

THE ONTARIO CURRICULUM

GRADES 1–8

**HEALTH
AND
PHYSICAL
EDUCATION**

2019

Ontario 

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Une publication équivalente est disponible en français sous le titre suivant : *Le curriculum de l'Ontario de la 1^{re} à la 8^e année – Éducation physique et santé, 2019.*

This publication is available on the Ministry of Education's website, at www.edu.gov.on.ca.

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Preface

This document replaces *The Ontario Curriculum, Grades 1–8: Health and Physical Education, Interim Edition*, re-issued in 2018. Beginning in September 2019, all health and physical education programs for Grades 1 to 8 will be based on the expectations outlined in this document.

Elementary Schools for the Twenty-First Century

Ontario elementary schools strive to support high-quality learning while giving every student the opportunity to learn in the way that is best suited to their individual strengths and needs. The Ontario curriculum is designed to help all students reach their full potential through a program of learning that is coherent, relevant, and age-appropriate. It recognizes that, today and in the future, students need to be critically literate in order to synthesize information, make informed decisions, communicate effectively, and thrive in an ever-changing global community. It is important for students to be connected to the curriculum; to see themselves in what is taught, how it is taught, and how it applies to the world at large. The curriculum recognizes that the needs of learners are diverse, and helps all learners develop the knowledge, skills, and perspectives they need to become informed, productive, caring, responsible, healthy, and active citizens in their own communities and in the world.

Supporting Students' Well-Being and Ability to Learn

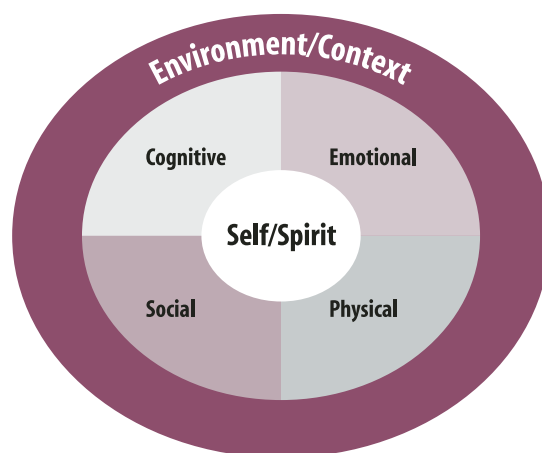
Promoting the healthy development of all students, as well as enabling all students to reach their full potential, is a priority for educators across Ontario. Students' health and well-being contribute to their ability to learn in all disciplines, including health and physical education, and that learning in turn contributes to their overall well-being. A well-rounded educational experience prioritizes social-emotional learning, physical and mental health, and inclusion together with academic success for all students. Parents, community partners, and educators all have critical roles in achieving this. The health and physical education curriculum engages students in learning about the factors that contribute to health and well-being and in building skills to live healthy, active lives.

Educators promote children and youth's well-being by creating, fostering, and sustaining a learning environment that is healthy, caring, safe, inclusive, and accepting. A learning environment of this kind will support not only students' cognitive, emotional, social, and physical development but also their mental health, their resilience, and their overall state of well-being. All this will help them achieve their full potential in school and in life.

A variety of factors, known as the “determinants of health” (discussed in this document on page 12), have been shown to affect a person’s overall state of well-being. Some of these are income and social status, education and literacy, gender, culture, physical environments, social supports and coping skills, and access to health services. Together, such factors influence not only whether a person is physically healthy but also the extent to which they will have the physical, social, and personal resources needed to cope and to identify and achieve personal aspirations. These factors also have an impact on student learning, and it is important to be aware of them as factors contributing to a student’s performance.

An educator’s awareness of and responsiveness to students’ cognitive, emotional, social, and physical development, and to their sense of self, or spirit, is critical to their success in school. A number of research-based frameworks, including those described in *Early Learning for Every Child Today: A Framework for Ontario Early Childhood Settings* (2007), *On My Way: A Guide to Support Middle Years Childhood Development* (2017), and *Stepping Stones: A Resource on Youth Development* (2012),¹ identify developmental stages that are common to the majority of students from Kindergarten to Grade 12. At the same time, these frameworks recognize that individual differences, as well as differences in life experiences and exposure to opportunities, can affect development, and that developmental events are not specifically age-dependent.

The framework described in *Stepping Stones* is based on a model that illustrates the complexity of human development. Its components – the cognitive, emotional, physical, and social domains – are interrelated and interdependent, and all are subject to the influence of a person’s environment or context. At the centre is an “enduring (yet changing) core” – a sense of self, or spirit – that connects the different aspects of development and experience (p. 17).



Source: *Stepping Stones: A Resource on Youth Development*, p. 17

1. Best Start Expert Panel on Early Learning, *Early Learning for Every Child Today: A Framework for Ontario Early Childhood Settings* (2007), Ministry of Children and Youth Services, *On My Way: A Guide to Support Middle Years Child Development* (2017), and Government of Ontario, *Stepping Stones: A Resource on Youth Development* (2012).

The Role of Mental Health

Mental health touches all components of development. As students will learn in the program outlined in this document, mental health is much more than the absence of mental illness. Well-being is influenced not only by the absence of problems and risks but by the presence of factors that contribute to healthy growth and development. By nurturing and supporting students' strengths and assets, educators help promote positive mental health in the classroom. At the same time, they can identify students who need additional support and connect them with the appropriate supports and services.²

What happens at school can have a significant influence on a student's well-being. With a broader awareness of mental health, educators can plan instructional strategies that contribute to a supportive classroom climate for learning in all subject areas, build awareness of mental health, and reduce stigma associated with mental illness. Taking students' well-being, including their mental health, into account when planning instructional approaches helps establish a strong foundation for learning.

2. For more information, see the ministry document *Supporting Minds: An Educator's Guide to Promoting Students' Mental Health and Well-being* (2013); see also pages 41 and 44 in this document.

Introduction

The 2019 health and physical education curriculum includes updated expectations in a number of areas, including mental health. Opportunities to learn about mental health are enhanced through the inclusion of new expectations on mental health literacy; new expectations on social-emotional learning skills, to be taught in connection with all parts of the curriculum; and enhanced connections to mental health within existing curriculum expectations.

Vision and Goals of the Health and Physical Education Curriculum

The health and physical education curriculum is based on the vision that the knowledge and skills students acquire in the program will benefit them throughout their lives and enable them to thrive in an ever-changing world by helping them develop mental health and well-being, physical and health literacy, and the comprehension, capacity, and commitment they will need to lead healthy, active lives and promote healthy, active living.

The goals of the health and physical education program are as follows.

Students will develop:

- the social-emotional learning skills needed to foster overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive;
- the skills and knowledge that will enable them to enjoy being active and healthy throughout their lives, through opportunities to participate regularly and safely in physical activity and to learn how to develop and improve their own personal fitness;
- the movement competence needed to participate in a range of physical activities, through opportunities to develop movement skills and to apply movement concepts and strategies in games, sports, dance, and various other physical activities;
- an understanding of the factors that contribute to healthy development, a sense of personal responsibility for lifelong health, and an understanding of how living healthy, active lives is connected with the world around them and the health of others.

The knowledge and skills acquired in health education and physical education form an integrated whole that relates to the everyday experiences of students and provides them with the physical literacy and health literacy they need to lead healthy, active lives.

Physical Literacy

Individuals who are physically literate move with competence and confidence in a wide variety of physical activities in multiple environments that benefit the healthy development of the whole person.

- Physically literate individuals consistently develop the motivation and ability to understand, communicate, apply, and analyze different forms of movement.
- They are able to demonstrate a variety of movements confidently, competently, creatively and strategically across a wide range of health-related physical activities.
- These skills enable individuals to make healthy, active choices that are both beneficial to and respectful of their whole self, others, and their environment.

Physical and Health Education Canada

Health Literacy

Health literacy involves the skills needed to get, understand and use information to make good decisions for health. The Canadian Public Health Association's Expert Panel on Health Literacy defines it as the ability to access, understand, evaluate and communicate information as a way to promote, maintain and improve health in a variety of settings across the life-course.

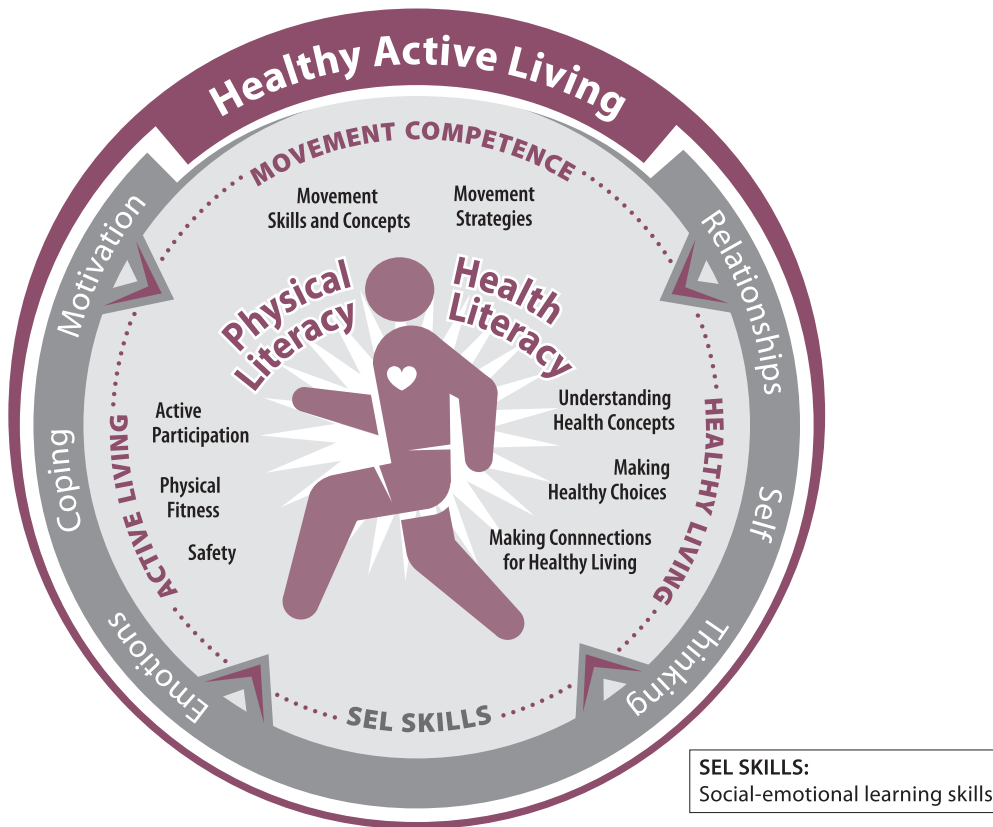
Irving Rootman and Deborah Gordon-El-Bihbety, *A Vision for a Health Literate Canada: Report of the Expert Panel on Health Literacy* (Ottawa: Canadian Public Health Association, 2008).

The Importance of the Health and Physical Education Curriculum

This curriculum helps students develop an understanding of what they need in order to make a commitment to lifelong healthy, active living and develop the capacity to live satisfying, productive lives. Healthy, active living benefits both individuals and society in many ways – for example, by increasing productivity and readiness for learning, improving morale, decreasing absenteeism, reducing health-care costs, decreasing anti-social behaviour such as bullying and violence, promoting safe and healthy relationships, and heightening personal satisfaction. Research has shown a connection between increased levels of physical activity and better academic achievement, better concentration, better classroom behaviour, and more focused learning. Other benefits include improvements in mental health and well-being, physical capacity, self-concept, and the ability to cope with stress. The expectations that make up this curriculum also provide the opportunity for students to develop social-emotional learning skills and well-being. This practical, balanced approach will help students move successfully through elementary and secondary school and beyond. In health and physical education, students will learn the skills needed to be successful in life as active, healthy, and socially responsible citizens.

The Ontario Health and Physical Education Curriculum

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The health and physical education curriculum promotes important educational values and goals that support the development of character. These include striving to achieve one’s personal best, equity and fair play, respect for diversity, sensitivity and respect for individual requirements and needs, and good health and well-being. These values are reinforced in other curriculum areas, as well as by society itself. Working together, schools and communities can be powerful allies in motivating students to achieve their potential and lead healthy, active lives.

The content and the setting of learning in health and physical education make it unique in a student’s school experience. Students are given opportunities to learn by doing. Their experiences in the program can include participating kinesthetically in activities in a gymnasium, in open spaces in the school, and outdoors; working with various types of equipment; working in a variety of group contexts; and discussing topics that have deep personal relevance and meaning. Students have opportunities to learn through creative work, collaboration, and hands-on experiences.

Fundamental Principles in Health and Physical Education

The health and physical education curriculum from Grade 1 to Grade 12 is founded on the following principles.³

1. ***Health and physical education programs are most effective when they are delivered in healthy schools and when students' learning is supported by school staff, families, and communities.***

When students see the concepts they are learning in health and physical education reflected and reinforced through healthy-school policies and healthy practices in their families and communities, their learning is validated and reinforced. Students are then more likely to adopt healthy active living practices and maintain them throughout their lives.

2. ***Physical activity is the key vehicle for student learning.***

Health and physical education offers students a unique opportunity for kinesthetic learning – they learn about healthy, active living primarily by “doing”, that is, through physical activity. In health and physical education, students discover the joy of movement, learn about their bodies, and develop physical and cognitive skills that will contribute to their lifelong health and well-being.

3. ***Physical and emotional safety is a precondition for effective learning in health and physical education.***

Students learn best in an environment that is physically and emotionally safe. In health and physical education, students are learning new skills and participating in a physical environment where there is inherent risk. They are learning in a public space where others can see them explore, learn, succeed, and make mistakes. They discuss health topics that have implications for their personal health and well-being. It is critical that teachers provide a physically and emotionally safe environment for learning by emphasizing the importance of safety in physical activity, treating students with respect at all times, being sensitive to individual differences, following all board safety guidelines, and providing an inclusive learning environment that recognizes and respects the diversity of all students and accommodates individual strengths, needs, and interests.

4. ***Learning in health and physical education is student-centred and skill-based.***

Learning in health and physical education should be directly connected to the needs and abilities of individual students. The curriculum expectations are age-related but not age-dependent – the readiness of students to learn will depend on their individual physical and emotional development. The learning in all strands is focused

3. The Grade 11 and 12 destination courses integrate these principles while also focusing on specialized topics.

on individual skill development for healthy, active living, supported by knowledge of content and conceptual understanding. In order to reach their full potential, students need to receive progressive instruction and constructive feedback, as well as numerous opportunities to practise, reflect, and learn experientially in a safe environment.

