



## **GRADE LEVEL CONTENT EXPECTATIONS**



Kindergarten

## Welcome to Michigan's Health Education Content Standards and Expectations for Kindergarten

## Why Develop Content Expectations for Health?

**Good health is necessary for academic success.** Like adults at work, students at school have difficulty being successful if they are depressed, tired, bullied, stressed, sick, using alcohol or other drugs, undernourished, or abused. Research shows that effective health education helps students increase their health knowledge and improve their health skills and behaviors, especially those behaviors that have the greatest effect on health.

The Centers for Disease Control and Prevention (CDC) has identified the risk behavior areas that have the greatest effect on the short-term and long-term health of young people. Patterns of unhealthy eating, physical inactivity, and tobacco use are often established in childhood and adolescence, and are by far the leading causes of death among adults. Injury and violence, including suicide and alcohol-related traffic crashes, are the leading causes of death among children and youth. Each year approximately one in four Michigan high school students reports having consumed five or more drinks in a row during the previous month. These behavioral areas should be emphasized in an effective elementary health education program: healthy eating, physical activity, alcohol, tobacco, and other drug prevention, and injury and violence prevention.

In its Policy on Comprehensive School Health Education, the State Board addresses these risks by making certain recommendations. The following are those intended for Kindergarten through Grade Three.

- Provide at least 50 hours of health at each grade, Prekindergarten through Grade Twelve, to give students adequate time to learn and practice health habits and skills for a lifetime.
- Focus on helping young people develop and practice personal and social skills, such as communication and decision making, in order to deal effectively with health-risk situations.
- Address social and media influences on student behaviors and help students identify healthy alternatives to specific high-risk behaviors.
- Emphasize critical knowledge and skills that students need in order to obtain, understand, and use basic health information and services in ways that enhance healthy living.
- Focus on behaviors that have the greatest effect on health, especially those related to nutrition; physical activity; violence and injury; alcohol and other drug use; and tobacco use.
- Build functional knowledge and skills, from year to year, that are developmentally appropriate.
- Include accurate and up-to-date information, and be appropriate to students' developmental levels, personal behaviors, and cultural backgrounds.

The content expectations contained in this document are intended to help schools address these recommendations.

## **Overview of the Content Expectations**

The Health Education Content Expectations reflect legal requirements, best practices, and current research in the teaching and learning of health education. They build from the Michigan Health Education Standards and Benchmarks (1996) and the State Board of Education's Policy on Comprehensive School Health Education (2004). These content expectations represent a vision for a relevant health education curriculum that addresses critical health knowledge and skills for successfully maintaining a healthy lifestyle during a child's school years and beyond.

The Health Education Content Standards and Expectations were developed with the input of work groups made up of health content experts and faculty from teacher preparation programs, focus groups of teachers and parents, and online reviews by grade level teachers. They are aligned with the 2006 National Health Education Standards; assessment items developed by the State Collaborative for Assessment and Student Standards, Health Education Project of the Council of Chief State School Officers; and the *Michigan Model for Health® Curriculum*. Students whose work is guided by these standards and expectations will be prepared for responsible and healthful living, at school, at home, and in the workplace.

## Michigan Health Education Content Standards (2006)

I. Core Concepts	All students will apply health promotion and disease prevention
------------------	---

concepts and principles to personal, family, and community health issues.

2. Access Information All students will access valid health information and appropriate health

promoting products and services.

3. Health Behaviors All students will practice health enhancing behaviors and avoid or reduce

health risks.

4. Influences All students will analyze the influence of family, peers, culture, media, and

technology on health.

Goal SettingAll students will use goal setting skills to enhance health.

**6. Decision Making**All students will use decision-making skills to enhance health.

7. Social Skills All students will demonstrate effective interpersonal communication and

other social skills which enhance health.

8. Advocacy All students will demonstrate advocacy skills for enhanced personal,

family, and community health.

Please note that, while all the Content Standards are addressed in these Grade Level Content Expectations for Health Education as a whole, not all standards will be addressed in each strand.

## **Health Education Expectations**



#### STRAND I: NUTRITION AND PHYSICAL ACTIVITY

#### Standard 1: Core Concepts

- 1.1 Describe how consuming a variety of healthy foods and beverages helps a person stay healthy.
- 1.2 Describe how being physically active helps a person stay healthy.
- 1.3 Describe how drinking water helps a person stay healthy.

#### Standard 3: Health Behaviors

- 1.4 Generate examples of physical activities that are personally enjoyable.
- 1.5 Select a variety of foods that can be eaten for healthy snacks.



#### STRAND 2: ALCOHOL, TOBACCO, AND OTHER DRUGS

#### Standard 1: Core Concepts

- 2.1 Identify household products that are harmful if touched, ingested, or inhaled.
- 2.2 Describe ways that over-the-counter and prescription medicines can be helpful or harmful.

#### **Standard 2: Access Information**

2.3 Identify trustworthy sources of accurate information about potentially poisonous household products.

#### Standard 3: Health Behaviors

- 2.4 Explain rules for handling household products and avoiding poisons.
- 2.5 Describe how to safely use medicines.



#### **STRAND 3: SAFETY**

#### Standard 1: Core Concepts

- 3.1 Describe pedestrian hazards and safe pedestrian behaviors.
- 3.2 Identify dangerous objects and weapons.
- 3.3 Describe the characteristics of appropriate touch and inappropriate touch.
- 3.4 Explain that a child is not at fault if someone touches him or her in an inappropriate way.

#### **Standard 2: Access Information**

- 3.5 Demonstrate the procedure for calling 911 and explain when it is appropriate to do so.
- 3.6 Demonstrate how to ask trusted adults for help.

#### Standard 3: Health Behaviors

- 3.7 Demonstrate safe pedestrian behaviors.
- 3.8 Describe dangerous and destructive situations that need to be reported to an adult.
- 3.9 Apply a rule and demonstrate actions to use in hypothetical situations when weapons may be present.
- 3.10 Generate examples of safe places one might go if feeling personally threatened.
- 3.11 Apply strategies to avoid personally unsafe situations.
- 3.12 Apply strategies to get away in hypothetical cases of inappropriate touching or abduction.



#### STRAND 4: SOCIAL AND EMOTIONAL HEALTH

(Note: Teaching these standards is central to the implementation of an effective Positive Behavior Support system.)

#### Standard 1: Core Concepts

4.1 Identify and describe different kinds of feelings.

#### **Standard 2: Access Information**

4.2 Identify and locate people who can help at home and school.

#### Standard 3: Health Behaviors

- **4.3** Describe and demonstrate ways to be responsible at home and school.
- 4.4 Demonstrate the ability to recognize and express a variety of feelings appropriately.
- 4.5 Identify and demonstrate strategies to manage strong feelings.

#### Standard 7: Social Skills

- 4.6 Identify and practice strategies to make friends.
- **4.7** Demonstrate giving and accepting a compliment or statement of appreciation.
- **4.8** Describe situations when it is appropriate to use "please," "thank you," "excuse me," and "I am sorry."
- 4.9 Apply "please," "thank you," "excuse me," and "I am sorry" to appropriate situations.



#### **STRAND 5: PERSONAL HEALTH AND WELLNESS**

#### Standard 1: Core Concepts

- 5.1 Explain the importance of taking care of teeth and having one's own toothbrush to prevent disease.
- **5.2** Explain the importance of dental health cleanings and exams.
- **5.3** Explain the importance of proper hand washing to prevent disease.

#### Standard 3: Health Behaviors

- **5.4** Demonstrate proper tooth brushing techniques.
- 5.5 Demonstrate proper hand washing to prevent the spread of germs.

#### **Standard 8: Advocacy**

**5.6** Encourage peers to make positive choices for personal health and wellness.

### Acknowledgements

#### **Academic Review**

Cheryl Blair, Kent ISD

Al Craven, Genesee ISD

Marty Doring, Bay-Arenac ISD

Mariane Fahlman, Wayne State University

Marianne Frauenknecht, Western Michigan University

Kathy Gibson, Wayne County RESA

Beth Kaiser, Waverly Community Schools

Pauline Pruneau, Oakland Schools

Pamela Sook, Gratiot-Isabella RESD

#### **Health Content Expert Review**

Beverly Baroni-Yeglic, Southgate Community School District

Shannon Carney Oleksyk, Michigan Department of Community Health

Deborah Grischke, MSU Extension: Michigan TEAM Nutrition

Jessica Grzywacz, Michigan Department of Community Health

Karen Krabill Yoder, Michigan Department of Community Health

Alicia Sledge, Michigan Office of Highway Safety Planning

#### **Internal Review**

Nicholas Drzal, Michigan Department of Education

Barbara Flis, Parent Action for Healthy Kids

 $\ \, \hbox{Kyle Guerrant, Michigan Department of Education} \\$ 

Nancy Haney, Haney & Associates

Nancy Hudson, Council of Chief State School Officers

Martha Neilsen, Michigan Department of Education

Christine Reiff, Michigan Department of Labor & Economic Growth

Merry Stanford, Michigan Department of Education



#### Michigan Department of Education

Grants Coordination and School Support Mary Ann Chartrand, Director (517) 373-4013 www.michigan.gov/mde



# Michigan State Board of Education

Kathleen N. Straus
President

**Bloomfield Township** 

John C.Austin Vice President Ann Arbor

Carolyn L. Curtin Secretary Evart

Marianne Yared McGuire
Treasurer
Detroit

Nancy Danhof
NASBE Delegate
East Lansing

Elizabeth W. Bauer Member Birmingham

Reginald M.Turner
Member
Detroit

Casandra E. Ulbrich Member

Rochester Hills

Gov. Jennifer M. Granholm Ex Officio

> Michael P. Flanagan Chairman Superintendent of Public Instruction Ex Officio

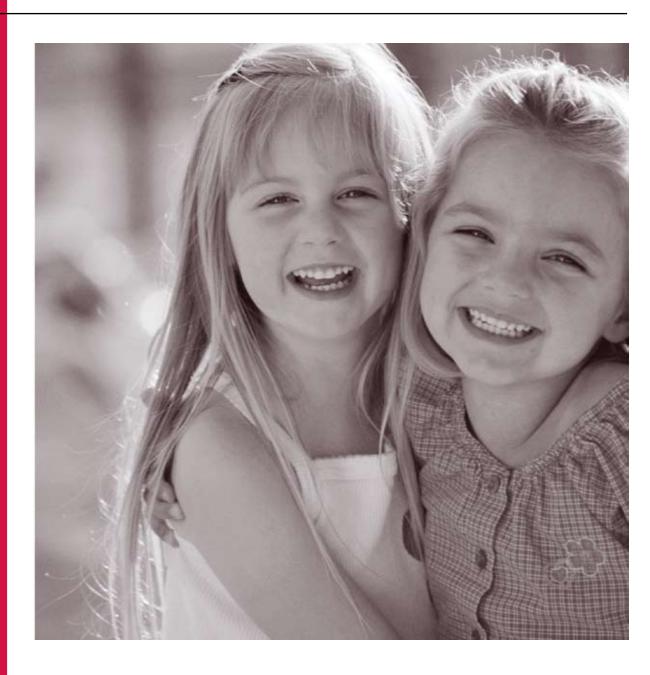
Carol Wolenberg
Deputy Superintendent

Mary Ann Chartrand
Director
Grants Coordination
and School Support





## **GRADE LEVEL CONTENT EXPECTATIONS**



**Grade One** 

## Welcome to Michigan's Health Education Content Standards and Expectations for Grade One

### Why Develop Content Expectations for Health?

**Good health is necessary for academic success.** Like adults at work, students at school have difficulty being successful if they are depressed, tired, bullied, stressed, sick, using alcohol or other drugs, undernourished, or abused. Research shows that effective health education helps students increase their health knowledge and improve their health skills and behaviors, especially those behaviors that have the greatest effect on health.

The Centers for Disease Control and Prevention (CDC) has identified the risk behavior areas that have the greatest effect on the short-term and long-term health of young people. Patterns of unhealthy eating, physical inactivity, and tobacco use are often established in childhood and adolescence, and are by far the leading causes of death among adults. Injury and violence, including suicide and alcohol-related traffic crashes, are the leading causes of death among children and youth. Each year approximately one in four Michigan high school students reports having consumed five or more drinks in a row during the previous month. These behavioral areas should be emphasized in an effective elementary health education program: healthy eating, physical activity, alcohol, tobacco, and other drug prevention, and injury and violence prevention.

In its Policy on Comprehensive School Health Education, the State Board addresses these risks by making certain recommendations. The following are those intended for Kindergarten through Grade Three.

- Provide at least 50 hours of health at each grade, Prekindergarten through Grade Twelve, to give students adequate time to learn and practice health habits and skills for a lifetime.
- Focus on helping young people develop and practice personal and social skills, such as communication and decision making, in order to deal effectively with health-risk situations.
- Address social and media influences on student behaviors and help students identify healthy alternatives to specific high-risk behaviors.
- Emphasize critical knowledge and skills that students need in order to obtain, understand, and use basic health information and services in ways that enhance healthy living.
- Focus on behaviors that have the greatest effect on health, especially those related to nutrition; physical activity; violence and injury; alcohol and other drug use; and tobacco use.
- Build functional knowledge and skills, from year to year, that are developmentally appropriate.
- Include accurate and up-to-date information, and be appropriate to students' developmental levels, personal behaviors, and cultural backgrounds.

