

Provides Opportunities to Make Positive Connections With Influential Others

Description: An effective curriculum links students to influential persons who affirm and reinforce health-promoting norms, attitudes, values, beliefs, and behaviors. Instructional strategies build on protective factors that promote healthy behaviors and enable students to avoid or reduce health risk behaviors by engaging peers, parents, families, and other positive adult role models in student learning. Teachers should *not* assume that all parents, guardians, or caregivers are positive influences and that every student has a positive influential person in their life. Therefore, it is important to help connect students with positive, influential adults in the school and the community.¹

¹ Centers for Disease Control and Prevention, *Health Education Curriculum Analysis Tool* (Atlanta, GA: CDC, 2021).



Directions: Click on the grade-level icon below for examples of how to support this characteristic in a lesson.

Grades
K - 2
EXAMPLE



Grades
3 - 5
EXAMPLE



Grades
6 - 8
EXAMPLE



Grades
9 - 12
EXAMPLE



Grades K–2 Examples

Example 1

For this teaching example, the lesson being taught is focused on personal safety and how to get help when ill or injured. The Healthy Behavior Outcome (HBO) for the lesson is *S-7: Get help for self or others when injured or suddenly ill* ([HECAT Appendix 3](#)).

1. The focus of this lesson is to connect students with the school nurse as a trusted school-based health helper.
2. The teacher invites the school nurse to speak to the students about the ways the school nurse helps students to stay healthy. The school nurse also talks about how they help students if they become injured or ill.
3. The class then visits the school nurse's office. The school nurse describes basic instruments and supplies used when a student visits because of illness or injury.
4. Following the visit to the nurse's office, the school nurse and the teacher explain that the students should always tell their teacher or another trusted adult (e.g., the playground supervisor) if they are or become injured or ill. Telling a trusted adult right away can help students get the care they need from a school nurse or other adult.
5. The students are then given a diagram of the school that shows the locations of their classroom as well as the school nurse's office. The students draw a path from their classroom to the school nurse's office as well as a path from the playground to the school nurse's office.



Example 2

For this teaching example, the lesson being taught is safe participation in regular physical activity, and the HBOs for the lesson are *PA-1: Engage in moderate to vigorous physical activity for at least 60 minutes every day*; *PA-2: Regularly engage in physical activities that enhance cardiorespiratory endurance, flexibility, muscle endurance, and muscle strength*; and *PA-6: Avoid injury during physical activity* ([HECAT Appendix 3](#)).



1. The focus of this lesson is to connect students with the physical education teacher as a trusted adult at school who helps them learn about being active and safe when engaging in physical activity before, during, and after school.
2. The teacher invites the physical education teacher to meet with the students on the school's playground to lead the students through a series of safety activities for using playground space and equipment to help students build healthy hearts, lungs, and muscles.
3. After the students return to the classroom, the teacher gives the students a diagram of the playground that includes all major playground equipment and asks the students to circle three pieces of equipment that could be unsafe if used incorrectly. The students are placed in pairs where they are asked to come up with two safety rules to help make using the playground equipment safer. For example, if the students chose a long slide, two safety rules might include using the slide one at a time and moving away after using the slide. Students are then asked to verbally share their safety rules.

Grades 3–5 Examples

Example 1

For this teaching example, the unit is Sexual Health, and the HBOs for two lessons in this unit are *SH-1: Recognize developmental changes experienced by self and others during childhood and adolescence* and *SH-10: Use appropriate health services to promote sexual and reproductive health* ([HECAT Appendix 3](#)).

1. The focus for this activity is to connect students with the school nurse as a trusted school-based health helper for help with changes they are experiencing or will experience during puberty.
2. The teacher and the school nurse team collaboratively plan and teach two lessons focused on the following HECAT knowledge expectations:
 - a. Describe the physical, cognitive, emotional, and social changes that occur during puberty.
 - b. Explain how puberty and development can vary greatly and be normal.
 - c. Describe internal and external reproductive body parts using medically accurate terms in a gender-neutral way (e.g., some people have a penis, and some people have a vagina) (https://www.cdc.gov/healthyyouth/hecat/pdf/2021/hecat_module_sh.pdf).
3. At the end of the second lesson, the school nurse discusses ways in which they can support students related to the physical, cognitive, emotional, and social changes that the students may be experiencing or will experience during puberty. The students are encouraged to seek help from the classroom teacher or the school nurse if they have questions, concerns, or need support as they experience puberty-related changes.
4. At the end of the second lesson, students are asked to write down three things they learned that will help them progress through puberty in a healthy way.



Example 2

For this teaching example, the unit being taught is Violence Prevention, and the HBO for the lesson is *V-1: Manage interpersonal conflict in nonviolent ways* ([HECAT Appendix 3](#)).