5. *Learning in health and physical education is balanced, integrated, and connected to real life.*

Health and physical education is *balanced* in that it addresses both the physical and cognitive needs of students. It also addresses their emotional and social needs. It is important for teachers to provide adequate time and resources for all aspects of the program, and not to allow any one aspect to be emphasized at the expense of others. Learning in health and physical education is *integrated* because the connections between the various elements of the program – social-emotional learning skills, active living, movement competence, and healthy living – are always recognized. Understanding these connections provides the foundation for health and physical literacy, overall mental health and well-being, and lifelong healthy, active living. Finally, health and physical education is *highly relevant to students' present and future lives in a complex, global, technology-rich, and rapidly changing world*, and students need to understand this if they are to develop the comprehension, commitment, and capacity to participate in and promote healthy, active living.

Foundations for a Healthy School

Students' learning in health and physical education helps them make informed decisions about all aspects of their health and encourages them to lead healthy, active lives. This learning is most authentic and effective when it occurs within the context of a “healthy” school. The implementation of the health and physical education curriculum is a significant component of a healthy learning environment that supports well-being.

The Ministry of Education's **Foundations for a Healthy School** identifies five interconnected areas that together inform a comprehensive approach to developing a healthier school. (The five areas align closely with the K–12 School Effectiveness Framework.) This comprehensive approach ensures that students learn about healthy, active living in an environment that reinforces their learning through policies, programs, and initiatives that promote healthy, active living. The five areas are as follows:

- Curriculum, Teaching, and Learning
- School and Classroom Leadership
- Student Engagement
- Social and Physical Environments
- Home, School, and Community Partnerships

Curriculum, Teaching, and Learning

The implementation of the health and physical education curriculum provides students with a wide range of opportunities to learn, practise, and demonstrate knowledge and skills related to healthy and active living. Instruction and implementation of the curriculum can lay the foundation for students to make choices that support healthy, active living outside instructional time. In order to ensure effective health and physical education programs, it is important for teachers and school administrators to participate in focused professional learning opportunities.

School and Classroom Leadership

School and classroom leadership focuses on creating a positive classroom and school environment by identifying shared goals and priorities that are responsive to the needs of the school community. This can include integrating healthy schools policies and programs into school improvement planning processes; establishing a collaborative learning culture that fosters innovation; ensuring that policies and procedures related to student well-being are in place; and collecting and using data to identify priorities and inform programming.

Student Engagement

Student engagement refers to students identifying with and valuing their learning; feeling a sense of belonging at school; and being informed about, engaged with, and empowered to participate in and lead academic and non-academic activities. Student engagement is strengthened when opportunities are provided for students to take leadership roles in relation to their learning, the learning environment, and their well-being; when students are supported in developing the skills they need to be self-directed, self-monitoring learners, through the use of assessment *for* learning, assessment *as* learning, and assessment *of* learning approaches; and when the diverse perspectives of students are taken into account in school decision-making processes.

Social and Physical Environments

Healthy, safe, and caring social and physical environments support learning and contribute to the positive cognitive, emotional, social, and physical development of students. The social and physical environments can affect both conditions for learning and opportunities for physical activity and healthy living. Sustaining physically healthy and socially supportive environments involves providing ongoing support for the development and maintenance of positive relationships within a school and school community; considering how these environments are influenced by various features and aspects of the school premises and surroundings (e.g., buildings and grounds, routes to and from school, facilities in the school community); and considering the availability of appropriate material and equipment used for various purposes on school premises (e.g., visual supports, program materials, technology).

Home, School, and Community Partnerships

Home, school, and community partnerships engage parents, extended family, school staff, and community groups in a mutually beneficial way to support, enhance, and promote opportunities for learning and healthy schools policies, programs, and initiatives. These partnerships can involve engaging and coordinating services, expertise, and resources that are available, within the school and local community, from a wide array of groups (e.g., school council, student council, public health units); and making connections with the broader community through on-site programs such as child care and family support programs. Partnerships can also be formed that draw on services, expertise, and resources that are available beyond the local community (e.g., in regional, provincial, or national organizations).

Determinants of Health

The World Health Organization (WHO) declared in the preamble to its constitution, which came into force in 1948, that health is “a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity”. Today, Health Canada considers the following to be “determinants of health” (that is, factors and conditions that can have a significant influence on a person’s health): income and social status, employment and working conditions, education and literacy, childhood experiences, physical environments, social supports and coping skills, healthy behaviours, access to health services, biology and genetic endowment, gender, culture, and race/racism. Other recent models describe and group the factors differently and include additional factors, such as stress, food insecurity, care in early life, and Aboriginal status.⁴

Together, such factors affect an individual’s overall state of physical, mental, social, emotional, and spiritual well-being. They influence not only whether a person stays healthy or becomes ill but also the extent to which the person possesses the physical, social, and personal resources needed to identify and achieve personal aspirations, satisfy needs, and cope with the environment. These factors also have an impact on student learning as a whole, and are strongly connected to learning in health and physical education. Although students have varying degrees of control over these factors, it is important to be aware of them as contributing factors in student performance. It is also important to recognize the value of personal strategies that can be learned and practised to foster well-being in the face of stressful and challenging life circumstances.

4. For detailed current information on determinants of health, see the [website of the Public Health Agency of Canada](#).

Roles and Responsibilities in Health and Physical Education

Students

Students' responsibilities with respect to their own learning develop gradually and increase over time as they progress through elementary and secondary school. With appropriate instruction and with experience, students come to see how an applied effort can enhance learning and improve achievement and well-being. As they mature and as they develop the ability to persist, to manage their behaviour and impulses, to take responsible risks, and to listen with understanding, students become better able to take more responsibility for their learning and progress. There are some students, however, who are less able to take full responsibility for their learning because of unique challenges they face. The attention, patience, and encouragement of teachers can be extremely important to the success of these students. Learning to take responsibility for their achievement and improvement is an important part of every student's education, regardless of their circumstances.

Mastering the skills and concepts connected with learning in the health and physical education curriculum requires ongoing practice, an effort to respond to feedback (to the extent possible), personal reflection, and commitment from students. It also requires a willingness to try new activities, work with peers, and always follow safety practices. Through ongoing practice and reflection about their development, students deepen their appreciation and understanding of themselves and others, and of their health and well-being.

Students' attitudes towards health and physical education can have a significant effect on their learning and their achievement of the expectations. Students who are strongly engaged and who are given opportunities to provide leadership are more likely to adopt practices and behaviours that support healthy, active living.

With teacher support and encouragement, students learn that they can apply the skills they acquire in one subject to various other contexts and subjects. For example, they can apply the problem-solving skills they use in mathematics as they learn new skills in health and physical education, and they can apply various other critical and creative thinking processes that they develop in health and physical education to their study of dance, or to question historical interpretations, or to make connections between personal actions and environmental impacts. They can also apply the knowledge and skills they acquire in health and physical education to make healthier choices in all aspects of their lives. They can apply the understanding of movement that they acquire in health and physical education to other physical activities that they participate in at school, at home, and in the community, and they can apply their learning about mental health and healthy living to make healthier food choices, help with meal preparation, and make decisions about substance use, sexual health, and injury prevention.

Parents

Parents⁵ are the primary educators of their children with respect to learning about values, appropriate behaviour, and ethnocultural, spiritual, and personal beliefs and traditions, and they are their children's first role models. It is therefore important for schools and parents to work together to ensure that home and school provide a mutually supportive framework for young people's education.

Parents play an important role in their children's learning. Studies show that students perform better in school if their parents are involved in their education. By becoming familiar with the curriculum, parents can better appreciate what is being taught in each grade and what their children are expected to learn. This awareness will enhance parents' ability to discuss their children's work with them, to communicate with teachers, and to ask relevant questions about their children's progress. Knowledge of the expectations will also help parents understand how their children are progressing in school and enhance their ability to work with teachers to improve their children's learning. Parents must be informed of the school board policy that allows for students to be exempted, at their parents' request, from instruction related to the Grade 1 to 8 human development and sexual health expectations in strand D.

Parents can support their children's learning effectively in a variety of ways. They can attend parent-teacher interviews, participate in parent workshops, and take part in school council activities or become a school council member. With respect to health and physical education, parents can support their children's learning by encouraging them to complete their assignments and practise new skills or apply new learning at home. Parents can also be supportive by promoting and attending events related to healthy, active living at the school. Many parents can contribute to creating a healthy school environment through their expertise in a range of related disciplines. Parents who work in the health or recreation fields, for example, may be able to contribute as guest speakers or as volunteers during health or physical education classes or co-curricular activities or to serve as a resource for students in their learning at home.

Parents and all adult role models can also provide valuable support for their children's learning by being as physically active as they can be and by modelling healthy choices (to the extent possible) connected to eating, substance use, relationships, personal care, mental health, and injury prevention. Children and youth who have opportunities to be physically active with the family are more likely to continue to be active as adults. Families that select healthy foods and prepare healthy meals together help young people develop food literacy skills and reinforce healthy eating habits. In addition, eating meals together as a family has been shown to have an impact on reducing behaviours among adolescents that can lead to harm or injury. Moreover, by becoming involved in healthy, active living with their children, parents benefit as well.

5. The word *parent(s)* is used in this document to refer to parent(s) and guardian(s). It may also be taken to include caregivers or close family members who are responsible for raising the child.

Parents can help to show their children the value of their learning in health and physical education by taking an interest in the curriculum topics and helping to make connections at home and in the community as students apply their learning. Such an interest encourages students and promotes a positive attitude about healthy, active living. Helping students apply their learning might involve things like including the children when making decisions at the grocery store and preparing meals, discussing activity choices and ways of building fitness into each day's activities, and creating or facilitating opportunities for healthy activities. Through discussion with their children, parents also have an opportunity to learn about new approaches in physical activity and about emerging health issues.

By recognizing the achievements of their children in health and physical education, parents can help them develop confidence. Parents' involvement in their children's education also gives them an opportunity to promote the safety practices that their children learn in the health and physical education program (e.g., wearing seatbelts and bicycle helmets, facing traffic when walking, handling food safely, using sunscreen and protective clothing for UV protection).

For healthy growth and development, the *Canadian 24-Hour Movement Guidelines* recommend that children and youth limit the amount of time that they spend sitting, without being active. While participation in sports and organized activities is beneficial, children need to know that sports are not the only way to be active. Organized sports are not available in all communities, and some children prefer to be active in other ways. Parents can encourage their children to be active by providing opportunities for hiking, playing outdoors, cycling, walking, gardening, and doing household chores. Parents are also encouraged to provide opportunities, where possible, for children to see and try new activities and to make use of community facilities such as parks, rinks, pools, and hiking and snow trails. Such opportunities help adolescents build confidence and experience and develop their appreciation of being active.

Teachers

Teaching is key to student success. Teachers are responsible for using appropriate and effective instructional strategies to help students achieve the curriculum expectations, as well as appropriate methods for assessing and evaluating student learning. Teachers bring enthusiasm and varied teaching and assessment approaches to the classroom, addressing individual students' needs and ensuring sound learning opportunities for every student. The attitude with which teachers approach health and physical education is critical, as teachers are important role models for students.

Using a variety of instructional, assessment, and evaluation strategies, teachers provide numerous opportunities for students to develop and refine their skills and knowledge required for social-emotional learning, active living, movement competence, and healthy living. These learning experiences should enable students to make meaningful connections between what they already know and what they are learning. Teachers should reflect on

the results of the learning opportunities they provide, and make adjustments to them as necessary to help every student achieve the curriculum expectations to the best of their ability.

Teaching health and physical education provides unique opportunities and challenges for teachers. Students in a gymnasium or outdoor setting demonstrate their learning in a very different way than in the classroom, and discussions related to health topics will often be closely tied to students' personal lives. These factors allow teachers to learn about their students in different ways and also require them to structure learning in a way that protects the self-respect and promotes the well-being of all students.

Teachers should follow the principle “first, do no harm” and ensure that the learning environment is always physically and emotionally safe. Because of the unique learning environment, health and physical education teachers often find themselves in the role of caring adult for students. This can be a fulfilling and also challenging responsibility, particularly when students choose to disclose personal information.⁶ It is important for educators to know and follow policies and guidelines regarding confidentiality and risk management (as they relate, for example, to suicide prevention) and be aware of professional boundaries and of pathways to professional care. It is also important to be aware of and carefully observe how students feel about various requirements of the program, from changing their clothing for physical education classes to participating in activities, demonstrating learning, working with others, and discussing health topics. To ensure physical safety, teachers must follow all board safety guidelines, as well as policies related to concussion (which cover prevention and processes for returning to physical activity and to learning). It is also critical to student success to create an atmosphere in which students of all body shapes and sizes, abilities, gender identities, gender expressions, and sexual orientations, and ethnocultural, racial, and religious backgrounds feel accepted, comfortable, and free from harassment.

To increase their comfort level and their skill in teaching health and physical education and to ensure effective delivery of the curriculum, teachers should reflect on their own attitudes, biases, and values with respect to the topics they are teaching and seek out current resources, mentors, and professional development and training opportunities, as necessary.

Learning in health and physical education can play a key role in shaping students' views about life, relationships, healthy development, physical activity, and how they learn. Teachers can reinforce this learning in many different ways. They can integrate it with aspects of learning from other areas of the curriculum and make connections to healthy-school policies. They can provide acknowledgement and encouragement to help students strive for and achieve their personal goals. They can remind students of the need to practise in order to improve skills and of the need to be active on a daily basis to develop the habit of physical activity and improve fitness, and they can provide students with opportunities to do these things within instructional time. They can also help students learn about careers

6. See page 40 for a discussion of approaching topics in health instruction with additional sensitivity and awareness.

in various areas of health, wellness, sport, fitness, outdoor and environmental studies, and recreation. By using all of these strategies, teachers can help students develop a positive attitude towards health and physical education, and support their understanding of the role of healthy active living concepts in their lives. Teachers can help students see connections between what they learn and their ability to make important decisions related to various aspects of their physical and mental health and well-being, and they can remind students of the importance of thinking carefully about decisions that could have a major impact on all parts of their lives – physical, emotional, social, cognitive, and spiritual.

As part of effective teaching practice, teachers communicate with parents about what their children are learning. This communication occurs through the sharing of outlines of learning, ongoing formal and informal conversations, curriculum events, and other means of regular communication, such as learning management systems, apps, newsletters, website postings, and blogs. Communication enables parents to work in partnership with the school, promoting discussion, follow-up at home, and student learning in a family context. Stronger connections between the home and the school support student learning, achievement, and mental health and well-being.

Teachers must follow their school board’s policy that allows for students to be exempted, at their parents’ request, from instruction related to the Grade 1 to 8 human development and sexual health expectations in strand D.

