Health Education Standards

First Grade

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OREGON DEPARTMENT OF EDUCATION

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I. Introduction

A Vision of Health Education

Health Education envisions that all students have the health knowledge and skills they need to meet their goals, flourish and thrive, and contribute to their communities.

Health education supports young people to gain age-appropriate knowledge and skills that foster healthy behaviors, empowered decision-making, and a holistic understanding of their role in promoting individual, family, and community safety and well-being. Research shows that when health education is comprehensive, inclusive, skills-based, and scaffolded across grades it leads to improved school climate and decreased violence, individual academic achievement, and long-lasting intergenerational benefits.

Health education saves lives.

ODE Equity Stance

Health Education works to center students' cultures, interests, values, and identities as they learn how to live healthy, safe, and flourishing lives as young people and adults, in relationships with one another, in communities, and in the world. To do so, the Health Education Standards reflect the Oregon Department of Education's commitment, set forth in its Education Equity Stance:

> *… the equitable implementation of policy, practices, procedures, and legislation that translates into resource allocation, education rigor, and opportunities for historically and currently marginalized youth, students, and families including civil rights protected classes. This means the dismantling and restructuring of systems and institutions that create a dichotomy of beneficiaries over oppressed & marginalized peoples.* (Oregon Department of Education's Equity Stance)

The Oregon Department of Education recognizes that student health and safety are the cornerstone of education and that all students are entitled to a high-quality educational experience, free from discrimination or harassment based on perceived race, color, religion, gender identity, sexual orientation, disability, or national origin, and without fear or hatred, racism or violence.

Oregon Statutes and Rules

Oregon's Health Education Standards are built on Oregon Statute and Administrative Rules, passed by the Oregon Legislature and the Oregon State Board of Education (see Appendix B). The Health Education Standards also reflect Oregon's laws (ORS 659.850) that define protected class as a "group of persons

distinguished, or perceived to be distinguished, by race, color, religion, sex, sexual orientation, gender identity national origin, marital status, familial status, source of income or disability."

Health Education Foundations

The 2023 Oregon Health Education Standards have specific grade level requirements that outline what students should know and be able to do by the end of specified grades. According to OAR 581-022-2030, each school district shall provide a planned K–12 instructional program, including the academic content standards adopted by the State Board of Education. These standards serve as a valuable tool for schools in selecting, designing, or revising curriculum and instruction.

Oregon Standards reflect the National Health Education Standards and the National Sexuality Education Standards, which focus on knowledge and skill development for health literacy. Like the National Education Standards, student knowledge and skill development are interwoven throughout K-12. Oregon's grade-level standards point to and imbed the overarching 8 knowledge and skill standards set forth by the National Health Education Standards. Knowledge 1 focuses on knowledge attainment and skills 2-8 focus on the practices necessary for students to maintain and promote individual, family, and community health.

Knowledge & Skills

Based on the National Standards for Health Education

Knowledge 1: Students comprehend functional health knowledge to enhance health.

Skill 2: Students analyze the influence of family, peers, culture, social media, technology, and other determinants on health behaviors.

Skill 3: Students demonstrate health literacy by accessing valid and reliable health information, products, and services to enhance health.

Skill 4: Students demonstrate effective interpersonal communication skills to enhance health.

Skill 5: Students demonstrate effective decision-making skills to enhance health.

Skill 6: Students demonstrate effective goal-setting skills to enhance health.

Skill 7: Students demonstrate observable health and safety practices.

Skill 8: Students advocate for behaviors that support personal, family, peer, school, and community health.

II. Cross-cutting Concepts

This section describes the connections between Health Education and other ODE statewide initiatives and efforts. The Health Standards integrate Oregon's Transformative Social Emotional Learning (TSEL) Standards, align with the Oregon Student Success Plans and the Tribal History/Shared History law, and co-leverage other content area standards. These linkages support a comprehensive educational

approach, where Health Education can be woven into broader frameworks, facilitating holistic student development. This integration equips students to not only acquire health-related knowledge in one class or at one time, but also to apply and deepen learning throughout a well-rounded educational experience.

