Introduction to the Health Education K-12 Learning Standards

The Washington State Office of Superintendent of Public Instruction (OSPI) is responsible for developing and periodically revising the Essential Academic Learning Requirements (EALRs), which identify the knowledge and skills all public school students need to know and be able to do. OSPI is committed to helping educators provide high-quality instruction. In an effort to stay current to state and national language, research, and information, changes have been made to the structure, format, and vocabulary of the 2016 Health Education K–12 Learning Standards. The table below provides explanations and examples of the changes.

Health education was previously embedded in the Health and Fitness EALRs. However, because health education and physical education are different content areas, they have been separated into two distinct sets of standards. Additionally, to be consistent with state and national goals and vocabulary, the EALRs have been replaced with standards. The format of the standards reflect scope and sequencing from one grade level to the next by topics and by one or more specific grade-level outcomes. The 2016 Washington state standards and outcomes aim to improve clarity, coherence, inclusivity, and manageability.

2008 Health and Fitness EALRs	2016 Health Education Standards				
To increase understanding and strengthen instructions, the content of the standards has been simplified from five layers to three. Professional development, technical assistance, peer mentoring, college preparation, and OSPI website resources will provide more information and specific examples.					
K–12 EALR Statement	Standard				
K–12 Component	Topic Outcome				
Grade Level Expectation (GLE) Evidence of Learning (EOL)	(Organized by Core Idea)				
Example	(Organized by Core idea)				
 Example of a grade 5 EALR (Sexual Health) EALR 2: The student acquires the knowledge and skills necessary to maintain a healthy life. Component 2.2: Understands stages of growth and development. GLE 2.2.2: Understands how to maintain sexual health throughout life. EOL: The Healthy Youth Act (RCW 28A.300.475) provides a 	 Example of a grade 5 standard (Sexual Health) Core Idea: Sexual Health Topic: Anatomy and Physiology Outcome: Understand functions of reproductive systems. H1.Se1.5 (standard 1) 				

framework for schools that choose to offer sexual health education as a component of their broader health curriculum. School districts that provide sexual health education must be in compliance with this GLE and be consistent with the 2005 Guidelines for Sexual Health and Disease Prevention.

Washington state's 2016 Health Education K–12 Learning Standards reflect the National Health Education Standards that were adopted by the American Cancer Society in 2007. These eight National Standards replace the four Washington state EALRs that were adopted in 2008, and are grouped by core idea, topic, and outcome. Standards are embedded within the outcomes.

2008 Health and Fitness EALRs

EALR 1: The student acquires the knowledge and skills necessary to maintain an active life: Movement, physical fitness, and nutrition.

EALR 2: The student acquires the knowledge and skills necessary to maintain a healthy life: Recognizes dimensions of health, recognizes stages of growth and development, reduces health risks, and lives safely.

EALR 3: The student analyzes and evaluates the impact of real-life influences on health. **EALR 4**: The student effectively analyzes personal information to develop individualized health and fitness plans.

2016 Health Education Standards

Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

Standard 3: Students will demonstrate the ability to access valid information and products and services to enhance health.

Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.

Standard 6: Students will demonstrate the ability to use goal-setting skills to enhance health.

Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

Standard 8: Students will demonstrate the ability to advocate for personal, family, and community health.

Structure of the Standards and Outcomes

The following grid demonstrates the structure of the 2016 Health Education K–12 Learning Standards. This new structure strengthens the development of scope and sequencing between grade levels and supports teachers in developing age-appropriate lesson plans. By implementing grade-level outcomes, educators will help students meet the learning standards. All districts, schools, and educators in Washington state are expected to implement the state learning standards for all students. However, educators should use their own understanding of their students to make adjustments to teaching activities as needed.

Anatomy: Health Education Core Idea: Wellness (W				Core Idea		
Торіс	Kindergarten	Grade 1		Grade 3	Grade 4	Grade 5
1. Dimensions of Health Topic	Recognize meaning of healthy and unhealthy. H1.W1.K	Understand what it means to be healthy. H1.W1.1	healthy \	Recognize dimensions of health. H1.W1.3	Identify dimensions of health. H1.W1.4	Describe dimensions of health. H1.W1.5
`Code Outcome						

The standards and outcomes are organized by grade. Many topics are consistent across grade levels, whereas other topics change between elementary, middle, and high school as more complex skills and abilities replace more basic skills and concepts. In most cases, the topics represent one or more grade-level outcomes for each standard. The topics for each standard are listed below, by grade level.

Core Idea	Elementary School (Grades K-5)	Middle School (Grades 6–12) Topics
	Topics	
Wellness (W)	1. Dimensions of Health	1. Dimensions of Health
	2. Hygiene	2. Disease Prevention
	3. Disease Prevention	3. Analyzing Influences
	4. Analyzing Influences	4. Access Valid Information
	5. Access Valid Information	5. Communication
	6. Communication	6. Decision-Making
	7. Decision-Making	7. Goal-Setting
	8. Goal-Setting	
Safety (Sa)	1. Injury Prevention	1. Injury Prevention
	2. First Aid	2. First Aid
	3. Violence Prevention	3. Violence Prevention
Nutrition (N)	1. Food Groups and Nutrients	1. Food Groups and Nutrients
	2. Beverages	2. Beverages
	3. Label Literacy	3. Label Literacy
	4. Caloric Intake and Expenditure	4. Caloric Intake and Expenditure
	5. Disease Prevention	5. Disease Prevention
	6. Nutritional Planning	6. Nutritional Planning

Sexual Health	 Anatomy and Physiology 	1. Anatomy, Reproduction, and
(Se)	2. Growth and Development	Pregnancy
(3.5)	3. Reproduction	2. Puberty and Development
	4. HIV Prevention	3. Self-Identity
	5. Self-Identity	4. Prevention
	6. Healthy Relationships	5. Healthy Relationships
		6. Washington State Laws
Social	1. Self-Esteem	1. Self-Esteem
Emotional	2. Body Image	2. Body Image and Eating Disorders
Health (So)	3. Stress Management	3. Stress Management
11001011 (00)	4. Expressing Emotions	4. Expressing Emotions
	5. Harassment, Intimidation, and	5. Harassment, Intimidation, and
	Bullying	Bullying
		6. Emotional and Mental/Behavioral
		Health
Substance	1. Use and Abuse	1. Use and Abuse
Use and	2. Effects	2. Effects
Abuse (Su)	3. Prevention	3. Prevention
13330 (33)		4. Treatment
		5. Legal Consequences

The purpose of health education is to develop health-literate students—students who acquire the knowledge and possess the skills needed to engage in meaningful and health-enhancing lifetime behaviors. The 2016 Health Education K–12 Learning Standards provide schools with a foundation for implementing standards-based, age-appropriate instruction for each student.