

South Dakota Health Education Standards

Proposed September 15, 2025

Table of Contents

Introduction.....2

Health Education Standards Revision Committee 2024.....4

Development of the South Dakota Health Education Standards4

Health Content Areas Aligned with SD Health Standards5

Organization of the South Dakota Health Education Standards Document.....7

Guide to the Numbering and Symbol System Used in the Standards Document9

South Dakota Health Education Standards - Rationale Statements10

2024 South Dakota Health Education Standards10

Introduction

Health education in the 21st century aims to equip students with essential skills they need to navigate their everyday lives and thrive in an increasingly complex global society. The goal is to develop health-literate individuals who can obtain, interpret, and understand basic health information and services, and use this knowledge to enhance their own health and the health of others¹.

Central to this vision is the concept of personal health literacy, defined as "the degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others."² This updated definition emphasizes not just understanding health information, but also the ability to apply it in making well-informed decisions.

Health literacy, a key outcome of effective health education, significantly impacts overall health outcomes. Individuals with higher health literacy levels are more likely to engage in preventive health behaviors, effectively manage chronic conditions, and make informed healthcare decisions³.

Health education is a critical component of a well-rounded education, playing a vital role in students' academic success and overall well-being. Research consistently shows a strong link between health and academic achievement⁴. A comprehensive, skills-based health education program provides students with the tools to make informed decisions, develop healthy habits, and navigate complex health issues throughout their lives⁵. By emphasizing these skills, health education prepares students to be:

1. Self-directed learners
2. Critical thinkers and problem-solvers
3. Effective communicators
4. Responsible, productive citizens

These outcomes are achieved through a focus on eight core standards that form the foundation of health education. These standards encompass a range of critical competencies, including comprehending health concepts, accessing valid health information, demonstrating effective decision-making, setting achievable goals, and developing advocacy skills to enhance personal, family, and community health.

Health education plays a crucial role in addressing contemporary challenges facing young people, including mental health, substance use, and other risky behaviors⁶. In our increasingly digital world, health education must also address issues of digital wellness. A well-designed program can help mitigate these risks by empowering students with the knowledge and skills to make healthy choices in both physical and digital environments.⁷

As we prepare students for the challenges and opportunities of the 21st century, it is essential that health education remains a priority in our schools. This aligns with the South Dakota Department of Education's mission to enhance learning through leadership and service, and its aspiration for all students to leave the K-12 education system: "College, Career and Life Ready." By providing students with the knowledge, skills, and self-efficacy to lead healthy lives, we are investing in their future success as students, workers, and engaged community members.

Footnotes:

1. SHAPE America – Society of Health and Physical Educators. (2018). Health Education is a Critical Component of a Well-Rounded Education [Position statement]. Reston, VA: Author.
2. Centers for Disease Control and Prevention. (2023). What Is Health Literacy? Retrieved from <https://www.cdc.gov/healthliteracy/learn/index.html>
3. Fleary, S. A., Joseph, P., & Pappagianopoulos, J. E. (2018). Adolescent health literacy and health behaviors: A systematic review. *Journal of Adolescence*, 62, 116-127.
4. Michael, S. L., Merlo, C. L., Basch, C. E., Wentzel, K. R., & Wechsler, H. (2015). Critical connections: Health and academics. *Journal of School Health*, 85(11), 740-758.
5. Benes, S., & Alperin, H. (2016). The essentials of teaching health education: Curriculum, instruction, and assessment. Human Kinetics.
6. Centers for Disease Control and Prevention. (2021). Youth Risk Behavior Survey Data Summary & Trends Report: 2011-2021. U.S. Department of Health and Human Services.
7. Groshek, J., & Katz, E. (2021). Media literacy and health education for digital well-being: A review of interventions. *American Journal of Health Education*, 52(4), 235-249. <https://doi.org/10.1080/19325037.2021.1930617>

