

Item 2

Research Report : Curriculum Analysis

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CATEGORY	4	3	2	1
Organization	Information is very organized with well-constructed paragraphs and subheadings. ✓	Information is organized with well-constructed paragraphs.	Information is organized, but paragraphs are not well-constructed.	The information appears to be disorganized. 8)
Amount of Information	All 5 criteria are addressed completely ✓	4 topics are addressed completely	3 topics are addressed completely	Only two topics were adequately addressed
Quality of Information	Information clearly relates to the main topic. It includes several supporting details and/or examples.	Information clearly relates to the main topic. It provides some supporting details and/or examples. ✓	Information clearly relates to the main topic. No details and/or examples are given.	Information has little or nothing to do with the main topic.
Mechanics	No grammatical, spelling or punctuation errors.	Almost no grammatical, spelling or punctuation errors. ✓	A few grammatical, spelling, or punctuation errors.	Many grammatical, spelling, or punctuation errors.
Copy Ready	The document is ready for the printer as presented <i>Needs some refinements.</i>	There are several minor changes needed	There are several major and minor changes needed. ✓	The paper needs to be redone.

Date Created: Nov 03, 2010 03:26 pm (UTC)

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1B

See my comments, I think you could have used some heading to make it easier to read.

[Redacted]

Accept

Curriculum Analysis
[Redacted] Public Schools: Grade Eight Health
[Redacted]

HED-501 Assignment 2
October 30, 2010

[Redacted] teachers and administrators have developed the health curriculum. The audience is the eighth grade students attending [Redacted] Intermediate School in [Redacted]. The aim of the curriculum is to provide effective health education to students which will enable them to make health enhancing decisions. They have engaged in a process of curriculum design and instructional delivery using a "backward" design model known as Assessment-Driven Instruction (ADI). The logic of backward design suggests a planning sequence of three stages: 1) identify desired results 2) determine acceptable evidence and, 3) plan learning experiences and instruction. The curriculum is broken up into eleven lessons.

2

Not sure?
Why the
hesitation?

I do believe the curriculum is aligned with the national health education standards. For example one a goal listed under the content of substance abuse in the [Redacted] Curriculum is that the student is able to understand the importance of avoiding tobacco use and second-hand smoke. This standard is aligned with the first national health education standard listed; understand health concepts. The second national health standard is to access valid health information. This is shown in the youth suicide prevention content for the [Redacted] Curriculum. One of the objectives listed is that the student identifies resources and contacts which may be helpful in preventing a suicide. The students must know how to access resources that would help someone who is suicidal. The third national health standard is practice health enhancing behavior. This is clearly evident in the following content standard of the [Redacted] Curriculum; the student will demonstrate the ability to practice health-enhancing behaviors and reduce health risks. The preceding standard is listed under the substance abuse content of the

████████ Curriculum. Another national health education standard that was met was the use interpersonal communication skills. An objective under the content of suicide prevention is that the student demonstrates techniques of talking to a person who may be suicidal through role play. Role playing will help the student build their interpersonal communication skills. The next national health education standard is use decision making skills. One of the objectives listed in the ██████████ Curriculum is that the student will discuss seven resistance skills to resist pressure to use tobacco products. Learning these skills will help to make good decisions when it comes to saying no to tobacco use. Some of the national health education standards that I did not see addressed in the ██████████ Curriculum were analyze influence of culture, media, technology and other factors on health, use goal setting skills and advocate for personal, family, community and environmental health.

The range of topics for this curriculum includes substance abuse, family life, disease prevention and youth suicide prevention. The content standards are as follows 1) the student will demonstrate the ability to practice health-enhancing behaviors and reduce health risks 2) the student will understand the reproduction system, and the responsibility they face with personnel decisions related to sexual behavior 3) the student will understand concepts related to health promotion and disease prevention 4) the student will understand what factors there are related to suicide. For each topic and standard there are goals and objectives listed. Under the topic of substance abuse and the standard of "the student will demonstrate the ability to practice health-enhancing behaviors and reduce health risks" the goal is that the student will be able to understand the importance of avoiding tobacco use and second-hand smoke. The objectives are the student...

