

Kentucky Academic Standards



Kentucky Department of
E D U C A T I O N

Health Education

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Kentucky Academic Standards for Health Education

INTRODUCTION

Background

The mission of health education in Kentucky is to equip students with the knowledge, skills and behaviors necessary to lead healthy, productive lives. According to the Center for Disease Control and Prevention (2017), “research shows a strong connection between healthy behaviors and academic achievement (e.g., grades, standardized tests, graduation rates, attendance).” Skill development, in conjunction with opportunities for creating and reinforcing healthy behaviors, focuses on personal decision-making, goal-setting, self-management, interpersonal communication, accessing information, analyzing influences and advocacy. When these skills are combined with foundational health-related information, students are equipped to navigate today’s complex society and lead healthy lifestyles. The writers’ vision is that the implementation of these standards will help Kentucky students engage in skills-based health education and become health literate citizens.

Kentucky’s Vision for Students

The Kentucky Board of Education’s (KBE’s) vision is that each and every Kentucky learner will become an engaged citizen and empowered learner prepared to lead a life filled with purpose. To engage and empower students, the following capacity and goal statements frame instructional programs in Kentucky schools. These statements were established by the Kentucky Reform Act (KERA) of 1990, as found in Kentucky Revised Statute (KRS) 158.6453 and KRS 158.6451 stating that all students shall have the opportunity to acquire the following capacities and learning goals:

- Communication skills necessary to function in a complex and changing civilization;
- Knowledge to make economic, social and political choices;
- Core values and qualities of good character to make moral and ethical decisions throughout life;
- Understanding of governmental processes as they affect the community, the state and the nation;
- Sufficient self-knowledge and knowledge of their mental and physical wellness;
- Sufficient grounding in the arts to enable each student to appreciate their cultural and historical heritage;
- Sufficient preparation to choose and pursue their life’s work intelligently; and
- Skills to enable them to compete favorably with students in other states.

Furthermore, schools shall:

- Expect a high level of achievement from all students.
- Develop their students’ ability to:
 - Use basic communication and mathematics skills for purposes and situations they will encounter throughout their lives;

- Apply core concepts and principles from mathematics, the sciences, the arts, the humanities, social studies and practical living studies to situations they will encounter throughout their lives;
 - Become self-sufficient individuals of good character exhibiting the qualities of altruism, citizenship, courtesy, hard work, honesty, human worth, justice, knowledge, patriotism, respect, responsibility and self-discipline;
 - Become responsible members of a family, work group or community, including demonstrating effectiveness in community service;
 - Think and solve problems in school situations and in a variety of situations they will encounter in life;
 - Connect and integrate experiences and new knowledge from all subject matter fields with what they have previously learned and build on past learning experiences to acquire new information through various media sources; and
 - Express their creative talents and interests in visual arts, music, dance and dramatic arts.
- Increase student attendance rates.
 - Increase students' graduation rates and reduce dropout and retention rates.
 - Reduce physical and mental health barriers to learning.
 - Be measured on the proportion of students who make a successful transition to work, postsecondary education and the military.

To ensure legal requirements of health education classes are met, the Kentucky Department of Education (KDE) encourages schools to use the "Model Curriculum Framework" to ensure curricular coherence in the development of curricula that meet the grade-level expectations set forth by standards. The "Model Curriculum Framework" describes curricular coherence as the "local alignment of standards, curriculum, instructional resources and practices, assessment, and professional learning within and across grade-levels in a district or school to help students meet grade-level expectations" (p. 6).

Legal Basis

The following Kentucky Revised Statutes (KRS) and Kentucky Administrative Regulations (KAR) provide a legal basis for this publication:

KRS 156.160 Promulgation of administrative regulations by the Kentucky Board of Education

"(1) With the advice of the Local Superintendents Advisory Council, the Kentucky Board of Education shall promulgate administrative regulations establishing standards which school districts shall meet in student, program, service, and operational performance. These regulations shall comply with the expected outcomes for students and schools set forth in KRS 158.6451. Administrative regulations shall be promulgated for the following:

- (a) Courses of study for the different grades and kinds of common schools identifying the common curriculum content directly tied to the goals, outcomes and assessment strategies developed under KRS 158.645, 158.6451 and 158.6453 and distributed to local school districts and schools.
- (h) Medical inspection, physical and health education and recreation, and other regulations necessary or advisable for the protection of the physical welfare and safety of the public school children. The administrative regulations shall set requirements for student health standards to be met by all students in grades four (4), eight (8), and twelve (12) pursuant to the outcomes described in KRS 158.6451."

KRS 158.301 Legislative findings on skin cancer risks -- Schools encouraged to educate students on risks of exposure to ultraviolet rays

“(2) The General Assembly hereby encourages each public school to provide age-appropriate education to all students on the risks associated with exposure to ultraviolet rays from natural sunlight and artificial sources.

(a) The education should be included within the existing health curriculum as required by KRS 156.160(1)(a) and in accordance with the curriculum policy adopted by the school-based decision making council or, if none exists, by the school principal.

(b) The education should be consistent with guidelines published by world or national health organizations and should include, but not be limited to:

1. The facts and statistics about skin cancer;
2. The cause and impact of skin cancer; and
3. Strategies and behaviors to reduce individual risks for skin cancer.”

KRS 158.302 Cardiopulmonary resuscitation training required for high school students

“(1) The General Assembly hereby finds that training Kentucky students in cardiopulmonary resuscitation procedures will:

(a) Increase students' ability to respond to emergency situations at school, home and public places;

(b) Benefit Kentucky communities by rapidly increasing the number of people ready to respond to sudden cardiac arrest, a leading cause of death in the United States; and

(c) Assist students in becoming responsible citizens consistent with the goals established in KRS 158.6451.