The content expectations contained in this document are intended to help schools address these recommendations.

## **Overview of the Content Expectations**

The Health Education Content Expectations reflect legal requirements, best practices, and current research in the teaching and learning of health education. They build from the Michigan Health Education Standards and Benchmarks (1996) and the State Board of Education's Policy on Comprehensive School Health Education (2004). These content expectations represent a vision for a relevant health education curriculum that addresses critical health knowledge and skills for successfully maintaining a healthy lifestyle during a child's school years and beyond.

The Health Education Content Standards and Expectations were developed with the input of work groups made up of health content experts and faculty from teacher preparation programs, focus groups of teachers and parents, and online reviews by grade level teachers. They are aligned with the 2006 National Health Education Standards; assessment items developed by the State Collaborative for Assessment and Student Standards, Health Education Project of the Council of Chief State School Officers; and the Michigan Model for Health® Curriculum. Students whose work is guided by these standards and expectations will be prepared for responsible and healthful living, at school, at home, and in the workplace.

## Michigan Health Education Content Standards (2006)

I. Core Concepts	All students will apply health promotion and disease prevention
------------------	---

concepts and principles to personal, family, and community health issues.

2. Access Information All students will access valid health information and appropriate health

promoting products and services.

3. Health Behaviors All students will practice health enhancing behaviors and avoid or reduce

health risks.

4. Influences All students will analyze the influence of family, peers, culture, media, and

technology on health.

Goal SettingAll students will use goal setting skills to enhance health.

**6. Decision Making**All students will use decision-making skills to enhance health.

7. Social Skills All students will demonstrate effective interpersonal communication and

other social skills which enhance health.

8. Advocacy All students will demonstrate advocacy skills for enhanced personal,

family, and community health.

Please note that, while all the Content Standards are addressed in these Grade Level Content Expectations for Health Education as a whole, not all standards will be addressed in each strand.



### STRAND I: NUTRITION AND PHYSICAL ACTIVITY

#### Standard 1: Core Concepts

- 1.1 Describe the benefits of eating healthy snacks.
- 1.2 Describe the benefits of being physically active.
- 1.3 Describe the health benefits of drinking water, compared to other beverages.
- 1.4 Classify foods according to the food groups.
- 1.5 Describe how physical activity, rest, and sleep help a person stay healthy.

#### Standard 3: Health Behaviors

- 1.6 Explain the importance of eating a variety of foods from all of the food groups.
- 1.7 Suggest a food from each of the food groups that could be eaten as a healthy snack.



#### STRAND 2: ALCOHOL, TOBACCO, AND OTHER DRUGS

#### Standard 1: Core Concepts

- 2.1 Identify household products that are harmful if touched, ingested, or inhaled.
- 2.2 Describe ways that over-the-counter and prescription medicines can be helpful or harmful.
- 2.3 Explain the differences between over-the-counter and prescription medicines and illicit drugs.
- 2.4 State that all forms of tobacco products contain harmful chemicals, including the drug nicotine.

#### **Standard 2: Access Information**

- 2.5 Identify trustworthy adults who are sources of accurate information about potentially poisonous household products.
- **2.6** Apply knowledge of product label warnings to gain accurate information about potentially poisonous household products.

#### Standard 3: Health Behaviors

- 2.7 Apply rules for handling household products and avoiding poisons.
- 2.8 Describe how to safely use medicines.
- 2.9 Apply strategies to hypothetical situations to avoid exposure to secondhand smoke.



#### **STRAND 3: SAFETY**

#### Standard 1: Core Concepts

- 3.1 Describe fire and burn hazards.
- 3.2 Describe wheeled recreation hazards.

#### **Standard 2: Access Information**

3.3 Demonstrate the procedure for using 911 to get help in emergencies.

#### Standard 3: Health Behaviors

- 3.4 Apply strategies to prevent fires and burns to hypothetical situations.
- 3.5 Demonstrate actions to take in a fire emergency.
- 3.6 Describe situations that are dangerous, destructive, and disturbing and that need to be reported to an adult.
- 3.7 Practice escaping unsafe situations by getting away, leaving, and telling an adult.
- 3.8 Apply strategies and rules for safe wheeled recreation, including the proper use of safety gear.



#### STRAND 4: SOCIAL AND EMOTIONAL HEALTH

(Note: Teaching these standards is central to the implementation of an effective Positive Behavior Support system.)

#### Standard 1: Core Concepts

- 4.1 Describe ways family members and friends help each other.
- 4.2 Explain the role of listening and paying attention in building and maintaining friendships.

#### Standard 3: Health Behaviors

- 4.3 Apply skills to find out how others are feeling.
- 4.4 Apply skills to predict the potential feelings of others.

#### Standard 6: Decision Making

- **4.5** Describe characteristics of people who can help make decisions and solve problems.
- 4.6 Explain the decision making and problem solving steps.
- 4.7 Apply the steps to making a decision or solving a problem.

#### Standard 7: Social Skills

- 4.8 Apply effective listening and attending skills.
- **4.9** Demonstrate giving and accepting a compliment or statement of appreciation.
- 4.10 Apply "please," "thank you," "excuse me," and "I am sorry" to appropriate situations.



#### STRAND 5: PERSONAL HEALTH AND WELLNESS

#### Standard 1: Core Concepts

**5.1** Explain the importance of taking care of teeth.

#### Standard 3: Health Behaviors

- 5.2 Demonstrate proper tooth brushing techniques.
- **5.3** Demonstrate skills to reduce the spread of germs.

#### **Acknowledgements**

#### **Academic Review**

Cheryl Blair, Kent ISD

Al Craven, Genesee ISD

Marty Doring, Bay-Arenac ISD

Mariane Fahlman, Wayne State University

Marianne Frauenknecht, Western Michigan University

Kathy Gibson, Wayne County RESA

Pauline Pruneau, Oakland Schools

Kailani Sarjeant, New Branches P.S.A.

Pamela Sook, Gratiot-Isabella RESD

#### **Health Content Expert Review**

Beverly Baroni-Yeglic, Southgate Community School District
Shannon Carney Oleksyk, Michigan Department of Community Health
Deborah Grischke, MSU Extension: Michigan TEAM Nutrition
Jessica Grzywacz, Michigan Department of Community Health
Karen Krabill Yoder, Michigan Department of Community Health

#### **Internal Review**

Nicholas Drzal, Michigan Department of Education

Barbara Flis, Parent Action for Healthy Kids

Kyle Guerrant, Michigan Department of Education

Nancy Haney, Haney & Associates

Nancy Hudson, Council of Chief State School Officers

Martha Neilsen, Michigan Department of Education

Christine Reiff, Michigan Department of Labor & Economic Growth

Merry Stanford, Michigan Department of Education



#### Michigan Department of Education

Grants Coordination and School Support Mary Ann Chartrand, Director (517) 373-4013 www.michigan.gov/mde



# Michigan State Board of Education

Kathleen N. Straus
President

Bloomfield Township

John C.Austin Vice President Ann Arbor

Carolyn L. Curtin Secretary Evart

Marianne Yared McGuire
Treasurer
Detroit

Nancy Danhof NASBE Delegate East Lansing

Elizabeth W. Bauer Member Birmingham

Reginald M.Turner
Member
Detroit

Casandra E. Ulbrich
Member
Rochester Hills

Gov. Jennifer M. Granholm

Ex Officio

Michael P. Flanagan

Chairman

Superintendent of

Public Instruction Ex Officio

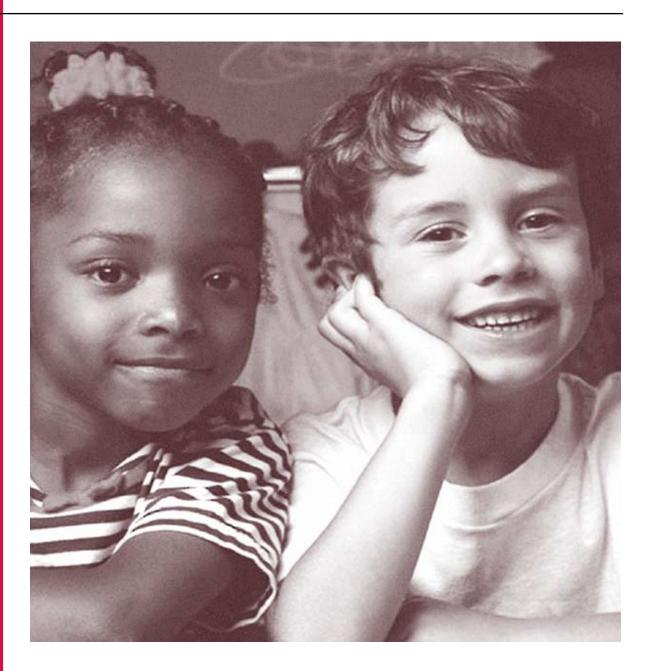
Carol Wolenberg
Deputy Superintendent

Mary Ann Chartrand
Director
Grants Coordination
and School Support





## **GRADE LEVEL CONTENT EXPECTATIONS**



**Grade Two** 

## Welcome to Michigan's Health Education Content Standards and Expectations for Grade Two

## Why Develop Content Expectations for Health?

Good health is necessary for academic success. Like adults at work, students at school have difficulty being successful if they are depressed, tired, bullied, stressed, sick, using alcohol or other drugs, undernourished, or abused. Research shows that effective health education helps students increase their health knowledge and improve their health skills and behaviors, especially those behaviors that have the greatest effect on health.

The Centers for Disease Control and Prevention (CDC) has identified the risk behavior areas that have the greatest effect on the short-term and long-term health of young people. Patterns of unhealthy eating, physical inactivity, and tobacco use are often established in childhood and adolescence, and are by far the leading causes of death among adults. Injury and violence, including suicide and alcohol-related traffic crashes, are the leading causes of death among children and youth. Each year approximately one in four Michigan high school students reports having consumed five or more drinks in a row during the previous month. These behavioral areas should be emphasized in an effective elementary health education program: healthy eating, physical activity, alcohol, tobacco, and other drug prevention, and injury and violence prevention.

In its Policy on Comprehensive School Health Education, the State Board addresses these risks by making certain recommendations. The following are those intended for Kindergarten through Grade Three.

- Provide at least 50 hours of health at each grade, Prekindergarten through Grade Twelve, to give students adequate time to learn and practice health habits and skills for a lifetime.
- Focus on helping young people develop and practice personal and social skills, such as communication and decision making, in order to deal effectively with health-risk situations.
- Address social and media influences on student behaviors and help students identify healthy alternatives to specific high-risk behaviors.
- Emphasize critical knowledge and skills that students need in order to obtain, understand, and use basic health information and services in ways that enhance healthy living.
- Focus on behaviors that have the greatest effect on health, especially those related to nutrition; physical activity; violence and injury; alcohol and other drug use; and tobacco use.
- Build functional knowledge and skills, from year to year, that are developmentally appropriate.
- Include accurate and up-to-date information, and be appropriate to students' developmental levels, personal behaviors, and cultural backgrounds.

The content expectations contained in this document are intended to help schools address these recommendations.

## **Overview of the Content Expectations**

The Health Education Content Expectations reflect legal requirements, best practices, and current research in the teaching and learning of health education. They build from the Michigan Health Education Standards and Benchmarks (1996) and the State Board of Education's Policy on Comprehensive School Health Education (2004). These content expectations represent a vision for a relevant health education curriculum that addresses critical health knowledge and skills for successfully maintaining a healthy lifestyle during a child's school years and beyond.

The Health Education Content Standards and Expectations were developed with the input of work groups made up of health content experts and faculty from teacher preparation programs, focus groups of teachers and parents, and online reviews by grade level teachers. They are aligned with the 2006 National Health Education Standards; assessment items developed by the State Collaborative for Assessment and Student Standards, Health Education Project of the Council of Chief State School Officers; and the Michigan Model for Health® Curriculum. Students whose work is guided by these standards and expectations will be prepared for responsible and healthful living, at school, at home, and in the workplace.

## Michigan Health Education Content Standards (2006)

ı. c	ore C	Concepts	Al	ll student:	s will	apply	health	promotion	and	disease	preventi	on	

concepts and principles to personal, family, and community health issues.

2. Access Information All students will access valid health information and appropriate health

promoting products and services.

3. Health Behaviors All students will practice health enhancing behaviors and avoid or reduce

health risks.

4. Influences All students will analyze the influence of family, peers, culture, media, and

technology on health.

Goal SettingAll students will use goal setting skills to enhance health.

**6. Decision Making**All students will use decision-making skills to enhance health.

7. Social Skills All students will demonstrate effective interpersonal communication and

other social skills which enhance health.

8. Advocacy All students will demonstrate advocacy skills for enhanced personal,

family, and community health.

Please note that, while all the Content Standards are addressed in these Grade Level Content Expectations for Health Education as a whole, not all standards will be addressed in each strand.



#### STRAND I: NUTRITION AND PHYSICAL ACTIVITY

#### Standard 1: Core Concepts

- 1.1 Explain the importance of eating a variety of foods from all of the food groups.
- 1.2 Classify foods into the food groups.
- **1.3** Describe the characteristics of combination foods.
- 1.4 Describe the characteristics of foods and beverages that should be limited.

