

# Comprehensive Health Education

*Health education helps prevent many of the issues that interfere with student success, such as obesity, drug abuse, bullying, aggression and other violent behaviors.*



***In Michigan, the only requirement for health education is one course in high school. Imagine if we taught other subjects this way!***

## Michigan parents want more health education in schools.

In a recent statewide poll of 600 likely voters, over 80% feel that kindergarten through 5th grade students should be required to have 15 hours of health education per school year and 6<sup>th</sup>–8<sup>th</sup> grade students should be required to have 50 hours per school year (EPIC-MRA, 2012).

## ***The Michigan Model for Health™ makes an impact***



***Michigan Model for Health*** is on the prestigious National Registry of Evidence-Based Programs and Practices (NREPP) because it is documented to reduce risk behaviors. Results from a recent study of over 500 sixth graders found that students who received

***Michigan Model for Health*** lessons on Nutrition and Physical Activity had better outcomes in nutrition knowledge, healthy eating behaviors, and physical activity than comparable students who received no health lessons. Implementation of ***Michigan Model for Health*** Social and Emotional lessons further improved these outcomes (O'Neill & Clark, 2013).

**Michigan School Health Coordinators' Association**

[www.mishca.org](http://www.mishca.org)



## Educational outcomes improve with comprehensive health education.

- Academic outcomes resulting from social and emotional learning include greater motivation to learn, increased commitment to school, and improved attendance, graduation rates, and grades (Zims, Payton, Weissberg, & O'Brien, 2007).
- Students who received the ***Michigan Model for Health*** curriculum showed significant, positive health changes compared to a randomized control group in the largest health education study to date. The intervention group showed stronger social and emotional skills, and reported less bullying and aggression, less alcohol use, and healthier nutrition behavior (O'Neill, Clark, & Jones, 2011; in press).
- Schools can improve the health and learning of students by supporting opportunities to learn about and practice healthy behaviors, providing school health services, creating safe and positive school environments, and engaging families and community. This evidence supports Whole School, Whole Community, Whole Child (WSCC) as a potential framework for achieving national educational and health goals (Michael, Merlo, Basch, Wentzel, & Wechsler, 2015).

## Whole School, Whole Community, Whole Child Model



ASCD logo reproduced with permission of Association for Supervision and Curriculum Development (ASCD) and U.S. Centers for Disease Control and Prevention (CDC).