Health Education Standards Revision Committee 2024

Name	Employer	Position
Jared Anderson	Kennedy Elementary/Pierre School District	K-5 PE/Health
Amber Birkmire	Zion Lutheran School	Elementary Teacher
Maridee Dossett	Madison Central	6-7th Grade Health Teacher
Shelby Edwards	Groton Area School District	6-12th Grade Principal
Tracy Nelson	South Dakota State University	Physical Education Program Coordinator, and Health Educator
Miguel Manriquez	Georgia Morse Middle School / Pierre School District	6th grade PE/Health
Jason Simon-Ressler	SD Department of Health, Office of Lifespan Health	Child and Adolescent Health Coordinator
Support Team		
Hayley Miller	Department of Education – Math and Science Specialist	DOE Project Coordinator
Nicole Uhre-Balk	Compass – Learning Specialist	Committee Facilitator
Vera Van Winkle	Department of Education – Administrator	DOE Project Lead

Development of the South Dakota Health Education Standards

The first South Dakota Health Education Standards (SDHES) were developed in 1995 using the newly developed National Health Education Standards (NHES) as a model. Further review and revisions were conducted as outlined in the SDHES revision timeline shown in Table 1. The current SDHES were approved by the South Dakota Board of Education Standards in the spring of 2026.

Although the standards identify what knowledge and skills students should know and be able to do, they leave precisely how this is to be accomplished to teachers and other local specialists who formulate, deliver, and evaluate curricula. The SDHES do not address specific health education content areas; instead, they provide a framework from which curricula can be developed independently. The selection of specific health content is left to state and local education agencies. This approach allows the SDHES to remain relevant over time, and it enables state and local education agencies to determine the curriculum content that best addresses the needs of their students.

The SDHES give direction for moving toward excellence in teaching health education. Teachers and policymakers can use the standards to design curricula, to allocate instructional resources, and to provide a basis for assessing student achievement and progress. The SDHES identify knowledge and skills that can be assessed.

