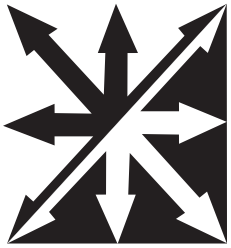


Health and Career Education Grade 1

Integrated Resource Package 2006

GBG 020

Copyright © 2006 Ministry of Education, Province of British Columbia.

Copyright Notice

No part of the content of this document may be reproduced in any form or by any means, including electronic storage, reproduction, execution, or transmission without the prior written permission of the Province.

Proprietary Notice

This document contains information that is proprietary and confidential to the Province. Any reproduction, disclosure, or other use of this document is expressly prohibited except as the Province may authorize in writing.

Limited Exception to Non-Reproduction

Permission to copy and use this publication in part, or in its entirety, for non-profit educational purposes within British Columbia and the Yukon, is granted to (a) all staff of BC school board trustees, including teachers and administrators; organizations comprising the Educational Advisory Council as identified by Ministerial Order; and other parties providing, directly or indirectly, educational programs to entitled students as identified by the *School Act*, R.S.B.C. 1996, c.412, or the *Independent School Act*, R.S.B.C. 1996, c.216, and (b) a party providing, directly or indirectly, educational programs under the authority of the Minister of the Department of Education for the Yukon Territory as defined in the *Education Act*, R.S.Y. 2002, c.61.

Acknowledgements

Acknowledgements 5

Preface

Preface 7

Introduction to Health and Career Education K to 7

Rationale 11
Goals for Health and Career Education K to 7 11
Curriculum Organizers 12
Suggested Timeframe 12
Health and Career Education K to 7: At a Glance 13
Overview of Health and Career Education K to 7 Topics 14

Considerations for Program Delivery

Alternative Delivery Policy 19
Addressing Local Contexts 19
Involving Parents and Guardians 19
Establishing a Positive Classroom Climate 20
Confidentiality 20
Inclusion, Equity, and Accessibility for All Learners 21
Connections to Other Curricula 21
Working with the School and Community 22
Working with the Aboriginal Community 22
Information And Communications Technology 23
Copyright and Responsibility 23
Using Role Play 24
Goal Setting and Decision Making 24

Prescribed Learning Outcomes

Introduction 27
Wording of Prescribed Learning Outcomes 27
Domains of Learning 27
Prescribed Learning Outcomes 30

Student Achievement

Introduction 33
Grade 1 38

Classroom Assessment Model

Introduction 47
Grade 1 52

Table of Contents

Learning Resources

Learning Resources 67
Health and Career Education K to 7 Grade Collections 68

Glossary

Glossary 71

Many people contributed their expertise to this document. The Project Co-ordinators were Kristin Mimick and Leslie Thompson of the Ministry of Education, working with other ministry personnel and our partners in education. We would like to thank all who participated in this process.

Health and Career Education K to 9 IRP Advisory Team

Marian Dodds	School District No. 39 (Vancouver)
Iris Kramer-Clarke	School District No. 47 (Powell River)
Kathy Laidlaw	School District No. 36 (Surrey)
Jadine Leclaire	School District No. 23 (Central Okanagan)
Joanne Matheson	School District No. 36 (Surrey)
Tina Pierik	School District No. 63 (Saanich)
Andrew Rapier	School District No. 37 (Delta – Independent Schools)
Corrine Susut	School District No. 61 (Victoria)
Connie Trepanier	School District No. 73 (Kamloops/Thompson)

Review Sites

School District No. 8 (Kootenay Lake)

School District No. 36 (Surrey)

School District No. 79 (Cowichan Valley)

This Integrated Resource Package (IRP) provides basic information teachers will require in order to implement Health and Career Education K to 7. Once fully implemented, this document will supersede the *Personal Planning K to 7 Integrated Resource Package* (1999).

The information contained in this document is also available on the Internet at www.bced.gov.bc.ca/irp/irp.htm

The following paragraphs provide brief descriptions of the components of the IRP.

Introduction

The Introduction provides general information about Health and Career Education K to 7, including special features and requirements.

Included in this section are
- a rationale for teaching Health and Career Education K to 7 in BC schools
- the curriculum goals
- descriptions of the curriculum organizers and suborganizers – groupings for prescribed learning outcomes that share a common focus
- an overview of the curriculum content

Considerations for Program Delivery

This section of the IRP contains additional information to help educators develop their school practices and plan their program delivery to meet the needs of all learners.

Prescribed Learning Outcomes

This section contains the *prescribed learning outcomes,* the legally required content standards for the provincial education system. The learning outcomes define the required attitudes, skills, and knowledge for each subject. They are statements of what students are expected to know and be able to do by the end of the indicated grade.

Student Achievement

This section of the IRP contains information about classroom assessment and measuring student achievement, including sets of specific achievement indicators for each prescribed learning outcome. Achievement indicators are statements that describe what students should be able to do in order to demonstrate that they fully meet the expectations set out by the prescribed learning outcomes. Achievement indicators are not mandatory; they are provided to assist in assessing how well students achieve the prescribed learning outcomes.

Also included in this section are key elements – descriptions of content that help determine the intended depth and breadth of the prescribed learning outcomes.

Classroom Assessment Model

This section contains a series of assessment units that address clusters of learning outcomes organized by topic or theme. The units have been developed by BC educators, and are provided to support classroom assessment. These units are suggestions only – teachers may use or modify the units as they plan for the implementation of this curriculum.

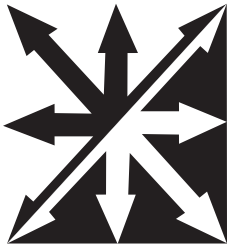
Each grade in the model contains an Assessment Overview Table intended to support teachers with their assessment practices, and the assessment units organized by topic – including the prescribed learning outcomes and a sequence of suggested assessment activities for each topic. Sample assessment instruments are also included for each grade.

Learning Resources

This section contains general information on learning resources, and provides a link to the titles, descriptions, and ordering information for the recommended learning resources in the Health and Career Education K to 7 Grade Collections.

Glossary

The glossary defines selected terms used in this Integrated Resource Package.



INTRODUCTION

This Integrated Resource Package (IRP) sets out the provincially prescribed curriculum for Health and Career Education Kindergarten to Grade 7 (HCE K to 7). The development of this IRP has been guided by the principles of learning:

- Learning requires the active participation of the student.
- People learn in a variety of ways and at different rates.
- Learning is both an individual and a group process.

In addition to these three principles, this document recognizes that British Columbia's schools include students of varied backgrounds, interests, abilities, and needs. Wherever appropriate for this curriculum, ways to meet these needs and to ensure equity and access for all learners have been integrated as much as possible into the learning outcomes, achievement indicators, and assessment activities.

The Health and Career Education K to 7 IRP is based on the recommendations arising from the *Personal Planning K to 7/Career and Personal Planning 8 to 12 Curriculum Review Report* (2001).

Health and Career Education K to 7, in draft format, was available for public review and response from December 2005 through February 2006. During the review period, three school districts were contracted to conduct an in-depth review of the draft IRP. Feedback from educators, students, parents, and other educational partners also informed the development of this document.

Rationale

The aim of Health and Career Education K to 7 is to provide students with the knowledge, skills, and attitudes necessary to be informed decision makers and to make healthy and safe choices. HCE K to 7 provides opportunities for students to

- learn and practise decision-making and goal-setting strategies
- learn about their own personal skills and interests and how these relate to a variety of school contexts, recreational activities, and future careers
- learn the importance of effective work habits and transferable skills
- think critically about a variety of health and safety issues
- acquire the skills necessary to develop and maintain healthy relationships
- develop safe attitudes and healthy practices in a variety of settings
- learn about the range of sources of support and information available to them on a variety of education, health, and safety issues

Health and Career Education K to 7 is designed to help students maintain, reinforce, and develop skills, attitudes, and behaviours that can enhance their personal well-being throughout their lives and prepare them to deal with a world of complex, ongoing change. The HCE K to 7 curriculum recognizes the inter-related areas of intellectual development, human and social development, and career development in creating healthy and active educated citizens.

Goals for Health and Career Education K to 7

The following goals reflect and are represented in the prescribed learning outcomes for Health and Career Education K to 7 in each curriculum organizer:

- Students will learn and apply processes for goal setting and decision making, and will become aware of the effects of their decisions on themselves and others.
- Students will learn about the range of sources of information and support available to them for a variety of health, safety, and education topics.
- Students will gain knowledge and skills necessary to make informed choices about their health and safety, and will develop an awareness of the consequences of their choices for themselves and others.

Curriculum Organizers

A curriculum organizer consists of a set of prescribed learning outcomes that share a common focus. The prescribed learning outcomes for Health and Career Education K to 7 are grouped under the following curriculum organizers and suborganizers:

Curriculum Organizers and Suborganizers
Goals and Decisions
Career Development
Health • ***Healthy Living*** • ***Healthy Relationships*** • ***Safety and Injury Prevention*** • ***Substance Misuse Prevention***

Note that these organizers and suborganizers are provided for the purpose of identifying prescribed learning outcomes; they are not intended to suggest a linear means of course delivery.

Goals and Decisions

This curriculum organizer provides opportunities for students to develop the skills that will allow them to take increasing responsibility for their decisions and to understand the consequences of those decisions.

The Goals and Decisions organizer includes the following topics:

- goal setting
- decision making
- support networks and sources of information and support in the school and community

Career Development

This organizer is designed to develop students' awareness of personal attributes, skills, and successes, and how these relate to their schoolwork, their co-curricular activities, and potential careers.

The Career Development organizer includes the following topics:

- personal attributes (e.g., skills, interests, accomplishments), including work habits and transferable skills; relating attributes to school, activities, and potential careers
- work and jobs, and ways of classifying them

Health

This organizer provides opportunities for students to gain the knowledge necessary for developing and maintaining a healthy and safe lifestyle. The Health organizer includes the following topics, arranged by suborganizer:

- Healthy Living – promoting physical and emotional health (including regular physical activity, emotional health strategies, healthy eating, and disease prevention), puberty, reproduction
- Healthy Relationships – caring and supportive behaviours in families, friendships, emotions, interpersonal skills, and recognizing and responding to bullying, stereotyping, and discrimination
- Safety and Injury Prevention – recognizing, avoiding, and responding to potentially unsafe situations at home, at school, on the road, in the community, and on the Internet, including situations of potential abuse or exploitation
- Substance Misuse Prevention – unsafe substances, influences, consequences, and strategies for avoiding and refusing substances such as alcohol, tobacco, and other drugs

Note: The Health curriculum organizer includes prescribed learning outcomes that some students and their parents or guardians may feel more comfortable addressing at home.

> For information about policy relating to alternative delivery, refer to www.bced.gov.bc.ca/policy/

Suggested Timeframe

Provincial curricula are developed in accordance with the amount of instructional time recommended by the Ministry of Education for each subject area. Teachers may choose to combine various curricula to enable students to integrate ideas and make meaningful connections.

For Health and Career Education, the Ministry of Education recommends a time allotment of 5% of the total instructional time for each school year. The Health and Career Education curriculum for Kindergarten is based on approximately 20-25 hours of instructional time to allow flexibility to address local needs. For each of Grades 1 to 7, this estimate is approximately 45-50 hours per year.

Health and Career Education K to 7: At a Glance

The aim of
Health and Career Education K to 7 is to
provide students with the knowledge, skills, and attitudes
necessary to be informed decision makers and to make healthy and safe choices.

Goals of Health and Career Education K to 7

- Students will learn and apply processes for goal setting and decision making, and will become aware of the effects of their decisions on themselves and others.
- Students will learn about the range of sources of information and support available to them for a variety of health, safety, and education topics.
- Students will gain knowledge and skills necessary to make informed choices about their health and safety, and will develop an awareness of the consequences of their choices for themselves and others.

