Connecticut State Board of Education
Hartford

TO BE PROPOSED:
November 3, 2021

RESOLVED, That the State Board of Education, pursuant to Public Act 19-91, adopts the 2021 Healthy and Balanced Living Curriculum Framework, and directs the Commissioner to take the necessary action.

Approved by a vote of _____, this third day of November, Two Thousand Twenty-one.

Signed: _____
                      Charlene M. Russell-Tucker, Secretary
                      State Board of Education

Connecticut State Board of Education
Hartford

TO: State Board of Education

FROM: Charlene M. Russell-Tucker, Commissioner of Education

DATE: November 3, 2021

SUBJECT: Adoption of the Healthy and Balanced Living Curriculum Framework

Executive Summary

Introduction
Section 7 of Public Act No. 19-91, *An Act Concerning Various Revisions and Additions to the Education Statutes,* requires that the Connecticut State Department of Education (CSDE) update the health education component of the Healthy and Balanced Living Curriculum Framework (Framework) developed by the Department in 2006.

Background Information
The Framework includes Health Education and Physical Education curricular content for students in pre-K through Grade 12. Recent legislation called for additional content areas to be included in the health education curriculum and therefore the 2021 Framework is updated to not only include the additional content areas but is now aligned with the current National Health Education and Physical Education Standards. These Standards are research-based, theory driven and define clear goals and outcomes for all students. The 2021 Framework was developed in partnership with content experts from local school districts and universities; the Connecticut Association for Health, Physical Education, Recreation and Dance; and, the Connecticut Association of Administrators of Health and Physical Education. The Framework content was presented to the State Board of Education's Legislation and Policy Development Committee and Academic Standards and Assessment Committee.

Recommendation and Justification
I recommend that the State Board of Education adopt the 2021 Healthy and Balanced Living Curriculum Framework.

Follow-up Activities
Following approval, the CSDE will provide districts with the 2021 Framework and work with the Connecticut Association of Schools (CAS), in providing professional development and technical assistance to support district health education and physical education teachers in implementing the updated Health Education and Physical Education curricula.

Prepared by: John D. Frassinelli, Division Director

Connecticut State Department of Education (CSDE)

2021 Healthy and Balanced Living Curriculum Framework

Health Education and Physical Education

2021

Introduction

Academic Standards provide a common set of expectations for what students will know and be able to do at the end of a grade for each subject area. While academic standards establish desired learning outcomes, curriculum provides instructional programming designed to help students reach these outcomes. They serve as goals for teaching, learning and assessment. The standards help ensure that students acquire the skills and knowledge they need to achieve personal and academic success. The CSDE's Healthy and Balanced Living Curriculum Framework Standards provides the required elements of instruction and are worded broadly to allow for local decision-making in designing specific curriculum.

Learning Goals, Standards, and Outcomes

These **four learning goals** are foundational in academic learning standards:

1. **Read** with comprehension, **write** effectively, and **communicate** successfully in a variety of ways and settings and with a variety of audiences.
2. **Know and apply the core concepts and principles** of mathematics; social, physical, and life sciences; civics and history, including different cultures and participation in representative government; geography; arts; and health and physical education;
3. **Think** analytically, logically, and creatively, and integrate technology literacy and fluency as well as different experiences and knowledge to form reasoned judgments and solve problems; and
4. **Understand** the importance of work and finance and how performance, effort, and decisions directly affect future career and educational opportunities.

Health Education and Physical Education: Educating the Whole Child

The mission of the Connecticut State Board of Education is to ensure equal opportunity, equity, and excellence in education for all Connecticut students in preparation for college, career, and life. Health Education and Physical Education are essential academic subjects that support this mission through the physical, intellectual, and social-emotional development of students. Quality health education and physical education programs prepare students by providing them with:

- information and learning experiences to support and enhance their abilities to access, understand, appraise, apply, and advocate for health information and services to maintain or improve their own health and the health of others;
- the ability to move with competence and confidence in a wide variety of physical activities in multiple environments that benefit the healthy development of the whole person;

- learning experiences that lead to academic achievement;
- skills to improve focus, attention, concentration, and on-task behavior;
- skills and knowledge that encourage lifetime healthy behaviors and goal setting; and
- practices that foster effective cross-cultural communication, problem solving, negotiation, and conflict resolution skills.

Whole School, Whole Community, Whole Child: Link to Health Education and Physical Education

The Whole School, Whole Community, Whole Child (WSCC) model focuses on improving each child's cognitive, physical, social, and emotional development through the alignment, integration, and collaboration between education and health. The approach of the model focuses on the connection between the whole school and whole community, sharing resources and influences when addressing the needs of the whole child.

In the WSCC model, health education and physical education are two distinct academic disciplines that complement one another. These two disciplines foster the development of skills and competencies for academic and personal growth. For this reason, Connecticut focuses on the concept of the whole child that includes not only academic functioning, but also the components affecting the child's well-being and overall health, specifically as it relates to the social and emotional, behavioral and physical health of the child (Association for Supervision and Curriculum Development (ASCD), 2017). Information regarding the components of health and physical education in the WSCC model is located on the ASCD's website at http://www.ascd.org/programs/learning-and-health/wscc- model.aspx

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework
Health Education Section

Table of Contents

Introduction to the Health Education Curriculum Framework

Research supports that students' health and well-being significantly influences learning and academic achievement (Basch, 2011). Comprehensive school health education positively affects student achievement by increasing health knowledge, improving health skills, positively influencing health behaviors, and decreasing risky behaviors (Michael, Merlo, Basch, Wentzel & Wechsler, 2015).

The Connecticut State Department of Education's (CSDE) Health Education Curriculum Framework provides districts with a best practice approach for implementing a planned, ongoing and sequential PK-12 curriculum that addresses the physical, mental, social and emotional dimensions of health. An effective, health education curriculum is research-based and theory driven and defines clear goals and behavioral outcomes for all students. It must be standards-and skills-based, developmentally and culturally appropriate and designed to motivate students to maintain and improve their health and develop and demonstrate health-enhancing knowledge, attitudes, skills and practices. In addition, health education is foundational to social and emotional learning and provides an opportunity for students to learn and practice these essential skills. *Ultimately, an effective curriculum promotes the development of protective factors, supports healthy outcomes and enables students to establish and practice health-enhancing behaviors and become productive, health literate citizens.*

The Health Education Curriculum Framework represents a vision of the graduate that utilizes an integrated approach and alignment to key components of the health education curriculum including the following:

1. National Health Education Standards (Joint Committee on National Health Education Standards, 2007).
2. Essential core content
3. Grade level performance indicators
4. Social Emotional Learning Competencies (CASEL, 2019).

This framework structure allows for various points of entry given the different approaches to curriculum development while clearly showing the connections.   The eight **National Health Education Standards (NHES)** provide concrete expectations of curriculum and are vital for assisting students in learning how to apply knowledge and skills and develop health-enhancing behaviors. **Essential core content** provides legislatively mandated (see Appendices A & B) as well as recommended topic areas and developmentally appropriate subtopics for each grade level span. Core content should be infused into all seven skills-based standards. **Performance indicators** define grade level expectations of what students should know and be able to do. The **Social and Emotional Learning Competencies** (**SEL**) "provide a process through which children and adults acquire and effectively apply the knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions" (Education-first, p. 6). When delivered in a planned, ongoing, and systematic approach, the comprehensive health education program provides **TIER 1** education and skill development opportunities for all students. The synergy between the application of academic standards, performance indicators, and the SEL competencies into everyday instruction supports the optimal development of students.

Acknowledgements

Numerous professionals contributed to the development of the Healthy and Balanced Living Curriculum Framework. It was through their leadership, hard work, dedication, and persistence that this document has become a dynamic resource to address and promote the health and wellness of students in Connecticut.

A special thank you to the following individuals who served as the core writing team for the Healthy and Balanced Living Curriculum Framework Health Education Section:

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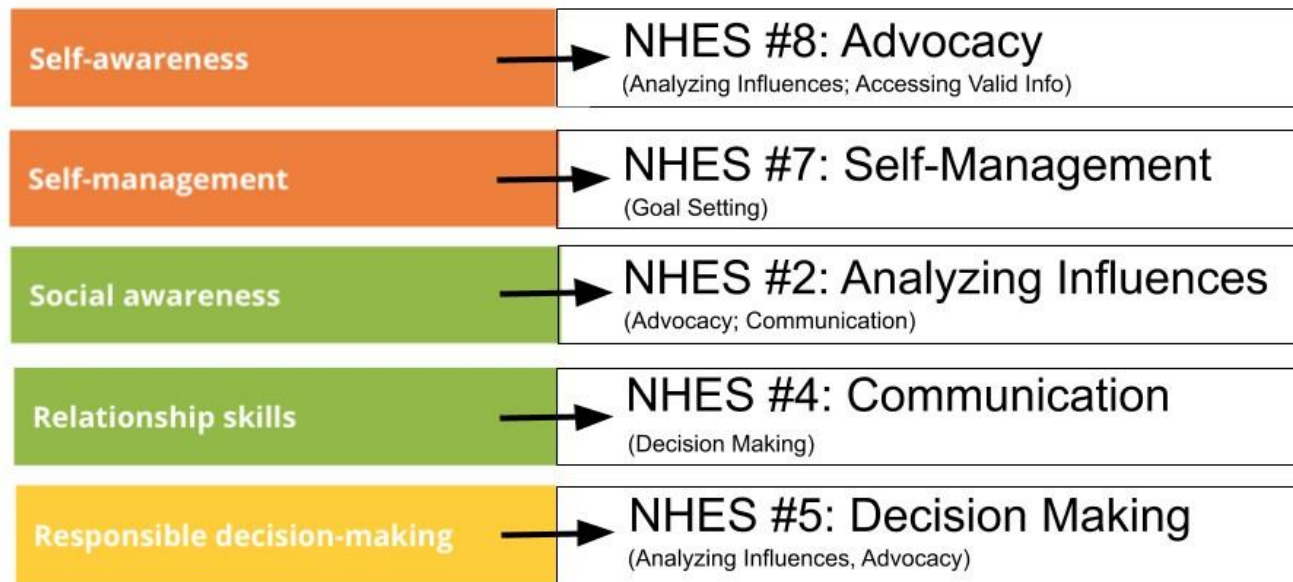
Competencies of Social and Emotional Learning

The strong interconnectedness between National Health Education Standards and CASEL's core SEL competencies build and nurture social and emotional skills and provide TIER 1 education for all students.

Health Education Academic Learning Standards	SEL Competencies
Standard 2 Analyzing Influences Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors. **Standard 3 Accessing Information** Students will demonstrate the ability to access valid information, products, and services to enhance health. **Standard 7 Self-management** Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks **Standard 8 Advocacy** Students will demonstrate the ability to advocate for personal, family, and community health	**Self-awareness:** The ability to accurately recognize one's own emotions, thoughts, and values and how they influence behavior. The ability to accurately assess one's strengths and limitations, with a well-grounded sense of confidence, optimism, and a "growth mindset."
Standard 6 Goal Setting Students will demonstrate the ability to use goal-setting skills to enhance health. **Standard 7 Self-Management** Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.	**Self-management:** The ability to successfully regulate one's emotions, thoughts and behaviors in different situations, effectively managing stress, controlling impulses, and motivating oneself. The ability to set and work toward personal and academic goals.
Standard 2 Analyzing Influences Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors. **Standard 3 Accessing Information** Students will demonstrate the ability to access valid information, products, and services to enhance health **Standard 4 Interpersonal Communication** Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health.	**Social awareness:** The ability to take the perspective of and empathize with others, including those from diverse backgrounds and cultures. The ability to understand social and ethical norms for behavior and to recognize family, school and community resources and supports.

Standard 8 Advocacy Students will demonstrate the ability to advocate for personal, family, and community health.	
Standard 2 Analyzing Influences Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors **Standard 4 Interpersonal Communication** Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health. **Standard 5 Decision Making** Students will demonstrate the ability to use decision-making skills to enhance health **Standard 8 Advocacy** Students will demonstrate the ability to advocate for personal, family, and community health	**Relationship skills:** The ability to establish and maintain healthy and rewarding relationships with diverse individuals and groups. The ability to communicate clearly, listen well, cooperate with others, resist inappropriate social pressure, negotiate conflict constructively and seek and offer help when needed.
Standard 2 Analyzing Influences Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors. **Standard 5 Decision Making** Students will demonstrate the ability to use decision-making skills to enhance health. **Standard 6 Goal Setting** Students will demonstrate the ability to use goal setting skills to enhance health **Standard 7 Self-management** Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks **Standard 8 Advocacy** Students will demonstrate the ability to advocate for personal, family, and community health.	**Responsible decision-making:** The ability to make constructive choices about personal behavior and social interactions based on ethical standards, safety concerns and social norms. The realistic evaluation of consequences of various actions, and a consideration of the well-being of oneself and others.

The following graphic reflects a streamlined alignment of the National Health Education Standards (NHES) with the Social and Emotional Learning Competencies as defined by CASEL (CASEL, 2019, https://casel.org/what-is-sel/).

SEL/HE Alignment

Self-awareness	→ NHES #8: Advocacy (Analyzing Influences; Accessing Valid Info)
Self-management	→ NHES #7: Self-Management (Goal Setting)
Social awareness	→ NHES #2: Analyzing Influences (Advocacy; Communication)
Relationship skills	→ NHES #4: Communication (Decision Making)
Responsible decision-making	→ NHES #5: Decision Making (Analyzing Influences, Advocacy)

(Todnem, 2019).

How to Use the Health Education Curriculum Framework

Today's state-of-the-art health education curricula reflect the growing body of research that emphasizes teaching functional health information (essential knowledge); shaping personal values and beliefs that support healthy behaviors; shaping group norms that value a healthy lifestyle; and developing the essential health skills necessary to adopt, practice, and maintain health-enhancing behaviors. (2012 HECAT Overview, p.4)

The Health Education Curriculum Framework provides guidance on essential health content and skills and a vision for student learning through the following:

National Health Education Standards

- **Core Content Standard 1 addresses the nine essential content areas that are the focus in school health education.**
  Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.
    - Alcohol, Nicotine and Other Drugs
    - Healthy Relationships
    - Violence Prevention
    - Healthy Eating and Physical Activity
    - Sexual Health
    - Optimal Wellness and Disease Prevention
    - Sexual Assault and Abuse prevention
    - Mental and Emotional Health
    - Safety and Injury Prevention

- **Skills-based Standards 2-8** contain the essential health related skills for contributing to healthy and balanced living.
  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,** 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.

- Skills-based health education dictates that the focus and emphasis be on the selection of school health skills infused with essential content.
- This Framework does not prescribe the alignment of particular health skills to particular health content but allows for local decisions across the scope of skills and content of school health education.
- District leaders and teachers have the opportunity to choose skills that most appropriately align to particular content supporting the development of health literate students who are at the center of learning.
- District leaders and teachers should use this document as the foundation for creative and imaginative teaching. Users of this document should make data driven decisions on what is to be taught, and when, based on the particular needs of students and norms of the school community. The choices made about the content and skills taught at each grade level should reflect district and student needs as well as incorporate all state mandates related to school health education.
- The content and skill development progresses in complexity across grade clusters, Pk-2, 3-5. 6-8 and 9-12.

Core Concepts PK-12

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

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Alcohol, Nicotine and Other Drugs (ANOD)	ANOD 1.1.2 Identify dangerous household products that are harmful if intentionally, swallowed, inhaled or absorbed. ANOD 1.2.2 Explain that medicines are drugs that are helpful when needed and used correctly. ANOD 1.3.2 Identify family and school rules about medicine use. ANOD 1.4.2 Identify that using medicines requires adult supervision and identifying those adults (e.g. parents, school nurse, doctor, etc.) ANOD 1.5.2 Physical avoidance and reporting of dangerous drugs and paraphernalia (e.g. needles, candy like substances, vape pens, etc.)	ANOD 1.1.5 Explain why household products are harmful if intentionally absorbed or inhaled. ANOD 1.2.5 Explain the benefits and correct use of medicines and potential risks associated with inappropriate use of medicines. ANOD 1.3.5 Identify short- and long-term effects of alcohol and nicotine use, including second-hand effects. ANOD 1.4.5 Explain the dangers of experimenting with nicotine and alcohol ANOD 1.5.5 Describe family rules about avoiding nicotine and alcohol use. ANOD 1.6.5 Identify the social impacts of ANOD use (e.g. family, friends, peers)	ANOD 1.1.8 Identify healthy coping mechanisms and alternatives to substance use ANOD 1.2.8 Distinguish between proper use and abuse of over-the-counter and prescription medicines. ANOD 1.3.8 Summarize the negative consequences of using alcohol and other drugs. ANOD 1.4.8 Describe situations that could lead to the first time use of alcohol and other drugs. ANOD 1.5.8 Explain why using alcohol or other drugs is an unhealthy way to manage stress. ANOD 1.6.8 Explain school policies and community laws about alcohol, nicotine and other drugs. ANOD 1.7.8 Determine the benefits of being alcohol, nicotine and other drug-free. ANOD 1.8.8 Explain the risks associated with riding in a motor vehicle with someone who is under the influence of alcohol and other drugs and explore safe options. ANOD 1.9.8 Describe short- and long- term physical, social and emotional effects of using ANOD's (e.g. effects on organs, including brain, peer relationships, family relationships, self- esteem)	ANOD 1.1.12 Differentiate between proper use and abuse of over-the-counter (OTC) and prescription medicines. ANOD 1.2.12 Examine situations that could lead to the use of alcohol and other drugs. ANOD 1.3.12 Examine the resiliency skills that empower people to remain alcohol- and drug- free. ANOD 1.4.12 Summarize family rules, school rules, and laws about alcohol, nicotine and other drug-use. ANOD 1.5.12 Compare the relationship between ANOD use and other risks, such as unintentional injuries, violence, suicide, sexual risk behaviors, decreased school and job performance, school and job absenteeism, and job loss ANOD 1.6.12 Examine the dangers of driving and/or riding with a driver while under the influence of alcohol and other drugs. ANOD 1.7.12 Identify treatments for addiction to ANOD ANOD 1.8.12 Examine the ripple effects (e.g. financial, social, emotional, physical) costs of ANOD's use to the individual and society.

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Healthy Relationships (HR)	HR 1.1.2 Describe different types of families (e.g., nuclear, single parent, blended, intergenerational, cohabitating, adoptive, foster, same-gender, mixed-race) HR 1.2.2 Identify the benefits of healthy family and peer relationships. HR 1.3.2 Identify qualities that make a good friend. HR 1.4.2 Demonstrate ways to treat all people with dignity and respect (e.g., race, ethnicity, socio-economic status, differing abilities, immigration status, family configuration) HR 1.5.2 Define consent (e.g. personal space and boundaries)	HR 1.1.5 List healthy ways to express affection, love, and friendship. HR 1.2.5 Identify characteristics and benefits of healthy family and peer relationships. HR 1.3.5 Describe the value of others' talents and strengths. HR 1.4.5 Describe gender-role stereotypes and their potential impact on self and others HR 1.4.5 Define and discuss consent as it relates to personal boundaries	HR 1.1.8 Differentiate among gender expression, gender identity and sexual orientation. HR 1.2.8 Identify various types of relationships (peer, family, romantic, professional, etc.) HR 1.3.8 Describe characteristics of healthy relationships (communication, respect, trust, and boundaries) HR 1.4.8 Differentiate between healthy and unhealthy relationships. HR 1.5.8 Explain why it is wrong to tease others based on personal characteristics (such as body type, gender, appearance, mannerisms, and the way one dresses or acts). HR 1.6.8 Explore strategies to address unhealthy relationships HR 1.7.8 Describe healthy ways to express affection, love, and friendship. HR 1.8.8 Describe how consent is a foundational principle in healthy sexuality and in violence prevention HR 1.9.8 Discuss how affirmative consent mitigates confusion within a sexual relationship HR 1.10.8 Identify factors (e.g., body image self-esteem, alcohol and other substances) that can affect the ability to give or perceive consent to sexual activity HR 1.11.8 Explain the importance of talking with parents and other trusted adults about issues related to relationships, growth and development and sexual health. HR 1.12.8 Explain how the use of social media can positively and negatively impact relationships HR 1.13.8 Identify the legal and social consequences of viewing and/or sending sexually explicit pictures or messages by e-mail or cell phone or posting sexually explicit pictures on social media sites (e.g., chat groups, e-mail, texting, websites, phone and tablet applications).	HR 1.1.12 Describe personal characteristics that make people unique and the benefits of living in a diverse society. HR 1.2.12 Identify characteristics of healthy and unhealthy relationships (communication, trust, boundaries, respect) HR 1.3.12 Identify how power and control differences in relationships can contribute to aggression and violence HR 1.4.12 Describe the effects of viewing pornography, sexting, etc. on healthy relationships HR 1.5.12 Demonstrate an understanding of how affirmative consent mitigates the impact and consequences of sexual pressure. HR 1.6.12 Evaluate effective strategies for handling challenges in relationships (e.g. family members, peers, and significant others). HR 1.7.12 Evaluate the legal and social consequences of sending sexually explicit pictures or messages by e-mail or cell phone or posting sexually explicit pictures on social media sites (e.g., chat groups, e-mail, texting, websites, and phone and tablet applications). HR 1.8.12 Summarize the benefits of respecting individual differences in aspects of sexuality (such as sexual activity, sexual abstinence, sexual orientation, gender expression, or gender identity), growth and development, and physical appearance. HR 1.9.12 Describe the consequences of prejudice, discrimination, racism, sexism on healthy relationships.