#### Standard 3: Health Behaviors

- 1.5 Provide examples of combination foods.
- 1.6 Provide examples of foods and beverages that should be limited.
- 1.7 Generate examples of a variety of physical activities that can be enjoyed when in or near the water.



#### STRAND 2: ALCOHOL, TOBACCO, AND OTHER DRUGS

#### Standard 1: Core Concepts

- 2.1 Explain that all forms of tobacco products contain harmful chemicals, including the drug nicotine.
- 2.2 Describe the impact of using tobacco, including that it is addictive.
- 2.3 Describe the impact of consuming food or beverages that contain caffeine.
- 2.4 Describe the impact of using alcohol, including that it changes how a person feels, thinks, and acts.

#### Standard 3: Health Behaviors

- 2.5 Suggest alternative foods and beverages that are caffeine free.
- 2.6 Demonstrate strategies to avoid exposure to secondhand smoke.



#### **STRAND 3: SAFETY**

#### Standard 1: Core Concepts

- 3.1 Describe safety precautions when in or near water.
- 3.2 Identify appropriate and inappropriate touch.
- 3.3 Explain that a child is not at fault if someone touches him or her in an inappropriate way.

#### **Standard 2: Access Information**

3.4 Demonstrate how to ask a trusted adult for help.

#### Standard 3: Health Behaviors

- 3.5 Apply wheeled recreation rules.
- 3.6 Demonstrate the use of wheeled recreation safety gear.
- 3.7 Apply strategies to avoid personally unsafe situations.
- 3.8 Demonstrate strategies to get away in cases of inappropriate touching or abduction.



#### **STRAND 4: SOCIAL AND EMOTIONAL HEALTH**

(Note: Teaching these standards is central to the implementation of an effective Positive Behavior Support system.)

#### Standard 1: Core Concepts

- **4.1** Describe the characteristics of touch which is caring and important to positive relationships.
- **4.2** Analyze the importance of identifying and expressing feelings to maintain personal health and healthy relationships.
- 4.3 Describe situations that may elicit mixed emotions.

#### **Standard 2: Access Information**

4.4 Identify people who can help make decisions and solve problems.

#### Standard 6: Decision Making

- 4.5 Explain the decision making and problem solving steps.
- **4.6** Demonstrate the ability to make a decision or solve a problem using the steps.

#### Standard 7: Social Skills

- **4.7** Demonstrate ways to show respect for feelings, rights, and property of others.
- 4.8 Demonstrate effective listening and attending skills.
- 4.9 Recognize and express appropriately a variety of personal feelings.
- **4.10** Demonstrate the ability to manage strong feelings, including anger.



#### **STRAND 5: PERSONAL HEALTH AND WELLNESS**

#### Standard 3: Health Behaviors

5.1 Demonstrate skills throughout the day to reduce the spread of germs.

#### **Acknowledgements**

#### **Academic Review**

Sharon Albertson, St. Robert Catholic School

Cheryl Blair, Kent ISD

Al Craven, Genesee ISD

Marty Doring, Bay-Arenac ISD

Mariane Fahlman, Wayne State University

Marianne Frauenknecht, Western Michigan University

Kathy Gibson, Wayne County RESA

Carolyn Price, Lake Orion Community Schools

Pauline Pruneau, Oakland Schools

Pamela Sook, Gratiot-Isabella RESD

#### **Health Content Expert Review**

Beverly Baroni-Yeglic, Southgate Community School District

Shannon Carney Oleksyk, Michigan Department of Community Health

Deborah Grischke, MSU Extension: Michigan TEAM Nutrition

Jessica Grzywacz, Michigan Department of Community Health

Karen Krabill Yoder, Michigan Department of Community Health

#### **Internal Review**

Nicholas Drzal, Michigan Department of Education

Barbara Flis, Parent Action for Healthy Kids

Kyle Guerrant, Michigan Department of Education

Nancy Haney, Haney & Associates

Nancy Hudson, Council of Chief State School Officers

Martha Neilsen, Michigan Department of Education

Patti Oates-Ulrich, Michigan Department of Education

Christine Reiff, Michigan Department of Labor & Economic Growth

Merry Stanford, Michigan Department of Education



#### Michigan Department of Education

Grants Coordination and School Support Mary Ann Chartrand, Director (517) 373-4013 www.michigan.gov/mde



# Michigan State Board of Education

Kathleen N. Straus
President

**Bloomfield Township** 

John C.Austin Vice President Ann Arbor

Carolyn L. Curtin Secretary Evart

Marianne Yared McGuire
Treasurer
Detroit

Nancy Danhof
NASBE Delegate
East Lansing

Elizabeth W. Bauer Member Birmingham

Reginald M.Turner
Member
Detroit

Casandra E. Ulbrich
Member
Rochester Hills

Gov. Jennifer M. Granholm

Ex Officio

Michael P. Flanagan Chairman Superintendent of Public Instruction

Ex Officio

Carol Wolenberg
Deputy Superintendent

Mary Ann Chartrand
Director
Grants Coordination
and School Support





## **GRADE LEVEL CONTENT EXPECTATIONS**



**Grade Three** 

# Welcome to Michigan's Health Education Content Standards and Expectations for Grade Three

## Why Develop Content Expectations for Health?

Good health is necessary for academic success. Like adults at work, students at school have difficulty being successful if they are depressed, tired, bullied, stressed, sick, using alcohol or other drugs, undernourished, or abused. Research shows that effective health education helps students increase their health knowledge and improve their health skills and behaviors, especially those behaviors that have the greatest effect on health.

The Centers for Disease Control and Prevention (CDC) has identified the risk behavior areas that have the greatest effect on the short-term and long-term health of young people. Patterns of unhealthy eating, physical inactivity, and tobacco use are often established in childhood and adolescence, and are by far the leading causes of death among adults. Injury and violence, including suicide and alcohol-related traffic crashes, are the leading causes of death among children and youth. Each year approximately one in four Michigan high school students reports having consumed five or more drinks in a row during the previous month. These behavioral areas should be emphasized in an effective elementary health education program: healthy eating, physical activity, alcohol, tobacco, and other drug prevention, and injury and violence prevention.

In its Policy on Comprehensive School Health Education, the State Board addresses these risks by making certain recommendations. The following are those intended for Kindergarten through Grade Three.

- Provide at least 50 hours of health at each grade, Prekindergarten through Grade Twelve, to give students adequate time to learn and practice health habits and skills for a lifetime.
- Focus on helping young people develop and practice personal and social skills, such as communication and decision making, in order to deal effectively with health-risk situations.
- Address social and media influences on student behaviors and help students identify healthy alternatives to specific high-risk behaviors.
- Emphasize critical knowledge and skills that students need in order to obtain, understand, and use basic health information and services in ways that enhance healthy living.
- Focus on behaviors that have the greatest effect on health, especially those related to nutrition; physical activity; violence and injury; alcohol and other drug use; and tobacco use.
- Build functional knowledge and skills, from year to year, that are developmentally appropriate.
- Include accurate and up-to-date information, and be appropriate to students' developmental levels, personal behaviors, and cultural backgrounds.

The content expectations contained in this document are intended to help schools address these recommendations.

## **Overview of the Content Expectations**

The Health Education Content Expectations reflect legal requirements, best practices, and current research in the teaching and learning of health education. They build from the Michigan Health Education Standards and Benchmarks (1996) and the State Board of Education's Policy on Comprehensive School Health Education (2004). These content expectations represent a vision for a relevant health education curriculum that addresses critical health knowledge and skills for successfully maintaining a healthy lifestyle during a child's school years and beyond.

The Health Education Content Standards and Expectations were developed with the input of work groups made up of health content experts and faculty from teacher preparation programs, focus groups of teachers and parents, and online reviews by grade level teachers. They are aligned with the 2006 National Health Education Standards; assessment items developed by the State Collaborative for Assessment and Student Standards, Health Education Project of the Council of Chief State School Officers; and the *Michigan Model for Health® Curriculum*. Students whose work is guided by these standards and expectations will be prepared for responsible and healthy living, at school, at home, and in the workplace.

## Michigan Health Education Content Standards (2006)

I. Core Concepts	All students will apply health promotion and disease prevention
------------------	---

concepts and principles to personal, family, and community health issues.

2. Access Information All students will access valid health information and appropriate health

promoting products and services.

3. Health Behaviors All students will practice health enhancing behaviors and avoid or reduce

health risks.

4. Influences All students will analyze the influence of family, peers, culture, media, and

technology on health.

Goal SettingAll students will use goal setting skills to enhance health.

**6. Decision Making**All students will use decision-making skills to enhance health.

7. Social Skills All students will demonstrate effective interpersonal communication and

other social skills which enhance health.

8. Advocacy All students will demonstrate advocacy skills for enhanced personal,

family, and community health.

Please note that, while all the Content Standards are addressed in these Grade Level Content Expectations for Health Education as a whole, not all standards will be addressed in each strand.

## **Health Education Expectations**



#### STRAND I: NUTRITION AND PHYSICAL ACTIVITY

#### Standard 1: Core Concepts

- 1.1 Explain the benefits of healthy eating and being physically active.
- 1.2 Describe the importance of choosing a variety of ways to be physically active.

#### Standard 4: Influences

- 1.3 Explain strategies used to advertise food and beverage products.
- 1.4 Analyze how food advertising impacts eating behaviors related to eating when not hungry.

#### Standard 5: Goal Setting

- 1.5 Describe the elements of a physical activity plan.
- 1.6 Develop a personal plan to be physically active.



#### STRAND 2: ALCOHOL, TOBACCO, AND OTHER DRUGS

#### Standard I: Core Concepts

- 2.1 Describe the short- and long-term effects of alcohol use, including addiction.
- 2.2 Describe the short- and long-term effects of using tobacco, including addiction.

#### Standard 3: Health Behaviors

- 2.3 Describe actions that need to be followed to avoid accidental poisoning by household cleaning and paint products.
- 2.4 Describe actions to take in a poison emergency.
- 2.5 Explain rules for safe use of medicines and household products, including those that can be inhaled.

#### Standard 4: Influences

- 2.6 Explain how family and peers can influence choices about using alcohol and other drugs.
- 2.7 Analyze various strategies used in the media that encourage or discourage tobacco use.

#### Standard 7: Social Skills

- 2.8 Demonstrate verbal and non-verbal ways to refuse alcohol.
- 2.9 Demonstrate verbal and non-verbal ways to refuse tobacco use.



#### STRAND 3: SAFETY

#### Standard 1: Core Concepts

- 3.1 Explain why the back seat is the safest place for young people to ride in a vehicle equipped with air bags.
- 3.2 Explain how booster seats and safety belts help passengers to stay safe.
- 3.3 Describe characteristics of safe and unsafe places.

#### **Standard 2: Access Information**

3.4 Describe how to access help when feeling threatened.

#### Standard 3: Health Behaviors

- 3.5 Describe safe and unsafe behaviors of occupants in vehicles.
- 3.6 Demonstrate the proper wearing of a safety belt.
- 3.7 Describe dangerous, destructive, and disturbing situations that need to be reported to an adult.
- 3.8 Analyze environments to determine whether they are safe places.

#### Standard 4: Influences

3.9 Analyze how one can influence safety belt and booster seat use of others.



### **STRAND 4: SOCIAL AND EMOTIONAL HEALTH**

(Note: Teaching these standards is central to the implementation of an effective Positive Behavior Support system.)

#### Standard 1: Core Concepts

- **4.1** Explain the benefits of positive friendships.
- **4.2** Describe the characteristics of positive role models.
- 4.3 Recognize that each person has unique talents and skills.

#### Standard 3: Health Behaviors

- **4.4** Describe ways people help each other.
- **4.5** Describe a unique talent or skill of oneself and one other person.
- **4.6** Explain ways to show acceptance of differences.

#### Standard 4: Influences

4.7 Analyze how friends influence others' behavior and well-being.

#### Standard 7: Social Skills

- 4.8 Demonstrate ways to express appreciation.
- 4.9 Demonstrate strategies for keeping positive friends.
- 4.10 Demonstrate how to confront annoying behavior.

