

# Health Education Content Standards for California Public Schools

## Grade Five

## Publishing Information

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# A Message from the State Board of Education and the State Superintendent of Public Instruction

Good health and academic success go hand in hand. Healthy children make better students, and better students become healthy, successful adults who are productive members of their communities. Comprehensive health education that addresses the physical, mental, emotional, and social aspects of health teaches students how to maintain and improve their health; prevent disease; reduce health-related risk behaviors; and develop health knowledge, attitudes, and skills that foster academic achievement, increase attendance rates, and improve behavior at school.

As with students throughout the United States, California's students are facing increasingly serious challenges to good health: obesity and diabetes are rising at alarming rates; asthma continues to be a leading cause of student absences; and too many adolescents continue to make choices that negatively impact their lives. It is essential that students learn how to manage health problems they already face and to avoid additional health problems in the future. Students need health education.

Quality health education programs help students achieve their highest academic potential. The *Health Education Content Standards for California Public Schools, Kindergarten Through Grade Twelve* provides guidance on the essential skills and knowledge that students should have at each grade level. Local educators are encouraged to apply these standards when developing curricular and instructional strategies for health education and other interdisciplinary subjects.

Recognizing the significant impact of health on academic achievement, we must do everything possible to improve the quality of health education in California schools. The health education content standards represent our commitment to promoting excellence in health education for all students.

THEODORE R. MITCHELL  
*President, State Board of Education*

JACK O'CONNELL  
*State Superintendent of Public Instruction*

# Introduction

Health education is a continuum of learning experiences that enables students, as individuals and as members of society, to make informed decisions, modify behaviors, and change social conditions in ways that are health enhancing and increase health literacy. The health education standards define the essential skills and knowledge that all students need in order to become “health literate”; they represent a strong consensus of the essential knowledge and skills that students should have at specific grade levels, from kindergarten through grade twelve, in California’s public schools. The health education standards also reflect California’s commitment to health education and serve as a basis for learning assessments, the *Health Framework for California Public Schools*, and instructional resources and materials. Standards do not prescribe methods of instruction.

A primary goal of the health education standards is to improve academic achievement and health literacy for all students in California. Four characteristics are identified as essential to health literacy. Health-literate individuals are:

- Critical thinkers and problem solvers when confronting health problems and issues
- Self-directed learners who have the competence to use basic health information and services in health-enhancing ways
- Effective communicators who organize and convey beliefs, ideas, and information about health issues
- Responsible and productive citizens who help ensure that their community is kept healthy, safe, and secure

These four essential characteristics of health-literate individuals are woven throughout the health education standards.

## Background of the Standards

In October 2005, Assembly Bill (AB) 689, cosponsored by State Superintendent of Public Instruction (SSPI) Jack O’Connell, was signed into law by Governor Arnold Schwarzenegger, adding Section 51210.8 to the California *Education Code (EC)*; that section required the State Board of Education (SBE), based on recommendations from the SSPI, to adopt content standards for health education. The health education standards shape the direction of health education instruction for children and youths in California’s public schools: they provide school districts with fundamental tools for developing health education curricula and improving student achievement in this area; and they help ensure that all students in kindergarten through high school receive high-quality health education instruction, providing students with the knowledge, skills, and confidence to lead healthy lives.

Health education has undergone a paradigm shift over the last 15 years. It has evolved from a primarily knowledge-based subject to a focused, skills-based subject. This shift came about as data from national and state surveys—including the California Healthy Kids Survey—indicated that although youths had knowledge of what was harmful to their health, they did not have the skills to avoid risky behaviors. The students understood why certain behaviors could and would cause harm, but they still engaged in risky behaviors.

The focus in the health education standards is on teaching the skills that enable students to make healthy choices and avoid high-risk behaviors. Eight overarching standards describe essential concepts and skills; they are taught within the context of six health content areas. Each skill is learned and practiced specific to the content area and behavior.

## An Essential Discipline

Health education is an integral part of the education program for all students. Grounded in the body of sound education research, the health education curricula in local school districts should be organized into a scope and sequence that support the development and demonstration of increasingly sophisticated essential knowledge, attitudes, and skills. A comprehensive health education program is designed to promote healthy living and discourage health-risk behaviors among all students.