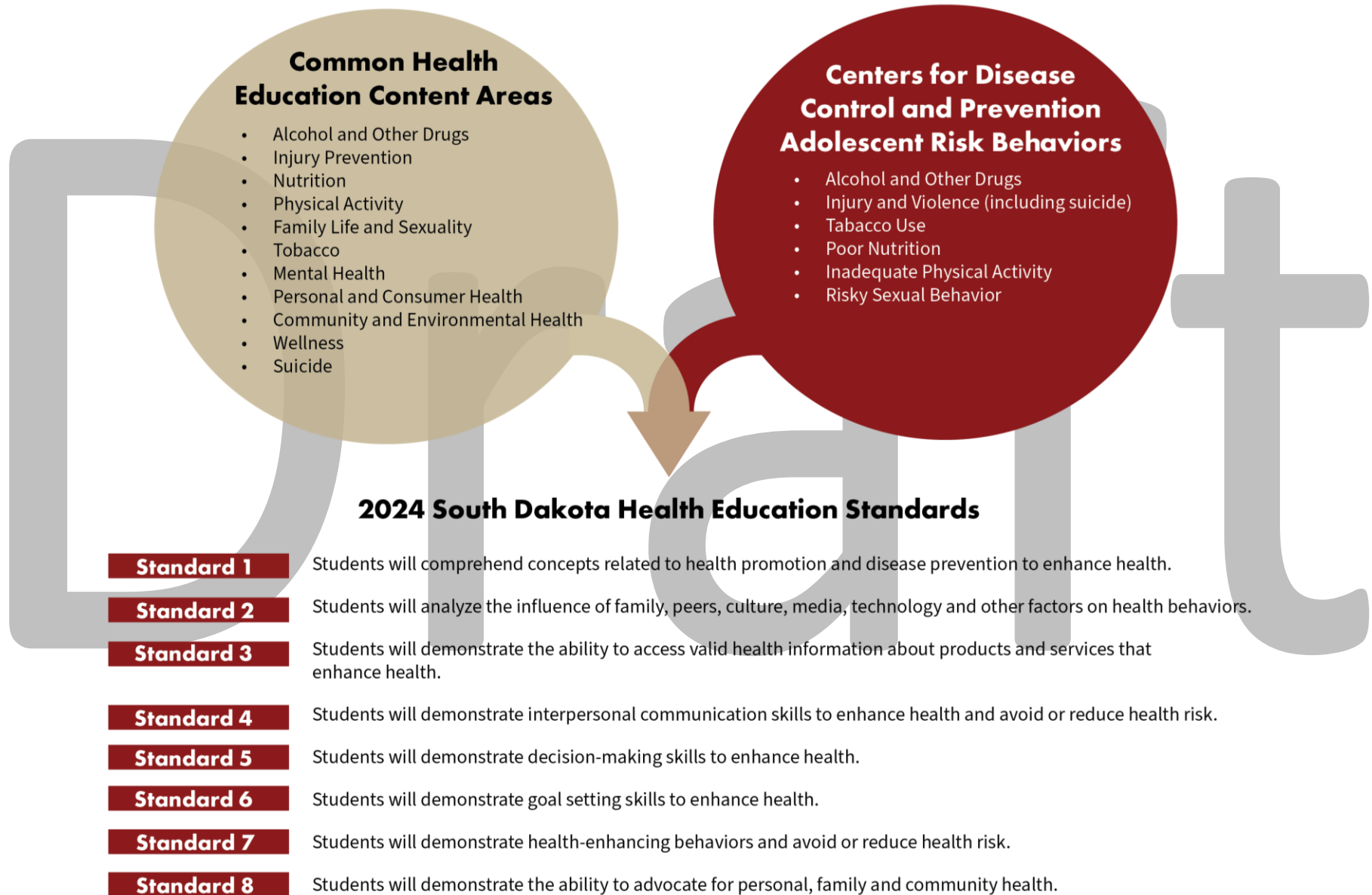
Implementation of the SDHES with a commitment to providing qualified teachers, adequate instructional time, and increased linkages to other school curricular areas significantly increases the likelihood that schools will provide high-quality health instruction to all young people.

Table 1 - South Dakota Health Education Standards Revision Timeline		
Year	South Dakota Timeline	National Timeline
1993		First National Health Education Standards Developed and Adopted
1996	First South Dakota Health Education Standards Developed and Approved by the South Dakota Board of Education	
2000	South Dakota Health Education Standards Revised and Approved by the South Dakota Board of Education	
2006	First South Dakota Health Education Course Standards for High School Graduation Developed and Approved by the South Dakota Board of Education	
2007		National Health Education Standards Revised and Adopted
2010	South Dakota Health Education Standards Revised and Approved by the South Dakota Board of Education	
2018	South Dakota Health Education Standards Revised and Approved by the South Dakota Board of Education	
2023		National Health Education Standards Revised and Released
2026	South Dakota Health Education Standards Revised and Approved by the South Dakota Board of Education	

Health Content Areas Aligned with SD Health Standards

See Figure 1 for the relationship of common health education content areas, which were also previous SD Health Education Standards, and the Centers for Disease Control and Prevention adolescent risk behaviors to the South Dakota Health Education Standards.

Figure 1



Organization of the South Dakota Health Education Standards Document

The South Dakota Health Education Standards (SDHES) document displays each standard (and its supporting information) as follows:

1. The standard
2. The performance indicators (organized by grade span).

The Standards

The eight standards, as shown in Table 2, broadly and collectively articulate what students should know and be able to do to adopt or maintain health-enhancing behaviors. Knowledge of core health concepts and underlying principles of health promotion and disease prevention are included in Standard 1. Then Standards 2 through 8 identify key processes and skills that are applicable to healthy living. The key processes and skills are:

- Analyzing Influences
- Accessing Information
- Interpersonal Communication
- Decision-making
- Goal setting
- Self-management (practicing health-enhancing behaviors)
- Advocacy