Transformative Social Emotional Learning (TSEL) Standards

The Health Education Standards integrate Oregon's Transformational Social Emotional Learning (TSEL) Standards. Incorporating the Transformative SEL standards ensures a comprehensive educational framework that provides schools with a cohesive roadmap to nurture students' holistic development, equipping them with essential life skills in and beyond the classroom. At each grade level, Transformative SEL Practices are mapped to connect Transformative SEL Standards with health topics. Each Transformative SEL Practice is labeled in this document, and has its own corresponding growth indicators that provide guidance on what learning opportunities can look like in practice.

Student Success Plans

During the 2019 legislative session, Oregon's leaders passed the Student Success Act (SSA) to improve access and opportunities for students who have been historically underserved in the education system. This law resulted in the creation of new programs or expansion of existing programs at the Oregon Department of Education aimed at improving educational opportunities for Oregon students, especially historically underserved student groups. Many of these programs are guided by the African American/Black Student Success Plan, American Indian/Alaska Native Student Success Plan, Latino/a/x & Indigenous Student Success Plan, Native Hawaiian/Pacific Islander Student Success Plan, and the LGBTQ2SIA+ Student Success Plan. The Health Education Standards connect and uplift these plans by setting forth learning standards that empower young people to use their individual and cultural strengths, values, and goals to define what health means to them and access the information and tools that help them to live safe and healthy lives of their choosing.

Tribal History/Shared History lessons

In 2017, the Oregon Legislature enacted Senate Bill (SB) 13, now known as Tribal History/Shared History. The Health Education Standards reflect the law's intention to promote learning about the distinct tribal nations in Oregon. Grade-level standards align with Tribal History/Shared History lessons. The Health Education Standards incorporate learning opportunities about the tribal nations in Oregon, in multiple topics and throughout the grades, reinforcing the value of learning shared history within health-related contexts.

Integration with other content areas

The 2023 Health Standards provide for learning and exploration of individual and community historical and current issues that can connect and build upon concepts and instructional methods included in other classes and content areas. The Health Education Standards present opportunities for students and teachers to provide interdisciplinary instruction that links health, well-being, society, culture, community, family, and individuals.

III. Guiding Principles and Practices in Health Education

This section provides essential principles and key teaching practices for delivering effective health education. These guiding principles and core instructional ideas describe overarching language and approaches that foster inclusivity and empower students with a lifetime sense of self-efficacy to help them make informed decisions, access resources, and consent to issues that relate to their health, safety, and bodily autonomy.

Guiding Principles

Health education…

- adopts a strengths-based approach, centering on both individual and systemic protective factors that enrich and advance health and well-being, while refraining from value judgments.
- provides students with knowledge and skills that are culturally responsive and inclusive.
- strives to incorporate local connections and local knowledge, including resources and data.
- is trauma informed and creates the conditions for students to feel safe, known, and cared for.
- is grounded in medical and scientific accuracy and supported by peer-reviewed research and leading medical and public health professional organizations.
- focuses on skills-based instruction to empower students to make informed and critical decisions that impact their health throughout their lives.
- uses qualitative and quantitative local, state, and national data to inform instruction.
- inspires critical analysis of a variety of cultural, community, and individual factors that influence health behavior.
- avoids fear- or shame-based instruction that rely on scare tactics, stereotypes, and/or disparaging messages about student, family, and community identities and health decisions.

Topics and Core Instructional Practices

Oregon's Health Education Standards are organized into topic areas that allow students to gain knowledge and skills in core health topics, aligning with Oregon Statutes and Administrative Rules and CDC Health Education priorities, and are informed by the Oregon's Student Health Survey and the ODE Student Educational Equity Development (SEED) Survey. Topic areas help serve districts and educators develop units of learning experiences. These topics are subdivided into subtopics that are vertically aligned throughout the K-12 grade level standards to ensure a progression of learning. This helps build and advance student knowledge from the fundamentals to more in-depth knowledge and skill proficiency to be used throughout their lifetime. For a complete list of subtopics, please see Appendix A and the K-12 Learning Progressions by Topic Area and Subtopics tool.

