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Purpose of Comprehensive Health and Physical Education

“In the great work of education, our physical condition, if not the first step in point of importance, is the first in order of time. On the broad and firm foundation of health alone can the loftiest and most enduring structures of the intellect be reared.” ~Horace Mann

"We know what the Greeks knew: that intelligence and skill can only function at the peak of their capacity when the body is healthy and strong, and that hardy spirits and tough minds usually inhabit sound bodies." ~John F. Kennedy

Preparing students for the 21st century cannot be accomplished without a strong and sustained emphasis on all students’ health and wellness. It no is longer acceptable to think of “gym class” and “hygiene lessons.” Today’s world has exploded with physical, mental, and social influences that affect not only learning in school, but also the lifelong health of the citizens that schools are preparing for graduation. Health and physical education prepare students to function optimally as students, global citizens, and workers who demonstrate personal responsibility for one’s health and fitness through an active, healthy lifestyle that fosters a lifelong commitment to wellness. These standards encourage physical literacy, which is the ability to move with competence and confidence in a wide variety of physical activities in multiple environments that benefit the healthy development of the whole person, as well as, health literacy, which is the ability of individuals to obtain, process, and understand basic health information and services needed to make appropriate health decisions.

Health education and physical education are separate disciplines, each with a distinct body of knowledge and skills. However, the two disciplines are naturally interdisciplinary and clearly complement and reinforce each other to support wellness. Schools have a unique role and responsibility to address both health and physical education from preschool through twelfth grade to instill and reinforce knowledge and skills needed to be healthy and achieve academically.

Colorado’s comprehensive health and physical education standards lay out a vision for these vitally important disciplines, and describe what all students should know and be able to do at each grade level through eighth grade and in high school. The authors of this document were preschool through twelfth-grade educators, higher education professors, business representatives, and community members. The group developed a set of competencies starting with "the end in mind." What concepts and skills would a "prepared graduate" in the 21st century possess when he or she left high school? The answers to this question framed the work that led to the development of four standards in comprehensive health and physical education for preschool through twelfth grade.

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Prepared Graduates in Comprehensive Health and Physical Education

1. Apply knowledge and skills to engage in lifelong healthy eating.

2. Apply knowledge and skills necessary to make personal decisions that promote healthy relationships and sexual and reproductive health.

3. Apply knowledge and skills related to health promotion, disease prevention, and health maintenance.

4. Utilize knowledge and skills to enhance mental, emotional, and social well-being.

5. Apply knowledge and skills to make health-enhancing decisions regarding the use of marijuana, illegal drugs, prescription drugs, alcohol, and tobacco.

6. Apply knowledge and skills that promote healthy, violence-free relationships.

7. Apply personal safety knowledge and skills to prevent and treat injury.
Standards in Comprehensive Health and Physical Education

Standards are the topical organization of an academic content area. The four standards of comprehensive health and physical education are:

1. **Movement Competence and Understanding**
   Includes motor skills and movement patterns that teach skill and accuracy in a variety of routines, games, and activities that combine skills with movement; demonstrates the connection between body and brain function; and creates patterns for lifelong physical activity.

2. **Physical and Personal Wellness**
   Includes physical activity, healthy eating, and sexual health and teaches lifelong habits and patterns for a fit, healthy, and optimal childhood and adulthood; examines society, media, family, and peer influence on wellness choices; practices decision-making and communication skills for personal responsibility for wellness; and identifies the consequences of physical inactivity, unhealthy eating, and early sexual activity. Includes health promotion and disease prevention, and teaches responsibility and skills for personal health habits as well as behavior and disease prevention; sets personal goals for optimal health; examines common chronic and infectious diseases and causes; and recognizes the physical, mental, and social dimensions of personal health.

3. **Social and Emotional Wellness**
   Includes mental, emotional, and social health skills to recognize and manage emotions, develop care and concern for others, establish positive relationships, make responsible decisions, handle challenging situations constructively, resolve conflicts respectfully, manage stress, and make ethical and safe choices; examines internal and external influences on mental and social health; and identifies common mental and emotional health problems and their effect on physical health.

