

Health Education
Content Standards
for California
Public Schools

Grade Three

Publishing Information

When the *Health Education Content Standards for California Public Schools, Kindergarten Through Grade Twelve* was adopted by the California State Board of Education on March 12, 2008, the members of the State Board were the following: Theodore Mitchell, President; Ruth Bloom, Vice President; James Aschwanden; Alan Bersin; Yvonne Chan; Gregory Jones; David Lopez; Kenneth Noonan; Johnathan Williams; and Monica Liu.

This publication was edited by John McLean, working in cooperation with Mary Marks, Consultant, Learning Support and Partnerships Division. It was prepared for printing by the staff of CDE Press: Cheryl McDonald created and prepared the cover and interior design; Jeannette Reyes typeset the document. It was published by the Department of Education, 1430 N Street, Sacramento, CA 95814-5901. It was distributed under the provisions of the Library Distribution Act and *Government Code* Section 11096.

© 2009 by the California Department of Education

All rights reserved

ISBN 978-0-8011-1695-7

Acknowledgments

The State Board of Education extends its appreciation to the members and staff of the California Health Education Standards Advisory Panel for their outstanding work in developing and recommending the health education content standards to the State Board of Education under the provisions of *Education Code* Section 51210.8.

State Superintendent of Public Instruction Jack O'Connell appointed the following educators to the California Health Education Standards Advisory Panel:

Martha Adriasola-Martinez, San Francisco Unified School District
Beverly Bradley, School Health Consultant, San Diego
Marilyn Briggs, University of California, Davis
Laurie Brown, Los Angeles Unified School District
Sally Champlin, California State University, Long Beach
Kim Clark, California State University, San Bernardino
Sheri Coburn, San Joaquin County Office of Education
Cornelia Finkbeiner, Menlo Park City Elementary School District
Laura Griffith, Los Angeles Unified School District
Sloan Holmes, Kern Union High School District
Tad Kitada, Placer County Office of Education
Ric Loya, Los Angeles Unified School District
Sarah Miller, Hayward Unified School District
Kristine Pasquini, Clovis Unified School District
Miguel Perez, California State University, Fresno
Ann Rector, Pasadena Unified School District
Christopher Saldivar, Belmont-Redwood Shores Elementary School District
Carol Shaw, Sweetwater Union High School District
Robin Sinks, Long Beach Unified School District

Special commendation is extended to Gordon Jackson, Director, Learning Support and Partnerships Division; Phyllis Bramson-Paul, Director, Nutrition Services Division; Caroline Roberts, former School Health Connections/Healthy Start Administrator; Jennifer Rousseve, School Health Connections/Healthy Start Administrator; Mary Marks, School Health Education Consultant; Sharla Smith, HIV/STD Prevention Education Consultant; Donna Bezdecheck, School Health Education Consultant; Margaret Aumann, Nutrition Education Consultant; and Deborah Wood, Executive Director, California Healthy Kids Resource Center. Their significant contributions to this document deserve special recognition.

Ordering Information

Copies of this publication are available for sale from the California Department of Education. For prices and ordering information, please visit the Department Web site at <http://www.cde.ca.gov/re/pn> or call the CDE Press Sales Office at 1-800-995-4099. An illustrated *Educational Resources Catalog* describing publications, videos, and other

instructional media available from the Department can be obtained without charge by writing to the CDE Press Sales Office, California Department of Education, 1430 N Street, Suite 3207, Sacramento, CA 95814-5901; faxing to 916-323-0823; or calling the CDE Press Sales Office at the telephone number listed above.

Notice

The guidance in *Health Education Content Standards for California Public Schools, Kindergarten Through Grade Twelve* is not binding on local educational agencies or other entities. Except for the statutes, regulations, and court decisions that are referenced herein, the document is exemplary, and compliance with it is not mandatory. (See *Education Code* Section 33308.5.)