#### **Standard 8: Advocacy**

**4.11** Demonstrate the ability to support and respect people with differences.



#### **STRAND 5: PERSONAL HEALTH AND WELLNESS**

#### Standard 1: Core Concepts

5.1 Explain the physical, emotional, and social importance of keeping the body clean.

#### Standard 3: Health Behaviors

5.2 Describe strategies to keep the body clean.

#### Standard 5: Goal Setting

5.3 Develop a plan to keep the body clean.

#### **Acknowledgements**

#### **Academic Review**

Cheryl Blair, Kent ISD

Al Craven, Genesee ISD

Marty Doring, Bay-Arenac ISD

Mariane Fahlman, Wayne State University

Marianne Frauenknecht, Western Michigan University

Beth Getzinger, Rogers City Area Schools

Kathy Gibson, Wayne County RESA

Pauline Pruneau, Oakland Schools

Pamela Sook, Gratiot-Isabella RESD

#### **Health Content Expert Review**

Beverly Baroni-Yeglic, Southgate Community School District

Shannon Carney Oleksyk, Michigan Department of Community Health

Deborah Grischke, MSU Extension: Michigan TEAM Nutrition

Jessica Grzywacz, Michigan Department of Community Health

Karen Krabill Yoder, Michigan Department of Community Health

Alicia Sledge, Michigan Office of Highway Safety Planning

#### **Internal Review**

Nicholas Drzal, Michigan Department of Education

Barbara Flis, Parent Action for Healthy Kids

 $\ \, \hbox{Kyle Guerrant, Michigan Department of Education} \\$ 

Nancy Haney, Haney & Associates

Nancy Hudson, Council of Chief State School Officers

Martha Neilsen, Michigan Department of Education

Christine Reiff, Michigan Department of Labor & Economic Growth

Merry Stanford, Michigan Department of Education



#### Michigan Department of Education

Grants Coordination and School Support Mary Ann Chartrand, Director (517) 373-4013 www.michigan.gov/mde



# Michigan State Board of Education

Kathleen N. Straus
President

**Bloomfield Township** 

John C.Austin Vice President Ann Arbor

Carolyn L. Curtin Secretary Evart

Marianne Yared McGuire
Treasurer
Detroit

Nancy Danhof
NASBE Delegate
East Lansing

Elizabeth W. Bauer Member Birmingham

Reginald M.Turner
Member
Detroit

Casandra E. Ulbrich
Member
Rochester Hills

Gov. Jennifer M. Granholm Ex Officio

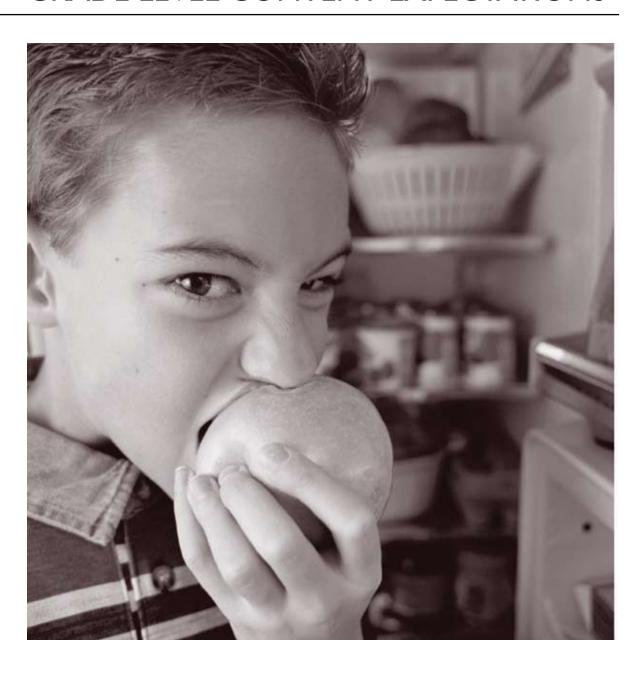
Michael P. Flanagan Chairman Superintendent of Public Instruction Ex Officio

Carol Wolenberg
Deputy Superintendent

Mary Ann Chartrand
Director
Grants Coordination
and School Support



## **GRADE LEVEL CONTENT EXPECTATIONS**



**Grade Four** 

EDUCATION I

## Welcome to Michigan's Health Education Content Standards and Expectations for Grade Four

## Why Develop Content Expectations for Health?

Good health is necessary for academic success. Like adults at work, students at school have difficulty being successful if they are depressed, tired, bullied, stressed, sick, using alcohol or other drugs, undernourished, or abused. Research shows that effective health education helps students increase their health knowledge and improve their health skills and behaviors, especially those behaviors that have the greatest effect on health.

The Centers for Disease Control and Prevention (CDC) has identified the risk behavior areas that have the greatest effect on the short-term and long-term health of young people. Patterns of unhealthy eating, physical inactivity, and tobacco use are often established in childhood and adolescence, and are by far the leading causes of death among adults. Injury and violence, including suicide and alcohol-related traffic crashes, are the leading causes of death among youth. Each year approximately three million cases of sexually transmitted infections occur among teenagers, and one in four Michigan high school students reports having consumed five or more drinks in a row during the previous month. These behavioral areas should be emphasized in an effective health education program: healthy eating, physical activity, tobacco prevention, alcohol and other drug prevention, injury and violence prevention, and HIV/STI prevention. Growth and Development is recommended, but not mandated.

In its Policy on Comprehensive School Health Education, the State Board addresses these risks by recommending that Michigan schools do the following:

- Provide at least 50 hours of health at each grade, Prekindergarten through Grade Twelve, to give students adequate time to learn and practice health habits and skills for a lifetime.
- Focus on helping young people develop and practice personal and social skills, such as communication and decision making, in order to deal effectively with health-risk situations.
- Address social and media influences on student behaviors and help students identify healthy alternatives to specific high-risk behaviors.
- Emphasize critical knowledge and skills that students need in order to obtain, understand, and use basic health information and services in ways that enhance healthy living.
- Focus on behaviors that have the greatest effect on health, especially those related to nutrition; physical activity; violence and injury; alcohol and other drug use; tobacco use; and sexual behaviors that lead to HIV, sexually transmitted disease, or unintended pregnancy, as developmentally appropriate.
- Build functional knowledge and skills, from year to year, that are developmentally appropriate.
- Include accurate and up-to-date information, and be appropriate to students' developmental levels, personal behaviors, and cultural backgrounds.

The content expectations contained in this document are intended to help schools address these recommendations.

## **Overview of the Content Expectations**

The Health Education Content Expectations reflect legal requirements, best practices, and current research in the teaching and learning of health education. They build from the Michigan Health Education Standards and Benchmarks (1996) and the State Board of Education's Policy on Comprehensive School Health Education (2004). These content expectations represent a vision for a relevant health education curriculum that addresses critical health knowledge and skills for successfully maintaining a healthy lifestyle during a child's school years and beyond.

The Health Education Content Standards and Expectations were developed with the input of work groups made up of health content experts and faculty from teacher preparation programs, focus groups of teachers and parents, and online reviews by grade level teachers. They are aligned with the 2006 National Health Education Standards; assessment items developed by the State Collaborative for Assessment and Student Standards, Health Education Project of the Council of Chief State School Officers; and the *Michigan Model for Health® Curriculum*. Students whose work is guided by these standards and expectations will be prepared for responsible and healthful living, at school, at home, and in the workplace.

## Michigan Health Education Content Standards (2006)

concepts and principles to personal, family, and community health issues.

2. Access Information All students will access valid health information and appropriate health

promoting products and services.

3. Health Behaviors All students will practice health enhancing behaviors and avoid or reduce

health risks.

4. Influences All students will analyze the influence of family, peers, culture, media, and

technology on health.

5. Goal Setting All students will use goal setting skills to enhance health.

**6. Decision Making**All students will use decision-making skills to enhance health.

7. Social Skills All students will demonstrate effective interpersonal communication and

other social skills which enhance health.

8. Advocacy All students will demonstrate advocacy skills for enhanced personal,

family, and community health.

Please note that, while all the Content Standards are addressed in these Grade Level Content Expectations for Health Education as a whole, not all standards will be addressed in each strand.



### STRAND I: NUTRITION AND PHYSICAL ACTIVITY

#### Standard 1: Core Concepts

- 1.1 Describe the food groups, including recommended portions to eat from each group.
- 1.2 Analyze the relationship of physical activity, rest, and sleep.
- 1.3 Explain why some food groups have a greater number of recommended portions than other food groups.
- **1.4** Associate recommended food portions to the sizes of common items.
- 1.5 Compare the quantity of restaurant or packaged foods to the quantities of food needed to keep the body healthy.

#### Standard 3: Health Behaviors

- 1.6 Assess one's ability to include physical activity, rest, and sleep in one's daily routine.
- 1.7 Describe strategies people use to consume the recommended portions of food to meet their individual nutrient needs.

#### Standard 4: Influences

1.8 Analyze examples of food advertising.

#### Standard 5: Goal Setting

1.9 Develop a one-day plan for eating the recommended portions of food from each food group.



#### STRAND 2: ALCOHOL, TOBACCO, AND OTHER DRUGS

#### Standard 1: Core Concepts

- 2.1 Describe the short- and long-term physical effects of being exposed to tobacco smoke.
- 2.2 Analyze possible reasons why individuals choose to use or to not use alcohol.
- 2.3 Explain the positive outcomes of not using alcohol.

#### Standard 3: Health Behaviors

2.4 Demonstrate the ability to avoid exposure to secondhand smoke.

#### Standard 4: Influences

- 2.5 Explain how family and peers can influence decisions about using alcohol and other drugs.
- 2.6 Explain how decisions about alcohol use will impact relationships with friends and family.
- 2.7 Analyze various strategies used in the media that encourage and discourage the use of alcohol and tobacco.

#### Standard 7: Social Skills

2.8 Demonstrate verbal and non-verbal ways to refuse alcohol.



#### **STRAND 3: SAFETY**

#### Standard 1: Core Concepts

- 3.1 Describe safety hazards, including those related to fire, dangerous objects and weapons, being home alone, and using the Internet.
- 3.2 Explain the importance of respecting personal space and boundaries.
- 3.3 Describe the characteristics of appropriate and inappropriate touch.
- 3.4 Explain that a child is not at fault if someone touches him or her in an inappropriate way.

#### **Standard 2: Access Information**

- 3.5 Demonstrate how to ask a trusted adult for help.
- 3.6 Demonstrate how to access emergency services, such as calling "911," including what to say when accessing such services.

#### Standard 3: Health Behaviors

- 3.7 Apply strategies to prevent fires and burns.
- 3.8 Develop and practice a home fire escape plan.
- 3.9 Apply strategies to stay safe and prevent injury when home alone.
- 3.10 Explain a rule and demonstrate actions to use when dangerous objects or weapons are present.
- 3.11 Apply strategies to stay safe when using the Internet.
- 3.12 Apply strategies to avoid personally unsafe situations.
- 3.13 Demonstrate strategies to get away in cases of inappropriate touching or abduction.

#### Standard 4: Influences

3.14 Analyze how one influences the safety of others when adult supervision is not present.



#### STRAND 4: SOCIAL AND EMOTIONAL HEALTH

(Note: Teaching these standards is central to the implementation of an effective Positive Behavior Support system.)

#### Standard 1: Core Concepts

**4.1** Describe the effect of teasing and bullying on others.

#### **Standard 2: Access Information**

4.2 Describe the characteristics of people who can help make decisions and solve problems.

#### Standard 3: Health Behaviors

- 4.3 Apply the use of positive self-talk to manage feelings.
- **4.4** Describe strategies to manage strong feelings, including anger.

#### Standard 6: Decision Making

- **4.5** Explain the decision making and problem solving steps.
- 4.6 Apply the steps to make a decision or solve a problem, using criteria to evaluate solutions.

#### Standard 7: Social Skills

- **4.7** Describe characteristics and steps of conflict resolution.
- **4.8** Apply the steps of conflict resolution.
- 4.9 Demonstrate non-violent conflict resolution strategies.
- **4.10** Explain what to do if you or someone else is being teased or bullied.
- 4.11 Express intentions to stop bullying as a bystander, perpetrator, or victim.
- 4.12 Demonstrate the ability to confront bullying and teasing.



### STRAND 5: PERSONAL HEALTH AND WELLNESS

#### Standard 3: Health Behaviors

**5.1** Demonstrate skills throughout the day to reduce the spread of germs.



#### **STRAND 6: HIV PREVENTION**

(Note: Course content should be reviewed to determine whether it is consistent with the district's board policies and approved curriculum. State law requires that, before adopting any revisions to the approved HIV curriculum, the local school board shall hold public hearings on the revision. For the specific language of the law, see Section 380.1169 of the Michigan Compiled Laws at www.michiganlegislature.org.)

#### Standard 1: Core Concepts

- 6.1 Define HIV and AIDS.
- 6.2 Explain that it is safe to be a friend of someone who is living with HIV or AIDS.
- **6.3** Explain how HIV is and is not transmitted.

#### Standard 3: Health Behaviors

6.4 Describe how people can protect themselves from infection with serious blood-borne communicable diseases, including not touching blood and not touching used needles.



### STRAND 7: GROWTH AND DEVELOPMENT

(Note: Growth and Development is RECOMMENDED, but not mandated, to be taught. Course content should be reviewed by the district's Sex Education Advisory Board to determine whether it is consistent with the district's board policies and approved curriculum.)

#### **Standard I: Core Concepts**

- 7.1 Explain that puberty and development can vary considerably and still be normal.
- 7.2 Identify personal hygiene practices and health/safety issues during puberty (e.g., showering, deodorant, use of sanitary products, and athletic supporters).
- 7.3 Describe social changes during puberty (e.g., changes in friendships, crushes/attractions, and changing expectations of parents/adults).
- 7.4 Describe emotional changes during puberty (e.g., mood shifts).
- 7.5 Describe physical changes that occur during puberty (e.g., body hair, body odor, voice, body shape, strength, hormones, and menstruation).

#### **Standard 2: Access Information**

7.6 Identify potential resources (e.g., parents, teacher, and other trusted adults) that can provide accurate information about puberty.

