

**Guidelines for Content Advisor Feedback on the Health Education
Draft Recommendations
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Reviewed Strands 1,2,4,5, and 6.

1. Does each grade level or course follow a complete and logical development of health education concepts? If not, what suggestions do you have for improvement?

Yes. Additional specific feedback is outlined below.

2. Have the correct vocabulary and terminology been used throughout the TEKS?

Yes

3. Is the level of rigor appropriate for each grade level?

Yes.

4. Are concepts introduced at the appropriate grade level?

Yes

5. Are the student expectations (SEs) clear and specific?

Yes

6. Are the TEKS aligned horizontally and vertically? If not, what gaps should be addressed?

Yes

7. Can all student expectations reasonably be taught within the amount of time typically allotted for the grade level or high school course prior to the end of the school year?

Possibly.

8. Is there any unnecessary duplication of standards or concepts? Are there student expectations that can be eliminated in order to streamline the standards?

No

9. Are there any gaps or concepts missing that should be addressed? Are there specific areas that need to be updated to reflect current research?

No. The curriculum is very comprehensive.

10. Do you have any other suggestions for ways in which the health education TEKS can be improved?

Only as listed below.

Notes on Physical Health and Hygiene:

None

Notes on Mental Health and Wellness:

None

Notes on Injury/Violence

I think that Safety Awareness (12.B) should be re-addressed in 7-8th grade.

Regarding sexting and digital porn (115.23) what here is good, but it should also include the LEGAL ramifications for both the sender, and the receiver of child pornography and explain that even sending a picture of yourself is illegal if you are underage and have negative ramifications beyond childhood that specifically pertain to child pornography and sexting.

Notes on Alcohol, Tobacco, and Other Drugs (18)

I like the action being requested of Health 1 students through-out this strand challenging them to analyze and develop strategies to mitigate the negative effects of these substances.

Notes on Reproduction & Sexual Health strand (23).

Decision-making and clear consent and factors that t can affect the ability to give/perceive consent should be taught in Grade 7-8 (not all students take Health 1 in high-school and these topics are actually required via Title IX to be discussed at the college level. Introducing them in middle school prior to student engagement in alcohol and sex at the high-school level will provide beneficial [Health 1 115.32 Letter I]

I agree with The Texas Campaign to Prevent Teen Pregnancy when it is mentioned that the current TEKS almost villainizes teen parents and non-traditional families.

I agree with The Texas Campaign to Prevent Teen Pregnancy when it is mentioned that too much emphasis is placed on abstinence-only, and more information needs to be presented about how to prevent pregnancy and safer sex practices.

Withholding medical information only hurts our students and keeps them ignorant and operating on partial and incomplete information. Talking about teen pregnancy doesn't increase rates of teen pregnancy. Actually, studies demonstrate the opposite is true. If the goal in a non-partisan educationally curriculum designed with the health and well-being of our students in mind, scientific facts are shared.