4. **Prevention and Risk Management**
   Includes alcohol, tobacco, and other drug prevention; violence prevention; and safety; teaches skills to increase safe physical and social behavior in at home, in school, in the community, and in personal relationships; provides specific knowledge on avoidance of intentional and unintentional injuries; and practices decision-making and communication skills to avoid drug use, bullying, and dating violence.

The four standards are organized across comprehensive health and physical education in the following manner:

**Comprehensive Health** standards:
1. Physical and Personal Wellness
2. Social and Emotional Wellness
3. Prevention and Risk Management

**Physical Education** standards:
1. Movement and Competence Understanding
2. Physical and Personal Wellness
3. Social and Emotional Wellness
4. Prevention and Risk Management
General Considerations for Health Education:

There has been a shift in the focus of health education instruction in the last few years. In the past, health education was very much focused on health knowledge. The current state of health education encourages comprehensive skills-based health education that addresses multiple behaviors through instruction that ensures that information is medically accurate and developmentally appropriate, while allowing students to have multiple opportunities to learn, practice, and reinforce their learning and skills to support transfer beyond the classroom. The essential health skills of accessing information, analyzing influences, decision making, goal setting, interpersonal communication, self-management, and advocacy are foundational component to the comprehensive health education standards. These standards ultimately focus on supporting healthy behaviors, life-long health, and wellness.

In revising the health education standards, the authors fully acknowledge that local school districts may need to make modifications based on local courses, infrastructure, and available resources. The standards and evidence outcomes are intended to guide the health education experience of students’ PK-12 and are not intended to be a checklist, but are used to frame objectives for a standard and to provide guidance for teaching health concepts and skills. As part of the revision process, the committee identified the key health skills for each grade level expectation. This provides a specific skill focus across all grade levels.

It is important to note that local data and students’ needs should drive the focus of the health education at the local level. With constantly changing health concerns regarding behaviors and drug use, it is up to the local communities to address their specific local needs regarding priority behaviors and drug use. The standards related to drug use prevention are intended to guide specific skills regarding the prevention of drug use. The specific drugs identified in the standards are not limiting, prioritized, or, comprehensive, and local schools and districts should identify their areas of focus on based on local data.
COMPREHENSIVE HEALTH
Preschool, Standard 2. Physical and Personal Wellness

Prepared Graduates:
1. Apply knowledge and skills to engage in lifelong healthy eating.

Preschool Learning and Development Expectation:
1. Distinguish between healthy and unhealthy foods.

Indicators of Progress

By the end of the preschool experience (approximately 60 months/5 years old), students may:

a. Distinguish food on a continuum from most healthy to least healthy.
b. Demonstrate the ability to identify and choose a healthy food choice.
c. Recognize the benefits of choosing a healthy food.

Examples of High-Quality Teaching and Learning Experiences

Supportive Teaching Practices/Adults May:
1. Model and talk about eating healthy foods and how healthy foods make you feel.
2. Support children in discovering different food preferences represented by the families in the classroom and community.
3. Talk about the different foods groups and what food groups we need more or less of in a day.
4. Provide a variety of healthy food choices for children to taste and also allow for children to decline eating.
5. Support alternative healthy food during celebrations and non-food rewards.
6. Ensure that a variety of healthy foods are provided during celebrations and special events.
7. Portion plates are provided in the dramatic play area along with a variety of play foods including foods from different cultures, especially those foods representative of the classroom and community.
8. Provide cooking experiences that children participate in.

Examples of Learning/Children May:
1. During snack time the child comments on the apple on the plate by saying “Look, Mr. Bob, we have a healthy snacks today. There’s some carrots and hummus.”
2. During snack time, Ms. Ling talks with children about the different choices for snack and how a food like an apple gives us more energy and helps us grow.
3. Children sort food items into food groups.
4. During read aloud the adult reads a book on bread from all around the world. The adult asks the children what type of bread the children eat in their home. The children respond with “bagels, tortillas, naan, rice, etc.”
5. In the science area, children point to the food chart visual and recognize and comment on the less healthy foods saying “we eat a little of this items to be healthy.”
Prepared Graduates:
3. Apply knowledge and skills related to health promotion, disease prevention, and health maintenance.

Preschool Learning and Development Expectation:
2. Develop self-management skills and personal hygiene skills to promote healthy habit.