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

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

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

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

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

THEODORE R. MITCHELL
President, State Board of Education

JACK O'CONNELL
State Superintendent of Public Instruction

Introduction

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

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

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

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

Background of the Standards

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

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

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

An Essential Discipline

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

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

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

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

Overarching Content Standards and Rationales

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

Standard 1: Essential Health Concepts

All students will comprehend essential concepts related to enhancing health.

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

Standard 2: Analyzing Health Influences

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

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

Standard 3: Accessing Valid Health Information

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

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

Standard 4: Interpersonal Communication

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

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

Standard 5: Decision Making

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

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

Standard 6: Goal Setting

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

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

Standard 7: Practicing Health-Enhancing Behaviors

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

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

Standard 8: Health Promotion

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

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

Grade-Level Recommendations and Content Areas

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

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

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

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

Grade-Level Assignments for Content Areas

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

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

Grade-Level Emphasis	Nutrition and Physical Activity	Growth, Development, and Sexual Health		Injury Prevention and Safety	Alcohol, Tobacco, and Other Drugs	Mental, Emotional, and Social Health	Personal and Community Health
		Development and Growth	Sexual Health				
Kindergarten	√	√		√	√	√	√
Grade 1		√		√			√
Grade 2	√				√	√	
Grade 3		√				√	√
Grade 4	√			√	√		
Grade 5	√	√	√				√
Grade 6				√	√	√	
Grades 7 and 8	√	√	√	√	√	√	√
High School (Grades 9 Through 12)	√	√	√	√	√	√	√

Grade Three

Nutrition and Physical Activity (Standards determined by LBUSD)

LBUSD accepts funding from the *Network for a Healthy California* which recommends nutrition education at all grade levels.

Standard 1: Essential Concepts

- 1.1.N Classify various foods into appropriate food groups.
 - 1.2.N Identify and define key nutrients and their functions.
 - 1.3.N State the recommended number of servings and serving sizes for different food groups.
 - 1.4.N Describe the food groups, including recommended portions to eat from each food groups.
 - 1.5.N Explain why some food groups have a greater number of recommended portions than other food groups.
 - 1.6.N Discuss the benefits of eating a nutritious breakfast every day.
 - 1.7.N Identify a variety of healthy snacks.
 - 1.8.N Identify how to keep food safe through proper food preparation and storage.
 - 1.9.N Explain how food can contain germs that cause illness.
 - 1.10.N Explain how both physical activity and eating habits can affect a person's health.
-

Standard 2: Analyzing Influences

- 2.1.N Discuss how family, friends, and media influence food choices.
-

Standard 3: Accessing Valid Information

- 3.1.N Identify resources for valid information about safe and healthy foods.
 - 3.2.N Use food labels to determine nutrient and sugar content.
-

Standard 4: Interpersonal Communication

- 4.1.N Demonstrate effective communication skills to ask for healthy food choices.
-

Standard 5: Decision Making

- 5.1.N Describe how to use a decision-making process to select nutritious foods and beverages.
 - 5.2.N Describe how to use a decision-making process to select healthy options for physical activity.
-

Standard 6: Goal Setting

- 6.1.N Make a plan to choose healthy foods and beverages.
 - 6.2.N Make a plan to choose physical activities at school and at home.
-

Standard 7: Practicing Health-Enhancing Behaviors

- 7.1.N Plan a nutritious meal.
 - 7.2.N Select healthy beverages.
 - 7.3.N Examine the criteria for choosing a nutritious snack.
 - 7.4.N Practice how to take personal responsibility for limiting sugar consumption in foods, snacks, and beverages.
 - 7.5.N Participate in physical activities with friends and family.
-

Standard 8: Health Promotion

- 8.1.N Support others in making positive food and physical activity choices.