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Violence Prevention (VP)	VP 1.1.2 Describe the difference between bullying, teasing, and mean spirited behavior. VP 1.2.2 Explain why it is wrong to tease or bully others. VP 1.3.2 Explain what to do if someone is being bullied.	VP 1.1.5 Summarize the impact of teasing or bullying others. VP 1.2.5 Identify nonviolent ways to manage anger. VP 1.3.5 Describe the difference between mean spirited behavior, bullying, and harassment. VP 1.4.5 Explain the difference between tattling and reporting aggressive or violent behavior. VP 1.4.6 Explain what to do if you see bullying, fighting, and/ or violence.	VP 1.1.8 Explain the role of bystanders in escalating, preventing or stopping bullying, fighting, and violence. VP 1.2.8 Describe short- and long-term consequences of violence to perpetrators, victims, and bystanders. VP 1.3.8 Describe strategies to avoid physical fighting and violence. VP 1.4.8 Describe how the presence of weapons increases the risk of serious violent injuries. VP 1.5.8 Summarize how participation in gangs can lead to violence. VP 1.6.8 Describe actions to take if weapons are seen or suspected in school or outside the supervision of a parent or guardian. VP 1.7.8 Define prejudice, discrimination and bias.	VP 1.1.12 Describe how prosocial behaviors can help prevent violence. VP 1.2.12 Identify the negative consequences of violence to perpetrators, victims, and bystanders. VP 1.3.12 Explain how bystanders can help prevent violence by reporting dangerous situations or actions. VP 1.4.12 Summarize why the presence of weapons increases the likelihood of violent injury. VP 1.5.12 Describe how gang involvement can contribute to violence. VP 1.6.12 Describe actions to take if weapons are seen or suspected in school or outside the supervision of a parent or guardian. VP 1.7.12 Describe federal, state, and local laws intended to prevent violence.

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Healthy Eating and Physical Activity (HEPA)	HEPA 1.1.2 Explain the importance of trying new foods. HEPA 1.2.2 Explain the importance of choosing healthy foods and beverages and daily physical activity. HEPA 1.3.2 Identify a variety of healthy snacks. HEPA 1.4.2 Describe body signals that tell a person when they are hungry and when they are full. HEPA 1.5.2 Identify healthy eating patterns that provide energy and help the body grow and develop.	HEPA 1.1.5 Name the food groups and variety of nutritious food choices for each food group. HEPA 1.2.5 Explain the importance of eating a variety of foods from all the food groups. HEPA 1.3.5 Describe the physical, mental, social, and academic benefits of healthful eating habits and physical activity HEPA 1.4.5 Identify nutritious and non-nutritious beverages. HEPA 1.5.5 Describe the benefits of consuming plenty of water. HEPA 1.6.5 Describe the benefits of limiting the consumption of solid fat, added sugar, and sodium. HEPA 1.7.5 Explain the concept of eating in moderation. HEPA 1.8.5 Explain body signals that tell a person when they are hungry and when they are full.	HEPA 1.1.8 Identify the importance of each macronutrient (fats, proteins, carbohydrates) and eating a variety of foods from each category HEPA 1.2.8 Summarize the physical, mental, social, and academic benefits of healthful eating habits and physical activity. HEPA 1.3.8 Describe how to make healthy food choices when given options HEPA 1.4.8 Summarize the benefits of consuming adequate amounts of water HEPA 1.5.8 Describe the relationship and impact of what we eat and our physical activity levels to maintaining a healthy weight HEPA 1.6.8Explain the importance of a healthy relationship with food (i.e. intuitive eating, moderation, food as fuel) HEPA 1.7.8 Differentiate between healthy eating and disordered eating HEPA 1.8.8 Recognize the importance of respecting food allergy needs in self and others HEPA 1.9.8 Understand how to read food labels for the purpose of limiting the consumption of fats, added sugar, and sodium. HEPA 1.10.8 Explain the relationship between access to healthy foods and personal food choices.	HEPA 1.1.12 Describe the recommendations of the U.S. Dietary Guidelines for Americans and explain how they are useful in planning a healthy diet. HEPA 1.2.12 Describe the relationship between nutrition, physical activity and overall health. HEPA 1.3.12 Describe the relationship between diet, physical activity and chronic diseases such as heart disease, cancer, diabetes, hypertension, and osteoporosis. HEPA 1.4.12 Describe the effects of hydration and dehydration on physical performance and health. HEPA 1.5.12 Define and describe the benefits of a holistic diet (increasing the amount of whole foods that one eats and decreasing the amount of processed foods) HEPA 1.6.12 Distinguish food sources that provide key nutrients. HEPA 1.7.12 Describe the importance of eating a variety of appropriate foods to meet nutrient requirements that align with individual needs (caloric output) HEPA 1.8.12 Summarize the importance of healthy eating and physical activity in maintaining health HEPA 1.9.12 Summarize the physical, mental, social, and academic benefits of healthful eating habits and physical activity. HEPA 1.10.12 Summarize how to make healthy food selections when choices are available. HEPA 1.11.12 Describe the benefits of limiting the consumption of high sugar including soft drinks, energy drinks, fruit juices, and sports drinks. HEPA 1.12.12 Explore factors that influence food choices (e.g. food availability, portion sizes, cost, taste vs. nutrition, celebrations, etc.) HEPA 1.13.12 Describe the difference between a healthy relationship with food and an unhealthy relationship with food HEPA 1.14.12 Identify healthy and risky approaches to eating and exercise HEPA 1.15.12 Identify the physical and psychological effects of food allergies.

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Sexual Health (SH)	SH 1.1.2 Identify and describe functions of body parts (e.g. stomach, feet, hands, ears, eyes, mouth) SH 1.2.2 Identify those parts of the body that are considered private by using medically accurate names.	SH 1.1.5 Describe basic reproductive body parts and their functions. SH 1.2.5 Explain common human sexual development and the role of hormones (e.g., romantic and sexual feelings, masturbation, mood swings, timing of pubertal onset) SH 1.3.5 Describe the range of physical, social, and emotional changes that occur during puberty. SH 1.4.5 Explain how puberty and development can vary greatly and still be normal. SH 1.5.5 Describe how people are similar and different (e.g. sexual identity, gender, gender identity, gender expression, etc.)	SH 1.1.8 Identify resources, products, services related to supporting sexual health SH 1.2.8 Explain sexual activity and their associated risks (i.e. vaginal, anal, oral) SH 1.3.8 Describe reproductive body parts and their functions. SH 1.4.8 Describe the menstrual cycle, the process of sperm production and the relationship to conception SH 1.5.8 Determine the benefits of being sexually abstinent. SH 1.6.8 Explain how the most common STDs and HIV are transmitted. SH 1.7.8 Describe the usual signs and symptoms of common STDs and HIV and explain that some are asymptomatic. SH 1.8.8 Summarize which STDs can be cured and which can be treated. SH 1.9.8 Summarize ways to decrease the spread of STDs and HIV by not having sex, using condoms consistently and correctly when having sex, not touching blood, and not touching used hypodermic needles. SH 1.10.8 Describe how the effectiveness of condoms can reduce the risk of HIV, and other STDs including HPV (Human Papillomavirus). SH 1.11.8 Explain the significance of the physical changes in puberty and the potential role of hormone blockers on young people who identify as transgender. SH 1.12.8 Define and explain differences between cisgender, transgender, gender nonbinary, gender expansive, and gender identity	SH 1.1.12 Summarize the use of contraceptives and their relationship to the process of fertilization and conception SH 1.2.12 Explain the importance of and ability to access contraceptive, STD and HIV counseling and services if sexually active. SH 1.3.12 Discuss state and federal laws and guidelines (e.g., CDC) that address sexual healthcare services for minors (e.g., contraception, emergency contraception, prenatal care, adoption, abortion, STD, including HIV, prevention, testing, and treatment SH 1.4.12 Examine the factors that protect one against engaging in sexual risk behaviors (e.g. values clarification, planning ahead, being prepared, communicating and respecting boundaries) SH 1.5.12 Summarize ways to reduce the risk of pregnancy, HIV and other STD's (e.g. abstinence, avoiding alcohol and other drugs, limiting sexual partners, using protection) SH 1.6.12 Compare and contrast the advantages and disadvantages of contraceptive and disease prevention methods (e.g., abstinence, condoms, emergency contraception) SH 1.7.12 Justify why abstinence from sex and drugs are the safest, most effective risk avoidance methods of protection from HIV, other STDs, and pregnancy. SH 1.8.12 Examine the effectiveness of typical use of condoms and other barrier methods in reducing the risk of pregnancy, HIV, and other infection by STDs, including HPV (Human Papillomavirus). SH 1.9.12 Evaluate the benefits of biomedical approaches to prevent STDs (e.g., hepatitis B vaccine, HPV vaccine) and HIV (e.g., PrEP, PEP) SH 1.10.12 Explain the importance of lowering the viral load of a person living with HIV to undetectable and maintaining viral suppression SH 1.11.12 Examine the effectiveness of typical use of a variety of contraceptives in preventing pregnancy, HIV and STD's SH 1.12.12 Summarize the short- and long-term consequences, including symptoms and treatment costs, of common STDs and HIV and the problems associated with asymptomatic STDs and HIV. SH 1.13.12 Explain why it is important to know the STD/HIV status of oneself and of a potential sexual partner. SH 1.14.12 Explain the state and federal laws related to **Safe Haven Law**, parenting, and sterilization, including their impacts on oppressed communities SH 1.15.12 Describe the emotional, social, physical and financial effects of being a teen parent. SH 1.16.12 Differentiate between sexual orientation, sexual behavior, and sexual identity.

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Optimal Wellness and Disease Prevention (OWDP)	OWDP 1.1.2 Identify different ways that disease-causing germs are transmitted (i.e. skin, mucus membranes, coughing, and contact with bodily fluids). OWDP 1.2.2 Identify ways to prevent the spread of germs that cause common communicable diseases (e.g. cover wounds, cover mouth when sneezing/coughing, wash hands, and do not touch other bodily fluids).	OWDP 1.1.5 Describe ways to prevent the spread of germs that cause infectious diseases. OWDP 1.2.5 Describe the benefits of personal health care practices such as tooth brushing and flossing, hand washing, covering a cough and sneeze, washing hair and bathing regularly. OWDP 1.3.5 Define the terms communicable and non-communicable disease and identify ways to help prevent disease (e.g. HIV, diabetes, cancer, heart disease). OWDP 1.4.5 Describe symptoms that prevent a person from daily activities (i.e. going to school, practices, playing with friends, etc.). OWDP 1.5.5 Develop an awareness and empathy for health problems associated with common childhood chronic diseases or conditions such as asthma, allergies, diabetes, and epilepsy. OWDP 1.6.5 Describe the importance of seeking help and treatment for diseases.	OWDP 1.1.8 Describe the benefits of good hygiene practices OWDP 1.2.8 Explain the difference between infectious, noninfectious, acute and chronic diseases and the importance of seeking treatment OWDP 1.3.8 Describe the controllable factors that contribute to optimal wellness and chronic diseases (i.e. heart disease, cancer, diabetes, hypertension and osteoporosis). ● Intake (food, air, water, substances) ● Output (physical activity and movement; elimination of waste) ● Sleep ● Stress Management OWDP 1.4.8 Summarize the symptoms of someone who is sick or getting sick and how that may prevent daily activities. OWDP 1.5.8 Summarize modes of transmission and health practices to prevent the spread of infectious diseases that are transmitted by food, air, indirect contact, and person-to-person contact.	OWDP 1.1.12 Summarize important health screenings, immunizations, checkups, examinations, and health screenings necessary to maintain good health including breast and testicular self-exams. OWDP 1.2.12 Examine the wellness continuum (i.e. absence of sickness does not indicate optimal wellness) OWDP 1.3.12 Examine the controllable factors that contribute to optimal wellness and chronic diseases (i.e. heart disease, cancer, diabetes, hypertension and osteoporosis). ● Intake (food, air, water, substances) ● Output (physical activity and movement; elimination of waste) ● Sleep ● Stress Management OWDP 1.4.12 Discuss using family history gender, and age to make informed health related decisions OWDP 1.5.12 Differentiate between Communicable and Non-Communicable diseases. OWDP 1.6.12 Justify why it is important to seek help and treatment for common infectious diseases and chronic diseases.

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Sexual Assault and Abuse Prevention (SAAP)	SAAP 1.1.2 Identify "appropriate" and "inappropriate" or "safe" and "unsafe" touches. SAAP 1.2.2 Explain why inappropriate touches should be reported to a trusted adult. SAAP 1.3.2 Explain that a child is not at fault if someone touches him or her in an inappropriate way. SAAP 1.4.2 Explain why everyone has the right to tell others not to touch his or her body. SAAP 1.5.2 Explain the importance of respecting the personal space and boundaries of others.	SAAP 1.1.5 Define consent in a variety of settings (e.g. social interactions, playground interactions, physical contact, holding hands, kissing, etc.) SAAP 1.2.5 Distinguish between "appropriate" and "inappropriate" touch. SAAP 1.3.5 Explain that inappropriate touches should be reported to a trusted adult. SAAP 1.4.5 Explain why it is not the child's fault if someone touches him or her in an inappropriate way. SAAP 1.5.5 Explain that everyone has the right to tell others not to touch his or her body.	SAAP 1.1.8 Explain that acquaintance rape and sexual assault are illegal. SAAP 1.2.8 Describe how power and control differences in relationships can contribute to aggression and violence. SAAP 1.3.8 Explain that a person who has been sexually assaulted or raped is not at fault SAAP 1.4.8 Explain the term affirmative consent and what it looks like in words and/or actions. SAAP 1.5.8 Describe situations and behaviors that constitute sexual mistreatment, grooming, harassment, abuse, assault, and exploitation. SAAP 1.6.8 Explain that no one has the right to touch anyone else in a sexual manner if they do not want to be touched. SAAP 1.7.8 Explain why a person who has been sexually mistreated, groomed, harassed, abused, assaulted, or exploited is not at fault. SAAP 1.8.8 Explain the role of bystanders in escalating, preventing, or stopping violence, or supporting the victim. SAAP 1.9.8 Demonstrate how to ask for help and to report sexual mistreatment, grooming, harassment, abuse, assault, exploitation & trafficking. SAAP 1.10.8 Describe the positive and negative ways in which technology and social media can impact physical and emotional safety. SAAP 1.11.8 Identify the process for reporting incidents of sexual mistreatment, grooming, harassment, abuse, assault and exploitation.	SAAP 1.1.12 Explain why it is wrong to trick, threaten, or coerce another person into having sex. SAAP 1.2.12 Explain why a person who has been sexually mistreated, groomed, harassed, abused, assaulted or exploited is not at fault and should not be blamed. SAAP 1.3.12 Demonstrate strategies for avoiding and dealing with sexual health situations that involve personal risk or danger (e.g. sexual mistreatment, grooming, harassment, abuse, assault, exploitation or trafficking) SAAP 1.4.12 Differentiate between respectful (healthy) and disrespectful (unhealthy) relationships including active consent. SAAP 1.5.12 Explain why rape and sexual assault should be reported to a trusted adult. SAAP 1.6.12 Demonstrate the ability to access reliable school and community service providers and resources for health care services related to sexual health & violence prevention (e.g. counseling, testing, school based health centers, pediatrician, reproductive health community centers). SAAP 1.7.12 Explain why it is an individual's responsibility to verify that all sexual contact is consensual. SAAP 1.8.12 Determine laws and policies related to sexual mistreatment, grooming, harassment, abuse, assault, exploitation, & trafficking which are designed to protect young people.

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 core Content Indicators
Mental and Emotional Health (MEH)	MEH 1.1.2 Identify a variety of feelings that people experience MEH 1.2.2 Explain the relationship between feelings and behavior. MEH 1.3.2 Explain the importance of talking with parents and other trusted adults about feelings.	MEH 1.1.5 Explain why sleep and rest are important for proper growth and good health. MEH 1.2.5 Explain what it means to be mentally or emotionally healthy. MEH 1.3.5 Describe the relationship between feelings and behavior and describe appropriate ways to express a variety of feelings (i.e. anger, happiness, sadness, frustration, excitement, etc.) MEH 1.4.5 Identify feelings and emotions associated with loss and grief. MEH 1.5.5 Identify role models who demonstrate positive emotional health. MEH 1.6.5 Explain the importance of talking with parents and other trusted adults about feelings. MEH 1.7.5 Describe the importance of being aware of one's own feelings and of being sensitive to the feelings of others. MEH 1.8.5 Give examples of pro-social behaviors (e.g., helping others, being respectful of others, cooperation, consideration) MEH 1.9.5 Explain the importance of telling an adult if someone is in danger of hurting themselves or others.	MEH 1.1.8 Recognize factors that lower self-worth (comparisons, perception vs. reality, social media, technology, internalizing negative external messages from media and peers) MEH 1.2.8 Recognize factors that increase self-worth (recognizing strengths, growth mindset, confidence, competence) MEH 1.3.8 Recognize the connection between depression and suicidal ideation MEH 1.4.8 Explain the importance of telling an adult if there are people who are in danger of hurting themselves or others MEH 1.5.8 Recognizing stressors, their impact on mind and body, and effective coping strategies MEH 1.6.8 Describe characteristics of a mentally and emotionally healthy person. MEH 1.7.8 Discuss how emotions change during adolescence. MEH 1.8.8 Describe characteristics of positive mental and emotional health. MEH 1.9.8 Summarize the benefits of talking with parents and other trusted adults about feelings. MEH 1.10.8 Describe a variety of appropriate ways to respond to stress when angry or upset. MEH 1.11.8 Summarize feelings and emotions associated with loss and grief. MEH 1.12.8 Explain the importance of a positive body image. MEH 1.13.8 Describe how mental and emotional health can affect health-related behaviors. MEH 1.14.8 Explain the causes, symptoms, and effects of depression, stress and anxiety. MEH 1.15.8 Describe personal stressors at home, in school, and with friends. MEH 1.16.8 Examine the risks of impulsive behaviors. MEH 1.17.8 Identify trusted adults and resources for assistance.	MEH 1.1.12 Examine characteristics of a mentally and emotionally healthy person. MEH 1.2.12 Examine how mental and emotional health can affect health-related behaviors. MEH 1.3.12 Determine when to seek help for mental and emotional health problems and the barriers to doing so, including stigma. MEH 1.4.12 Examine the causes, symptoms, and effects of depression, stress and anxiety, including physical and psychological response MEH 1.5.12 Examine strategies for mitigating the effects of chronic stress and trauma on mental health and learning MEH 1.6.12 Summarize why it is important to tell an adult if there are people who are in danger of hurting themselves or others (suicide prevention awareness) MEH 1.7.12 Summarize personal stressors at home, in school, and with friends. MEH 1.8.12 Evaluate effective strategies for dealing with stress. (e.g. avoidance, active problem solving, emotion focused (reframing problem), self-care) MEH 1.9.12 Summarize strategies for coping with loss and grief. MEH 1.10.12 Examine the negative, neutral, and positive effects of technology and social media on mental and emotional health. MEH 1.11.12 Explain the impact of a variety of mental health disorders on behavior (e.g. mood, anxiety, psychotic, and eating disorders) MEH 1.12.12 Differentiate between positive and negative body image. MEH 1.13.12 Summarize impulsive behaviors that can lead to violence and strategies for controlling them. MEH 1.14.12 Identify trusted adults and resources for assistance.

Content	PK-2 Core Content Indicators	3-5 Core Content Indicators	6-8 Core Content Indicators	9-12 Core Content Indicators
Safety and Injury Prevention (SIP)	SIP 1.1.2 State the benefits of riding in the back seat when a passenger in a motor vehicle. SIP 1.2.2 Describe the importance of using safety belts, child safety restraints, and motor vehicle booster seats. SIP 1.3.2 Identify safe behaviors when getting on and off and while riding on a bus. SIP 1.4.2 Identify safety rules for playing on a playground, swimming, and playing sports. SIP 1.5.2 Describe how injuries can be prevented. SIP 1.6.2 Identify safety rules for being around fire. SIP 1.7.2 Describe how to be a safe pedestrian. SIP 1.8.2 Identify safety hazards in the home. SIP 1.9.2 Identify how household products are harmful if ingested or inhaled. SIP 1.10.2 Identify safety hazards in the community. SIP 1.11.2 Identify people who can help when someone is injured or suddenly ill.	SIP 1.1.5 Identify ways to reduce risk of injuries while riding in a motor vehicle. SIP 1.2.5 List examples of dangerous or risky behaviors that might lead to injuries. SIP 1.3.5 Describe how to ride a bike, skateboard, ride a scooter, and/or inline skate safely. SIP 1.4.5 Identify ways to reduce risk of injuries in case of a fire, around water, and from falls. SIP 1.5.5 Identify ways to protect vision or hearing from injury. SIP 1.6.5 Identify ways to reduce injuries from firearms. SIP 1.7.5 Identify ways to reduce injuries as a pedestrian. SIP 1.8.5 Identify safety precautions for playing and working outdoors in different kinds of weather and climates. SIP 1.9.5 List ways to prevent injuries at home, school and community. SIP 1.10.5 Identify ways to reduce risk of injuries from animal and insect bites and stings. SIP 1.11.5 Explain why household products are harmful if ingested or inhaled. SIP 1.12.5 Explain what to do if someone is poisoned or injured and needs help. SIP 1.13.5 Identify equipment needed for protection in sports and recreational activities, such as mouthpieces, pads and helmets. SIP 1.14.5 Explain how hearing can be damaged by loud sounds. SIP 1.15.5 Describe how vision can be damaged SIP 1.16.5 Describe ways to prevent vision or hearing damage. SIP 1.17.5 Describe ways to prevent harmful effects of the sun.	**SIP 1.1.8** Demonstrate how to provide basic **First Aid and CPR** in a variety of emergency situations. **SIP 1.2.8 Define Digital Wellness and its impact on overall health.** SIP 1.3.8 Identify the potential for injury in a variety of situations and environments SIP 1.4.8 Describe ways to reduce risk of injuries while riding in or on a motor vehicle. SIP 1.5.8 Explain the importance of helmets and other safety gear for biking, riding a scooter, skateboarding, and inline skating. SIP 1.6.8 Identify actions to take to prevent injuries during severe weather. SIP 1.7.8 Describe ways to reduce risk of injuries from falls, around water and in case of fire. SIP 1.8.8 Explain climate-related physical conditions that affect personal safety, such as heat exhaustion, sunburn, heat stroke, and hypothermia. SIP 1.9.8 Describe ways to reduce risk of injuries as a pedestrian. SIP 1.10.8 Describe actions to change unsafe situations at home, in school and in the community. SIP 1.11.8 Describe ways to reduce risk of injuries from firearms.	**SIP 1.1.12 Demonstrate** how to provide basic **First Aid and CPR** in a variety of emergency situations. **SIP 1.2.12 Digital Wellness and its impact on overall health.** SIP 1.3.12 Safe Driving (Texting, seat belt) SIP 1.4.12 Unintentional Injury SIP 1.5.12 Summarize ways to reduce the risk of injuries while riding in or driving a motor vehicle. SIP 1.6.12 Summarize the necessary protective gear for biking, motorcycling, snowmobiling, inline skating, riding a scooter, and/or skateboarding. SIP 1.7.12 Prioritize actions to take to prevent injuries during severe weather. SIP 1.8.12 Summarize ways to reduce the risk of injuries from firearms. SIP 1.9.12 Summarize ways to reduce safety hazards in the home, school or in the community. . SIP 1.10.12 Describe actions to take in case of mass trauma. SIP 1.11.12 Explain accepted procedures for basic emergency care and lifesaving. SIP 1.12.12 Summarize personal strategies for reducing hearing damage due to exposure to loud sounds.