Indicators of Progress
By the end of the preschool experience (approximately 60 months/5 years old), students may:

a. Complete personal care tasks such as using clean tissues, washing hands, handling food hygienically, brushing teeth, and choosing appropriate clothing for the weather
b. Prevent or reduce the spreading of germs such as covering the mouth for coughing and sneezing, not putting toys in the mouth, not sharing drinks and food
c. Understand that personal hygiene is an important step in the prevention of disease and illness.

Examples of High-Quality Teaching and Learning Experiences
Supportive Teaching Practices/Adults May:
1. Introduce how to use different technology such as “hands-free” water faucets, soap and towel dispensers and toilets.
2. Post a visual on the steps for hand washing.
3. Ensure toilets, drinking water and hand washing facilities are easily accessible to children and staff. Sinks and toilets are either child-sized or made accessible by non-slip stools.
4. Model washing their hands with soap and water before feeding, preparing or serving food.
5. Adults supervise and assist children with washing hands, handling food and brushing teeth developing classroom and personal routines as appropriate.
6. Ensure soap and disposable towels are provided within a child’s reach, at all sinks to promote independence
7. Ensure extra jackets, gloves, hats, and boots are kept on hand so that children who arrive without appropriate attire will still be able to participate.

Examples of Learning/Children May:
1. Independently brush their teeth after eating using the proper steps.
2. Mr. Bob supports Matab in thinking what clothing she needs for the weather outside today.
3. Mrs. Ramirez reminds Abraham to wash his hands before going to the snack center.
4. Abraham refers to the hand washing chart as he independently goes through and follows the hand washing steps.
5. During the cooking activity, Almir reminds the other children to wash their hands before they start the activity.
6. After breakfast, Miss Lupe places toothpaste in small cups for the children. The children are called over in pairs to brush their teeth as she assists and supervises them.
Prepared Graduates:
4. Utilize knowledge and skills to enhance mental, emotional, and social well-being.

Preschool Learning and Development Expectation:
1. Children develop healthy relationships and interactions with adults and peers.

Indicators of Progress
By the end of the preschool experience (approximately 60 months/5 years old), students may:

a. Communicate with familiar adults and accept or request guidance.
b. Cooperate with others.
c. Develop friendships with peers.
d. Establish secure relationships with adults.
e. Use socially appropriate behavior with peers and adults, such as helping, sharing and taking turns.
f. Resolve conflict with peers alone and/or with adult intervention as appropriate.
g. Recognize and label others’ emotions.
h. Express empathy and sympathy to peers.
i. Recognize how actions affect others and accept consequences of one’s action.

Examples of High-Quality Teaching and Learning Experiences
Supportive Teaching Practices/Adults May:
1. Model positive ways to interact with others.
2. Provide opportunities for children to understand and discuss their feelings and those of others (i.e. show empathy).
3. Help children see the effect of their behavior on others and help them resolve conflicts.
4. Model asking for and understanding viewpoints and opinions of others. For example, a teacher may kneel between two children in conflict over classroom materials and comment, “I’m looking at Jason’s face and I notice his tight lips and wonder if he is angry.”
5. Accept silence and quiet observation as a proper way for some children to participate, especially when they first join your class.
6. Embed learning of friendships skills such as taking turns, exchanging toys, entering a playgroup, and resolving conflict daily in the classroom.
7. Comments on a specific behavior using positive descriptive praise. (“You stayed with the puzzle until you finished! That is great persistence-sticking with a difficult activity.”)

Examples of Learning/Children May:
1. During large group time, the adult asks Lamar and Antonia to share how they solved their problem of both children wanting to use the tree blocks to build. Lamar responds “We used our solutions and took turns!”
2. During a small group activity the adult asks children to provide examples of when a friend helped you. Jamie responds “Edgar helped me zip up my coat. He is good at zipping.”
3. The adult role plays, with puppets, a scenario of a child taking a toy from another child. The adult asks “How might that make Gwen feel, when Gabby took away her toy?” Nicholas responds with “Gwen would feel sad.”
Prepared Graduates:
4. Utilize knowledge and skills to enhance mental, emotional, and social well-being.

Preschool Learning and Development Expectation:
2. Children develop self-concept and self-efficacy skills.