#### Standard 3: Health Behaviors

7.7 Develop plans to maintain personal hygiene during puberty.

#### **Acknowledgements**

#### **Academic Review**

Cheryl Blair, Kent ISD

Al Craven, Genesee ISD

Marty Doring, Bay-Arenac ISD

Mariane Fahlman, Wayne State University

Marianne Frauenknecht, Western Michigan University

Kathy Gibson, Wayne County RESA

Pauline Pruneau, Oakland Schools

Pamela Sook, Gratiot-Isabella RESD

Gina Zanon, Nah Tah Wahsh PSA

#### **Health Content Expert Review**

Beverly Baroni-Yeglic, Southgate Community School District

Laurie Bechhofer, Michigan Department of Education

Shannon Carney Oleksyk, Michigan Department of Community Health

Deborah Grischke, MSU Extension: Michigan TEAM Nutrition

Jessica Grzywacz, Michigan Department of Community Health

Karen Krabill Yoder, Michigan Department of Community Health

#### **Internal Review**

Nicholas Drzal, Michigan Department of Education

Barbara Flis, Parent Action for Healthy Kids

Kyle Guerrant, Michigan Department of Education

Nancy Haney, Haney & Associate

Nancy Hudson, Council of Chief State School Officers

Martha Neilsen, Michigan Department of Education

Christine Reiff, Michigan Department of Labor & Economic Growth

Merry Stanford, Michigan Department of Education



#### Michigan Department of Education

Grants Coordination and School Support Mary Ann Chartrand, Director (517) 373-4013 www.michigan.gov/mde



# Michigan State Board of Education

Kathleen N. Straus
President

**Bloomfield Township** 

John C.Austin Vice President Ann Arbor

Carolyn L. Curtin Secretary Evart

Marianne Yared McGuire
Treasurer
Detroit

Nancy Danhof
NASBE Delegate
East Lansing

Elizabeth W. Bauer Member Birmingham

Reginald M.Turner
Member
Detroit

Casandra E. Ulbrich
Member
Rochester Hills

Gov. Jennifer M. Granholm
Ex Officio

Michael P. Flanagan
Chairman
Superintendent of
Public Instruction
Ex Officio

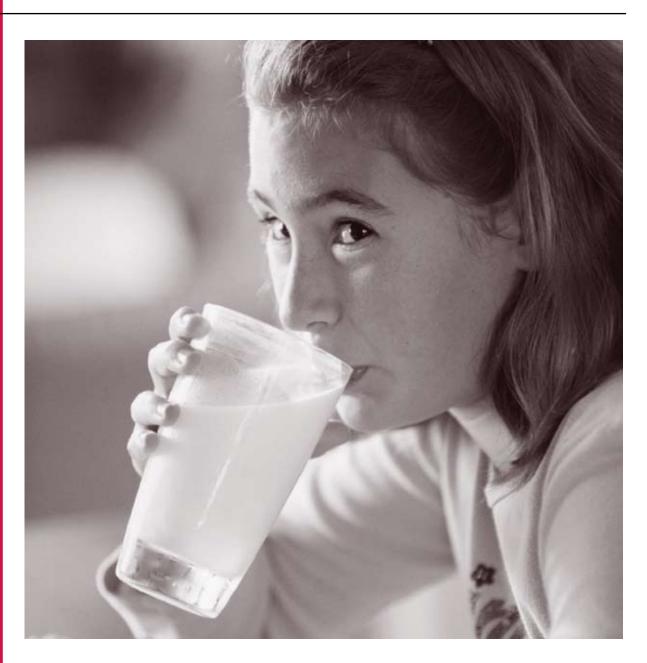
Carol Wolenberg
Deputy Superintendent

Mary Ann Chartrand
Director
Grants Coordination
and School Support





## **GRADE LEVEL CONTENT EXPECTATIONS**



**Grade Five** 

## Welcome to Michigan's Health Education Content Standards and Expectations for Grade Five

## Why Develop Content Expectations for Health?

Good health is necessary for academic success. Like adults at work, students at school have difficulty being successful if they are depressed, tired, bullied, stressed, sick, using alcohol or other drugs, undernourished, or abused. Research shows that effective health education helps students increase their health knowledge and improve their health skills and behaviors, especially those behaviors that have the greatest effect on health.

The Centers for Disease Control and Prevention (CDC) has identified the risk behavior areas that have the greatest effect on the short-term and long-term health of young people. Patterns of unhealthy eating, physical inactivity, and tobacco use are often established in childhood and adolescence, and are by far the leading causes of death among adults. Injury and violence, including suicide and alcohol-related traffic crashes, are the leading causes of death among youth. Each year approximately three million cases of sexually transmitted infections occur among teenagers, and one in four Michigan high school students reports having consumed five or more drinks in a row during the previous month. These behavioral areas should be emphasized in an effective health education program: healthy eating, physical activity, tobacco prevention, alcohol and other drug prevention, injury and violence prevention, and HIV/STI prevention. Growth and Development is recommended, but not mandated.

In its Policy on Comprehensive School Health Education, the State Board addresses these risks by recommending that Michigan schools do the following:

- Provide at least 50 hours of health at each grade, Prekindergarten through Grade Twelve, to give students adequate time to learn and practice health habits and skills for a lifetime.
- Focus on helping young people develop and practice personal and social skills, such as communication and decision making, in order to deal effectively with health-risk situations.
- Address social and media influences on student behaviors and help students identify healthy alternatives to specific high-risk behaviors.
- Emphasize critical knowledge and skills that students need in order to obtain, understand, and use basic health information and services in ways that enhance healthy living.
- Focus on behaviors that have the greatest effect on health, especially those related to nutrition; physical
  activity; violence and injury; alcohol and other drug use; tobacco use; and sexual behaviors that lead to HIV,
  sexually transmitted disease, or unintended pregnancy, as developmentally appropriate.
- Build functional knowledge and skills, from year to year, that are developmentally appropriate.
- Include accurate and up-to-date information, and be appropriate to students' developmental levels, personal behaviors, and cultural backgrounds.

The content expectations contained in this document are intended to help schools address these recommendations.

## **Overview of the Content Expectations**

The Health Education Content Expectations reflect legal requirements, best practices, and current research in the teaching and learning of health education. They build from the Michigan Health Education Standards and Benchmarks (1996) and the State Board of Education's Policy on Comprehensive School Health Education (2004). These content expectations represent a vision for a relevant health education curriculum that addresses critical health knowledge and skills for successfully maintaining a healthy lifestyle during a child's school years and beyond.

The Health Education Content Standards and Expectations were developed with the input of work groups made up of health content experts and faculty from teacher preparation programs, focus groups of teachers and parents, and online reviews by grade level teachers. They are aligned with the 2006 National Health Education Standards; assessment items developed by the State Collaborative for Assessment and Student Standards, Health Education Project of the Council of Chief State School Officers; and the Michigan Model for Health® Curriculum. Students whose work is guided by these standards and expectations will be prepared for responsible and healthful living, at school, at home, and in the workplace.

## Michigan Health Education Content Standards (2006)

I. Core Concepts	All students will apply health promotion and disease prevention
------------------	---

concepts and principles to personal, family, and community health issues.

2. Access Information All students will access valid health information and appropriate health

promoting products and services.

3. Health Behaviors All students will practice health enhancing behaviors and avoid or reduce

health risks.

4. Influences All students will analyze the influence of family, peers, culture, media, and

technology on health.

Goal SettingAll students will use goal setting skills to enhance health.

**6. Decision Making**All students will use decision-making skills to enhance health.

7. Social Skills All students will demonstrate effective interpersonal communication and

other social skills which enhance health.

8. Advocacy All students will demonstrate advocacy skills for enhanced personal,

family, and community health.

Please note that, while all the Content Standards are addressed in these Grade Level Content Expectations for Health Education as a whole, not all standards will be addressed in each strand.

## **Health Education Expectations**



#### STRAND I: NUTRITION AND PHYSICAL ACTIVITY

#### Standard 1: Core Concepts

- 1.1 Describe the essential nutrients the body needs to stay healthy.
- 1.2 Describe guidelines to follow for healthy eating.
- 1.3 Identify calcium and vitamin D intake and physical activity as protectors from developing osteoporosis.
- **1.4** Explain the importance of choosing water rather than other beverages for the purpose of keeping the body hydrated.

#### **Standard 2: Access Information**

1.5 Interpret information provided on food labels.

#### Standard 3: Health Behaviors

- 1.6 Choose a snack using specific criteria such as fat, carbohydrate, fiber, calcium, and calorie content of foods.
- 1.7 Plan a meal using specific criteria such as fat, carbohydrate, fiber, calcium, and calorie content of foods.



#### STRAND 2: ALCOHOL, TOBACCO, AND OTHER DRUGS

#### Standard 1: Core Concepts

- 2.1 Describe poison safety rules for household products.
- 2.2 Describe the short- and long- term physical effects of using tobacco and inhalants.
- 2.3 Describe health benefits of abstaining from or stopping tobacco use.
- **2.4** Recognize that it is hard to stop using tobacco.
- 2.5 Compute the economic cost of tobacco use.
- 2.6 Explain school policies and community laws related to the sale and use of tobacco products.
- 2.7 Describe how use of alcohol and other drugs impairs safe driving.

#### Standard 3: Health Behaviors

- **2.8** Apply effective strategies to avoid exposure to inhalants.
- 2.9 Apply strategies to avoid riding with an impaired driver.

#### Standard 4: Influences

- 2.10 Analyze the accuracy of information conveyed in the media about tobacco use.
- 2.11 Explain how decisions about alcohol and tobacco use will impact relationships with friends and family.
- 2.12 Analyze how families and peers may influence choices about using tobacco and inhalants.

#### Standard 6: Decision Making

2.13 Analyze the positive and negative choices one can make about using tobacco and alcohol.

#### Standard 7: Social Skills

2.14 Demonstrate verbal and non-verbal ways to refuse tobacco, alcohol, inhalant, and other drug use.



#### **STRAND 3: SAFETY**

#### Standard 1: Core Concepts

- 3.1 Explain the importance of respecting personal space and boundaries.
- 3.2 Describe the characteristics of appropriate and inappropriate touch.
- 3.3 Explain that a child is not at fault if someone touches him or her in an inappropriate way.
- 3.4 Describe hazards related to sun, water, and ice.

#### **Standard 2: Access Information**

3.5 Demonstrate how to ask a trusted adult for help.

#### Standard 3: Health Behaviors

- 3.6 Analyze situations to predict safety hazards when home alone and in public places.
- 3.7 Apply strategies to avoid personally unsafe situations.
- 3.8 Apply strategies to be safe in the sun and when around water and ice.

#### Standard 5: Goal Setting

3.9 Develop plans to stay safe when home alone and in public places.

#### Standard 7: Social Skills

3.10 Demonstrate strategies to get away in cases of inappropriate touching or abduction.



#### STRAND 4: SOCIAL AND EMOTIONAL HEALTH

(Note: Teaching these standards is central to the implementation of an effective Positive Behavior Support system.)

#### Standard 1: Core Concepts

4.1 Describe the harmful impact of harassing behaviors to both the perpetrator and the victim.

#### **Standard 2: Access Information**

4.2 Describe how to get help from an adult when someone is in danger of hurting self or others.

#### Standard 3: Health Behaviors

- 4.3 Demonstrate strategies to manage strong feelings.
- **4.4** Predict situations that might lead to trouble, including violence.
- **4.5** Demonstrate strategies to avoid situations that might lead to trouble.
- 4.6 Demonstrate the ability to manage harassment, including getting help from a trusted adult.

#### Standard 5: Goal Setting

4.7 Set a personal goal and plan the steps necessary to achieve the goal.

#### Standard 6: Decision Making

- 4.8 Describe the characteristics of people who can help make decisions and solve problems.
- 4.9 Explain the decision making and problem solving steps.
- **4.10** Demonstrate making a decision or solving a problem using criteria to evaluate solutions.

#### Standard 7: Social Skills

- 4.11 Demonstrate effective listening strategies.
- **4.12** Demonstrate how to communicate assertively.
- 4.13 Apply the steps of conflict resolution to a real or hypothetical situation.

#### **Standard 8: Advocacy**

**4.14** Advocate for a caring school environment.



# **STRAND 5: PERSONAL HEALTH AND WELLNESS**

# Standard 1: Core Concepts

5.1 Analyze the physical, emotional, mental, and social importance of keeping the body clean.

# Standard 4: Influences

5.2 Analyze media influences related to hygiene products.

# Standard 5: Goal Setting

5.3 Develop a plan to keep the body clean.



# **STRAND 6: HIV PREVENTION**

(Note: Course content should be reviewed to determine whether it is consistent with the district's board policies and approved curriculum. State law requires that, before adopting any revisions to the approved HIV curriculum, the local school board shall hold public hearings on the revision. For the specific language of the law, see Section 380.1169 of the Michigan Compiled Laws at www.michiganlegislature.org.)

# Standard 1: Core Concepts

- 6.1 Define HIV and AIDS.
- 6.2 Explain that it is safe to be a friend of someone who is living with HIV or AIDS.
- **6.3** Describe how HIV is and is not transmitted.

# Standard 3: Health Behaviors

6.4 Describe ways people can protect themselves from infection with serious blood borne communicable diseases, including not touching blood, not touching used needles, and not having sex.