Health and physical education teachers provide students with frequent opportunities to communicate their understanding, practise their skills, and apply new learning. Through regular and varied assessment, they give them the specific, descriptive feedback they need in order to further develop and refine their learning. By assigning tasks that promote the development of critical and creative thinking skills, teachers also help students become thoughtful problem solvers and effective communicators. Opportunities to relate knowledge and skills in health and physical education to wider contexts – across the curriculum, within the context of a healthy school, and in the world beyond the school – motivate students to learn and to become lifelong learners.

Principals

The principal works in partnership with teachers and parents to ensure that each student has access to the best possible educational experience. The principal is a community builder who creates a healthy and safe school environment that is welcoming to all, and who ensures that all members of the school community are kept well informed.

To support student learning, principals ensure that the Ontario curriculum is being properly implemented in all classrooms and learning environments using a variety of instructional approaches. They also ensure that appropriate resources are made available for teachers and students. To enhance teaching and learning in all subjects, including health and physical education, principals promote learning teams and work with teachers to facilitate their participation in professional development activities. Principals must follow their

school board's policy that allows for students to be exempted, at their parents' request, from instruction related to the Grade 1 to 8 human development and sexual health expectations in strand D. Principals are also responsible for ensuring that every student who has an Individual Education Plan (IEP) is receiving the modifications and/or accommodations described in their plan – in other words, for ensuring that the IEP is properly developed, implemented, and monitored.

Principals can provide support for the successful implementation of the health and physical education curriculum by emphasizing the importance of this curriculum within the framework of a healthy, safe, inclusive, and accepting school. Establishing a healthy-school committee, consisting of staff, students, and parents, or working with an existing committee for student mental health and well-being and positive school climate can provide support for healthy-school initiatives. Encouraging a positive and proactive attitude towards healthy, active living and an inclusive school climate is key to success.

The principal is responsible for ensuring that all students, including students with special education needs, have the opportunity to participate in health and physical education in a safe manner and that students have an opportunity for daily physical activity. Timetables should have sufficient flexibility to allow the use of some same-sex and some co-educational groupings for curriculum delivery where appropriate or where needed.

The expectations in the health and physical education curriculum can be met in a variety of settings, including the outdoors, and using a broad range of equipment. Ensuring that teachers have the support, resources, and equipment they need to deliver a high-quality program is essential. Additional teacher support to ensure student safety and to increase teachers' knowledge, awareness, and comfort level may be required. Principals can provide this support by working with the school board and community partners, including mental health leaders, public health units, and by supporting professional learning networks and mentoring within the school community. Principals play an essential leadership role in supporting teacher learning through sharing resources and expertise and in furthering the use of creative approaches, the integration of learning across the curriculum, and the nurturing of partnerships within the school system and with other members of the broader community.

In all these respects, principals coordinate the implementation in their schools of various government and school board initiatives and programs focused on the health and well-being of students in Ontario. In recent years, these initiatives have embraced a holistic approach, promoting all aspects of health and well-being – physical, cognitive, emotional, and social – as part of supporting students in developing skills for healthy, active living. Principals work to create and maintain a positive school climate, consistent with *Foundations for a Healthy School* (see page 10), and actively support mental health promotion and prevention, aligning school mental health initiatives with board mental health strategies as part of a wider, integrated system of care.

Community Partners

Community partners are an important resource for a school's health and physical education program. Relationships with public health units, community recreation facilities, community mental health organizations and hospitals, social service agencies, universities and colleges, businesses, service groups, and other community organizations can provide valuable support and enrichment for student learning. These organizations can provide expertise, skills, materials, and programs that are not available through the school or that supplement those that are. Partnerships with such organizations benefit not only the students but also the life of the community.

Public health units are one of the most valuable sources of support in the community for health and physical education programs, as they can provide health expertise in a number of areas that are relevant to the curriculum. Local health unit staff are involved in work on initiatives such as immunization, oral health, safe food handling, reproductive and sexual health, substance-use prevention, the prevention of chronic diseases (e.g., through tobacco control or promotion of healthy eating), the promotion of physical activity, the prevention of injury, and the control of infectious diseases.

The **Ontario Public Health Standards** (2018) require public health professionals to offer support to school boards and schools, to assist with the implementation of health-related curricula and health needs in schools, related, but not limited, to: healthy eating behaviours and food safety, substance use and harm reduction, physical activity and sedentary behaviour, and ultraviolet exposure. Public health units are also required to conduct oral health screening and maintain immunization records of students and are directed to work with schools as community partners to address other issues important for child and youth health. Public health practitioners can, for example, work with teachers, administrators, students, and parents to assess the health priorities and needs of the school and participate in developing and supporting plans to foster healthy activities, programs, or policies within the school environment.

Schools and school boards can play a role by coordinating efforts with community partners. Partnerships for the promotion of health and well-being in schools can be arranged with organizations such as a Community Health Centre (CHC) or Aboriginal Health Access Centre (AHAC). Such centres address spiritual well-being in addition to physical and mental health for Indigenous peoples.

Schools may also find it beneficial to collaborate with community recreation specialists to provide students with additional physical activity opportunities before and after school that are consistent with the health and physical education curriculum. School boards can collaborate with leaders of existing community-based programs for youth, including programs offered in recreation facilities and community centres. Arenas, rinks, sporting venues, outdoor education sites (where available), local hiking and snow trails, and community gardens provide rich learning environments for field trips and for exploration of

the local community and its resources. Teachers may also find opportunities for their students to participate in community or mentoring projects or events such as a community run/walk/wheel event or a health promotion fair.

Nurturing partnerships with other schools and between school boards can be a valuable way of applying learning within the context of a healthy school community. Neighbouring schools and boards may share resources or facilities when developing and sharing professional development opportunities for staff, and they can collaborate in creating systems for healthy, active living (such as active and safe routes to school) or in developing special events such as community fairs, information evenings, and sports events. From time to time, opportunities may present themselves for schools and school boards to work with local researchers to complete studies that will help educators make informed decisions based on solid evidence, local needs, and current best practices.

In choosing community partners, schools should build on existing links with their local communities and create new partnerships in conjunction with ministry and school board policies. These links are especially beneficial when they have direct connections to the curriculum. Teachers may find opportunities for their students to participate in community events, especially events that support the students' learning in the classroom, are designed for educational purposes, and provide descriptive feedback to student participants.

The Program in Health and Physical Education

Curriculum Expectations

The Ontario Curriculum, Grades 1–8: Health and Physical Education, 2019 identifies the expectations for each grade and describes the knowledge and skills that students are expected to acquire, demonstrate, and apply in their class work and activities, on tests, in demonstrations, and in various other activities on which their achievement is assessed and evaluated.

Mandatory learning is described in the overall and specific expectations of the curriculum.

Two sets of expectations – overall expectations and specific expectations – are listed for each *strand*, or broad area of the curriculum, in health and physical education for Grades 1 to 8. The strands include Strand A: Social-Emotional Learning Skills – see page 25 – and three content strands, numbered B, C, and D. *Taken together, the overall and specific expectations represent the mandated curriculum.*

The *overall expectations* describe in general terms the knowledge and skills that students are expected to demonstrate by the end of each grade. The *specific expectations* describe the expected knowledge and skills in greater detail. The specific expectations are grouped under numbered subheadings, each of which indicates the strand and the overall expectation to which the group of specific expectations corresponds (e.g., “B2” indicates that the group relates to overall expectation 2 in strand B). This organization is not meant to imply that the expectations in any one group are achieved independently of the expectations in the other groups. The numbered headings are used merely to help teachers focus on particular aspects of knowledge and skills as they develop various lessons and learning activities for their students. (In this document, the Healthy Living strand uses additional subheadings within each group of expectations to identify the health topics addressed through individual expectations.)

In health and physical education, the overall expectations outline the types of skills and concepts that are required for healthy, active living at any age or stage of development. For this reason, the overall expectations are repeated in constant terms from Grade 1 to Grade 12. The health and physical education curriculum focuses on developing, reinforcing, and refining the students’ knowledge and skills associated with each of these key overall expectations over time. This approach reflects and accommodates the progressive nature of skill development in health and physical education.

The *specific expectations* reflect this progression in knowledge and skill development, as well as the growing maturity and changing needs of students, through (1) changes in the wordings of expectations, where appropriate; (2) the examples that are given in parentheses in the expectation; and/or (3) the teacher prompts and student responses that follow most expectations. The progression is captured by the increasing complexity of requirements reflected in the examples and prompts and by the increasing specificity of relationships, the diversity of contexts in which the learning is applied, and the variety of opportunities described for applying it. It should be noted that *all* the skills specified in the early grades continue to be developed and refined as students move up through the grades, whether or not each of those skills continues to be explicitly required in an expectation.

Examples, Teacher Prompts, and Student Responses

Most of the specific expectations are accompanied by examples, “teacher prompts” (as requested by educators), and student responses. These elements are intended to promote understanding of the intent of the specific expectations, and are offered as illustrations for teachers. *The examples and prompts do not set out requirements for student learning; they are optional, not mandatory.*

The examples, given in parentheses, are meant to clarify the requirement specified in the expectation, illustrating the kind of knowledge or skill, the specific area of learning, the depth of learning, and/or the level of complexity that the expectation entails. The teacher prompts are meant to illustrate the kinds of questions teachers might pose in relation to the requirement specified in the expectation. Both the examples and the teacher prompts have been developed to model appropriate practice for the grade. Teachers can choose to draw on the examples and teacher prompts that are appropriate for their classrooms, or they may develop their own approaches that reflect a similar level of complexity. Whatever the specific ways in which the requirements outlined in the expectations are implemented in the classroom, they must, wherever possible, be inclusive and reflect the diversity of the student population and the population of the province.

It is important to note that the *student responses* are provided only to indicate the content and scope of the intended learning. They are not written in language that represents the typical parlance or vocabulary of students.

The diagram on page 23 shows all of the elements to be found on a page of curriculum expectations.

Expectations in health and physical education are organized into four **strands**, numbered A, B, C, and D.

Strand B

Active Living

The **overall expectations** describe in general terms the knowledge and skills students are expected to demonstrate by the end of each grade. Overall expectations are provided for each strand in every grade. The numbering of overall expectations indicates the strand to which they belong (e.g., B1–B3 are the overall expectations for strand B).

OVERALL EXPECTATIONS

By the end of Grade 1, students will:

- B1.** **participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;**
- B2.** **demonstrate an understanding of the importance and apply physical fitness concepts and practices active living;**
- B3.** **demonstrate responsibility for their own safety and they participate in physical activities.**

A numbered subheading identifies each group of specific expectations and relates to one particular overall expectation (e.g., “B1. Active Participation” relates to overall expectation B1).

The **examples** help to clarify the requirement specified in the expectation and to suggest its intended depth and level of complexity. The examples are illustrations only, not requirements. They appear in parentheses and are set in italics.

SPECIFIC EXPECTATIONS

B1. Active Participation

By the end of Grade 1, students will:

- B1.1** actively participate in a wide variety of program activities (*e.g., activity centre and circuit activities, tag games, parachute activities*), according to their capabilities, while applying behaviours that enhance their readiness and ability to take part (*e.g., joining in willingly, showing respect for others, following directions, taking turns*) [A1.3 Motivation, 1.5 Self]

Social-emotional learning (SEL) skills tags are provided after most specific expectations to indicate SEL skills that can be integrated into learning associated with the expectation.

The **specific expectations** describe the expected knowledge and skills in greater detail. The expectation number identifies the strand to which the expectation belongs and the overall expectation to which it relates (e.g., B1.1, B1.2, B1.3, and so on, relate to the first overall expectation in strand B).

Teacher prompt: “We show respect in many ways. In our classroom, we show respect for people of all cultures and abilities by including everyone in our activities. In our school, we show that we respect the environment by recycling and cleaning up. Showing respect for others is an important part of participating in physical activities. How do you show respect for others when you are being active?”

Student:* “I show respect by tagging other people gently when we are playing tag and speaking politely to others.”

* Throughout this curriculum, student responses often follow the teacher prompts. They are provided to illustrate content, and do not attempt to capture the speech patterns, syntax, or word choices typical of students in this grade.

Teacher prompts and student responses are included for most expectations to help clarify the requirements and suggest the intended depth and level of complexity of the expectations. These are illustrations only, not requirements.

The Strands in the Health and Physical Education Curriculum

The expectations for health and physical education are organized into four distinct but related strands: A. Social-Emotional Learning Skills; B. Active Living; C. Movement Competence: Skills, Concepts, and Strategies; and D. Healthy Living.

The following chart shows the flow of learning through the curriculum and the interrelationships among its various components.

Health and Physical Education: Strands and Subgroups			
<p>Strand A: Social-Emotional Learning Skills</p> <ul style="list-style-type: none"> • Identification and Management of Emotions • Stress Management and Coping • Positive Motivation and Perseverance • Healthy Relationships • Self-Awareness and Sense of Identity • Critical and Creative Thinking 	<p>Strand B: Active Living</p>		
	<p>B1. Active Participation</p> <ul style="list-style-type: none"> • Regular participation, variety, lifelong activity • Enjoyment, motivation 	<p>B2. Physical Fitness</p> <ul style="list-style-type: none"> • Fitness development through daily physical activity, personal fitness plans 	<p>B3. Safety</p> <ul style="list-style-type: none"> • Personal safety and safety of others during physical activity
	<p>Strand C: Movement Competence: Skills, Concepts, and Strategies</p>		
	<p>C1. Movement Skills and Concepts</p> <ul style="list-style-type: none"> • Movement skills – stability, locomotion, manipulation • Movement concepts – body awareness, effort, spatial awareness, relationships • Movement principles 	<p>C2. Movement Strategies</p> <ul style="list-style-type: none"> • Components of physical activities • Strategies and tactics in all physical activities 	
<p>Strand D: Healthy Living</p>			
	<p>D1. Understanding Health Concepts</p> <ul style="list-style-type: none"> • Understanding the factors that contribute to healthy growth and development 	<p>D2. Making Healthy Choices</p> <ul style="list-style-type: none"> • Applying health knowledge, making decisions about personal health and well-being 	<p>D3. Making Connections for Healthy Living</p> <ul style="list-style-type: none"> • Making connections to link personal health and well-being to others and the world around them
<p><i>Expectations in the Healthy Living strand focus on the following five health topics. Learning about mental health and well-being is a part of the learning related to all of these health topics, just as it is part of the learning across the curriculum.</i></p> <ul style="list-style-type: none"> • Healthy Eating • Personal Safety and Injury Prevention • Substance Use, Addictions, and Related Behaviours • Human Development and Sexual Health • Mental Health Literacy 			

Strand A – Social-Emotional Learning Skills

This strand helps students develop social-emotional learning skills, to foster overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive. In all grades, learning related to the expectations in this strand occurs in the context of learning related to the other three strands and is assessed and evaluated within these contexts.

In the social-emotional learning skills, educators will recognize many concepts from the “living skills” of the previous health and physical education curriculum. The social-emotional learning skills update the living skills in ways that benefit students’ mental health and healthy development, as evidenced by **current research**.

