: "It is the intent of the legislature that public school systems implement a program of alcohol and drug abuse education in coordination with other health education programs."

Effect of amendments. — The 1978 amendment inserted "including alcohol and drug abuse education" in the second

Sec. 14.30.370. Evaluation. Health education programs conducted under AS 14.30.360 shall be evaluated by the department in the same manner as other curriculum programs are evaluated, except that the evaluation shall also include changes in the health status of the pupils as determined by physical and dental examinations conducted under AS 14.30.070 and 14.30.120. (§ 1 ch 188 SLA 1976)

Revisor's notes. — The words "of education" were deleted following "depart-

ment" by the revisor of statutes under AS 01.05.031.

Article 5. Bilingual — Bicultural Education.

Section

- 400. Bilingual-bicultural education
- 410. Bilingual-bicultural education fund

Collateral references. — 68 Am. Jur. 2d Schools, §§ 283-289.  
79 C.J.S. Schools and School Districts, §§ 484-492.

Validity of statute or other regulations as to the use, or teaching, of foreign languages in schools. 7 ALR 1695, 29 ALR 1452.

CPR in  
School Curriculum

Offered: 3/8/84  
Referred: Finance

Original sponsors: Ziegler, Eliason  
and Ferguson

1 IN THE SENATE

BY THE HEALTH, EDUCATION AND  
SOCIAL SERVICES COMMITTEE

2

HOUSE CS FOR CS FOR SENATE BILL NO. 129 (HESS)

3

IN THE LEGISLATURE OF THE STATE OF ALASKA

4

THIRTEENTH LEGISLATURE - SECOND SESSION

5

A BILL

6

For an Act entitled: "An Act relating to cardiopulmonary resuscitation

7

(CPR) and early cancer detection instruction in the

8

public schools."

9

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

10

\* Section 1. AS 14.30.360(a) is amended to read:

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(a) Each district in the state public school system shall be

12

encouraged to initiate and conduct a program in health education for

13

kindergarten through grade 12. The program should include instruction

14

in physical health including alcohol and drug abuse education, cardio-

15

pulmonary resuscitation (CPR), early cancer prevention and detection,

16

dental health, family health, environmental health, and appropriate

17

use of health services.

Offered: 6/3/83

Original sponsors: Ziegler, Eliason  
and Ferguson

1 IN THE SENATE

BY THE RULES COMMITTEE

2

CS FOR SENATE BILL NO. 129 (Rules)

3

IN THE LEGISLATURE OF THE STATE OF ALASKA

4

THIRTEENTH LEGISLATURE - FIRST SESSION

5

A BILL

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pulmonary resuscitation (CPR), early cancer detection, dental health,

16

family health, environmental health, and appropriate use of health

17

services.

Introduced: 2/17/83  
Referred: Health, Education and  
Social Services and  
Finance

1 IN THE SENATE BY ZIEGLER, ELIASON AND FERGUSON

2 SENATE BILL NO. 129

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 THIRTEENTH LEGISLATURE - FIRST SESSION

5 A BILL

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15 mental health, and appropriate use of health services.