Growth and Development

Standard 1: Essential Concepts

- 1.1.G Describe the cycle of birth, growth, aging, and death in living things.
 - 1.2.G Recognize that there are individual differences in growth and development.
 - 1.3.G Identify major internal and external body parts and their functions.
-

Standard 2: Analyzing Influences

- 2.1.G Explain how individual behaviors and one's family and school influence growth and development.
-

Standard 3: Accessing Valid Information

- 3.1.G Identify parents, guardians, and trusted adults with whom one can discuss the cycle of birth, growth, aging, and death in living things.
-

Standard 4: Interpersonal Communication

- 4.1.G Demonstrate how to communicate with parents, guardians, and trusted adults about growth and development.
- 4.2.G Identify how to show respect for individual differences.

Standard 5: Decision Making

5.1.G Examine why a variety of behaviors promote healthy growth and development.

Standard 6: Goal Setting

No standard statement for this grade and content area.

Standard 7: Practicing Health-Enhancing Behaviors

7.1.G Determine behaviors that promote healthy growth and development.

Standard 8: Health Promotion

8.1.G Encourage peers to show respect for others regardless of differences in growth and development.

Injury Prevention and Safety- (Standards determined by LBUSD)

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

Standard 1: Essential Concepts

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

Standard 2: Analyzing Influences

- 2.1.S Describe internal and external influences that could lead to or prevent injury or violence.
- 2.2.S Explain that most young people do not use violence to deal with problems.

Standard 3: Accessing Valid Information

- 3.1.S List people who will help if feeling unsafe or threatened.
 - 3.2.S Identify safe people and places to go to if feeling unsafe or threatened (e.g., police department, fire department, school counselor).
 - 3.3.S Identify trusted adults to report to if people are in danger of hurting themselves or others.
 - 3.4.S Demonstrate how to dial 9-1-1- or other emergency numbers and provide appropriate information.
-

Standard 4: Interpersonal Communication

- 4.1.S Demonstrate the ability to use refusal skills in risky situations.
 - 4.2.S Practice effective conflict resolution techniques with others.
 - 4.3.S Report bullying, harassment, and other dangerous situations.
 - 4.4.S Demonstrate refusal skills to avoid gang involvement.
 - 4.5.S Demonstrate what to say and do when witnessing bullying.
-

Standard 5: Decision Making

- 5.1.S Evaluate strategies to avoid potentially dangerous situations.
 - 5.2.S Evaluate situations in which a trusted adult should be asked for help.
 - 5.3.S Analyze the benefits of using nonviolent means to solve conflicts.
-

Standard 6: Goal Setting

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

Standard 7: Practicing Health-Enhancing Behaviors

- 7.1.S Demonstrate strategies to avoid bullying and other types of harassment.
 - 7.2.S Demonstrate strategies to get away in cases of inappropriate touching or attempted abduction.
-

Standard 8: Health Promotion

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

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

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

Standard 1: Essential Concepts

- 1.1.A Distinguish between helpful and harmful substances (including alcohol and tobacco.)
 - 1.2.A Describe the short- and long-term effects of alcohol, tobacco, and other drugs.
 - 1.3.A Explain why household projects are harmful if ingested or inhaled.
 - 1.4.A Explain why It Is dangerous to taste, swallow, sniff, or play with unknown substances.
 - 1.5.A Explain why it is important to follow the medical recommendations for prescription and nonprescription medicines.
 - 1.6.A Identify rules for taking medicine at school and home.
 - 1.7.A Identify refusal skills when confronted or pressured to use alcohol, tobacco, or other drugs (e.g., clear "no" statement, walk or run away, change subject, delay).
-

Standard 2: Analyzing Influences

No standard statement for this grade and content area.

Standard 3: Accessing Valid Information

- 3.1.A Identify parents, guardians, and trusted adults who can provide accurate information and guidance regarding medicines.
-

Standard 4: Interpersonal Communication

- 4.1.A Demonstrate refusal skills to resist an offer to use drugs or inappropriate medicines.
 - 4.2.A Demonstrate communication skills to alert an adult to unsafe situations involving drugs or medicines.
-

Standard 5: Decision Making

- 5.1.A Evaluate why one person's medicines may not be safe for another person.
-

Standard 6: Goal Setting

No standard statement for this grade and content area.