Indicators of Progress

_by the end of the preschool experience (approximately 60 months/5 years old), students may:_

- Identify personal characteristics, preferences, thoughts and feelings.
- Demonstrate age-appropriate independence in a range of activities, routines and tasks.
- Show confidence in a range of abilities and in the capacity to accomplish tasks and take on new tasks.
- Demonstrate age appropriate independence in decision-making regarding activities and materials.

Examples of High-Quality Teaching and Learning Experiences

Supportive Teaching Practices/Adults May:
1. Encourage children to try new things by sharing and learning together.
2. Provide materials and activities to further learning at the child’s developmental level and to foster feelings of competence.
3. Observe for children’s interests and plan learning activities to support them.
4. Support children’s awareness of pride in their cultural heritage. (e.g. Adult learns and utilizes child’s home language. Adult reads multicultural books).
5. Listen to what children are saying and show you value their opinions by acknowledging them and building on their ideas.
6. Provide choices in materials and activities to further learning at the child’s developmental level (open-ended art materials, knobbed puzzles, child-sized manipulatives).
7. Accept silence or quiet observation as a proper way for some children to participate, especially when they first join your class.
8. Use open-ended questions such as "What would happen if...? ", "How would you feel if...? ", "What would you do if...?"

Examples of Learning/Children May:
1. Provide opportunities for children to understand similarities and differences with each other.
2. During the preschool day, children put on their coat, hat and gloves, wash their hands and serve themselves a snack. When needed, an adult scaffolds children’s abilities to be independent.
3. As part of planning time, Marek discusses his plan for work time.
4. During large group time, the adult provides opportunities for community building. Abby talks about her favorite pet kitty. Marco shares his favorite ice cream and Leo talks about his nana in Arizona.
Prepared Graduates:
4. Utilize knowledge and skills to enhance mental, emotional, and social well-being.

Preschool Learning and Development Expectation:
3. Children develop self-regulation skills.

Indicators of Progress
By the end of the preschool experience (approximately 60 months/5 years old), students may:
a. Recognize and label emotions.
b. Handle impulses and behavior with minimal direction.
c. Follow simple rules, routines and directions.
d. Shift attention between tasks and move through transitions with minimal direction from adults.
e. Attend to free play activities for longer periods of time.

Examples of High-Quality Teaching and Learning Experiences
Supportive Teaching Practices/Adults May:
1. Make a cozy, safe area where children can be alone if they wish.
2. Establish, explain and model flexible routines (e.g., a naptime routine, snack and meal routines, transitions, and small group time expectations) in terms children can understand including songs, rhymes, and pictures.
3. Be aware that children from different cultures may interpret a single action by an adult to have different meanings. For example, an adult may point a finger to signal where she wants the child to go, but some children may think she is reprimanding them, singling them out for some reason, or saying she wants “one” of something (since she has one finger out).

4. Provide physical environments, schedules, social stories, solution tools, routines that promote self-regulation and self-control.
5. Provide physical environments, daily schedules, and a variety of open-ended materials that support children in spending the majority of their day in purposeful, unstructured play to ensure children have ample opportunity to make choices and direct their own play.
6. Modify the environment for children who have sensory issues and may be affected by noise, lights or movement.

Examples of Learning/Children May:
1. Listen to/discuss books about emotions and respond to situations in stories that evoke emotions.
2. Identify emotions in photographs of other children and adults.
3. Create drawings, paintings, collages or a class book about emotions.
4. Engage in decision making throughout the day including choice of materials, centers and play partners.
5. Practice waiting for short periods of time such as waiting for a turn to pour milk at a meal or waiting for a peer to finish using the scissors while rolling and cutting play-dough.
Prepared Graduates:
4. Utilize knowledge and skills to enhance mental, emotional, and social well-being.

Preschool Learning and Development Expectation:
4. Children develop a healthy range of emotional expressions and learn positive alternatives to aggressive or isolating behaviors.

Indicators of Progress
By the end of the preschool experience (approximately 60 months/5 years old), students may:

a. Express a range of emotions appropriately, such as excitement, happiness, sadness, and fear.
b. Refrain from disruptive behavior, aggressive, angry, or defiant behaviors.
c. Adapt to new environments with appropriate emotions and behaviors.