Sound health education programs include structured learning opportunities that engage students as active learners. Through quality instructional approaches, learners increase essential knowledge and are encouraged to compare and contrast their beliefs and perceptions about health issues. Schools are in a unique and powerful position to improve health outcomes for youths. Today's young people are confronted with health, educational, and social challenges not experienced to the same degree by previous generations; violence, alcohol and other drug use, obesity, unintended pregnancy, sexually transmitted diseases (STDs), and disrupted family environments can compromise academic success and health. Students should have an opportunity to practice essential skills to maintain healthy lifestyles. Such a foundation is reflected in the health education content standards.

Teachers and school districts are encouraged to enrich their students' instructional environments and learning opportunities by:

- Using standards-based, theory-driven, and research-based approaches to health instruction
- Identifying and collaborating with appropriate community and health agencies
- Cultivating meaningful parent involvement in health education
- Focusing instruction on essential knowledge and skills that will foster health-risk reduction among students

## Overarching Content Standards and Rationales

The eight overarching health content standards for kindergarten through grade twelve are presented below, along with the rationale for each standard.

### Standard 1: Essential Health Concepts

**All students will comprehend essential concepts related to enhancing health.**

**Rationale:** Understanding essential concepts about the relationships between behavior and health provides the foundation for making informed decisions about health-related behaviors and for selecting appropriate health products and services.

### Standard 2: Analyzing Health Influences

**All students will demonstrate the ability to analyze internal and external influences that affect health.**

**Rationale:** Health choices are affected by a variety of influences. The ability to recognize, analyze, and evaluate internal and external influences is essential to protecting and enhancing health.

### **Standard 3: Accessing Valid Health Information**

**All students will demonstrate the ability to access and analyze health information, products, and services.**

**Rationale:** Students are exposed to numerous sources of information, products, and services. The ability to access and analyze health information, products, and services provides a foundation for practicing health-enhancing behaviors.

### **Standard 4: Interpersonal Communication**

**All students will demonstrate the ability to use interpersonal communication skills to enhance health.**

**Rationale:** Positive relationships support the development of healthy attitudes and behaviors. The ability to appropriately convey and receive information, beliefs, and emotions is a skill that enables students to manage risk, conflict, and differences and to promote health.

### **Standard 5: Decision Making**

**All students will demonstrate the ability to use decision-making skills to enhance health.**

**Rationale:** Managing health behaviors requires critical thinking and problem solving. The ability to use decision-making skills to guide health behaviors fosters a sense of control and promotes the acceptance of personal responsibility.

### **Standard 6: Goal Setting**

**All students will demonstrate the ability to use goal-setting skills to enhance health.**

**Rationale:** The desire to pursue health is an essential component of building healthy habits. The ability to use goal-setting skills enables students to translate health knowledge into personally meaningful health behaviors.

### **Standard 7: Practicing Health-Enhancing Behaviors**

**All students will demonstrate the ability to practice behaviors that reduce risk and promote health.**

**Rationale:** Practicing healthy behaviors builds competence and confidence to use learned skills in real-life situations. The ability to adopt health-enhancing behaviors demonstrates students' ability to use knowledge and skills to manage health and reduce risk-taking behaviors.

### **Standard 8: Health Promotion**

**All students will demonstrate the ability to promote and support personal, family, and community health.**

**Rationale:** Personal, family, and community health are interdependent and mutually supporting. The ability to promote the health of oneself and others reflects a well-rounded development and expression of health.

## Grade-Level Recommendations and Content Areas

The health education standards are organized into six health content areas:

- Nutrition and Physical Activity
- Growth, Development, and Sexual Health
- Injury Prevention and Safety
- Alcohol, Tobacco, and Other Drugs
- Mental, Emotional, and Social Health
- Personal and Community Health

Health education standards are to be achieved by all students in kindergarten and grades one through twelve. To enhance the quality and depth of health instruction, some health content areas are not recommended for every grade level. Districts are encouraged to add content areas for additional grade levels depending on local health priorities.

The health education standards represent **minimum** requirements for comprehensive health education. Local educational agencies (LEAs) that accept federal Title IV Safe and Drug-Free Schools and Communities funds or state Tobacco-Use Prevention Education funds are required to comply with all assurances and conditions associated with the acceptance of such funds.