(2) Every public high school shall provide cardiopulmonary resuscitation training to students as part of the health course or the physical education course that is required for high school graduation or the Junior Reserve Officers Training Corps course that meets the physical education requirement. The training shall:

(a) Be based on the nationally recognized, evidenced-based guidelines for cardiopulmonary resuscitation certification published by a national accrediting body on heart health;

(b) Incorporate psychomotor skills training to support cognitive learning; and

(c) Make students aware of the purpose of an automated external defibrillator and its ease and safety of use.”

KRS 158.303 Educational segment on prevention of pediatric abusive head trauma encouraged

“Kentucky schools are encouraged to include a segment concentrating on the prevention of pediatric abusive head trauma, as defined in KRS 620.020, during a student's final year of study at Kentucky high schools. Important areas of concentration for this segment would include information related to the prevention and recognition of pediatric abusive head trauma. This segment should also suggest methods of calming crying infants, techniques for caregivers to use to calm themselves when confronted with an infant that is crying inconsolably, and a discussion relating to selecting responsible care providers for infant children.”

KRS 158.6453 Review of academic standards and assessments

“(18)(a) Beginning in fiscal year 2017-2018, and every six (6) years thereafter, the Kentucky Department of Education shall implement a comprehensive process for reviewing and revising the academic standards in visual and performing arts and practical living skills and career studies for all levels and in foreign language

for middle and high schools. The department shall develop review committees for the standards for each of the content areas that include representation from certified specialist public school teachers and postsecondary teachers in those subject areas.

(b) The academic standards in practical living skills for elementary, middle and high school levels shall include a focus on drug abuse prevention, with an emphasis on the prescription drug epidemic and the connection between prescription opioid abuse and addiction to other drugs, such as heroin and synthetic drugs.

(c) The department shall provide to all schools guidelines for programs that incorporate the adopted academic standards in visual and performing arts and practical living and career studies.”

KRS 158.1415 Curriculum for instruction on human sexuality or sexually transmitted diseases

“(1) If a school council or, if none exists, the principal adopts a curriculum for human sexuality or sexually transmitted diseases, instruction shall include but not be limited to the following content:

- (a) Abstinence from sexual activity is the desirable goal for all school-age children;
- (b) Abstinence from sexual activity is the only certain way to avoid unintended pregnancy, sexually transmitted diseases, and other associated health problems; [and]
- (c) The best way to avoid sexually transmitted diseases and other associated health problems is to establish a permanent mutually faithful monogamous relationship,” [.]

704 KAR 3:305 Minimum high school graduation requirements

This administrative regulation establishes the minimum high school graduation requirements necessary for entitlement to a public high school diploma.

704 KAR 8:030 Required Academic Standards for Health Education

This administrative regulation incorporates by reference the Kentucky Academic Standards for Health Education, which contain the general courses of study and academic content standards health education for use in Kentucky's common schools.

Standards Revision Process

Per KRS 158.6453, the *KAS for Health Education* was entirely conceived and written by teams of Kentucky educators. Kentucky teachers understand the importance of a rigorous health education from elementary and secondary to postsecondary readiness. This focus helps ensure that students are prepared for the jobs of the future and can compete with students from other states and nations. The Health Education Advisory Panels (AP) were composed of 12 teachers, three post-secondary professors from institutes of higher education and one community member. The function of the AP was to review public comments on the existing standards and make recommendations for changes to a Review Committee (RC). The Health Education RC was composed of six teachers and one public post-secondary professor from an institute of higher education. The function of the Health Education RC was to review the work and findings from the APs and make recommendations to revise or replace existing standards. The team was selected based on their expertise in the field of health education and their role as

practicing health and physical education teachers. When choosing writers, the selection committee considered statewide representation of health and physical education for public elementary, middle and high school teachers as well as higher education instructors and community members.

Writers' Vision Statement

The writing team envisioned health standards that provide sustained opportunities for Kentucky students of all abilities, backgrounds and grade levels to develop lifelong health literacy. The revised standards focus on student engagement in critical thinking about healthy habits related to accessing valid and reliable health information, analyzing health influences, using interpersonal communication and decision-making to reduce health risks, setting achievable health goals, and demonstrating practices and behaviors to support and advocate for their own health and the health of others. It is recommended that educators at all levels and across all communities have ongoing access to high-quality professional learning and resources about health education.

Foundational Documents

The KDE provided the following foundational documents to inform the writing team's work:

- Society for Health and Physical Educators (SHAPE) (2024). National Health Education Standards. Retrieved from <https://www.shapeamerica.org/standards/health/new-he-standards.aspx>
- Society for Health and Physical Educators (SHAPE) (2024). National Health Education Standards Educator Toolkit. Retrieved from <https://www.shapeamerica.org/standards/health/new-he-standards.aspx>
- *KAS for Health Education* (2018). https://www.education.ky.gov/curriculum/standards/kyacadstand/Documents/Kentucky_Academic_Standards_for_Health%20Education.pdf
- Society for Health and Physical Educators (SHAPE) (2007). National Health Education Standards. Retrieved from <https://www.shapeamerica.org/standards/health/2007-he-standards.aspx>

Additionally, participants brought their own knowledge to the process. The writers also thoughtfully considered feedback from the health education and physical education community.

Design Considerations

Design decisions were informed by reviews of current evidence-based practices, national health and physical education standards and public comments regarding the 2018 *KAS for Health Education*.

STANDARDS USE AND DEVELOPMENT

The Kentucky Academic Standards (KAS) are Standards, Not Curriculum

The *KAS for Health Education* outlines the minimum standards Kentucky students should learn in each grade level kindergarten through grade 8 or high school grade span. The standards address what is to be learned, but do not address how learning experiences are to be designed or what resources should be used.