The development and application of social-emotional learning skills is essential to the achievement of many of the expectations in the Active Living, Movement Competence, and Healthy Living strands. These skills must be explicitly taught and evaluated in the context of learning in all strands of the curriculum, in order to make the learning personally relevant for students. As students develop and apply these skills, they will build resilience. They will learn to make choices that protect their safety and health and enable them to become independent thinkers and responsible adults who are capable of developing strong relationships and who are committed to lifelong healthy, active living.

The health and physical education program provides a unique setting for developing the social-emotional learning skills that will help students gain a better understanding of who they are and help them connect positively and productively with the larger world. The direct integration of these skills with the other components of the health and physical education curriculum from Grade 1 to Grade 8 gives students an opportunity to develop, practise, and refine these important skills as they mature.

The social-emotional learning skills expectations are the same for all grades. There is a single overall expectation and one set of related specific expectations, one for each social-emotional learning skill. The progression of learning from grade to grade is indicated in the examples, which highlight how the skills can be integrated with learning in the other three strands of the curriculum and how they are applied in a developmentally appropriate way. The context and application of the learning changes as students develop and mature.

To support program planning, many specific expectations in strands B, C, and D are tagged to indicate the social-emotional skills that can be integrated into teaching and learning associated with the expectation. (The tags are given in square brackets after the expectation, and use the identifiers A1.1 Emotions, 1.2 Coping, 1.3 Motivation, 1.4 Relationships, 1.5 Self, 1.6 Thinking.) Teachers should provide students with intentional and productive opportunities to make these connections, where appropriate, to support their development of the social-emotional learning skills as they work to achieve all the curriculum expectations. *Students’ application of the social-emotional learning skills must be assessed and evaluated as a part of their achievement of the overall expectations in each of the strands for every grade.*

The following two charts provide an at-a-glance summary of the social-emotional learning skills and detailed discussions of each of the skills, by specific expectation, including their key components and sample strategies. (These charts are also included in **Appendix A** to this document, for quick reference and printing, if desired, along with a list of sources for information about mental health education and social-emotional learning skills.)

SOCIAL-EMOTIONAL LEARNING SKILLS AT A GLANCE

Students will learn skills to:	So that they can:
<ul style="list-style-type: none"> • identify and manage emotions 	<ul style="list-style-type: none"> • express their feelings and understand the feelings of others
<ul style="list-style-type: none"> • recognize sources of stress and cope with challenges 	<ul style="list-style-type: none"> • develop personal resilience
<ul style="list-style-type: none"> • maintain positive motivation and perseverance 	<ul style="list-style-type: none"> • foster a sense of optimism and hope
<ul style="list-style-type: none"> • build relationships and communicate effectively 	<ul style="list-style-type: none"> • support healthy relationships and respect diversity
<ul style="list-style-type: none"> • develop self-awareness and self-confidence 	<ul style="list-style-type: none"> • develop a sense of identity and belonging
<ul style="list-style-type: none"> • think critically and creatively 	<ul style="list-style-type: none"> • make informed decisions and solve problems

SOCIAL-EMOTIONAL LEARNING SKILLS BY SPECIFIC EXPECTATION

Skills <i>What are the skills? How do they help? What do they look like in HPE?</i>	Key Components and Sample Strategies
<p>A1.1 Identification and Management of Emotions</p> <p>Students often experience a range of emotions over the course of their day at school. They may feel happy, sad, angry, frustrated, or excited, or any number of emotions in combination. Students, and especially younger children, may struggle to identify and appropriately express their feelings. Learning to recognize different emotions, and to manage them appropriately, can help students function and interact more effectively. When students understand the impact of thoughts and emotions on behaviour, they can improve the quality of their interactions. In health and physical education, as they learn new movement skills, interact with others in physical activities, and learn about their health and well-being, students have many opportunities to develop awareness of their emotions and to use communication skills to express their feelings and to respond constructively when they recognize emotions in others.</p>	<ul style="list-style-type: none"> • Recognizing a range of emotions in self and others • Gauging the intensity and/or the level of emotion • Understanding connections between thoughts, feelings, and actions • Managing strong emotions and using strategies to self-regulate • Applying strategies such as: <ul style="list-style-type: none"> » using a “feelings chart” to learn words to express feelings » using a “feelings thermometer” or pictures to gauge intensity of emotion

<p style="text-align: center;">Skills</p> <p style="text-align: center;"><i>What are the skills? How do they help?</i></p> <p style="text-align: center;"><i>What do they look like in HPE?</i></p>	<p style="text-align: center;">Key Components and Sample Strategies</p>
<p>A1.2 Stress Management and Coping</p> <p>Every day, students are exposed to big and small challenges that can contribute to feelings of stress. As they learn stress management and coping skills, they come to recognize that stress is a part of life and that it can be managed. We can learn ways to respond to challenges that enable us to “bounce back” and, in this way, build resilience in the face of life’s obstacles. Over time, with practice, observation, and coaching, students begin to build a personal “coping toolbox” that they can carry with them through life. In health and physical education, students learn the benefits of physical activity for stress management and learn to apply healthy coping strategies to broader life situations.</p>	<ul style="list-style-type: none"> ● Managing stress through physical activity ● Seeking support ● Problem solving ● Applying strategies such as: <ul style="list-style-type: none"> » deep breathing » guided imagery » stretching » pausing and reflecting » “unplugging” before sleep
<p>A1.3 Positive Motivation and Perseverance</p> <p>Positive motivation and perseverance skills help students to “take a long view” and remain hopeful even when their personal and/or immediate circumstances are difficult. With regular use, practices and habits of mind that promote positive motivation help students approach challenges in life with an optimistic and positive mindset and an understanding that there is struggle in most successes and that repeated effort can lead to success. These practices include noticing strengths and positive aspects of experiences, reframing negative thoughts, expressing gratitude, practising optimism, and practising perseverance – appreciating the value of practice, of making mistakes, and of the learning process. In health and physical education, students have regular opportunities to apply these practices as they learn new physical skills and practise behaviours that support physical and mental health.</p>	<ul style="list-style-type: none"> ● Reframing negative thoughts and experiences ● Practising perseverance ● Applying a growth mindset ● Reflecting on things to be grateful for and expressing gratitude ● Practising optimism ● Applying strategies such as: <ul style="list-style-type: none"> » sharing positive messages for peers » using personal affirmations
<p>A1.4 Healthy Relationships</p> <p>When students interact in positive and meaningful ways with others, mutually respecting diversity of thought and expression, their sense of belonging within the school and community is enhanced. Learning healthy relationship skills helps students establish positive patterns of communication and inspires healthy, cooperative relationships. These skills include the ability to understand and appreciate another person’s perspective, to empathize with others, to listen, to be assertive, and to apply conflict-resolution skills. In health and physical education, students have unique opportunities to develop and practise skills that support positive interaction with others in small-group and team situations and as they navigate decisions that impact their health.</p>	<ul style="list-style-type: none"> ● Being cooperative and collaborative ● Using conflict-resolution skills ● Listening ● Being respectful ● Considering other perspectives ● Practising kindness and empathy ● Applying strategies such as: <ul style="list-style-type: none"> » seeking opportunities to help others and “give back” » using role play to practise language and actions

<p style="text-align: center;">Skills</p> <p style="text-align: center;"><i>What are the skills? How do they help?</i></p> <p style="text-align: center;"><i>What do they look like in HPE?</i></p>	<p style="text-align: center;">Key Components and Sample Strategies</p>
<p>A1.5 Self-Awareness and Sense of Identity</p> <p>Knowing who we are and having a sense of purpose and meaning in our lives enables us to function in the world as self-aware individuals. Our sense of identity enables us to make choices that support our well-being and allows us to connect with and have a sense of belonging in various cultural and social communities. Educators should note that for First Nations, Métis, and Inuit students, the term “sense of identity and belonging” may also mean belonging to and identifying with a particular community and/or nation. Self-awareness and identity skills help students explore who they are – their strengths, difficulties, preferences, interests, values, and ambitions – and how their social and cultural contexts have influenced them. In health and physical education, students learn to develop daily self-care routines for mental health that promote a sense of personal confidence and comfort with their developing identities. As they learn new skills, they use self-awareness skills to monitor their progress and identify their strengths. Educators play a key role in reinforcing that each student matters and brings value to the classroom.</p>	<ul style="list-style-type: none"> • Knowing oneself • Caring for oneself • Having a sense of mattering and of purpose • Identifying personal strengths • Having a sense of belonging and community • Communicating with assertiveness • Applying strategies such as: <ul style="list-style-type: none"> » monitoring progress in skill development » reflecting on strengths and accomplishments and sharing these with peers or caring adults
<p>A1.6 Critical and Creative Thinking</p> <p>Critical and creative thinking skills enable us to make informed judgements and decisions on the basis of a clear and full understanding of ideas and situations, and their implications, in a variety of settings and contexts. Students learn to question, interpret, predict, analyse, synthesize, detect bias, and distinguish between alternatives. They practise making connections, setting goals, creating plans, making and evaluating decisions, and analysing and solving problems for which there may be no clearly defined answers. Executive functioning skills – the skills and processes that allow us to take initiative, focus, plan, retain and transfer learning, and determine priorities – are part of critical and creative thinking. In all aspects of the health and physical education curriculum, students have opportunities to develop critical and creative thinking skills. Students have opportunities to build on prior learning, go deeper, and make personal connections through real-life applications.</p>	<ul style="list-style-type: none"> • Making connections • Making decisions • Evaluating choices • Communicating effectively • Managing time • Setting goals • Applying organizational skills • Applying strategies such as: <ul style="list-style-type: none"> » using webs and diagrams to help identify connections and interrelationships » using Teaching Games for Understanding (TGfU) to develop strategic thinking » using organizational strategies and tools, such as planners and goal-setting frameworks

Strand B – Active Living

The Active Living strand helps students develop the skills and knowledge needed to participate regularly and safely in physical activity, while enjoying being physically active and learning how to develop and enhance their own personal fitness. As they participate in a wide range of activities, students also learn about the benefits of physical activity for mental health. Learning through physical activity helps to enhance students' physical literacy. Daily physical activity (DPA)⁷ is one important component of this strand. Participating in daily moderate to vigorous physical activity helps to build a habit of activity that becomes a part of each student's routine and way of life.

The three subgroups within this strand, corresponding to the three overall expectations, are Active Participation, Physical Fitness, and Safety, with social-emotional learning skills expectations integrated as appropriate.

Active Participation

Participation in physical activity provides students with a variety of opportunities for increasing their self-esteem and self-confidence and developing positive relationship skills and attitudes, including practices of fair play and respect for others. All students, individually and in groups, should be strongly encouraged to participate daily in a wide variety of physical activities, such as dance, games, sports, fitness, individual, and recreational activities, and to become increasingly responsible for their own daily physical activity. By participating in a wide range of physical activities, including those that reflect the diversity of the students' cultural backgrounds, they will develop self-awareness and a sense of identity, learn what activities they enjoy most and what factors contribute to their success in participating in physical activities. This understanding can help them develop and sustain a commitment to healthy, active living throughout their lives.

Physical Fitness

The learning within this subgroup of expectations emphasizes health-related fitness – the physical and physiological components of fitness that have a direct impact on health and well-being. Health-related components of fitness include cardiorespiratory fitness, muscular strength, muscular endurance, and flexibility.

Daily physical activity (DPA) is a mandatory component of daily instruction for students in Ontario and is included as a curriculum expectation in health and physical education for every grade within this section of the strand. This learning expectation requires students to actively engage in moderate to vigorous physical activity, including appropriate warm-up and cool-down activities, to the best of their ability for a minimum of twenty minutes every day. All students, including students with special education needs, are required to have the opportunity to participate in DPA during instructional time. The goal of daily physical activity is to instil the habit of activity and enable all elementary students to be

7. DPA has been a required component of the school day in elementary schools across Ontario since 2005.

active on a daily basis in order to maintain or enhance their physical fitness, their overall health and wellness, and their ability and readiness to learn.

Through experiential learning, students gain an understanding of the importance of regular physical activity and its relationship to developing and maintaining health-related fitness. Students learn not only *what* to do to develop personal fitness but also *why* to do it and *how* to do it appropriately and effectively. Students are provided with a variety of opportunities to develop their health-related fitness, especially their cardiorespiratory endurance. As levels of fitness improve, the duration of vigorous activity can be regularly increased. In addition, students will be involved in assessing their own health-related fitness levels, setting goals, and developing personal fitness plans to achieve their goals.

Throughout this strand, as well as the Movement Competence strand, students will have opportunities to develop their skill-related fitness. Skill-related components of fitness include balance, co-ordination, agility, speed, power, and reaction time. These components are important for developing the quality of movements during activity.

Safety

Safety, including physical and emotional safety, is an integral part of the health and physical education curriculum. Teachers have responsibility for following board safety guidelines in matters related to supervision, concussion, clothing and footwear, equipment, and facilities, and for applying special rules and instructions. Students must also begin to take responsibility from a young age for their own safety and the safety of others around them at school, at home, and in the community. Students learn about concussions – what they are, how to prevent them, how to detect them, and what to do if they suspect a concussion has occurred. Following procedures, using equipment as instructed, wearing appropriate attire, and using thinking skills to assess risk and take appropriate precautions are some ways in which students can contribute to their own safety and the safety of others while participating in physical activity. Students must fulfil each expectation safely and responsibly without putting themselves and others at risk.

Establishing and maintaining an emotionally safe setting for learning is fundamental to the implementation of this curriculum (see the fundamental principles on pages 9–10 and the reflective questions on pages 56–58). An emotionally safe setting is created in the context of a positive school climate – a safe, accepting, and inclusive environment in which students of all backgrounds, abilities, and experiences feel comfortable and welcome.

See [Appendix B](#) for a quick-reference summary of learning in the Active Living strand.

Strand C – Movement Competence: Skills, Concepts, and Strategies

The Movement Competence strand helps students develop the movement competence needed to participate in physical activities through the development of movement skills and the related application of movement concepts and movement strategies. As students

develop their confidence and competence, they will be developing their physical literacy. Students are also introduced to movement principles in developmentally appropriate ways. These principles are indicated in the expectations through examples and teacher prompts that illustrate how skills can be applied at different ages and stages. The students learn kinesthetically in this strand, as in the Active Living strand, and have regular opportunities in every grade to develop and practise their personal movement skills.