Topic Areas

- Wellness and Health Promotion (WHP)
- Safety and First Aid (SFA)
- Substance Use Prevention (SUB)
- Food, Nutrition, and Physical Activity (FNP)

- Social, Emotional, and Mental Health (SEM)
- Healthy Relationships and Violence/Abuse Prevention (HRVP)
- Growth and Development (GD)
- Sexual and Reproductive Health (SRH)

The following sections provide guidance for teachers to infuse the Guiding Principles into each topic area. The instructional practices below provide clarity for teachers on how to effectively communicate important concepts in ways that are empowering, inclusive, strengths-based, and culturally responsive.

Wellness and Health Promotion:

- Reinforces that health is more than the absence of disease and that health status changes throughout our lives.
- Recognizes that health is multidimensional and includes physical, emotional, social, mental, and environmental well-being.
- Defines wellness and well-being as terms used interchangeably with health.
- Defines and uses the concept of social determinants of health in discussions around community health, including instruction around access to health services, health outcomes, and health behavior

Safety and First Aid:

- Assists students in identifying trusted adults to talk to when feeling unsafe, scared, or uncomfortable.
- Provides real-life connections to school safety and emergency plans, rules, and policies.
- Recognizes that safety includes in person situations as well as online safety.
- Defines and promotes the importance of inclusive and accessible spaces so people with disabilities and without disabilities can safely access public services, including school.

Substance Use Prevention:

- Provides information and resources on the adverse effects that substances can have on young people without using fear- or shame-based approaches.
- Offers skill-building opportunities to analyze cultural influences, communicate effectively, and make decisions in navigating internal and external factors related to substance use.
- Provides clarity that substances refer to all types of legal and illicit drugs including alcohol, tobacco, marijuana/cannabis, prescription, and over-the-counter medications.
- Provides students with real-life connections to people and other local resources in the school and in the community to get assistance for themselves or others.

Food, Nutrition, and Physical Activity:

- Promotes well-rounded understanding of food and nutrition that encourages students to have a healthy relationship with food, stressing the importance of eating enough food, eating food on a regular basis, and acknowledging the pleasure that eating food can bring.
- Uses terminology that honors cultural traditions and practices, and does not label “good food” or “bad food”.
- Physical activity focuses on the positive aspects of movement and the important role that physical activity has on our overall health and well-being.

Social, Emotional, and Mental Health:

- Provides instruction that empowers students to understand what supports their mental health and that of their peers.
- Creates learning environments and conditions that affirm people of all genders, race and ethnicities, cultures, and abilities.
- Refers to emotions and feelings as part of the developmental and learning process.
- Emphasizes that mental health is an important part of overall health.
- Explains the importance of talking with trusted adults about feelings and where to access resources in the school and community.

Healthy Relationships and Violence/Abuse Prevention:

- Promotes positive social norms that encourage healthy and safe interactions, relationships, and sexuality and help young people thrive to prevent violence and abuse before they even occur. This focuses beyond risk reduction strategies that can often be victim-blaming.
- Defines and communicates safe boundaries, inappropriate touch, and consent, rather than "good and bad touch" which is often not clear enough for a child.
- Recognizes that sometimes adults may need to make health or safety decisions for children, and that children can still ask questions and discuss what and why these decisions are being made.
- Uses language, messages, and instructional approaches that do not focus on fear- or shame-based messaging. Research around child abuse patterns and prevention education show that concepts such as "stranger danger" are ineffective in promoting personal safety.
- Gives young people skills to identify and respond to unsafe situations, accurately name body parts, understand how different relationships have safety rules and boundaries, and how to get help when needed.
- Affirms that people of all genders, race and ethnicities, cultures, and abilities deserve mutual respect and kindness. Research shows that these approaches prevent sexual violence perpetration.