Skills-Based PK-12
Health Education Standards 2-8

	PK-2	3-5	6-8	9-12
Standard 2 Analyzing Influences Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.	INF 2.1.2 Identify relevant influences of family, peers, school and community on health practices and behaviors. INF 2.2.2 Identify relevant influences of media and technology on health practices and behaviors. INF 2.3.2 Describe positive and negative influences on personal health practices and behaviors.	INF 2.1.5 Identify and describe influences of peers, family, school, and community on health practices and behaviors. INF 2.2.5 Identify and describe influences of media and technology that affect personal health practices and behaviors.	INF 2.1.8 Explain how perceptions of norms influence healthy and unhealthy practices and behaviors. INF 2.2.8 Explain how personal values and beliefs influence personal health practices and behaviors. INF 2.3.8 Describe how some health risk behaviors influence the likelihood of engaging in other unhealthy behaviors (e.g., how alcohol use influences sexual risk behavior). INF 2.4.8 Analyze how relevant influences of family, peers, culture, school, community, along with media and technology, affect personal health practices and behaviors.	INF 2.1.12 Analyze how peers and perceptions of norms influence healthy and unhealthy behaviors. INF 2.2.12 Analyze how personal attitudes, values, and beliefs influence healthy and unhealthy behaviors. INF 2.3.12 Analyze how some health risk behaviors influence the likelihood of engaging in other unhealthy behaviors. INF 2.4.12 Analyze how laws, rules, and regulations influence health promotion and disease prevention. INF 2.5.12 Analyze the effect of media and technology on personal, family, and community health. INF 2.6.12 Analyze the factors that influence opportunities to obtain safe, accessible, equitable, and affordable products and services that support health practices and behaviors for oneself and others.
Standard 3 Accessing Information Students will demonstrate the ability to access valid information, products, and services to enhance health.	AI 3.1.2 Identify trusted adults at home, school and the community who can help promote health (e.g. parents, adult family members, nurse, counselor, teacher, healthcare provider, police officer, etc.) AI 3.2.2 Explain and/or demonstrate how to locate school and community health helpers (e.g., school nurse, teacher, healthcare provider, police officer, etc.).	AI 3.1.5 Describe characteristics of accurate health information. AI 3.2.5 Describe characteristics of appropriate and reliable health products. AI 3.3.5 Describe characteristics of appropriate and trustworthy health services. AI 3.4.5 Demonstrate how to locate sources of accurate health information.	AI 3.1.8 Analyze the validity and reliability of health information, products and services. AI 3.2.8 Describe situations that call for professional health services. AI 3.3.8 Determine the availability of valid and reliable health products. AI 3.4.8 Access valid and reliable health information from home, school or community.	AI 3.1.12 Evaluate the validity and reliability of health information, products and services. AI 3.2.12 Determine the accessibility of valid and reliable health products and services. AI 3.3.12 Determine when professional health services may be required. AI 3.4.12 Use resources that provide valid and reliable health information, products and services.

Standard 4 Interpersonal Communication	IC 4.1.2 Demonstrate how to effectively communicate needs, wants, and feelings in healthy ways. IC 4.2.2 Demonstrate effective active listening skills including paying attention, and verbal and nonverbal feedback. IC 4.3.2 Demonstrate effective refusal skills including firmly saying "no" and getting away. IC 4.4.2 Demonstrate how to effectively tell a trusted adult when feeling threatened or harmed.	IC 4.1.5 Demonstrate effective verbal and nonverbal communication skills. IC 4.2.5 Demonstrate empathetic, compassionate, and supportive behavior toward others. IC 4.3.5 Demonstrate refusal skills to avoid or reduce health risk. IC 4.4.5 Demonstrate healthy ways to manage or resolve conflict. IC 4.5.5 Demonstrate how to effectively ask for help to improve personal health.	IC 4.1.8 Demonstrate the use of effective verbal and nonverbal communication skills to enhance health. IC 4.2.8 Demonstrate how to manage personal information in electronic communications and when using social media to protect the personal health and safety of oneself and others. IC 4.3.8 Demonstrate effective peer resistance and negotiation skills to avoid or reduce health risks. IC 4.4.8 Demonstrate healthy ways to manage or resolve conflict. IC 4.5.8 Demonstrate how to effectively ask for assistance to improve personal health. IC 4.6.8 Demonstrate how to effectively communicate empathy and support for others.	IC 4.1.12 Demonstrate how to manage personal information in electronic communications and when using social media (e.g., chat groups, e-mail, texting, websites, phone and tablet applications) to protect the personal health and safety of oneself and others. IC 4.2.12 Demonstrate effective peer resistance (refusal skills), negotiation, and collaboration skills to avoid engaging in unhealthy behaviors. IC 4.3.12 Demonstrate effective communication strategies to prevent, manage, or resolve interpersonal conflict. IC 4.4.12 Demonstrate how to effectively ask for assistance to improve personal health. IC 4.5.12 Demonstrate how to effectively offer assistance to improve the health of others.
Standard 5 Decision Making Students will demonstrate the ability to use decision-making skills to enhance health.	DM 5.1.2 Identify situations which need a health-related decision. DM 5.2.2 Identify how family, peers or media influence a health-related decision. DM 5.3.2 Explain the potential positive and negative outcomes from health-related decisions. DM 5.4.2 Describe when help is needed and when it is not needed to make a healthy decision.	DM 5.1.5 Identify situations which need a health-related decision. DM 5.2.5 Decide when help is needed and when it is not needed to make a healthy decision. DM 5.3.5 Explain how family, culture, peers or media influence a health- related decision. DM 5.4.5 Identify options and their potential outcomes when making a health-related decision. DM 5.5.5 Choose a healthy option when making a decision. DM 5.6.5 Describe the final outcome of a health-related decision.	DM 5.1.8 Determine when situations require a health-related decision. DM 5.2.8 Distinguish when health-related decisions should be made individually or with the help of others. DM 5.3.8 Explain how family, culture, media, peers, and personal beliefs affect a health-related decision. DM 5.4.8 Distinguish between healthy and unhealthy alternatives of a health-related decision. DM 5.5.8 Predict the potential outcomes of healthy and unhealthy alternatives to a health-related decision. DM 5.6.8 Choose a healthy alternative when making a health-related decision. DM 5.7.8 Analyze the effectiveness of a final outcome of a health-related decision.	DM 5.1.12 Examine barriers to healthy decision making. DM 5.2.12 Analyze how family, culture, media, peers, and personal beliefs affect a health-related decision. DM 5.3.12 Generate alternatives when making a health-related decision. DM 5.4.12 Predict potential short- and long-term consequences of alternatives to health-related decisions. DM 5.5.12 Choose a healthy alternative when making a health-related decision. DM 5.6.12 Evaluate the effectiveness of health-related decisions.

Standard 6 Goal Setting	GS 6.1.2 Identify a realistic personal short-term health goal.	GS 6.1.5 Set a realistic personal health goal.	GS 6.1.8 Assess the impact and power of embracing a growth mindset in	GS 6.1.12 Assess personal health practices and behaviors.
Students will demonstrate the ability to use goal-setting skills to enhance health.	GS 6.2.2 Take steps to achieve the personal health goal. GS 6.3.2 Identify people who can help achieve a personal health goal.	GS 6.2.5 Track progress toward achieving a personal health goal. GS 6.3.5 Identify resources that can help achieve a personal health goal.	order to determine and reach one's goals GS 6.2.8 Assess personal health practices. GS 6.3.8 Set a realistic personal health goal. GS 6.4.8 Assess the barriers to achieving a personal health goal. GS6.5.8 Apply strategies to overcome barriers to achieving a personal health goal.	GS 6.2.12 Set a realistic personal health goal. GS 6.3.12 Assess the barriers to achieving a personal health goal. GS 6.4.12 Develop a plan to attain a personal health goal. GS 6.5.12 Implement strategies, including self-monitoring, to achieve a personal health goal. GS 6.6.12 Use strategies to overcome barriers to achieving a personal health goal. GS 6.7.12 Formulate an effective long-term plan to achieve a health goal.
Standard 7 Self-Management	SM 7.1.2 Identify practices that reduce or prevent health risks.	SM 7.1.5 Describe practices and behaviors that reduce or prevent health risks.	SM 7.1.8 Explain the importance of being responsible for one's personal health behaviors.	SM 7.1.12 Analyze the role of individual responsibility in enhancing personal health.
Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.	SM 7.2.2 Demonstrate healthy practices.	SM 7.2.5 Demonstrate healthy practices and behaviors. SM 7.3.5 Make a commitment to practice healthy behaviors.	SM 7.2.8 Analyze personal practices and behaviors that reduce or prevent health risks. SM 7.3.8 Demonstrate healthy practices and behaviors to improve the health of oneself and others. SM 7.4.8 Make a commitment to practice healthy behaviors.	SM 7.2.12 Evaluate and assess personal practices and behaviors that reduce or prevent health risks. SM 7.3.12 Demonstrate healthy practices and behaviors to improve the health of oneself and others. SM 7.4.12 Make a commitment to practice healthy behaviors.
Standard 8 Advocacy	AV 8.1.2 Demonstrate how to encourage self and others to make healthy choices.	AV 8.1.5 Give factual information to improve the health of self and others. AV 8.2.5 State personal beliefs to improve the health of self and others.	AV 8.1.8 State a health-enhancing position, supported by accurate information, to improve the health of others.	AV 8.1.12 Use peer and societal norms, based on accurate health information, to formulate health-enhancing messages. AV 8.2.12 Persuade and support others to make positive health choices.
Students will demonstrate the ability to advocate for personal, family, and community health.		AV 8.3.5 Demonstrate how to support self and others to make positive health choices.	AV 8.2.8 Persuade others to make positive health choices. AV 8.3.8 Collaborate with others to advocate for healthy individuals, families and schools. AV 8.4.8 Demonstrate how to adapt positive health-related messages for different audiences.	

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

Appendix A
Connecticut Health Education Laws

C.G.S Section 10-16b: Prescribed courses of study - (a) In the public schools the program of instruction offered shall include at least the following subject matter, as taught by legally qualified teachers, the arts; career education; consumer education; health and safety, including, but not limited to, human growth and development, nutrition, first aid, including cardiopulmonary resuscitation training in accordance with the provisions of section 10-16qq, disease prevention and cancer awareness, including, but not limited to, age and developmentally appropriate instruction in performing self-examinations for the purposes of screening for breast cancer and testicular cancer, community and consumer health, physical, mental and emotional health, including youth suicide prevention, substance abuse prevention, including instruction relating to opioid use and related disorders, safety, which shall include the safe use of social media, as defined in section 9-601, and may include the dangers of gang membership, and accident prevention; language arts, including reading, writing, grammar, speaking and spelling; mathematics; physical education; science, which may include the climate change curriculum described in subsection (d) of this section; social studies, including, but not limited to, citizenship, economics, geography, government, history and Holocaust and genocide education and awareness in accordance with the provisions of section 10- 18f; computer programming instruction; and in addition, on at least the secondary level, one or more world languages and vocational education. For purposes of this subsection, world languages shall include American Sign Language, provided such subject matter is taught by a qualified instructor under the supervision of a teacher who holds a certificate issued by the State Board of Education. For purposes of this subsection, the "arts" means any form of visual or performing arts, which may include, but not be limited to, dance, music, art and theatre.

(b) If a local or regional board of education requires its pupils to take a course in a world language, the parent or guardian of a pupil identified as deaf or hard of hearing may request in writing that such pupil be exempted from such requirement and, if such a request is made, such pupil shall be exempt from such requirement.

(c) Each local and regional board of education shall on September 1, 1982, and annually thereafter at such time and in such manner as the Commissioner of Education shall request, attest to the State Board of Education that such local or regional board of education offers at least the program of instruction required pursuant to this section, and that such program of instruction is planned, ongoing and systematic.

(d) The State Board of Education shall make available curriculum materials and such other materials as may assist local and regional boards of education in developing instructional programs pursuant to this section. The State Board of Education, within available appropriations and utilizing available resource materials, shall assist and encourage local and regional boards of education to include:

(1) Holocaust and genocide education and awareness; (2) the historical events surrounding the Great Famine in Ireland; (3) African- American history; (4) Puerto Rican history; (5) Native American history; (6) personal financial management, including, but not limited to, financial literacy as developed in the plan provided under section 10-16pp; (7) training in cardiopulmonary resuscitation and the use of automatic external defibrillators; (8) labor history and law, including organized labor, the collective bargaining process, existing legal protections in the workplace, the history and economics of free market capitalism and entrepreneurialism, and the role of labor and capitalism in the development of the American and world economies; (9) climate change consistent with the Next Generation Science Standards; (10) topics approved by the state board upon the request of local or regional boards of education as part of the program of instruction offered pursuant to subsection (a) of this section; and (11) instruction relating to the Safe Haven Act, sections 17a-57 to 17a-61, inclusive. The Department of Energy and Environmental Protection shall be available to each local and regional board of education for the development of curriculum on climate change as described in this subsection.

C.G.S. Section 10-16qq: Cardiopulmonary resuscitation instruction – (a) For the school year commencing July 1, 2016, and each school year thereafter, each local and regional board of education shall include cardiopulmonary resuscitation instruction as part of the health and safety curriculum for the school district. Such instruction shall be based on guidelines for emergency cardiovascular care issued by the American Heart Association, and include, but need not be limited to, hands-on training in cardiopulmonary resuscitation.
(b) A local or regional board of education may accept gifts, grants and donations, including, but not limited to, in-kind donations, designated for the purchase of equipment or materials needed to provide cardiopulmonary resuscitation instruction under this section.

C.G.S. Section 10-19: Teaching about alcohol, nicotine or tobacco, drugs and acquired immune deficiency syndrome. Training of

personnel - (a) The knowledge, skills and attitudes required to understand and avoid the effects of alcohol, of nicotine or tobacco and of drugs, as defined in subdivision (17) of section 21a-240, on health, character, citizenship and personality development shall be taught every academic year to pupils in all grades in the public schools; and, in teaching such subjects, textbooks and such other materials as are necessary shall be used. Annually, at such time and in such manner as the Commissioner of Education shall request, each local and regional board of education shall attest to the State Board of Education that all pupils enrolled in its schools have been taught such subjects pursuant to this subsection and in accordance with a planned, ongoing and systematic program of instruction. The content and scheduling of instruction shall be within the discretion of the local or regional board of education. Institutions of higher education approved by the State Board of Education to train teachers shall give instruction on the subjects prescribed in this section and concerning the best methods of teaching the same. The State Board of Education and the Board of Regents for Higher Education in consultation with the Commissioner of Mental Health and Addiction Services and the Commissioner of Public Health shall develop health education or other programs for elementary and secondary schools and for the training of teachers, administrators and guidance personnel with reference to understanding and avoiding the effects of nicotine or tobacco, alcohol and drugs.

(b) Commencing July 1, 1989, each local and regional board of education shall offer during the regular school day planned, ongoing and systematic instruction on acquired immune deficiency syndrome, as taught by legally qualified teachers. The content and scheduling of the instruction shall be within the discretion of the local or regional board of education. Not later than July 1, 1989, each local and regional board of education shall adopt a policy, as the board deems appropriate, concerning the exemption of pupils from such instruction upon written request of the parent or guardian. The State Board of Education shall make materials available to assist local and regional boards of education in developing instruction pursuant to this subsection.

C.G.S. Section 10-221a: High school graduation requirements. Student support and remedial services. Excusal from physical education requirement. Diplomas for certain veterans and certain persons assisting in the war effort during World War II. Student success plans. Connecticut State Seal of Biliteracy - Addresses the new graduation requirements for the incoming freshman class. Students must satisfactorily complete one credit in health and safety education and one credit in physical education and wellness in order to graduate in 2023. Only courses taken in grades nine to twelve, inclusive, and that are in accordance with the
state-wide subject matter content standards, adopted by the State Board of Education pursuant to section 10-4, shall satisfy the graduation requirements. For instance, participation in interscholastic or intramural sports would not meet the requirement for granting high school credit for physical education and wellness.

Public Act 19-91: An Act Concerning Various Revisions and Additions to the Education Statutes (Section 7) - The Department of Education shall update the comprehensive school health education component of the Healthy and Balanced Living Curriculum Framework developed by the department in 2006 to include sexual harassment and assault, adolescent relationship abuse and intimate partner violence, and human trafficking and commercial sexual exploitation.

Public Act 18-185: An Act Concerning the Recommendations of the Task Force on Life-Threatening Food Allergies in Schools
The Department of Education shall update the Healthy and Balanced Living Curriculum Framework, issued by the department in 2006, to include life-threatening food allergies.

C.G.S. Section 17a-101q: State-wide sexual abuse and assault awareness and prevention program - (a) Not later than July 1, 2016, the Department of Children and Families, in collaboration with the Department of Education and Connecticut Alliance to End Sexual Violence, or a similar entity, shall identify or develop a state-wide sexual abuse and assault awareness and prevention program for use by local and regional boards of education. Such program shall be implemented in each local and regional school district and shall include:

(1) For teachers, instructional modules that may include, but not be limited to, (A) training regarding the prevention and identification of, and response to, child sexual abuse and assault, and (B) resources to further student, teacher and parental awareness regarding child sexual abuse and assault and the prevention of such abuse and assault;

(2) For students, age-appropriate educational materials designed for children in grades kindergarten to twelve, inclusive, regarding child sexual abuse and assault awareness and prevention that may include, but not be limited to, (A) the skills to recognize (i) child sexual abuse and assault, (ii) boundary violations and unwanted forms of touching and contact, and (iii) ways offenders groom or desensitize victims, and (B) strategies to (i) promote disclosure, (ii) reduce self-blame, and (iii) mobilize bystanders; and

(3) A uniform child sexual abuse and assault response policy and reporting procedure that may include, but not be limited to, (A) actions that child victims of sexual abuse and assault may take to obtain assistance, (B) intervention and counseling options for child victims of sexual abuse and assault, (C) access to educational resources to enable child victims of sexual abuse and assault to succeed in school, and (D) uniform procedures for reporting instances of child sexual abuse and assault to school staff members.

(b) Not later than October 1, 2016, each local and regional board of education shall implement the sexual abuse and assault awareness and prevention program identified or developed pursuant to subsection (a) of this section.

(c) No student in grades kindergarten to twelve, inclusive, shall be required by any local or regional board of education to participate in the sexual abuse and assault awareness and prevention program offered within the public schools. A written notification to the local or regional board of education by the student's parent or legal guardian shall be sufficient to exempt the student from such program in its entirety or from any portion thereof so specified by the parent or legal guardian.

(d) If a student is exempted from the sexual abuse and assault awareness and prevention program pursuant to subsection (c) of this section, the local or regional board of education shall provide, during the period of time in which the student would otherwise be participating in such program, an opportunity for other study or academic work.

Appendix B: Health Education Evaluation Review

<table>
<tr>
<td colspan="5">Connecticut State Department of Education
Health Education Review
This document is a self-evaluation tool for public school districts to assess inclusion of State Health and Safety education requirements and recommendations</td>
</tr>
<tr>
<td rowspan="2">School Health Education</td>
<td colspan="2">Included</td>
<td>Not Included</td>
</tr>
<tr>
<td>Health and Safety Education Content</td>
<td>Grades Levels</td>
<td>Documentation</td>
<td>Plans to address</td>
</tr>
<tr>
<td colspan="2">C.G.S. Section 10-16b Prescribed Courses of Study.
(c) Each local and regional board of education shall on September 1, 1982, and annually thereafter at such time and in such manner as the Commissioner of Education shall request, attest to the State Board of Education that such local or regional board of education offers at least the program of instruction required pursuant to this section, and that such program of instruction is planned, ongoing and systematic.

Health and Safety Education must be offered in Grades K-12, taught by legally qualified teachers and include, at a minimum:</td>
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<tr>
<td colspan="2">●   Human growth and development</td>
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<td colspan="2">●   Nutrition</td>
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<td colspan="2">●   First aid</td>
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<tr>
<td colspan="2">●   Cardiopulmonary resuscitation training in accordance with Section 10-16qq:
    ○   May include the use of automatic external defibrillators.