A standard represents a goal or outcome of an educational program; standards are vertically aligned, expected outcomes for all students. The standards do not dictate the design of a lesson plan or how units should be organized. The standards establish a statewide baseline of what students should know and be able to do at the conclusion of a grade or grade-span. The instructional program should emphasize the development of students' abilities to acquire and apply the standards. The curriculum must ensure that appropriate accommodations are made for diverse populations of students found within Kentucky schools.

These standards are not a set of instructional or assessment tasks, but rather statements of what students should be able to do after instruction. Decisions on how best to help students meet these program goals are left to local school districts and teachers. Curriculum includes the vast array of instructional materials, readings, learning experiences and local mechanisms of assessment, including the full body of content knowledge to be covered, all of which are to be selected at the local level according to Kentucky law.

Translating the Standards into Curriculum

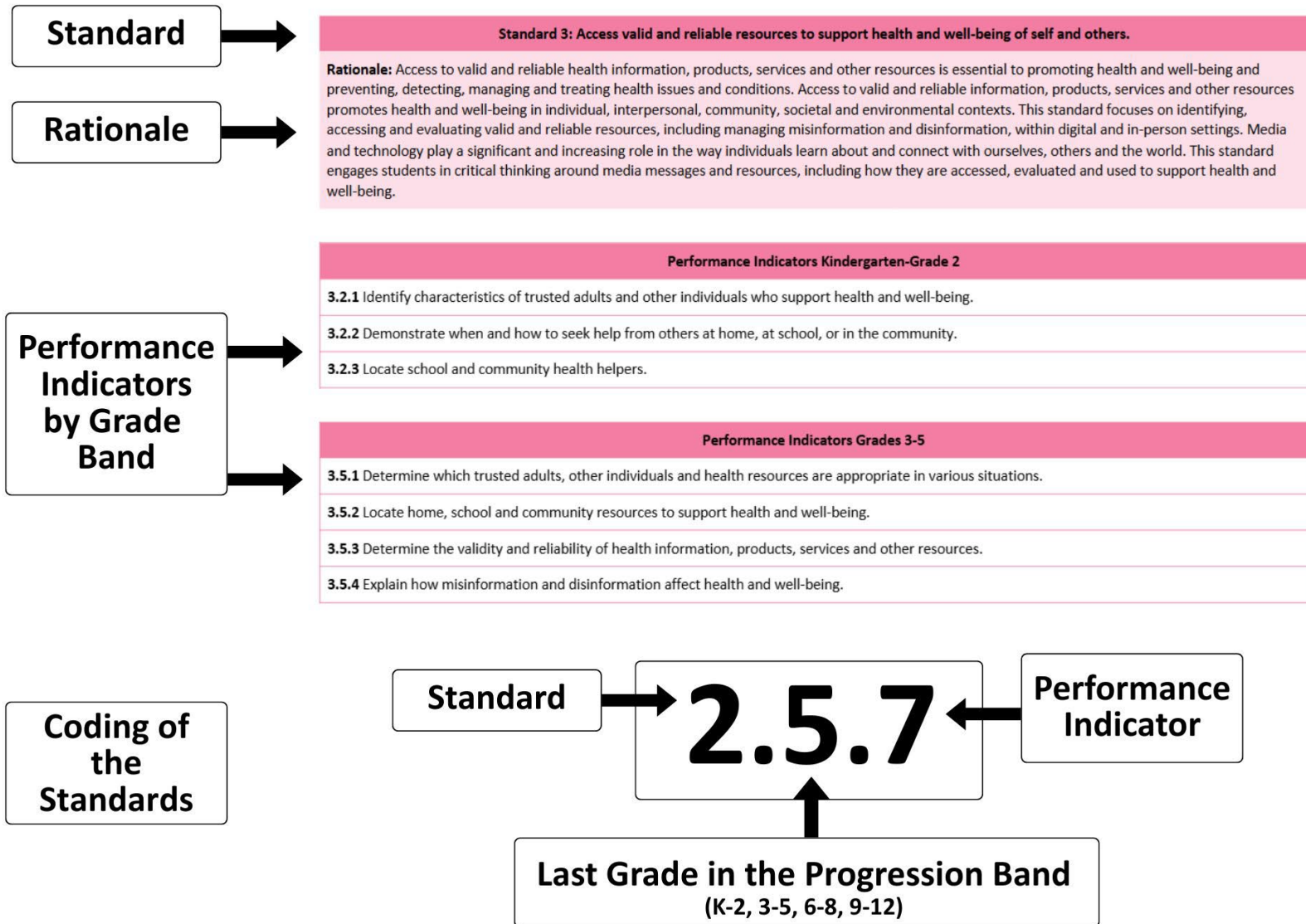
The KDE does not require specific curricula or strategies to be used to engage students in the Kentucky Academic Standards. Local schools and districts choose to meet the minimum required standards using a locally adopted curriculum according to KRS 160.345, which outlines the method by which the curriculum is to be determined. As educators implement academic standards, they, along with community members, must guarantee postsecondary readiness that will ensure all learners are transition ready. To achieve this, Kentucky students need a curriculum designed and structured for a rigorous, relevant and personalized learning experience, including a wide variety of learning opportunities. The *Kentucky Model Curriculum Framework* is a resource to support districts and schools in the continuous process of developing and reviewing local curriculum.

Organization of the Standards

The *Kentucky Academic Standards for Health Education* encompasses eight standards which provide cognitive content to promote healthy lifestyles throughout childhood, adolescence and into adulthood. The health education standards are based on grade-level performance indicators that focus on advocacy and accessing valid information to promote health-enhancing behaviors and disease prevention. The health education standards are organized into the standards, rationale and performance indicators.