Growth and Development:

- Refers to internal and external sexual and reproductive body parts with medical accuracy, to normalize and promote effective communication with trusted adults when questions or concerns arise.
- Provides instruction that treats all aspects of puberty with dignity.
- Uses language that is affirming of gender expansiveness when discussing gender, sex, reproductive anatomy, and puberty.

Sexual and Reproductive Health:

- Refers to sexuality as a normal part of human development and does not use shame- or fear-based language or messaging.
- Defines sexuality concepts broadly as thoughts, feelings, and behaviors related to: being attracted to someone, emotional closeness, relationships, bodily safety, human reproduction, sexual and reproductive body parts, and more. This foundation allows for instructional scaffolding on topics related to sexuality, including sexual abuse, STIs, and sexual orientation.

- Discusses abstinence alongside sexual and reproductive choice in honest, age-appropriate ways that provides space for each student to consider their own personal, familial, and cultural values, health history, and goals, while maintaining privacy.
- Provides medically accurate information on pregnancy options and access to necessary healthcare that is not shaming, stigmatizing, inaccurate, or purposefully incomplete.
- Includes LGBTQ2SIA+ inclusive discussions, information, and resources that address healthy relationships, the many ways to form family, and how to make informed choices around sexual activity.
- Discusses the choice to parent in ways that are not stigmatizing to young parents.
- Is supplemented by information about youth-friendly comprehensive community resources that are available in local communities. This could be local community health centers, local public health centers, school-based health centers, and hospitals that provide comprehensive information and services.

IV. How to Read the Standards

Incorporating Grade Level Skill Focus

Skill development is a key focus area in Health Education. Research shows that when students are taught using a skills-based approach, they are more likely to make informed health-related decisions throughout their lives. Skill development takes time for skill instruction, skill practice, and then skill performance. Each of these are critical parts of the skill development process for students to successfully transfer learning outside of the classroom environment to practical application in their lives.

The grade level standards embed the practice of health skills throughout each grade and in every topic area. Each grade level also names specific skills (two in early grades and more in later grades) for teachers to focus on in-depth. For example, in Kindergarten teachers will focus on communication skills and analyzing influences throughout the topics and across the year. Teachers can also reinforce skills in other parts of the school day (e.g., morning circle).

The Standards are organized by grade level, topic area, and skill focus. The Grade Level Skill Focus are listed in boxes at the top of each grade.

Grade Level Skill Focus	➢ Students analyze the influence of family, peers, culture, social media, technology, and other determinants on health behaviors. *(Skill 2)* ➢ Students demonstrate observable health and safety practices. *(Skill 7)*

Below the grade level skill focus box are the grade level standards organized by topic area. Topic areas provide for groupings that can help educators define units and instructional activities. Each grade level standard is listed and numbered with a reference code beneath each topic heading.

Wellness and Health Promotion (WHP)

K.WHP.1	Define what a value is and name values that different people and families care about.
K.WHP.2	Identify illnesses that are easily transmitted and illnesses that are not.
K.WHP.3	Understand steps to protect eyes, teeth, skin, and ears.

Reading the Standard Numbering Code

Each grade level standard is numbered for reference as: *Grade level.Topic Abbreviation.Standard Number*

Key:

K.WHP.1 = Grade level (Kindergarten)

K.**WHP**.1 = Topic area abbreviation (abbreviation for Wellness and Health Promotion)

K.WHP.**1** = Grade level standard number (first grade level standard for this topic and grade)

V. Oregon Health Education Grade Level Standards

First Grade

Grade Level Skill Focus	➢ Students analyze the influence of family, peers, culture, social media, technology, and other determinants on health behaviors. *(Skill 2)* ➢ Students demonstrate effective interpersonal communication skills to enhance health. *(Skill 4)*

Wellness and Health Promotion (WHP)

1.WHP.1 Recognize at least three dimensions (physical, social, emotional, mental, and/or environmental) of being healthy and well.