The development of fundamental movement skills in association with the application of movement concepts and principles provides the basic foundation for physical literacy. An understanding of fundamental skills and concepts is essential both to an individual's development of effective motor skills and to the application of these skills in a wide variety of physical activities. Because the development of movement skills is age-related but not age-dependent and because students' skill levels depend on a variety of factors, including their experiences outside of school, the opportunities they have for practice, their rate of growth and maturation, and their abilities and interests, the range of skills in a typical class will vary widely. Consequently, it is very important to provide choice and flexibility within activities and to ensure that learning experiences are designed to reflect individual students' developmental levels and adapted to suit learners of all abilities. Modifications should be made as needed to allow students to develop and work towards their own *personal* level of movement competence.

Since the development of movement skills can also enhance students' social, cognitive, and emotional development, it is critical that the health and physical education program be inclusive, fully engaging all students irrespective of sex, gender identity, gender expression, background, or ability. Without the development of fundamental skills, many youth choose to withdraw from activity due to fear of failure, self-consciousness, or lack of ability to move efficiently. Learning fundamental movement skills and applying movement concepts and principles help students increase their comfort, confidence, competence, and proficiency with movement, thereby increasing their rates of overall physical activity and improving their health. When fun and enjoyment are part of skill development and physical activity, students are more likely to develop positive attitudes towards lifelong healthy, active living.

The focus of the learning in this strand is on transferable skills. The goal is to have students understand how skills, concepts, and strategies learned in one activity can apply to other activities. For example, the fundamental skill of throwing an object overhead can be transferred to a tennis serve or a badminton smash. Similarly, general transferable movement skills that apply to the three phases of movement – *preparation*, *execution*, and *follow-through* – can be applied to a variety of physical activities. By understanding how to apply their learning to other activities and situations, students will be better equipped to enjoy and participate in a wide variety of physical activities throughout their lives.

As students grow and develop, the focus of learning related to movement skills and associated concepts and movement strategies shifts. When students are younger or less experienced, the emphasis is on developing basic skills and applying them in situations involving the

use of simple strategies and tactics. When students are more mature and experienced, more time can be spent on the application of skills in games and activities involving more complex strategies and tactics. The concepts are clearly connected at every level, but the focus of learning is different at different ages and stages.

The movement competence expectations are organized into two subgroups: Movement Skills and Concepts, and Movement Strategies. Social-emotional learning skills are integrated as appropriate into each. Explicitly teaching social-emotional learning skills with movement competence can help students achieve success. For example, students can:

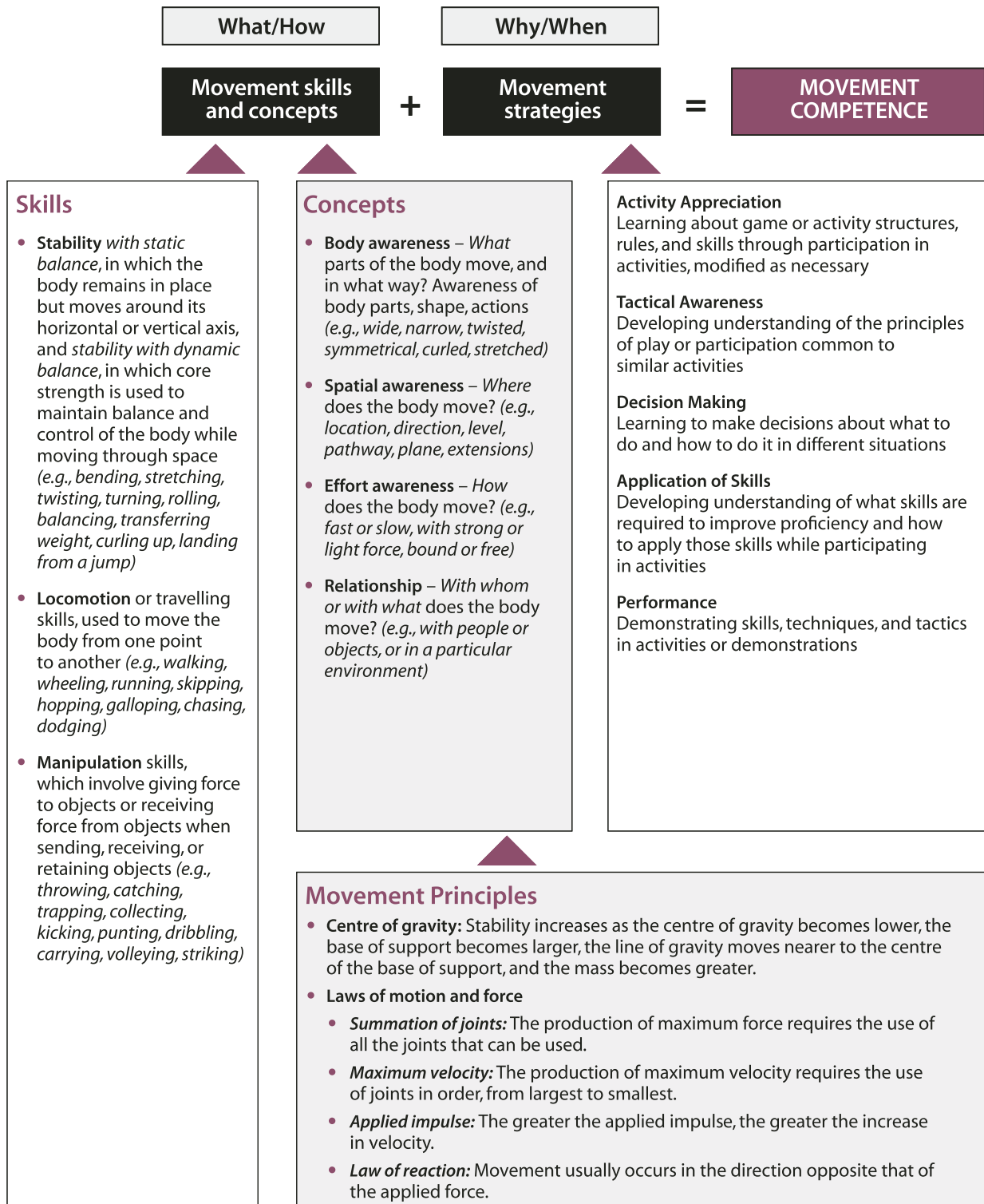
- develop a sense of identity as someone who is physically capable and competent as they become more successful in performing various movement skills;
- learn to be aware of the impact of their emotions on their game play (e.g., being angry or upset can cause them to lose focus);
- learn to re-focus and be “in the moment” when facing challenges (e.g., before a final attempt at a high jump, after two failed attempts; when trying to regain possession in volleyball after losing five points in a row);
- develop relationship skills and a sense of belonging when practising one-on-one or when playing in a small-group situation.

Movement Skills and Concepts

Movement skills must be explicitly taught; they are not acquired simply through activities of various sorts. However, these skills should not be taught in isolation from the context in which they will be applied. Instead, they should be taught in a way that shows how they will be used within and across a variety of physical activities, so that students can apply and transfer their skills to specific activities, such as games, gymnastic and dance sequences, and fitness, individual, or recreational activities.

When students are learning or developing a skill, they need opportunities for practice and feedback. Students learn most effectively when they have opportunities to problem solve and play an active role in their learning. As they develop and work towards consolidating their skills, they will be able to combine skills and apply them to more complex activities and games. Mature movement skills do not result from physical maturation alone; rather, they must be continually refined and combined with other movement skills in a variety of physical activities. It is important that teachers facilitate the learning of movement skills and concepts through a progression of age-appropriate activities.

Research into motor development indicates that learners acquire new fundamental movement skills (motor skills) most successfully during the preschool and elementary years, when most children’s neurological pathways are developing rapidly and are receptive to the development of fundamental movement patterns and basic skills. When young children enter school, their movements are often awkward and lacking in fluidity. In the early school years, they gain necessary coordination and control over their movements as they are presented with opportunities to learn and practise. They can then refine, extend, and apply these patterns to more complex skills during later childhood, adolescence, and adulthood.



Important components of movement competence include the development of fundamental movement skills and the application of movement concepts and principles.

Movement Skills. The fundamental movement skills relate to stability, locomotion, and manipulation:

- **Stability skills** include *stability with static balance*, in which the body maintains a desired shape in a stationary position, and *stability with dynamic balance*, in which students use core strength to maintain balance and control of the body while moving through space (e.g., bending, stretching, twisting, turning, rolling, balancing, transferring weight, curling, landing from a jump).
- **Locomotion** or travelling skills are those used to move the body from one point to another in various ways (e.g., walking, wheeling, running, chasing, dodging, sliding, rolling, jumping, leaping).
- **Manipulation** skills involve giving force to objects or receiving force from objects as one sends, receives, or retains objects (e.g., *sending*: throwing, kicking, punting, striking, volleying; *receiving*: catching, trapping, collecting; *retaining*: carrying, dribbling, cradling).

Movement Concepts. Students will learn to apply the following movement concepts as they develop movement skills:

Body awareness – *What body parts move and in what way?*

- body parts (e.g., arms, legs, elbows, knees, head, shoulders, back)
- body shape (e.g., round, wide, narrow, curled, stretched, twisted, symmetrical, asymmetrical)
- body actions (e.g., support, lead, receive weight, flex, extend, rotate, swing, push, pull)

Spatial awareness – *Where does the body move?*

- location (e.g., personal, general space, restricted space)
- direction (e.g., forward, backwards, sideways, diagonal, up, down, left, right)
- level (e.g., high, medium, low)
- pathway (e.g., zigzag, straight, curved, wavy)
- plane (e.g., frontal, horizontal, vertical, sagittal)
- extensions (e.g., near, far)

Effort awareness – *How does the body move?*

- time (e.g., fast, medium, slow, sustained, sudden)
- force (e.g., strong, light)
- flow (e.g., bound, free, continuous, interrupted)

Relationship – *With whom or with what does the body move?*

- people (e.g., meet, match, contrast, follow, lead, mirror, shadow, move in unison, move towards or away from others, echo with a partner or group)
- objects (e.g., over, under, beside, in front, on, off, near, far, through, above, below)
- elements in an environment (e.g., music, wind, temperature, terrain)

Movement principles can be introduced in simple, age-appropriate ways to help students improve the efficiency and effectiveness of their movements. Application of these principles becomes more refined as movement competence improves. Some movement principles include:

Centre of gravity: Stability increases as the centre of gravity becomes lower, the base of support becomes larger, the line of gravity moves nearer to the centre of the base of support, and the mass becomes greater. (For example, a static balance will be most stable when it forms a wide shape, is low to the ground, and has many widely spread contact points on the ground.)

Laws of motion and force

- *Summation of joints:* The production of maximum force requires the use of all the joints that can be used. (For example, when throwing a ball, begin by bending the knees and then incorporate the full body, and not just the arm, in the throwing motion.)
- *Maximum velocity:* The production of maximum velocity requires the use of joints in order, from largest to smallest. (For example, when jumping, start by pushing off with the large muscles in the legs and then stretch the fingers and toes in the air after pushing off.)
- *Applied impulse:* The greater the applied impulse, the greater the increase in velocity. (For example, the harder a swing is pushed, the higher it will rise. A ball that is struck harder will go farther and faster.)
- *Law of reaction:* Movement usually occurs in the direction opposite that of the applied force. (For example, on a sled in sledge hockey, pushing off to the right with the pick at the end of the stick will cause the sled to turn to the left. When swimming, pushing the water behind causes the body to move forward. When jumping, pushing down causes the body to move up.)

Movement Strategies

When participating in an activity, students will have an ultimate goal or objective. To accomplish that goal, students may choose from a number of strategies that are similar within particular categories of games and physical activities. The actions that students do in order to accomplish the strategy are called *tactics*. For example, members of a soccer team might adopt the strategy of maintaining possession of the ball as much as possible in order to increase their scoring chances and decrease those of their opponent. Tactics that students might use to implement the strategy could include spreading out in the playing area in order to be open to receive a pass, passing the ball often among teammates, and moving towards the goal as they look for open spaces. A student who is learning to juggle and wants to be able to juggle three balls for over a minute without dropping them might use a strategy of working on developing a consistent toss. Tactics to accomplish this might include practising with scarves, which move more slowly, before trying to juggle with balls, practising with one ball then two, practising just the throw and letting the balls drop until the toss is consistent, working on having the balls peak at the same place with each toss, and working on keeping eye contact on the balls at the peak of the toss.



The ability to devise and apply strategies and tactics requires an understanding of how games and activities are structured and how they work. This in turn requires an understanding of the components and other features that characterize individual games and activities. Games can be grouped into broad categories on the basis of common features and similarities, and students can learn how to transfer strategies, tactics, and skills from one game or activity to another in the same category. In so doing, they acquire game literacy and extend their competence to a much wider range of activities. By encouraging students to think strategically, to analyse game and activity structures, and to make connections between different games and game components, the movement strategy expectations give them an opportunity to exercise their critical and creative thinking skills, build confidence, and increase their ability to participate successfully in a wide range of games and other activities.

The chart on page 37 shows one way of categorizing games and activities on the basis of similarities and common features.

In each category, the interrelationship of rules, strategies, and skills defines the game structure. Target games have the simplest structure because they tend to be played by individuals or small groups and have breaks in the play which allow time for decision making. This does not mean that target activities are the simplest games to play, as the skills and strategies involved can be very complex. Territory games have the most complex structure because the number of players, the amount of movement in the play area, and the almost continuous action increase the number of variables in these games. Within each category, however, there is room for a wide range of skills and abilities and the games can be played at varying levels of complexity. This makes it possible for students of all age and ability levels to explore activities within all game categories.

