

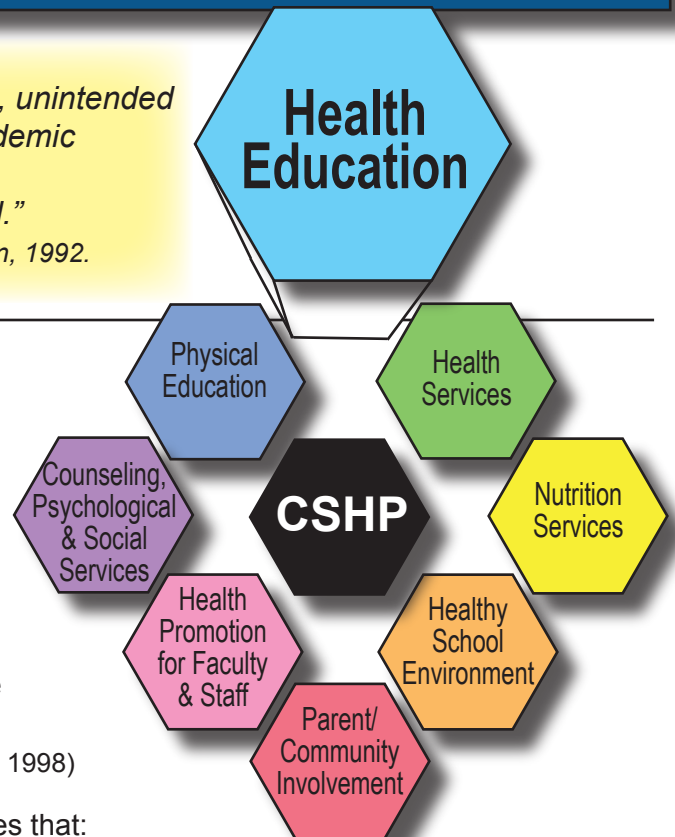
Comprehensive School Health Education

“Children who face violence, hunger, substance abuse, unintended pregnancy, and despair can not possibly focus on academic excellence. There is no curriculum brilliant enough to compensate for a hungry stomach or a distracted mind.”

-National Action Plan for Comprehensive School Health Education, 1992.

Why is Comprehensive School Health Education needed?

- ♦ The American public agrees that health education is critical. Adults in a nationally representative survey identified performance standards they thought were critical for high school graduation. Ten (40 percent) of the 25 critical standards identified by this representative group were health-related.
(Mid-Continent Research for Education and Learning Survey, 1998)
- ♦ The 2005 Michigan Youth Risk Behavior Survey indicates that:
 - 30% of high school students were in a physical fight in the last thirty days.
 - 26% have experienced the symptoms of clinical depression in the last year.
 - 16% seriously considered suicide.
 - 23% have used tobacco and 38% have used alcohol in the last thirty days.
 - 37% have tried marijuana.
 - 42% have had sexual intercourse.
 - only 17% eat five or more servings of fruit and/or vegetables a day.
 - 33% are not physically active.



What is Comprehensive School Health Education?

Comprehensive School Health Education is an instructional plan to provide young people and their families with critical health information and skills that will encourage positive health behaviors. Comprehensive School Health Education is most effective when it:

- Provides developmentally appropriate, sequential, comprehensive health education lessons at each grade level.
- Addresses all of the critical health areas that put children and youth most at risk.
- Is aligned to health education standards and content expectations.
- Assesses students' level of health knowledge and skills.
- Implemented with all students.
- Involves families and communities.
- Provides professional development to help teachers stay current on legislation, health content, curriculum, and teaching strategies.

What is the connection between learning and Health Education?

1. Research shows that effective health education helps to remove barriers to learning.
 - a. Students improve their health skills and behaviors.
 - b. They engage in fewer of the risky behaviors targeted by the program.
 - c. In the case of the *Michigan Model*[®], middle school students developed a stronger resistance to using alcohol and other drugs.
 - d. Students show more pro-social behavior and less antisocial and self-destructive behaviors.
2. Comprehensive health education and social skills programs for high-risk students improved school and test performance, attendance and school connectedness. And this success was still apparent six years later.
3. In one study, the reading and math scores of third and fourth grade students who received comprehensive health education were significantly higher than those who did not receive health education.

What does the Comprehensive School Health Coordinators' Association (CSHCA) do to help?

The Comprehensive School Health Coordinators' Association (CSHCA) provides training and consultation for its members, assisting them in providing the following services:

- Curriculum **training** in the *Michigan Model for Health*[®].
- Technical assistance to **align** health curriculum and academic standards.
- Advice regarding state and federal **legislation** related to health education.
- **Partnering** with state, regional, and local health organizations to implement and promote health education.



For More Information

Comprehensive School Health Coordinators' Association www.cshca.org
Michigan Department of Education www.michigan.gov/healthed
Educational Materials Center at Central Michigan University www.emc.cmich.edu
Health Education Assessment Project (SCASS~HEAP) www.ccsso.org

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