1.WHP.2 Explain what people can do to reduce and treat illness.

1.WHP.3 Describe at least three things to do to maintain good health, including brushing teeth daily.

1.WHP.4 Identify where to locate trusted adults who can help with health-related questions.

1.WHP.5 Recognize how friends and media influence personal health behaviors, both positively and negatively.

1.WHP.6 Define environment and environmental health.

Safety and First Aid (SFA)

1.SFA.1 Demonstrate how to communicate safety rules for crossing streets, riding a bicycle, water safety, and playing.

1.SFA.2 List the steps to identify and respond to emergency situations.

1.SFA.3 Identify safety hazards, including those related to fire, water, and dangerous objects.

1.SFA.4 Recognize that it is important to stay away from potentially unsafe body fluids and objects, including needles and syringes.

1.SFA.5 Discuss why it is important to ask a trusted adult before using online devices.

Substance Use Prevention (SUB)

1.SUB.1 Identify trusted adults who can answer questions about medicines and household products.

1.SUB.2 List family, cultural, and school values and rules about medicine use.

Food, Nutrition, and Physical Activity (FNP)

1.FNP.1 Identify the five food groups and what a balanced meal could look like.

1.FNP.2 Identify the connection between eating nutrient dense food and physical activity to help our bodies grow, learn, and develop.

1.FNP.3 Discuss how food advertisements, social media, and commercials influence our food and beverage decisions.

1.FNP.4 Identify feelings of thirst and hunger as signals for needing to drink water and eat food.

1.FNP.5 Describe how to keep food safe from harmful germs.

Social, Emotional, and Mental Health (SEM)

1.SEM.1 ***TSEL Practice 1A*** Identify and label emotions, thoughts, strengths, and potential (both personal and cultural).

1.SEM.2 ***TSEL Practice 1B*** Understand the stress response system (regulation and dysregulation) and what environments and experiences activate those responses.

1.SEM.3 Identify basic brain regions and their functions and recognize that everyone's brain functions differently.

Healthy Relationships and Violence/Abuse Prevention (HRVP)

1.HRVP.1 ***TSEL Practice 4A*** Form authentic relationships that encourage autonomy while building cultural awareness and empathy through various forms of communication.

1.HRVP.2 Demonstrate healthy ways for friends to express feelings, both physically and verbally.

1.HRVP.3 Discuss the ways that all people are unique and valuable and have a right to be treated with dignity and respect and be free from bullying and violence.

1.HRVP.4 Define consent and discuss how it is important in all types of relationships.

1.HRVP.5 Demonstrate how to communicate wants, needs, and boundaries and how to listen to the needs of others.

1.HRVP.6 Explain that everyone has the right to decide who can touch one's own body, where, and in what way to prevent violence and abuse.

Growth and Development (GD)

1.GD.1 Discuss and affirm different physical characteristics that people may have, including differences in body size, shape, ability, skin color, and hair texture.

1.GD.2 Identify medically accurate names for sexual and reproductive anatomy.

1.GD.3 Discuss that there are many ways that people can express love and attraction.

Appendix A. Content Topics and Subtopics

Wellness and Health Promotion (WHP) outlines the fundamental knowledge and skills students need to understand what social, familial and community factors influence the dimensions of health; how to prevent and protect against communicable and non-communicable diseases; analyze issues related to health equity and environmental health; and understand how to use health information and healthcare resources.

- Dimensions of health (physical, social, emotional, mental and environmental)
- Values
- Communicable and non-communicable disease prevention
- Protecting vision, hearing, skin and teeth
- Health practices and choices
- Health literacy
- Analyzing influences
- Health equity
- Environment and health

Safety and First Aid (SFA) outlines the knowledge and skills students need to feel more prepared and confident to prevent, identify, and address safety and emergency situations at home, at school, and in the community, including medical emergencies, firearm hazards, natural disasters, and digital safety.