Sec. 10-16qq. Cardiopulmonary resuscitation instruction. (a) For the school year commencing July 1, 2016, and each school year thereafter, each local and regional board of education shall include cardiopulmonary resuscitation instruction as part of the health and safety curriculum for the school district. Such instruction shall be based on guidelines for emergency cardiovascular care issued by the American Heart Association, and include, but need not be limited to, hands-on training in cardiopulmonary resuscitation. (b) A local or regional board of education may accept gifts, grants and donations, including, but not limited to, in-kind donations, designated</td>
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for the purchase of equipment or materials needed to provide cardiopulmonary resuscitation instruction under this section.			
● Disease prevention			

● Cancer awareness, including, but not limited to, age and developmentally appropriate instruction in performing self-examinations for the purposes of screening for:
  ○ breast cancer; and
  ○ testicular cancer			

● Community and consumer health			
● Physical, mental, and emotional health			
● Youth suicide prevention			
● Substance abuse prevention, including instruction relating to opioid use and related disorders			

● Safety:
  ○ **must** include safe use of social media (as defined in **section 9-601**); and
  ○ **may** include the dangers of gang membership			

● Accident prevention			

○ **Section 10-16b (d)** - Local and regional boards of education are encouraged to provide instruction relating to the Safe Haven Act, **sections 17a-57 to 17a-61**:
  ○ Sec. 17a-57. Designation of emergency room nursing staff to take physical custody of infant voluntarily surrendered.
  ○ Sec. 17a-58. Physical custody of infant upon voluntary surrender by parent or agent. Mother's surrender of custody of infant in hospital. Medical history. Identification bracelet.
  ○ Sec. 17a-59. Notification of custody. Assumption of care and control by commissioner. Identification of prospective adoptive parent. Limitation on disclosure of parentage.
  ○ Sec. 17a-59a. Definitions. Removal of infant from prospective adoptive parent
  ○ Sec. 17a-59b. Removal of infant. Prospective adoptive parent's right to hearing.
     ○ Regulations
  ○ Sec. 17a-60. Reunification of parent with infant. Genetic testing requirement. Confidentiality of information provided designated employee.
  ○ Sec. 17a-60. Reunification of parent with infant. Genetic testing requirement. Confidentiality of information provided designated employee.
  ○ Sec. 17a-60a. Birth parent contact preference and health history forms. Access by adopted persons and certain other persons			

C.G.S. Section 10-19(a) **Teaching about alcohol, nicotine or tobacco and drugs.** Content shall be taught every academic year to pupils in all grades and include instruction in the knowledge, skills and attitudes required to understand and avoid the effects of:			

● Alcohol use			
● Nicotine or tobacco use			
● Drug use			
C.G.S. Section 10-19(b) Teaching about Acquired Immune Deficiency Syndrome (AIDS/HIV). Instruction must be offered during the regular school day in a planned, ongoing and systematic fashion.			
● Acquired Immune Deficiency Syndrome			
● Parents or legal guardian may exempt their child out of such instruction.			
C.G.S. Section 17a-101q State-wide sexual abuse and assault awareness and prevention program ● The following content are not required to necessarily be delivered in a health and safety education program. School districts must therefore decide where the programs will be implemented: 　○ This Statute requires that a program shall be implemented in each local and regional school district in grades k-12, inclusive, and may include but not be limited to: the skills to recognize child abuse and assault, boundary violations and unwanted forms of touching and contact, ways offenders groom or desensitize victims, strategies to promote disclosure, reduce self-blame, and mobilize bystanders. 　○ Parents or legal guardian may exempt their child from instruction.			

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

Teacher Certification Requirements: Health Education	In Place		Not In Place
	Grade levels	Documentation	Plans to address

● To teach health education at the primary or secondary level requires:
  ○ PK-12 health education teaching certificate endorsement (043); or
  ○ School nurse/teacher certificate endorsement (072)			

● At the primary level (Grades K -6), an elementary teacher may deliver health education, but cannot be the sole provider per Section 10-145d-435(a) of the Certification Regulations			
● Elementary classroom teachers may provide a part of health education instruction, but a certified teacher in health education must also provide a portion			

● At the middle and secondary level (Grades 7 -12), teachers must be:
  ○ Certified in health Education; or
  ○ Hold a school nurse/teacher certificate in order to teach health education			

● Sec. 10-220a. In-service training. Professional development and evaluation committees. Institutes for educators. Cooperating teacher program, regulations. (a) Each local or regional board of education shall provide an in-service training program for its teachers, administrators and pupil personnel who hold the initial educator, provisional educator or professional educator certificate. Such program shall provide such teachers, administrators and pupil personnel with information on (1) the nature and the relationship of alcohol and drugs, as defined in subdivision (17) of section 21a-240, to health and personality development, and procedures for discouraging their abuse, (2) health and mental health risk reduction education that includes, but need not be limited to, the prevention of risk-taking behavior by children and the relationship of such behavior to substance abuse, pregnancy, sexually transmitted diseases, including HIV-infection and AIDS, as defined in section 19a-581, violence, teen dating violence, domestic violence and child abuse, (3) school violence prevention, conflict resolution, the prevention of and response to youth suicide and the identification and prevention of and response to bullying, as defined in subsection (a) of section 10-222d, except that those boards of education that implement any evidence-based model approach that is approved by the Department of Education and is consistent with subsection (c) of section 10-145a, sections 10-222d, 10-222g and 10-222h, subsection (g) of section 10-233c and sections 1 and 3 of public act 08-160*, shall not be required to provide in-service training on the identification and prevention of and response to bullying, (4) cardiopulmonary resuscitation and other emergency lifesaving procedures, (5) the requirements and obligations of a mandated reporter, and (6) the detection and recognition of, and evidence-based structured literacy interventions for, students with dyslexia, as defined in section 10-3d. Each local or regional board of education may allow any paraprofessional or non-certified employee to participate, on a voluntary basis, in any in-service training program provided pursuant to this section.			

Implementation	In Place		Not In Place
	Grade Levels	**Documentation**	**Plans to address**
● An **ongoing program** ensures continuity with learning objectives that evolve from one grade, or group of grades, to the next.			
● A **systematic planned program** ensures that implementation is equitable for each specific grade, or group of grades, or course, e.g., all third-grade students receive instruction for the same agreed upon learning objectives in every third-grade classroom in every school within the district			
● The Connecticut State Department of Education developed three curriculum framework documents that provide guidance to school districts on content standards and performance indicators that define what students should know and be able to do in grades pk-12. The *Healthy and Balanced Living Curriculum Framework* (health education standards), the *Sexual Health Education Component of Comprehensive Health Education* and the *Sexual Assault and Sexual Abuse Awareness and Prevention Guidelines* are documents based on national standards and are available to local districts. The program utilizes the CSDE recommended publications.			

Quality Instruction	In Place		Not In Place
	Grade levels	**Documentation**	**Plans to address**
Is comprehensive school health education consistently offered across the grade levels and district-wide?			
Is professional development offered to teachers, administrators, and health and mental health professionals and other appropriate staff?			
Are adequate time, materials and supplies provided for the delivery of instruction?			
Are certified, effective, and highly qualified teachers delivering comprehensive school health education?			
Are materials up-to-date and medically and scientifically accurate?			

Do the data support the effectiveness of the program? What sources are used to define educational priorities? (STD, teen birth rates, etc.)			
Does the program involve parents/guardians and community members?			

Appendix C
*Recommended Instructional Time for Health and Safety; Alcohol, Tobacco,
Nicotine and other Drugs; HIV/AIDS; and Sexual Health Education by Grade Level

	Grade Sequence					
Content Area	**PK-2**	**3-4**	**5-6**	**7-8**	**9-10**	**11-12**
CGS 10-16b Health and Safety (Inclusive of alcohol, tobacco and other drugs and HIV/AIDS education)	Minimum of 40 hours per academic year	Minimum of 80 hours per academic year	Minimum of 80 hours per academic year	Minimum of 80 hours per academic year	Minimum of 80 hours per academic year	Minimum of 80 hours per academic year
CGS 10-19(a) Alcohol, Nicotine or Tobacco and Other Drugs (taught within the health and safety block)	5-10 hours per academic year	5-10 hours per academic year	10-15 hours per academic year	10-15 hours per academic year	10-15 hours per academic year	10-15 hours per academic year
CGS 10-19(b) HIV/AIDS (taught within the health and safety block)	3-5 hours per grade sequence	3-5 hours per grade sequence	3-5 hours per grade sequence	3-5 hours per grade sequence	3-5 hours per grade sequence	3-5 hours per grade sequence
Sexual Health Education	12 hours per grade sequence	12 hours per grade sequence	12 hours per grade sequence	12 hours per grade sequence	12 hours per grade sequence	12 hours per grade sequence

*Note:
"Adequate instructional time is necessary for learning to take place. It is essential to master health education concepts and skills as outlined in the NHES grade span standards and indicators. After 10 years of implementation and assessment of the original NHES and examination of a variety of studies, it is recommended that students in Pre-K to grade 2 receive a *minimum* of 40 hours and students in grades 3 to 12 receive 80 hours of instruction in health education per academic year." (National Health Education Standards, 2006, p. 63).

Instructional Requirements Adequate instructional time is vital for learning and supports the adoption and maintenance of healthy behaviors.[6,13] The National Academy of Medicine (formerly the Institute of Medicine) has recommended that schools require a one-semester course in secondary school,[9] but the benefits of health education increase when students receive at least three years of a health curriculum.[10] As such, the NHES recommends that students in pre-kindergarten through grade 2 receive 40 hours of instruction in health education per year and students in grades 3 through 12 receive 80 hours of instruction per academic year.[11] The importance of adequate instructional time in health education is articulated in a Healthy People 2020[12] subobjective, under Early and Middle Childhood (EMC): • EMC-4.3: "Increase the proportion of schools that require cumulative instruction in health education that meet the U.S. National Health Education Standards for elementary, middle, and senior high schools."
(https://www.cdc.gov/healthyyouth/data/profiles/pdf/2018/CDC-Profiles-2018.pdf)

Appendix D

CASEL Five Core Competencies
1. Self-awareness: Know your strengths and limitations, with a well-grounded sense of confidence, optimism, and a growth mindset. 2. Self-management: Effectively manage stress, control impulses, and motivate yourself to set and achieve goals. 3. Social awareness: Understand the perspectives of others and empathize with them, including those from diverse backgrounds and cultures. 4. Relationship skills: Communicate clearly, listen well, cooperate with others, resist inappropriate social pressure, negotiate conflict constructively, and seek and offer help when needed. 5. Responsible decision-making: Make constructive choices about personal behavior and social interactions based on ethical standards, safety, and social norms" (CASEL, 2019, https://casel.org/what-is-sel/).

Alignment of Social Emotional Competencies (CASEL, 2019) with Health Education and Physical Education Standards		
Health Education Standards	**SEL Competencies**	**Physical Education Standards**
● **Standard 2 Analyzing Influences -** Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors ● **Standard 3 Accessing Information -** Students will demonstrate the ability to access valid information, products, and services to enhance health ● **Standard 7 Self-management -** Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks ● **Standard 8 Advocacy -** Students will demonstrate the ability to advocate for personal, family, and community health	1. **Self-awareness:** Know your strengths and limitations, with a well-grounded sense of confidence, optimism, and a "growth mindset"	● **Standard 4 -** The physically literate individual exhibits responsible personal and social behavior that respects self and others ● **Standard 5 -** The physically literate individual recognizes the value of physical activity for health, enjoyment, challenge, self-expression and/or social interaction

• **Standard 6 Goal Setting -** Students will demonstrate the ability to use goal setting skills to enhance health • **Standard 7 Self-management -** Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks	**2. Self-management:** Effectively manage stress, control impulses, and motivate yourself to set and achieve goals	• **Standard 2 -** The physically literate individual applies knowledge of concepts, principles, strategies and tactics related to movement and performance • **Standard 3 -** The physically literate individual demonstrates the knowledge and skills to achieve and maintain a health-enhancing level of physical activity and fitness • **Standard 4 -** The physically literate individual exhibits responsible personal and social behavior that respects self and others
• **Standard 2 Analyzing Influences -** Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors • **Standard 3 Accessing Information -** Students will demonstrate the ability to access valid information, products, and services to enhance health • **Standard 4 Interpersonal Communication -** Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks • **Standard 8 Advocacy -** Students will demonstrate the ability to advocate for personal, family, and community health	**3. Social awareness:** Understand the perspectives of others and empathize with them, including those from diverse backgrounds and cultures	• **Standard 4 -** The physically literate individual exhibits responsible personal and social behavior that respects self and others
• **Standard 2 Analyzing Influences -** Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors • **Standard 4 Interpersonal Communication -** Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks • **Standard 5 Decision Making -** Students will demonstrate the ability to use decision-making skills to enhance health • **Standard 8 Advocacy -** Students will demonstrate the ability to advocate for personal, family, and community health	**4. Relationship skills:** Communicate clearly, listen well, cooperate with others, resist inappropriate social pressure, negotiate conflict constructively, and seek and offer help when needed	• **Standard 4 -** The physically literate individual exhibits responsible personal and social behavior that respects self and others • **Standard 5 -** The physically literate individual recognizes the value of physical activity for health, enjoyment, challenge, self-expression and/or social interaction

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

● **Standard 2 Analyzing Influences -** Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors	**5. Responsible decision-making:** Make constructive choices about personal	● **Standard 2 -** The physically literate individual applies knowledge of concepts, principles, strategies and tactics related to movement and performance
● **Standard 5 Decision Making -** Students will demonstrate the ability to use decision-making skills to enhance health ● **Standard 6 Goal Setting -** Students will demonstrate the ability to use goal setting skills to enhance health ● **Standard 7 Self-management -** Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks ● **Standard 8 Advocacy -** Students will demonstrate the ability to advocate for personal, family, and community health	behavior and social interactions based on ethical standards, safety, and social norms"	● **Standard 3 -** The physically literate individual demonstrates the knowledge and skills to achieve and maintain a health-enhancing level of physical activity and fitness ● **Standard 4 -** The physically literate individual exhibits responsible personal and social behavior that respects self and others

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

Appendix E
References

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This Glossary of terms and definitions is intended to assist those teaching health education or those involved in designing PK-grade 12 comprehensive health education curricula and lesson plans. Though not all inclusive, this list provides users with an overview of key terms and definitions reflected in this document.

Attitudes
Positive or negative evaluations that one has toward other people, objects, concepts, activities, behaviors, events, trends, or other observations and occurrences. People who have a "positive" attitude toward some behavior are more likely to engage in that behavior. People who have a "negative" attitude about a behavior are less likely to engage in that behavior (HECAT).

Adolescence
A transitional phase of growth and development between childhood and adulthood that generally occurs during the period from puberty to legal adulthood (age of majority). The World Health Organization (WHO) defines an adolescent as any person ages 10 to 19. This age range falls within WHO's definition of young people, which refers to individuals ages 10 and 24.

Age Appropriate
The age level at which it is suitable to teach concepts, information, and skills based on the social, cognitive, emotional, and experience level of most students in that age range.

AIDS (Acquired Immune Deficiency Syndrome)
A collection of symptoms that results from a person's immune system being severely weakened, making them susceptible to other infections and illnesses. AIDS is caused by the human immunodeficiency virus (HIV) and may occur if HIV is untreated. People do not die from AIDS but from an infection their body acquires as a result of their weakened immune system. (See also HIV.)

Body Image
How people physically experience or feel in their own body, including beliefs about their appearance, which is influenced by life experiences, media representations, stereotypes, assumptions, and generalizations. This may or may not match a person's actual appearance.

Bullying
Physically, mentally, and/or emotionally intimidating and/or harming an individual or members of a group. These actions are done repeatedly in-person, through technology, and/or through social exclusion with the intent of being hurtful or threatening.

Communicable disease
An infectious disease transmissible (as from person to person) by direct contact with an infected individual or the individual's discharges or by indirect means. (Merriam Webster Dictionary)

Comprehensive Health Education Curriculum
A set of instructional strategies and learning experiences, for students in pre-kindergarten through grade 12, that provides multiple opportunities to acquire the knowledge, attitudes, and skills required to make health-promoting decisions, achieve health literacy, adopt health-enhancing behaviors, and promote the health of others. A comprehensive curriculum is one that is broad in scope and content and addresses numerous health problems, issues, or topics. (HECAT)

Comprehensive Sexual Health Education
Programs that build a foundation of knowledge and skills relating to human development, relationships, decision making, abstinence, contraception, and disease prevention. Ideally, school-based comprehensive sex education should at least start in PK-and continue through 12th grade. At each developmental stage, these programs teach age-appropriate, medically accurate, and culturally responsive information that builds on the knowledge and skills that were taught in the previous stage.

Consent
Informed, voluntary, and mutual agreement between people to engage in an activity. Consent cannot be given when an individual does not have the capacity or legal ability to consent (e.g., legally considered a minor, intoxicated by alcohol or other substances, other conditions that affect one's ability to understand and/or agree to engage in a behavior). An example of sexual consent is an agreement that occurs between sexual partners about the behaviors they both give permission to engage in during a sexual encounter. Consent can be given by words or actions, as long as those words or actions create clear permission regarding willingness to engage in the sexual behavior. This may also be referred to as affirmative consent.

Contraception
Any means used to reduce the risk of pregnancy, including, but not limited to, abstinence, barrier methods (e.g., external condoms and internal condoms), hormonal methods (e.g., pill, patch, injection, implant, IUD, and ring), and other nonhormonal methods (e.g., sterilization and nonhormonal IUDs). Contraceptive methods may also be known as birth control methods, though the former is the preferred term.

Cultural Competence

Teaching that relates to, recognizes, and includes aspects of students' ethnic culture, race, socio-economic status, gender, gender identity, gender expression, sexual orientation, sexual identity, sexual experience, ability, faith, educational status, physical appearance and/or youth popular culture.

Dating Violence

Controlling, abusive, and/or aggressive behavior within the context of a romantic and/or sexual relationship. It can include verbal, physical, sexual, emotional, economic, and/or psychological abuse, be perpetrated against someone of any gender, and happen in any relationship regardless of sexual orientation.

Developmentally-appropriate

Curriculum materials that are consistent with an individual's cognitive, mental, emotional, moral, and social development. (HECAT)

Digital Wellness

Refers to the use of information and communications technologies in medicine and other health professions. Digital health has a broad scope and includes the use of wearable devices, mobile health, telehealth, health information technology and telemedicine. (NIH) https://www.ncbi.nlm.nih.gov/books/NBK470260/

Disease Prevention

The processes of avoiding, preventing, reducing, or alleviating disease to promote, preserve, and restore health and minimize suffering and distress. (HECAT)

Disordered eating

Covers a broad range of conditions, including anorexia, bulimia and binge eating disorder. https://health.clevelandclinic.org/how-to- recognize-the-warnings-signs-of-disordered-eating-and-what-to-do/

Disproportionate Risk

The phenomena of a person being at higher risk than generally predicted because of the systemic inequities and oppression they face as a result of certain characteristics, especially race, ethnicity, socio-economic status, gender, gender identity, gender expression, sexual orientation, sexual identity, sexual experience, ability, faith, and/or educational status.

Diversity

The differences among groups of people and individuals based on factors such as ethnicity, race, socioeconomic status, gender, language, age, culture, religion, sexual orientation, and geographical area. (HECAT).

Domestic Violence

A pattern of abusive behavior in a relationship by one individual to gain or maintain control over another individual, if those individuals live in the same domestic setting. This may include verbal, physical, sexual, emotional, economic, and/or psychological abuse as well as control, intimidation, threats and/or stalking. It can happen to individuals who are married, living together, dating, or sexual or intimate partners, as well as to children and other family members, regardless of socio-economic background, race, age, sexual orientation, religion, gender, or gender identity.

Evidence-based programs

Programs or interventions supported by credible scientific studies that find associated decreases in risk behaviors (e.g., delay in alcohol use, increase consumption of fruits and vegetables, delay sexual initiation or increase condom-use) or adverse health outcomes (e.g., violence, alcohol-related motor vehicle accidents, HIV or other STD transmission). (HECAT)

Exploited

Used for someone's advantage; especially, of a person: unfairly or meanly used for another's advantage (Merriam-Webster)

Functional Knowledge

Important concepts and information necessary to improve health-enhancing decisions, beliefs, skills, and practices as opposed to information that does not help to improve health decisions, beliefs, skills or practices. Examples of functional information include accurate information about risks of health-related behaviors, internal and external influences on health-risk behaviors, and socially normative behaviors. (HECAT)

Harassment

Unwelcome or offensive behavior by one person to another that can be sexual or nonsexual in nature. Examples include making unwanted sexual comments or jokes to another person, sending unwanted sexual texts, sexual gestures, bullying, or intimidation.

Health

A state of complete physical, social, and mental well-being, and not merely the absence of disease or infirmity; a functional state which allows a person to achieve goals and activities for a healthy life. (HECAT).

Health Education Curriculum
 A set of instructional strategies and learning experiences that provide students with opportunities to acquire the attitudes, knowledge, and skills necessary for making health promoting decisions, achieving health literacy, adopting health-enhancing behaviors, understanding factors that impact or influence health equity, and promoting the health of others. A health education curriculum should have:
> • A set of intended learning outcomes or learning objectives that are directly related to students' acquisition of health-related knowledge, attitude, and skills.
> • A planned progression of developmentally appropriate lessons or learning experiences that lead to achieving these objectives.
> • Continuity between lessons or learning experiences that clearly reinforce the adoption and maintenance of specific health-enhancing behaviors.
> • Accompanying content or materials that correspond with the sequence of learning events and help teachers and students meet the learning objectives.
> • Assessment strategies to determine if students achieved the desired learning. Health Instruction: The process, including delivery of lessons, facilitation of learning, directing of activities and learning events and other components of the classroom experience, designed to provide an opportunity for students to acquire developmentally appropriate health knowledge and attitudes and improve health-enhancing skills and behaviors (HECAT).

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 (HECAT).

Health Equity
Ensuring that everyone has a fair and just opportunity to achieve and maintain optimal health. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and culturally informed healthcare practices and practitioners.

Healthy Relationships
A relationship between individuals that consists of mutual respect, trust, honesty, support, equity, fairness , separate and/or group identities, physical and emotional safety, and good communication.

HIV (Human Immunodeficiency Virus)
A virus that, if left untreated, can weaken a person's immune system so that the person cannot fight off many everyday infections. HIV can be transmitted through exposure to the blood, semen, vaginal fluid, or breast milk of a person living with HIV. HIV medicine (called antiretroviral therapy or ART) can make the viral load of the person living with HIV so low that a test cannot detect it (called an undetectable viral load). When "undetectable status" is achieved and sustained, HIV becomes untransmittable. HIV, if left untreated, may lead to AIDS. (See also AIDS and Undetectable Viral Load.)