# STRAND 7: GROWTH AND DEVELOPMENT

(Note: State law makes whether to offer sexuality education a local district decision. Course content must be reviewed by the district's Sex Education Advisory Board to determine whether it is consistent with the district's board policies and approved sexuality education curriculum. If the district chooses to offer sexuality education, certain content must be included in an age-appropriate fashion in the K-12 instructional program. This content is integrated into these content expectations. For the specific language of the law, see Sections 380.1507, 1507a, and 1507b of the Michigan Compiled Laws at www.michiganlegislature.org.)

# Standard 1: Core Concepts

- 7.1 Explain that males and females develop at different rates, and there are wide variations within each sex.
- 7.2 Explain social changes during puberty (e.g., changes in friendships, crushes/attractions, and changing expectations of parents/adults).
- 7.3 Explain emotional changes during puberty (e.g., mood shifts).
- 7.4 Explain physical changes that occur during puberty (e.g., body hair, body odor, voice, body shape, strength, hormones, and menstruation).
- 7.5 Define and identify basic male and female reproductive anatomy using scientific names.
- 7.6 Define the functions of sperm and egg cells in human reproduction.
- 7.7 Describe how sperm cells are produced.
- 7.8 Describe the menstrual cycle and its potential for human reproduction.
- 7.9 Describe the functions of basic male and female reproductive anatomy.

# **Standard 2: Access Information**

7.10 Describe criteria to determine whether resources provide accurate information about puberty; and apply these criteria to identify valid resources.

# Standard 4: Influences

7.11 Explain how culture, media, and others influence what one thinks about oneself and relationships.

# **Acknowledgements**

#### **Academic Review**

Cheryl Blair, Kent ISD

Al Craven, Genesee ISD

Marty Doring, Bay-Arenac ISD

Mariane Fahlman, Wayne State University

Marianne Frauenknecht, Western Michigan University

Kathy Gibson, Wayne County RESA

Pauline Pruneau, Oakland Schools

Pamela Sook, Gratiot-Isabella RESD

Gina Zanon, Nah Tah Wahsh PSA

# **Health Content Expert Review**

Beverly Baroni-Yeglic, Southgate Community School District

Laurie Bechhofer, Michigan Department of Education

Shannon Carney Oleksyk, Michigan Department of Community Health

Mary Eley, Michigan Antibiotic Resistance Reduction Coalition

Deborah Grischke, MSU Extension: Michigan TEAM Nutrition

Jessica Grzywacz, Michigan Department of Community Health

Karen Krabill Yoder, Michigan Department of Community Health

Dawn Sievert, Michigan Department of Community Health

Alicia Sledge, Michigan Office of Highway Safety Planning

Teri Wilson, Michigan Department of Community Health

# **Internal Review**

Nicholas Drzal, Michigan Department of Education

Barbara Flis, Parent Action for Healthy Kids

Kyle Guerrant, Michigan Department of Education

Nancy Haney, Haney & Associates

Nancy Hudson, Council of Chief State School Officers

Martha Neilsen, Michigan Department of Education

Christine Reiff, Michigan Department of Labor & Economic Growth

Merry Stanford, Michigan Department of Education



#### Michigan Department of Education

Grants Coordination and School Support Mary Ann Chartrand, Director (517) 373-4013 www.michigan.gov/mde



# Michigan State Board of Education

Kathleen N. Straus President

Bloomfield Township

John C.Austin Vice President Ann Arbor

Carolyn L. Curtin Secretary Evart

Marianne Yared McGuire
Treasurer
Detroit

Nancy Danhof
NASBE Delegate
East Lansing

Elizabeth W. Bauer Member Birmingham

Reginald M.Turner
Member
Detroit

Casandra E. Ulbrich
Member
Rochester Hills

Gov. Jennifer M. Granholm

Ex Officio

Michael P. Flanagan Chairman Superintendent of Public Instruction Ex Officio

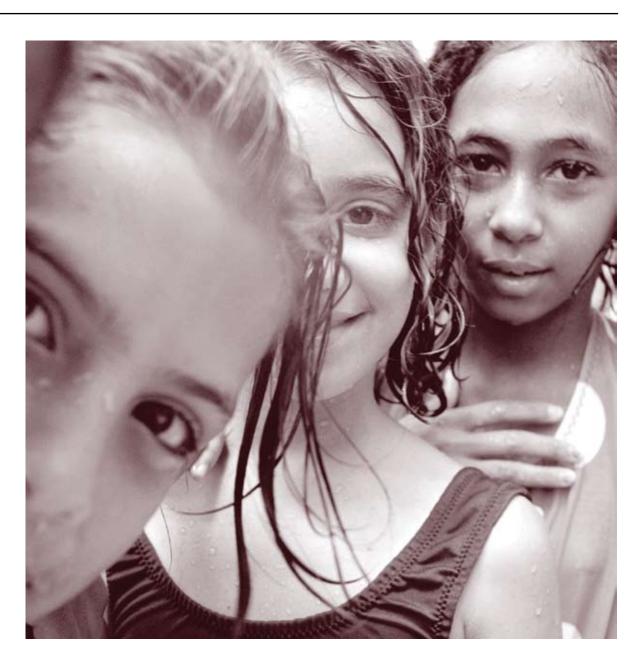
Carol Wolenberg
Deputy Superintendent

Mary Ann Chartrand
Director
Grants Coordination
and School Support





# **GRADE LEVEL CONTENT EXPECTATIONS**



**Grade Six** 

# Welcome to Michigan's Health Education Content Standards and Expectations for Grade Six

# Why Develop Content Expectations for Health?

Good health is necessary for academic success. Like adults at work, students at school have difficulty being successful if they are depressed, tired, bullied, stressed, sick, using alcohol or other drugs, undernourished, or abused. Research shows that effective health education helps students increase their health knowledge and improve their health skills and behaviors, especially those behaviors that have the greatest effect on health.

The Centers for Disease Control and Prevention (CDC) has identified the risk behavior areas that have the greatest effect on the short-term and long-term health of young people. Patterns of unhealthy eating, physical inactivity, and tobacco use are often established in childhood and adolescence, and are by far the leading causes of death among adults. Injury and violence, including suicide and alcohol-related traffic crashes, are the leading causes of death among youth. Each year approximately three million cases of sexually transmitted infections occur among teenagers, and one in four Michigan high school students reports having consumed five or more drinks in a row during the previous month. These behavioral areas should be emphasized in an effective health education program: healthy eating, physical activity, tobacco prevention, alcohol and other drug prevention, injury and violence prevention, and the prevention of sexual behaviors leading to HIV/STI infections or pregnancy.

In its Policy on Comprehensive School Health Education, the State Board addresses these risks by recommending that Michigan schools do the following.

- Provide at least 50 hours of health at each grade, Prekindergarten through Grade Twelve, to give students adequate time to learn and practice health habits and skills for a lifetime.
- Focus on helping young people develop and practice personal and social skills, such as communication and decision making, in order to deal effectively with health-risk situations.
- Address social and media influences on student behaviors and help students identify healthy alternatives to specific high-risk behaviors.
- Emphasize critical knowledge and skills that students need in order to obtain, understand, and use basic health information and services in ways that enhance healthy living.
- Focus on behaviors that have the greatest effect on health, especially those related to nutrition; physical activity; violence and injury; alcohol and other drug use; tobacco use; and sexual behaviors that lead to HIV, sexually transmitted disease, or unintended pregnancy, as developmentally appropriate.
- Build functional knowledge and skills, from year to year, that are developmentally appropriate.
- Include accurate and up-to-date information, and be appropriate to students' developmental levels, personal behaviors, and cultural backgrounds.

The content expectations contained in this document are intended to help schools address these recommendations.

# **Overview of the Content Expectations**

The Health Education Content Expectations reflect legal requirements, best practices, and current research in the teaching and learning of health education. They build from the Michigan Health Education Standards and Benchmarks (1996) and the State Board of Education's Policy on Comprehensive School Health Education (2004). These content expectations represent a vision for a relevant health education curriculum that addresses critical health knowledge and skills for successfully maintaining a healthy lifestyle during a child's school years and beyond.

The Health Education Content Standards and Expectations were developed with the input of work groups made up of health content experts and faculty from teacher preparation programs, focus groups of teachers and parents, and online reviews by grade level teachers. They are aligned with the 2006 National Health Education Standards; assessment items developed by the State Collaborative for Assessment and Student Standards, Health Education Project of the Council of Chief State School Officers; and the Michigan Model for Health® Curriculum. Students whose work is guided by these standards and expectations will be prepared for responsible and healthful living, at school, at home, and in the workplace.

# Michigan Health Education Content Standards (2006)

I. Core Concepts	All students will apply health promotion and disease prevention
------------------	---

concepts and principles to personal, family, and community health issues.

2. Access Information All students will access valid health information and appropriate health

promoting products and services.

3. Health Behaviors All students will practice health enhancing behaviors and avoid or reduce

health risks.

4. Influences All students will analyze the influence of family, peers, culture, media, and

technology on health.

5. Goal Setting All students will use goal setting skills to enhance health.

**6. Decision Making**All students will use decision-making skills to enhance health.

7. Social Skills All students will demonstrate effective interpersonal communication and

other social skills which enhance health.

8. Advocacy All students will demonstrate advocacy skills for enhanced personal,

family, and community health.

Please note that, while all the Content Standards are addressed in these Grade Level Content Expectations for Health Education as a whole, not all standards will be addressed in each strand.

# **Health Education Expectations**



# STRAND I: NUTRITION AND PHYSICAL ACTIVITY

# Standard 1: Core Concepts

- 1.1 Analyze the benefits of healthy eating and being physically active.
- 1.2 Identify the causes of foodborne illness.
- 1.3 Explain how weight management is influenced by healthy eating and being physically active.

#### Standard 3: Health Behaviors

- 1.4 Describe the federal dietary guidelines and the amount of physical activity recommended for one's age in order to achieve health benefits.
- 1.5 Describe strategies for dealing with personal preferences, restrictions, and barriers related to healthy eating, adequate sleep, and physical activity.
- 1.6 Describe environmental influences that encourage or discourage physical activity.
- 1.7 Develop a dietary and physical activity plan for a week that is consistent with the dietary guidelines.
- 1.8 Demonstrate the ability to support others to choose healthy foods and be physically active.

# RECOMMENDED

# Standard I: Core Concepts

1.9 Describe the relationship of self perception, body image, body weight, and physical activity.

# Standard 4: Influences

1.10 Analyze how one's own perception of weight influences healthy eating and being physically active.



# STRAND 2: ALCOHOL, TOBACCO, AND OTHER DRUGS

# Standard 1: Core Concepts

- 2.1 Explain the short- and long-term effects of alcohol and marijuana use.
- 2.2 Explain school policies and Michigan laws related to the sale and use of tobacco products.
- 2.3 Analyze data that supports that most young people in middle school do not use tobacco, alcohol, or other drugs.
- 2.4 Articulate the benefits of remaining alcohol, tobacco, and drug free.
- Analyze how impaired judgment and other effects of alcohol or marijuana use impact personal safety, relationships with friends and families, school success, and attainment of present and future goals.

# **Standard 2: Access Information**

2.6 Demonstrate the ability to locate school and community resources to assist with problems related to alcohol and other drug use; and assess the validity of the resources.

# Standard 3: Health Behaviors

- 2.7 Make a commitment to be alcohol, tobacco and drug free.
- **2.8** Recognize behaviors that may indicate alcohol or drug impairment in order to avoid riding with an impaired driver.
- 2.9 Describe strategies to avoid riding with an impaired driver, and demonstrate the ability to use them.

# Standard 4: Influences

2.10 Analyze family, peer, societal, and media influences on tobacco, alcohol, and other drug use.

#### Standard 7: Social Skills

- 2.11 Develop personal strategies to resist influences to use tobacco, alcohol, and other drugs.
- 2.12 Demonstrate verbal and non-verbal ways to refuse alcohol, tobacco, and other drugs.

# STRAND 2: ALCOHOL, TOBACCO, AND OTHER DRUGS (CONTINUED)

# **RECOMMENDED** —

# Standard 1: Core Concepts

2.13 Describe the negative health effects of caffeine, tobacco, and diet pills on rest, stress, athletic performance, and weight management.

# Standard 4: Influences

- 2.14 Analyze possible reasons why individuals choose to use, or not use, alcohol or marijuana.
- 2.15 Demonstrate the ability to support friends and family members who are trying to stop using alcohol, tobacco, and other drugs.

# Standard 8: Advocacy

2.16 Apply effective persuasion skills for encouraging others not to use tobacco, alcohol, and other drugs.



# **STRAND 3: SAFETY**

# Standard 1: Core Concepts

- 3.1 Explain how safety belts help passengers to stay safe.
- 3.2 Describe safety hazards related to using the Internet.
- **3.3** Describe appropriate and inappropriate touch.
- 3.4 Explain the importance of respecting personal space and boundaries.
- 3.5 Explain that a child is not at fault if someone touches him or her in an inappropriate way.

# **Standard 2: Access Information**

3.6 Demonstrate the ability to ask a trusted adult for help when feeling personally threatened or unsafe, including while using the Internet.