## Grade-Level Assignments for Content Areas

The chart below summarizes the minimum recommended grade-level assignments for each of the six content areas.

The health education standards provide guidance for developing health education curricula; they identify what each student in California should know and be able to do at each grade level. With adequate instruction and sustained effort, students in every school should be able to achieve the standards. Some students with special needs may require appropriate accommodations, adaptations, and modifications to meet the standards. Decisions about how best to teach the standards are left to teachers, schools, and LEAs.

Grade-Level Emphasis	Nutrition and Physical Activity	Growth, Development, and Sexual Health		Injury Prevention and Safety	Alcohol, Tobacco, and Other Drugs	Mental, Emotional, and Social Health	Personal and Community Health
		Development and Growth	Sexual Health				
Kindergarten	√	√		√	√	√	√
Grade 1		√		√			√
Grade 2	√				√	√	
Grade 3		√				√	√
Grade 4	√			√	√		
Grade 5	√	√	√				√
Grade 6				√	√	√	



Grades 7 and 8	√	√	√	√	√	√	√
High School (Grades 9 Through 12)	√	√	√	√	√	√	√

# Grade Five

## Nutrition and Physical Activity

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### Standard 1: Essential Concepts

- 1.1.N Describe the food groups, including recommended portions to eat from each food group.
  - 1.2.N Identify key components of the “Nutrition Facts” labels.
  - 1.3.N Explain the relationship between the intake of nutrients and metabolism.
  - 1.4.N Explain why some food groups have a greater number of recommended portions than other food groups.
  - 1.5.N Describe safe food handling and preparation practices.
  - 1.6.N Differentiate between more-nutritious and less-nutritious beverages and snacks.
  - 1.7.N Explain the concept of eating in moderation.
  - 1.8.N Describe the benefits of eating a nutritionally balanced diet consistent with current research-based dietary guidelines.
  - 1.9.N Explain how good health is influenced by healthy eating and being physically active.
  - 1.10.N Describe how physical activity, rest, and sleep are related.
  - 1.11.N Identify physical, academic, mental, and social benefits of regular physical activity.
- 

### Standard 2: Analyzing Influences

- 2.1.N Describe internal and external influences that affect food choices and physical activity.
  - 2.2.N Recognize that family and cultural influences affect food choices.
  - 2.3.N Describe the influence of advertising and marketing techniques on food and beverage choices.
- 

### Standard 3: Accessing Valid Information

- 3.1.N Locate age-appropriate guidelines for eating and physical activity.
  - 3.2.N Interpret information provided on food labels.
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### Standard 4: Interpersonal Communication

- 4.1.N Use communication skills to deal effectively with influences from peers and media regarding food choices and physical activity.

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## **Standard 5: Decision Making**

- 5.1.N Use a decision-making process to identify healthy foods for meals and snacks.
  - 5.2.N Use a decision-making process to determine activities that increase physical fitness.
  - 5.3.N Compare personal eating and physical activity patterns with current age-appropriate guidelines.
- 

## **Standard 6: Goal Setting**

- 6.1.N Monitor personal progress toward a nutritional goal.
  - 6.2.N Monitor personal progress toward a physical activity goal.
- 

## **Standard 7: Practicing Health-Enhancing Behaviors**

- 7.1.N Identify ways to choose healthy snacks based on current research-based guidelines.
  - 7.2.N Demonstrate how to prepare a healthy meal or snack using sanitary food preparation and storage practices.
  - 7.3.N Demonstrate the ability to balance food intake and physical activity.
  - 7.4.N Demonstrate the ability to assess personal physical activity levels.
- 

## **Standard 8: Health Promotion**

- 8.1.N Encourage and promote healthy eating and increased physical activity opportunities at school and in the community.

## **Growth, Development, and Sexual Health<sup>1</sup>**

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### **Standard 1: Essential Concepts**

- 1.1.G Describe the human cycle of reproduction, birth, growth, aging, and death.
- 1.2.G Explain the structure, function, and major parts of the human reproductive system.
- 1.3.G Identify the physical, social, and emotional changes that occur during puberty.
- 1.4.G Define sexually transmitted diseases (STDs), including human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS).
- 1.5.G Describe how HIV is and is not transmitted.
- 1.6.G Recognize that there are individual differences in growth and development, physical appearance, and gender roles.
- 1.7.G Recognize that everyone has the right to establish personal boundaries.