Interpersonal Violence
Violence between individuals that is subdivided into domestic and intimate partner violence and community violence. The former category includes child maltreatment; dating violence, intimate partner violence; and elder abuse, while the latter is broken down into acquaintance and stranger violence and includes youth violence; assault by strangers; violence related to property crimes; and violence in workplaces and other institutions. Interpersonal violence includes sexual violence. (See also Dating Violence, Domestic Violence, Intimate Partner Violence, and Sexual Violence.)

Intimate Partner Violence
Physical, sexual, and/or emotional abuse, violence, or aggression that occurs in a close relationship. It includes threats of violence and coercion and can include verbal, physical, sexual, emotional, economic, and/or psychological abuse, and violation of individual rights. Intimate partner violence is defined by abusive behavior and can occur in all types of intimate relationships regardless of gender identity or sexual orientation and does not require sexual intimacy. (See also Intimate Partner Violence and Sexual Violence.)

Medically Accurate
Information relevant to informed decision-making based on the weight of scientific evidence; consistent with generally recognized scientific theory; conducted under accepted scientific methods; published in mainstream peer reviewed journals; or recognized as accurate, objective and complete by mainstream professional organizations and scientific advisory groups.

Puberty
A stage of human biological development during which adolescents become sexually mature and capable of reproduction. This occurs when the pituitary gland triggers production of testosterone, estrogen, and/or progesterone resulting in physical and emotional changes. Physical changes may include hair growth around the genitals, menstruation, sperm production, breast growth, and much more.

Rape
A type of sexual assault that involves vaginal, anal, or oral sex using a body part or an object without consent. Rape is a form of sexual assault, but not all sexual assault is rape. (See also Consent and Sexual Assault.)

Resiliency
the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress — such as family and relationship problems, serious health problems, or workplace and financial stressors. (APA) https://www.apa.org/topics/resilience

Self-Concept
An individual's attitudes, beliefs, opinions, and cognitions about who they are as a person. (National Sex Education Standards: Core Content and Skills, K–12 (Second Edition))

Self-Esteem

A person's overall opinion of themselves and how they feel about their abilities and limitations. For example, high self-esteem may result in someone feeling good about themselves whereas someone with low self-esteem may place little value on their own opinions and ideas.

Sex Trafficking

The recruitment, transportation, transfer, harboring, provision, or obtaining of an individual who under threat, force, coercion, fraud, deception, or abuse of power is sexually exploited for the financial gain of another. Considered a form of modern-day slavery, it does not have to have some form of travel, transportation, or movement across borders. For minors, consent is irrelevant, and the element of means (e.g., force) is not necessary.

Sexism

Discrimination or prejudice against people based on their sex, gender, and/or perceived characteristics thereof.

Sexting

The sending of sexually explicit messages or images by cell phone (Merriam-Webster)

Sexual Abuse

Any sort of unwanted sexual contact, including but not limited to, force, threats, or taking advantage of an individual, often over a period of time. A single act of sexual abuse is usually referred to as a "sexual assault." (See also Sexual Assault.)

Sexual Assault

Any unwanted sex act committed by a person or people against another person. Examples include, but are not limited to: nonconsensual kissing, groping or fondling, attempted rape, forcing someone to perform a sexual act, and rape.

Sexual Exploitation

Actual or attempted abuse of a position of vulnerability, power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially, or politically from the sexual misuse of another. Sexual exploitation is a type of sexual abuse and can happen in person or online. (See also Sexual Abuse.)

Sexual Harassment

Unwelcome sexual advances, requests for sexual favors, and other unwanted verbal or physical conduct of a sexual nature.

Sexual Identity

A person's self-identity based on their understanding of and/or ability to outwardly express their sexual orientation and/or gender identity. Sexual identity evolves through a developmental process that varies depending on the individual. Issues such a religion, culture, one's family values, etc. may impact a person's sexual identity. No one else can determine what a person's sexual identity is; only the individual can decide what identity

is right for them. (See also Sexual Orientation.)

Sexual Intercourse
Sexual intercourse may mean different things to different people, but could include behaviors such as vaginal sex, oral sex, or anal sex. (See also Anal Sex, Oral Sex, and Vaginal Sex)

Sexual Orientation
A person's romantic, emotional and/or sexual attraction to other people. Sexual orientations include, but are not limited to, asexual, bisexual, gay, heterosexual, lesbian, pansexual, and queer. (See also Asexual, Bisexual, Gay, Heterosexual, Lesbian, Pansexual, and Queer.)

Sexual Violence
An all-encompassing, non-legal term that refers to any completed or attempted sexual act that occurs when consent is not obtained or not freely given. It includes sexual assault, rape, sexual abuse, domestic violence, dating violence, and intimate partner violence.

Sexually Transmitted Diseases (STDs)
Common infections caused by bacteria, viruses, or parasites that are transmitted from one person who has the infection to another during sexual contact that involves exchange of fluids or skin-to-skin contact. STDs are often referred to as sexually transmitted infections or STIs in an effort to clarify that not all sexually transmitted infections turn into a disease.

Social and emotional learning (SEL)
The process through which children and adults understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions. (CASEL, https://casel.org/what-is- sel/)

Tier 1

Core curricula, instruction, programs, and services that provide a foundation for all students.
https://portal.ct.gov//media/SDE/Publications/edguide/srbi_full_document.pdf?la=en

Transgender

A person whose gender identity and/or expression is not aligned with the sex they were assigned at birth. Transgender is often used as an umbrella term encompassing a large number of identities related to gender nonconformity. (See also Gender Nonconforming.)

Trusted Adult

A person to whom a student can turn to in a time of need who can offer support and guidance.

Values

Principles, standards, or qualities regarded as worthwhile or desirable. (HECAT).

References

- Future of Sex Education Initiative. (2020). National Sex Education Standards: Core Content and Skills, K-12 (Second Edition)
- Other sources as noted:
- Health Education Curriculum Analysis Tool HECAT
- CASEL, https://casel.org/what-is-sel/
- Merriam-Webster Dictionary

Appendix G: Resources

Advocates for Youth
https://advocatesforyouth.org/issue/growth-and-development/

Rights, Respect, Responsibility Sexual Health Education Curriculum
https://3rs.org/3rscurriculum/

CASEL Social and Emotional Learning
https://casel.org/guide/

Centers for Disease Control and Prevention (CDC)

Characteristics of Effective Health Education Curriculum
https://www.cdc.gov/healthyschools/sher/characteristics/index.htm

National Health Education Standards
https://www.cdc.gov/healthyschools/sher/standards/index.htm

Division of Adolescent and School Health
https://www.cdc.gov/healthyyouth/about/index.htm

Healthy Schools
https://www.cdc.gov/healthyschools/

Health Education Curriculum Analysis Tool
https://www.cdc.gov/healthyyouth/hecat/index.htm
https://www.cdc.gov/healthyyouth/tools/index.htm

YRBS Data
https://www.cdc.gov/healthyyouth/data/index.htm

Connecticut State Department of Education

https://portal.ct.gov/SDE/Health-Education/Comprehensive-School-Health-Education
https://portal.ct.gov/SDE/Health-Education/Comprehensive-School-Health-Education/Documents
https://portal.ct.gov/SDE/Publications/Statewide-K12--Sexual-Assault-Abuse--Prevention-Awareness--Program-Guidelines/Section- 1-Overview-of-Sexual-Violence
https://portal.ct.gov/SDE/Publications/Sexual-Health-Education-Component-of-Comprehensive-Health-Education
https://portal.ct.gov/-/media/SDE/Health-Education/sec1sh.pdf
https://portal.ct.gov/-/media/SDE/Health-Education/curguide_generic.pdf

Connecticut Department of Public Health

Connecticut School Health Survey
www.ct.gov/dph/cshs

Planned Parenthood
https://www.plannedparenthood.org/learn/for-educators/what-sex-education

SHAPE America
SHAPE America. (2015). Appropriate practices in school-based health education. [Guidance document]. Reston, VA: Author.

U.S. Department of Agriculture
https://www.choosemyplate.gov/eathealthy/WhatIsMyPlate) Dietary Guidelines for Americans 2015-2020 Eight Edition

**Connecticut State Department of Education Healthy
and Balanced Living Curriculum Framework**

Physical Education Section

Table of Contents

- Introduction to Physical Education Curriculum Framework
- Acknowledgements
- Crosswalk for National K-12 Physical Education Standards and CASEL'S Core Competencies of Social and Emotional Learning
- Physical Education Standards, Indicators, and Competencies
- Appendix A - Connecticut Physical Education Laws
- Appendix B - References
- Appendix C – Acronyms
- Appendix D - Glossary of Terms
- Appendix E - Resources

Introduction to
Physical Education Curriculum Framework

The purpose of Physical Education is to support the development of physically literate students who possess the knowledge and skills necessary to engage in a lifetime of health-enhancing physical activity. The Connecticut State Department of Education's (CSDE) 2021 Physical Education Curriculum Framework provides districts with a foundation for implementing standards-based, age- appropriate instruction for each student. It reflects the 5 National Standards for Physical Education adopted by SHAPE America (the Society of Health and Physical Educators) in 2014. These 5 Standards reflect scope and sequencing from one grade level to the next, by topics, and by one or more specific grade-level outcomes.

The 2021 Physical Education Curriculum Framework defines what a student should know and be able to do as a result of highly effective physical education programs. Local school districts across the state can use the 5 Standards to develop or revise existing curricula.

The goal of a planned, sequential K-12 physical education program is to provide psychomotor, cognitive and affective content and learning experiences that promote optimum personal development. Therefore, quality curriculum and instruction, provided in a safe and supportive environment, may offer meaningful, challenging learning for students and assist them in developing plans for and engaging in lifetime physical activity and wellness.

Educational equity demands commitment to promoting optimal personal development for all students, including students with physical or cognitive disabilities. Innovative programming in Adaptive Physical Education and Unified Physical Education accommodates the needs of these students by prescriptively adjusting time, space, equipment and/or organizational factors within instruction so that students have opportunities to achieve success without compromising fidelity to the standards articulated in this framework.

The COVID pandemic of 2020 ushered in a new brand of Physical Education by necessity; one that exponentially increased the rigor of PE instruction through the use of audiovisual technology. The utilization of innovative fitness/nutrition/physical activity apps and tutorials via smartboards and other devices in PE as instructional delivery systems and/or enrichment resources is still in its infancy, but growing. An appropriate balance of technology use provides valuable tools with which to bring the standards of this framework into clear focus for all.

Physical Education Academic Learning Standards

Standard 1: The physically literate individual demonstrates competency in a variety of motor skills and movement patterns.

Standard 2: The physically literate individual applies knowledge of concepts, principles, strategies and tactics related to movement and performance.

Standard 3: The physically literate individual demonstrates the knowledge and skills to achieve and maintain a health-enhancing level of physical activity and fitness.

Standard 4: The physically literate individual exhibits responsible personal and social behavior that respects self and others.

Standard 5: The physically literate individual recognizes the value of physical activity for health, enjoyment, challenge, self- expression, and/or social interaction.

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Numerous professionals contributed to the revision of the 2021 Healthy and Balanced Living Curriculum Framework. It was through their leadership, hard work, dedication, and persistence that this document has become a dynamic resource to address and promote the health and wellness of students in Connecticut.

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- Joseph Gorman – Waterbury Public Schools
- Marybeth Fede – Southern CT State University

Crosswalk between Physical Education Academic Learning Standards and
CASEL'S Core Competencies of Social and Emotional Learning (SEL)

Physical Education is an ideal course to build and nurture students' social and emotional skills. By drawing connections between CASEL's core competencies and the Physical Education Academic Learning Standards, physical educators can provide effective reinforcement of SEL through physical activity.

SEL Competencies	Physical Education Academic Learning Standards
Self-awareness: The ability to accurately recognize one's own emotions, thoughts, and values and how they influence behavior. The ability to accurately assess one's strengths and limitations, with a well-grounded sense of confidence, optimism, and a "growth mindset."	**Standard 4:** The physically literate individual exhibits responsible personal and social behavior that respects self and others. **Standard 5:** The physically literate individual recognizes the value of physical activity for health, enjoyment, challenge, self-expression, and/or social interaction
Self-management: The ability to successfully regulate one's emotions, thoughts and behaviors in different situations — effectively managing stress, controlling impulses, and motivating oneself. The ability to set and work toward personal and academic goals.	**Standard 2:** The physically literate individual applies knowledge of concepts, principles, strategies and tactics related to movement and performance **Standard 3:** The physically literate individual demonstrates the knowledge and skills to achieve and maintain a health-enhancing level of physical activity and fitness **Standard 4:** The physically literate individual exhibits responsible personal and social behavior that respects self and others
Social awareness: The ability to take the perspective of and empathize with others, including those from diverse backgrounds and cultures. The ability to understand social and ethical norms for behavior and to recognize family, school and community resources and supports.	**Standard 4:** The physically literate individual exhibits responsible personal and social behavior that respects self and others
Relationship skills: The ability to establish and maintain healthy and rewarding relationships with diverse individuals and groups. The ability to communicate clearly, listen well, cooperate with others, resist inappropriate social pressure, negotiate conflict constructively and seek and offer help when needed.	**Standard 4:** The physically literate individual exhibits responsible personal and social behavior that respects self and others **Standard 5:** The physically literate individual recognizes the value of physical activity for health, enjoyment, challenge, self-expression, and/or social interaction

Responsible decision-making: The ability to make constructive choices about personal behavior and social interactions based on ethical standards, safety concerns and social norms. The realistic evaluation of consequences of various actions, and a consideration of the well-being of oneself and others.	**Standard 2:** The physically literate individual applies knowledge of concepts, principles, strategies, and tactics related to movement and performance **Standard 3:** The physically literate individual demonstrates the knowledge and skills to achieve and maintain a health-enhancing level of physical activity and fitness **Standard 4:** The physically literate individual exhibits responsible personal and social behavior that respects self and others

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

2021 Physical Education Standards, Indicators, and Competencies

Elementary Grade- Level Outcomes

By the end of Grade 5, the learner will:
- o   Demonstrate competence in fundamental motor skills and selected combinations of skills
- o   Use basic movement concepts in dance, gymnastics and small-sided practice tasks
- o   Identify basic health-related fitness concepts
- o   Exhibit acceptance of self and others in physical activities
- o   Identify the benefits of a physically active lifestyle.

Note: Swimming skills and water-safety activities should be taught if facilities permit.

Standard 1: *Students will demonstrate competency in a variety of motor skills and movement patterns.*

	Kindergarten	**Grade 1**	**Grade 2**	**Grade 3**	**Grade 4**	**Grade 5**
Locomotor						
S1.E1 Jumping, hopping, galloping, running, sliding, skipping and leaping	Demonstrates locomotor skills (jumping, hopping, galloping, running, sliding, skipping) while maintaining control and balance. (E1.1.K)	Demonstrates hopping, galloping, running and sliding using a mature pattern. (E1.1.1)	Demonstrates skipping using a mature pattern. (E1.1.2)	Demonstrates leaping using a mature pattern. (E1.1.3)	Demonstrates a combination of locomotor skills to participate in a variety of developmentally appropriate movement and fitness activities (E1.1.4)	Demonstrates mature patterns of locomotor skills in dynamic developmentally appropriate movement and fitness activities (E1.1.5)
Non-Locomotor						
Curling, stretching, twisting and bending	Demonstrates emerging patterns in a variety of non- locomotor skills	Demonstrates mature patterns in a variety of non- locomotor skills	Demonstrates a variety of non- locomotor skills (curling, stretching, twisting and	Demonstrates mature patterns in a variety of non-locomotor skills (curling,	Demonstrates mature patterns in applying non- locomotor skills (curling,	Demonstrates competence in applying basic non-locomotor

	(curling, stretching, twisting and bending). (E1.2.K)	(curling, stretching, twisting and bending). (E1.2.1)	bending) transitioning from one skill to another. (E1.2.2)	stretching, twisting and bending) while combining levels, extensions, force and flow. (E1.2.3)	stretching, twisting and bending) to modified games, developmentally appropriate tasks, activities, creative movement, dance and play. (E1.2.4)	skills in the execution of more complex skills within modified games, developmentally appropriate tasks, activities, creative movement and dance. (E1.2.5)
Balance	Demonstrates stationary balance on different bases of support. (E1.3.K)	Demonstrates a variety of non- locomotor skills (curling, stretching, twisting and bending) while maintaining balance. (E1.3.1)	Demonstrates a variety of non-locomotor skills (curling, stretching, twisting and bending) while maintaining balance on different bases of support and combining levels. (E1.3.2)	Demonstrates mature patterns in a variety of non-locomotor skills (curling, stretching, twisting, and bending) while maintaining stationary and dynamic balance during developmentally appropriate tasks, activities, creative movement, and dance. (E1.3.3)	Demonstrates mature patterns in a variety of non-locomotor skills (curling, stretching, twisting, and bending) while maintaining stationary and dynamic balance during developmentally appropriate tasks, activities, creative movement, and dance. (E1.3.4)	Demonstrates competence in applying basic non-locomotor skills while maintaining stationary and dynamic balance in a variety of modified games, and small sided game play. (E1.3.5)
Weight transfer	*Developmentally appropriate/*	Demonstrates weight transfer from one body part to	Demonstrates weight transfer from feet	Demonstrates weight transfer in combination	Demonstrates weight transfer in combination with	Demonstrates competence in applying weight

	emerging outcomes in weight transfer first appear in grade 1.	another in personal space. (E1.4.1)	to different bases of support while maintaining balance. (E1.4.2)	with movement concepts in a variety of developmentally appropriate tasks and activities, creative movement, dance and gymnastics (E1.4.3)	movement concepts and locomotor skills in a variety of developmentally appropriate tasks and activities, creative movement, dance and gymnastics (E1.4.4)	transference in a variety of modified games, small sided game play, gymnastics and dance environments. (E1.4.5)

Manipulatives						
Throwing	*Underhand throw* Demonstrates an underhand movement (throw/roll) with opposite foot forward. (E1.5. Ka)	*Underhand throw* Demonstrates underhand throw using 2 of the 5 critical elements of a mature pattern. (E1.5.1a)	*Underhand throw* Demonstrates underhand throw using mature pattern. (E1.5.2a)	*Underhand throw* Demonstrates underhand throw to a partner or target with reasonable accuracy (E1.5.3a)	*Underhand throw* Demonstrates and applies mature patterns in underhand throw in a variety of developmentally appropriate tasks and activities. (E1.5.4a)	*Underhand throw* Demonstrates competencies in applying underhand throw in a variety of modified games and small sided game play. (E1.5.5a)
	Overhand throw Developmentally appropriate/emerging outcomes first appear in Grade 2	*Overhand throw* Demonstrates overhand movement (throw) with opposite foot forward. (E1.5. Kb)	*Overhand throw* Demonstrates overhand throw using 2 of the 5 critical elements of a mature pattern. (E1.5.1b)	*Overhand throw* Demonstrates overhand throw using 3 out of 5 critical elements of a mature pattern for accuracy,	*Overhand throw* Demonstrates and applies mature patterns in overhand throw in a variety of developmentally appropriate tasks and activities.	*Overhand throw* Demonstrates competencies in applying overhand throw in a variety of modified games and small sided game play.

				distance and or force. (E1.5.3b)	(E1.5.4b)	(E1.5.5b)
Catching	Demonstrates dropping a ball and catching it at the peak of the bounce. (E1.6. Ka) Demonstrates tossing to self and catching. (E1.6. Kb)	Demonstrates catching an object from a skilled thrower at various levels. (E1.6.1)	Demonstrates catching a self-tossed or well thrown large object with hands (no trapping against body) (E1.6.2)	Demonstrates catching using 4 of the 5 critical elements of a mature pattern. (E1.6.3)	Demonstrates and applies mature patterns in catching in a variety of developmentally appropriate stationary tasks and activities. (E1.6.4)	Demonstrates competencies in applying catching with accuracy while moving in a variety of modified games and small sided play (E1.6.5)
Dribbling	*Dribbling with hands* Demonstrates dribbling a ball with one or two hands continuously. (E1.7. Ka) *Dribbling with feet* Demonstrates dribbling the ball using the inside of the	*Dribbling with hands* Demonstrates dribbling continuously in self space using the dominate hand (E1.7.1a1) Demonstrates dribbling continuously in general space using the dominate hand (E1.7.1a2) *Dribbling with feet* Demonstrates dribbling the ball with the inside of the foot while moving in general space	*Dribbling with hands* Demonstrates dribbling continuously in self space using dominant and non- dominant hand in a mature pattern (E1.7.2a) *Dribbling with feet* Demonstrates dribbling the ball with the inside of both feet in general	*Dribbling with hands* Demonstrates Dribbling skills in general space using dominant and non-dominant hand while changing direction and speed with control of ball and body. (E1.7.3a) *Dribbling with feet* Demonstrates	*Dribbling with hands* Demonstrates and applies mature patterns in dribbling in a variety of developmentally appropriate tasks and activities. (E1.7.4a) *Dribbling with feet* Demonstrates and applies mature patterns of dribbling in a	*Dribbling with hands* Demonstrates competencies in applying dribbling skills in a variety of modified games and small sided play (E1.7.5) *Dribbling with feet* Demonstrates

	foot moving the ball forward. (E1.7. Kb)	(E1.7.1b)	space with control of ball and body. (E1.7.2b)	dribbling skills in general space while changing direction and speed with control of ball and body. (E1.7.3b)	variety of developmentally appropriate tasks and activities. (E1.7.4b)	competencies in applying dribbling skills in a variety of modified games and small sided play (E1.7.5)
Kicking	Demonstrates kicking a stationary ball from a stationary position using 2 of the 5 critical elements of a mature pattern. (E1.8. Ka) Demonstrates approaching a stationary ball and kicking it forward using 2 of the 5 critical elements of a mature pattern. (E1.8. Kb)	Demonstrates approaching a moving ball and kicking it forward using 2 of the 5 critical elements of a mature pattern. (E1.8.1)	Demonstrates A continuous running approach to kick a stationary ball for distance and/or accuracy. (E1.8.2)	Demonstrates A continuous running approach to kick a moving ball for distance and/or accuracy. (E1.8.3)	Demonstrates and applies mature patterns of kicking in a variety of developmentally appropriate tasks and activities. (E1.8.4)	Demonstrates competencies in applying kicking skills in a variety of modified games and small sided play (E1.8.5)
Volleying	Demonstrates underhand volleying in self space with a light-weight object with hands sending it upward. (E1.9.K)	Demonstrates underhand volleying in self space and general space using dominant and non-dominant hands sending it upward. (E1.9.1)	Demonstrates underhand volleying with a partner using dominant and nondominant hands while demonstrating 2 of the 5 critical elements of a mature pattern. (E1.9.2)	Demonstrates underhand volleying with one or two hands sending it forward over a net to a wall or over a line to a partner while demonstrating 4	Demonstrates and applies mature patterns of underhand volleying in a variety of developmentally appropriate tasks and activities. (E1.9.4a)	Demonstrates competencies in applying underhand volleying skills in a variety of modified games and small sided play (E1.9.5a)

				of the 5 critical elements of a mature pattern. (E1.9.3a)		
				Demonstrates overhead volleying with one or two hands sending it forward over a net to a wall or over a line to a partner while demonstrating 4 of the 5 critical elements of a mature pattern. (E1.9.3b)	Demonstrates and applies mature patterns of overhead volleying in a variety of developmentally appropriate tasks and activities. (E1.9.4b)	Demonstrates competencies in applying overhead volleying skills in a variety of modified games and small sided play. (E1.9.5b)
Striking	Demonstrates striking using a light-weight object with a short-handled implement while controlling consecutive hits in self space. (E1.10.K)	Demonstrates striking using a short-handled implement sending it upward with control in self space. (E1.10.1)	Demonstrates striking an object with a short or long handled implement using correct grip and side orientation/proper body orientation with control in general space. (E1.10.2)	Demonstrates striking with a short or long handled implement while demonstrating 3 of the 5 critical elements of a mature pattern (grip, stance, body orientation, swing plane and follow through) (E1.10.3)	Demonstrates and applies mature patterns of striking using short and long handled implements in a variety of developmentally appropriate tasks and activities. (E1.10.4)	Demonstrates competencies in applying striking skills using short and long handled implements in a variety of modified games and small sided game play. (E1.10.5)