These eight standards communicate the broader learning of performance indicators that promote and produce health literate students in all grade levels. Standards are the overarching ideas that support reaching the end goal of creating health literate students. Standards are not meant to be mastered in one or two lessons; rather, acquiring these skills is the outcome of a comprehensive, sequential, health education. Performance indicators are the expectation of what students should know and be able to do by the end of each grade band. Performance indicators clearly define grade band expectations that lead to the goal of health literate students.

How to Read the Standards



Kentucky Academic Standards for Health Education

The Standards at a Glance

There are eight standards for health education that represent the key outcomes for knowledge and skills students should practice and acquire across K-12 education. Below is a concise summary of each standard. Each of these standards are repeated across each grade band with grade band specific performance indicators. The color coding below is used throughout the *Kentucky Academic Standards for Health Education* document.

Standard 1: Acquire Functional Health Information

Standard 2: Analyze Influences

Standard 3: Access Valid Information

Standard 4: Use Interpersonal Communication Skills

Standard 5: Use an Effective Decision-Making Process

Standard 6: Use a Goal-Setting Process

Standard 7: Support the Health and Well-Being of Self and Others

Standard 8: Advocate for the Health and Well-Being of Self and Others

Kentucky Academic Standards for Health Education

The Standards Rationales

Standard 1: Use functional health information to support health and well-being of self and others.

Rationale: The acquisition and application of functional health information provides a foundation for promoting health and well-being. This standard includes essential concepts based on established theories and models of health behavior and health promotion. It focuses not only on risk factors, but also on protective factors that can support health and wellness. Concepts reflected in this standard include health literacy, health promotion, health equity, social determinants of health, well-being and health outcomes within individual, interpersonal, community, societal and environmental contexts. Functional information can be applied to health-related skills, such as analyzing influences, accessing resources, interpersonal communication, decision-making, goal-setting, engaging in health practices and behaviors and advocacy.

Standard 2: Analyze influences that affect health and well-being, including but not limited to family, peers, culture, media and technology.

Rationale: Health and well-being are affected by many, diverse influences within individual, interpersonal, community, societal and environmental contexts. This standard focuses on identifying and evaluating internal and external factors influencing health practices and behaviors. Influences on health and well-being may include but are not limited to: personal values and beliefs, perceived and social norms, family, peers, schools, communities, culture, media and technology, policies and the environment. This standard recognizes that the factors affecting health behaviors and outcomes, such as social determinants of health, are complex and impact people and communities differently. It also supports the individual's ability to identify and use skills to recognize the types of influences, analyze the role of influences across a variety of wellness dimensions and manage influences on health and well-being in digital and in-person settings. This skill contributes to a better understanding of the connections between individual health, community health and health equity, which can strengthen use of other health skills, such as accessing information and advocacy.

Standard 3: Access valid and reliable resources to support health and well-being of self and others.

Rationale: Access to valid and reliable health information, products, services and other resources is essential to promoting health and well-being and preventing, detecting, managing and treating health issues and conditions. Access to valid and reliable information, products, services and other resources promotes health and well-being in individual, interpersonal, community, societal and environmental contexts. This standard focuses on identifying, accessing and evaluating valid and reliable resources, including managing misinformation and disinformation, within digital and in-person settings. Media and technology play a significant and increasing role in the way individuals learn about and connect with themselves, others and the world. This standard engages students in critical thinking around media messages and resources, including how they are accessed, evaluated and used to support health and well-being.

Standard 4: Use interpersonal communication skills to support health and well-being of self and others.

Rationale: Effective communication promotes health and well-being in individual, interpersonal, community, societal and environmental contexts. This standard focuses on expressive and receptive communication in digital and in-person settings. Combined with perspective-taking, communication skills help to recognize and strengthen interpersonal interactions, create and maintain relationships, express and interpret messages and manage conflict. Developing communication skills helps individuals to see how they communicate and the ways in which their communication affects those around them.

Standard 5: Use a decision-making process to support health and well-being of self and others.

Rationale: Effective decision-making is needed to identify, adopt and maintain health-promoting behaviors. This standard includes skills and steps integral to the process of effective decision-making to support health and well-being. The decision-making process enables collaboration to improve quality of life within individual, interpersonal, community, societal, cultural and environmental contexts.

Standard 6: Use a goal-setting process to support health and well-being of self and others.

Rationale: Goal-setting is a process to support short- and long-term health and well-being goals. In addition to achieving a goal, a goal-setting process includes using practices, habits and routines in daily life. This standard includes the processes needed to plan, reach and reflect on health goals.

Setting goals is a flexible process and considers personal and social factors affecting health and well-being. Goal-setting supports aspirations and future planning for health and well-being within individual, interpersonal, community, societal, cultural and environmental contexts.

Standard 7: Demonstrate practices and behaviors to support health and well-being of self and others.

Rationale: Developing health practices and behaviors can promote health and well-being over the lifespan and reduce risk to self and others. Practicing health behaviors is critical to incorporating health-promoting habits and routines into all dimensions of wellness. Due to the increasing influence of technology, it is crucial to develop and apply practices and behaviors that support media balance and digital wellness. This standard promotes individual and collective responsibility by encouraging the exploration and practice of skills and processes that support health and well-being in individual, interpersonal, community, societal and environmental contexts.

Standard 8: Advocate to promote health and well-being of self and others.

Rationale: Advocacy skills are critical for promoting health and well-being within individual, interpersonal, community, societal and environmental contexts. This standard helps learners develop and apply skills and strategies to increase agency and advocacy for self and others. Practicing advocacy helps students be informed, civic-minded members of their community, who are inclusive of individual, cultural, historical and other differences.

Kentucky Academic Standards for Health Education

STANDARD 1: Use functional health information to support health and well-being of self and others.