CATEGORIES AND COMMON FEATURES OF GAMES AND ACTIVITIES

Activity Category	Target Activities	Net/Wall Activities	Striking/Fielding Activities	Territory Activities
Description	<ul style="list-style-type: none"> emphasize accuracy and control challenge can be modified by changing target size and distance and equipment, by using stationary or mobile targets, and by having the players send objects while stationary or mobile can be played individually or in small teams 	<ul style="list-style-type: none"> involve moving and striking an object and hitting it within a specified space players work to make it difficult for opponents to send the object back to the wall or across the net small numbers of players are usually involved 	<ul style="list-style-type: none"> can involve running, striking, batting, throwing, kicking, and catching runners hit, kick, or throw an object, then score runs by running to designated areas fielders retrieve the object and get it to a specified place to stop runs from being scored and to get opponents out 	<ul style="list-style-type: none"> involve controlling an object, keeping it away from opponents, and moving it into a position to score on a target can be modified to be simple running games or to use a specified skill (kicking, throwing) games are challenging because of the continuous action and decision making needed to switch between offensive and defensive roles, the numbers of people involved, and the movement in the playing area
Examples	bocce, bowling, curling, disc golf, lawn bowling, shuffleboard, wheelchair bocce	badminton, sepak takraw, squash, table tennis, tennis, volleyball, wheelchair tennis	baseball, beep baseball, cricket, kick-ball, rounders, softball, t-ball	basketball, football, goal ball, European handball, hockey, lacrosse, rugby, sledge hockey, soccer, tchoukball, Ultimate, water polo, wheelchair basketball

To promote lifelong healthy, active living for all, it is important not to restrict students to game and sport activities. Many students prefer activities that do not involve team play, and these can provide ample opportunities for enjoyment and the development of fitness and movement skills related to control of body rhythm, movement aesthetics, creativity, sequencing, composition, and stability. Examples of individual and recreational activities include the following:

- endurance activities (e.g., long distance running or wheeling, swimming, power walking, orienteering)
- aquatics (e.g., swimming, synchronized swimming, aquafit)

- dance⁸ (creative; modern; folk; cultural; First Nation, Métis, and Inuit dance; ballet; jazz; hip hop)
- resistance and strength activities (e.g., weightlifting; wrestling; ball training; yoga; Pilates; exercise bands; wall climbing; rope course activities; Arctic sports such as the Alaskan high kick, one-hand reach, arm pull; Dene games such as the pole push)
- gymnastics and movement activities (e.g., artistic, rhythmic, educational gymnastics; t'ai chi; qigong)
- outdoor activities (e.g., cycling, rowing, hiking, downhill and cross-country skiing, triathlon, mountain biking, skating, kayaking, canoeing, sledding)
- track and field (short and long-distance running events; jumping events – high jump, long jump, triple jump; throwing events such as shot put)

To accommodate different developmental levels and abilities and to maximize participation, it is desirable to give students an opportunity to learn and apply skills within the context of a *modified* game or activity. Teaching Games for Understanding (TGfU) is a particularly useful student-centred approach of this kind. Through developmentally appropriate sequencing of activities that are representative of a variety of game elements, students learn to apply increasingly complex skills and strategies. The learning connected to movement strategies gives students opportunities to experience versions of activities that are appropriate to their age and abilities, so that they can recognize the basic concepts in the games or activities, appreciate their challenges and rules, understand their tactical aspects, and identify movement skills and concepts that they can apply to many other games and physical activities. This experiential approach gives responsibility to the teacher to act as facilitator and to maximize participation and fun by making adaptations that optimize the level of challenge for all participants and by giving students opportunities to make their own adaptations to the activities. The components of the TGfU approach (outlined in the chart on page 33) support an inquiry-based approach to learning in which teachers are encouraged to use open-ended questions to help students explore, discover, create, and experiment with movement and tactical solutions. Because of its focus on student autonomy, critical thinking, and learning, this approach gives students valuable preparation for lifelong participation in physical activities.

See [Appendix C](#) for a quick-reference summary of learning in the Movement Competence strand.

8. When including culturally based dances of Indigenous communities, educators should consult with members of the cultural community to ensure that the dances may be used and that any protocols related to their use are being observed. Also, *The Ontario Curriculum, Grades 1–8: The Arts, 2009* has information about exploring dance and movement at the elementary level.

Strand D – Healthy Living

The Healthy Living strand helps students develop an understanding of the factors that contribute to healthy development, a sense of personal responsibility for lifelong health, and a respect for their own health in relation to others and the world around them. Students will develop health literacy as they acquire the knowledge and skills they need to develop, maintain, and enjoy healthy living as well as to solve problems, make decisions, and set goals that are directly related to their personal health and mental health and well-being. Learning how to establish, monitor, and maintain healthy relationships is a key part of this strand.

The focus of the learning in this strand is not merely on health knowledge but rather on higher-level thinking connected to the application of skills for healthy living. Students are learning about health broadly as a resource for living. The emphasis is on why they are learning about healthy living and on what they need to understand about growing and healthy development in order to make informed personal choices and take responsibility (within the extent possible) for their health now and for the rest of their lives. They are also encouraged to make connections beyond themselves to understand how their health is connected with that of others and how it is affected by factors in the world around them.

Current thinking views health as a holistic phenomenon and students are therefore encouraged to make connections between various aspects of their well-being, including physical, cognitive, emotional, and social aspects, as well as sense of self, or spirit. Health professionals also recognize that an emphasis on health promotion will pay greater dividends over the long run than an emphasis on disease treatment alone. For that reason there is a significant focus in the curriculum on learning about the connections between healthy choices, active living, and chronic disease prevention.

Social-emotional learning skills are also tightly linked to this strand. Because students in elementary school are still developing their sense of self, learning to interact positively with others, and learning to make connections with the broader world, it is important that they acquire strategies for identifying and managing emotions, recognizing sources of stress and coping, persevering, building relationships, developing self-awareness and confidence, and thinking critically and creatively when making life choices and responding to the world around them. The learning in this strand provides many opportunities for students to learn how to limit risk and to build the protective factors that will increase their resilience as they confront life's challenges (see "protective factors", "resilience", and "risk factors" in the glossary).

The organization of the Healthy Living strand provides an opportunity for learning about different health topics, which can be reinforced from different perspectives and with different focuses as students learn and grow, thus providing opportunities for recursive learning at different ages and stages. Students are encouraged to make connections between concepts in different content areas. If, for example, students learn refusal strategies when choosing not to smoke, they can learn to apply those same strategies when making choices about

taking care of their bodies and minds or choices connected to substance use, sexual health, physical activities, and personal safety.

The specific expectations are organized around three overall expectations, which are based on the application of health knowledge, and are cross-referenced to five health content areas (see Health Topics, below). In general, it is expected that health instruction will be planned in an integrated way, helping students make connections between health topics with an overall focus on the broad learning concepts described in the overall expectations. There may be times where some specific, health-topic–focused learning is also helpful. As shown in the chart below, the organization of health content and application of knowledge provides teachers with the option of using either a “vertical learning” approach, in which the overall expectations are the central organizing element and specific health content is linked to them, or a “horizontal learning” approach, in which instruction is organized around the health content areas but still captures the application emphases articulated in the overall expectations.

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating		D2.1 Influences on healthy eating D2.2 Eating cues and guidelines	D3.1 Benefits of healthy eating / active living
Personal Safety and Injury Prevention	D1.1 Benefits of inclusion, respect, and acceptance	D2.3 Safe and positive social interaction, conflict management	D3.2 Responsibilities, risks – care for self and others, safety practices
Substance Use, Addictions, and Related Behaviours	D1.2 Effects of cannabis, drugs	D2.4 Strategies, safe choices, influences, alcohol, tobacco, cannabis	
Human Development and Sexual Health	D1.3 Sexually explicit media	D2.5 Understanding of puberty changes, healthy relationships D2.6 Decision making, consent	D3.3 Stereotypes and assumptions – impacts and strategies for responding
Mental Health Literacy	D1.4 Seeking help – professional helpers D1.5 Connecting thoughts, emotions, and actions		

Some topics within the Healthy Living strand need to be approached with additional sensitivity, care, and awareness because of their personal nature and their connection to family values, religious beliefs, or other social or cultural norms. These topics can include but are not limited to human development and sexual health, mental health, body image, substance abuse, addictions, violence, harassment, child abuse, gender identity, gender expression, sexual orientation, illness (including HIV/AIDS), and poverty. It is important that both teachers and learners have a comfort level with these topics so that information can be discussed openly, honestly, and in an atmosphere of mutual respect.

When addressing all topics, but especially ones that can be challenging to talk about, it is important to give students an opportunity to explore all sides of the issue to promote understanding. Educators should also reflect about their own bias and need for support

and/or reliable information. Facts should be presented objectively, and students given the information they need to make informed decisions. It is important to set ground rules so that discussion takes place in a setting that is accepting, inclusive, and respectful of all.

With the integration of social-emotional learning skills and mental health concepts throughout the curriculum, and through the mental health literacy expectations in the Healthy Living strand (see page 44), the topic of suicide may arise in discussions with students. This topic needs to be approached with additional caution. Learning about suicide is best approached through structured, developmentally appropriate, adult-led instruction. It is important to conclude discussions with stories of hope, and information about seeking help. Among students who are vulnerable, thoughts of suicide can be triggered by offhand comments or even by general information shared in large-group settings. Educators may wish to consult with mental health staff for additional support, as needed, and for guidance on the suitability of the materials, resources, and approaches used in addressing this topic.

Supporting Minds: An Educator's Guide to Promoting Students' Mental Health and Well-being, 2013 is a resource designed to help educators understand more about mental health in order to promote the mental health of all students. It provides information to help educators recognize students who may be experiencing distress, and strategies for supporting them on the path to receiving the care they need.

Health Topics

The health content in this strand is divided into five content areas: healthy eating; personal safety and injury prevention; substance use, addictions, and related behaviours; human development and sexual health; and mental health literacy. These topics have been chosen because they are fundamentally connected to students' daily lives.

Healthy Eating. This component of the Healthy Living strand equips students with the knowledge and skills they need to make the healthiest eating choices they can. Students learn to examine their own food choices and eating patterns and develop personal guidelines for healthier eating, while working within parameters that they can control. Major topics include Canada's Food Guide, nutrition, food choices, factors influencing eating habits, skills for healthy eating, food trends, oral and dental health, food systems, and connections between eating choices, chronic disease prevention, and the health of the environment.

The learning in this topic area emphasizes the importance of student involvement in making food choices and preparing meals and snacks. The objective is to encourage students to make connections between what they learn in the classroom and their own lives and to develop a sense of personal responsibility for taking care of themselves and making healthy food decisions. Hands-on experiences with food help students make real connections between what they learn in the classroom and their own lives.⁹ This topic also provides a point of contact with healthy school policies relating to food.

9. All food-related activities must adhere to school board policies related to prevalent medical conditions (e.g., anaphylaxis, diabetes). See pages 63–64 for further information.

Connections to the home are important. Students bring their learning home to their families, and they have variable amounts of control over the food they eat at home and the food they bring to school. Teachers need to consider these realities and be aware of issues such as poverty, food allergies and sensitivities, eating disorders and weight preoccupation, and social and cultural practices in order to ensure that the learning is presented with sensitivity. Using a flexible and balanced approach and avoiding rigidity regarding food rules and guidelines can reduce potential triggers to body image and eating concerns. Sensitivity regarding weight and shape and personal values regarding “what is healthy” are important when considering instruction. What can always be stressed, however, is that healthy eating and regular physical activity are essential requirements for maintaining good health over the long term.

Personal Safety and Injury Prevention. Learning in this content area is intended not only to reduce adolescents’ injuries but also to equip them to recognize, assess, and manage potentially dangerous situations, including online situations. Personal safety topics focus on developing skills to identify, prevent, and resolve issues in areas such as bullying (including cyberbullying), peer assault, child abuse, harassment, and violence in relationships. These skills can be applied in both face-to-face situations and online environments. Injury prevention topics focus on areas such as road safety (including pedestrian, bicycle, and vehicle safety); concussion prevention, identification, and management; seasonal safety rules; sun and UV protection; home safety; fire safety; safety when volunteering and working; and first aid.

The expectations address the knowledge and skills needed to reduce safety risks at home, at school, online, and in the community. Risk taking is a natural and important part of maturation for students, especially adolescents. Having the confidence to take risks is essential to enjoying and achieving in both learning and life. Having the ability to manage risk for both themselves and others, however, is essential to physical safety and mental health and well-being. To develop their risk management skills, students will engage in skill-building activities and thoughtful discussion about ways to minimize harm in real-life situations.

Students will also become familiar with the support available to them within their families as well as through agencies and services that provide support and help within the community. However, knowledge alone is not enough: students require the skills necessary to respond appropriately to situations that threaten their personal safety and well-being. Skills such as self-advocacy, conflict resolution, anger management, and decision-making skills, as well as the ability to use assertiveness, resistance, and refusal techniques, will help them respond safely and effectively to these situations.

Substance Use, Addictions, and Related Behaviours. Education is one critical strategy that can help prevent problematic substance use. Parents, guardians, educators, and society at large – all have key roles to play in educating students about substance use, misuse, and abuse.

Alcohol, tobacco, and cannabis are the drugs most readily available to Ontario students, and smoking is a leading cause of preventable illnesses, disabilities, and premature deaths in Canada. The learning expectations related to substance use respond to these facts by focusing on an understanding of the effects of drugs – prescription drugs, non-prescription drugs, tobacco, alcohol, cannabis, and other intoxicating substances – and the consequences of their use. Students also learn about the effects and risks of vaping. This knowledge is integrated with the development of a variety of skills that help students make and maintain healthy choices.

This strand also addresses addictions and related behaviours that can lead to addictions or compulsive behaviour, such as online gambling or excessive screen time. It includes discussion of the relationship between problematic substance use and mental health disorders such as anxiety, depression, and eating disorders. The development of a number of social-emotional learning skills, such as recognizing sources of stress, developing skills to cope with challenges in healthy ways, and developing self-awareness and self-confidence, are closely tied to this area of learning. Students also learn about support systems and ways to access help, if needed.

Human Development and Sexual Health. Human development and sexual health education is more than simply teaching young people about the anatomy and physiology of reproduction. Sexual health, understood in its broadest sense, can include a wide range of topics and concepts, from sexual development, reproductive health, choice and sexual readiness, consent, abstinence, and protection, to interpersonal relationships, sexual orientation, gender identity and gender expression, affection, love, pleasure, body image, and gender roles and expectations. Sexual development is one component of overall human development, and learning about healthy human development begins at an early age. It is important for that learning to be appropriate to children’s age and stage of development. Younger children learn the names of body parts, begin to understand how their bodies work, and develop skills for healthy relationships, which include understanding consent and demonstrating respect for others. As students grow and develop, they build an understanding of the physical, emotional, social, and cognitive changes, and the further development of sense of self and identity, that they will experience at puberty. Their learning about human development – and their understanding of its many, interrelated aspects – deepens as students get older and as the nature of their relationships changes. They learn more about self, others, and identity; peer, family, and romantic relationships; personal safety; and decision making. Acquiring information and skills and developing attitudes, beliefs, and values related to identity and relationships are lifelong processes.

The overall and specific expectations in this strand are developmentally appropriate and should be addressed with sensitivity and respect for the uniqueness of each individual. Students should have the knowledge and skills needed to make sound decisions about matters affecting their physical and mental health and well-being before they experience real-life situations in which decisions have to be made.

Depending on the particular needs of the students in the class or school, it may be helpful to plan for instruction in groupings and/or settings that are most conducive to this

learning – including small groups, groups separated by sex, and co-educational groupings. Principals and teachers must follow their board’s policy that allows for students to be exempted, at their parents’ request, from instruction related to the Grade 1 to 8 human development and sexual health expectations in strand D.

Mental Health Literacy. Curriculum expectations related to this topic provide a specific progression of learning across the grades that is designed to develop students’ mental health literacy. This learning is integral to the development of social-emotional skills and the understanding of connections between physical and mental health that are incorporated across the curriculum.

