INTRODUCTION

The Arizona Health Education and Physical Education Standards Articulated by Grade Level provide a foundation for all students. These standards are well articulated across the grade spans. Concepts and skills that are critical to the understanding of important processes and relationships are emphasized.

The need to understand and use a variety of Health Education and Physical Education strategies in multiple contextual situations has never been greater. The need for physical activity and healthy behaviors continues to increase in all aspects of everyday life.

Educators can help students adopt and maintain healthy behaviors by using a standards-based approach to health education and physical education. The educator’s role includes teaching skills and functional information (essential concepts), helping students determine personal values that support healthy behaviors, helping students develop group norms that value a healthy lifestyle, and helping students develop the essential skills necessary to adopt, practice, and maintain health-enhancing behaviors.

The National Health Education and Physical Education Standards provide a framework for designing or selecting curricula. Specific content can be infused into the Standards and is determined by local education agencies.

BACKGROUND

The State Board of Education adopted the Health Education and Physical Education Standards in 1997. In 2000, performance objectives were added to support the implementation of this document. These standards supported schools in meeting the essential goal of helping students acquire the knowledge and skills to promote personal, family and community health.

RATIONALE

The revision of the Health Education and Physical Education Standards makes numerous important contributions for enhanced delivery of improved health education and physical education programs. This includes increased focus on education and behavior theory, inclusion of pre-k grades in health education, emphasis on assessment and an expanded call for collaboration partnerships and integrated use of technology. Implementation of the revised standards with a commitment to providing qualified teachers, adequate instructional time, and increased linkages to other school curricular areas significantly increases the likelihood that schools will provide high-quality health and physical education instruction to all young people.

METHODOLOGY

The Arizona Department of Education convened teams representing populations from around the state. These groupings were comprised of large and small schools, rural and
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urban schools, and were ethnically diverse. Included were classroom teachers, curriculum directors, Health Education and Physical Education teachers, and university faculty. The goal was to revise and articulate the Health and Physical Education Standards (pre)-K-12 to align with the National Standards documents.

The group met in February 2009 in Phoenix. After learning about the academic standards development process, participants reviewed the National Health Education and Physical Education documents and developed guiding principles for adapting the national standards for Arizona.

Participants developed strands, which parallel the national standards, and added concepts and performance objectives for the following grade spans: (pre)-Kindergarten-Grade 2, Grades 3-5, Grades 6-8, and Grades 9-12. Participants also developed examples to assist those charged with developing or selecting curricula and implementation that align with the standards.

The draft document was received by those who participated in the Health Standards review, as well as those who participated in the Physical Education Standards review process. Written comments were posted on-line and subsequently reviewed by a subgroup of the Health and Physical Education Standards group. The resultant draft was posted to the ADE web page for public comment in August of 2009 and regional public comment events were held in Window Rock, Flagstaff, Phoenix, Tucson, and Yuma.

After public comments were collected, organized, and categorized by grade level and topic, the revision teams met to determine what modifications to the standards document would be appropriate. These documents were then placed into the current form for state board of education approval.

ORGANIZATION OF THE HEALTH EDUCATION AND PHYSICAL EDUCATION STANDARDS

The Health Education and Physical Education Standards Articulated by Grade Span are divided into content strands.

Each strand is divided into concepts that broadly define the skills and knowledge that students are expected to know and be able to do. Under each concept are performance objectives (POs) that more specifically delineate the ideas to be taught and learned.

The comprehensive document (pre)-K-12 is designed so that teachers can read the performance objectives across grade spans to incorporate learning from previous, current, and future grade spans. The Health Education and Physical Education standards are separated into two separate documents. The Heath Education document covers grades (pre)-K-12, and the Physical Education document covers grades K-12. Viewing the Health Education and Physical Education Standards document from left to right helps the teacher to see the Health Education and Physical Education continuum across the grade levels. There is a purposeful clustering of performance objectives in order to emphasize certain key understandings. Every effort was made to eliminate repetitions. The intent was to build on the learning in previous grade levels, connect important ideas,
and highlight new content at each grade span. This supports students in developing new understandings and skills. Looking across each individual column enables a teacher to see the performance objectives that students are expected to know and be able to demonstrate at any grade level.

The order of the strands, concepts, and POs in the Health Education and Physical Education Standards document are not intended to be a checklist for Health Education and Physical Education instruction. Health Education and Physical Education concepts develop with a spiraling of ideas/skills that are interconnected and dependent on each other, and this is reflected in the standards document. Effective instruction often incorporates several performance objectives into an integrated experience of learning for the student.

New to the 2009 Health Education and Physical Education Standards is the development of more comprehensive grade span concepts. The format of these documents will support the implementation of the revised standards. The second column provides instructional support to teachers in the form of explanation and examples.