- Unintentional injuries
- Identifying and reporting unsafe situations
- First aid and emergencies
- Identifying helpers
- Accessibility and safety
- Natural disasters and emergency situations
- Digital and online safety
- Firearm safety

Substance Use Prevention (SUB) outlines the knowledge and skills students need to make decisions when faced with the pressures of using, misusing and abusing alcohol, tobacco, marijuana, and other substances, including over-the-counter and prescription drugs; analyze media messages and other

influences; how to cope in stressful situations; how to set goals; and how to access community resources for assistance and to prevent and respond to overdose emergencies.

- Use and misuse
- Short and long-term effects of substance use
- Tobacco, marijuana, alcohol, and other drugs
- Over the counter and prescription drugs
- Impact on self, communities, and other health outcomes
- Influences, social pressure, and coping skills
- Decision making around substance use
- Communication skills around substance use
- Getting help and accessing resources
- Rules, laws and policies related to substance use
- Opioids, including fentanyl

Food, Nutrition, and Physical Activity outlines the knowledge and skills students need to understand where food comes from, what foods have high nutrient content, and how culture plays an important role in nutrition and food experiences; develop decision-making skills around food and physical activity; decipher media messages around food; and analyze issues related to food insecurity and food policies.

- Food systems
- Nutrients
- Variety of foods and eating patterns
- Importance of hydration and moderation of sugary beverages
- Positive effects of healthy eating and physical activity
- Decision making around food and physical activity
- Culture and food
- Impact of media and family
- Sensory and social experience of eating
- Food safety and allergies
- Food insecurity and food policies
- Circulatory, musculoskeletal, and digestive systems

Social, Emotional, and Mental Health outlines the knowledge and skills students need to understand and express feelings, thoughts, and emotions; build healthy relationships with self and others; practice healthy decision-making skills; and support kindness, care, connection, equity, diversity, and inclusion. These align with ODE's Integrated Model of Mental Health and Oregon's Transformative Social and Emotional Learning (TSEL) Standards.

- Empathy and respect
- Feelings, emotions, and moods
- Mental health challenges (stress, anxiety, depression, social isolation, and eating disorders)
- Talking to trusted adults, accessing care and information

- Online safety
- Strategies for mind and body awareness
- Positive identity development
- Social justice and mental health
- Laws related to accessing mental health services

Healthy Relationships and Violence/Abuse Prevention outlines the knowledge and skills students need to; develop skills to build agency and self-awareness of personal boundaries and bodily autonomy; analyze influences in media and technology; identify characteristics of healthy and affirming interpersonal relationships; communicate about harm to trusted adults; understand the root causes of violence; collaborate with the larger community to provide safety, trust, respect, sharing of power, and identity specific supports; and create affirming environments where students, families, and school staff can thrive. These align with Oregon's TSEL Standards.

- Expressing emotion and affection in relationships
- Violence prevention and equitable relationships
- Diversity, identity, gender and relationships
- Personal boundaries, bodily autonomy, and consent
- Social and communication skills, conflict management, and restorative practices
- Trusted adults and supportive community
- Media, cyberbullying, and relationships Bullying, harassment, and intimidation
- Violence and abuse
- Responding to violence and abuse
- Trafficking prevention
- Laws related to consent and access to services

Growth and Development outlines the knowledge and skills students need to understand the changes that people can experience during puberty and adolescence that impact physical, social, intellectual, and emotional development; understand that sexuality is a normal and positive aspect of development; identify medically accurate, inclusive reproductive anatomy; and support students in developing positive identities and self-esteem across the lifespan.