Curriculum Organizers and Suborganizers

Goals and Decisions

- opportunities for goal setting and decision making
- goal-setting strategies
- decision-making models
- support networks

Career Development

- personal attributes (e.g., skills, interests, accomplishments); relating attributes to school and potential careers
- work and jobs, and ways of classifying them
- work habits and transferable skills

Health

Healthy Living

- characteristics of, influences on, and choices to promote physical and emotional health
- healthy eating practices
- physical, emotional, and social changes at puberty and adolescence, and respecting own and others' development rates
- human reproductive system
- ways to help prevent spread of diseases, including life-threatening diseases such as HIV/AIDS

Healthy Relationships

- ways family members care for and support each other
- qualities of friendships and healthy relationships
- interpersonal skills
- recognizing and responding to stereotyping, discrimination, and bullying
- safe and caring schools

Safety and Injury Prevention

- appropriate terminology for male and female private parts
- responding to inappropriate touching
- recognizing and avoiding potentially abusive or exploitative situations
- recognizing and avoiding potentially unsafe situations at home, at school, on the road, in the community, and on the Internet
- responding to emergencies

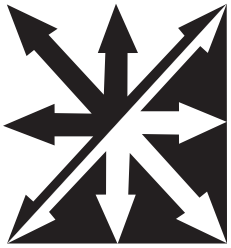
Substance Misuse Prevention

- recognizing unsafe substances
- consequences of substance misuse for self and others
- influences on use of tobacco, alcohol, and other drugs
- strategies for avoiding and refusing tobacco, alcohol, and other drugs

Overview of Health and Career Education K to 7 Topics

	Kindergarten	Grade 1	Grade 2	Grade 3
Goals and Decisions	• opportunities to make choices • sources of support at school	• reasons for setting goals • sources of support at school and in the community	• steps in goal setting • opportunities for making decisions	• using a goal-setting model • sources of support
Career Development	• personal skills and interests • jobs and responsibilities at home and school	• personal skills and interests • jobs and responsibilities at home and school	• ways of categorizing jobs • effective work habits	• attributes of role models • benefits of effective work habits
Health *Healthy Living*	• practices that contribute to health	• practices that contribute to health • preventing spread of diseases and conditions	• physical and emotional health practices • healthy eating practices • preventing spread of communicable diseases	• physical and emotional health practices • importance of healthy eating and regular physical activity • preventing spread of communicable diseases
Healthy Relationships	• thoughtful caring behaviours in families • expressing feelings appropriately • relationship behaviours	• how families provide support and nurturing • expressing feelings • friendship behaviours • dealing with interpersonal conflict	• communication skills • friendship strategies	• building positive relationships • nature and consequences of bullying
Safety and Injury Prevention	• terminology for private parts • appropriate and inappropriate touching • responding to inappropriate touches or confusing or uncomfortable situations • hazard identification and avoidance (home, school, road, and community) • accessing emergency services	• terminology for private parts • appropriate and inappropriate touching • responding to inappropriate touches or confusing or uncomfortable situations • safety guidelines (home, school, road, and community) • accessing emergency services	• avoidance and assertiveness related to potentially abusive situations • avoiding hazardous situations (home, school, streets, community)	• avoidance and assertiveness related to potentially abusive situations • importance of recognizing and avoiding hazardous situations
Substance Misuse Prevention	• safe and unsafe substances	• recognizing and refusing unsafe substances	• harm from unsafe substances • refusing substances	• negative effects of unsafe substances • avoiding substances

Grade 4	Grade 5	Grade 6	Grade 7	
• steps in decision making	• factors affecting decision making • benefits of personal support networks	• planning to support goals • influences on decision making and goal setting	• planning to achieve a specific goal • applying a decision making model	Goals and Decisions
• attribute inventory • importance of effective work habits	• types of work of interest • work habits and transferable skills	• relationship between attributes and work • transferable skills developed in and out of school	• career clusters • transferable skills	Career Development
• choices for emotional and physical health • choices for healthy eating • physical changes at puberty • communicable and non-communicable diseases	• factors influencing health decisions • healthy lifestyle planning • physical, emotional, and social changes at puberty • practices for preventing communicable and non-communicable diseases	• benefits of healthy lifestyles • human reproductive system • respecting developmental differences • life-threatening communicable diseases, including HIV/AIDS	• factors influencing health decisions • maintaining health during puberty • accessing community information and support • life-threatening nature of HIV/AIDS	Health *Healthy Living*
• interpersonal skills in relationships • strategies for responding to bullying behaviour	• assessing own interpersonal skills • safe and caring schools	• influences of peers on behaviour • stereotyping and discrimination • responding to stereotyping, discrimination, and bullying	• healthy and unhealthy relationships • influences on relationships • preventing stereotyping, discrimination, and bullying	*Healthy Relationships*
• lures and tricks used by potential abusers (including on the Internet) • abuse avoidance strategies • potential for injury in a range of settings	• safety guidelines for protection from abuse and exploitation • minimizing risks • social pressures and risk taking	• sources of help and support • Internet safety • responsible safety behaviour • responding to emergencies	• personal strategies to avoid abuse and exploitation • avoiding unsafe situations on road and in community	*Safety and Injury Prevention*
• negative effects of abusing tobacco, alcohol, and other drugs • strategies for preventing substance misuse	• factors contributing to use of tobacco, alcohol, and other drugs	• prevention and alternatives • consequences to self and others	• media and social influences on substance misuse • healthy alternatives	*Substance Misuse Prevention*



Considerations for Program Delivery

This section of the IRP contains additional information to help educators develop their school practices and plan their program delivery to meet the needs of all learners. Included in this section is information about

- Alternative Delivery policy
- addressing local contexts
- involving parents and guardians
- establishing a positive classroom climate
- confidentiality
- inclusion, equity, and accessibility for all learners
- connections to other subject areas
- working with the school and community
- working with the Aboriginal community
- information and communications technology
- copyright and responsibility
- using role play
- goal setting and decision making

Alternative Delivery Policy

The Alternative Delivery policy applies to this IRP.

The Alternative Delivery policy outlines how students, and their parents or guardians, in consultation with their local school authority, may choose means other than instruction by a teacher within the regular classroom setting for addressing prescribed learning outcomes contained in the Health curriculum organizer of the following curriculum documents:

- Health and Career Education K to 7, and Personal Planning K to 7 Personal Development curriculum organizer (until September 2008)
- Health and Career Education 8 and 9
- Planning 10

The policy recognizes the family as the primary educator in the development of children's attitudes, standards, and values, but the policy still requires that all prescribed learning outcomes be addressed and assessed in the agreed-upon alternative manner of delivery.

It is important to note the significance of the term "alternative delivery" as it relates to the Alternative Delivery policy. The policy does not permit schools to omit addressing or assessing any of the prescribed learning outcomes within the health and career education curriculum. Neither does it allow students to be excused from meeting any learning outcomes related to health. It is expected that students who arrange for alternative delivery will address the health-related learning outcomes and will be able to demonstrate their understanding of these learning outcomes.

In the Health and Career Education K to 7 curriculum, the Alternative Delivery policy applies only to the prescribed learning outcomes in the Health curriculum organizer, which includes the following four curriculum suborganizers:

- Healthy Living
- Healthy Relationships
- Safety and Injury Prevention
- Substance Misuse Prevention

This option is not intended for any of the other prescribed learning outcomes, and it is not intended for any other curriculum.

> For more information about policy relating to alternative delivery, refer to www.bced.gov.bc.ca/policy/

Addressing Local Contexts

The Health and Career Education K to 7 curriculum includes opportunities for individual teacher and student choice in the exploration of topics to meet certain learning outcomes, particularly in relation to the Health curriculum organizer. This flexibility allows educators to plan their programs to meet the particular requirements of their students and to respond to local contexts. It may be appropriate to allow for student input when selecting current and relevant topics.

Where specific topics have been included in the learning outcomes, the intent is for all students to have an opportunity to address these important issues. The inclusion of these topics is not intended to exclude any additional issues that may also be relevant for individual school communities.

Involving Parents and Guardians

The family is the primary educator in the development of students' attitudes and values. The school plays a supportive role by focussing on the prescribed learning outcomes in the Health and Career Education K to 7 curriculum. Parents and guardians can support, enrich, and extend the curriculum at home.

HCE K to 7 includes prescribed learning outcomes in the Health section of the curriculum that some students and their parents or guardians may feel more comfortable addressing at home. Some students and/or their parents may choose to opt for alternative delivery of these learning outcomes.

It is highly recommended that schools inform parents and guardians about the Health and Career Education K to 7 curriculum, and teachers (along with school and district administrators) may choose to do so by

- informing parents/guardians and students of the prescribed learning outcomes for the subject by sending home class letters, providing an overview during parent-teacher interviews, etc.
- responding to parent and guardian requests to discuss unit plans, learning resources, etc.
- informing parents and guardians of legislation and provincial and district policy related to options for addressing the Health curriculum organizer of this subject area

Establishing a Positive Classroom Climate

Teachers are responsible for setting and promoting a classroom climate in which students feel comfortable learning about and discussing topics in Health and Career Education K to 7. The following are some guidelines that may help educators establish and promote a positive classroom climate.

- Allow class members sufficient time and opportunities to become comfortable with each other before engaging in group discussion. It is important that the classroom climate encourage students to relate to one another in positive, respectful, and supportive ways. Be prepared to facilitate any potentially controversial discussions.
- Establish clear ground rules for class discussions that demonstrate respect for privacy, for diversity, and for the expression of differing viewpoints.
- Become familiar with
  - relevant legislation (e.g., *Human Rights Code; Child, Family and Community Services Act*)
  - relevant initiatives (e.g., *Safe, Caring and Orderly Schools: A Guide and Diversity in BC Schools: A Framework*)
  - provincial and district policies and protocols concerning topics such as disclosure related to child abuse, protection of privacy, and alternative delivery

Further information about these policies and initiatives is available online:

BC Handbook for Action on Child Abuse and Neglect
www.mcf.gov.bc.ca/child_protection/pdf/handbook_action_child_abuse.pdf

Safe, Caring and Orderly Schools
www.bced.gov.bc.ca/sco/

Diversity in BC Schools: A Framework
www.bced.gov.bc.ca/diversity/diversity_framework.pdf

Human Rights Code
www.qp.gov.bc.ca/statreg/stat/H/96210_01.htm

Child, Family and Community Services Act
www.qp.gov.bc.ca/statreg/stat/C/96046_01.htm

- Activities and discussion related to some of the topics in Health and Career Education K to 7 may evoke an emotional response from individual students. Inform an administrator or counsellor when any concern arises, and ensure students know where to go for help and support.
- Discussions related to sexual abuse prevention topics such as touching can result in a student disclosing an incident of abuse and/or neglect. Teachers should be aware of district protocols and provincial regulations for reporting and referrals.
- Ensure that any external groups or organizations making a presentation to students have met the district's guidelines for presenting. There should be a direct relationship between the content of the presentation and the prescribed learning outcomes. Review any materials they may use, especially handouts, for appropriateness.

Confidentiality

The *Freedom of Information and Protection of Privacy Act* (FOIPPA) applies to students, to school districts, and to all curricula. Teachers, administrators, and district staff should consider the following:

- Be aware of district and school guidelines regarding the provisions of FOIPPA and how it applies to all subjects, including Health and Career Education K to 7.
- Do not use students' Personal Education Numbers (PEN) on any assignments that students wish to keep confidential.

- Ensure students are aware that if they disclose personal information that indicates they are at risk for harm, then that information cannot be kept confidential.
- Inform students of their rights under FOIPPA, especially the right to have access to their own personal information in their school records. Inform parents of their rights to access their children's school records.
- Minimize the type and amount of personal information collected, and ensure that it is used only for purposes that relate directly to the reason for which it is collected.
- Inform students that they will be the only ones recording personal information about themselves unless they, or their parents, have consented to teachers collecting that information from other people (including parents).
- Provide students and their parents with the reason(s) they are being asked to provide personal information in the context of the Health and Career Education K to 7 curriculum.
- Inform students and their parents that they can ask the school to correct or annotate any of the personal information held by the school, in accordance with Section 29 of FOIPPA.
- Ensure students are aware that their parents may have access to the schoolwork they create only insofar as it pertains to students' progress.
- Ensure that any information used in assessing students' progress is up-to-date, accurate, and complete.

For more information about confidentiality, refer to www.mser.gov.bc.ca/privacyaccess/

Inclusion, Equity, and Accessibility for All Learners

British Columbia's schools include students of varied backgrounds, interests, and abilities. The Kindergarten to Grade 12 school system focusses on meeting the needs of all students. When selecting specific topics, activities, and resources to support the implementation of Health and Career Education K to 7, teachers are encouraged to ensure that these choices support inclusion, equity, and accessibility for all students. In particular, teachers should ensure that classroom instruction, assessment, and resources reflect sensitivity to diversity and incorporate positive role portrayals, relevant issues, and themes such as inclusion, respect, and acceptance.

Government policy supports the principles of integration and inclusion of students for whom English is a second language and of students with special needs. Most of the prescribed learning outcomes in this IRP can be addressed by all students, including those with special and/or ESL needs. Some strategies may require adaptations to ensure that those with special and/or ESL needs can successfully achieve the prescribed learning outcomes. Modifications can be made to the prescribed learning outcomes for students with Individual Education Plans.

For more information about resources and support for students with special needs, refer to www.bced.gov.bc.ca/specialed/

For more information about resources and support for ESL students, refer to www.bced.gov.bc.ca/esl/

Connections to Other Curricula

In the elementary years in particular, learning and instruction often take place in an integrated manner and do not always stay within the boundaries of a particular subject area. Teachers may look for ways to connect learning in HCE with any or all of the following provincially prescribed curricula:

- physical education – role of regular physical activity in a balanced, healthy lifestyle; choices people can make to be physically active; relationship between physical activity and healthy eating; goals for a physically active lifestyle; safety
- science – human body systems (Grade 5)
- social studies – group processes; leadership; families; purpose of rules; roles, rights, and responsibilities at home, at school, and in the community; needs and wants; decision making; work and jobs in the community

Whatever the approach used to facilitate connections among these subject areas, it is important to maintain the integrity of each individual discipline, and ensure that all prescribed learning outcomes are addressed.

All current provincial curricula are available on the Internet at www.bced.gov.bc.ca/irp/irp.htm

Working with the School and Community

This curriculum addresses a wide range of skills and understandings that students are developing in other areas of their lives. It is important to recognize that learning related to this curriculum extends beyond the HCE classroom.