Table 2 - The South Dakota Health Education Standards 2024

Table 2 - The South Dakota Health Education Standards 2024	
Standard 1:	Students will comprehend concepts related to health promotion and disease prevention to enhance health.
Standard 2:	Students will analyze the influence of family, peers, culture, media, technology and other factors on health behaviors.
Standard 3:	Students will demonstrate the ability to access valid health information about products and services that enhance health.
Standard 4:	Students will demonstrate interpersonal-communication skills to enhance health and avoid or reduce health risk.
Standard 5:	Students will demonstrate decision-making skills to enhance health.
Standard 6:	Students will demonstrate goal-setting skills to enhance health.
Standard 7:	Students will demonstrate health-enhancing behaviors and avoid or reduce health risk.
Standard 8:	Students will demonstrate the ability to advocate for personal, family and community health .

Performance Indicators

The performance indicators articulate specifically what students should *know* or *be able to do* in support of each standard by the conclusion of each of the following four grade spans:

- Pre-kindergarten through Grade 2
- Grade 3 through Grade 5
- Grade 6 through Grade 8
- Grade 9 through Grade 12

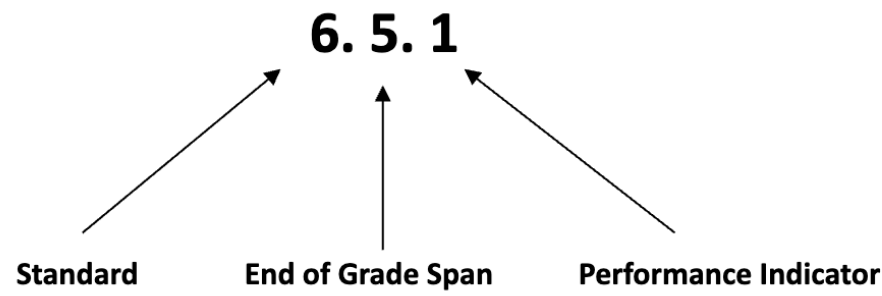
Each performance indicator is introduced by this stem: “As a result of health instruction in [*grade range*], students will be able to...” The performance indicators are meant to be achieved by the end of the grade span in which they are identified. For ease of identification, the performance indicators are numbered sequentially.

Because learning best occurs when students perform at all levels of the cognitive domain, the performance indicators encompass applying, analyzing, evaluation, and creating, as well as remembering and understanding. Even primary grade students can learn at the higher levels of the cognitive domain if the concepts and learning activities are developmentally appropriate.

Performance indicators are also intended to serve as a blueprint for organizing student assessment. Student achievement of all performance indicators specified for each standard supports the successful attainment of that standard, ultimately increasing the likelihood that students will adopt and maintain healthy behaviors.

Guide to the Numbering and Symbol System Used in the Standards Document

Standards are coded to cross-reference the Standard, the End of Grade Span and the Performance Indicator Number.



Example: 6.5.1: Set a personal health goal and track progress toward its achievement.

Table 3 Example of Health Education Performance Indicators with Skill Samples for the Content Areas of Violence Prevention and Personal Health and Wellness.	
Health Education Standard 5: <i>Students will demonstrate decision-making skills to enhance health.</i>	
Performance indicator (Pre-k - grade 2): 5.2.1 Identify situations when a health-related decision is needed. Examples: <ul style="list-style-type: none">Identify situations that may involve bullying.Identify situations when hand washing is needed.	
Performance indicator (grades 3 - 5): 5.5.3 Discuss how decision-making impacts health related issues or problems. Examples: <ul style="list-style-type: none">Identify two strategies for avoiding or minimizing a bullying problem on the school bus.Identify two strategies related to healthy personal hygiene practices.	
Performance indicator (grades 6 - 8): 5.8.4 Identify healthy alternatives over unhealthy alternatives when making a decision. Examples: <ul style="list-style-type: none">Analyze the healthy and unhealthy impacts of each option on self and others when handling a bullying problem.	