Rationale: The acquisition and application of functional health information provides a foundation for promoting health and well-being. This standard includes essential concepts based on established theories and models of health behavior and health promotion. It focuses not only on risk factors, but also on protective factors that can support health and wellness. Concepts reflected in this standard include health literacy, health promotion, health equity, social determinants of health, well-being and health outcomes within individual, interpersonal, community, societal and environmental contexts. Functional information can be applied to health-related skills, such as analyzing influences, accessing resources, interpersonal communication, decision-making, goal-setting, engaging in health practices and behaviors and advocacy.

Performance Indicators Kindergarten-Grade 2

1.2.1 Identify strengths and assets that support health and well-being.

1.2.2 Identify dimensions of wellness.

1.2.3 Identify ways to prevent or reduce risks for illnesses and injuries.

1.2.4 Describe health-promoting behaviors.

1.2.5 Identify the importance of health and well-being.

1.2.6 Identify how the environment affects personal and community health.

1.2.7 Identify family and school rules about using medicines correctly.

1.2.8 Identify the benefits of avoiding alcohol and nicotine products.

1.2.9 Identify ways to prevent harmful effects of the sun.

Performance Indicators Grades 3-5

1.5.1 Explain how to build upon strengths and assets to support health and well-being.

1.5.2 Describe health-promoting behaviors for the dimensions of wellness.

1.5.3 Explain ways to prevent or reduce risks for illnesses and injuries.

1.5.4 Explain ways to engage in health-promoting behaviors, including how to manage health conditions.

1.5.5 Examine how health literacy supports health and well-being.

1.5.6 Examine how the environment affects personal and community health.

1.5.7 Explain when and why it is important to seek health care.

1.5.8 Explain the potential risks associated with inappropriate use and abuse of prescription medicines.

1.5.9 Explain the benefits of avoiding nicotine and the dangers of experimenting with nicotine products.

1.5.10 Explain the short- and long-term health benefits of avoiding or discontinuing alcohol use.

1.5.11 Describe ways of preventing harmful effects of the sun and other kinds of weather.

Performance Indicators Grades 6-8

1.8.1 Apply ways to build upon strengths and assets to support individual and collective health and well-being.

1.8.2 Analyze how practices and behaviors support a variety of dimensions of wellness.

1.8.3 Analyze behaviors that reduce or prevent illnesses and injuries.

1.8.4 Analyze practices and behaviors that support health and well-being, including how to manage health conditions.
1.8.5 Analyze connections between health literacy and health outcomes.
1.8.6 Analyze how individual, interpersonal, community and environmental factors impact health and well-being.
1.8.7 Explain how health care promotes personal health.
1.8.8 Describe male and female reproductive body parts, their functions, the menstrual cycle and their relationships to conception.
1.8.9 Describe the physical, social and emotional changes that occur during puberty.
1.8.10 Determine the benefits of being sexually abstinent and summarize ways to prevent pregnancy and STDs.
1.8.11 Explain why individuals have the right to refuse physical or sexual contact.
1.8.12 Explain signs, symptoms, transmission and prevention of the most common STDs.
1.8.13 Describe the short- and long-term health benefits of avoiding or discontinuing nicotine products, including the benefits of being nicotine free.
1.8.14 Describe the short- and long-term health benefits of avoiding or discontinuing alcohol and other drugs.
1.8.15 Summarize ways to protect oneself against potential damage from exposure to the sun and other kinds of weather.

Performance Indicators Grades 9-12

1.12.1 Analyze ways to build upon strengths and assets to support individual and collective health and well-being.
1.12.2 Analyze the relationships between various dimensions of wellness as related to health outcomes.
1.12.3 Evaluate behaviors that reduce or prevent illnesses and injuries.
1.12.4 Evaluate practices and behaviors that support health and well-being, including how to manage health conditions.

1.12.5 Examine connections between individual health literacy, organizational health literacy and health outcomes.
1.12.6 Analyze how individual, interpersonal, community, societal and environmental factors are interrelated and impact health outcomes.
1.12.7 Analyze the benefits of and barriers to practicing a variety of health behaviors.
1.12.8 Examine how self-efficacy, perceived susceptibility and perceived severity affect health behaviors.
1.12.9 Analyze the relationship between access to health care and overall health and well-being.
1.12.10 Summarize the relationship between the menstrual cycle and conception.
1.12.11 Justify abstinence as the most effective method of protection from HIV, other STDs and pregnancy.
1.12.12 Explain why individuals have the right to refuse physical and sexual contact.
1.12.13 Evaluate the social, cultural and personal factors that influence an individual's right to express or remove consent.
1.12.14 Summarize the signs, symptoms, transmission and prevention of sexually transmitted diseases (STDs).
1.12.15 Analyze various contraceptive methods to reduce the risk of pregnancy, HIV and other STDs.
1.12.16 Analyze the short- and long-term health benefits of avoiding or discontinuing the use of nicotine, including financial costs.
1.12.17 Analyze the short- and long-term health benefits of avoiding or discontinuing the use of alcohol and other drugs, including financial costs.
1.12.18 Summarize personal strategies for minimizing potential harm from sun exposure.
1.12.19 Explain accepted procedures for emergency and lifesaving care, including CPR.

STANDARD 2: Analyze influences that affect health and well-being, including but not limited to family, peers, culture, media and technology.

Rationale: Health and well-being are affected by many, diverse influences within individual, interpersonal, community, societal and environmental contexts. This standard focuses on identifying and evaluating internal and external factors influencing health practices and behaviors. Influences on health and well-being may include but are not limited to: personal values and beliefs, perceived and social norms, family, peers, schools, communities, culture, media and technology, policies and the environment. This standard recognizes that the factors affecting health behaviors and outcomes, such as social determinants of health, are complex and impact people and communities differently. It also supports the individual's ability to identify and use skills to recognize the types of influences, analyze the role of influences across a variety of wellness dimensions and manage influences on health and well-being in digital and in-person settings. This skill contributes to a better understanding of the connections between individual health, community health and health equity, which can strengthen use of other health skills, such as accessing information and advocacy.