# Standard 3: Health Behaviors

- 3.7 Analyze environments and situations, including those where weapons may be present, to determine whether they are safe.
- 3.8 Describe strategies to avoid unsafe situations.
- 3.9 Demonstrate strategies to escape when weapons/dangerous objects are present.
- 3.10 Describe the procedure for reporting the presence of weapons at school.
- 3.11 Demonstrate the ability to escape safety hazards in public places.
- 3.12 Apply school rules and procedures to hypothetical school crisis situations.
- 3.13 Demonstrate strategies to get away in hypothetical cases of inappropriate touching or abduction.
- 3.14 Apply strategies to stay safe when using the Internet.

# Standard 4: Influences

3.15 Explain how one's behavior, when an occupant of a vehicle, influences the behavior of others.

# RECOMMENDED -

# **Standard 8: Advocacy**

- 3.16 Advocate for others to practice safe behavior, including the proper use of safety belts, when riding in a car.
- 3.17 Advocate for others to stay safe when using the Internet.



# STRAND 4: SOCIAL AND EMOTIONAL HEALTH

(Note: Teaching these standards is central to the implementation of an effective Positive Behavior Support system.)

# Standard 1: Core Concepts

**4.1** Describe some common causes of stress, and the health effects of stress.

# **Standard 2: Access Information**

- 4.2 Analyze the importance of getting help from an adult when it is needed.
- 4.3 Identify criteria to determine whether another person is able to help one make healthy decisions and solve problems; and apply these criteria to identify people who can provide help.

# Standard 3: Health Behaviors

4.4 Demonstrate the ability to use practical strategies to manage strong feelings.

# Standard 5: Goal Setting

4.5 Use practical strategies to develop a personal plan for stress management.

# Standard 6: Decision Making

- **4.6** Describe the decision making and problem solving steps.
- **4.7** Demonstrate the ability to make a decision or solve a problem using criteria to evaluate solutions.

#### Standard 7: Social Skills

- **4.8** Describe the characteristics of conflicts that can be resolved and the steps of effective conflict resolution.
- **4.9** Demonstrate the ability to use the steps of conflict resolution.
- 4.10 Demonstrate effective listening strategies.
- 4.11 Demonstrate the ability to use assertive communication skills appropriately.

# RECOMMENDED -

# Standard 1: Core Concepts

- 4.12 Analyze how friendships may involve positive and negative risks.
- 4.13 Explain the difference between angry feelings and angry behavior.

# Standard 7: Social Skills

**4.14** Demonstrate the ability to express appreciation.



# STRAND 5: PERSONAL HEALTH AND WELLNESS

# Standard 3: Health Behaviors

5.1 Demonstrate skills throughout the day to reduce the spread of germs.



# STRAND 6: HIV AND STIs PREVENTION

See the Health Education Content Expectations for Grade 5 and Grades 7-8 at www.michigan.gov/healthed<a href="http://www.michigan.gov/healthed">http://www.michigan.gov/healthed</a>.



# STRAND 7: SEXUALITY EDUCATION

(Note: State law makes whether to offer sexuality education a local district decision. Course content must be reviewed by the district's Sex Education Advisory Board to determine whether it is consistent with the district's board policies and approved sexuality education curriculum. If the district chooses to offer sexuality education, certain content must be included in an age-appropriate fashion in the K-12 instructional program. This content is integrated into these content expectations. For the specific language of the law, see Sections 380.1507, 1507a, and 1507b of the Michigan Compiled Laws at www.michiganlegislature.org.)

# **Standard I: Core Concepts**

- 7.1 Describe the changes in friendships that one might experience as a result of puberty, and evaluate what it means to be a boyfriend or girlfriend.
- 7.2 Identify changes in physical maturation during puberty as it relates to the physical capacity for human reproduction.
- 7.3 Describe the basic process of human reproduction, using scientific names for reproductive anatomy.
- 7.4 Define abstinence from sex.
- 7.5 Analyze reasons for young people to remain abstinent, concluding that abstinence is the only 100% effective method of protection from HIV, other serious communicable disease, and pregnancy.

# **Standard 2: Access Information**

7.6 Locate adult resources (e.g., parent, teacher, medical professional, counselor, other adult) who can provide accurate information about friendships, dating, puberty, and human reproduction.

# Standard 3: Health Behaviors

- 7.7 Recognize situations or behaviors that may lead to engaging in sexually risky behaviors.
- 7.8 Set personal boundaries and limits related to physical intimacy and sexual behavior.

# Standard 4: Influences

7.9 Evaluate a variety of external influences (e.g., media, parents, culture, peers, and society) and internal influences (e.g., values, curiosity, interests, desires, and fears) and their potential to impact relationships and behavior.

# Standard 5: Goal Setting

7.10 Develop personal short- and long-term goals that support abstinence.

# Standard 7: Social Skills

- 7.11 Demonstrate how to communicate one's level of readiness to be a boy friend or girl friend.
- 7.12 Identify ways to show respect for other's boundaries and limits related to physical intimacy and sexual behavior.
- 7.13 Demonstrate the ability to use verbal and non-verbal ways to refuse participation in sexual behavior.

# **Acknowledgements**

#### **Academic Review**

Jennifer Black, Monroe County ISD

Cheryl Blair, Kent ISD

Al Craven, Genesee ISD

Marty Doring, Bay-Arenac ISD

Mariane Fahlman, Wayne State University

Deborah Foster, Plymouth-Canton Community Schools

Shelly Foy, Swan Valley School District

Marianne Frauenknecht, Western Michigan University

Kathy Gibson, Wayne County RESA

Joni Henretty, Grand Ledge Public Schools

Pauline Pruneau, Oakland Schools

Pamela Sook, Gratiot-Isabella RESD

Theresa Stinson Lahring, Fruitport Community Schools

Mary Margaret Utess, Lansing IHM-St. Casimir School

Warren Wood, Carrollton Public Schools

# **Health Content Expert Review**

Beverly Baroni-Yeglic, Southgate Community School District

Laurie Bechhofer, Michigan Department of Education

Shannon Carney Oleksyk, Michigan Department of Community Health

Deborah Grischke, MSU Extension: Michigan TEAM Nutrition

Jessica Grzywacz, Michigan Department of Community Health

Karen Krabill Yoder, Michigan Department of Community Health

Teri Wilson, Michigan Department of Community Health

#### **Internal Review**

Nicholas Drzal, Michigan Department of Education

Barbara Flis, Parent Action for Healthy Kids

Kyle Guerrant, Michigan Department of Education

Nancy Haney, Haney & Associates

Nancy Hudson, Council of Chief State School Officers

Martha Neilsen, Michigan Department of Education

Christine Reiff, Michigan Department of Labor & Economic Growth

Merry Stanford, Michigan Department of Education



#### Michigan Department of Education

Grants Coordination and School Support Mary Ann Chartrand, Director (517) 373-4013 www.michigan.gov/mde



# Michigan State Board of Education

Kathleen N. Straus
President

Bloomfield Township

John C.Austin Vice President Ann Arbor

Carolyn L. Curtin Secretary Evart

Marianne Yared McGuire
Treasurer
Detroit

Nancy Danhof NASBE Delegate

East Lansing

Elizabeth W. Bauer Member Birmingham

Reginald M.Turner
Member
Detroit

Casandra E. Ulbrich
Member
Rochester Hills

Gov. Jennifer M. Granholm Ex Officio

Michael P. Flanagan
Chairman
Superintendent of
Public Instruction
Ex Officio

Carol Wolenberg
Deputy Superintendent

Mary Ann Chartrand
Director
Grants Coordination
and School Support



# **GRADE LEVEL CONTENT EXPECTATIONS**



**Grades Seven and Eight** 

# Welcome to Michigan's Health Education Content Standards and Expectations for Grades Seven and Eight

# Why Develop Content Expectations for Health?

Good health is necessary for academic success. Like adults at work, students at school have difficulty being successful if they are depressed, tired, bullied, stressed, sick, using alcohol or other drugs, undernourished, or abused. Research shows that effective health education helps students increase their health knowledge and improve their health skills and behaviors, especially those behaviors that have the greatest effect on health.

The Centers for Disease Control and Prevention (CDC) has identified the risk behavior areas that have the greatest effect on the short-term and long-term health of young people. Patterns of unhealthy eating, physical inactivity, and tobacco use are often established in childhood and adolescence, and are by far the leading causes of death among adults. Injury and violence, including suicide and alcohol-related traffic crashes, are the leading causes of death among youth. Each year approximately three million cases of sexually transmitted infections occur among teenagers, and one in four Michigan high school students reports having consumed five or more drinks in a row during the previous month. These behavioral areas should be emphasized in an effective health education program for middle school: healthy eating, physical activity, tobacco prevention, alcohol and other drug prevention, injury and violence prevention, and the prevention of sexual behaviors leading to HIV/STI infections and pregnancy.

In its Policy on Comprehensive School Health Education, the State Board addresses these risks by recommending that Michigan schools do the following:

- Provide at least 50 hours of health at each grade, Prekindergarten through Grade Twelve, to give students adequate time to learn and practice health habits and skills for a lifetime.
- Focus on helping young people develop and practice personal and social skills, such as communication and decision making, in order to deal effectively with health-risk situations.
- Address social and media influences on student behaviors and help students identify healthy alternatives to specific high-risk behaviors.
- Emphasize critical knowledge and skills that students need in order to obtain, understand, and use basic health information and services in ways that enhance healthy living.
- Focus on behaviors that have the greatest effect on health, especially those related to nutrition; physical activity; violence and injury; alcohol and other drug use; tobacco use; and sexual behaviors that lead to HIV, sexually transmitted infections, or unintended pregnancy, as developmentally appropriate.
- Build functional knowledge and skills, from year to year, that are developmentally appropriate.
- Include accurate and up-to-date information, and be appropriate to students' developmental levels, personal behaviors, and cultural backgrounds.

The content expectations contained in this document are intended to help schools address these recommendations.

# **Overview of the Content Expectations**

The Health Education Content Expectations reflect legal requirements, best practices, and current research in the teaching and learning of health education. They build from the Michigan Health Education Standards and Benchmarks (1996) and the State Board of Education's Policy on Comprehensive School Health Education (2004). These content expectations represent a vision for a relevant health education curriculum that addresses critical health knowledge and skills for successfully maintaining a healthy lifestyle during a child's school years and beyond.

The Health Education Content Standards and Expectations were developed with the input of work groups made up of health content experts and faculty from teacher preparation programs, focus groups of teachers and parents, and online reviews by grade level teachers. They are aligned with the 2006 National Health Education Standards; assessment items developed by the State Collaborative for Assessment and Student Standards, Health Education Project of the Council of Chief State School Officers; and the Michigan Model for Health® Curriculum. Students whose work is guided by these standards and expectations will be prepared for responsible and healthy living, at school, at home, and in the workplace.

These expectations are intended to be used over two years, in grades seven and eight. Local districts may determine the best way to divide the expectations according to the needs of the students of the district. For help in using the *Michigan Model for Health*® to meet these content expectations, contact your regional Comprehensive School Health Coordinator.

# Michigan Health Education Content Standards (2006)

I. Core Concepts	All students will apply health	promotion and disease prevention

concepts and principles to personal, family, and community health issues.

2. Access Information All students will access valid health information and appropriate health

promoting products and services.

3. Health Behaviors All students will practice health enhancing behaviors and avoid or reduce

health risks.

4. Influences All students will analyze the influence of family, peers, culture, media, and

technology on health.

5. Goal Setting All students will use goal setting skills to enhance health.

6. Decision Making

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

7. Social Skills All students will demonstrate effective interpersonal communication and

other social skills which enhance health.

8. Advocacy All students will demonstrate advocacy skills for enhanced personal,

family, and community health.

Please note that, while all the Content Standards are addressed in these Grade Level Content Expectations for Health Education as a whole, not all standards will be addressed in each strand.



# STRAND I: NUTRITION AND PHYSICAL ACTIVITY

# Standard 1: Core Concepts

- 1.1 Summarize the benefits of healthy eating, being physically active, and keeping the body hydrated, and the potential consequences of not doing so.
- 1.2 Describe the federal dietary guidelines for teenagers, and the recommended amount of physical activity needed to achieve health benefits.

# **Standard 2: Access Information**

- 1.3 Use nutrition information on food labels to compare products and select foods for specific dietary goals.
- 1.4 Determine the accuracy of health claims on food packages and advertisements in order to choose foods that have the most nutritional value.
- 1.5 Demonstrate the ability to access resources regarding healthy weight management and unhealthy eating patterns; and assess the validity of the resources.

# Standard 3: Health Behaviors

- 1.6 Analyze characteristics of restaurant menu items and methods of preparation to identify healthier food choices one can make when eating out, including at fast food restaurants.
- 1.7 Evaluate a typical day's food intake according to the federal dietary guidelines for teenagers.
- 1.8 Describe moderate-intensity physical activities that are personally enjoyed and that can be enjoyed for a lifetime.

# Standard 4: Influences

1.9 Analyze the influence of television, computer, and video games on physical activity.

# Standard 5: Goal Setting

- 1.10 Assess personal barriers to healthy eating and being physically active, and develop practical solutions to remove these barriers.
- 1.11 Make a personal plan for improving one's nutrition and incorporating physical activity into daily routines.