- Analyze the healthy and unhealthy impacts of each option of personal hygiene practices to self and others.

Performance indicator (grades 9 - 12):

5.12.6 Defend the healthy choice when making decisions.

Examples:

- Justify choosing a non-violent resolution to a bullying situation.
- Defend choosing healthy hygiene habits.

2024 South Dakota Health Education Standards

Standard 1: Comprehending Concepts

Rational Statement

The acquisition of basic health concepts and functional health knowledge provides a foundation for promoting health-enhancing behaviors among youth.

- This standard includes essential concepts that are based on established health behavior theories and models. Concepts that focus on both health promotion and risk reduction are included in the performance indicators.

1. Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Health Education Standard 1 Performance Indicators

As a result of health instruction in **Pre-K - Grade 2**, students will:

- | | |
|-------|---|
| 1.2.1 | Describe healthy behaviors that affect personal health. |
| 1.2.2 | Identify examples of health domains. |
| 1.2.3 | Describe ways to prevent or reduce risk of diseases. |
| 1.2.4 | List ways to prevent common childhood injuries. |
| 1.2.5 | Describe why it is important to seek health care. |

As a result of health instruction in Grades 3 - 5 , students will:	
1.5.1	Describe why it is important to participate in healthy behaviors.
1.5.2	Identify and describe examples of emotional, intellectual, physical, and social health.
1.5.3	Describe ways in which safe and healthy school and community environments can promote personal health.
1.5.4	Describe ways to prevent and reduce common childhood injuries and health problems.
1.5.5	Describe when it is important to seek health care.
As a result of health instruction in Grades 6 - 8 , students will:	
1.8.1	Research and describe the relationships between healthy behaviors and personal health.
1.8.2	Identify and describe how emotional, intellectual, physical, and social health affect adolescent development and relationships.
1.8.3	Interpret how family history and environment can affect personal health.
1.8.4	Describe ways to reduce or prevent adolescent injuries and other adolescent health problems.
1.8.5	Explain how preventative health care can promote personal health.
1.8.6	Compare and contrast the benefits of and barriers to practicing healthy behaviors.
1.8.7	Examine and describe the potential seriousness of injury or illness if engaging in unhealthy behaviors.
As a result of health instruction in Grades 9 - 12 , students will:	
1.12.1	Predict how healthy behaviors can affect health status.
1.12.2	Describe the interrelationships of emotional, intellectual, physical, and social health in adolescence.
1.12.3	Analyze how social and physical environments affect personal health.
1.12.4	Research how genetics and family history can affect personal health.

1.12.5	Propose ways to reduce or prevent injuries and health problems.
1.12.6	Investigate the relationship between access to health care and health status.
1.12.7	Propose strategies for promoting the benefits of and overcoming barriers to practicing a variety of health-enhancing behaviors.
1.12.8	Evaluate personal susceptibility to injury, illness, or death if engaging in unhealthy behaviors.
1.12.9	Analyze the potential seriousness of injury or illness if engaging in unhealthy behaviors.

Standard 2: Analyzing Influences

Rational Statement

Health is affected by a variety of positive and negative influences within society.

- This standard focuses on identifying and understanding the diverse internal and external factors that influence health practices and behaviors among youth, including personal values, beliefs, and perceived norms.

2. Students will analyze the influence of family, peers, culture, media, technology and other factors on health behaviors.

Health Education Standard 2 Performance Indicators

As a result of health instruction in **Pre-K - Grade 2**, students will:

2.2.1	Identify how the family influences personal health practices and behaviors.
2.2.2	Identify what the school can do to support personal health practices and behaviors.
2.2.3	Describe how media can influence health behaviors.