Within this health topic, students learn that “mental health” is distinct from mental illness – that it is something all people have and that it is a significant contributor to overall health. Students learn to explore the connection between thoughts, emotions, and actions and to see how they can impact mental health. Students learn to identify when help is needed – for themselves and for others – by learning to recognize signs of stress and by developing an understanding of the body and brain’s response to stress. They learn to recognize feelings and environmental factors that contribute to stress and other challenges. Students also learn how and where to get help, and that there are limits to the help they can give to others. They come to understand the role of professional helpers.

Students learn about the difference between mental health and mental illness in developmentally appropriate ways, gradually gaining an understanding of the impact that the stigma associated with mental illness can have. They learn to support their own and others’ mental health by developing a range of skills and strategies and by making healthy choices with respect to mental health.

In addition to this explicit learning, mental health concepts and/or social-emotional learning skills are included within all content areas of the Healthy Living strand. In fact, students today have opportunities to learn about mental health across the full curriculum, in this and other disciplines.

Positive mental health and well-being are closely related to the development of psychological and emotional resilience. Resilience involves being able to recover from difficulties or change – to function as well as before and then move forward. It is often referred to as the ability to “bounce back” from difficulties or challenges. Resilience is enhanced by healthy, active living, but it also depends on many other things. Our lives are affected by a variety of individual characteristics, family circumstances, and community and environmental factors, some of which increase our resilience by protecting us from emotional and psychological harm and some of which reduce it by exposing us to emotional, social, and psychological risks.

See [Appendix D](#) for a quick-reference summary of learning in the Healthy Living strand.

Assessment and Evaluation of Student Achievement

Basic Considerations

*Growing Success: Assessment, Evaluation, and Reporting in Ontario Schools, First Edition, Covering Grades 1 to 12, 2010*¹⁰ sets out the Ministry of Education's assessment, evaluation, and reporting policy. The policy aims to maintain high standards, improve student learning, and benefit students, parents, and teachers in elementary and secondary schools across the province. Successful implementation of this policy depends on the professional judgement¹¹ of educators at all levels as well as on their ability to work together and to build trust and confidence among parents and students.

A brief summary of some major aspects of the current assessment, evaluation, and reporting policy, with a focus on policy relating to elementary schools, is given below. Teachers should refer to *Growing Success* for more detailed information.

Fundamental Principles

The primary purpose of assessment and evaluation is to improve student learning.

The following seven fundamental principles lay the foundation for rich and challenging practice. When these principles are fully understood and observed by all teachers, they will guide the collection of meaningful information that will help inform instructional decisions, promote student engagement, and improve student learning.

To ensure that assessment, evaluation, and reporting are valid and reliable and that they lead to improvement of learning for all students, teachers use practices and procedures that:

- are fair, transparent, and equitable for all students;
- support all students, including those with special education needs, those who are learning the language of instruction (English or French), and those who are First Nation, Métis, or Inuit;

10. Note that, in connection with the health and physical education curriculum, *Growing Success, 2010*, still refers to "living skills". These references can now be taken to apply to social-emotional learning skills. They will be updated in the next edition of the document.

11. "Professional judgement", as defined in *Growing Success* (p. 152), is "judgement that is informed by professional knowledge of curriculum expectations, context, evidence of learning, methods of instruction and assessment, and the criteria and standards that indicate success in student learning. In professional practice, judgement involves a purposeful and systematic thinking process that evolves in terms of accuracy and insight with ongoing reflection and self-correction".

- are carefully planned to relate to the curriculum expectations and learning goals and, as much as possible, to the interests, learning styles and preferences, needs, and experiences of all students;
- are communicated clearly to students and parents at the beginning of the school year or course and at other appropriate points throughout the school year or course;
- are ongoing, varied in nature, and administered over a period of time to provide multiple opportunities for students to demonstrate the full range of their learning;
- provide ongoing descriptive feedback that is clear, specific, meaningful, and timely to support improved learning and achievement;
- develop students' self-assessment skills to enable them to assess their own learning, set specific goals, and plan next steps for their learning.

Learning Skills and Work Habits

The development of learning skills and work habits is an integral part of a student's learning. To the extent possible, however, the evaluation of learning skills and work habits, apart from any that may be included as part of a curriculum expectation in a course, should *not* be considered in the determination of a student's grades. Assessing, evaluating, and reporting on the achievement of curriculum expectations and on the demonstration of learning skills and work habits *separately* allows teachers to provide information to the parents and student that is specific to each of these two areas of achievement.

The six learning skills and work habits are responsibility, organization, independent work, collaboration, initiative, and self-regulation.

Content Standards and Performance Standards

The Ontario curriculum for Grades 1 to 12 comprises *content standards* and *performance standards*. Assessment and evaluation will be based on both the content standards and the performance standards.

The content standards are the overall and specific curriculum expectations identified in the curriculum documents for every subject and discipline.

The performance standards are outlined in the achievement chart, which is provided in the curriculum documents for every subject or discipline (see pages 52–53). The achievement chart is a standard province-wide guide and is to be used by all teachers as a framework within which to assess and evaluate student achievement of the expectations in the particular subject or discipline. It enables teachers to make consistent judgements about the quality of student learning based on clear performance standards and on a body of evidence collected over time. It also provides teachers with a foundation for developing clear and specific feedback for students and parents.

The purposes of the achievement chart are to:

- provide a common framework that encompasses all curriculum expectations for all subjects/courses across the grades;

- guide the development of high-quality assessment tasks and tools (including rubrics);
- help teachers plan instruction for learning;
- provide a basis for consistent and meaningful feedback to students in relation to provincial content and performance standards;
- establish categories and criteria with which to assess and evaluate students' learning.

Assessment *for* Learning and *as* Learning

Assessment is the process of gathering information that accurately reflects how well a student is achieving the curriculum expectations. The primary purpose of assessment is to improve student learning. Assessment for the purpose of improving student learning is seen as both “assessment *for* learning” and “assessment *as* learning”. As part of assessment *for* learning, teachers provide students with descriptive feedback and coaching for improvement. Teachers engage in assessment *as* learning by helping all students develop their capacity to be independent, autonomous learners who are able to set individual goals, monitor their own progress, determine next steps, and reflect on their thinking and learning.

As essential steps in assessment *for* learning and *as* learning, teachers need to:

- plan assessment concurrently and integrate it seamlessly with instruction;
- share learning goals and success criteria with students at the outset of learning to ensure that students and teachers have a common and shared understanding of these goals and criteria as learning progresses;
- gather information about student learning before, during, and at or near the end of a period of instruction, using a variety of assessment strategies and tools;
- use assessment to inform instruction, guide next steps, and help students monitor their progress towards achieving their learning goals;
- analyse and interpret evidence of learning;
- give and receive specific and timely descriptive feedback about student learning;
- help students to develop skills of peer assessment and self-assessment.

Evaluation

Evaluation refers to the process of judging the quality of student learning on the basis of established performance standards and assigning a value to represent that quality. Evaluation accurately summarizes and communicates to parents, other teachers, employers, institutions of further education, and students themselves what students know and can do with respect to the overall curriculum expectations. Evaluation is based on assessment *of* learning that provides evidence of student achievement at strategic times throughout the school year, often at the end of a period of learning.

All curriculum expectations must be accounted for in instruction and assessment, but *evaluation focuses on students' achievement of the overall expectations*. A student's achievement of the overall expectations is evaluated on the basis of their achievement of related specific expectations. The overall expectations are broad in nature, and the specific

expectations define the particular content or scope of the knowledge and skills referred to in the overall expectations. Teachers will use their professional judgement to determine which specific expectations should be used to evaluate achievement of the overall expectations, and which ones will be accounted for in instruction and assessment but not necessarily evaluated.

Determining a report card grade involves the interpretation of evidence collected through observations, conversations, and student products (assignments for evaluation, culminating activities, tests), combined with the teacher's professional judgement and consideration of factors such as the number of tests/examinations or assignments for evaluation that were not completed or submitted and the fact that some evidence may carry greater weight than other evidence. The grade should reflect the student's most consistent level of achievement, with special consideration given to more recent evidence.

Reporting Student Achievement

Three formal report cards are issued in Ontario's publicly funded elementary schools, as described below.

The Elementary Progress Report Card shows a student's development of learning skills and work habits during the fall of the school year, as well as the student's general progress in working towards achievement of the curriculum expectations in each subject (reported as "progressing very well", "progressing well", or "progressing with difficulty").

The Elementary Provincial Report Card shows a student's achievement at specific points in the school year. The first provincial report card reflects student achievement of the overall curriculum expectations introduced and developed from September to January/February of the school year, as well as the student's development of learning skills and work habits during that period. The second reflects achievement of curriculum expectations introduced or further developed from January/February to June, as well as further development of learning skills and work habits during that period. The provincial report card for Grades 1–6 uses letter grades; the report card for Grades 7 and 8 uses percentage grades.

Although there are formal reporting periods, communication with parents and students about student achievement should be continuous throughout the course, by means such as parent-teacher or parent-student-teacher conferences, portfolios of student work, student-led conferences, interviews, phone calls, checklists, and informal reports. Communication about student achievement should be designed to provide detailed information that will encourage students to set goals for learning, help teachers to establish plans for teaching, and assist parents in supporting learning at home.

The Achievement Chart for Health and Physical Education

The achievement chart identifies four categories of knowledge and skills and four levels of achievement in health and physical education. The components of the chart are explained below. (See also the section “Content Standards and Performance Standards”, on page 46.)

Categories of Knowledge and Skills

The categories represent four broad areas of knowledge and skills within which the expectations for any given subject or course can be organized. The four categories should be considered as interrelated, reflecting the wholeness and interconnectedness of learning.

The categories help teachers focus not only on students’ acquisition of knowledge but also on their development of the skills of thinking, communication, and application.

The categories of knowledge and skills are as follows:

Knowledge and Understanding. Subject-specific content acquired in each grade or course (knowledge), and the comprehension of its meaning and significance (understanding).

Thinking. The use of critical and creative thinking skills and/or processes.

Communication. The conveying of meaning and expression through various forms.

Application. The use of knowledge and skills to make connections within and between various contexts.

In all subjects and courses, students should be given numerous and varied opportunities to demonstrate the full extent of their achievement of the curriculum expectations across all four categories of knowledge and skills.

Teachers will ensure that student learning is assessed and evaluated in a balanced manner with respect to the four categories, and that achievement of particular expectations is considered within the appropriate categories. The emphasis on “balance” reflects the fact that all categories of the achievement chart are important and need to be a part of the process of instruction, learning, assessment, and evaluation. However, it also indicates that for different courses, the *relative* importance of each of the categories may vary. The importance accorded to each of the four categories in assessment and evaluation should reflect the emphasis accorded to them in the curriculum expectations for the subject or course and in instructional practice.

Criteria and Descriptors

To further guide teachers in their assessment and evaluation of student learning, the achievement chart provides “criteria” and “descriptors”.

A set of criteria is identified for each category in the achievement chart. The criteria are subsets of the knowledge and skills that define the category. The criteria identify the

aspects of student performance that are assessed and/or evaluated, and they serve as a guide to what teachers look for. In the health and physical education curriculum, the criteria for each category are as follows:

Knowledge and Understanding

- knowledge of content (e.g., facts, definitions, skills, principles and strategies, safe practices and procedures)
- understanding of content (e.g., processes, techniques, ideas, relationships between concepts)

Thinking

- use of planning skills (e.g., identifying the problem, formulating questions and ideas, gathering and organizing information; developing fitness plans; selecting strategies)
- use of processing skills (e.g., synthesizing information, evaluating risk and determining appropriate safety measures, revising fitness goals, detecting bias)
- use of critical/creative thinking processes (e.g., goal setting, decision making, problem solving; analysing movement skills, strategizing, reflecting on learning and determining steps for improvement, critiquing)

Communication

- expression and organization of ideas and information in oral, visual, and/or written forms (e.g., demonstrations, role plays, conferences, presentations, posters, pamphlets, journals)
- communication for different audiences (e.g., peers, teammates, adults) and purposes (e.g., to inform, instruct, promote) in oral, visual, and/or written forms
- use of health and physical education conventions, vocabulary, and terminology (e.g., using and interpreting signals and body language; using correct terminology to discuss parts of the body, health-related components of fitness, phases of movement [*preparation, execution, follow-through*]) in oral, visual and/or written forms

Application

- application of knowledge and skills (e.g., movement skills, concepts, principles, strategies, including teamwork, fair play, etiquette, leadership; training principles; health concepts; safe practices; social-emotional learning skills) in familiar contexts (e.g., physical activities, healthy living discussions)
- transfer of knowledge and skills to new contexts (e.g., transfer of movement skills, strategies, and tactics from a familiar physical activity to a new activity, transfer of planning skills to contexts such as fitness, healthy eating, healthy sexuality, mental health)
- making connections within and between various contexts (e.g., between active participation, learning in the health and physical education program, and healthy, active living; between health and physical education, other subjects, and personal experiences in and beyond school)

“Descriptors” indicate the characteristics of the student’s performance, with respect to a particular criterion, on which assessment or evaluation is focused. *Effectiveness* is the descriptor used for each of the criteria in the Thinking, Communication, and Application categories. What constitutes effectiveness in any given performance task will vary with the particular criterion being considered. Assessment of effectiveness may therefore focus on a quality such as appropriateness, clarity, accuracy, precision, logic, relevance, significance, fluency, flexibility, depth, or breadth, as appropriate for the particular criterion.

Levels of Achievement

The achievement chart also identifies four levels of achievement, defined as follows:

Level 1 represents achievement that falls much below the provincial standard. The student demonstrates the specified knowledge and skills with limited effectiveness. Students must work at significantly improving in specific areas, as necessary, if they are to be successful in a subject in the next grade.

Level 2 represents achievement that approaches the standard. The student demonstrates the specified knowledge and skills with some effectiveness. Students performing at this level need to work on identified learning gaps to ensure future success.

Level 3 represents the provincial standard for achievement. The student demonstrates the specified knowledge and skills with considerable effectiveness. Parents of students achieving at level 3 can be confident that their children will be prepared for work in subsequent grades.

Level 4 identifies achievement that surpasses the provincial standard. The student demonstrates the specified knowledge and skills with a high degree of effectiveness. *However, achievement at level 4 does not mean that the student has achieved expectations beyond those specified for the course.*

Specific “qualifiers” are used with the descriptors in the achievement chart to describe student performance at each of the four levels of achievement – the qualifier *limited* is used for level 1; *some* for level 2; *considerable* for level 3; and a *high degree of* or *thorough* for level 4. Hence, achievement at level 3 in the Thinking category for the criterion “use of planning skills” would be described in the achievement chart as “[The student] uses planning skills with *considerable* effectiveness”.