School and district-wide programs – such as healthy schools, bike safety, anti-bullying, and alcohol and drug education – support and extend learning in Health and Career Education K to 7. Community organizations may also support the curriculum with locally developed learning resources, guest speakers, workshops, and field studies. Teachers may wish to draw on the expertise of these community organizations and members.

Bringing outside resource people into the classroom is an effective way of reinforcing content, emphasizing and practising listening skills, exposing students to different points of view, providing opportunities for discussion and debate, providing a departure point for writing, and making learning more concrete and relevant. A panel discussion also provides an opportunity for several viewpoints on an issue to be presented at the same time.

Speakers relevant for Health and Career Education K to 7 include health care professionals, police, community leaders, counsellors, elders, and other content experts.

Consider the following guidelines to help achieve a successful guest speaker activity:

- Determine the nature of the presentation (e.g., lecture, question-and-answer, debate, response to students' presentations, facilitating a simulation or case study). Ensure the guest speaker is clear about the purpose, the structure, and the time allotted. There should be a direct relationship between the content of the presentation and the prescribed learning outcomes. Review any materials the speaker may use, especially any handouts, for appropriateness.
- Be aware of any district guidelines for external presenters, and ensure that guests have met these guidelines.
- Where appropriate, have students take responsibility for contacting the speaker(s) beforehand and making any logistical arrangements.
- Provide time for students to prepare for the guest speaker or panel by formulating focus questions.
- Begin the guest speaker presentation with an introduction to the topic and end with a debrief.

Working with the Aboriginal Community

The Ministry of Education is dedicated to ensuring that the cultures and contributions of Aboriginal peoples in BC are reflected in all provincial curricula. To address these topics in the classroom in a way that is accurate and that respectfully reflects Aboriginal concepts of teaching and learning, teachers are strongly encouraged to seek the advice and support of local Aboriginal communities. As Aboriginal communities are diverse in terms of language, culture, and available resources, each community will have its own unique protocol to gain support for integration of local knowledge and expertise. To begin discussion of possible instructional and assessment activities, teachers should first contact Aboriginal education co-ordinators, teachers, support workers, and counsellors in their district who will be able to facilitate the identification of local resources and contacts such as elders, chiefs, tribal or band councils, Aboriginal cultural centres, Aboriginal Friendship Centres, and Métis or Inuit organizations.

In addition, teachers may wish to consult the various Ministry of Education publications available, including the "Planning Your Program" section of the resource, *Shared Learnings.* This resource was developed to help all teachers provide students with knowledge of, and opportunities to share experiences with, Aboriginal peoples in BC.

For more information about these documents, consult the Aboriginal Education web site: www.bced.gov.bc.ca/abed/welcome.htm

Information and Communications Technology

The study of information and communications technology is increasingly important in our society. Students need to be able to acquire and analyse information, to reason and communicate, to make informed decisions, and to understand and use information and communications technology for a variety of purposes. Development of these skills is important for students in their education, their future careers, and their everyday lives.

Literacy in the area of information and communications technology can be defined as the ability to obtain and share knowledge through investigation, study, instruction, or transmission of information by means of media technology. Becoming literate in this area involves finding, gathering, assessing, and communicating information using electronic means, as well as developing the knowledge and skills to use and solve problems effectively with the technology. Literacy also involves learning about the safe and responsible use of the technology, and a critical examination and understanding of the ethical and social issues related to the use of information and communications technology. When planning for instruction and assessment in Health and Career Education K to 7, teachers should provide opportunities for students to develop literacy in relation to information and communications technology sources, and to reflect critically on the role of these technologies in society.

Copyright and Responsibility

Copyright is the legal protection of literary, dramatic, artistic, and musical works; sound recordings; performances; and communications signals. Copyright provides creators with the legal right to be paid for their work and the right to say how their work is to be used. The law permits certain exceptions for schools (i.e., specific things permitted) but these are very limited, such as copying for private study or research. The copyright law determines how resources can be used in the classroom and by students at home.

In order to respect copyright it is necessary to understand the law. It is unlawful to do the following, unless permission has been given by a copyright owner:

- photocopy copyrighted material to avoid purchasing the original resource for any reason
- photocopy or perform copyrighted material beyond a very small part – in some cases the copyright law considers it "fair" to copy whole works, such as an article in a journal or a photograph, for purposes of research and private study, criticism, and review
- show recorded television or radio programs to students in the classroom unless these are cleared for copyright for educational use (there are exceptions such as for news and news commentary taped within one year of broadcast that by law have record-keeping requirements – see the web site at the end of this section for more details)
- photocopy print music, workbooks, instructional materials, instruction manuals, teacher guides, and commercially available tests and examinations
- show videorecordings that are not cleared for public performance
- perform music or do performances of copyrighted material for entertainment (i.e., for purposes other than a specific educational objective)
- copy work from the Internet without an express message that the work can be copied

Permission from or on behalf of the copyright owner must be given in writing. Permission may also be given to copy or use all or some portion of copyrighted work through a licence or agreement. Many creators, publishers, and producers have formed groups or "collectives" to negotiate royalty payments and copying conditions for educational institutions. It is important to know what licences are in place and how these affect the activities schools are involved in. Some licences may also require royalty payments that are determined by the quantity of photocopying or the length of performances. In these cases, it is important to assess the educational value and merits of copying or performing certain works to protect the school's financial exposure (i.e., only copy or use that portion that is absolutely necessary to meet an educational objective).

It is important for education professionals, parents, and students to respect the value of original thinking and the importance of not plagiarizing the work of others. The works of others should not be used without their permission.

For more information about copyright, refer to www.cmec.ca/copyright/indexe.stm

Using Role Play

Role play is an excellent strategy for Health and Career Education, particularly in addressing the personal and emotional issues present in the curriculum expectations. Role plays are ideal for examining various points of view, experiencing new situations, and allowing the interaction of people and the sharing of information.

Appropriate role-play scenarios to address the prescribed learning outcomes can be print or video based, and can be developed by teachers, created by students, derived from recommended learning resources, collected from news media, or found online.

For maximum effect, students should have clear guidance about the expectations and their roles before they proceed, sufficient time to interact and thoroughly explore the issues, and a full debriefing afterward.

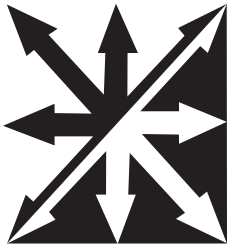
Goal Setting and Decision Making

One of the key themes in Health and Career Education K to 7 is informed decision making. Although there are many models of decision making and goal setting, the information in the chart provided here (**Steps in Goal Setting and Decision Making**) can be used as a starting point.

In assessing decision making and goal setting, it is important to focus on the **process** – whether the student demonstrates thoughtful and critical examination of the situation. In most cases, it is not appropriate to assess the goal or decision itself.

Steps in Goal Setting and Decision Making

Goal Setting	Decision Making
state purpose for goal – visualize and describe the ideal end product ↓ define the goal in specific, realistic, measurable, and timely terms ↓ break down long-term goals into manageable short-term steps ↓ create a timeline for each step in the goal ↓ identify potential challenges to meeting the goal, and identify ways to overcome those challenges ↓ identify sources of support for reaching the goal ↓ carry out the goal steps ↓ re-evaluate the goal periodically and adjust as necessary *(each of these steps can be revised and repeated as necessary)*	identify the decision or issue ↓ visualize the ideal result ↓ identify (brainstorm) a range of alternative solutions ↓ assess the pros and cons of each alternative (and their consequences) for self and others • in terms of logistics (time, effort, resources; cost-benefit) • in terms of personal values • in relation to societal norms ↓ select and articulate an informed decision • who and when • how to gauge success • resources to carry out the plan (e.g., personal, financial) ↓ apply the decision ↓ assess the results and modify the decision as required *(each of these steps can be revised and repeated as necessary)*



PRESCRIBED LEARNING OUTCOMES

Prescribed learning outcomes are content standards for the provincial education system; they are the prescribed curriculum. Clearly stated and expressed in measurable and observable terms, learning outcomes set out the required attitudes, skills, and knowledge – what students are expected to know and be able to do – by the end of the specified subject and grade.

Schools have the responsibility to ensure that all prescribed learning outcomes in this curriculum are addressed; however, schools have flexibility in determining how delivery of the curriculum can best take place.

It is expected that student achievement will vary in relation to the learning outcomes. Evaluation, reporting, and student placement with respect to these outcomes are dependent on the professional judgment and experience of teachers, guided by provincial policy.

Prescribed learning outcomes for Health and Career Education K to 7 are presented by grade and by curriculum organizer and suborganizer, and are coded alphanumerically for ease of reference; however, this arrangement is not intended to imply a required instructional sequence.

Wording of Prescribed Learning Outcomes

All learning outcomes complete the stem, "It is expected that students will …."

When used in a prescribed learning outcome, the word "including" indicates that any ensuing item **must be addressed**. Lists of items introduced by the word "including" represent a set of minimum requirements associated with the general requirement set out by the outcome. The lists are not necessarily exhaustive, however, and teachers may choose to address additional items that also fall under the general requirement set out by the outcome.

Conversely, the abbreviation "e.g.," (for example) in a prescribed learning outcome indicates that the ensuing items are provided for illustrative purposes or clarification, and are **not required**. Presented in parentheses, the list of items introduced by "e.g.," is neither exhaustive nor prescriptive, nor is it put forward in any special order of importance or priority. Teachers are free to substitute items of their own choosing that they feel best address the intent of the learning outcome.

Domains of Learning

Prescribed learning outcomes in BC curricula identify required learning in relation to one or more of the three domains of learning: cognitive, psychomotor, and affective. The following definitions of the three domains are based on Bloom's taxonomy.

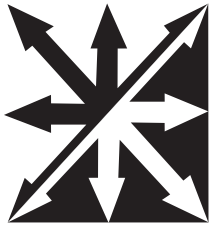
The **cognitive domain** deals with the recall or recognition of knowledge and the development of intellectual abilities. The cognitive domain can be further specified as including three cognitive levels: knowledge, understanding and application, and higher mental processes. These levels are determined by the verb used in the learning outcome, and illustrate how student learning develops over time.

- *Knowledge* includes those behaviours that emphasize the recognition or recall of ideas, material, or phenomena.
- *Understanding and application* represents a comprehension of the literal message contained in a communication, and the ability to apply an appropriate theory, principle, idea, or method to a new situation.
- *Higher mental processes* include analysis, synthesis, and evaluation. The higher mental processes level subsumes both the knowledge and the understanding and application levels.

The **affective domain** concerns attitudes, beliefs, and the spectrum of values and value systems.

The **psychomotor domain** includes those aspects of learning associated with movement and skill demonstration, and integrates the cognitive and affective consequences with physical performances.

Domains of learning and cognitive levels also form the basis of the Assessment Overview Tables provided for each grade in the Classroom Assessment Model.



Prescribed Learning Outcomes

Grade 1

GRADE 1

It is expected that students will:

GOALS AND DECISIONS

A1 identify reasons for setting goals (e.g., helps to identify steps, helps to focus on achievement, helps to identify personal accomplishments)

A2 identify sources of support for children while at school and in the community (e.g., teachers, elders, block parents, police officers)

CAREER DEVELOPMENT

B1 describe their personal skills and interests (e.g., things they are good at, things they like to do, things they've learned)

B2 describe a variety of jobs and responsibilities they have at home and at school

HEALTH

Healthy Living

C1 identify practices that contribute to health, including healthy eating, regular physical activity, and emotional health practices

C2 identify practices that help prevent the spread of communicable diseases and conditions (e.g., washing hands, covering sneezes, not sharing personal items)

Healthy Relationships

C3 identify ways families provide support and nurturing for growth and development (e.g., encouragement, advice, affection, sharing)

C4 demonstrate an understanding of appropriate and inappropriate ways to express feelings (e.g., appropriate – using "I feel" statements; inappropriate – name-calling, hitting)

C5 differentiate between positive and negative behaviours in friendships (e.g., positive – sharing, listening; negative – teasing, excluding)

C6 describe strategies for dealing with common interpersonal conflicts (e.g., taking turns, going to an adult or third party for help)

Safety and Injury Prevention

C7 use appropriate terminology to identify female and male private body parts

C8 differentiate between appropriate and inappropriate ways of being touched (e.g., appropriate – touches that feel welcome and safe, medical checkups; inappropriate – touches that hurt, touches to private parts)

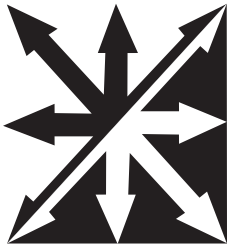
C9 identify ways to respond to inappropriate touches and confusing or uncomfortable situations, including
- saying "no" or "stop"
- calling out for help and getting away if possible
- telling a trusted adult and continuing to tell until someone listens and takes action
- not keeping a secret about the situation even if someone asks you to

C10 describe guidelines for safety in the home, at school, on the road, and in the community

C11 demonstrate an ability to access emergency services, including calling 911 and giving relevant information (e.g., name, location, and nature of problem)

Substance Misuse Prevention

C12 demonstrate an understanding of the concept of unsafe substances (e.g., any unknown substance, any substance from an unknown person, any substance used for other than its intended purpose)



STUDENT ACHIEVEMENT

This section of the IRP contains information about classroom assessment and student achievement, including specific achievement indicators that may be used to assess student performance in relation to each prescribed learning outcome. Also included in this section are key elements – descriptions of content that help determine the intended depth and breadth of prescribed learning outcomes.