Standard 2: *Students will apply knowledge of concepts, principles, strategies, and tactics related to movement and performance.*

	Kindergarten	**Grade 1**	**Grade 2**	**Grade 3**	**Grade 4**	**Grade 5**
Movement Concepts						
S2.E1 Movement concepts *Space*	Demonstrates the ability to differentiate between movement in personal (self-space) and general space. (S2.E1.Ka) Moves in personal space to a rhythm. (S2.E1.Kb)	Demonstrates the ability to move in self-space and general space in response to designated beats or rhythms. (S2.E1.1)	Demonstrates the ability to combine locomotor skills in general space to a rhythm. (S2.E1.2)	Demonstrates the ability to recognize the concept of open spaces in a movement context. (S2.E1.3)	Demonstrates the application of open spaces in combination with skills involving traveling (e.g., dribbling and traveling). (S2.E1.4a) Demonstrates application of closing spaces in small-sided practice tasks. (S2.E1.4b) Demonstrates dribbling in general space with changes in direction and speed. (S2.E1.4c)	Demonstrates the ability to combine spatial concepts with locomotor and non-locomotor movements for small groups in gymnastics, dance and games environments. (S2.E1.5)

Movement Concepts *Pathways, Shapes, Levels*	Demonstrates the ability to travel in three different pathways. (S2.E2.Ka) Demonstrates low, middle and high levels in personal space. (S2.E2.Kb)	Demonstrates moving at low, middle and high levels while traveling. (S2.E2.Kb) Demonstrates a variety of relationships with objects (e.g., over, under, around, through) while traveling. (S2.E2.1b)	Demonstrates a combination of shapes, levels and pathways into simple travel, dance and gymnastics sequences. (S2.E2.2)	Demonstrates combinations of shapes, levels and pathways into complex sequences in travel, dance and gymnastics with a peer, partner or in small groups. (S2.E2.3)	Combines movement concepts with skills in small-sided practice tasks, gymnastics and dance environments. (S2.E2.4)	Combines movement concepts with skills in small-sided practice tasks in game environments, gymnastics and dance with self-direction. (S2.E2.5)
Movement Concepts *Speed, Direction, Force*	Demonstrates traveling in general space with different speeds. (S2.E3.K)	Demonstrates differences between fast and slow speeds. (S2.E3.1a) Differentiates between strong and light force. (S2.E3.1b)	Demonstrates a variety in time and force with gradual increases and decreases. (S2.E3.2)	Combines movement concepts (direction, levels, force, time) with skills as directed by the teacher. (S2.E3.3)	Applies the movement concepts of speed, endurance and pacing for running. (S2.E3.4a) Applies the concepts of direction and force when striking an object with a short-handled implement, sending it toward a	Applies movement concepts to strategy in game situations. (S2.E3.5a) Demonstrates the application of concepts of direction and force to strike an object with a long- handled implement. (S2.E3.5b)

					Designated target. (S2.E3.4b)	Demonstrates the ability to analyze movement situations and applies movement concepts (e.g., force, direction, speed, pathways, extensions) in small-sided practice tasks in game environments, dance and gymnastics. (S2.E3.5c)
Movement Concepts *Strategies & Tactics*	Developmentally appropriate/emerging outcomes first appear in Grade 3.	Developmentally appropriate/emerging outcomes first appear in Grade 3.	Developmentally appropriate/emerging outcomes first appear in Grade 3.	Demonstrates application of simple strategies and tactics in chasing and fleeing activities. (S2.E4.3)	Demonstrates application of simple offensive strategies and tactics in chasing and fleeing activities. (S2.E4.4a) Demonstrate s application of simple	Demonstrates application of basic offensive and defensive strategies and tactics in invasion small-sided practice tasks. (S2.E4.5a) Demonstrate s application

| | | | | | defensive strategies and tactics in chasing and fleeing activities. (S2.E4.4b)

Demonstrates application of the types of kicks needed for different games and sports situations. (S2.E4.4c) | of basic offensive and defensive strategies and tactics in net and wall small-sided practice tasks. (S2.E4.5b)

Demonstrates the recognition of the type of throw, volley or striking action needed for different games and sports situations. (S2.E4.5c) |
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Standard 3: *Students will demonstrate the knowledge and skills to achieve and maintain a health-enhancing level of physical activity and fitness.*

	Kindergarten	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Physical Activity Knowledge						
S3.E1 *Physical activity knowledge*	Demonstrates and identifies active play opportunities outside physical education class. (S3.E1.K)	Demonstrates the ability to discuss the benefits of being active and exercising and/or playing. (S3.E1.1)	Demonstrates the ability to describe large-motor and/or manipulative physical activities for participation outside physical education class (e.g., before and after school, at home, at the park, with friends, with the family). (S3.E1.2)	Demonstrates the ability to chart participation in physical activities outside physical education class. (S3.E1.3a) Demonstrates the ability to identify physical activity to become healthier. (S3.E1.3b)	Demonstrates the ability to analyze physical activity opportunities outside physical education class. (S3.E1.4)	Demonstrates the ability to chart and analyze physical activity outside physical education class for fitness benefits of those activities. (S3.E1.5)
Engages in Physical Activity						
S3.E2 *Engages in physical activity*	Demonstrates active participation in physical education class. (S3.E2.K)	Demonstrates active engagement in physical education class. (S3.E2.1)	Demonstrates active engagement in physical education class in response to instruction and practice. (S3.E2.2)	Demonstrates the ability to engage in physical education class activities without teacher	Demonstrates the ability to actively engage in both teacher- directed and independent physical education	Demonstrates active engagement in all of the activities of physical education. (S3.E2.5)

				prompting. (S3.E2.3)	class activities. (S3.E2.4)	
Fitness Knowledge						
S3.E3 *Fitness knowledge*	Demonstrates the ability to recognize that when you move fast, your heart beats faster and you breathe faster. (S3.E3.K)	Demonstrates the ability to identify the heart as a muscle that grows stronger with exercise, play and physical activity. (S3.E3.1)	Demonstrates the ability to recognize the use of the body as resistance (e.g., holds body in plank position, animal walks) for developing strength. (S3.E3.2a) Demonstrates the ability to identify physical activities that contribute to fitness. (S3.E3.2b)	Demonstrates the ability to describe the concept of fitness and provides examples of physical activity to enhance fitness. (S3.E3.3)	Demonstrates the ability to identify the components of health- related fitness. (S3.E3.4)	Demonstrates the ability to differentiate between skill-related and health- related fitness. (S3.E3.5)
S3.E4 *Fitness knowledge*	Developmentally appropriate/emerging outcomes first appear in Grade 3.	Developmentally appropriate/emerging outcomes first appear in Grade 3.	Developmentally appropriate/emerging outcomes first appear in Grade 3.	Demonstrates the ability to recognize the importance of warm-up and cool- down relative to vigorous physical activity. (S3.E4.3)	Demonstrates performance of warm-up and cool- down relative to the Health- Related Fitness Components. (S3.E4.4)	Demonstrates the ability to identify the need for warm-up and cool-down relative to various physical activities. (S3.E4.5)

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

Assessment and Program Planning						
S3.E5 *Assessment and program planning*	Developmentally appropriate/emerging outcomes first appear in Grade 3.	Developmentally appropriate/emerging outcomes first appear in Grade 3.	Developmentally appropriate/emerging outcomes first appear in Grade 3.	Demonstrates the ability to identify, the health- related fitness components with teacher direction. (S3.E5.3)	Demonstrates the ability to complete a variety of fitness assessments (pre and post). (S3.E5.4a) Demonstrate s ability to identify areas of needed remediation from personal test and, with teacher assistance, identify strategies for progress in those areas. (S3.E5.4b)	Demonstrates the ability to analyze results of fitness assessments (pre and post), comparing results to fitness components for good health. (S3.E5.5a) Demonstrates the ability to design a fitness plan to address ways to use physical activity to enhance fitness. (S3. E5.5b)
Nutrition						
S3.E6 *Nutrition*	Demonstrates the ability to recognize that food provides energy for physical activity. (S3.E6.K)	Demonstrates the ability to differentiate between healthy and unhealthy foods. (S3.E6.1)	Demonstrates the ability to recognize the "good health balance" of good nutrition with physical activity. (S3.E6.2)	Demonstrates the ability to identify foods that are beneficial for before and after physical activity. (S3.E6.3)	Demonstrates the ability to discuss the importance of hydration and hydration choices relative to physical activities. (S3.E6.4)	Demonstrates the ability to analyze the impact of food choices relative to physical activity, youth sports and personal health. (S3.E6.5)

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

Standard 4: *Students will exhibit responsible personal and social behavior that respects self and others.*

	Kindergarten	**Grade 1**	**Grade 2**	**Grade 3**	**Grade 4**	**Grade 5**
Personal Responsibility						
S4.E1 *Personal responsibility*	Demonstrates the ability to follow directions in group settings (e.g., safe behaviors, following rules, taking turns). (S4.E1.K)	Demonstrates the ability to accept personal responsibility by using equipment and space appropriately. (S4.E1.1)	Demonstrates the ability to practice skills with minimal teacher prompting. (S4.E1.2)	Demonstrates the ability to exhibit personal responsibility in teacher-directed activities. (S4. E1.3	Demonstrates the ability to exhibit responsible behavior in independent group situations. (S4.E1.4)	Demonstrates the ability to engage in physical activity with responsible interpersonal behavior (e.g., peer to peer, student to teacher, student to referee). (S4.E1.5)
S4.E2 *Personal responsibility*	Demonstrates the ability to acknowledge responsibility for behavior when prompted. (S4.E2.K)	Demonstrates the ability to follow the rules and parameters of the learning environment. (S4.E2.1)	Demonstrates the ability to accept responsibility for class protocols with behavior and performance actions. (S4.E2.2)	Demonstrates the ability to work independently for extended periods of time. (S4.E2.3)	Demonstrates the ability to reflect on personal social behavior in physical activity. (S4.E2.4)	Demonstrates the ability to participate with responsible personal behavior in a variety of physical activity contexts, environments and facilities. (S4.E2.5a) Demonstrates the ability to exhibit respect for self with appropriate behavior while engaging in physical activity. (S4.E2.5b)

Accepting Feedback

S4.E3 *Accepting feedback*	Demonstrates the ability to follow instruction and directions when prompted. (S4.E3.K)	Demonstrates the ability to respond appropriately to general feedback from the teacher. (S4.E3.1)	Demonstrates the ability to accept specific corrective feedback from the teacher. (S4.E3.2)	Demonstrates the ability to accept and implement specific corrective feedback from the teacher. (S4.E3.3)	Demonstrates the ability to listen respectfully to corrective feedback from others (e.g., peers, adults). (S.4.E.4)	Demonstrates the ability to provide corrective feedback respectfully to peers. (S4.E3.5)

Working with Others

S4.E4 *Working with others*	Demonstrates the ability to share equipment and space with others. (S4.E4.K)	Demonstrates the ability to work independently with others in a variety of class environments (e.g., small and large groups). (S4.E4.1)	Demonstrates the ability to work independently with others in partner environments. (S4.E4.2)	Demonstrates the ability to work cooperatively with others. (S4.E4.3a) Demonstrates the ability to praise others for their success in movement performance. (S4.E4.3b)	Demonstrates the ability to praise the movement performance of others with varying skill levels. (S4.E4.4a) Demonstrates the ability to accept players of all skill levels into the physical activity. (S4.E4.4b)	Demonstrates the ability to accept, recognize and actively involve others with varying skill abilities into physical activities and group projects. (S4.E4.5)

Rules and Etiquette

S4.E5 *Rules & etiquette*	Demonstrates the ability to recognize the	Demonstrates the ability to exhibit the	Demonstrates the ability to recognize the	Demonstrates the ability to recognize the	Demonstrates the ability to exhibit etiquette	Demonstrates the ability to critique the

established protocol for class activities. (S4.E5.K)	established protocols for class activities. (S4.E5.1)	role of rules and etiquette in teacher-designed physical activities. (S4.E5.2)	role of rules and etiquette in physical activity with peers. (S4.E5.3)	and adherence to rules in a variety of physical activities. (S4.E5.4)	etiquette involved in rules of various game activities. (S4.E5.5)

Safety

| S4.E6 *Safety* | Demonstrates the ability to follow teacher directions for safe participation and proper use of equipment with minimal reminders. (S4.E6.K) | Demonstrates the ability to follow teacher directions for safe participation and proper use of equipment without teacher reminders. (S4.E6.1) | Demonstrates the ability to work independently and safely in physical education. (S4.E6.2a)

Demonstrates the ability to work safely with physical education equipment. (S4.E6.2b) | Demonstrates the ability to work independently and safely in physical activity settings. (S4.E6.3) | Demonstrates the ability to work safely with peers and equipment in physical activity settings. (S4.E6.4) | Demonstrates application of safety principles with age appropriate physical activities. (S4.E6.5) |

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

Standard 5: *Students will recognize the value of physical activity for health, enjoyment, challenge, self-expression, and social interaction.*

	Kindergarten	**Grade 1**	**Grade 2**	**Grade 3**	**Grade 4**	**Grade 5**
Health						
S5.E1 *Health*	Demonstrates the ability to recognize that physical activity is important for physical health. (S5.E1.K)	Demonstrates the ability to identify physical activity as a component of good health. (S5.E1.1)	Demonstrates the ability to recognize the value of "good health balance". (S5.E1.2)	Demonstrates the ability to discuss the relationship between physical activity and good health. (S5.E1.3)	Demonstrates the ability to examine the health benefits of participating in physical activities. (S5.E1.4)	Demonstrates the ability to compare the health benefits of participating in selected physical activities. (S5.E1.5)
Challenge						
S5.E2 *Challenge*	Demonstrates the ability to acknowledge that some physical activities are challenging or difficult. (S5.E2.K)	Demonstrates the ability to recognize that challenge in physical activities can lead to success. (S5.E2.1)	Demonstrates the ability to compare physical activities, confidence and challenge. (S5.E2.2)	Demonstrates the ability to discuss the challenge that comes with learning a new physical activity. (S5.E2.3)	Demonstrates the ability to rate the enjoyment of participating in challenging and mastered physical activities. (S5.E2.4)	Demonstrates the ability to express (via written essay, visual art, creative movement) the enjoyment and/or challenge of participating in a favorite physical activity. (S5.E2.5)

Self-Expression and Enjoyment						
S5.E3 *Self- expression and Enjoyment*	Demonstrates the ability to identify physical activities that are enjoyable. (S5. E3. Ka) Demonstrates the ability to discuss the enjoyment of playing with friends. S5. E3. Kb	Demonstrates the ability (S5.E3.1a) Demonstrates the ability to discuss personal reasons for physical activities (the "why"). (S5.E3.1b)	Demonstrates the ability to identify physical activities that provide self-expression (e.g., dance, gymnastics routines, practice tasks in game environments). (S5.E3.2)	Demonstrates the ability to reflect on the reasons for enjoying selected physical activities. (S5.E3.3)	Demonstrates the ability to rank the enjoyment of participating in different physical activities. (S5.E43.4)	Demonstrates the ability to analyze different physical activities for enjoyment and challenge, identify reasons for a positive or negative response. (S5.E5.5)
Social Interaction						
S5.E4 *Social Interaction*	Developmentally appropriate/emerging outcomes first appear in grade 3	Developmentally appropriate/emerging outcomes first appear in grade 3	Developmentally appropriate/emerging outcomes first appear in grade 3	Demonstrates the ability to describe the positive social interactions that come when engaged with others in physical activities. (S5.E4.3)	Demonstrates the ability to describe and compare the positive social interactions when engaged in partner, small group, and large group physical activities. (S5.E4.4)	Demonstrates the ability to describe the social benefits gained from participating in physical activities (e.g. recess, youth sports). (S5.E4.5)

Middle School Grade- Level Outcomes

By the end of grade 8, the learner will:
- o   Demonstrate fundamental movement skills
- o   Apply tactics and strategies to modified game play
- o   Design and implement a health-enhancing fitness program
- o   Participate in self-selected physical activity
- o   Accept individual differences and demonstrate inclusive behaviors
- o   Cooperate with and encourage classmates
- o   Engage in physical activity for enjoyment and self-expression

Note: Swimming skills and water-safety activities should be taught if facilities permit.

Standard 1: *Students will demonstrate competency in a variety of motor skills and movement patterns.*

	Grade 6	**Grade 7**	**Grade 8**
Dance and Rhythms			
S1.M1 *Dance and Rhythms*	Demonstrates correct rhythm and pattern for one of the following dance forms: folk, social, creative, line or world dance. (S1.M1.6)	Demonstrates correct rhythm and pattern for a dance form, different than grade 6, from among folk, social, creative, line and world dance. (S1.M1.7)	Demonstrates command of rhythm and timing by creating a movement sequence to music as an individual or in a group. (S1.M1.8)
Games and Sports: Invasion and Field Games			
S1.M2 *Throwing*	Demonstrates the ability to throw with a mature pattern for distance or power appropriate to the practice task (e.g., distance = outfield to home plate; power = 2nd base to 1st base). (S1.M2.6)	Demonstrates the ability to throw with a mature pattern for distance or power appropriate to the activity during modified game play. (S1.M2.7)	Demonstrates the ability to throw with a mature pattern for distance or power appropriate to the activity during small-sided game play. (S1.M2.8)
S1.M3 *Catching*	Demonstrates the ability to catch with a mature pattern from a variety of trajectories	Demonstrates the ability to catch with a mature pattern from a variety of trajectories using	Demonstrates the ability to catch with a mature pattern from a variety of trajectories using

	using different objects in varying practice tasks. (S1.M3.6)	different objects in modified game play. (S1.M3.7)	different objects in small-sided game play. (S1.M3.8a) Demonstrates catching using an implement in a dynamic environment or modified game play. (S1.M3.8b.)
Games and Sport: Invasion Games			
S1.M4 *Passing and Receiving*	Demonstrates the ability to throw a leading pass to a moving receiver, while stationary. (S1.M4.6a) Demonstrates the ability to throw, while moving, a leading pass to a moving receiver. (S1.M4.6b) Demonstrates the ability to pass and receive with hands in combination with locomotor patterns of running and change of direction & speed with competency in invasion games such as basketball, flag football, speedball or team handball. (S1.M4.6c) Demonstrates the ability to throw a lead pass to a moving partner off a dribble or pass. (S1.M4.6d)	Demonstrates the ability to kick a leading pass to a moving receiver, while stationary. (S1.M4.7a) Demonstrates the ability to kick, while moving, a leading pass to a moving receiver. (S1.M4.7b) Demonstrates the ability to pass and receive with feet in combination with locomotor patterns of running and change of direction & speed with competency in invasion games such as speedball or soccer. (S1.M4.7c) Demonstrates the ability to kick a lead pass to a moving partner off a dribble or pass. (S1.M4.7d)	Demonstrates the ability to throw a lead pass with an implement, to a moving receiver, while stationary. (S1.M4.8a) Demonstrates the ability to throw, with an implement, a leading pass to a moving receiver. while moving. (S1.M4.8b) Demonstrates the ability to pass and receive with an implement in combination with locomotor patterns of running and change of direction, speed and/or level with competency in invasion games such as lacrosse or hockey (floor, field, or ice). (S1.M4.8c) Demonstrates the ability to throw, with an implement, a lead pass to a moving partner off a dribble or pass. (S1.M4.8d)