Examples of High-Quality Teaching and Learning Experiences
Supportive Teaching Practices/Adults May:
1. Provide tasks in which the goal is trying different strategies or solutions rather than right or wrong answers.
2. Be aware that ways of expressing feelings, such as excitement, anger, happiness, frustration and sadness, differ in various cultures.
3. Observe for and verbally describe strategies that children are already using to express and manage emotions. Provide constructive and connected learning experiences that build upon those strategies.

Examples of Learning/Children May:
1. Talk about and model ways children can express emotions without harming themselves, others, or property (e.g., using calm down techniques such as cozy corner, breathing exercises, using pounding toys, manipulating playdough or talking to an adult.)
2. Reflect on personal experiences that evoked strong emotions
3. Experiment with new materials and activities without fear of making mistakes.
4. Act out powerful emotions (e.g., fear, anger) through dramatic play.
5. Engage with peers and teachers appropriately, demonstrating socially acceptable behaviors.
Prepared Graduates:
7. Apply personal safety knowledge and skills to prevent and treat injury.

Preschool Learning and Development Expectation:
1. Identify ways to be safe while at play.

Indicators of Progress

By the end of the preschool experience (approximately 60 months/5 years old), students may:

a. State how to be a safe walking across the street.

b. Follow basic health and safety rules inside and outside the classroom.

c. Communicate to a parent or trusted adult if something is not safe.

d. Communicate and understanding the importance of health and safety routines and rules.

Examples of High-Quality Teaching and Learning Experiences

Supportive Teaching Practices/Adults May:
1. After breakfast, Miss Lupe places toothpaste in small cups for the children. The children are called over in pairs to brush their teeth as she assists and supervises them.
2. Identify situations in the classroom, school, and community that may be unsafe and discuss how to make them safe or prevent injuries.
3. Provide opportunities for children’s participation in creating safety rules.
4. Provide accommodations and adaptations for children with disabilities in the classroom and outside so all children can participate in the activities.
5. Establish routines that instill responsibility for keeping the learning environment clean and safe.
6. During the day, the adult reminds the children of specific rules.

Examples of Learning/Children May:
1. Chu communicates to the adult that he found glass on the playground.
2. Ruby reminds Vlad to wear his helmet when riding the tricycle so that his head is safe if he falls.
3. During the class meeting, children contribute ideas on how to safely use the playground equipment.
4. On the way to the library, Miss Emelia reminds the children (as a group) to stop at the crosswalk, then asks the lead child to check both ways for oncoming traffic before walking across the street.
5. During a class meeting, Mr. Ben and the preschool children create a list of safe ways to use the playground equipment as well as discussing why certain types of play might be more likely to cause injuries. Together they decide that not walking too close to the swings is an important rule. Thomas suggests that they create a line in front of the swings using a jump rope so that everyone knows not to come too close.
6. Paul waits for Sarah to move away from the base of the slide before he slides down.
Prepared Graduates:
6. Apply knowledge and skills that promote healthy, violence-free relationships.

Preschool Learning and Development Expectation:
2. Identify the importance of respecting the personal space and boundaries of self and others.

Indicators of Progress
By the end of the preschool experience (approximately 60 months/5 years old), students may:

a. Begin to understand the importance of personal space.
b. Explain the importance of personal space in the classroom and around others.
c. Explain that each person has the right to tell others not to touch his or her body.
d. Identify “appropriate” and “inappropriate” touches.
e. Identify characteristics of a trusted adult.
f. Seek out a parent or trusted adult for support in resolving an unwanted action or feeling they have experienced.

Examples of High-Quality Teaching and Learning Experiences
Supportive Teaching Practices/Adults May:
1. Model respect for individuals by asking permission to hug, hold hands, help with personal hygiene and dressing.
2. Adults are aware of children at all times and intervene when there is unwanted physical touching between children.
3. During large group, the adult helps define children’s personal space by providing individual carpet square.
4. The adult is careful to encourage children’s participation in group activities, but respects a child’s right to decline.
5. Read stories/discuss standing up for yourself and seeking out adult support when needed.

Examples of Learning/Children May:
1. During outdoor time, Dowa says to Malia “I don’t like you pulling my arm.”
2. During large group time, the children grab their carpet square and use them to define their personal space.
3. Ask the adult for help with a conflict or tell the adult about something they have experienced that they didn’t like.