Classroom Assessment and Evaluation

Assessment is the systematic gathering of information about what students know, are able to do, and are working toward. Assessment evidence can be collected using a wide variety of methods, such as

- observation
- student self-assessments and peer assessments
- quizzes and tests (written, oral, practical)
- samples of student work
- projects and presentations
- oral and written reports
- journals and learning logs
- performance reviews
- portfolio assessments

Assessment of student achievement is based on the information collected through assessment activities. Teachers use their insight, knowledge about learning, and experience with students, along with the specific criteria they establish, to make judgments about student performance in relation to prescribed learning outcomes.

Three major types of assessment can be used in conjunction with each other to support student achievement.

- Assessment **for** learning is assessment for purposes of greater learning achievement.
- Assessment **as** learning is assessment as a process of developing and supporting students' active participation in their own learning.
- Assessment **of** learning is assessment for purposes of providing evidence of achievement for reporting.

Assessment for Learning

Classroom assessment for learning provides ways to engage and encourage students to become involved in their own day-to-day assessment – to acquire the skills of thoughtful self-assessment and to promote their own achievement.

This type of assessment serves to answer the following questions:

- What do students need to learn to be successful?
- What does the evidence of this learning look like?

Assessment for learning is criterion-referenced, in which a student's achievement is compared to established criteria rather than to the performance of other students. Criteria are based on prescribed learning outcomes, as well as on suggested achievement indicators or other learning expectations.

Students benefit most when assessment feedback is provided on a regular, ongoing basis. When assessment is seen as an opportunity to promote learning rather than as a final judgment, it shows students their strengths and suggests how they can develop further. Students can use this information to redirect their efforts, make plans, communicate with others (e.g., peers, teachers, parents) about their growth, and set future learning goals.

Assessment for learning also provides an opportunity for teachers to review what their students are learning and what areas need further attention. This information can be used to inform teaching and create a direct link between assessment and instruction. Using assessment as a way of obtaining feedback on instruction supports student achievement by informing teacher planning and classroom practice.

Assessment as Learning

Assessment as learning actively involves students in their own learning processes. With support and guidance from their teacher, students take responsibility for their own learning, constructing meaning for themselves. Through a process of continuous self-assessment, students develop the ability to take stock of what they have already learned, determine what they have not yet learned, and decide how they can best improve their own achievement.

Although assessment as learning is student-driven, teachers can play a key role in facilitating how this assessment takes place. By providing regular opportunities for reflection and self-assessment, teachers can help students develop, practise, and become comfortable with critical analysis of their own learning.

Assessment of Learning

Assessment of learning can be addressed through summative assessment, including large-scale assessments and teacher assessments. These summative assessments can occur at the end of the year or at periodic stages in the instructional process.

Large-scale assessments, such as Foundation Skills Assessment (FSA) and Graduation Program exams, gather information on student performance throughout the province and provide information for the development and revision of curriculum. These assessments are used to make judgments about students' achievement in relation to provincial and national standards. There is no large-scale provincial assessment for Health and Career Education K to 7.

Assessment of learning is also used to inform formal reporting of student achievement.

> For Ministry of Education reporting policy, refer to www.bced.gov.bc.ca/policy/policies/student_reporting.htm

Assessment *for* Learning	Assessment *as* Learning	Assessment *of* Learning
Formative assessment *ongoing in the classroom*	Formative assessment *ongoing in the classroom*	Summative assessment *occurs at end of year or at key stages*
• teacher assessment, student self-assessment, and/or student peer assessment • criterion-referenced – criteria based on prescribed learning outcomes identified in the provincial curriculum, reflecting performance in relation to a specific learning task • involves both teacher and student in a process of continual reflection and review about progress • teachers adjust their plans and engage in corrective teaching in response to formative assessment	• self-assessment • provides students with information on their own achievement and prompts them to consider how they can continue to improve their learning • student-determined criteria based on previous learning and personal learning goals • students use assessment information to make adaptations to their learning process and to develop new understandings	• teacher assessment • may be either criterion-referenced (based on prescribed learning outcomes) or norm-referenced (comparing student achievement to that of others) • information on student performance can be shared with parents/guardians, school and district staff, and other education professionals (e.g., for the purposes of curriculum development) • used to make judgments about students' performance in relation to provincial standards

For more information about assessment for, as, and of learning, refer to the following resource developed by the Western and Northern Canadian Protocol (WNCP): *Rethinking Assessment with Purpose in Mind.*

This resource is available online at www.wncp.ca

In addition, the BC Performance Standards describe levels of achievement in key areas of learning (reading, writing, numeracy, social responsibility, and information and communications technology integration) relevant to all subject areas. Teachers may wish to use the Performance Standards as resources to support ongoing formative assessment in HCE.

BC Performance Standards are available at www.bced.gov.bc.ca/perf_stands/

Criterion-Referenced Assessment and Evaluation

In criterion-referenced evaluation, a student's performance is compared to established criteria rather than to the performance of other students. Evaluation in relation to prescribed curriculum requires that criteria be established based on the learning outcomes.

Criteria are the basis for evaluating student progress. They identify, in specific terms, the critical aspects of a performance or a product that indicate how well the student is meeting the prescribed learning outcomes. For example, weighted criteria, rating scales, or scoring guides (reference sets) are ways that student performance can be evaluated using criteria.

Wherever possible, students should be involved in setting the assessment criteria. This helps students develop an understanding of what high-quality work or performance looks like.

Criterion-referenced assessment and evaluation may involve these steps:

Step 1	Identify the prescribed learning outcomes and suggested achievement indicators (as articulated in this IRP) that will be used as the basis for assessment.
Step 2	Establish criteria. When appropriate, involve students in establishing criteria.
Step 3	Plan learning activities that will help students gain the attitudes, skills, or knowledge outlined in the criteria.
Step 4	Prior to the learning activity, inform students of the criteria against which their work will be evaluated.
Step 5	Provide examples of the desired levels of performance.
Step 6	Conduct the learning activities.
Step 7	Use appropriate assessment instruments (e.g., rating scale, checklist, scoring guide) and methods (e.g., observation, collection, self-assessment) based on the particular assignment and student.
Step 8	Review the assessment data and evaluate each student's level of performance or quality of work in relation to criteria.
Step 9	Where appropriate, provide feedback and/or a letter grade to indicate how well the criteria are met.
Step 10	Communicate the results of the assessment and evaluation to students and parents/guardians.

Key Elements

Key elements provide an overview of content in each curriculum organizer and suborganizer. They can be used to determine the expected depth and breadth of the prescribed learning outcomes.

Note that some topics appear at multiple grade levels in order to emphasize their importance and to allow for developmental learning.

Achievement Indicators

To support the assessment of provincially prescribed curricula, this IRP includes sets of achievement indicators in relation to each learning outcome.

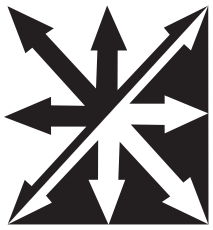
Achievement indicators, taken together as a set, define the specific level of attitudes demonstrated, skills applied, or knowledge acquired by the student in relation to a corresponding prescribed learning outcome. They describe what evidence to look for to determine whether or not the student has fully met the intent of the learning outcome. Since each achievement indicator defines only one aspect of the corresponding learning outcome, the entire set of achievement indicators should be considered when determining whether students have fully met the learning outcome.

In some cases, achievement indicators may also include suggestions as to the type of task that would provide evidence of having met the learning outcome (e.g., a constructed response such as a list, comparison, analysis, or chart; a product created and presented such as a report, drama presentation, poster, letter, or model; a particular skill demonstrated such as goal setting).

Achievement indicators support the principles of assessment for learning, assessment as learning, and assessment of learning. They provide teachers and parents with tools that can be used to reflect on what students are learning, as well as provide students with a means of self-assessment and ways of defining how they can improve their own achievement.

Achievement indicators are not mandatory; they are suggestions only, provided to assist in the assessment of how well students achieve the prescribed learning outcomes.

The following pages contain the suggested achievement indicators corresponding to each prescribed learning outcome for the Health and Career Education K to 7 curriculum. The achievement indicators are arranged by curriculum organizer and suborganizer for each grade; however, this order is not intended to imply a required sequence of instruction and assessment.



Student Achievement

Grade 1

Key Elements: Grade 1

Goals and Decisions

- reasons for setting goals (e.g., helps to identify steps, helps to focus on achievement, helps to identify personal accomplishments)
- sources of support at school and in the community (e.g., teachers, counsellors, block parents, elders, police officers, community members)

Career Development

- personal skills and interests (e.g., things they are good at, things they like to do, things they have learned to do)
- variety of jobs and responsibilities at home and school

Health

Healthy Living

- practices contributing to health, including
  - physical health practices (e.g., regular physical activity, adequate rest, regular medical and dental checkups, sun protection, getting fresh air, dressing appropriately for the weather)
  - healthy eating practices (e.g., eating a variety of foods from each food group, choosing healthy snacks, eating a healthy breakfast, drinking water)
  - emotional health practices (e.g., recognizing things that make you feel unique and special, giving compliments to friends, maintaining healthy relationships)
- ways to prevent spread of diseases and conditions (e.g., hand washing, not sharing water bottles or utensils, not sharing hats or hair accessories)

Healthy Relationships

- how families provide support and nurture for growth and development (e.g., affection, encouragement, advice, sharing)
- appropriate and inappropriate ways to express feelings
- positive and negative friendship behaviours and the feelings that result from each
- dealing with common interpersonal conflicts (e.g., taking turns, taking a time out, going to an adult or third party for help)

Safety and Injury Prevention

- appropriate terminology for male and female private parts
- appropriate and inappropriate touching
- responding to inappropriate touches and/or confusing and uncomfortable situations (e.g., saying "no" or "stop," getting away if possible, telling a trusted adult, not keeping it a secret)
- safety guidelines for home, school, road, and community (e.g., obeying rules, safety equipment such as seat belts and helmets, recognizing hazard symbols, not giving out personal information on the telephone or Internet, knowing how to access help, use of the Internet only with parent permission and supervision)
- accessing emergency services

Substance Misuse Prevention

- recognizing and refusing unsafe substances

Goals and Decisions

Prescribed Learning Outcomes	Suggested Achievement Indicators
It is expected that students will:	*The following set of indicators may be used to assess student achievement for each corresponding prescribed learning outcome.* *Students who have fully met the prescribed learning outcome are able to:*
A1 identify reasons for setting goals (e.g., helps to identify steps, helps to focus on achievement, helps to identify personal accomplishments)	❑ based on class activities and additional information, define goal (e.g., something that is to be achieved or is wanted; can be individual or group want) ❑ with teacher support, give reasons for setting goals (e.g., helps to identify the steps needed to achieve what is wanted, helps focus on achieving the goal, helps to recognize personal accomplishments)
A2 identify sources of support for children while at school and in the community (e.g., teachers, elders, block parents, police officers)	❑ create a list or chart of people in the school they can go to for information or assistance (e.g., teachers, assistants, counsellors, principals, playground monitors) ❑ create a list or chart of the people in their community that they can go to for information and assistance (e.g., police officers, block parents, elders, other community members, friends)

Career Development

Prescribed Learning Outcomes	Suggested Achievement Indicators
It is expected that students will:	*The following set of indicators may be used to assess student achievement for each corresponding prescribed learning outcome.* *Students who have fully met the prescribed learning outcome are able to:*
B1 describe their personal skills and interests (e.g., things they are good at, things they like to do, things they've learned)	❑ describe things they are good at ❑ describe things they like to do ❑ describe things they can do now that they couldn't do before (e.g., count to 100, print, ride a bike) ❑ describe things they may want to achieve or learn (e.g., a sport, play an instrument, cooking)
B2 describe a variety of jobs and responsibilities they have at home and at school	❑ name and describe the jobs they do at home (e.g., set the table, feed pet, pick up clothes) ❑ name and describe jobs they do at school (e.g., clean up classroom, follow directions, obey playground rules)

Health

Note: The Health curriculum organizer includes prescribed learning outcomes that some students and their parents or guardians may feel more comfortable addressing at home. Refer to ministry policy regarding alternative delivery: www.bced.gov.bc.ca/policy/