As a result of health instruction in **Grades 3 - 5**, students will:

2.5.1	Describe how the family influences personal health practices and behaviors.
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2.5.2	Identify the influence of culture on health practices and behaviors.
2.5.3	Identify how peers can influence healthy and unhealthy behaviors.
2.5.4	Identify how the school and community can support personal health practices and behaviors.
2.5.5	Explain how media influences thoughts, feelings, and health behaviors.
2.5.6	Identify ways that technology can influence personal health.
As a result of health instruction in Grades 6 - 8 , students will:	
2.8.1	Classify health factors in the family that influence the health and wellness of adolescents.
2.8.2	Classify how cultures influence health beliefs, practices, and behaviors.
2.8.3	Analyze how peers influence healthy and unhealthy behaviors.
2.8.4	Describe how the school and community can influence personal health practices and behaviors.
2.8.5	Analyze how messages from media influence health behaviors.
2.8.6	Research the influence of technology on personal and family health.
2.8.7	Explore and describe the influence of personal values and beliefs on individual health practices and behaviors.
2.8.8	Distinguish between healthy behaviors and risky behaviors and their influence on short-term and long-term health.
2.8.9	Identify how public health policies can influence health promotion and disease prevention.
As a result of health instruction in Grades 9 - 12 , students will:	
2.12.1	Analyze health factors in the family that influence the health and wellness of individuals.
2.12.2	Analyze how culture supports and challenges health beliefs, practices, and behaviors.
2.12.3	Demonstrate how peers influence healthy and unhealthy behaviors

2.12.4	Compare and contrast how the school and community can influence personal health practice and behaviors.
2.12.5	Critique the influence of media on personal and family health.
2.12.6	Evaluate the impact of technology on personal, family, and community health.
2.12.7	Describe how personal perceptions of norms influence healthy and unhealthy behaviors.
2.12.8	Analyze the influence of personal values and beliefs on individual health practices and behaviors.
2.12.9	Articulate how some health risk behaviors can influence the likelihood of engaging in unhealthy behaviors.
2.12.10	Investigate how public health policies and government regulations can influence health promotion and disease prevention.

Standard 3: Accessing Information

Rational Statement

Access to valid health information and health-promoting products and services is critical in the prevention, early detection, and treatment of health problems.

- This standard focuses on how to identify and access valid health resources and how to reject unproven sources. Application of the skills of analysis, comparison, and evaluation of health resources empowers students to achieve health literacy.

3. Students will demonstrate the ability to access valid health information about products and services that enhance health.

Health Education Standard 3 Performance Indicators	
As a result of health instruction in Pre-K - Grade 2 , students will:	
3.2.1	Identify trusted adults and professionals who can help enhance health.
3.2.2	Identify ways to locate home, school, and community health helpers.

3.2.3	Explain the type of help provided by home, school, and community health helpers.
As a result of health instruction in Grades 3 - 5 , students will:	
3.5.1	Identify characteristics of valid health information, products, and services.
3.5.2	List resources from home, school, and community that provide valid health information.
As a result of health instruction in Grades 6 - 8 , students will:	
3.8.1	Locate valid and reliable health information, products, and services.
3.8.2	Access valid health information from home, school, and community.
3.8.3	Investigate the validity of products and services that promote health and wellness.
3.8.4	Describe situations that may require professional health services.
As a result of health instruction in Grades 9 - 12 , students will:	
3.12.1	Compare and contrast health information, products, and services.
3.12.2	Utilize resources from home, school, and community that provide valid health information.
3.12.3	Evaluate the accessibility of products and services that enhance health.
3.12.4	Identify barriers to accessing health services and professionals.

Standard 4: Interpersonal Communication

Rational Statement

Effective communication enhances personal, family and community health.

- This standard focuses on how responsible individuals use verbal and nonverbal skills to develop and maintain healthy personal relationships. The ability to organize and convey information and feelings is the basis for strengthening interpersonal interactions and reducing or avoiding conflict.