S1.M5 *Offensive Skills*	Demonstrates the ability to perform pivots, fakes and jab steps designed to create open space during practice tasks. (S1.M5.6a) Demonstrates the following offensive skills without defensive pressure: pivot, give and go, and fakes. (S1.M5.6b)	Demonstrates at least 1 of the following designed to create open space during small-sided game play: pivots, fakes, jab steps. (S1.M5.7a) Demonstrates the following offensive skills with defensive pressure: pivot, give and go, and fakes. (S1.M5.7b)	Demonstrates at least 2 of the following to create open space during modified game play: pivots, fakes, jab steps, screens. (S1.M5.8a) Demonstrates the following offensive skills during small-sided game play: pivot, give and go, and fakes. (S1.M5.8b)
S1.M6 *Dribbling/Ball Control*	Demonstrates the ability to dribble with dominant hand using a change of speed and direction in a variety of practice tasks. (S1.M6.6a) Demonstrates the ability to dribble with dominant and nondominant hands using a change of speed and direction in a variety of practice tasks. (S1.M6.6b)	Demonstrates the ability to dribble with feet with control, changing speed and direction in a variety of practice tasks. (S1.M6.7a) Demonstrates the ability to dribble with feet combined with passing in a variety of modified game play. (S1.M6.7b)	Demonstrates the ability to dribble with an implement combined with passing in a variety of practice tasks (S1.M6.8a) Demonstrates the ability to dribble using an implement with a change of speed and direction in small- sided game play. (S1.M6.8b) Demonstrates the ability to dribble with an implement with control, changing speed and direction during small-sided game play. (S1.M6.8c)
S1.M7 *Shooting on Goal*	Demonstrates the ability to shoot on goal with power in a dynamic environment as appropriate to the activity. (S1.M7.6)	Demonstrates the ability to shoot on goal with power and accuracy in small-sided game play. (S1.M7.7)	Demonstrates the ability to shoot on goal with a long-handled implement for power and accuracy in modified invasion games such as hockey (floor, field, ice) or lacrosse. (S1.M7.8)

S1.M8 *Defensive Skills*	Demonstrates the ability to maintain a defensive-ready position, with weight on balls of feet, arms extended and eyes on midsection of the offensive player. (S1.M8.6)	Demonstrates the ability to slide in all directions while on defense without crossing feet. (S1.M8.7)	Demonstrates the ability to drop-step in the direction of the pass during player-to-player defense. (S1.M8.8)
Games and Sports: Net/Wall Games			
S1.M9 *Serving*	Demonstrates a legal underhand serve with control for net and wall games such as badminton, volleyball or pickleball. (S1.M9.6)	Demonstrates consistently (at least 70 percent of the time) a legal underhand serve to a predetermined target for net and wall games such as badminton, volleyball or pickleball. (S1.M9.7)	Demonstrates consistently (at least 70 percent of the time) a legal underhand serve for distance and accuracy for net and wall games such as badminton, volleyball or pickleball. (S1.M9.8)
S1.M10 *Striking*	Demonstrates the ability to strike with a mature overhand pattern in a nondynamic environment for net/ wall games such as volleyball, handball, badminton or tennis. (S1.M10.6)	Demonstrates the ability to strike with a mature overhand pattern in a dynamic environment for net/ wall games such as volleyball, handball, badminton or tennis. (S1.M10.7)	Demonstrates the ability to strike with a mature overhand pattern in a modified net/wall game such as volleyball, handball, badminton or tennis. (S1.M10.8)
S1.M11 *Weight Transfer*	Demonstrates the ability to transfer weight with correct timing for the striking pattern. (S1.M11.6)	Demonstrates the ability to transfer weight with correct timing using low to high striking pattern with a short-handled implement on the forehand side. (S1.M11.7)	Demonstrates the ability to transfer weight with correct timing using low to high striking pattern with a long-handled implement on the forehand and backhand sides. (S1.M11.8)
S1.M12 *Forehand & Backhand*	Demonstrates the mature form of the forehand and backhand strokes with a short-handled implement in net games such as paddle ball, pickleball or short-handled racket tennis. (S1.M12.6)	Demonstrates the mature form of forehand and backhand strokes with a long-handled implement in net games such as badminton or tennis. (S1.M12.7)	Demonstrates the mature form of fore- hand and backhand strokes with a short- or long-handled implement with power and accuracy in net games such as pickleball, tennis, badminton or paddle ball.

			(S1.M12.8)
S1.M13 *Volleying*	Demonstrates the two-hand-volleys with control in a variety of practice tasks. (S1.M13.6a) Demonstrates the ability to forehand volley with a mature form and control using a short-handled implement. (S1.M13.6b)	Demonstrates the two-hand-volleys with control in a dynamic environment. (S1.M13.7a) Demonstrates the ability to forehand and backhand-volley with a mature form and control using a short-handled implement. (S1.M13.7b)	Demonstrates the two-hand volley with control in a small-sided game. (S1.M13.8) Demonstrates the ability to forehand and backhand-volley with a mature form and control using a short-handled implement during modified game play. (S1.M13.8b)
Games and Sports: Target Games			
(S1.M14) *Throwing Underhand*	Demonstrates a mature underhand pattern for a modified target game such as bowling, bocce, or horseshoes. (S1.M14.6)	Demonstrates consistently (70 percent of the time) a mature underhand pattern for target games such as bowling, bocce, or horseshoes. (S1.M14.7)	Demonstrates consistently (70 percent of the time) a mature underhand pattern with accuracy and control for 1 target game such as bowling or bocce. (S1.M14.8)
S1.M15 *Striking*	Demonstrates the ability to strike a stationary object with an implement, for accuracy with activities such as croquet, shuffleboard, and golf. (S1.M15.6)	Demonstrates the ability to strike a stationary object with an implement, for accuracy and distance in activities such as croquet, shuffleboard and golf. (S1.M15.7)	Demonstrates the ability to strike a stationary object with an implement, for accuracy, distance and power in activities such as croquet, shuffleboard and golf. (S1.M15.8)
Games and Sports: Fielding/Striking Games			
S1.M16 *Striking*	Demonstrates the ability to strike a pitched ball with an implement with force in a variety of practice tasks. (S1.M16.6)	Demonstrates the ability to strike a pitched ball with an implement to open space in a variety of practice tasks. (S1.M16.7)	Demonstrates the ability to strike a pitched ball with an implement for power to open space in a variety of small-sided games. (S1.M16.8)
S1.M17 *Catching*	Demonstrates the ability to catch, with a mature pattern, from different trajectories using a variety of objects in a varying practice task.	Demonstrates the ability to catch, with a mature pattern, from different trajectories using a variety of objects in small-sided game play. (S1.M17.7)	Demonstrates the ability to catch, using an implement, from different trajectories and speeds in a dynamic environment or modified game play.

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

	(S1.M17.6)		(S1.M17.8
Outdoor Activities			
S1.M18	Demonstrates correct technique for basic skills in 1 selected outdoor activity. (S1.M18.6)	Demonstrates correct technique for a variety of skills in 1 selected outdoor activity. (S1.M18.7)	Demonstrates correct technique for a variety of skills in at least 2 selected outdoor activities. (S1.M18.8)
Individual Performance Activities			
S1.M19	Demonstrates correct technique for basic skills in 1 selected individual-performance activity. (S1.M19.6)	Demonstrates correct technique for a variety of skills in 1 selected individual-performance activity. (S1.M19.7)	Demonstrates correct technique for a variety of skills in at least 2 selected individual-performance activities. (S1.M19.8)

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

Standard 2: *Students will apply knowledge of concepts, principles, strategies, and tactics related to movement and performance.*

	Grade 6	Grade 7	Grade 8
Games and Sports: Invasion Games			
S2.M1 *Creating Space with Movement, Offensive Tactics, using Width and Length*	Creates open space by using locomotor movements (e.g., walking, running, jumping and landing) in combination with movement (e.g., varying pathways; change of speed, direction or pace). (S2.M1.6a) Executes at least 1 of the following offensive tactics to create open space: moves to open space without the ball; uses a variety of passes, pivots and fakes; give and go. (S2.M1.6b) Creates open space by using the width and length of the field/court on offense. (S2.M1.6c)	Reduces open space by using locomotor movements (e.g., walking, running, jumping and landing, changing size and shape of the body) in combination with movement concepts (e.g., reducing the angle in the space, reducing distance between player and goal). (S2.M1.7a) Executes at least 2 of the following offensive tactics to create open space: uses a variety of passes, pivots and fakes; give and go. (S2.M1.7b) Creates open space by staying spread on offense and cutting and passing quickly. (S2.M1.7c)	Opens and closes space during small-sided game play by combining locomotor movements with movement concepts. (S2.M1.8a) Executes at least 3 of the following offensive tactics to create open space: moves to create open space on and off the ball; uses a variety of passes, fakes and pathways; give and go. (S2.M1.8b) Creates open space by staying spread on offense, cutting and passing quickly, and using fakes off the ball. (S2.M1.8c)

S2.M2 *Reducing Space by Changing Size and Shape and Using Denial*	Reduces open space on defense by making the body larger and reducing passing angles. (S2.M2.6a) Reduces open space by not allowing the catch (denial) or by allowing the catch but not the return pass. (S2.M2.6b)	Reduces open space on defense by staying close to the opponent as he/ she nears the goal. (S2.M2.7a) Reduces open space by not allowing the catch (denial) or anticipating the speed of the object and person for the purpose of interception or deflection. (S2.M2.7b)	Reduces open space on defense by staying on the goal side of the offensive player and reducing the distance to him/ her (third-party perspective). (S2.M2.8a) Reduces open space by not allowing the catch (denial) and anticipating the speed of the object and person for the purpose of interception or deflection. (S2.M2.8b)
S2.M3 *Transitions*	Transitions from offense to defense or defense to offense by recovering quickly. (S2.M3.6)	Transitions from offense to defense or defense to offense by recovering quickly and communicating with teammates. (S2.M3.7)	Transitions from offense to defense or defense to offense by recovering quickly, communicating with teammates and capitalizing on an advantage. (S2.M3.8)
Games and Sports: Net/Wall Games			
S2.M4 *Creating Space through Variation*	Creates open space in net/wall games with a short-handled implement by varying force and direction. (S2.M4.6)	Creates open space in net/wall games with a long-handled implement by varying force and direction, and by moving opponent from side to side. (S2.M4.7)	Creates open space in net/wall games with either a long- or short-handled implement by varying force or direction, or by moving opponent from side to side and/or forward and back. (S2.M4.8)
S2.M5 *Using Tactics and Shots*	Reduces offensive options for opponents by returning to home position. (S2.M5.6)	Selects offensive shot based on opponent's location (hit where opponent is not). (S2.M5.7	Varies placement, force and timing of return to prevent anticipation by opponent. (S2.M5.8)

Games and Sports: Target Games			
S2.M6 *Shot Selection*	Selects appropriate shot and/or club based on location of the object in relation to the target. (S2.M6.6)	Varies the speed and/or trajectory of the shot based on location of the object in relation to the target. (S2.M6.7)	Varies the speed, force and trajectory of the shot based on location of the object in relation to the target. (S2.M6.8)
Games and Sports: Fielding and Striking			
S2.M7 *Offensive Strategies*	Identifies open spaces and attempts to strike object into that space. (S2.M7.6) (S2.M7.6)	Uses a variety of shots (e.g., line drive high arc) to hit the ball into open space. (S2.M7.7)	Identifies sacrifice situations and attempts to advance a teammate. (S2.M7.8)
S2.M8 *Reducing Space*	Identifies the correct defensive play based on the situation (e.g., number of outs). (S2.M8.6)	Selects the correct defensive play based on the situation (e.g., number of outs). (S2.M8.7)	Reduces open spaces in the field by working with teammates to maximize coverage. (S2.M8.8)
Outdoor Activities			
S2.M9 *Movement Concepts*	Makes appropriate decisions based on the weather, level of difficulty due to conditions or ability to ensure the safety of self and others. (S2.M9.6)	Analyzes the situation and makes appropriate adjustment to ensure the safety of self and others. (S2.M9.7)	Implements safe protocols in self- selected outdoor activities. (S2.M9.8)
Individual Performance Activities: Dance and Rhythms			
S2.M10 *Movement Concepts*	Varies application of force during dance or gymnastic activities. (S2.M10.6)	Identifies and applies Newton's laws of motion to various dance or movement activities. (S2.M10.7)	Describes and applies mechanical advantage(s) for a variety of movement patterns. (S2.M10.8)

Standard 3: *Students will demonstrate the knowledge and skills to achieve and maintain a health-enhancing level of physical activity and fitness.*

	Grade 6	Grade 7	Grade 8
Physical Activity Knowledge			
S3.M1 *Physical activity knowledge*	Describes how being physically active leads to a healthy body. (S3.M1.6)	Identifies barriers related to maintaining a physically active lifestyle and seeks solutions for eliminating those barriers. (S3.M1.7	Identifies the five components of health-related fitness and explains the connections between fitness and overall physical and mental health. (S3.M1.8)
Participates in Physical Activity			
S3.M2 *Participates in physical activity*	Participates in self-selected physical activity outside of physical education class. (S3.M2.6a) Participates in a variety of aerobic fitness activities such as cardio-kick, step aerobics and aerobic dance. (S3.M2.6b) Participates in a variety of aerobic-fitness activities using technology such as Dance, Dance Revolution® or Wii Fit®. (S3.M2.6c) Participates in a variety of lifetime recreational team sports, outdoor pursuits or dance activities. (S3.M2.6d)	Participates in a physical activity 2 times a week outside of physical education class. (S3.M2.7a) Participates in a variety of strength and endurance-fitness activities such as Pilates, resistance training, bodyweight training and light free-weight training. (S3.M2.7b) Participates in a variety of strength and endurance-fitness activities such as weight or resistance training. (S3.M2.7c) Participates in a variety of lifetime dual and individual sports, martial arts or aquatic activities. (S3.M2.7d)	Participates in a physical activity 3 times a week outside of physical education class. (S3.M2.8a) Participates in a variety of self -selected aerobic fitness activities outside of school such as walking, jogging, biking, skating, dancing and swimming. (S3.M2.8b) Plans and implements a program of cross-training to include aerobic, strength and endurance, and flexibility training. (S3.M2.8c) Participates in a self-selected lifetime sport, dance, aquatic or outdoor activity outside of the school day. (S3.M2.8d)

	Participates in moderate to vigorous aerobic physical activity including intermittent/continuous aerobic physical activity of both moderate and vigorous intensity for at least 60 minutes per day. (S3.M2.6e)	Participates in moderate to vigorous muscle- and bone-strengthening physical activity at least 3 times a week. (S3.M2.7e)	Participates in moderate to vigorous aerobic and/or strengthening physical activity at least 60 min/day 5 times a week. (S3.M2.8e)
Fitness Knowledge			
S3.M3 *Fitness knowledge*	Identifies the components of skill related fitness. (S3.M3.6a)

Sets and monitors a self-selected physical activity goal for aerobic and/ or muscle and bone strengthening activity based on current fitness level. (S3.M3.6b)

Employs correct techniques and methods of stretching. (S3.M3.6c)

Differentiates between aerobic and anaerobic capacity, and between muscular strength and endurance. (S3.M3.6d)

Identifies each of the components of the FITT formula: frequency, intensity, time & type for different types of physical | Distinguishes between health-related and skill-related fitness. (S3.M3.7a)

Adjusts physical activity based on quantity of exercise needed for a minimal health standard and/or optimal functioning based on current fitness level. (S3.M3.7b)

Describes and demonstrates the difference between dynamic and static stretches. (S3.M3.7c)

Describes the role of exercise and nutrition in weight management. (S3.M3.7d)

Describes overload principle (FITT formula) for different types of physical activity. Identifies training principles on which the formula is based and | Compares and contrasts health related fitness components and skill related fitness components. (S3.M3.8a)

Uses available technology to self- monitor quantity of exercise needed for a minimal health standard and/or optimal functioning based on current fitness level. (S3.M3.8b)

Employs a variety of appropriate static stretching techniques for all major muscle groups. (S3.M3.8c)

Describes the role of flexibility in injury prevention. (S3.M3.8d) |

activity (aerobic, muscular fitness and flexibility). (S3.M3.6e)	how the formula and principles affect fitness. (S3.M3.7e)	Uses the overload principle (FITT formula) in preparing a personal workout. (S3.M3.8e)
Describes the role of warm-ups and cool-downs before and after physical activity. (S3.M3.6f)	Designs a warm-up and cool-down regimen for a self-selected physical activity. (S3.M3.7f)	Designs and implements a warm-up and cool-down regimen for a self-selected physical activity. (S3.M3.8f)
Determines resting heart rate and describes its relationship to aerobic fitness and the Borg rating of perceived exertion (RPE) scale. (S3.M3.6g)	Describes how the RPE scale can be used to determine the perception of the work effort or intensity of exercise. (S3.M4.7g)	Describes how the RPE scale can be used to adjust workout intensity during physical activity. (S3.M3.8g)
Identifies major muscles used in selected physical activities. (S3.M3.6h)	Describes how muscles pull on bones to create movement in pairs by relaxing and contracting. (S3.M3.7h)	Explains how body systems interact with one another (e.g., blood transports nutrients from the digestive system, oxygen from the respiratory system) during physical activity. (S3.M3.8h)

Assessment and Program Planning			
S3.M4	Designs and implements a program of remediation for an area of weakness based on the results of health-related fitness assessment. (S3.M4.6a) Maintains a physical activity log for at least 2 weeks and reflects on activity levels as documented in the log. (S3.M4.6b)	Designs and implements a program of remediation for 2 areas of weakness based on the results of health-related fitness assessment. (S3.M4.7a) Maintains a physical activity and nutrition log for at least 2 weeks and reflects on activity levels and nutrition as documented in the log. (S3.M4.7b)	Designs and implements a program of remediation, maintenance and challenge based on the results of health-related fitness assessment. (S3.M4.8a) Designs and implements a program to improve levels of health-related fitness and nutrition. (S3.M4.8b)
Nutrition			
S3.M5	Demonstrates the ability to identify foods within each of the basic food groups and selects appropriate servings and portions for his or her age and physical activity levels. (S3.M5.6)	Demonstrates the ability to develop strategies for balancing healthy food, snacks and water intake, along with daily physical activity. (S3.M5.7)	Demonstrates the ability to describe the relationship between poor nutrition and health risk factors. (S3.M5.8)
Stress Management			
S3.M6	Identifies positive and negative results of stress and appropriate ways of dealing with each. (S3.M6.6)	Practices strategies for dealing with stress, such as deep breathing, guided visualization and aerobic exercise. (S3.M6.7)	Demonstrates basic movements used in other stress-reducing activities such as yoga and tai chi. (S3.M6.8)

Standard 4: *Students will exhibit responsible personal and social behavior that respects self and others.*

	Grade 6	Grade 7	Grade 8
Personal Responsibility			
S4.M1	Demonstrates the ability to exhibit personal responsibility by using appropriate etiquette, demonstrating respect for facilities and exhibiting safe behaviors. (S4.M1.6a) Demonstrates the ability to identify and use appropriate strategies to self-reinforce positive fitness behaviors, such as positive self-talk. (S4.M1.6b)	Demonstrates the ability to exhibit responsible social behaviors by cooperating with classmates, demonstrating inclusive behaviors and supporting classmates. (S4.M1.7a) Demonstrates both intrinsic and extrinsic motivation by selecting opportunities to participate in physical activity outside of class. (S4.M1.7b)	Demonstrates the ability to accept responsibility for improving one's personal social behaviors and those of others. (S4.M1.8a) Uses effective self-monitoring skills to incorporate opportunities for physical activity in and outside of school. (S4.M1.8b)
Accepting Feedback			
S4.M2	Demonstrates self- responsibility by implementing specific corrective feedback to improve performance. (S4.M2.6)	Demonstrates the ability to provide corrective feedback to a peer, using teacher-generated guidelines, and incorporating appropriate tone and other communication skills. (S4.M2.7)	Demonstrates the ability to provide encouragement and feedback to peers without prompting from the teacher. (S4.M2.8)

Working with Others			
Rules and Etiquette	Demonstrates the ability to accept differences among classmates in physical development, maturation and varying skill levels by providing encouragement and positive feedback. (S4.M3.6a) Demonstrates the ability to cooperate with a small group of classmates during adventure activities, game play or team-building activities. (S4.M3.6b)	Demonstrates cooperation skills by establishing rules and guidelines for resolving conflicts. (S4.M3.7a) Demonstrates the ability to problem-solve with a small group of classmates during adventure activities, small-group initiatives or game play. (S4.M3.7b)	Demonstrates the ability to respond appropriately to participants' ethical and unethical behavior during physical activity by using rules and guidelines for resolving conflicts. (S4.M3.8a) Demonstrates the ability to cooperate with multiple classmates on problem-solving initiatives including adventure activities, large-group initiatives and game play. (S4.M3.8b)
Rules and Etiquette			
S4.M4	Demonstrates the ability to identify the rules and etiquette for physical activities, games and dance activities. (S4.M4.6)	Demonstrates knowledge of rules and etiquette by self-officiating modified physical activities and games or by following parameters to create or modify a dance. (S4.M4.7)	Demonstrates the ability to apply rules and etiquette by acting as an official for modified physical activities and games and creating dance routines within a given set of parameters. (S4.M4.8)
Safety			
S4.M5	Demonstrates the ability to use equipment appropriately and safely, with the teacher's guidance. (S4.M5.6)	Demonstrates the ability to independently uses equipment appropriately and safely. (S4.M5.7)	Demonstrates the ability to independently use equipment appropriately and identifies specific safety concerns associated with the activity. (S4.M5.8)

Standard 5: *Students will recognize the value of physical activity for health, enjoyment, challenge, self-expression, and social interaction.*

	Grade 6	Grade 7	Grade 8
Health			
S5.M1	Demonstrates the ability to describe how being physically active leads to a healthy body. (S5.M1.6a) Demonstrates the ability to identify components of physical activity that provide opportunities for reducing stress and for social interaction. (S5.M1.6b)	Demonstrates the ability to identify different types of physical activities and describe how each exerts a positive effect on health. (S5.M1.7a) Demonstrates the ability to identify positive mental and emotional aspects of participating in a variety of physical activities. (S5.M1.7b)	Demonstrates the ability to identify the five components of health-related fitness (muscular strength, muscular endurance, flexibility, cardiorespiratory endurance and body composition) and explain the connections between fitness and overall physical and mental health. (S5.M1.8a) Demonstrates the ability to analyze the empowering consequences of being physically active. (S5.M1.8b)
Challenge			
S5.M2	Demonstrates the ability to recognize individual challenges and how to cope in a positive way, such as extending effort, asking for help or feedback, and/or modifying the tasks. (S5.M2.6)	Demonstrates the ability to generate positive strategies such as offering suggestions or assistance, leading or following others and providing possible solutions when faced with a group challenge. (S5.M2.7)	Demonstrates the ability to develop a plan of action and make appropriate decisions based on that plan when faced with an individual challenge. (S5.M2.8)

Self-Expression and Enjoyment			
S5.M3	Demonstrates the ability to describe how moving competently in a physical activity setting creates enjoyment. (S5.M3.6a) Demonstrates the ability to identify how self-expression and physical activity are related. (S5.M3.6b)	Demonstrates the ability to identify why self-selected physical activities create enjoyment. (S5.M3.7a) Demonstrates the ability to explain the relationship between self-expression and lifelong enjoyment through physical activity. (S5.M3.7b)	Demonstrates the ability to discuss how enjoyment could be increased in self-selected physical activities. (S5.M3.8a) Demonstrates the ability to identify and participate in an enjoyable activity that prompts individual self-expression. (S5.M3.8b)
Social Interaction			
S5.M4	Demonstrates respect for self and others in activities and games by following the rules, encouraging others and playing in the spirit of the game or activity. (S5.M4.6)	Demonstrates the importance of social interaction by helping and encouraging others, using positive talk and providing support to classmates. (S5.M4.7)	Demonstrates respect for self by asking for help and helping others in various physical activities. (S5.M4.8)

High School Grade- Level Outcomes

By the end of Grade 12, the learner will be able to:
o Demonstrate college and career readiness as demonstrated by the ability to plan and implement different types of personal fitness programs
o Demonstrate competency in two or more lifetime activities
o Describe key concepts associated with successful participation in physical activity
o Model responsible behavior while engaged in physical activity
o Engage in physical activities that meet the need for self-expression, challenge, social interaction and enjoyment

Note: Swimming skills and water-safety activities should be taught if facilities permit.

