Agenda

• Welcome and introductions
• Project logic model
• Current status of Ohio’s Health Education Model Curriculum
• Small group discussions
• Report out/large group discussion
• Next steps
Group introductions
Meeting objectives

By the end of this meeting, we will:

• Understand the current status of Ohio’s Health Education Model Curriculum and the project logic model

• Provide feedback on decisions related to key aspects of the model curriculum

• Understand next steps
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Health Education Model Curriculum:
Advisory Committee Update

A PROJECT FUNDED BY THE MT. SINAI FOUNDATION
Advisory Team: Meeting Agenda

• Model Curriculum Project Overview & Update

• Group Discussions
  ◦ Principles, Key Terms, & Organization
  ◦ Outcomes
  ◦ Health Education Topics & Content

• Content Framework Groups

• Next Steps
Each Child, Our Future
In Ohio, each child is challenged, prepared and empowered.

Vision
In Ohio, each child is challenged to discover and learn, prepared to pursue a fulfilling post-high school path and empowered to become a resilient, lifelong learner who contributes to society.

Four Learning Domains
- Foundational Knowledge & Skills
  Literacy, numeracy and technology
- Well-Rounded Content
  Social studies, sciences, languages, arts, health, physical education, etc.
- Leadership & Reasoning
  Problem-solving, design thinking, creativity, information analytics
- Social-Emotional Learning
  Self-awareness & management, social awareness, relationship skills, responsible decision-making

One Goal
Ohio will increase annually the percentage of its high school graduates who, one year after graduation, are:
- Enrolled and succeeding in a post-high school learning experience, including an adult career-technical education program, an apprenticeship and/or a two-year or four-year college program;
- Serving in a military branch;
- Earning a living wage; or
- Engaged in a meaningful, self-sustaining vocation.

Three Core Principles
- Equity
- Partnerships
- Quality Schools

10 Priority Strategies
1. Highly effective teachers & leaders
2. Principal support
3. Teacher & instructional support
4. Standards reflect all learning domains
5. Assessments gauge all learning domains
6. Accountability system honors all learning domains
7. Meet needs of whole child
8. Expand quality early learning
9. Develop literacy skills
10. Transform high school/provide more paths to graduation

Ohio’s Strategic Plan for Education: 2019-2024
States with health education standards, 2018

Sources: Health Policy Institute of Ohio. CDC School Health Policies and Programs Study (2006) and updated environmental scans from Wright State University and The Mt. Sinai Health Care Foundation (2018)
Health Education in Ohio

• Ohio is the **ONLY** state without health education standards.

• Health Education is the **ONLY** academic content area without academic content standards.

• General Assembly has oversight of health education, not the Ohio Department of Education (ODE).
  ◦ **NO** ODE health education consultant.

• ODE cannot develop or publish curriculum, but they can provide links and resources.

• Ohio is a local control state
Ohio’s Health Education Requirements:

- Graduation Requirement: One-half unit (60 hours)
- K-8: **NO** Time Requirement, but......
- **ALL Schools** MUST have a health education curriculum that includes:
  - **Nutrition** - including natural and organically produced foods, the relation to health and the use and effects of food additives.
  - **Drugs of abuse, alcoholic beverages, and tobacco** - harmful effects and legal restrictions against
  - **Venereal disease***
  - **Personal safety and assault prevention**
    - K-6: child abuse prevention
    - 7-12: Dating violence & healthy relationships.
  - Prescription opioid abuse prevention.
  - Anatomical Gifts

* Venereal disease

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Effective Health Education Curriculum

• Focused on Health-related Skills, Attitudes, and Functional Knowledge.

1. Developing essential health skills necessary to adopt, practice and maintain health-enhancing behaviors.

2. Teaching functional health information.

3. Shaping personal values and beliefs that support healthy behaviors.

4. Shaping group norms that value a healthy lifestyle.
What is Curriculum?

• Health Education Curriculum
  ◦ Refers to those teaching strategies and learning experiences that provide students with opportunities to acquire the attitudes, knowledge, and skills necessary for making health-promoting decisions, achieving health literacy, adopting health-enhancing behaviors, and promoting the health of others.

• Model Curriculum –
  ◦ Tool that provides educators with information that clarifies the learning standards for planning and developing instruction.

• Different from a program?
Components of the Model Curriculum

• Model Curriculum
  1. Standards, Benchmarks & Indicators
  2. Curriculum Map
     ▪ Year at a glance including units, approximate time frames, assessment practices, and standards.

• Content Framework – (Required & Recommended)
  ◦ Benchmarks & Indicators aligned with Standards.
  ◦ Content Elaboration
     ▪ Key concepts & Principles
     ▪ Progressions
  ◦ Assessments & Assessment Practices
  ◦ Time Frame
  ◦ Instructional Strategies
     ▪ Technology
     ▪ Strategies for Diverse Learners
Finding Balance: Guidance & Local Control

• Model Curriculum **WOULD:**
  - Identify what students will learn.
  - Guide development of local curriculum and scope & sequence.
  - Determine relevant & developmentally appropriate outcomes
    - Policy and legislation
  - Align local needs & local data to inform instruction to meet student needs.

• Model Curriculum **WOULD NOT:**
  - Identify topics to that MUST be taught.
  - Direct how to teach? When to teach? How long to teach?
  - Provide lesson plans or unit plans.
  - Be an exhaustive list of classroom activities
  - Replace your district’s decisions, policy, and direction.
Model Curriculum: Key Terms

• Standard
  ◦ Overreaching goal for the K-12 curriculum

• Benchmark
  ◦ Outcome to be achieved by the end of the grade band
  ◦ Grade bands – K-2, 3-5, 6-8, 9-12

• Indicator
  ◦ Grade level outcomes
  ◦ Associated with health topics
What should Ohio’s students learn?

