# Health and Well-Being in the Primary Program

# **Common Understanding**

Research has shown that poor health affects children's learning. The effects of poor health include cognitive and social/emotional deficits, low scores on developmental and achievement tests, and inattentiveness according to the American Public Health Association (APHA) and the American Academy of Pediatrics (AAP). It has also been discovered that many health risk behaviors that lead to heart diseases, some forms of cancer, and poor health are usually established during early childhood and persist into adulthood.

The position statement of the American Association for Health Education (AAHE) says: "Health education as both process and program, influences individual, family and societal development, knowledge, attitudes and behaviors...the concept of health embraces the entire being...the individual is a multi-dimensional entity, with each component—chemical, physical, spiritual, intellectual or emotional—existing as an element within a complex of interrelationships...good health requires positive efforts directed toward total well-being" (AAHE 1998).

# **National Health Education Standards**

In 1995 National Health Education Standards were strongly suggested but not mandated by the AAHA and AAP. The following Standards for Kindergarten through Grade 4 can be used to define a health curriculum.

- Students will comprehend concepts related to health promotion and disease prevention.
- Students will demonstrate the ability to practice health-enhancing behaviors and reduce health risks.
- Students will demonstrate the ability to use goal-setting and decision-making skills to enhance health.
- Students will demonstrate the ability to advocate for personal, family, and community health
- Students will demonstrate the ability to access health information and health-promoting products and services.



The National Comprehensive Health Education (NCHE) organization suggests the adoption of comprehensive school health education programs that address these health topics:

- Alcohol and other drug use prevention
- Family and personal relationships
- Personal and consumer health
- Community and environmental health
- Nutrition and physical activity

- Unintentional and intentional injury prevention
- Growth and development
- Mental and emotional health

Comprehensive health education programs give students health knowledge and the ability to choose wellness behaviors and healthy relationships and to promote health, prevent illness and injury, and improve the quality of the environment (NCHE 1997).

## What is already in place?

- 1. Many states including Iowa and Nebraska have mandatory K–12 physical education programs addressing the physical health needs of children.
- 2. The licensing standards/practices of Head Starts, child cares and preschools strongly address nutrition and safety of young children.
- 3. School lunch and breakfast programs are providing nutritional meals for children.



# Children and Health: Implications for Primary Curriculum

Health education topics can be found in the curricular areas of science, math, social studies, physical education and responsible living thus suggesting that health education can truly be part of an integrated approach to curriculum

Curriculum integration is natural when addressing health education. Most of the health topics are or can be easily included in existing curriculums. These health topics include:

- Growth and Development
- Mental/Emotional Health
- Personal Health
- Family Life and Health
- Safety and First Aid

- Consumer Health
- Disease Prevention and Control
- Nutrition
- Community Health Management
- Drug Use and Abuse

Curriculum integration provides a natural framework for children to apply knowledge from multiple disciplines and to use this knowledge to solve real-life problems at work and at play.

# **Learning Dimensions in Health Education**

"Health literacy is the capacity of individuals to obtain, interpret, and understand basic health information and services and the competence to use such information and services in ways which enhance health" (HealthTeacher.com).

Because of the overlap and integration of processes most of the dispositions, skills and knowledge addressed under health education are also found in other curriculum areas. No knowledge is more critical than knowledge about health. Without it, no other life goal can be successfully achieved.

The Carnegie Foundation Report, 1990

# **Dispositions**

- Develop dispositions of responsible citizenship (social studies)
- Respect and care for environment (social studies, science)
- Demonstrates safety measures (science)
- Importance of physical activity (physical education)

#### **Skills**

- Problem solving and decision making (social studies, responsible living, math, science)
- Locating, acquiring and organizing information (science, social studies, language arts)
- Measurement (science, math)
- Critical thinking (science, responsible living)
- Responsible choices (responsible living)
- Develop confidence, independence, and the motor skills associated with preparing nutritious foods

## Knowledge

- Understand that there are a variety of foods that can help you grow and stay healthy
- Identify the food groups and identify a health benefit for each
- Shows awareness of personal health and fitness (physical education)



# Possible Health Education Objectives for Early Primary

The following objectives have been compiled from the PreK–3<sup>rd</sup> grade health education curriculums of Health Teacher.com, GrowingHealthy, Chef Combo, and Pyramid Café (National Comprehensive Health Education, 1997; Health Teacher.com; Nutrition Explorations.org).