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<sup>1</sup> Education Code (EC) Section 51933(a)(b)(c).

- 1.8.G Recognize that friendship, attraction, and affection can be expressed in different ways.
  - 1.9.G Explain that puberty and physical development can vary considerably and still be normal.
  - 1.10.G Identify personal hygiene practices and health and safety issues related to puberty (e.g., showering, use of sanitary products, deodorant, and athletic supporters).
- 

### **Standard 2: Analyzing Influences**

- 2.1.G Explain how culture, media, and other factors influence perceptions about body image, gender roles, and attractiveness.
  - 2.2.G Describe how heredity influences growth and development.
  - 2.3.G Discuss how changes during puberty affect thoughts, emotions, and behaviors.
- 

### **Standard 3: Accessing Valid Information**

- 3.1.G Recognize parents, guardians, and other trusted adults as resources for information about puberty.
  - 3.2.G Differentiate between reliable and unreliable sources of information about puberty.
- 

### **Standard 4: Interpersonal Communication**

- 4.1.G Use effective communication skills to discuss with parents, guardians, and other trusted adults the changes that occur during puberty.
  - 4.2.G Use healthy and respectful ways to express friendship, attraction, and affection.
  - 4.3.G Demonstrate refusal skills to protect personal boundaries.
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### **Standard 5: Decision Making**

- 5.1.G Describe the importance of identifying personal boundaries.
  - 5.2.G Analyze why it is safe to be a friend to someone who is living with HIV or AIDS.
- 

### **Standard 6: Goal Setting**

- 6.1.G Identify steps to achieve and maintain a healthy and accurate body image.
  - 6.2.G Develop plans to maintain personal hygiene during puberty.
- 

### **Standard 7: Practicing Health-Enhancing Behaviors**

- 7.1.G Engage in behaviors that promote healthy growth and development during puberty.
  - 7.2.G Describe ways people can protect themselves against serious bloodborne communicable diseases.
- 

### **Standard 8: Health Promotion**

Skills for this content area are not identified until grades seven and eight.

## **Injury Prevention and Safety- (Standards determined by LBUSD)**

LBUSD accepts federal *Title IV Safe and Drug-Free Schools and Communities* funding which requires violence prevention instruction at this grade level to comply with all assurances and conditions associated with the acceptance of such funds.

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### **Standard 1: Essential Concepts**

- 1.1.S Identify behaviors that may lead to conflict with others.
  - 1.2.S Describe the different types of bullying and harassment on others.
  - 1.3.S Examine the effects of bullying and harassment on others.
  - 1.4.S Describe ways to seek assistance if worried, abused, or threatened.
  - 1.5.S Explain the dangers of weapons at school, home, and in the community.
  - 1.6.S Define a gang and how it is different from a club, sports team, or clique.
  - 1.7.S Describe the dangers of gang activity.
  - 1.8.S Identify positive alternatives to gang activity.
  - 1.9.S Explain how courtesy, compassion, and respect toward others reduce conflict and promote nonviolent behavior.
  - 1.10.S Demonstrate strategies to get away in cases of inappropriate touching or abduction.
- 

### **Standard 2: Analyzing Influences**

- 2.1.S Analyze how emotions affect safety and violence-related behaviors.
  - 2.2.S Examine the influence of violence in media and technology on health behavior.
  - 2.3.S Explain that most young people do not use violence to deal with problems.
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### **Standard 3: Accessing Valid Information**

- 3.1.S Demonstrate how to access and communicate effectively with emergency services.
  - 3.2.S Identify safe people and places to go to if feeling unsafe or threatened (e.g., police department, fire department, school counselor).
  - 3.3.S Identify trusted adults to report to if people are in danger of hurting themselves or others.
  - 3.4.S Demonstrate how to dial 9-1-1 or other emergency numbers and provide appropriate information.
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### **Standard 4: Interpersonal Communication**

- 4.1.S Demonstrate the ability to use refusal skills in risky situations.
- 4.2.S Practice effective conflict resolution techniques with others.
- 4.3.S Report bullying, harassment, and other dangerous situations.

4.4.S Demonstrate what to say and do when witnessing bullying.