4. Students will demonstrate interpersonal communication skills to enhance health and avoid or reduce health risk.

Health Education Standard 4 Performance Indicators	
As a result of health instruction in Pre-K - Grade 2 , students will:	
4.2.1	Demonstrate healthy ways to express needs, wants, and feelings.
4.2.2	Display listening skills to enhance health.
4.2.3	Demonstrate ways to respond to an unwanted, threatening, or dangerous situation.
4.2.4	Demonstrate ways to tell a trusted adult if threatening or harmful behaviors affect self or others.
As a result of health instruction in Grades 3 - 5 , students will:	
4.5.1	Demonstrate effective verbal and nonverbal communication skills to enhance health.
4.5.2	Demonstrate refusal skills that avoid or reduce health risks.
4.5.3	Demonstrate nonviolent strategies to manage or resolve conflict.
4.5.4	Demonstrate how to ask for assistance to enhance personal health.
As a result of health instruction in Grades 6 - 8 , students will:	
4.8.1	Analyze effective verbal and nonverbal communication skills to enhance overall health and wellness.
4.8.2	Apply effective conflict management or resolution strategies.
4.8.3	Research how to ask for assistance to enhance the health of self and others.
4.8.4	Demonstrate refusal, negotiation and collaboration skills that avoid or reduce health risks.
As a result of health instruction in Grades 9 - 12 , students will:	

4.12.1	Evaluate the application of skills for communicating effectively with family, peers, and others to enhance health.
4.12.2	Demonstrate and reflect on refusal, negotiation, and collaboration skills to enhance health and avoid or reduce health risks.
4.12.3	Develop strategies to prevent, manage, or resolve interpersonal conflicts without harming self or others.
4.12.4	Demonstrate how to ask for and offer assistance to enhance the health of self and others.

Standard 5: Decision Making

Rational Statement

Decision-making skills are needed to identify, implement, and sustain health-enhancing behaviors.

- This standard includes the essential steps that are needed to make healthy decisions as prescribed in the performance indicators. When applied to health issues, the decision-making process enables individuals to collaborate with others to improve their quality of life.

5. Students will demonstrate decision-making skills to enhance health.

Health Education Standard 5 Performance Indicators

As a result of health instruction in **Pre-K - Grade 2**, students will:

5.2.1	Identify situations when a health-related decision is needed.
5.2.2	Explain situations when a health-related decision can be made independently when assistance is needed.
5.2.3	Describe potential consequences of health-related decisions.

As a result of health instruction in **Grades 3 - 5**, students will:

5.5.1	Identify health-related situations that can help or hinder healthy decision making.

5.5.2	Explain basic decision-making steps needed to make a health-related decision.
5.5.3	Discuss how decision-making impacts health related issues or problems.
5.5.4	Describe the potential outcomes of each option when making a health-related decision.
5.5.5	Identify and evaluate a healthy option when making a decision.
As a result of health instruction in Grades 6 - 8 , students will:	
5.8.1	Identify circumstances that can help or hinder healthy decision making.
5.8.2	Identify and implement decision-making processes in health-related situations.
5.8.3	Compare and contrast when individual or collaborative decision making is appropriate.
5.8.4	Identify healthy alternatives over unhealthy alternatives when making a decision.
5.8.5	Analyze the outcomes of a health-related decision.
As a result of health instruction in Grades 9 - 12 , students will:	
5.12.1	Examine circumstances that can help or hinder healthy decision making.
5.12.2	Reflect on the value of applying a decision-making process in health-related situations.
5.12.3	Justify when individual or collaborative decision making is appropriate.
5.12.4	Generate alternatives to health-related issues or problems.
5.12.5	Predict the potential short-term and long-term impact of each alternative on self and others.
5.12.6	Defend the healthy choice when making decisions.
5.12.7	Evaluate the effectiveness of health-related decisions.

Standard 6: Goal Setting

Rational Statement

Goal-setting skills are essential to help students identify, adopt, and maintain healthy behaviors.

- This standard includes the critical steps that are needed to achieve both short-term and long-term health goals. These skills make it possible for individuals to have aspirations and plans for the future.