## **Growth and Development**

Students will:

- Describe body parts
- Describe the kinds of information provided by each of the senses
- Describe the basic structure and functions of the human body system

### **Mental/Emotional Health**

Students will:

- Identify acceptable ways to deal with unpleasant emotions
- Differentiate between acceptable and unacceptable behavior

#### **Personal Health**

Students will:

- Identify personal health practices that protect their health and the health of others
- Identify age appropriate responsibilities for health and safety

## Safety and First Aid

Students will:

- Demonstrate first aid techniques for cuts and abrasions
- Practice behaviors which enhance personal safety

## **Nutrition**

Students will:

- Describe the role of nutrition in a healthy lifestyle
- Identify the food groups and their purpose to healthy living

# **Drug Use and Abuse**

Students will:

- Name methods of identifying potentially hazardous substances
- Demonstrate the ability to apply a decisionmaking process to health issues and problems

#### **Disease Prevention and Control**

Students will:

- Explain disease prevention practices
- Explain the value of immunizations

#### **Consumer Health**

Students will:

- Explain ways TV advertising influences choices of foods and other products
- Practice critical viewing skills of advertisements

# Importance of Health Education

Health education is important and the earlier started the greater the positive lifelong results. Schools and early childhood programs are natural places to implement health education as they already play an important role in health promotion and disease prevention. In *Goal 2000: Educate America Act*, Goal One stated that "by 2000, all children in America will start school ready to learn." For this to happen it has been recognized that children need healthy minds and bodies. Federal and state funds has been used to establish programs to address this. Head Start and other child care and preschool programs have played active parts in health and nutrition endeavors.

#### References

American Association for Health Education. (1998). Position statement. nc:np.

- Carnegie Foundation for the Advancement of Teaching. (1990). *Ready to learn: A mandate for the nation*. Princeton, NJ: Author. ED 344 663.
- National Comprehensive Health Education. (1997). *Growing healthy curriculum*. [Online]. Available at: http://www.nche.org

### Resources

- American Public Health Association and American Academy of Pediatrics. (1992). *Caring for our children:* National health and safety performance standards. Washington, DC & Elk Grove Village, IL: APHA and AAP. ED 344674
- Birch, D. & Kane, W. (1999). A comprehensive approach to health promotion. *Journal of Physical Education, Recreation & Dance*, 70(1), 57-59.
- Bushnell, R. J. B. (1998). You've gotta be heart smart! *Teaching Pre K-8*, 28(5), 54-55.
- Center for Disease Control and Prevention. (1996). Guidelines for school health programs to promote lifelong healthy eating. *MMWR*, 45(no. RR-9), 1-42.
- Cesarone, B. (1993). Health care, nutrition, and goal one. ERIC Digest, EDO-PS-93-5.
- Contento, I.R., Manning, A. D., & Shannon, B. (1992). Research perspective on school-based nutrition education. *Journal for the Society of Nutrition Education*, 24, 247-260.
- Deutsch, C. (2000). Common cause: School health and school reform. Educational Leadership, 57(6), 8-12.
- Grebow, P. M., Greene, B. Z., Harvey, J., & Head, C. J. (2000). Shaping health policies. *Educational Leadership*, 57(6), 63-66.
- James, D. & Adams, T. L. (1998). Curriculum integration in nutrition and mathematics. *The Journal of School Health*, 68(1), 3-6.
- Jessee, P. O., Wilson, H. & Morgan, D. (2000). Medical play for young children. *Childhood Education*, 76(4), 215-218.
- Johnson, J. & Deshpnade, C. (2000). Health education and physical education: Disciplines preparing students as productive, healthy citizens for the challenges of the 21st century. *The Journal of School Health*, 70(2), 66-68.
- Joint Committee on National Health Education Standards. (1995). *National health education standards*. (available from the American Cancer society, Inc., 1559 Clifton R., NE. Atlanta, GA 30329-4251).

- Kotz, K. & Story, M. (1994). Food advertisements during children's Saturday morning television programming: Are they consistent with dietary recommendations? *Journal of the American Dietetic Association*, *94*, 1296-1300.
- Levitsky, D.A. & Strupp, B.J. (1995). Malnutrition and the brain: Changing concepts, changing concerns. *Journal of Nutrition*, 125, 2212S-2220S.
- Marx, E. & Northrop, D. (2000). Partnerships to keep students healthy. Educational Leadership, 57(6), 22-24.
- Pealer, L. (2000). HealthTeacher.com: An online k-12 health education curriculum. *The Journal of School Health*, 70(6), 244-246.
- Ubbes, V. A. et al. (1999). Professional preparation of elementary teachers in Ohio: Status of K-6 health education. *The Journal of School Health*, 69(1), 17-21.
- Wooley, S. F., Eberst, R. M. & Bradley, B. J. (2000). Creative collaborations with health providers. *Educational Leadership*, *57*(6), 25-28.

#### Web Sites

More and more web sites are being developed on the Internet. By searching healthy kids or children and health, you will have a multitude of hits to explore. Below are four such web sites.

## www.californiahealthykids.org

This is a California Department of Education web site offers many links and resources including teacher developed lesson plans for health education K-3 and 4-6.

#### www.HealthTeacher.com

Developed and maintained by WebMD,Inc. provides a resource for state, district and local school systems, free of charge, everything needed to build a comprehensive sate of the art health education curriculum that is based on national standards.

#### www.kidshealth.org

Provided by the medical experts of the Nemours Foundation offers information and interactive ideas for parents, kids and teens in the health areas of nutrition, fitness, smoking, dental, safety, and environment.

#### www.nutritionexplorations.org

Developed and maintained by the National Dairy Council this site offers multiple teaching resources for preschool and primary grades such as Chef Combo and Pyramid Cafe. Family nutrition information and family activities including kids cooking, games, stories and books are also found.