Performance Indicators Kindergarten-Grade 2

2.2.1 Identify various influences that affect health and well-being of self and others

2.2.2 Explain how various influences affect the health and well-being of self and others.

2.2.3 Explain how technology and social media influence the health of self and others.

Performance Indicators Grades 3-5

2.5.1 Explain how various influences can affect health and well-being.

2.5.2 Determine various influences that affect the health and well-being of self and others.

2.5.3 Explain how various influences affect the health and well-being of people and communities.

2.5.4 Use strategies and resources to manage influences that impact health and well-being.

2.5.5 Explore how technology and social media influence the health of self and others.

Performance Indicators Grades 6-8

2.8.1 Analyze the interrelationships between various influences on health and well-being.

2.8.2 Analyze individual, interpersonal, community, societal and environmental factors that influence health behaviors, health outcomes and health equity.

2.8.3 Analyze how various influences affect the health and well-being of people and communities in different ways.

2.8.4 Apply strategies and resources to manage influences that impact health and well-being.

2.8.5 Analyze how technology and social media influence the health of self and others.

Performance Indicators Grades 9-12

2.12.1 Evaluate the interrelationships and impacts of various influences and health behaviors on health and well-being.

2.12.2 Evaluate how social determinants of health influence health behaviors, health outcomes and health equity.

2.12.3 Evaluate how individual, interpersonal, community, societal and environmental influences and factors affect health equity.

2.12.4 Formulate strategies to manage influences that impact health and well-being.

2.12.5 Use resources to manage influences that impact health and well-being.

2.12.6 Evaluate how technology and social media influence the health of self and others.

STANDARD 3: Access valid and reliable resources to support health and well-being of self and others.

Rationale: Access to valid and reliable health information, products, services and other resources is essential to promoting health and well-being and preventing, detecting, managing and treating health issues and conditions. Access to valid and reliable information, products, services and other resources promotes health and well-being in individual, interpersonal, community, societal and environmental contexts. This standard focuses on identifying, accessing and evaluating valid and reliable resources, including managing misinformation and disinformation, within digital and in-person settings. Media and technology play a significant and increasing role in the way individuals learn about and connect with themselves, others and the world. This standard engages students in critical thinking around media messages and resources, including how they are accessed, evaluated and used to support health and well-being.

Performance Indicators Kindergarten-Grade 2

3.2.1 Identify characteristics of trusted adults and other individuals who support health and well-being.

3.2.2 Demonstrate when and how to seek help from others at home, at school, or in the community.

3.2.3 Locate school and community health helpers.

Performance Indicators Grades 3-5

3.5.1 Determine which trusted adults, other individuals and health resources are appropriate in various situations.

3.5.2 Locate home, school and community resources to support health and well-being.

3.5.3 Determine the validity and reliability of health information, products, services and other resources.

3.5.4 Explain how misinformation and disinformation affect health and well-being.

Performance Indicators Grades 6-8
3.8.1 Describe situations that may require support from trusted adults, other individuals and health professionals.
3.8.2 Identify supports and barriers to accessing valid and reliable health information, products, services and other resources.
3.8.3 Access valid and reliable sources of health information, products, services and other resources.
3.8.4 Analyze the validity and reliability of health information, products, services and other resources.
3.8.5 Apply strategies to manage misinformation and disinformation.

Performance Indicators Grades 9-12
3.12.1 Analyze the accessibility of trusted adults, health professionals, other individuals and resources to promote health and well-being.
3.12.2 Analyze supports and barriers to accessing valid and reliable health information, products, services and other resources.
3.12.3 Evaluate the validity and reliability of health information, products, services and other resources.
3.12.4 Use valid and reliable sources of health information, products, services and other resources.
3.12.5 Apply strategies to manage misinformation and disinformation.

STANDARD 4: Use interpersonal communication skills to support health and well-being of self and others.

Rationale: Effective communication promotes health and well-being in individual, interpersonal, community, societal and environmental contexts. This standard focuses on expressive and receptive communication in digital and in-person settings. Combined with perspective-taking, communication skills help to recognize and strengthen interpersonal interactions, create and maintain relationships, express and interpret messages and manage conflict. Developing communication skills helps individuals to see how they communicate and the ways in which their communication affects those around them.

Performance Indicators Kindergarten-Grade 2

4.2.1 Express thoughts, feelings, wants and needs to support health and well-being of self and others.

4.2.2 Practice active listening skills in a variety of situations.

4.2.3 Demonstrate communication skills and strategies to use if uncomfortable, unsafe or harmed.

4.2.4 Recognize ways to communicate and respect the boundaries of self and others.

4.2.5 Demonstrate ways to show kindness and compassion.

Performance Indicators Grades 3-5

4.5.1 Use effective verbal and non-verbal communication skills to express thoughts, feelings, wants and needs to support health and well-being of self and others.

4.5.2 Use active listening skills and strategies in a variety of situations.

4.5.3 Demonstrate how to ask for and offer assistance to support the health of self and others.

4.5.4 Demonstrate boundary-setting skills to communicate and respect the boundaries of self and others.

4.5.5 Demonstrate refusal skills to use in a variety of situations.

4.5.6 Demonstrate strategies to prevent, manage or resolve conflict.

4.5.7 Demonstrate effective ways to communicate with kindness and compassion.

Performance Indicators Grades 6-8

4.8.1 Use effective verbal and non-verbal communication skills across multiple modes of communication to support health and well-being of self and others.