Health Education Standards

1. **FUNCTIONAL HEALTH KNOWLEDGE** – comprehend concepts related to health promotion and disease prevention.

2. **ANALYZING INFLUENCES** – analyze the influence of others, culture, media, technology on health.

3. **ACCESSING VALID HEALTH RESOURCES** - access valid information, products and services.

4. **INTERPERSONAL COMMUNICATION SKILLS** - use interpersonal communication skills to enhance health and avoid or reduce health risks.
5. **DECISION-MAKING SKILLS** - use decision-making skills to enhance health.

6. **GOAL-SETTING SKILLS** - use goal-setting skills to enhance health.

7. **SELF-MANAGEMENT SKILLS** – demonstrate health-enhancing behaviors to avoid or reduce health risks.

8. **ADVOCACY SKILLS** - advocate for personal, family, and community health.
Model Curriculum Organization

Leadership Team

Advisory Committee

Writing Team

Content Frameworks

K-5

6-8

HS

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Topic Areas

• ATOD = Alcohol, Tobacco, & Other Drugs
  ◦ Includes Opioid Prevention*

• HE = Healthy Eating

• HGD = Human Growth & Development
  ◦ Human Sexuality & Puberty

• HR = Healthy Relationships

• MEH = Mental & Emotional Health

• PHW = Personal Health & Wellness
  ◦ Includes Anatomical Gifts* in High School
  ◦ STIs / Venereal Disease*

• S = Safety

• VP = Violence Prevention*

* denotes a required topic from ORC
Human Sexuality

- Can be found:
  - Human Growth & Development (HGD)
  - Personal Health & Wellness (PHW)
  - Violence Prevention (VP)
  - Healthy Relationships (HR).

- Expect to convene a group of stakeholders to review the materials.
  - Provide guidance
  - Respect local control
  - Developmentally appropriate
  - Comprehensive
  - Inclusive
Leadership Group Responsibilities

• Develop curriculum including outcomes, curriculum map and content elaborations

• Align materials and check for developmentally appropriate progressions between and within grade bands

• Determine terminology, definitions and key concepts

• Consider Advisory Committee Recommendations
Advisory Group Responsibilities

• Provide guidance and structure.
  ◦ Identify key questions
  ◦ Clarify terminology and key concepts

• Engage stakeholders in the development and support the implementation of the Model Curriculum.

• Ensure the curriculum meets the unique and diverse needs of Ohio and the stakeholders of health education curriculum.
Model Curriculum Writing Team Responsibilities

- Develop learning outcomes for each grade band
  - Standards, benchmarks, indicators
- Develop Scope & Sequence for each grade band
Content Framework Writing Team Responsibilities

• Develop a content framework for each health topic identified by the Leadership and Advisory Team
  ◦ Organized by grade band

• Topics
  ◦ Alcohol, Tobacco & Other Drugs (ATOD)
    ▪ Opioids
  ◦ Healthy Eating (HE)
  ◦ Human Growth & Development (HGD)
  ◦ Healthy Relationships (HR)
  ◦ Mental & Emotional Health (MEH)
  ◦ Personal Health & Wellness (PHW)
  ◦ Safety (S)
    ▪ Anatomical Gifts
  ◦ Violence Prevention (VP)
What is a Content Framework?

- Detailed explanation of the knowledge and skills represented in the learning standards.
- It’s not a unit plan, but it provides the framework to develop one.

- Learning Outcomes
- Essential Understandings
- Content Elaboration
  - Explanation of the benchmarks, indicators, and content
  - Progression of content within the topic
- Instructional Resources
- Assessment Strategies
- Instructional Strategies
- Diverse Learners
- Connections
Small groups

1. Alcohol, Tobacco and Other Drug Prevention (ATOD) & Mental and Emotional Health (MEH)
2. Healthy Eating (HE)
3. Human Growth and Development (HGD), Personal Health and Wellness (PHW) & Healthy Relationships (HR)
4. Safety (S) & Violence Prevention (VP)
Small group discussions

1. Thoughts on the principles, guidelines, terminology and content frameworks

2. Review of learning outcomes
   - Comprehensive
   - Developmentally-appropriate
   - Cultural sensitivity and equity
   - Meet the needs of students, schools and communities
   - Respectful of local control

3. Potential impact on your work, state initiatives and our schools
Next steps
Project Next Steps

- Model Curriculum Writing Team - Revisions and updates to learning outcomes, content maps, terminology & formatting

- Content Framework Writing Groups
  - Call for Volunteers – December
  - Draft of Content Elaborations – March
  - Topic Drafts reviewed - April

- Alignment check with Leadership Group

- Advisory Meeting – May

- Revisions and Final Version published to OAHPERD Website
  - June 2019
Next Steps for Writing Team

• Submit revisions and key questions
• Review revisions and stay in contact with Writing Team Leader
• Review Content Framework in spring
• Next group face-to-face meeting is June 2019.
Let us know

Provide written feedback at:
www.surveymonkey.com/r/LWVCSJ6
Contacts

Amy Rohling McGee
arohlingmcgee@hpio.net

Amy Bush Stevens
astevens@hpio.net

Becky Carroll
bcarroll@hpio.net

Kevin Lorson
kevin.lorson@wright.edu