4.5.S Demonstrate what to say and do when witnessing bullying.

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### **Standard 5: Decision Making**

5.1.S Evaluate strategies to avoid potentially dangerous situations.

5.2.S Examine the consequences of bullying and harassment.

5.3.S Analyze the benefits of using nonviolent means to solve conflicts.

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### **Standard 6: Goal Setting**

6.1.S Make a personal commitment to stay away from people involved in gang activity.

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### **Standard 7: Practicing Health-Enhancing Behaviors**

7.1.S Demonstrate strategies to avoid bullying and other types of harassment.

7.2.S Demonstrate strategies to get away in cases of inappropriate touching or attempted abduction.

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### **Standard 8: Health Promotion**

8.1.S Offer friendship and support to someone who was bullied.

## **Alcohol, Tobacco, and Other Drugs - (Standards determined by LBUSD)**

LBUSD accepts federal *Title IV Safe and Drug-Free Schools and Communities* funding which requires ATOD instruction at this grade level to comply with all assurances and conditions associated with the acceptance of such funds.

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### **Standard 1: Essential Concepts**

1.1.A Describe the short- and long-term effects of alcohol, tobacco, and other drugs, including inhalants.

1.2.A Identify ways to cope with situations involving alcohol, tobacco, and other drugs.

1.3.A Explain the difference between medicines and illicit drugs.

1.4.A Explain why individual reactions to alcohol and drug use may vary.

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### **Standard 2: Analyzing Influences**

2.1.N Identify internal and external influences that affect the use of alcohol, tobacco, and other drugs.

2.2.N Examine advertising strategies used for alcohol, tobacco, and other drugs.

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### **Standard 3: Accessing Valid Information**

3.1.S Identify sources of valid information regarding alcohol, tobacco, and other drugs.

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### **Standard 4: Interpersonal Communication**

4.1.S Demonstrate refusal skills to resist the pressure to experiment with alcohol, tobacco, and other drugs.

4.2.S Practice effective verbal communication skills to request assistance in situations where alcohol, tobacco, and other drugs are being used.

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### **Standard 5: Decision Making**

5.1.S Make a plan to choose healthy alternatives to tobacco and drug use.

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### **Standard 6: Goal Setting**

6.1.S Make a plan to choose healthy alternatives to tobacco and drug use.

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### **Standard 7: Practicing Health-Enhancing Behaviors**

7.1.S Use a variety of effective coping strategies when faced with alcohol, tobacco, and other drug use and abuse by family and/or friends.

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### **Standard 8: Health Promotion**

8.1.S Encourage others to be free of alcohol, tobacco, and other drugs.

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## **Personal and Community Health**

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### **Standard 1: Essential Concepts**

1.1.P Identify effective personal health strategies that reduce illness and injury (e.g., adequate sleep, ergonomics, sun safety, hand washing, hearing protection, and tooth brushing and tooth flossing).

1.2.P Explain how viruses and bacteria affect the immune system and impact health.

1.3.P Describe how environmental conditions affect personal health.

1.4.P Describe the personal hygiene needs associated with the onset of puberty.

1.5.P Define life-threatening situations (e.g., heart attacks, asthma attacks, poisonings).

1.6.P Explain that all individuals have a responsibility to protect and preserve the environment.

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## **Standard 2: Analyzing Influences**

2.1.P Identify internal and external influences that affect personal health practices.

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## **Standard 3: Accessing Valid Information**

3.1.P Identify sources of valid information about personal health products and services.

3.2.P Identify individuals who can assist with health-related issues and potentially life-threatening health conditions (e.g., asthma episodes or seizures).

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## **Standard 4: Interpersonal Communication**

4.1.P Practice effective communication skills to seek help for health-related problems or emergencies.

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## **Standard 5: Decision Making**

5.1.P Use a decision-making process to determine personal choices that promote personal, environmental, and community health.

5.2.P Use a decision-making process to determine when medical assistance is needed.

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## **Standard 6: Goal Setting**

6.1.P Monitor progress toward a goal to help protect the environment.

6.2.P Monitor progress toward a personal health goal.

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## **Standard 7: Practicing Health-Enhancing Behaviors**

7.1.P Practice good personal and dental hygiene.

7.2.P Demonstrate personal responsibility for health habits.

7.3.P Practice strategies to protect against the harmful effects of the sun.

