Connecticut Association of Administrators of Health and Physical Education

Secondary School Reform bill 5489
Testimony
3/15/10

The Connecticut Association of Administrators of Health and Physical Education supports Secondary School Reform bill 5489 to include a graduation requirement of a 1.0 health credit. The administrators association strongly urges you to consider the importance of requiring health education as a graduation requirement for the following reasons:

1. Connecticut is one of fourteen states that do not require health as a graduation requirement; however, school districts are mandated to offer the prescribed course of study for health and safety education to students in grades K-12 in a planned, ongoing and systematic program taught by legally qualified teachers (C.G.S. 10-16b). Only 62% of Connecticut school districts require health education for graduation. Nationally, 32 states have a high school graduation credit requirement in health education with nine states requiring one credit or more. (CCSSO, Key State Education policies on PK-12 Education, 2004).

2. Two other state mandates require that alcohol, nicotine, tobacco and drugs be taught every year to every student in grades K-12 ,and HIV/AIDS education (C.G.S. 10-19), and develop curriculum in family life education as defined in C.G.S. 10-16e.

3. A 1.0 graduation requirement ensures adherence of Connecticut General Statutes10-16(b), 10-19, and 10-16e. Districts need to develop, implement and evaluate standards based health curriculum based on Connecticut's Healthy and Balanced Living Curriculum Framework and the Coordinated School Health Model to address teen high-risk behaviors such as alcohol and tobacco use and sexual behaviors identified by the Connecticut School Health Survey, 2007.

4. Health education addresses mental, social and emotional health and supports federal expectations for schools regarding their obligations to differentiate instruction to reach all learners. The No Child Left Behind Act (NCLB) of 2001 aims to ensure academic achievement of all students. The revisions to NCLB encourage implementation of research-based interventions to promote success of all students. School districts are encouraged to use the Response to Intervention (RTI) process to address this. Connecticut has embraced basic RTI principals by encouraging districts to use Connecticut's Scientific Research Based Intervention model (SRBI). Emphasis on providing students with behavioral interventions using the SRBI model is directly linked to health education.

5. Prominent health and mental health concerns of students such as behavioral issues, asthma, obesity, unplanned teen pregnancy and depression remain contributing factors to loss of instructional time including absenteeism, school dropouts, and chronic illness. Research consistently indicates that student health status and student achievement are directly connected and that student health is one of the most significant influences on learning and achievement. http://wg.thesociety.org

6. The American Cancer Society, the American Diabetes Association, and the American Heart Association believe that health education is a critical component of effective school health interventions. "New evaluation of health education research shows promise of having a positive impact on academic achievement as it has on health outcomes. Well-designed, well-delivered school-based health interventions can enable students to prevent disease and injury." (American Association for Health Education, http://www.aahperd.org/aahe/, 2009)

7. The inclusion of a health graduation requirement aligns with First Lady Michelle Obama's national campaign to fight childhood obesity, an epidemic health issue that will increase national health care costs if it is not addressed.

8. The inclusion of health education as a graduation requirement will increase our eligibility for Race to the Top funds.

9. Health literacy is the capacity of an individual to obtain, interpret, and understand basic health information and services and the competence to use such information and services in ways which are health-enhancing. Health literate individuals use knowledge in ways that transform unhealthy individuals into healthy, productive citizens. The Connecticut Association of Administrators of Health and Physical Education is in collaboration with the Healthy Teens Coalition and believe that a health graduation requirement will promote the development of a future generation of health literate citizens.

10. The inclusion of health education as a graduation requirement will assist with the development of 21st Century Skills in Health and Wellness identified by the Connecticut State Department of Education necessary for entering postsecondary education.

Health Education is an integral part of the educational process for every student.
The recommendation to include health education as a graduation requirement is vital to the development of the whole child. The inclusion of a 1.0 credit in health education will ensure that school districts provide high quality, planned, ongoing and systematic skills-based instruction in order to maintain and improve student's total health and overall wellness, prevent disease, and reduce health-related risk behaviors. You, as leaders in our state, have the responsibility to ensure that our youth receives the best education. Their future is in your hands and your decision to include health education as a graduation requirement is paramount to the prevention of rising health care costs and the reduction of epidemic health issues in our state.

Respectfully,

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