1. The students have already learned about feelings, expressing feelings in a healthy way, seeking help for troublesome feelings, and establishing and maintaining healthy relationships.
2. The health teacher invites the school counselor, psychologist, or social worker to teach a lesson to the students about managing interpersonal conflict in healthy ways.
3. Students are encouraged to seek help from the school counselor, psychologist, or social worker if they or someone they know needs help in managing conflicts with others.
4. As an exit ticket, students are asked to write down how they would find help to manage a conflict they were having with a classmate.



Grades 6–8 Examples

Example 1

For this teaching example, the unit being taught is Personal Health and Wellness, and the HBOs for the lesson are *PHW-11: Seek out health care professionals for appropriate screenings and examinations*, and *PHW-10: Use health care services to address common infectious diseases and manage chronic diseases and conditions* ([HECAT Appendix 3](#)).

1. The 6th grade students have recently transitioned into a new secondary school that has a school-based health center (SBHC). Before 6th grade, many students did not have access to a SBHC.
2. The health educator introduces the students to the concept of the SBHC and takes students on a “field trip” to meet the SBHC staff and tour the facility. Each student leaves with a pamphlet of available services and information on how to access health care if needed.

Example 2

For this teaching example, the units being taught are Violence Prevention and Mental and Emotional Health. The HBOs for the lesson are *V-7: Get help to prevent or stop violence including harassment, abuse, bullying, hazing, fighting, and hate crimes*, *VP-10: Get help for oneself or others who are in danger of hurting themselves*, and *MEH-8: Establish and maintain healthy relationships* ([HECAT Appendix 3](#)).

1. There has been an increase in student disciplinary referrals for harassment, inappropriate behaviors, and concerns about self-injurious behaviors. In response to these concerns, the Student Assistant Team, which includes the health educator, has started a school-wide student-mentoring initiative.
2. All faculty and staff (including teachers, custodians, nurses, food service workers) have been previously introduced to and trained on the following: the goals of the mentoring initiative, including the rationale for instituting such a program, based on localized data; staff roles and responsibilities; the plan of events;



suggested mentoring strategies; and the lead contacts and resources for project (health educators). Students will be assigned to their mentors using basic randomization methods that will ensure inclusion of all students in the program. Staff and faculty are then asked to introduce themselves to their assigned students. As part of their introduction, the mentors will let students know that they are available should students have any questions or concerns or need to talk to an adult about their personal safety or the climate and culture within the school building. Ideally, the mentor will have an informal check-in with their mentees once a day or at least three times a week. The check-in could be a hello by name and a discussion to find out what hobbies they have, how their

classes are going, and any safety concerns. This mentoring initiative is supported by classroom instruction delivered in the health education curriculum addressing the HBOs listed above. This activity supports the research of the importance of having a positive adult influence and supports student connectedness to the school.²

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Navigational Grade Icons

² McNeely, C., Nonnemaker, J., & Blum, R. (2002). Promoting school connectedness: Evidence from the National Longitudinal Study of Adolescent Health. *Journal of School Health*, 72(4), 138-146.

Grades 9–12 Examples

Example 1

For this teaching example, the unit being taught is Mental and Emotional Health, and the HBO for the lesson is *MEH-6: Get help for troublesome thoughts, feelings, or actions for oneself and others* ([HECAT Appendix 3](#)).

1. The students have already learned about signs and symptoms for a variety of mental health challenges and issues. Lessons have also focused on removing peer and social stigma around seeking help for mental health disorders, challenges, or issues.
2. The health teacher invites the school-based counselor, psychologist, or social worker, as well as community-based mental health staff from a nearby health clinic, to speak to the students about mental and emotional health services. Students are encouraged to seek help for themselves or a friend if they are showing signs and symptoms of a mental health disorder.

Example 2

For this teaching example, the unit being taught is Violence Prevention, and the HBO for the lesson is *V-7: Get help to prevent or stop violence including harassment, abuse, bullying, hazing, fighting, and hate crimes* ([HECAT Appendix 3](#)).

1. The students have already learned about functional information and skills related to preventing harassment, abuse, bullying, hazing, fighting, and hate crimes.
2. For this activity, the health teacher invites the school resource officer (SRO) to the class to help connect students with the SRO. Prior to the SRO visit, students are asked to prepare a list of questions for the SRO related to getting help to prevent or stop violence including harassment, abuse, bullying, hazing, fighting, and hate crimes. The health teacher gives the list of questions the students have created to the SRO. The SRO is then invited into the class to discuss the answers to the questions the students have created. Questions might include the following:
 - a. What should I do if I hear someone talking about bringing a gun to school?
 - b. My coach knows that all freshman go through a hazing process to be a part of the team, but I don't want to participate. What should I do?
 - c. My ex-boyfriend is stalking me. What can I do to make him stop?

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