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## **Standard 8: Health Promotion**

8.1.P Encourage others to minimize pollution in the environment.



# Appendix

## The Overarching Health Education Content Standards

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### **Standard 1: Essential Health Concepts**

All students will comprehend essential concepts related to enhancing health.

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### **Standard 2: Analyzing Health Influences**

All students will demonstrate the ability to analyze internal and external influences that affect health.

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### **Standard 3: Accessing Valid Health Information**

All students will demonstrate the ability to access and analyze health information, products, and services.

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### **Standard 4: Interpersonal Communication**

All students will demonstrate the ability to use interpersonal communication skills to enhance health.

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### **Standard 5: Decision Making**

All students will demonstrate the ability to use decision-making skills to enhance health.

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### **Standard 6: Goal Setting**

All students will demonstrate the ability to use goal-setting skills to enhance health.

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### **Standard 7: Practicing Health-Enhancing Behaviors**

All students will demonstrate the ability to practice behaviors that reduce risk and promote health.

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### **Standard 8: Health Promotion**

All students will demonstrate the ability to promote and support personal, family, and community health.

# Glossary

<b>accessing valid information</b>	The skills needed to find and use valid sources of health information or services.
<b>alcohol, tobacco, and other drugs</b>	The area of health education that focuses on safe use of prescription and over-the-counter drugs, not drinking alcohol, avoiding tobacco and illegal drug use, and practicing protective factors.
<b>analyzing influences</b>	The skills needed to analyze how internal and external influences (both positive and negative) affect health-related behaviors. <ul style="list-style-type: none"><li>• <i>internal influences</i>: thoughts and emotions (e.g., likes and dislikes, curiosity, interests, and fears) and hereditary factors.</li><li>• <i>external influences</i>: situations or settings involving family members, culture, ethnicity, geographic location, peers, societal pressure, media and advertising sources, and technology.</li></ul>
<b>Centers for Disease Control and Prevention (CDC)</b>	The lead federal public health agency responsible for protecting the health and safety of the people in the United States.
<b>chronic disease</b>	A disease that persists for a long time. Chronic diseases generally cannot be prevented by vaccines or cured by medication. Risky behaviors—particularly tobacco use, lack of physical activity, and poor eating habits—are major contributors to the leading chronic diseases (e.g., heart disease, diabetes, and lung cancer).
<b>communicable disease</b>	An illness caused by pathogens that can be spread from one living thing to another. Examples include chicken pox, measles, flu, tuberculosis, and strep throat.
<b>decision making</b>	Analytical skills needed to evaluate relevant factors in order to select the most desirable outcomes.
<b>disease prevention</b>	The processes of avoiding, preventing, reducing, or alleviating disease to promote, preserve, and restore health and minimize suffering and distress.
<b>environmental health</b>	The area of health that focuses on staying informed about environmental issues; keeping air and water clean and noise at safe levels; recycling and disposing of waste properly; conserving energy and natural resources; and being an advocate for the environment.
<b>essential concepts</b>	The “functional knowledge” necessary for students to understand and practice health-promoting behaviors.
<b>FDA</b>	The U.S. Food and Drug Administration.
<b>functional knowledge</b>	Important concepts and information necessary to improve health-enhancing decisions, beliefs, skills, and practices. Examples of functional knowledge include accurate information about the following: risks of health-related behaviors; internal and external influences on health-risk behavior; and socially normative behaviors.