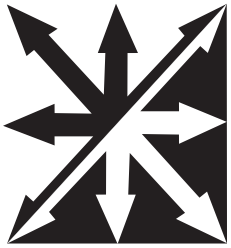
Prescribed Learning Outcomes	Suggested Achievement Indicators
It is expected that students will:	*The following set of indicators may be used to assess student achievement for each corresponding prescribed learning outcome.* *Students who have fully met the prescribed learning outcome are able to:*
Healthy Living C1 identify practices that contribute to health, including healthy eating, regular physical activity, and emotional health practices	❑ name a variety of activities that promote physical health (e.g., regular physical activity, adequate rest, healthy eating, regular medical and dental checkups, oral hygiene, sun protection, hygiene, getting fresh air, dressing appropriately for the weather) ❑ name a variety of healthy eating practices (e.g., eating a variety of foods from each food group in *Canada's Food Guide to Healthy Eating,* choosing healthy snacks, eating a healthy breakfast, drinking plenty of water) ❑ name a variety of emotional health practices (e.g., recognizing things you are good at, things you like to do, things that make you feel unique and special; giving compliments to others and receiving compliments from friends and family; celebrating goals you have achieved; maintaining healthy relationships)
C2 identify practices that help prevent the spread of communicable diseases and conditions (e.g., washing hands, covering sneezes, not sharing personal items)	❑ identify germs (viruses and bacteria) as invisible causes of communicable diseases ❑ name common childhood communicable diseases and conditions (e.g., colds, strep throat, chicken pox, lice) ❑ accurately identify ways in which germs and lice can spread (e.g., sneezing, coughing, unclean hands, physical contact, sharing water bottles, sharing clothing and personal items such as combs) ❑ list practices that help prevent the spread of germs and lice (e.g., washing hands often, covering mouth and nose when sneezing or coughing, disinfecting cuts; vaccinations; not sharing water bottles, not sharing hats or hair accessories; avoiding others' body fluids; not touching garbage such as used tissues, bandages, broken glass, needles, condoms; staying away from others when they are contagious, extra rest when sick)

Prescribed Learning Outcomes	Suggested Achievement Indicators
Healthy Relationships	
C3 identify ways families provide support and nurturing for growth and development (e.g., encouragement, advice, affection, sharing)	❑ identify thoughtful, caring behaviours in families (e.g., love, affection, helping, sharing, having fun, respectful communication, sharing interests, special care for people when they are sick, encouragement, advice) ❑ give examples of how family members can share responsibilities and tasks
C4 demonstrate an understanding of appropriate and inappropriate ways to express feelings (e.g., appropriate – using "I feel" statements; inappropriate – name-calling, hitting)	❑ use appropriate terminology to express feelings (e.g., "I feel left out" "I'm embarrassed" "I am grateful") ❑ show connections between feelings and the circumstances that cause them (e.g., "I'm excited because my birthday is tomorrow" "I feel frustrated because I can't climb the monkey bars") ❑ select and use appropriate strategies to express feelings (e.g., verbal communication, drawing a picture, body language) ❑ list inappropriate ways to express feelings (e.g., pinching, hitting, kicking objects, name-calling, intruding on others' personal space, inappropriate body language) ❑ give specific examples to describe how different people may have different reactions to the same situation
C5 differentiate between positive and negative behaviours in friendships (e.g., positive – sharing, listening; negative – teasing, excluding)	❑ identify ways of being a good friend (e.g., sharing, listening, helping, apologizing when necessary, including others, problem solving) ❑ identify behaviours that are negative or hurtful in friendships (e.g., teasing, lying, manipulating, excluding, ignoring) ❑ compare the feelings caused by positive and negative behaviours
C6 describe strategies for dealing with common interpersonal conflicts (e.g., taking turns, going to an adult for help)	❑ list situations where common interpersonal conflicts can arise (e.g., sharing, teasing, pushing, choosing an activity, taking turns, lining up) ❑ identify one or more possible solutions to specific interpersonal problems (e.g., taking turns, taking a break, communicating clearly about needs and wants, going to an adult or third party for help) ❑ describe which solution they think works the best for them in a specific situation, and explain why

Prescribed Learning Outcomes	Suggested Achievement Indicators
Safety and Injury Prevention	
C7 use appropriate terminology to identify female and male private body parts	❑ identify private body parts as being – parts that belong to you and shouldn't be touched by or shown to others except for health or hygiene reasons – parts that are covered by bathing suits or underwear ❑ on a diagram or model, use correct terminology to name the following parts of the female and male bodies: – nipples/breasts – vulva/vagina – penis – testicles – buttocks (bottom, bum)
C8 differentiate between appropriate and inappropriate ways of being touched (e.g., appropriate – touches that feel welcome and safe, medical checkups; inappropriate – touches that hurt, touches to private parts)	❑ identify different kinds of touches (e.g., hugs, hits) ❑ with teacher support, identify safe, welcome, and appropriate ways of being touched (e.g., hugs, hand-holding, medical checkups) ❑ with teacher support, identify inappropriate ways of being touched (e.g., any touches you don't like or want, touches that hurt you such as hitting or pinches, touches to private parts that are not for the purpose of hygiene or health, having photos taken of private body parts or looking at photos involving a person's private body parts, touches that someone asks you to keep secret)
C9 identify ways to respond to inappropriate touches and confusing or uncomfortable situations, including – saying "no" or "stop" – calling out for help and getting away if possible – telling a trusted adult and continuing to tell until someone listens and takes action – not keeping a secret about the situation even if someone asks you to	❑ with teacher support, identify ways to respond to inappropriate touches or any confusing or uncomfortable situations, including – saying "no" or "stop" – calling out for help – getting away if possible – telling a trusted adult and continuing to tell until someone listens and takes action – not keeping a secret about the situation even if someone asks you to ❑ identify people who could provide help and support when needed (e.g., parent, relative, teacher, counsellor, elder, children's help hotline, 911, block parent) ❑ recognize that abuse is never the fault of the victim

Prescribed Learning Outcomes	Suggested Achievement Indicators
C10 describe guidelines for safety in the home, at school, on the road, and in the community	❑ name guidelines for safety at home (e.g., not touching electrical outlets, not touching stovetops or playing with matches, not touching knives or sharp tools, having a family evacuation plan, use of Internet only with parent permission and supervision) ❑ name guidelines for safety at in the school (e.g., playground rules, knowing who to ask for help, earthquake procedures, fire drill procedures, reporting unsafe situations, know the school rules for safe Internet use) ❑ name guidelines for safety on the road (e.g., obeying traffic signs, wearing bike helmets, crossing at crosswalks, wearing seat belts, not playing in the street, being a safe passenger) ❑ name guidelines for safety in the community (e.g., walking with a buddy when possible, not going into any cars or homes alone, knowing tricks or lures that predators might use, not giving out personal information when using the telephone or Internet, avoiding and reporting infectious garbage, not approaching strange animals, ensuring that parents know your whereabouts at all times, using safety equipment and following safety rules for recreational activities) ❑ identify standard hazard symbols and their meanings (e.g., poison, flammable materials, danger) and demonstrate an understanding of the importance of avoiding items with these symbols
C11 demonstrate an ability to access emergency services, including calling 911 and giving relevant information (e.g., name, location, and nature of problem)	❑ name emergency services in their community (e.g., fire, police, ambulance, search and rescue) ❑ using a model/simulated phone, practise dialling 911 or other emergency numbers and reporting incidents (e.g., give name and location, describe situation clearly and calmly)

Prescribed Learning Outcomes	Suggested Achievement Indicators
Substance Misuse Prevention	
C12 demonstrate an understanding of the concept of unsafe substances (e.g., any unknown substance, any substance from an unknown person, any substance used for other than its intended purpose)	❑ use statements, drawings, or yes/no answers to demonstrate an understanding of the concept of unsafe substances, including the following: – that any unknown substance should be considered unsafe – that any substance from an unknown person should be considered unsafe – that all over-the-counter and prescription medicines and vitamins should be taken only under direct supervision of a trusted adult – that using a substance for other than its intended purpose is unsafe ❑ name a variety of substances in the home, school, and community environments that can be harmful to the body (e.g., any unknown substance, medicines prescribed to someone else or taken at the wrong dose or in combination with other medicines, gasoline, paint, second-hand smoke, alcohol, infectious garbage, products with universal hazardous products symbols) ❑ practise applying ways of avoiding unknown or harmful substances in various situations (e.g., saying no, moving away, seeking help from an adult, saying "I'm not allowed," saying "I don't want to," telling an adult if a confusing situation arises)



Classroom Assessment Model

The Classroom Assessment Model outlines a series of assessment units for Health and Career Education K to 7.

These units have been structured by grade level and theme. Collectively the units address all of the prescribed learning outcomes for each grade, and provide one suggested means of organizing, ordering, and delivering the required content. This organization is not intended to prescribe a linear means of delivery. Teachers are encouraged to reorder the learning outcomes and to modify, organize, and expand on the units to meet the needs of their students, to respond to local requirements, and to incorporate relevant recommended learning resources as applicable. (See the Learning Resources section later in this IRP for information about the recommended learning resources for Health and Career Education K to 7.) In addition, teachers are encouraged to consider ways to adapt assessment strategies from one grade to another.

Classroom Assessment and Evaluation

Teachers should consider using a variety of assessment instruments and techniques to assess students' abilities to meet the prescribed learning outcomes and to support assessment for, of, and as learning.

Tools and techniques for assessment in HCE K to 7 can include

- teacher assessment tools such as observation checklists, rating scales, and scoring guides
- self-assessment tools such as checklists, rating scales, and scoring guides
- peer assessment tools such as checklists, rating scales, and scoring guides
- journals or learning logs
- written tests, oral tests (true/false, multiple choice, short answer)
- questionnaires, worksheets
- portfolios
- student-teacher conferences

Assessment in HCE K to 7 can also occur while students are engaged in, and based on the product of, activities such as

- group and class discussions
- centre activities
- posters, collages, models, flip books, songs, poems
- brainstorms, clusters, webs
- charts, graphs
- role plays
- peer teaching
- debates
- literature studies
- research projects
- oral and multimedia presentations
- "self-portraits"

For more information about student assessment, refer to the section on Student Achievement, as well as to the Assessment Overview Tables in each grade of the Classroom Assessment Model.

Contents of the Classroom Assessment Model

Assessment Overview Tables

Assessment Overview Tables provide suggestions and guidelines for assessment of each grade of the curriculum. These tables identify the domains of learning and cognitive levels of the learning outcomes, along with a listing of suggested assessment activities and a suggested instructional time and weight for grading for each curriculum organizer.

Overview

Each grade includes an overview of the assessment units, containing

- a listing of the units, organized by theme and addressing learning outcomes from a combination of organizers and suborganizers; also listed here are the assessment instruments included for the grade
- a listing of Learning at Previous Grades, indicating any relevant topics based on prescribed learning outcomes from earlier grades of the same subject area; it is assumed that students will have already acquired this learning – if they have not, additional introductory instruction may need to take place before undertaking the suggested assessment outlined in the unit (note that some topics appear at multiple grade levels in order to emphasize their importance and to allow for reinforcement and developmental learning)
- a table that shows which prescribed learning outcomes are addressed by each unit in this grade of the Classroom Assessment Model

Prescribed Learning Outcomes

Each unit begins with a listing of the prescribed learning outcomes that are addressed by that unit. Collectively, the units address all the learning outcomes for that grade; some outcomes may appear in more than one unit.

Suggested Assessment Activities

Assessment activities have been included for each set of prescribed learning outcomes. Each assessment activity consists of two parts:

- Planning for Assessment – outlining the background information to explain the classroom context, opportunities for students to gain and practise learning, and suggestions for preparing the students for assessment
- Assessment Strategies – describing the assessment task, the method of gathering assessment information, and the assessment criteria as defined by the learning outcomes and achievement indicators

A wide variety of activities have been included to address a range of learning and teaching styles.

The assessment activities describe various tools and methods for gathering evidence of student performance.

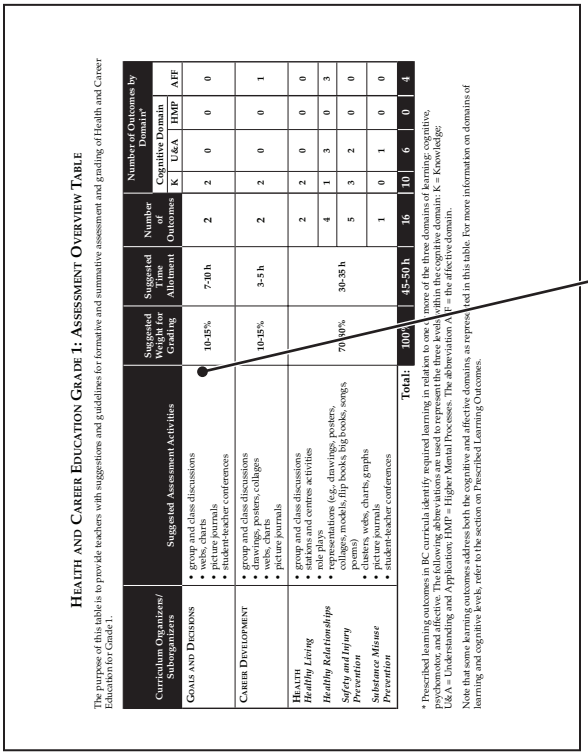
These assessment activities are suggestions only, designed to provide guidance for teachers in planning instruction and assessment to meet the prescribed learning outcomes.

Assessment Instruments

Sample assessment instruments have been included at the end of each grade, and are provided to help teachers determine the extent to which students are meeting the prescribed learning outcomes. These instruments contain criteria specifically keyed to one or more of the suggested assessment activities contained in the units.

USING THE CLASSROOM ASSESSMENT MODEL

The following two pages illustrate how all the elements of the Classroom Assessment Model relate to each other.



HEALTH AND CAREER EDUCATION GRADE 1: ASSESSMENT OVERVIEW TABLE

The purpose of this table is to provide teachers with suggestions and guidelines for formative and summative assessment and grading of Health and Career Education for Grade 1.