4.8.2 Apply active listening skills and strategies in a variety of interpersonal contexts.

4.8.3 Use various communication strategies to seek and offer support and assistance.

4.8.4 Demonstrate ways to communicate boundaries and consent for a variety of situations.

4.8.5 Use refusal skills and strategies in a variety of situations.

4.8.6 Use skills and strategies to prevent, manage or resolve conflict.

4.8.7 Use collaboration skills in a variety of situations.

4.8.8 Use negotiation skills in a variety of situations.

4.8.9 Demonstrate strategies to communicate with others with different perspectives and values.

4.8.10 Demonstrate ways to communicate empathy and compassion.

Performance Indicators Grades 9-12

4.12.1 Apply effective verbal and non-verbal communication skills across multiple modes and formats of communication to support health and well-being of self and others.
4.12.2 Apply communication skills and strategies within a variety of interpersonal contexts.
4.12.3 Demonstrate how to ask for and offer assistance to support the health of self and others.
4.12.4 Use effective communication skills to set and express boundaries as well as grant or withdraw consent in a variety of situations.
4.12.5 Apply refusal skills and strategies in a variety of situations.
4.12.6 Apply skills and strategies to prevent, manage or resolve conflict.
4.12.7 Demonstrate collaboration skills in a variety of situations.
4.12.8 Demonstrate negotiation skills in a variety of situations.
4.12.9 Adapt strategies to communicate with others with different perspectives and values in various contexts.
4.12.10 Communicate with empathy and compassion.

STANDARD 5: Use a decision-making process to support health and well-being of self and others.

Rationale: Effective decision-making is needed to identify, adopt and maintain health-promoting behaviors. This standard includes skills and steps integral to the process of effective decision-making to support health and well-being. The decision-making process enables collaboration to improve quality of life within individual, interpersonal, community, societal, cultural and environmental contexts.

Performance Indicators Kindergarten-Grade 2

5.2.1 Identify when a health-related decision is needed to maintain or improve health and well-being.

5.2.2 Recognize when help is needed for a health-related decision.

5.2.3 Describe options and potential outcomes for a health-related decision.

5.2.4 Choose an option that supports health and well-being.

Performance Indicators Grades 3-5

5.5.1 Determine situations that require a thoughtful decision-making process to maintain or improve health and well-being.

5.5.2 Determine whether assistance or collaboration is needed in making a health-related decision.

5.5.3 Compare and contrast options and potential outcomes for a health-related decision.

5.5.4 Choose a health-promoting option when making a decision.

5.5.5 Reflect with guidance and support on the results of a health-related decision on self and others.

Performance Indicators Grades 6-8
5.8.1 Explain how the use of a decision-making process affects health and well-being.
5.8.2 Determine when health-related situations require the application of a thoughtful decision-making process.
5.8.3 Use an individual, supported or collaborative decision-making process to maintain or improve health and well-being.
5.8.4 Evaluate how various options may affect health-related outcomes within individual, interpersonal, community, societal, cultural and environmental levels.
5.8.5 Identify supports and barriers that affect decision-making within individual, interpersonal, community, societal, cultural and environmental levels.
5.8.6 Evaluate the results of health-related decisions on self and others.

Performance Indicators Grades 9-12
5.12.1 Analyze how health-related decisions may affect personal and community health and well-being from a variety of perspectives.
5.12.2 Determine when and why health-related situations require the application of a thoughtful decision-making process.
5.12.3 Apply an individual, supported or collaborative decision-making process to maintain or improve health and well-being.
5.12.4 Analyze a variety of options based on priorities and potential outcomes when making health-related decisions.
5.12.5 Analyze the potential impacts of decisions on the health and well-being within individual, interpersonal, community, societal, cultural and environmental levels.
5.12.6 Develop a plan of action to implement health-related decisions.

5.12.7 Evaluate the impacts of supports and barriers that affect decision-making within individual, interpersonal, community, societal, cultural and environmental levels.

5.12.8 Evaluate the effectiveness of health-related decisions.

STANDARD 6: Use a goal-setting process to support health and well-being of self and others.

Rationale: Goal-setting is a process to support short- and long-term health and well-being goals. In addition to achieving a goal, a goal-setting process includes using practices, habits and routines in daily life. This standard includes the processes needed to plan, reach and reflect on health goals. Setting goals is a flexible process and considers personal and social factors affecting health and well-being. Goal-setting supports aspirations and future planning for health and well-being within individual, interpersonal, community, societal, cultural and environmental contexts.

Performance Indicators Kindergarten-Grade 2

6.2.1 Determine a health behavior to change or reinforce.

6.2.2 Identify a goal that supports health and well-being.

6.2.3 Determine who can help when assistance is needed to achieve a health-related goal.

6.2.4 Describe actions that support reaching a health-related goal.

6.2.5 Take action to achieve a health-related goal.

6.2.6 Reflect with guidance and support on the results of goal-setting.

Performance Indicators Grades 3-5

6.5.1 Set a goal and explain how the goal supports health and well-being.

6.5.2 Determine whether assistance or collaboration is needed in setting a goal that supports health and well-being.

6.5.3 Develop a plan that includes actions, resources and progress tracking toward attaining a health-related goal.

6.5.4 Identify supports and barriers that affect progress toward attaining a health-related goal.

6.5.5 Track progress toward attaining a health-related goal.

6.5.6 Reflect with guidance and support on the goal-setting process and outcome.

Performance Indicators Grades 6-8

6.8.1 Assess personal health and well-being to identify focus areas for goal-setting.

6.8.2 Analyze when individual, supported or collaborative goal-setting is appropriate.

6.8.3 Develop a goal and explain how it supports health and well-being.

6.8.4 Develop a plan that addresses supports and barriers related to attaining a health-related goal.

6.8.5 Monitor progress to determine whether a health-related goal or plan should be maintained or adjusted.

6.8.6 Examine the goal-setting process and outcomes on health and well-being.

Performance Indicators Grades 9-12

6.12.1 Assess personal health, well-being and factors for engaging in a goal-setting process.

6.12.2 Use an individual, supported, or collaborative goal-setting process as appropriate.

6.12.3 Develop a goal and analyze how it supports health and well-being.

6.12.4 Implement a plan that addresses supports and barriers to attaining a health-related goal.

6.12.5 Monitor progress and adjust the goal or plan as appropriate.

6.12.6 Evaluate the goal-setting process and outcomes on health and well-being.

STANDARD 7: Demonstrate practices and behaviors to support health and well-being of self and others.