Standard 7: Practicing Health-Enhancing Behaviors

7.1.A Evaluate effective strategies to cope with fear, stress, anger, loss, and grief in oneself and others.

Standard 8: Health Promotion

No standard statement for this grade and content area.

Mental, Emotional, and Social Health

Standard 1: Essential Concepts

- 1.1.M Describe examples of healthy social behaviors (e.g., helping others, being respectful of others, cooperation, consideration).
 - 1.2.M Describe the importance of assuming responsibility within the family and community.
 - 1.3.M Explain the benefits of having positive relationships with family and friends.
 - 1.4.M Discuss the importance of setting (and ways to set) personal boundaries for privacy, safety, and expression of emotions.
-

Standard 2: Analyzing Influences

- 2.1.M Describe internal and external factors that affect friendships and family relationships.
-

Standard 3: Accessing Valid Information

- 3.1.M Access trusted adults at home, at school, and in the community who can help with mental, emotional, and social health concerns.
-

Standard 4: Interpersonal Communication

- 4.1.M Demonstrate how to communicate directly, respectfully, and assertively regarding personal boundaries.
-

Standard 5: Decision Making

- 5.1.M Describe effective strategies to cope with changes within the family.
- 5.2.M Evaluate situations in which a trusted adult should be asked for help.

Standard 6: Goal Setting

6.1.M Make a plan to help at home and show responsibility as a family member.

Standard 7: Practicing Health-Enhancing Behaviors

7.1.M Evaluate effective strategies to cope with fear, stress, anger, loss, and grief in oneself and others.

Standard 8: Health Promotion

8.1.M Promote a positive and respectful school environment.

8.2.M Object appropriately to teasing of peers and family members that is based on personal characteristics.

8.3.M Demonstrate the ability to support and respect people with differences.

Personal and Community Health

Standard 1: Essential Concepts

1.1.P Examine the difference between communicable and non-communicable diseases.

1.2.P Describe how bacteria and viruses affect the body.

1.3.P Identify positive health practices that reduce illness and disease.

1.4.P Identify life-threatening conditions (e.g., heart attacks, asthma attacks, poisoning).

1.5.P Describe how a healthy environment is essential to personal and community health.

1.6.P Discuss how reducing, recycling, and reusing products make for a healthier environment.

Standard 2: Analyzing Influences

2.1.P Identify how culture, family, friends, and media influence positive health practices.

Standard 3: Accessing Valid Information

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

3.2.P Describe how to access help when feeling threatened.

Standard 4: Interpersonal Communication

4.1.P Demonstrate refusal skills to avoid the spread of disease.

Standard 5: Decision Making

5.1.P Use a decision-making process to reduce the risk of communicable disease or illness.

Standard 6: Goal Setting

6.1.P Set a short-term goal for positive health practices.

Standard 7: Practicing Health-Enhancing Behaviors

7.1.P Evaluate ways to prevent the transmission of communicable diseases.

7.2.P Demonstrate ways to reduce, reuse, and recycle at home, at school, and in the community.

Standard 8: Health Promotion

8.1.P Support others in making positive health choices.

8.2.P Encourage others to promote a healthy environment.

Appendix

The Overarching Health Education Content Standards

Standard 1: Essential Health Concepts

All students will comprehend essential concepts related to enhancing health.

Standard 2: Analyzing Health Influences

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

Standard 3: Accessing Valid Health Information

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

Standard 4: Interpersonal Communication

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

Standard 5: Decision Making

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

Standard 6: Goal Setting

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

Standard 7: Practicing Health-Enhancing Behaviors

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

Standard 8: Health Promotion

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

Glossary

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

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

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

sexually transmitted disease (STD)

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

Standard Precautions

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

trusted adult

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

Universal Precautions

See "Standard Precautions."

weapon

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

wellness

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