Curriculum Organizers/ Suborganizers	Suggested Assessment Activities	Suggested Weight for Grading	Suggested Time Allotment	Number of Outcomes	Number of Outcomes by Domain*		
					Cognitive Domain		Aff
					K	U&A	HMP	
GOALS AND DECISIONS	• group and class discussions • webs, charts • picture journals • student-teacher conferences	10-15%	7-10 h	2	2	0	0	0
CAREER DEVELOPMENT	• group and class discussions • drawings, posters, collages • webs, charts • picture journals	10-15%	3-5 h	2	2	0	0	1
HEALTH		70-80%	30-35 h					
Healthy Living	• group and class discussions • stations and centres activities • role plays			2	2	0	0	0
Healthy Relationships	• representations (e.g., drawings, posters, collages, models, flip books, big books, songs, poems)			4	1	3	0	3
Safety and Injury Prevention	• clusters, webs, charts, graphs • picture journals			5	3	2	0	0
Substance Misuse Prevention	• student-teacher conferences			1	0	1	0	0
	Total:	**100%**	**45-50 h**	**16**	**10**	**6**	**0**	**4**

* Prescribed learning outcomes in BC curricula identify required learning in relation to one or more of the three domains of learning: cognitive, psychomotor, and affective. The following abbreviations are used to represent the three levels within the cognitive domain: K = Knowledge; U&A = Understanding and Application; HMP = Higher Mental Processes. The abbreviation Aff = the affective domain.

Note that some learning outcomes address both the cognitive and affective domains, as represented in this table. For more information on domains of learning and cognitive levels, refer to the section on Prescribed Learning Outcomes.

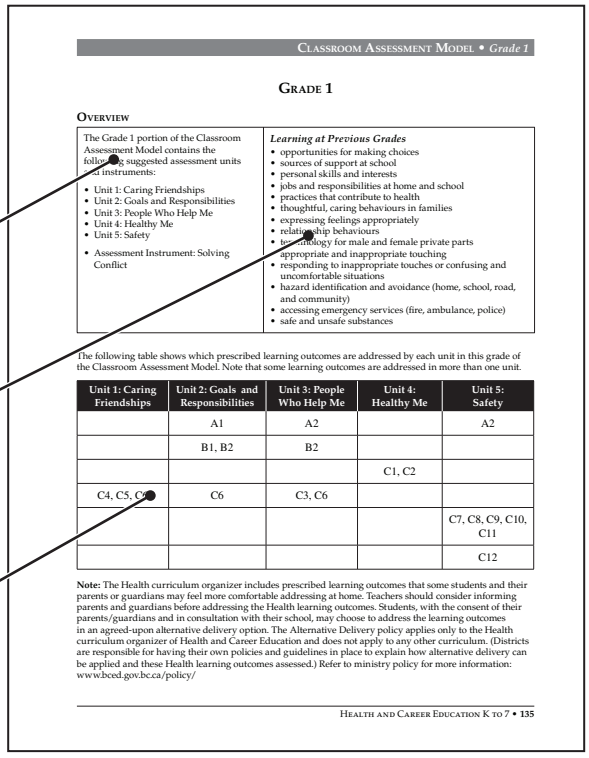
Assessment Overview Table

The Assessment Overview Table provides suggestions and guidelines for assessment of each grade of the curriculum.

Overview

The Overview includes the following information:

- a listing of the units included for the grade
- a listing of Learning at Previous Grades, indicating any relevant topics based on prescribed learning outcomes from earlier grades of the same subject; this information is provided to describe the prior knowledge, skills, and/or attitudes that students should have before undertaking the suggested assessment activities provided in the units
- a table showing which prescribed learning outcomes are addressed by each unit in this grade



GRADE 1

OVERVIEW

The Grade 1 portion of the Classroom Assessment Model contains the following suggested assessment units and instruments:

- Unit 1: Caring Friendships
- Unit 2: Goals and Responsibilities
- Unit 3: People Who Help Me
- Unit 4: Healthy Me
- Unit 5: Safety
- Assessment Instrument: Solving Conflict

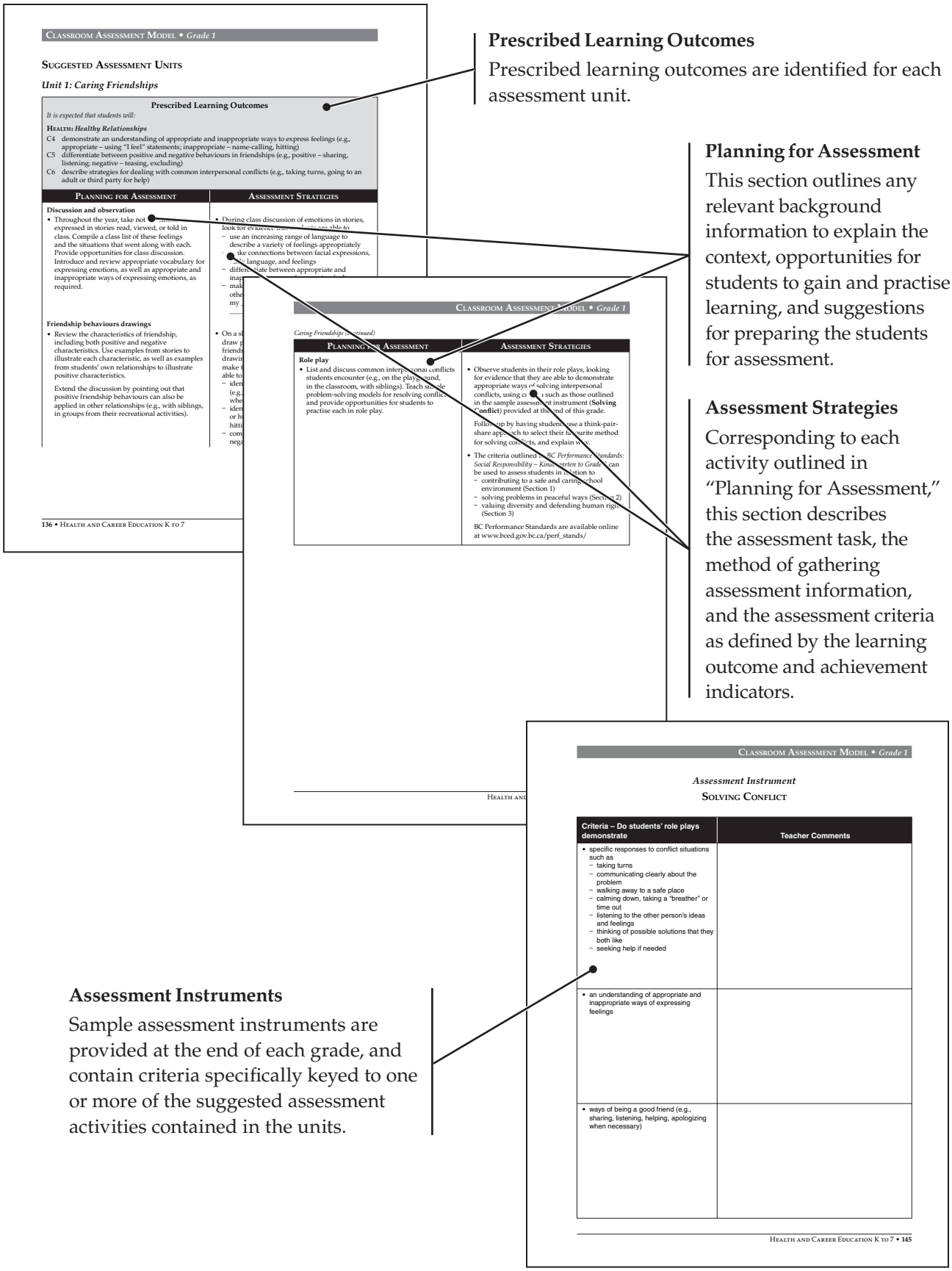
Learning at Previous Grades

- opportunities for making choices
- sources of support at school
- personal skills and interests
- jobs and responsibilities at home and school
- practices that contribute to health
- thoughtful, caring behaviours in families
- expressing feelings appropriately
- relationship behaviours
- terminology for male and female private parts
- appropriate and inappropriate touching
- responding to inappropriate touches or confusing and uncomfortable situations
- hazard identification and avoidance (home, school, road, and community)
- accessing emergency services (fire, ambulance, police)
- safe and unsafe substances

The following table shows which prescribed learning outcomes are addressed by each unit in this grade of the Classroom Assessment Model. Note that some learning outcomes are addressed in more than one unit.

Unit 1: Caring Friendships	Unit 2: Goals and Responsibilities	Unit 3: People Who Help Me	Unit 4: Healthy Me	Unit 5: Safety
	A1	A2		A2
	B1, B2	B2		
			C1, C2	
C4, C5, C6	C6	C3, C6		
				C7, C8, C9, C10, C11
				C12

Note: The Health curriculum organizer includes prescribed learning outcomes that some students and their parents or guardians may feel more comfortable addressing at home. Teachers should consider informing parents and guardians before addressing the Health learning outcomes. Students, with the consent of their parents/guardians and in consultation with their school, may choose to address the learning outcomes in an agreed-upon alternative delivery option. The Alternative Delivery policy applies only to the Health curriculum organizer of Health and Career Education and does not apply to any other curriculum. (Districts are responsible for having their own policies and guidelines in place to explain how alternative delivery can be applied and these Health learning outcomes assessed.) Refer to ministry policy for more information: www.bced.gov.bc.ca/policy/



Prescribed Learning Outcomes

Prescribed learning outcomes are identified for each assessment unit.

Planning for Assessment

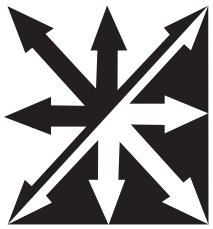
This section outlines any relevant background information to explain the context, opportunities for students to gain and practise learning, and suggestions for preparing the students for assessment.

Assessment Strategies

Corresponding to each activity outlined in "Planning for Assessment," this section describes the assessment task, the method of gathering assessment information, and the assessment criteria as defined by the learning outcome and achievement indicators.

Assessment Instruments

Sample assessment instruments are provided at the end of each grade, and contain criteria specifically keyed to one or more of the suggested assessment activities contained in the units.



Classroom Assessment Model

Grade 1

Health and Career Education Grade 1: Assessment Overview Table

The purpose of this table is to provide teachers with suggestions and guidelines for formative and summative assessment and grading of Health and Career Education for Grade 1.

Curriculum Organizers/ Suborganizers	Suggested Assessment Activities	Suggested Weight for Grading	Suggested Time Allotment	Number of Outcomes	Number of Outcomes by Domain*			
					Cognitive Domain			
					K	U&A	HMP	AFF
Goals and Decisions	• group and class discussions • webs, charts • picture journals • student-teacher conferences	10-15%	7-10 h	2	2	0	0	0
Career Development	• group and class discussions • drawings, posters, collages • webs, charts • picture journals	10-15%	3-5 h	2	2	0	0	1
Health *Healthy Living*	• group and class discussions • stations and centres activities • role plays • representations (e.g., drawings, posters, collages, models, flip books, big books, songs, poems) • clusters, webs, charts, graphs • picture journals • student-teacher conferences	70-80%	30-35 h	2	2	0	0	0
Healthy Relationships				4	1	3	0	3
Safety and Injury Prevention				5	3	2	0	0
Substance Misuse Prevention				1	0	1	0	0
	Total:	**100%**	**45-50 h**	**16**	**10**	**6**	**0**	**4**

* Prescribed learning outcomes in BC curricula identify required learning in relation to one or more of the three domains of learning: cognitive, psychomotor, and affective. The following abbreviations are used to represent the three levels within the cognitive domain: K = Knowledge; U&A = Understanding and Application; HMP = Higher Mental Processes. The abbreviation AFF = the affective domain.

Note that some learning outcomes address both the cognitive and affective domains, as represented in this table. For more information on domains of learning and cognitive levels, refer to the section on Prescribed Learning Outcomes.

Grade 1

Overview

The Grade 1 portion of the Classroom Assessment Model contains the following suggested assessment units and instruments: • Unit 1: Caring Friendships • Unit 2: Goals and Responsibilities • Unit 3: People Who Help Me • Unit 4: Healthy Me • Unit 5: Safety • Assessment Instrument: Solving Conflict	*Learning at Previous Grades* • opportunities for making choices • sources of support at school • personal skills and interests • jobs and responsibilities at home and school • practices that contribute to health • thoughtful, caring behaviours in families • expressing feelings appropriately • relationship behaviours • terminology for male and female private parts • appropriate and inappropriate touching • responding to inappropriate touches or confusing and uncomfortable situations • hazard identification and avoidance (home, school, road, and community) • accessing emergency services (fire, ambulance, police) • safe and unsafe substances

The following table shows which prescribed learning outcomes are addressed by each unit in this grade of the Classroom Assessment Model. Note that some learning outcomes are addressed in more than one unit.

