




COMPREHENSIVE SCHOOL HEALTH EDUCATION



A planned, sequential, K-12 curriculum that addresses the physical, mental, emotional and social dimensions of health. The curriculum is designed to motivate and assist students to maintain and improve their health, prevent disease, and reduce health-related risk behaviors. It allows students to develop and demonstrate increasingly sophisticated health-related knowledge, attitudes, skills, and practices. The curriculum includes a variety of topics such as personal health, family health, community health, consumer health, environmental health, sexuality education, mental and emotional health, injury prevention and safety, nutrition, prevention and control of disease, and substance use and abuse. ¹

Comprehensive School Health Education has a positive impact on student achievement by:

- Increasing health knowledge
- Improving health skills and behaviors
- Decreasing risky behaviors
- Improving reading and mathematics scores

INCREASE IN HEALTH KNOWLEDGE, SKILLS AND BEHAVIOR ²

Findings from the School Health Education Evaluation show significant increases in overall knowledge (5.8%) and program-specific knowledge (7.4%) when compared with control groups. Smaller, yet statistically significant increases were found for attitudes (1.2%) and self-reported practices (1.5%). While a few hours of instruction produce large effects for knowledge, additional hours are required for the development of attitude and practice effects. In all, it requires 40-50 classroom hours to adequately affect health knowledge, attitudes, and practices.

DECREASING RISKY BEHAVIORS: ALCOHOL ³

A drug and alcohol prevention program which focused on resistance skills, social norms and facilitation and development of personal and social skills, was implemented with urban minority youth (grades 7-9). The intervention had significant effects on the rates of binge drinking, drinking knowledge, pro-drinking attitudes and peer drinking norms.

DECREASING RISKY BEHAVIORS: TOBACCO ⁴

Project Towards No Tobacco Use (Project TNT), a school-based tobacco use intervention in middle school, had lasting positive effects two years after implementation, as students transitioned to high school. Three types of curricula were evaluated; physical consequences curriculum was successful at limiting the increases in adolescent smokeless tobacco use. Various approaches were successful at decreasing cigarette experimentation yet a comprehensive program was necessary to affect weekly use of both forms of tobacco.

CSHE CURRICULUM FOSTERS HIGHER READING AND MATHEMATICS SCORES ⁵

Third and fourth grade students who received instruction in the Growing Healthy curriculum achieved higher reading and mathematics standardized test scores than their control group counterparts. The Growing Healthy curriculum was designed to integrate with other subject areas and to foster academic improvement through the use of multi-media and small group “learning stations” which convey health information.

COMPREHENSIVE SOCIAL COMPETENCE TRAINING HAS LONG TERM IMPACT ⁶

This multidisciplinary, inter-institutional, action-research collaboration project promoted social competence by focusing on social decision-making, self-control, group participation and social awareness skills. Project students surveyed five years following the training exceeded the control groups in overall achievement, language and math scores, and less absenteeism. Project students also engaged in less alcohol use, vandalism, violence, and tobacco use.

U.S. ADULTS BELIEVE SCHOOL HEALTH EDUCATION IS NECESSARY ⁷

When asked which standards should be addressed in the school curriculum, 73.9% of the American public felt health was “definitely necessary.” Health standards received the highest overall rating of any subject.

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