Outcomes for high school students have been organized into two levels:
o Proficient Competency indicates the minimum knowledge and skills that students must attain to be college or career ready
o Advanced Proficiency allows students to build on Proficient Competencies by augmenting knowledge and skills considered desirable for college or career readiness

Standard 1: *Students will demonstrate competency in a variety of motor skills and movement patterns.*

	Proficient Competency		**Advanced Competencies**
Lifetime Activities			
S1.H1	Demonstrates competency and/or refines activity-specific movement skills in 2 or more lifetime activities (outdoor pursuits, individual- performance activities, aquatics, net/wall games or target games). (S1.H1.L1)		Demonstrates the ability to refine activity-specific movement skills in 1 or more lifetime activities (outdoor pursuits, individual-performance activities, aquatics, net/wall games, or target games). (S1.H1.L2)
Dance and Rhythms			
S1.H2	Demonstrates competency in dance forms used in cultural and social occasions (e.g., weddings,		Demonstrates competency in a form of dance by

	parties), or demonstrates competency in 1 form of dance (e.g., ballet, modern, hip hop, tap). (S1.H2.L1)			choreographing a dance or by giving a performance. (S1.H2.L2)
Fitness Activities				
S1.H3	Demonstrates competency in 1 or more specialized skills in health-related fitness activities. (S1.H3.L1)			Demonstrates competency in 2 or more specialized skills in health-related fitness activities. (S1.H3.L2)

Standard 2: *Students will apply knowledge of concepts, principles, strategies, and tactics related to movement and performance.*

	Proficient Competency		**Advanced Competencies**
Movement Concepts, Principles and knowledge			
S2.H1	Demonstrates the ability to apply the terminology associated with exercise and participation in selected individual-performance activities, dance, net/wall games, target games, aquatics and/or outdoor pursuits appropriately. (S2.H1.L1)		Demonstrates the ability to identify and discuss the historical and cultural roles of games, sports and dance in a society. (S2.H1.L2)
S2.H2	Demonstrates the ability to use movement concepts and principles (e.g., force, motion, rotation) to analyze and improve performance of self and/or others in a selected skill. (S2.H2.L1)		Demonstrates the ability to describe the speed vs. accuracy trade-off in throwing and striking skills. (S2.H2.L2)
S2.H3	Demonstrates the ability to create a practice plan to improve performance for a self- selected skill. (S2.H3.L1)		Demonstrates the ability to identify the stages of learning a motor skill. (S2.H3.L2)

S2.H4	Demonstrates the ability to identify examples of social and technical dance forms. (S2.H4.L1)			Demonstrates the ability to compare similarities and differences in various dance forms. (S2.H4.L2)
S2.H5	Demonstrates the ability to use strategies and tactics effectively during game play in net/wall and/or target games. (S2.H5.L1)			Demonstrates the ability to apply strategies and tactics when analyzing errors in game play in net/wall and/or target games. (S2.H5.L2)

Standard 3: *Students will demonstrate the knowledge and skills to achieve and maintain a health-enhancing level of physical activity and fitness.*

	Proficient Competency			Advanced Competencies
Physical Activity Knowledge				
S3.H1	Demonstrates the ability to discuss the benefits of a physically active lifestyle as it relates to college or career productivity. (S3.H1.L1)			Demonstrates the ability to investigate the relationships among physical activity, nutrition and body composition. (S3.H1.L2)
	Demonstrates the ability to evaluate the validity of claims made by commercial products and programs pertaining to fitness and a healthy, active lifestyle. (S3.H2.L1)			Demonstrates the ability to analyze and apply technology and social media as tools for supporting a healthy, active lifestyle. (S3.H2.L2)
	Demonstrates the ability to identify issues associated with exercising in heat, humidity and cold. (S3.H3.L1)			Demonstrates the ability to apply rates of perceived exertion and pacing. (S3.H3.L2)

	Demonstrates the ability to evaluate activities that can be pursued in the local environment according to their benefits, social support network and participation requirements. (S3.H4.L1)		If the outcome was not attained in Level 1, it should be a focus in Level 2.
	Demonstrates the ability to evaluate risks and safety factors that might affect physical activity preferences throughout the life cycle. (S3.H5.L1)		Demonstrates the ability to analyze the impact of life choices, economics, motivation and accessibility on exercise adherence and participation in physical activity in college or career settings. (S3.H5.L2)
Engages in Physical Activity			
S3.H6	Demonstrates the ability to participate several times a week in a self-selected lifetime activity, dance or fitness activity outside of the school day. (S3.H6.L1)		Demonstrates the ability to create a plan, train for and participate in a community event with a focus on physical activity (e.g., 5K, triathlon, tournament, dance performance, cycling event). (S3.H6.L2)
Fitness Knowledge			
	Demonstrates appropriate technique on resistance training machines and with free weights. (S3.H7.L1)		Demonstrates the ability to design and implement a strength and conditioning program that develops balance in opposing muscle groups (agonist/antagonist) and supports a healthy, active lifestyle. (S3.H7.L2)

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

	Demonstrates the ability to relate physiological responses to individual levels of fitness and nutritional balance. (S3.H8.L1)		Demonstrates the ability to identify the different energy systems used in a selected physical activity (e.g., adenosine triphosphate and phosphocreatine, anaerobic glycolysis, aerobic). (S3.H8.L2)
	Demonstrates the ability to identify types of strength exercises (isometric, concentric, eccentric) and stretching exercises (static, proprioceptive neuromuscular facilitation (PNF), dynamic) for personal fitness development (e.g., strength, endurance, range of motion). (S3.H9.L1)		Demonstrates the ability to identify the structure of skeletal muscle and fiber types as they relate to muscle development. (S3.H9.L2)
	Demonstrates the ability to calculate target heart rate and apply that information to a personal fitness plan. (S3.H10.L1)		Demonstrates the ability to adjust pacing to keep heart rate in the target zone, using available technology (e.g., heart rate monitor), to self-monitor aerobic intensity. (S3.H10.L2)
Assessment and Program Planning			
	Demonstrates the ability to create and implement a behavior-modification plan that enhances a healthy, active lifestyle in college or career settings. (S3.H11.L1)		Demonstrates the ability to develop and maintain a fitness portfolio (e.g., assessment scores, goals for improvement, plan of activities for improvement, log of activities being done to reach goals, timeline for improvement). (S3.H11.L2)

	Demonstrates the ability to design a fitness program, including all components of health-related fitness, for a college student and/or an employee in the learner's chosen field of work. (S3.H12.L1)		Demonstrates the ability to analyze the components of skill-related fitness in relation to life and career goals and designs an appropriate fitness program for those goals. (S3.H12.L2)
Nutrition			
	Demonstrates the ability to design and implement a nutrition plan to maintain an appropriate energy balance for a healthy, active lifestyle. (S3.H13.L1		Demonstrates the ability to create a snack plan for before, during and after exercise that addresses nutrition needs for each phase. (S3.H13.L2)
Stress Management			
	Demonstrates the ability to identify stress-management strategies (e.g., mental imagery, relaxation techniques, deep breathing, aerobic exercise, meditation) to reduce stress. (S3.H14.L1)		Demonstrates the ability to apply stress-management strategies (e.g., mental imagery, relaxation techniques, deep breathing, aerobic exercise, meditation) to reduce stress. (S3.H14.L2)

Standard 4: *Students will exhibit responsible personal and social behavior that respects self and others.*

	Proficient Competency		**Advanced Competencies**
Personal responsibility			
S4.H1	Demonstrates the ability to employ effective self-management skills to analyze barriers and modify physical activity patterns appropriately, as needed. (S4.H1.L1)		Demonstrates the ability to accept differences between personal characteristics and the idealized body images and elite performance levels portrayed in various media. (S4.H1.L2)
Rules and Etiquette			

S4.H2	Demonstrates the ability to exhibit proper etiquette, respect for others and teamwork while engaging in physical activity and/or social dance. (S4.H2.L1)		Demonstrates the ability to examine moral and ethical conduct in specific competitive situations (e.g., intentional fouls, performance-enhancing substances, gambling, current events in sport). (S4.H2.L2)
Working with Others			
S4.H3	Demonstrates the ability to use communication skills and strategies that promote team or group dynamics. (S4.H3.L1)		Demonstrates the ability to assume a leadership role (e.g., task or group leader, referee, coach) in a physical activity setting. (S4.H3. L2)
S4.H4	Demonstrates the ability to solve problems and think critically in physical activity and/or dance settings, both as an individual and in groups. (S4.H4.L1)		Demonstrates the ability to accept others' ideas, cultural diversity and body types by engaging in cooperative and collaborative movement projects. (S4.H4.L2)
Safety			
S4.H5	Demonstrates the ability to apply best practices for participating safely in physical activity, exercise and dance (e.g., injury prevention, proper alignment, hydration, use of equipment, implementation of rules, sun protection). (S4.H5.L1)		If the learner did not attain the outcome in Level 1, it should be a focus in Level 2

Standard 5: *Students will recognize the value of physical activity for health, enjoyment, challenge, self-expression, and social interaction.*

	Proficient Competency		Advanced Competencies
Health			
S5.H1	Demonstrates the ability to analyze the health benefits of a self-selected physical activity. (S5.H1.L1)		If the learner did not attain the outcome in Level 1, it should be a focus in Level 2.
Challenge			
S5.H2	Challenge is a focus in Level 2.		Chooses an appropriate level of challenge to experience success and desire to participate in a self-selected physical activity. (S5.H2.L2)
Self-Expression and Enjoyment			
S5.H3	Demonstrates the ability to select and participate in physical activities or dance that meet the need for self-expression and enjoyment. (S5.H3.L1)		Demonstrates the ability to identify the uniqueness of creative dance as a means of self-expression. (S5.H3. L2)
Social Interaction			
S5.H4	Demonstrates the ability to identify the opportunity for social support in a self-selected physical activity or dance. (S5.H4.L1)		Demonstrates the ability to evaluate the opportunity for social interaction and social support in a self-selected physical activity or dance. (S5.H4.L2)

Connecticut State Department of Education
2021 Healthy and Balanced Living Curriculum Framework

Appendix A - Connecticut Physical Education Law

C.G.S Section 10-16b. Prescribed courses of study - (a) In the public schools the program of instruction offered shall include at least the following subject matter, as taught by legally qualified teachers, the arts; career education; consumer education; health and safety, including, but not limited to, human growth and development, nutrition, first aid, including cardiopulmonary resuscitation training in accordance with the provisions of section 10-16qq, disease prevention and cancer awareness, including, but not limited to, age and developmentally appropriate instruction in performing self-examinations for the purposes of screening for breast cancer and testicular cancer, community and consumer health, physical, mental and emotional health, including youth suicide prevention, substance abuse prevention, including instruction relating to opioid use and related disorders, safety, which shall include the safe use of social media, as defined in section 9-601, and may include the dangers of gang membership, and accident prevention; language arts, including reading, writing, grammar, speaking and spelling; mathematics; physical education; science, which may include the climate change curriculum described in subsection (d) of this section; social studies, including, but not limited to, citizenship, economics, geography, government, history and Holocaust and genocide education and awareness in accordance with the provisions of section 10-18f; computer programming instruction; and in addition, on at least the secondary level, one or more world languages and vocational education. For purposes of this subsection, world languages shall include American Sign Language, provided such subject matter is taught by a qualified instructor under the supervision of a teacher who holds a certificate issued by the State Board of Education. For purposes of this subsection, the "arts" means any form of visual or performing arts, which may include, but not be limited to, dance, music, art and theatre.

(b) If a local or regional board of education requires its pupils to take a course in a world language, the parent or guardian of a pupil identified as deaf or hard of hearing may request in writing that such pupil be exempted from such requirement and, if such a request is made, such pupil shall be exempt from such requirement.

(c) Each local and regional board of education shall on September 1, 1982, and annually thereafter at such time and in such manner as the Commissioner of Education shall request, attest to the State Board of Education that such local or regional board of education offers at least the program of instruction required pursuant to this section, and that such program of instruction is planned, ongoing and systematic.

(d) The State Board of Education shall make available curriculum materials and such other materials as may assist local and regional boards of education in developing instructional programs pursuant to this section. The State Board of Education, within available appropriations and utilizing available resource materials, shall assist and encourage local and regional boards of education to include: Holocaust and genocide education and awareness; (2) the historical events surrounding the Great Famine in Ireland; (3) African- American history; (4) Puerto Rican history; (5) Native American history; (6) personal financial management, including, but not limited to, financial literacy as developed in the plan provided under section 10-16pp; (7) training in cardiopulmonary resuscitation and the use of automatic external defibrillators; (8) labor history and law, including organized labor, the collective bargaining process, existing legal protections in the workplace, the history and economics of free market capitalism and entrepreneurialism, and the role of labor and capitalism in the development of the American and world economies; (9) climate change consistent with the Next Generation Science Standards; (10) topics approved by the state board upon the request of local or regional boards of education as part of the program of instruction offered pursuant to subsection (a) of this section; and (11) instruction relating to the Safe Haven Act, sections 17a-57 to 17a-61, inclusive. The Department of Energy and Environmental Protection shall be available to each local and regional board of education for the development of curriculum on climate change as described in this subsection

C.G.S. Section 221a High school graduation requirements. Student support and remedial services. Excusal from physical education requirement. Diplomas for certain veterans and certain persons assisting in the war effort during World War II. Student success plans. Connecticut State Seal of Biliteracy - Addresses the new graduation requirements for the incoming freshman class. Students must satisfactorily complete one credit in health and safety education and one credit in physical education and wellness in order to graduate in 2023. Only courses taken in grades nine to twelve, inclusive, and that are in accordance with the
state-wide subject matter content standards, adopted by the State Board of Education pursuant to section 10-4, shall satisfy the graduation requirements. For instance, participation in interscholastic or intramural sports would not meet the requirement for granting high school credit for physical education and wellness.

Appendix B - References

SHAPE America, https://www.shapeamerica.org/publications/resources/teachingtools/teachertoolbox/explorepe.aspx

Appendix C - Acronyms

ASCD	Association for Supervision and Curriculum Development
CDC	Center for Disease Control
CSDE	Connecticut State Department of Education
CSPAP	Comprehensive School Physical Activity Program
CTAHPERD	CT Association for Health, Physical Education, Recreation, and Dance
FITT	Frequency, Intensity, Time and Type
MVPA	Moderate to Vigorous Physical Activity
OSPI	Office of Superintendent of Public Instruction
PASS	Physically Active School Systems
SEL	Social Emotional Learning
SHAPE America	Society of Health and Physical Educators
WSCC	Whole School, Whole Community, Whole Child

Appendix D - Glossary of Terms

Cooperation/Teamwork: Teamwork is the cooperative effort by the members of a group to achieve a common goal, and cooperation is the act or practice of willingly working together toward a common purpose.

Competency: Competency is the capability to apply or use a set of related knowledge, skills, and abilities required to successfully perform "critical work functions" or tasks in a defined setting.

Critical Elements: Learning cues that call the learner's attention to key elements of a skill and project a clear visual image of a skill for the learner to sort out what they must do to perform a movement correctly.

Dance: Dance is the movement of the body in a rhythmic way, usually to music and within a given space, for the purpose of expressing an idea or emotion, releasing energy, or simply taking delight in the movement itself.

Educational Gymnastics: Educational Gymnastics is a component of an elementary physical education curriculum that emphasizes learning body management skills and problem solving through applying the movement framework. Student learning is individualized, and assessment is based on task accomplishments demonstrating creativity, effort and skill development

Etiquette: Etiquette is related to fair play and involves desirable standards of behavior and politeness in group settings.

FITT Principle: The FITT Principle (or formula) is a method of monitoring your exercise program. The acronym FITT outlines the key components of an effective exercise program. FITT stands for: Frequency, Intensity, Time & Type of exercise.

Invasion Games: An invasion game is the term used for any game where the aim is to attack an opponent's territory and score a goal or point. Usually consisting of teams of equal players these fast-paced games focus on teamwork, keeping possession, scoring and defending.

Locomotor Skill: A locomotor skill is a physical action that propels an individual from one place to another. This may mean moving forward, backward, or even upwards using certain skills.

Manipulative Skills: Manipulative skills, particularly, are those in which a person learns to handle objects with precision in accordance with speed and control. These skills mainly involve physical activities with the use of hand and body coordination to execute a task. Manipulative skills are basic to the development of sport skills; throwing, catching, bouncing, rolling, kicking, and striking (with and without an object).

Mature Pattern: Executing with efficiency the critical elements of the motor skill in authentic environments.

Movement concepts: Movement concepts are taught in conjunction with the skill themes. Movement concepts are the ideas used to modify or enrich the range and effectiveness of skill employment. Movement concepts include space awareness, effort, and relationships and describe how a skill is to be performed.

MVPA: Moderate to vigorous physical activity (MVPA) is a category of activity intensity that has been consistently shown to benefit and/or reduce the risk of many chronic disease states.

Nutrition: Nutrition is nourishment or energy that is obtained from food consumed or the process of consuming the proper amount of nourishment and energy.

Net and Wall Games: Net/Wall Games are activities in which players send an object towards a court or target area that an opponent is defending. The aim is to cause the object to land in the target area while making it difficult for the opponent to return the object.

Non-locomotor Skills: Non-locomotor skills are fundamental body movements that do not incorporate traveling. They are stability skills that include movements of limbs or body parts, and sometimes even the whole body.

Outdoor Activities: Outdoor activities are any leisure time activity which is being conducted outdoor where individuals engage themselves either physically or mentally from a range of activities for their personal satisfaction and enjoyment.

Physical Activity: Physical activity is defined as any bodily movement produced by skeletal muscles that requires energy expenditure.

Physical Fitness: Physical fitness is the ability to carry out daily tasks with vigor and alertness, without undue fatigue, and with ample energy to enjoy leisure-time pursuits and respond to emergencies.

Physical Literacy: Physical literacy is the ability to move with competence and confidence in a wide variety of physical activities in multiple environments that benefit the healthy development of the whole person.

Rhythm: Rhythm is a movement or procedure with uniform or patterned recurrence of a beat, accent, or the like.

Rules: Rules are instructions that tell you what you can do and what you are not allowed to do.

Safety: Safety in physical education involves having clear safety rules and procedures that prevent injuries and provides a secure learning environment including regulations that direct student behavior and that outline the expectations for handling sporting equipment safely.

Small-sided Games: Small-sided games are used to increase student success & participation, provide additional repetitions, and increase skill development and strategy application in game play. SSGs are great as a warm-up, lead up activity or can be a stand- alone lesson and allow you to use progressions, quickly assess all skill levels and check for understanding/application of concepts. **Social and Emotional Learning:** Social and emotional learning (SEL) is the process through which children and adults understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions.

Stress Management: Stress management encompasses techniques intended to equip a person with effective coping mechanisms for dealing with psychological stress.

Striking and Fielding Games: Striking/Fielding Games are activities in which players score points by striking an object and running to designated playing areas or prevent opponents from scoring by retrieving the object and returning it to stop the play.

Target Games: Target Games are activities in which players send an object toward a target while avoiding any obstacles. By playing these games, participants will learn the key skills and strategies for games such as Croquet, Golf, Archery, Bocci, Curling and Bowling.

Whole School, Whole Community, Whole Child (WSCC): The Whole School Whole Community, Whole Child (WSCC) model focuses on the child to align the common goals of both sectors to put into action a whole child approach to education. Whole School, Whole Community, Whole Child, or WSCC model, is CDC's framework for addressing health in schools.

Appendix E - Resources

- Connecticut State Department of Education
  https://portal.ct.gov/SDE/Physical-Education/Physical-Education

- Health and Wellness Organizations
  - [American Heart Association](#)
  - [American Cancer Society](#)
  - [American Diabetes Association](#)
  - [American Lung Association](#)

- Society of Health and Physical Educators (SHAPE) America
  https://www.shapeamerica.org/publications/resources/teachingtools/teachertoolbox/explorepe.aspx

- The Connecticut Association of Health, Physical Education, Recreation and Dance (CTAHPERD)
  https://ctahperd.org/

- The Connecticut Association of Administrators of Health and Physical Education (CAAHPE)
  https://caahpe.org/

- The National Association for Sport and Physical Education (NASPE) https://www.pgpedia.com/n/national-association-sport-and-physical-education

- The US President's Council on Fitness, Sports & Nutrition https://health.gov/our-work/nutrition-physical-activity/presidents-council