Unit 1: Caring Friendships	Unit 2: Goals and Responsibilities	Unit 3: People Who Help Me	Unit 4: Healthy Me	Unit 5: Safety
	A1	A2		A2
	B1, B2	B2		
			C1, C2	
C4, C5, C6	C6	C3, C6		
				C7, C8, C9, C10, C11
				C12

Note: The Health curriculum organizer includes prescribed learning outcomes that some students and their parents or guardians may feel more comfortable addressing at home. Teachers should consider informing parents and guardians before addressing the Health learning outcomes. Students, with the consent of their parents/guardians and in consultation with their school, may choose to address the learning outcomes in an agreed-upon alternative delivery option. The Alternative Delivery policy applies only to the Health curriculum organizer of Health and Career Education and does not apply to any other curriculum. (Districts are responsible for having their own policies and guidelines in place to explain how alternative delivery can be applied and these Health learning outcomes assessed.) Refer to ministry policy for more information: www.bced.gov.bc.ca/policy/

SUGGESTED ASSESSMENT UNITS

Unit 1: Caring Friendships

Prescribed Learning Outcomes

It is expected that students will:

HEALTH: ***Healthy Relationships***

C4 demonstrate an understanding of appropriate and inappropriate ways to express feelings (e.g., appropriate – using "I feel" statements; inappropriate – name-calling, hitting)

C5 differentiate between positive and negative behaviours in friendships (e.g., positive – sharing, listening; negative – teasing, excluding)

C6 describe strategies for dealing with common interpersonal conflicts (e.g., taking turns, going to an adult or third party for help)

PLANNING FOR ASSESSMENT	ASSESSMENT STRATEGIES
Discussion and observation • Throughout the year, take note of emotions expressed in stories read, viewed, or told in class. Compile a class list of these feelings and the situations that went along with each. Provide opportunities for class discussion. Introduce and review appropriate vocabulary for expressing emotions, as well as appropriate and inappropriate ways of expressing emotions, as required.	• During class discussion of emotions in stories, look for evidence that students are able to – use an increasing range of language to describe a variety of feelings appropriately – make connections between facial expressions, body language, and feelings – differentiate between appropriate and inappropriate ways of expressing feelings – make connections between their own and others' feelings (e.g., "That's how I felt when my _____." "That's how _____ looked when ____.")
Friendship behaviours drawings • Review the characteristics of friendship, including both positive and negative characteristics. Use examples from stories to illustrate each characteristic, as well as examples from students' own relationships to illustrate positive characteristics. Extend the discussion by pointing out that positive friendship behaviours can also be applied in other relationships (e.g., with siblings, in groups from their recreational activities).	• On a sheet of paper folded in half, have students draw pictures depicting positive and negative friendship behaviours. Have them share their drawings, explaining how each situation would make them feel. Look for evidence that they are able to – identify specific ways of being a good friend (e.g., sharing, listening, helping, apologizing when necessary) – identify specific behaviours that are negative or hurtful in friendships (e.g., teasing, lying, hitting, excluding, ignoring) – compare the feelings caused by positive and negative behaviours

continued next page

Caring Friendships (continued)

Planning for Assessment	Assessment Strategies
Role play • List and discuss common interpersonal conflicts students encounter (e.g., on the playground, in the classroom, with siblings). Teach simple problem-solving models for resolving conflicts, and provide opportunities for students to practise each in role play.	• Observe students in their role plays, looking for evidence that they are able to demonstrate appropriate ways of solving interpersonal conflicts, using criteria such as those outlined in the sample assessment instrument (**Solving Conflict**) provided at the end of this grade. Follow up by having students use a think-pair-share approach to select their favourite method for solving conflicts, and explain why. • The criteria outlined in *BC Performance Standards: Social Responsibility – Kindergarten to Grade 3* can be used to assess students in relation to – contributing to a safe and caring school environment (Section 1) – solving problems in peaceful ways (Section 2) – valuing diversity and defending human rights (Section 3) BC Performance Standards are available online at www.bced.gov.bc.ca/perf_stands/

Unit 2: Goals and Responsibilities

Prescribed Learning Outcomes

It is expected that students will:

Goals and Decisions

A1 identify reasons for setting goals (e.g., helps to identify steps, helps to focus on achievement, helps to identify personal accomplishments)

Career Development

B1 describe their personal skills and interests (e.g., things they are good at, things they like to do, things they've learned)

B2 describe a variety of jobs and responsibilities they have at home and at school

Health: ***Healthy Relationships***

C6 describe strategies for dealing with common interpersonal conflicts (e.g., taking turns, going to an adult or third party for help)

Planning for Assessment	Assessment Strategies
Skills and interests diagram • Discuss the concepts of interests, strengths, and skills. Discuss how we know when something is a strength (e.g., something we do well) or an interest (e.g., something we like doing). Create a class list of strengths and skills of all the students in the class.	• Ask students to draw a picture of themselves holding three balloons that depict their current personal strengths or interests. Have them draw three balloons floating in the air that depict a strength or interest they would like to have. Provide opportunities for them to share and discuss their drawings with a partner.
School responsibilities booklet • As a class, discuss the word responsibility. What are the jobs and responsibilities that go along with being a student? Use questions such as the following to guide the discussion: – What are some of the jobs and responsibilities you have in the classroom? – What are some of the jobs and responsibilities you have on the playground? – What are some of the jobs and responsibilities you have in other parts of the school? – How do these jobs and responsibilities help make our classroom and school a better place?	• Have students make a booklet of pictures, collages, words, etc. that show the jobs and responsibilities students have at school. Encourage them to share their booklets with a partner. Observe students as they discuss their responsibilities, and look for evidence that they are able to – name and describe responsibilities they have in the classroom (e.g., clean up, listen to teacher's instructions, listen to other students in group discussions) – name and describe responsibilities they have on the playground (e.g., take turns on playground equipment, throw garbage away in the garbage can instead of littering) – name and describe responsibilities they have in other parts of the school (e.g., keep quiet in the library, walk in an orderly fashion in the hallways) – describe how these jobs and responsibilities help make the classroom and school better places (e.g., responsibilities for getting along with others and solving conflict appropriately)

continued next page

Goals and Responsibilities (continued)

Planning for Assessment	Assessment Strategies
Goals discussion • As a class, discuss and define goals. Use examples from stories and real-life experiences to help students understand what goals are and why people use them (e.g., to help identify ways to achieve something that is wanted).	• Have students share with a partner one goal they have set for themselves or that they think they would like to set for themselves. Look for evidence that students are able to accurately identify a goal and explain reasons for setting a goal.

Unit 3: People Who Help Me

Prescribed Learning Outcome

It is expected that students will:

Goals and Decisions

A2 identify sources of support for children while at school and in the community (e.g., teachers, elders, block parents, police officers)

Career Development

B2 describe a variety of jobs and responsibilities they have at home and at school

Health: ***Healthy Relationships***

C3 identify ways families provide support and nurturing for growth and development (e.g., encouragement, advice, affection, sharing)

C6 describe strategies for dealing with common interpersonal conflicts (e.g., taking turns, going to an adult or third party for help)

Planning for Assessment	Assessment Strategies
Model • As a class, brainstorm and discuss questions such as the following: – What does a family need? – What do family members do for one another? – What are all the jobs that need to be done in the family? (e.g., meals, shopping, cleaning, caring for children, caring for elderly, transportation, love and support, encouragement, advice) – What are the jobs and tasks you do in your family? (e.g., walking dog, making bed, sharing with siblings) As part of the class discussion, emphasize that caring and helping behaviours are important for all families.	• Have students make a model using toothpick figurines or modelling clay, with themselves in the middle and each family member around the outside. Have them use string to connect themselves in the model to each family member. Assist students in labelling each piece of string in their models, indicating what they do for each family member, and what each family member does for them. Look for evidence that they are able to describe what each family member does to help and care for each other.
Sources of support diagram • Invite school and community support people (e.g., teaching assistant, counsellor, principal, teacher-librarian, custodian, playground monitor, police officers, block parents) to introduce themselves to the class and explain what they do. Invite students to suggest other people in the community whom they can go to for support on a range of issues (e.g., parents and other family members, coaches, elders).	• Provide students with a template of concentric circles. Have students draw themselves in the centre circle, their immediate sources of support in the next ring out, and so on. Have them share their diagrams in a teacher-student conference. Look for evidence that they are able to identify specific sources of support, information, and assistance – in the school (e.g., teacher, assistants, counsellor, principal, playground monitor) – in the community (e.g., police officers, block parents, elders)

Unit 4: Healthy Me

Prescribed Learning Outcomes

It is expected that students will:

Health: ***Healthy Living***

C1 identify practices that contribute to health, including healthy eating, regular physical activity, and emotional health practices

C2 identify practices that help prevent the spread of communicable diseases and conditions (e.g., washing hands, covering sneezes, not sharing personal items)

Planning for Assessment	Assessment Strategies
Germ shield drawing • Review the definition of germs (viruses and bacteria that cause disease). Discuss other conditions that can be "spread," such as lice. As a class, brainstorm and discuss various ways these diseases and conditions are spread, and ways people can help prevent the spread of germs and lice.	• Have students create a picture of themselves within a shield – such as a knight in a suit of armour or a turtle in a shell – showing at least three different ways that they can shield themselves from germs and lice (e.g., washing hands, covering sneezes, not sharing hats or hair accessories, avoiding others' body fluids, staying away from others when they are contagious, extra rest when sick, disinfecting cuts).
Healthy Me booklet • Over the course of the year, use a range of videos, stories, web sites, games, demonstrations, centres, field trips, discussions, and handouts to teach students about various aspects of healthy living, including – regular physical activity – healthy eating practices – emotional health practices (e.g., doing things they like to do, using positive self-talk) – sleep and rest – disease prevention practices – regular medical and dental checkups – sun protection	• Provide students with worksheets or templates for creating pages in a Healthy Me booklet depicting aspects of healthy living. Students can include pages depicting healthy living activities such as – engaging in regular, enjoyable physical activity – eating a variety of foods from the four food groups in *Canada's Food Guide to Healthy Eating,* choosing healthy snacks, eating a healthy breakfast – drinking enough water – getting adequate rest and sleep – using positive self-talk (e.g., giving themselves praise for things they do well, taking pride in challenges they have overcome) – engaging in enjoyable activities – dressing appropriately for the weather – getting regular medical and dental checkups – using practices to avoid spread of germs and lice (e.g., washing hands often, covering mouth and nose when sneezing or coughing, not sharing water bottles, not sharing hats or hair accessories such as hair ties or combs) Provide opportunities for students to share their booklets with a partner on a regular basis. Assist them in labelling each page with statements that complete the stem "The page shows me being healthy because I am ____."

Unit 5: Safety

Prescribed Learning Outcomes

It is expected that students will:

Goals and Decisions

A2 identify sources of support for children while at school and in the community (e.g., teachers, elders, block parents, police officers)

Health: ***Safety and Injury Prevention***

C7 use appropriate terminology to identify female and male private body parts
C8 differentiate between appropriate and inappropriate ways of being touched (e.g., appropriate – touches that feel welcome and safe, medical checkups; inappropriate – touches that hurt, touches to private parts)
C9 identify ways to respond to inappropriate touches and confusing or uncomfortable situations, including
- saying "no" or "stop"
- calling out for help and getting away if possible
- telling a trusted adult and continuing to tell until someone listens and takes action
- not keeping a secret about the situation even if someone asks you to

C10 describe guidelines for safety in the home, at school, on the road, and in the community
C11 demonstrate an ability to access emergency services, including calling 911 and giving relevant information (e.g., name, location, and nature of problem)

Health: ***Substance Misuse Prevention***

C12 demonstrate an understanding of the concept of unsafe substances (e.g., any unknown substance, any substance from an unknown person, any substance used for other than its intended purpose)

Planning for Assessment	Assessment Strategies
Hazard identification • Take students on a tour of the school ground. Identify and discuss potential hazards. Discuss safety rules and guidelines for potential hazards, including proper use of equipment, boundaries, common potential for injuries, and foreign objects (e.g., infectious garbage, strangers, strange animals). Discuss what to do in each situation. Identify people who can give help and support (e.g., playground supervisors, custodians). Repeat the exercise using locations or simulations of other hazardous areas (e.g., kitchen, traffic intersections, community playgrounds, wilderness areas, electrical substations).	• Display photographs of various locations (e.g., school grounds, home kitchen, traffic intersections, shopping mall). Ask students in pairs to mark the photographs with stickers identifying potential hazards. Ask students to talk about why they put the sticker there, and to explain what they should do to avoid that particular hazard. Look for evidence that students are able to identify potential hazards and their corresponding safety guideline in each location. Follow up by having students work in groups to create tableaux depicting a specific safety guideline (e.g., earthquake response procedures, fire drill procedures, not touching stovetops or playing with matches, not going into strangers' cars or homes, not approaching strange animals).

continued next page

Safety (continued)