<b>goal setting</b>	The skills needed to set realistic personal goals that can be safely achieved through reasonable planning and effort.
<b>growth, development, and sexual health</b>	<ul style="list-style-type: none"> <li>• <i>growth and development</i>: the area of health education that focuses on the growth and development of the human body; keeping body systems healthy; developing habits that promote healthful development and aging; and choosing behaviors that reduce the risk of HIV/STD infection.</li> <li>• <i>sexual health</i>: the area of health education encompassing a broad scope of concepts and skills, including acquiring information about sexual development, reproductive health, interpersonal relationships, body image, and gender roles; recognizing habits that protect female and male reproductive health; and learning about pregnancy, childbirth, and the development of infants and children. It also includes skill development in areas such as communication, decision making, refusal techniques, and goal setting. Sexual health topics are grounded in the premise that sexuality is a natural, ongoing process that begins in infancy and continues through life.</li> </ul>
<b>health</b>	The World Health Organization (WHO) defines health as “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.”* It is a functional state that allows a person to achieve other goals and engage in activities for a productive life.
<b>health education</b>	Health education is a planned, sequential, kindergarten-through-grade-twelve curriculum that addresses the physical, mental, emotional, and social dimensions of health.
<b>health literacy</b>	The capacity of an individual to obtain, interpret, and understand basic health information and services and the competence to use such information and services to enhance health.
<b>health promotion</b>	Any planned combination of educational, political, environmental, regulatory, or organizational mechanisms that support actions and conditions conducive to the health of individuals, families, groups, and communities.
<b>health-related skills</b>	Ability to translate knowledge into actions that enable students to deal with social pressures, avoid or reduce risk-taking behaviors, enhance and maintain personal health, and promote the health of others. These include communication skills; refusal techniques for avoiding unhealthy behaviors; the ability to assess the accuracy of information and make informed decisions; and planning and goal-setting skills.
<b>infectious disease</b>	See “communicable disease.”

<b>injury prevention and safety</b>	The area of health education that focuses on safety practices to reduce the risk of unintentional injuries to self and others. This area includes protective factors to reduce violence and prevent gangs and weapons;† safety guidelines for weather or natural disasters, fires, and poisoning; bicycling and sport safety; motor vehicle safety; and helping others with basic first aid skills.
<b>interpersonal communication</b>	The ability to convey appropriate and effective verbal and nonverbal information; the expression of needs and ideas to develop and maintain healthy personal relationships. In the context of health education, interpersonal communication includes both refusal and conflict resolution skills.
<b>mental, emotional, and social health</b>	The area of health education that includes the ability to express needs, wants, and emotions in positive ways; to manage anger and conflict; and to deal with frustrations. This area involves practicing life skills, making responsible decisions, developing good character, following a plan to manage stress, and being resilient during difficult times.
<b>noncommunicable disease</b>	See “chronic disease.”
<b>nutrition and physical activity</b>	Nutrition encompasses healthy eating, which is associated with reduced risk of many diseases including the three leading causes of death in the United States: heart disease, cancer, and stroke. Healthy eating in childhood and adolescence is important for proper growth and development and can prevent obesity, type 2 diabetes, dental caries, and many other health problems. Physical activity is any body movement that is produced by skeletal muscles and that substantially increases energy expenditure.
<b>personal and community health</b>	The area of health education that focuses on the priority a person assigns to being health literate, maintaining and improving health, preventing disease, and reducing risky health-related behaviors. This instructional area involves staying informed about environmental issues, initiatives to protect the environment, and being an advocate for the environment. Community health education focuses on knowledge of laws to protect health; recognizing consumer rights; choosing healthy forms of entertainment; analyzing ways in which messages are delivered through technology; making responsible choices about health care providers and products; and investigating public health needs.
<b>practicing health-enhancing behaviors</b>	The area of health education focusing on the skills needed to practice healthy and safe behaviors independently.
<b>protective factor</b>	Something that increases the likelihood of a positive outcome.
<b>refusal skills</b>	Assertive and effective communication skills needed to object to participation in an action or behavior.

**sexually transmitted disease (STD)**

A communicable disease caused by pathogens that are transmitted from one infected person to another during intimate sexual contact.

**Standard Precautions**

According to the Centers for Disease Control and Prevention, Standard Precautions are steps taken to prevent the spread of disease by treating all human blood, body fluids, and secretions as if they contain transmissible infectious agents such as human immunodeficiency virus (HIV) and hepatitis B virus (HBV). Standard Precautions combine the major features of Universal Precautions and Body Substance Isolation.

**trusted adult**

An adult person in whom confidence is placed, such as a parent, guardian, teacher, counselor, health care professional, cleric, police officer, firefighter, or relative.

**Universal Precautions**

See "Standard Precautions."

**weapon**

As referenced in *Education Code* Section 49330, an injurious object capable of inflicting substantial bodily damage. An "injurious object" does not include personal possessions or apparel items that a school-age child reasonably may be expected to possess or to wear.

**wellness**

An approach to health that focuses on balancing the many aspects of a person's life through the adoption of health-enhancing behaviors.