Washington Office of Superintendent of PUBLIC INSTRUCTION

Considerations for Health Education

"The COVID-19 pandemic has illuminated the need for schools to consider students' physical, mental, and social-emotional health above all else."
– SHAPE America School Reentry Considerations

Social Emotional Support:

Health education promotes student engagement and well-being.

- CASEL's SEL Roadmap for Reopening School includes four SEL Critical Practices:
  - Take time to cultivate and deepen relationships, build partnerships, and plan for social emotional learning (SEL)
  - Design opportunities where adults can connect, heal, and build their capacity to support students
  - Create safe, supportive, and equitable learning environments that promote all students' social and emotional development
  - Use data as an opportunity to share power, deepen relationships, and continuously improve support for students, families, and staff

Relevance:

Health education is an essential part of a K–12 education.

- In the midst of a pandemic, health education is more important than ever. It is critical that students understand the value of Personal Protective Equipment (PPE), physical distancing, knowledge about virus transmission, strengthening personal wellness to reduce the risk of getting sick, and maintaining safety while online.
- Health education can provide students with skills and strategies to help manage complex emotions, think critically, set and reach academic goals, have conversations about equity, and begin taking ownership of their own health and wellbeing.

Integration of Health Education Standards:

Plan for curriculum and instruction thoughtfully.

- A skills-based approach is a best practice for delivering high-quality health education with student engagement. Focus in-depth instruction on skills-based standards (Standards 2–8) and consider using Standard 1 in a flipped classroom approach.
- Standards 2, 3, 4 and 7 can be used to focus instruction on skills and content most relevant to COVID-19 (see examples from SHAPE America).

Assessment:

Monitor student growth and development regularly.

- Provide a variety of assessments that address all standards and learning outcomes that are covered in instruction (see examples from SHAPE America).
- Provide ongoing instruction and support to help students self-monitor progress.
- Offer feedback, student choice, and self-reflection to improve student development.

Special Considerations for CPR/AED Instruction:

- Frontload (flipped-classroom) CPR/AED education to students via remote learning, however students need to demonstrate skills in CPR/AED on actual CPR manikins and AED trainers in accordance to RCW 28A.230.179.

Special Considerations for Sexual Health Education:

The need for medically accurate sexual health education is greater than ever as students spend more time online, and often have more unsupervised time.

- Address increased needs related to online safety, healthy relationships, and consent.
- Relate required HIV/STD prevention instruction to COVID-19 prevention strategies.
- Create a safe space for students to engage in the conversation and ask questions – develop group norms, consider the use of avatars in class, use Anonymous Google Doc Settings, Sli.do, Mentimeter, or Poll Everywhere for anonymous questions.
- Address challenges related to privacy – consider using both synchronous and asynchronous instruction to allow flexibility; consider requiring/providing earbuds.
- Engage families – notify them of planned instruction, offer and honor opt-outs, keep them informed, use family homework assignments related to classroom instruction.

Resources:

- SHAPE America School Reentry Considerations
- King County CPR/AED resources for distance learning
- Oregon Dept. of Education Key Tips for Sexuality Education During Distance Learning

-Compiled by Ken Turner and Laurie Dils with guidance from state and national education leaders