Planning for Assessment	Assessment Strategies
Safety symbols identification • Use visuals to discuss and explain common symbols that help identify cautions and dangers. Include – hazardous materials symbols (e.g., poison, corrosive, flammable, explosive) – common traffic symbols (e.g., stop, red, green, yellow, pedestrian crossing) – other safety symbols (e.g., caution, slippery when wet, exit, do not enter, no trespassing, electrical hazard, block parent, tsunami warning)	• Use flash cards of symbols representing common hazards, and ask students to identify what they represent. Look for evidence that students are able to accurately identify how each symbol reflects ways to avoid hazards and prevent injury at home, at school, on the road, and in the community.
Safe and unsafe substances diagram • Display examples of safe and unsafe containers, some with labels, some with no labels, some in different situations or contexts (e.g., offered by a stranger or an older student, found on the playground, found in a garbage). As a class, discuss the concept that unlabelled, unknown, or unsure is always to be considered unsafe. Reiterate that some substances are safe if used under adult supervision (e.g., vitamins, prescription medication), but unsafe if used any other way (e.g., taking too many vitamins, medication from a stranger or prescribed to someone else). Review and discuss what students should do if they are offered or encounter any unsafe substance (e.g., hand signal, saying "No, thank you, I am not allowed," repeating saying no, moving away, finding help). Discuss people they can go to for help when someone offers them an unsafe substance.	• Have students create a diagram using a traffic light analogy, depicting safe (green), safe if use is controlled (yellow), not safe or dangerous (red). Have students fill in their diagram with at least three substances (as discussed in class) in each category. Students' diagrams should also include a stick figure with speech balloons depicting at least two different ways of responding to or refusing unsafe substances.
People Who Can Help big book • Provide opportunities for students to role play and practise different ways of getting help in various situations. For example, students can practise – getting help from a block parent – phoning 911 and reporting an incident	• As a class, create a big book of people and organizations who can help in unsafe situations (e.g., parents, teachers, children's help hotline, 911, school nurse, trusted adults, block parent, playground supervisor). Ask students to select one person, and role play asking for assistance in a particular situation. Look for evidence that students are able to – recognize the person who can help – explain the problem in a clear way (e.g., give name and location, describe situation clearly)

continued next page

Safety (continued)

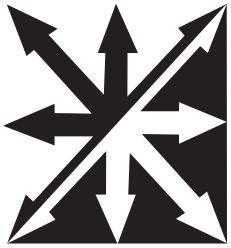
Planning for Assessment	Assessment Strategies
Worksheet • Use models or pictures to illustrate how "private parts" are body parts covered by bathing suits. Review the correct terminology for male and female body parts, including nipples, vulva/vagina, penis, testicles, and buttocks/bottom.	• Provide students with models or pictures and ask them to point to and name the various body parts. Look for evidence that students are able to – correctly identify private body parts – use appropriate terminology to name private body parts
Guided questions • Discuss the difference between safe and unsafe secrets, using specific examples (e.g., safe – surprise parties, birthday gifts; unsafe – when you or someone else is being touched in an inappropriate way). Read each example to the class, and ask students to categorize each secret as either safe or unsafe, by a show of hands or thumbs up or down. Emphasize that they should never keep unsafe secrets, no matter who asks them to. Review with students the people they can go to for help if they or someone they know is being touched inappropriately. Advise students to discuss this with their parents, and identify specific examples for their own families (e.g., a particular aunt or uncle, location of block parent closest to their home).	• Ask questions such as the following to assess students' understanding of personal safety issues such as private body parts, secrets, and touching: – When might it be okay for someone to touch your private body parts? (students' responses could include examples such as a doctor during a checkup, parent helping you to keep clean) – Who are some people you could ask for help if someone was touching you in an inappropriate way? (students' responses could include examples such as parents, teachers, elders, block parents, police officers, children's help hotline)
Teacher-led discussion • In a class discussion circle, review the difference between touches that make us feel good (e.g., hugs, pats on the back) and touches we don't like (e.g., hits, touches to private parts). Remind students that some touches may be safe even if they hurt (e.g., getting a shot from a nurse, having a parent untangle your hair). Discuss the concept that some touches may be appropriate or inappropriate depending on the context (e.g., a hug from a friend can be good but a hug from someone you don't know very well might feel uncomfortable; not everyone likes being hugged). Use puppets or models to role play different kinds of touches, how each touch might make a child feel, and appropriate responses to unsafe touches. (Note that you may wish to have the puppets go behind a blanket and use words only when illustrating touches to private body parts.)	• Observe students as they participate in discussions about responses to touches, noting the extent to which they are able to – recognize unsafe situations – identify appropriate responses to unsafe, abusive, or potentially abusive situations (e.g., saying "no" or "stop," getting away, telling a trusted adult and continuing to tell until someone listens, not keeping it a secret even if someone asks you to, state rules such as "no one can touch my private parts except to keep me clean and healthy") – make suggestions about what to do next – ask relevant questions – use appropriate terminology for male and female private body parts

Note: Discussions of touching can result in a student disclosing an incident of child abuse and/or neglect. Teachers should be aware of district protocols and provincial regulations for reporting and referrals. For information about reporting protocol, refer to the *BC Handbook for Action on Child Abuse and Neglect* – available online at www.mcf.gov.bc.ca/child_protection/pdf/handbook_action_child_abuse.pdf

Assessment Instrument

Solving Conflict

Criteria – Do students' role plays demonstrate	Teacher Comments
• specific responses to conflict situations such as – taking turns – communicating clearly about the problem – walking away to a safe place – calming down, taking a "breather" or time out – listening to the other person's ideas and feelings – thinking of possible solutions that they both like – seeking help if needed	
• an understanding of appropriate and inappropriate ways of expressing feelings	
• ways of being a good friend (e.g., sharing, listening, helping, apologizing when necessary)	



LEARNING RESOURCES

This section contains general information on learning resources, and provides a link to the titles, descriptions, and ordering information for the recommended learning resources in the Health and Career Education K to 7 Grade Collections.

What Are Recommended Learning Resources?

Recommended learning resources are resources that have undergone a provincial evaluation process using teacher evaluators and have Minister's Order granting them provincial recommended status. These resources may include print, video, software and CD-ROMs, games and manipulatives, and other multimedia formats. They are generally materials suitable for student use, but may also include information aimed primarily at teachers.

Information about the recommended resources is organized in the format of a Grade Collection. A Grade Collection can be regarded as a "starter set" of basic resources to deliver the curriculum. In many cases, the Grade Collection provides a choice of more than one resource to support curriculum organizers, enabling teachers to select resources that best suit different teaching and learning styles. Teachers may also wish to supplement Grade Collection resources with locally approved materials.

How Can Teachers Choose Learning Resources to Meet Their Classroom Needs?

Teachers must use either

- provincially recommended resources

  OR
- resources that have been evaluated through a local, board-approved process

Prior to selecting and purchasing new learning resources, an inventory of resources that are already available should be established through consultation with the school and district resource centres. The ministry also works with school districts to negotiate cost-effective access to various learning resources.

What Are the Criteria Used to Evaluate Learning Resources?

The Ministry of Education facilitates the evaluation of learning resources that support BC curricula, and that will be used by teachers and/or students for instructional and assessment purposes. Evaluation criteria focus on content, instructional design, technical considerations, and social considerations.

> Additional information concerning the review and selection of learning resources is available from the ministry publication, *Evaluating, Selecting and Managing Learning Resources: A Guide* (Revised 2002)
> www.bced.gov.bc.ca/irp/resdocs/esm_guide.pdf

What Funding is Available for Purchasing Learning Resources?

As part of the selection process, teachers should be aware of school and district funding policies and procedures to determine how much money is available for their needs. Funding for various purposes, including the purchase of learning resources, is provided to school districts. Learning resource selection should be viewed as an ongoing process that requires a determination of needs, as well as long-term planning to co-ordinate individual goals and local priorities.

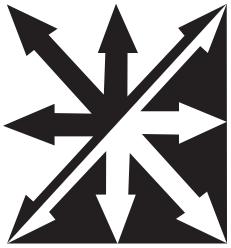
What Kinds of Resources Are Found in a Grade Collection?

The Grade Collection charts list the recommended learning resources by media format, showing links to the curriculum organizers and suborganizers. Each chart is followed by an annotated bibliography. Teachers should check with suppliers for complete and up-to-date ordering information. Most suppliers maintain web sites that are easy to access.

Health and Career Education K to 7 Grade Collections

The Grade Collections for Health and Career Education K to 7 include newly recommended learning resources as well as relevant resources previously recommended for prior versions of the Health and Career Education K to 7 curriculum (previously Personal Planning K to 7). The ministry updates the Grade Collections on a regular basis as new resources are developed and evaluated.

Please check the following ministry web site for the most current list of recommended learning resources in the Grade Collections for each IRP:
www.bced.gov.bc.ca/irp_resources/lr/resource/gradcoll.htm



GLOSSARY

This glossary defines selected terms used in this Integrated Resource Package as they pertain to Health and Career Education K to 7. It is provided for clarity only, and is not intended to be an exhaustive list of terminology related to the topics in this curriculum.

A

active transportation

Includes cycling, skating (e.g., skateboards, inline skates, scooters), and walking. Regular use of active transportation is one strategy for maintaining a healthy, active lifestyle.

B

body fluids

Includes blood, saliva, urine, mucus, vomit, semen, vaginal fluid, amniotic fluid, etc. through which viruses can be transmitted. Different communicable diseases can be contracted through different specific body fluids and different methods of contact (e.g., ingestion, via a needle, through the eyes or nose, sexual contact).

bullying

A pattern of repeated aggressive behaviour with negative intent, directed from one person to another where there is a power imbalance. Bullying may be physical (e.g., hitting, punching, shoving), verbal (e.g., name-calling, teasing, coercion, threats), or social (e.g., alienation, gossiping, inciting hatred). Bullying is distinct from occasional interpersonal conflict in that bullying is generally repeated over time, is intended to hurt, and usually involves a power imbalance. See also *cyber-bullying*.

C

career clusters

A categorization system of occupations, usually with related skills and interests. At these grades, it is not expected that career sectors will be a formal classification (e.g., the Canadian National Occupation Classification – NOC). Instead, careers can be classified according to categories such as

- type of industry (e.g., education, medical, service, agriculture)
- location of work (e.g., indoors, outdoors; urban, rural; factory, office building, store, lab)
- type of work (e.g., hands-on, paperwork, research, outdoors)
- related personal interests (e.g., music, writing, sports, technology, science)

cyber-bullying

Also known as "Internet bullying" or "digital bullying," refers to harassment that takes place using an electronic medium. Cyber-bullying can occur through e-mail, instant messaging, text messaging, chat rooms, online voting booths, or other electronic means.

D

discrimination

When a person – on the basis of her or his sex, age, sexual orientation, race, religion, or physical or mental ability – suffers disadvantages or is denied opportunities available to other members of society.

diversity

Refers to the ways in which we differ from each other. Some of these differences may be visible (e.g., race, ethnicity, sex, age, ability), while others are less visible (e.g., culture, ancestry, language, religious beliefs, sexual orientation, socioeconomic background). Honouring diversity is based on the principle that, if these differences are acknowledged and utilized in a positive way, it is of benefit to the quality of our learning and working environments.

G

germ

A term for micro-organisms (including viruses and bacteria) that cause diseases.

H

health

Refers to physical, social, and emotional (mental) well-being. Optimum health is a state of complete well-being in each dimension, and is not merely the absence of disease or infirmity.

healthy eating

Eating according to the recommendations from *Canada's Food Guide to Healthy Eating.* Concepts of healthy eating include

- eating the recommended number of servings from each of the four food groups (recommendations by age, sex, and activity level)
- choosing a variety of healthy options within each food group (e.g., whole grains, a range of colours of vegetables and fruit, low-fat milk products, lean meat and alternatives)
- awareness of appropriate serving size
- eating according to hunger and fullness cues

HIV/AIDS

HIV stands for human immuno-deficiency virus. It is the virus that causes AIDS (acquired immuno-deficiency syndrome), a serious and potentially fatal disease for which there are treatments but currently no cure. HIV is spread through contact with infected *body fluids*.

N

nutrients

The components of food needed by the body for health and development. Nutrients include macronutrients (carbohydrates, fats, proteins, and fibre) and micronutrients (vitamins, minerals, and phytochemicals or antioxidants).

P

peer pressure

Verbal or non-verbal active or passive social influences (e.g., words, behaviours) that are intended to affect a person's attitudes or actions. Although peer pressure is traditionally thought to be a negative influence, it can also have positive effects (e.g., encouragement to quit smoking or to avoid harmful gossip).

personal attributes

Skills, knowledge, interests, aptitudes, values, etc. relevant for education and career planning.

S

safe and caring schools

A safe and caring school is one that creates a respectful environment, free of bullying and discrimination, where all feel welcome and accepted, and where all feel free to learn and to speak openly. (For the purposes of this curriculum, the term "safe and caring schools" does not refer to the structural safety of the school building and grounds.)

stereotype

Preconceived notions about a person or group of people based on their characteristics such as their sex, age, sexual orientation, race, religion, or physical or mental ability.

substance misuse

Also known as "substance abuse" or "problematic substance use," refers to the use of any substance (e.g., tobacco, alcohol, prescription drugs, illegal drugs, inebriants such as solvents) in a way that is harmful to a person's well-being – physically, socially, mentally, or financially.

T

transferable skills

Refers to abilities and attributes – such as communication, numeracy, problem solving, positive attitude, time management, adaptability, continuous skill development, creativity, and teamwork – that can contribute to success in any education, recreation, or work setting. Transferable skills are also sometimes referred to as "employability skills" or "work habits."