- discusses harmful effects of nicotine.
- list 15 reasons it is risky to smoke as a teen.



- discusses way smoking affects health, appearance, relationships, and spending habits.
- discusses the risks of breathing second-hand smoke and ways to reduce their exposure to second-hand smoke.
- discusses 13 reasons it is risky to use smokeless tobacco.
- identifies five reasons why teens are tempted to use tobacco products.
- discusses seven resistance skills to resist pressure to use tobacco products.
- describes way to stop using tobacco.

Under each of the eleven goals listed there are a series of objectives for each student to meet.

The following are the fourteen characteristics of effective health education curricula. After each characteristic I have listed if and how the [redacted] Health Curricula have addressed them.

- Focuses on clear health goals and related behavioral outcomes.

The [redacted] Health Education Curricula is very clear on the goals and what objectives the students are expected to meet. The outcomes are directly related to the goals.

- Is research-based and theory-driven.

I believe the curriculum is more research based then theory driven. There were no theoretical approaches listed in the curriculum.

- Addresses individual values and group norms that support health-enhancing behaviors.

There was nothing that addressed individual values or group norms.

- Focuses on increasing the personal perception of risk and harmfulness of engaging in specific health risk behaviors and reinforcing protective factors. This was addressed well under the following goal of; the student will know and understand facts of pregnancy and childbirth. One of the objectives is the student will discuss the realities of teen parenthood. This increases

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indent.*

Bullet

personal perception of risk and there were protective/preventative factors also addressed.

-Addresses social pressures and influences.

The curriculum did a good job addressing this especially under the topics of tobacco, alcohol and drug use. An example of this is an objective listed in the curriculum; the student will identify five reasons why teens are tempted to use tobacco products.

-Builds personal competence, social competence and self efficacy by addressing skills.

This was illustrated in the curriculum by addressing resistance skills for using tobacco.

-Provides functional health knowledge that is basic, accurate, and directly contributes to health-promoting decisions and behaviors.

I think the curriculum's goal was not just to give information but to actually see changes in behaviors that will improve the student's lives.

-Uses strategies designed to personalize information and engage students.

For the majority of the content learned there was an objective that asked the students to consider the effect on family members. I think this will help to personalize what is learned in the classroom.

-Provides age-appropriate and developmentally-appropriate information, learning strategies, teaching methods, and materials.

I think the content was age appropriate for eighth graders. There were some content areas that I would have liked to see covered especially the topic of bullying which is so prevalent during that age.

-Incorporates learning strategies, teaching methods, and materials that are culturally inclusive.

There was no mention of any aspects of culture such as ethnicity, race, religion, and/or gender.

-Provides adequate time for instruction and learning.

*Use
Some
healing*

There was no mention of time frame of learning in the curriculum.

-Provides opportunities to reinforce skills and positive health behaviors.

The role-playing exercise when learning about the prevention of suicide was a good opportunity for the students to reinforce the skills that they have learned.

-Provides opportunities to make positive connections with influential others.

There was nothing in the curriculum that showed a connection with a role model or with influential others.

-Includes teacher information and plans for professional development and training that enhance effectiveness of instruction and student learning.

This characteristic of effective health education curricula was not touched upon in the [REDACTED] Health Curriculum.

Hesling My overall impression of the material is that I quickly realized I was not working with a true curriculum. Although it did include content, learning objectives, goals and objectives it was missing key pieces of a curriculum such as instructional methods, like lesson plans or instructional plans. It was also lacking any plans for assessment or evaluation. That being said, I wished there was more content to get a better idea of the student's educational experiences and what are the teacher expectations. The material was easy to understand with clearly listed learning targets, goals and objectives. It was more of a Curriculum framework then an actual curriculum.