Rationale: Developing health practices and behaviors can promote health and well-being over the lifespan and reduce risk to self and others. Practicing health behaviors is critical to incorporating health-promoting habits and routines into all dimensions of wellness. Due to the increasing influence of technology, it is crucial to develop and apply practices and behaviors that support media balance and digital wellness. This standard promotes individual and collective responsibility by encouraging the exploration and practice of skills and processes that support health and well-being in individual, interpersonal, community, societal and environmental contexts.

Performance Indicators K-Grade 2

7.2.1 Identify practices and behaviors that support health and well-being of self and others.

7.2.2 Demonstrate practices and behaviors that support health and well-being of self and others.

Performance Indicators Grades 3-5

7.5.1 Examine practices and behaviors that support health and well-being of self and others.

7.5.2 Demonstrate practices and behaviors that support health and well-being of self and others.

Performance Indicators Grades 6-8

7.8.1 Examine supports and barriers to health-related practices and behaviors.

7.8.2 Analyze practices and behaviors that support personal and community health and well-being.

7.8.3 Demonstrate practices and behaviors that support personal and community health and well-being.

Performance Indicators Grades 9-12
7.12.1 Analyze supports and barriers to engaging in health-related practices and behaviors.
7.12.2 Evaluate practices, behaviors and other factors supporting individual and collective health and well-being.
7.12.3 Adapt practices and behaviors to support individual and collective health and well-being.
7.12.4 Demonstrate a variety of practices and behaviors supporting individual and collective health and well-being.

STANDARD 8: Advocate to promote health and well-being of self and others.

Rationale: Advocacy skills are critical for promoting health and well-being within individual, interpersonal, community, societal and environmental contexts. This standard helps learners develop and apply skills and strategies to increase agency and advocacy for self and others. Practicing advocacy helps students be informed, civic-minded members of their community, who are inclusive of individual, cultural, historical and other differences.

Performance Indicators K-Grade 2

8.2.1 Make requests to support personal health and well-being.

8.2.2 Identify a variety of ways to support others in making health-promoting choices.

8.2.3 Encourage others to make health-promoting choices.

Performance Indicators Grades 3-5

8.5.1 Recognize situations in which advocacy supports the health and well-being of self and others.

8.5.2 Explain how collaboration and communication support health advocacy.

8.5.3 Identify advocacy skills and strategies to support health and well-being.

8.5.4 Demonstrate how to advocate for health and well-being.

Performance Indicators Grades 6-8

8.8.1 Analyze opportunities to advocate for the health and well-being of individuals, families and communities.

8.8.2 Determine when individual or collaborative advocacy is appropriate to promote health and well-being.

8.8.3 Apply advocacy skills and adjust strategies when addressing a variety of audiences and contexts.

8.8.4 Demonstrate advocacy skills and strategies to promote the health and well-being of self and others.

8.8.5 Evaluate the effectiveness of advocacy efforts for promoting health and well-being.

Performance Indicators Grades 9-12

8.12.1 Examine a variety of factors that affect health advocacy within individual, interpersonal, community, societal and environmental levels.

8.12.2 Advocate for health issues either collaboratively or individually to promote health and well-being.

8.12.3 Customize advocacy skills and strategies when addressing a variety of audiences and contexts.

8.12.4 Demonstrate self-advocacy skills and strategies to promote health and well-being.

8.12.5 Demonstrate advocacy skills and strategies to promote health and well-being within interpersonal, community, societal and environmental levels.

8.12.6 Evaluate the process, outcomes and impact of advocacy efforts within individual, interpersonal, community, societal and environmental levels.

8.12.7 Analyze the role of collaboration among different people in a community to prevent and solve community health issues.

Appendix

Advisory Panel and Review Committee

The writing team, composed of current health and physical education teachers, included representation from all regions of the state and represented both urban and rural areas. While these teachers taught a variety of courses and grade levels throughout their careers, the selected committee members were currently teaching courses related to the standards. Additionally, the selected writers served in many roles in their schools, health community and a wide variety of professional organizations. To ensure fidelity to the standards, the writing committee provided feedback at all stages of the development process. The writing and review committee members listed below represented Kentucky's best as evidenced by their countless qualifications.

Health Education Advisory Panels (AP)

Emily Best, *Jessamine County*

Kristy Blevins, *Kentucky School for the Deaf*

Tim Gross, *LaRue County*

Daniel Hill, *Fayette County*

Amber London, *Barren County*

Molly McKinney, *Eastern Kentucky University*

Dennis Minnis, *Bullitt County*

Afton Otteson-Price, *Erlanger Independent Schools*

Christopher Price, *Baptist Health*

Kim Riggs, *Fayette County*

Melanie Smith, *Eastern Kentucky University*

Michelle Thornton, *Berea College*

Kimberly Vigil, *Murray State University*

Kara Young, *Jefferson County*

Health Education Review Committee (RC)

Crystal Bratcher, *Grayson County*

Ashley K. Deaton, *Laurel County*

Kirk Haynes, *Jefferson County*

Vicki Johnson-Leuze, *University of Louisville*

Karen Sweazy, *Jefferson County*

Crystal Washington, *Fayette County*