- Physical differences and respect
- Sexual and reproductive anatomy
- Puberty and changes
- Menstruation and self-care
- Gender roles, identity, and expression
- Sexual orientation
- Families

Sexual and Reproductive Health outlines the knowledge and skills students need to take care of their bodies and make informed decisions about their health, safety, relationships, and future. This includes shame-free instruction on communicable diseases, including STIs and HIV/AIDS, including how they are prevented and transmitted, their signs and symptoms, and testing and treatment; decision-

making around sexual behavior, pregnancy, and parenting; and the personal, relational, cultural, and historical factors that influence sexuality, sexual and reproductive health, and access to healthcare.

- Influences on sexuality
- Intimacy and sex
- Decision making around sexual behavior
- Reproduction
- Pregnancy and pregnancy options
- Contraception
- STI and HIV prevention
- Trusted adults, information, and services
- Rights and access to sexual and reproductive healthcare
- Reproductive justice

Appendix B. Alignment with Oregon Statute and Administrative Rules

Health education as part of common curriculum

The State Board shall review and update content standards for health education. School districts must provide instruction in Health Education.

(ORS 329.045)

District Curriculum

Requires health education as a content area that must be taught as part of K-12 instructional program. (OAR 581-022-2030)

Standard Education for Oregon Students

The Common Knowledge and Skills consists of facts, concepts, principles, rules, procedures and methods of inquiry associated with the following subject matter areas that include health education. (OAR 581-021-0200)

Diploma Requirements

Requires 1 credit of health education for graduation. (OAR 581-022-2000)

Oral Health Education

School districts must provide age-appropriate instruction in oral health. The standards shall prescribe the grades in which instruction in oral health is provided to students. (ORS 336.473)

Organ and Tissue Donation

In grades 9 - 12 districts must provide instruction on organ and tissue donation and education. (ORS 336.474)

Prevention Education in Drugs and Alcohol

Instruction in the effects of tobacco, alcohol, and drugs, as an integral part of the district's K–12

comprehensive health education program. All high school students, grades 9–12 shall receive age-appropriate instruction about drug and alcohol prevention. (ORS 336.235) (OAR 581-022-2045)

Fentanyl and opioid prevention supplements

School districts must implement a curriculum that includes opioid and fentanyl prevention education. (ORS 336.246, ORS 336.222)

CPR and AED Instruction

As an integral part of the health education curriculum or the physical education curriculum for students in grades 7 through 12, each school district must provide instruction in CPR, AED and must include hands on practicing of CPR. (ORS 336.472)

Human Sexuality Education Courses

The first comprehensive sexuality education law that requires instruction in elementary and secondary. It specifies that sexuality education must be taught annually 6 - 8 and twice 9 -12. (ORS 336.455)

Healthy Teens Relationships Act

This law requires that instruction on healthy relationships, friendships, and dating be provided to students annually in 7th - 12th grade. (ORS 339.366)

Child Sexual Abuse Prevention "Erin's Law"

This law requires that child abuse prevention education be provided in four sessions per year in kindergarten through 12th grade. This also includes teacher training and school policy. (ORS 369.059)

Menstrual Dignity Act

This law requires that sexuality education include information on menstrual health. The education must be gender inclusive, accessible, and positive and not shame-based, ORS 326.545.

Human Sexuality Education Rule

Within Health Education, districts must have a sexuality education “comprehensive plan of instruction”. Each district must have a plan that outlines how all of the above laws are met each year. The law names the cornerstone approaches of sexuality education as being: LGBTQ2SIA+ inclusive, culturally responsive, age-appropriate, and not fear- or shame-based. The rule also names content requirements, such as STI prevention, child abuse prevention, and consent education. (OAR 581-022-2050)

Appendix C. Terminology Resources

For definitions of select terminology please see the Oregon's Transformative SEL Standards; Oregon's LGBTQ2SIA+ Student Success Plan; Oregon's Gender Expansive Student Guidance, National Sex Education Standards: Core Content and Skills, K-12 (Second Edition), and the National Health Education Standards Guide.