6. Students will demonstrate goal-setting skills to enhance health.

Health Education Standard 6 Performance Indicators	
As a result of health instruction in Pre-K - Grade 2 , students will:	
6.2.1	Identify a short-term personal health goal and take action toward achieving the goal.
6.2.2	Identify who can help when assistance is needed to achieve a personal health goal.
As a result of health instruction in Grades 3 - 5 , students will:	
6.5.1	Set a personal health goal and track progress toward its achievement.
6.5.2	Identify resources to assist in achieving a personal health goal.
As a result of health instruction in Grades 6 - 8 , students will:	
6.8.1	Assess personal health practices.
6.8.2	Develop a goal to adopt, maintain, or improve a personal health practice.
6.8.3	Analyze strategies and skills needed to attain a personal health goal.
6.8.4	Describe how personal health goals can vary with changing abilities, priorities, resources, and responsibilities.
As a result of health instruction in Grades 9 - 12 , students will:	
6.12.1	Assess personal health practices and overall health status.

6.12.2	Develop a plan to attain a personal health goal that addresses strengths, needs, and risks.
6.12.3	Implement strategies and monitor progress in achieving a personal health goal.
6.12.4	Formulate an effective long-term personal health plan.

Standard 7: Self-Management

Rational Statement

Research confirms that the practice of health-enhancing behaviors can contribute to a positive quality of life. In addition, many diseases and injuries can be prevented by reducing harmful and risk-taking behaviors.

- This standard promotes the acceptance of personal responsibility for health and encourages the practice of healthy behaviors.

7. Students will demonstrate health-enhancing behaviors and avoid or reduce health risk.

Health Education Standard 7 Performance Indicators	
As a result of health instruction in Pre-K - Grade 2 , students will:	
7.2.1	Identify healthy practices and behaviors to maintain or improve personal health.
7.2.2	Identify behaviors that avoid or reduce health risks.
As a result of health instruction in Grades 3 - 5 , students will:	
7.5.1	Identify and demonstrate responsible personal health behaviors.
7.5.2	Describe a variety of healthy practices and behaviors to maintain or improve personal health.
7.5.3	Demonstrate a variety of behaviors that avoid or reduce health risks.
As a result of health instruction in Grades 6 - 8 , students will:	

7.8.1	Explain the importance of assuming responsibility for personal health behaviors.
7.8.2	Investigate healthy practices and behaviors that will maintain or improve the health of self and others.
7.8.3	Describe behaviors that avoid or reduce health risks to self and others.
As a result of health instruction in Grades 9 - 12 , students will:	
7.12.1	Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.
7.12.2	Recommend a variety of behaviors that avoid or reduce health risks to self and others.

Standard 8: Advocacy

Rational Statement

Advocacy skills help students promote healthy norms and healthy behaviors.

- This standard helps students develop important skills to target their health-enhancing messages and to encourage others to adopt healthy behaviors.

8. Students will demonstrate the ability to advocate for personal, family and community health.

Health Education Standard 8 Performance Indicators	
As a result of health instruction in Pre-K - Grade 2 , students will:	
8.2.1	Communicate health needs to promote personal health.
8.2.2	Encourage others to make positive health choices.
As a result of health instruction in Grades 3 - 5 , students will:	
8.5.1	Express opinions and give accurate information about health issues.
8.5.2	Support others in making positive health choices.

As a result of health instruction in Grades 6 - 8 , students will:	
8.8.1	State a health-enhancing concept and support it with accurate information.
8.8.2	Research ways to advocate for healthy individuals, families, and schools.
8.8.3	Identify ways in which health messages and communication techniques can be altered for different audiences.
8.8.4	Demonstrate how to influence and support others to make positive health choices.
As a result of health instruction in Grades 9 - 12 , students will:	
8.12.1	Advocate the role of individual responsibility in enhancing health.
8.12.2	Persuade and support others to make positive health choices.
8.12.3	Collaborate to advocate for improving personal, family, and/or community health.
8.12.4	Modify health messages and communication techniques to a specific target audience.