# Standard 8: Advocacy

1.12 Advocate for the availability of appealing, nutrient-dense foods in the school cafeteria and throughout the school environment.

# **RECOMMENDED** –

# Standard 1: Core Concepts

1.13 Summarize the characteristics of a healthy body image and factors that determine body weight, including body type.

# **Standard 2: Access Information**

1.14 Describe how to access nutrition information about foods offered in restaurants in one's community.

# Standard 3: Health Behaviors

- 1.15 Evaluate the availability of nutrient-dense foods in the school cafeteria and throughout the school environment.
- 1.16 Demonstrate the ability to use safety equipment for physical activity.

#### Standard 7: Social Skills

- 1.17 Demonstrate skills for dealing with pressure to eat in ways that are not healthy.
- 1.18 Demonstrate the ability to persuade peers to eat healthy and be physically active.



# STRAND 2: ALCOHOL, TOBACCO, AND OTHER DRUGS

# Standard 1: Core Concepts

2.1 Analyze how alcohol, tobacco, and other drug use and exposure negatively impacts the user, as well as friends, family members, and community members.

# **Standard 2: Access Information**

2.2 Locate resources in one's school and community, and on the Internet, for information and assistance regarding alcohol, tobacco, and other drug use; and assess the validity of the resources.

#### Standard 3: Health Behaviors

- 2.3 Describe a variety of needs young people may have, explain healthy ways to meet these needs without using alcohol, tobacco, or other drugs, and make a personal commitment to remain drug free.
- 2.4 Recognize risky situations that may lead to trouble, so that one can protect oneself and others from alcohol, tobacco, and other drug use.

# Standard 4: Influences

2.5 Evaluate environmental and social factors, especially advertising strategies, which may influence young people to use alcohol, tobacco, or other drugs.

# Standard 6: Decision Making

2.6 Apply problem-solving skills to hypothetical situations to protect oneself and others from alcohol, tobacco, and other drug use.

# Standard 7: Social Skills

2.7 Demonstrate effective refusal skills to counter pressure to use alcohol, tobacco, or other drugs.

# RECOMMENDED \_\_\_\_\_

# Standard 3: Health Behaviors

- 2.8 Demonstrate how to follow directions for correct use of over-the-counter and prescription medications.
- 2.9 Demonstrate skills to avoid hazards due to another's use of alcohol, tobacco, or other drugs, including avoiding secondhand smoke and riding in a car with someone who has been using alcohol or other drugs.

# Standard 7: Social Skills

- 2.10 Demonstrate ways to support people who are abstaining from and/or trying to quit using alcohol, tobacco, or other drugs.
- 2.11 Compose persuasive advice for peers on how to stay alcohol, tobacco, and drug free.



# **STRAND 3: SAFETY**

# Standard 1: Core Concepts

- 3.1 Describe the characteristics of healthy (positive) and harmful (negative) relationships.
- 3.2 Evaluate the impact of alcohol and other drug use related to safety when dating.
- 3.3 Describe the extent of the problem of dating abuse, assault, and rape.
- 3.4 Define the legal consequences of sexual harassment and violence.

# **Standard 2: Access Information**

3.5 Describe the characteristics of situations for which adult help is needed, including intimidating and dangerous situations, where valid help can be located, and how to access it for self or others.

#### Standard 3: Health Behaviors

- 3.6 Evaluate potential responses to violence to determine the probability of a safe outcome.
- 3.7 Describe strategies to stay safe when using the Internet.
- 3.8 Demonstrate skills and strategies for avoiding or escaping potentially dangerous situations.
- 3.9 Recognize warning signs of potential danger in relationships.

# Standard 4: Influences

**3.10** Evaluate individual, group, and societal influences that promote peace and respectful behaviors, and those that promote violence and disrespectful behaviors.

# Standard 6: Decision Making

**3.11** Apply the problem-solving steps to hypothetical situations involving assault and intimidation, including sexual harassment.

# Standard 7: Social Skills

- 3.12 Apply conflict resolution skills to real or hypothetical situations involving peers.
- 3.13 Demonstrate skills for dealing with intimidation, including sexual harassment.

# RECOMMENDED ———

# Standard 3: Health Behaviors

- 3.14 Demonstrate skills to avoid or escape a potentially violent dating situation.
- 3.15 Demonstrate the ability to properly and consistently use a variety of safety gear, including seat belts.
- 3.16 Assess situations for safety hazards and consequences, and make recommendations regarding safety procedures or safety gear to alleviate the risks.
- 3.17 Commit to taking individual action to promote peace.

# Standard 4: Influences

3.18 Analyze influences that can lead to abusive relationships, including expectations for males and females.

# **Standard 8: Advocacy**

3.19 Advocate for changes in home, school, or community environments that would increase safety.



# STRAND 4: SOCIAL AND EMOTIONAL HEALTH

(Note: Teaching these standards is central to the implementation of an effective Positive Behavior Support system.)

# Standard 1: Core Concepts

- **4.1** Distinguish between passive, aggressive, and assertive communication.
- **4.2** Describe the warning signs, risk factors, and protective factors for depression and suicide.

# **Standard 2: Access Information**

- **4.3** Analyze situations as to whether they call for simple acts of caring among friends, or require getting the help of caring adults.
- **4.4** Demonstrate how to ask trusted adults and friends for help with emotional or mental health concerns for oneself or others, including the risk of suicide.
- **4.5** Demonstrate the ability to locate school and community resources to assist with problems related to emotional health concerns, including when someone is in danger of hurting self or others.

# Standard 3: Health Behaviors

- **4.6** Describe the signs and symptoms of stress.
- 4.7 Demonstrate the ability to use stress management techniques.

# Standard 4: Influences

- 4.8 Explain internal and external factors that help to determine how one acts toward others.
- 4.9 Demonstrate using the problem solving steps to solve a problem.

#### Standard 7: Social Skills

- **4.10** Demonstrate ways to show caring and respect for others, including those with real or perceived differences (e.g., cultural differences, disabilities, gender, and sexual orientation).
- 4.11 Demonstrate the ability to use assertive communication skills.
- **4.12** Apply conflict resolution skills to real or hypothetical situations involving peers.

# RECOMMENDED —

# Standard 1: Core Concepts

4.13 Describe essential character traits needed for personal success and well being.

#### Standard 3: Health Behaviors

4.14 Apply skills to manage strong feelings.

# Standard 6: Decision Making

**4.15** Apply character traits during the process of making a decision.

# Standard 7: Social Skills

4.16 Evaluate behaviors, including one's own, to determine if they are examples of essential character traits.

# Standard 8: Advocacy

4.17 Advocate for a school environment in which everyone treats each other with caring and respect.



# **STRAND 5: PERSONAL HEALTH AND WELLNESS**

# Standard 1: Core Concepts

- **5.1** Describe the importance of rest and sleep for personal health.
- 5.2 Explain how common infectious diseases are transmitted by air, indirect contact, and person-to-person contact.

# **Standard 2: Access Information**

5.3 Locate resources in one's school and community, and on the Internet, related to personal health issues and concerns; and assess the validity of the resources.

#### Standard 3: Health Behaviors

- 5.4 Apply health practices that can prevent the spread of illness, including foodborne illness.
- 5.5 Demonstrate basic first aid skills (i.e., controlling bleeding, Heimlich maneuver).
- 5.6 Analyze the characteristics of an illness or injury to determine whether it is necessary to seek medical care.
- **5.7** Demonstrate the proper steps to protect against harm from the sun.

# Standard 4: Influences

5.8 Analyze the social influences that encourage or discourage a person to practice sun safety.

# Standard 5: Goal Setting

5.9 Create a plan to incorporate adequate rest and sleep in daily routines.

# RECOMMENDED\_\_\_\_\_

# **Standard 2: Access Information**

- 5.10 Locate resources in one's school and community, and on the Internet, for first aid information and training; and assess the validity of the resources.
- 5.11 Demonstrate the ability to access information about personal health products (e.g., deodorant, shampoo, sun screen, and dental care products), and evaluate the information's validity.

# Standard 3: Health Behaviors

5.12 Explain strategies to support youth who have illnesses such as asthma, epilepsy, or diabetes.

# Standard 4: Influences

5.13 Analyze the influence of media on selection of personal health care products.



# STRAND 6: HIV AND STIs PREVENTION

(Note: Course content should be reviewed to determine whether it is consistent with the district's board policies and approved curriculum. State law requires that, before adopting any revisions to the approved HIV curriculum, the local school board shall hold public hearings on the revision. For the specific language of the law, see Section 380.1169 of the Michigan Compiled Laws at www.michiganlegislature.org.)

# Standard 1: Core Concepts

- **6.1** Explain how HIV is and is not transmitted.
- 6.2 Distinguish between facts and myths regarding HIV infection and AIDS.

# **Standard 2: Access Information**

- **6.3** Explain when it is important to get adult, medical, and/or counseling help.
- **6.4** Describe sources of accurate information and assistance in one's community.

#### Standard 3: Health Behaviors

- 6.5 Analyze behaviors and situations that may result in increased risk for HIV and other sexually transmitted infections (STIs).
- 6.6 Analyze situations where assertive communication and refusal skills can be used to avoid and escape risky situations.



# STRAND 7: SEXUALITY EDUCATION

(Note: State law makes whether to offer sexuality education a local district decision. Course content must be reviewed by the district's Sex Education Advisory Board to determine whether it is consistent with the district's board policies and approved sexuality education curriculum. If the district chooses to offer sexuality education, certain content must be included in an age-appropriate fashion in the K-12 instructional program. This content is integrated into these content expectations. For the specific language of the law, see Sections 380.1507, 1507a, and 1507b of the Michigan Compiled Laws at www.michiganlegislature.org.)

# Standard 1: Core Concepts

- 7.1 Summarize the benefits of staying within behavioral limits and remaining abstinent.
- 7.2 Compare characteristics of healthy and unhealthy relationships, and describe ways to express caring for a boyfriend or girlfriend while staying abstinent.

# Standard 3: Health Behaviors

- 7.3 Set personal boundaries and limits related to physical intimacy and sexual behavior.
- 7.4 Demonstrate skills to avoid and escape risky situations.

# **Standard 4: Influences**

- 7.5 Examine viewpoints of parents and other trusted adults regarding teen relationships, abstinence, and sexual decisions.
- 7.6 Evaluate the impact of alcohol and other drug use on decisions regarding sexual behavior.

# Standard 5: Goal Setting

7.7 Create a plan to stay within behavioral limits which protect one from HIV and STIs.

# Standard 7: Social Skills

- 7.8 Demonstrate the ability to communicate one's behavioral limits and to show respect for the limits of others related to physical intimacy and sexual behavior..
- 7.9 Demonstrate the ability to use verbal and non-verbal ways to refuse participation in sexual behavior.

# Standard 8: Advocacy

7.10 Demonstrate the ability to be positive peer role models in the school and community.

# **Acknowledgements**

#### **Academic Review**

Cheryl Blair, Kent ISD

Brenda Cook, New Buffalo Area Schools

Mariane Fahlman, Wayne State University

Marianne Frauenknecht, Western Michigan University

Kathy Gibson, Wayne County RESA

Joni Henretty, Grand Ledge Public Schools

Marilyn Mann, St. Joseph Public Schools

Pauline Pruneau, Oakland Schools

Sally Rae, Siena Heights University

Pamela Sook, Gratiot-Isabella RESD

Theresa Stinson Lahring, Fruitport Community Schools

Linda Todd, Coldwater Community Schools

Mary Margaret Utess, Lansing IHM-St. Casimir School

Martha Ware, Wayne-Westland Community Schools

Warren Wood, Carrollton Public Schools

Mary Yeomans, Bay City Public Schools

Sara Zeko, Grand Ledge High School

# **Health Content Expert Review**

Shannon Carney Oleksyk, Michigan Department of Community Health

Deborah Grischke, MSU Extension: Michigan TEAM Nutrition

Karen Krabill Yoder, Michigan Department of Community Health

Patti Steele-Kefgen, Macomb ISD

#### **Internal Review**

Nicholas Drzal, Michigan Department of Education

Barbara Flis, Parent Action for Healthy Kids

Nancy Haney, Haney & Associates

Nancy Hudson, Council of Chief State School Officers

Martha Neilsen, Michigan Department of Education

Merry Stanford, Michigan Department of Education



#### Michigan Department of Education

Grants Coordination and School Support Mary Ann Chartrand, Director (517) 373-4013 www.michigan.gov/mde



# Michigan State Board of Education

Kathleen N. Straus
President

**Bloomfield Township** 

John C.Austin Vice President Ann Arbor

Carolyn L. Curtin Secretary Evart

Marianne Yared McGuire
Treasurer
Detroit

Nancy Danhof NASBE Delegate

East Lansing

Elizabeth W. Bauer Member Birmingham

Reginald M.Turner
Member
Detroit

Casandra E. Ulbrich
Member
Rochester Hills

Gov. Jennifer M. Granholm
Ex Officio

Michael P. Flanagan Chairman Superintendent of Public Instruction Ex Officio

Carol Wolenberg
Deputy Superintendent

Mary Ann Chartrand
Director
Grants Coordination
and School Support