THE ACHIEVEMENT CHART: Health and Physical Education, Grades 1–8

Knowledge and Understanding – Subject-specific content acquired in each grade (knowledge), and the comprehension of its meaning and significance (understanding)				
Categories	Level 1	Level 2	Level 3	Level 4
	The student:			
Knowledge of content (e.g., facts, definitions, skills, principles and strategies, safe practices and procedures)	demonstrates limited knowledge of content	demonstrates some knowledge of content	demonstrates considerable knowledge of content	demonstrates thorough knowledge of content
Understanding of content (e.g., processes, techniques, ideas, relationships between concepts)	demonstrates limited understanding of content	demonstrates some understanding of content	demonstrates considerable understanding of content	demonstrates thorough understanding of content
Thinking – The use of critical and creative thinking skills and/or processes				
Categories	Level 1	Level 2	Level 3	Level 4
	The student:			
Use of planning skills (e.g., identifying the problem, formulating questions and ideas, gathering and organizing information; developing fitness plans; selecting strategies)	uses planning skills with limited effectiveness	uses planning skills with some effectiveness	uses planning skills with considerable effectiveness	uses planning skills with a high degree of effectiveness
Use of processing skills (e.g., synthesizing information, evaluating risk and determining appropriate safety measures, revising fitness goals, detecting bias)	uses processing skills with limited effectiveness	uses processing skills with some effectiveness	uses processing skills with considerable effectiveness	uses processing skills with a high degree of effectiveness
Use of critical/creative thinking processes (e.g., goal setting, decision making, problem solving; analysing movement skills, strategizing, reflecting on learning and determining steps for improvement, critiquing)	uses critical/creative thinking processes with limited effectiveness	uses critical/creative thinking processes with some effectiveness	uses critical/creative thinking processes with considerable effectiveness	uses critical/creative thinking processes with a high degree of effectiveness
Communication – The conveying of meaning through various forms				
Categories	Level 1	Level 2	Level 3	Level 4
	The student:			
Expression and organization of ideas and information in oral, visual, and/or written forms (e.g., demonstrations, role plays, conferences, presentations, posters, pamphlets, journals)	expresses and organizes ideas and information with limited effectiveness	expresses and organizes ideas and information with some effectiveness	expresses and organizes ideas and information with considerable effectiveness	expresses and organizes ideas and information with a high degree of effectiveness
Communication for different audiences (e.g., peers, teammates, adults) and purposes (e.g., to inform, instruct, promote) in oral, visual, and/or written forms	communicates for different audiences and purposes with limited effectiveness	communicates for different audiences and purposes with some effectiveness	communicates for different audiences and purposes with considerable effectiveness	communicates for different audiences and purposes with a high degree of effectiveness

Categories	Level 1	Level 2	Level 3	Level 4
Communication – (continued)				
	The student:			
Use of health and physical education conventions, vocabulary, and terminology (e.g., using and interpreting signals and body language; using correct terminology to discuss parts of the body, health-related components of fitness, phases of movement [preparation, execution, follow-through]) in oral, visual, and/or written forms	uses conventions, vocabulary, and terminology with limited effectiveness	uses conventions, vocabulary, and terminology with some effectiveness	uses conventions, vocabulary, and terminology with considerable effectiveness	uses conventions, vocabulary, and terminology with a high degree of effectiveness
Application – The use of knowledge and skills to make connections within and between various contexts				
Categories	Level 1	Level 2	Level 3	Level 4
	The student:			
Application of knowledge and skills (e.g., movement skills, concepts, principles, and strategies, including teamwork, fair play, etiquette, leadership; training principles; health concepts; safe practices; social-emotional learning skills) in familiar contexts (e.g., physical activities, healthy living discussions)	applies knowledge and skills in familiar contexts with limited effectiveness	applies knowledge and skills in familiar contexts with some effectiveness	applies knowledge and skills in familiar contexts with considerable effectiveness	applies knowledge and skills in familiar contexts with a high degree of effectiveness
Transfer of knowledge and skills to new contexts (e.g., transfer of movement skills, strategies, and tactics from a familiar physical activity to a new activity, transfer of planning skills to contexts such as fitness, healthy eating, healthy sexuality, mental health)	transfers knowledge and skills to new contexts with limited effectiveness	transfers knowledge and skills to new contexts with some effectiveness	transfers knowledge and skills to new contexts with considerable effectiveness	transfers knowledge and skills to new contexts with a high degree of effectiveness
Making connections within and between various contexts (e.g., between active participation, learning in the health and physical education program, and healthy, active living; between health and physical education, other subjects, and personal experiences in and beyond school)	makes connections within and between various contexts with limited effectiveness	makes connections within and between various contexts with some effectiveness	makes connections within and between various contexts with considerable effectiveness	makes connections within and between various contexts with a high degree of effectiveness

Some Considerations for Program Planning in Health and Physical Education

Instructional Approaches and Teaching Strategies

Effective instruction is key to student success. To provide effective instruction, teachers need to consider what they want students to learn, how they will know whether students have learned it, how they will design instruction to promote the learning, and how they will respond to students who are not making progress.

When planning what students will learn, teachers identify the main concepts and skills described in the curriculum expectations, consider the contexts in which students will apply the learning, and determine students' learning goals.

Instructional approaches should be informed by the findings of current research on instructional practices that have proved effective in the classroom. For example, research has provided compelling evidence about the benefits of the explicit teaching of strategies that can help students develop a deeper understanding of concepts. Strategies such as “compare and contrast” (e.g., through Venn diagrams and comparison matrices) and the use of analogy give students opportunities to examine concepts in ways that help them see what the concepts *are* and what they *are not*. Although such strategies are simple to use, teaching them explicitly is important in order to ensure that all students use them effectively.

A well-planned instructional program should always be at the student's level, but it should also push the student towards their optimal level of challenge for learning, while providing the support and anticipating and directly teaching the skills that are required for success.

A Differentiated Approach to Teaching and Learning

An understanding of students' strengths and needs, as well as of their backgrounds, and experiences, can help teachers plan effective instruction and assessment. Teachers continually build their awareness of students' learning strengths and needs by observing and assessing their readiness to learn, their interests, and their learning styles and preferences. As teachers develop and deepen their understanding of individual students, they can respond more effectively to the students' needs by differentiating instructional approaches – adjusting the method or pace of instruction, using different types of resources, allowing a wider choice of topics, even adjusting the learning environment, if appropriate, to suit the way their students learn and how they are best able to demonstrate their learning. Unless students have an Individual Education Plan with modified curriculum expectations, *what* they learn continues to be guided by the curriculum expectations and remains the same for all students.

Lesson Design

Effective lesson design involves several important elements. Teachers engage students in a lesson by activating their prior learning and experiences, clarifying the purpose for learning, and making connections to contexts that will help them see the relevance and usefulness of what they are learning. Teachers select instructional strategies to effectively introduce concepts, and consider how they will scaffold instruction in ways that will best meet the needs of their students. At the same time, they consider when and how to check students' understanding and to assess their progress towards achieving their learning goals. Teachers provide multiple opportunities for students to apply their knowledge and skills and to consolidate and reflect on their learning. A three-part lesson design (e.g., "Minds On, Action, and Consolidation") is often used to structure these elements.

Instructional Approaches in Health and Physical Education

Instruction in health and physical education should help students acquire the knowledge, skills, and attributes they need in order to achieve the curriculum expectations and be able to enjoy and participate in healthy active living for years to come. In health and physical education, instruction is effective if it motivates students and instils positive habits of mind, such as curiosity and open-mindedness; a willingness to think, question, challenge, and be challenged; and an awareness of the value of listening or reading closely and communicating clearly. To be effective, instruction must be based on the belief that all students can be successful and that learning in health and physical education is important and valuable for all students.

When planning a program in health and physical education, teachers must take into account a number of important considerations, including those discussed below.

Instruction should emphasize constructivist teaching and experiential learning. Constructivist teaching, which emphasizes the role of the teacher as co-learner and facilitator, promotes authentic experiential learning and learning through inquiry, provides engagement through student-initiated work, creates a sense of community through teamwork and collaboration, and provides options to accommodate different learning styles and intelligences. This experiential and student-centred approach is particularly important in health and physical education because it allows the teacher to respond to a range of experience, backgrounds, and abilities in physical activity settings and to respond to a range of needs and experiences when addressing healthy living topics and concepts. It is also important to have a balanced program that provides for both direct instruction in content and skills and opportunities for students to use their knowledge and skills in structured as well as unstructured activities.

Student achievement is enhanced by the development of higher-order thinking skills. In health and physical education, students have the opportunity to practise and apply higher-order thinking skills while involved in physical activities as well as when making choices and decisions about factors that affect their health and well-being. Their ability to use these skills is developed through course content that increases their awareness of the ties and

relationships between health outcomes (e.g., physical and mental health) and health-related behaviours (e.g., eating habits, substance use, and physical activity). In addition to providing students with opportunities to think critically and creatively about what they are learning, teachers should also encourage students to think about how they are learning. To accomplish this, teachers should support students in developing the language and techniques they need to assess their own learning.

Students learn best by doing. Many of the skills emphasized in this curriculum are best taught and learned through participatory exploration experiences and hands-on activities, with numerous opportunities to practise and apply new learning. Learning by doing and group activities also enable students to develop personal and interpersonal skills as they acquire the knowledge, skills, and habits that will lay the foundation for lifelong healthy, active living. Through regular and varied assessments, teachers can give students the detailed feedback they need to further develop and refine their skills.

Students should have opportunities to participate in a wide range of activities and to complete assignments that not only help them master health and physical education concepts, but also enable them to develop inquiry and research skills and provide opportunities for self-expression and personal choice. Activities should be based on the assessment of students' individual needs, proven learning theory, and best teaching practices. Effective activities enable both direct teaching and modelling of knowledge and skills and the application of learning strategies that encourage students to express their thinking and that engage them in their learning.

To be effective, instruction in health and physical education must be developmentally appropriate. Many of the expectations in the health and physical education curriculum are similar from grade to grade, to provide students with the numerous opportunities they need to explore the basic concepts and skills underlying these expectations in a wide variety of age- and developmentally appropriate ways. Although all students go through predictable stages of motor development, differences in rates of maturation and in the kinds of opportunities they have had to practise motor skills contribute to significant variability in their skills and abilities. As noted earlier, development of motor skills is age-related, not age-dependent. This is a subtle but important distinction that underscores the need for differentiated instruction and assessment. As they develop, students also pass through a number of cognitive and social/emotional developmental stages, which are described in some detail in the overviews provided in this document for Grades 1–3, 4–6, and 7–8. To meet the needs of all students at different stages of development, effective teachers provide exposure to a wide range of activities, instruction on skill progressions, opportunities for focused practice, and detailed and supportive feedback and encouragement.

Instruction based on the fundamental principles of health and physical education (see pages 9–10) provides the framework for a well-planned, inclusive, high-quality health and physical education program. The following questions may be helpful for teachers as they reflect on their implementation of each of the fundamental principles:

1. School, Family, and Community Support

- Are the key messages of the health and physical education program reflected in the school's physical and social environment, policies and programs, and community partnerships?
- Do adults in the school act as positive role models?

2. Physical Activity as the Vehicle for Learning

- Are students given frequent and varied opportunities to be active and engaged?
- Is the environment well planned, managed, and organized to maximize time on task?
- Do *all* students have opportunities to build their fitness and develop the habit of regular physical activity by participating in moderate to vigorous physical activity every day?
- Do students have opportunities to take part in purposeful kinesthetic experiences that help them learn about their bodies and experience the joy of movement?
- Do students have numerous opportunities to improve their skills through practice and physical exploration?
- Are students exposed to a wide variety of physical activities and movement forms?

3. Physical and Emotional Safety

- Is instruction designed to ensure a positive experience in a safe, inclusive, and supportive environment for all students?
- Are all school board safety and equity guidelines being followed?
- Are intentional steps being taken by educators and students to build skills for healthy relationships and ensure that bullying and harassment are prevented, or addressed if and when they occur, in the change room, the gym, outdoors, and in all learning spaces?
- Are activities being modified or adapted as required to ensure that all students are included?
- Is exercise presented as a positive and healthy experience rather than being used as punishment?
- Does the program ensure maximum participation for all by avoiding activities in which students may be eliminated from play, and thereby deprived of opportunities to participate, practise, and improve?
- Are teams designated in ways that are inclusive and fair, avoiding potentially insensitive methods of selection (e.g., having teams chosen by student captains)?
- Are students' diverse backgrounds taken into account when health topics are introduced, to ensure that discussions have personal relevance and that topics are addressed with sensitivity?

4. Student-Centred, Skill-Based Learning

- Are program activities and instruction differentiated to provide all students with relevant and engaging learning experiences, so that all students can experience success?

- Are the activities adaptable to meet diverse individual needs and abilities?
- Are instructions clear and succinct and delivered at intervals throughout the lesson, in order to allow for maximum activity and learning?
- Are modified and small-group activities used often, to allow for maximum participation?
- Are students given opportunities to make choices and to adapt the boundaries and level of challenge of activities, the type of equipment used, group sizes, and other features, as well as to choose topics for discussion?
- Are students actively involved in discussing and clarifying criteria for learning?
- Are questioning techniques being used to reveal meaning and to encourage student engagement in, reflection about, and sense of responsibility for learning?

5. Balanced, Integrated Learning With Relevance to Students' Lives

- Are individual students experiencing the optimal degree of challenge in their learning, with tasks that are not too difficult and not too easy?
- Does the program integrate learning in health education and learning in physical education, in a way that helps students understand that both are essential for healthy, active living?
- Are a variety of activities presented throughout the year and over the course of a student's experience in the program?
- Does instruction make use of real-life examples, field trips, and communication with parents, community members, Elders, Métis Senators, knowledge holders, and knowledge keepers so that students' learning in health and physical education is reflected and reinforced in both home and community environments?

Planning and Scheduling Instruction

High-quality instruction in health and physical education is integrated in such a way that students have opportunities to make connections between concepts and skills in all four strands of the curriculum.

Planning of the health education component of the curriculum requires careful consideration of when material should be taught explicitly and when topics and concepts can be integrated with learning in physical education and linked to learning in other subjects. Teaching health sporadically or when gymnasium facilities are being used for other purposes will not provide adequate opportunities for learning. Some healthy living topics can be taught through physical education and can also be connected to learning in other curriculum areas. Thirty per cent of instructional time should be allocated to health education. Ways of managing instruction will vary from school to school, depending on student needs, timetabling, and available facilities. If more than one teacher is responsible for teaching different parts of the health and physical education curriculum, communication and collaboration between these teachers for instructional planning, evaluation, and reporting is essential.

The physical education component of the curriculum should include a balance of games, dance, movement education, outdoor and recreational activities, and opportunities to focus on developing fitness, while also developing social-emotional learning skills through these activities. A mix of individual and group activities, as well as of traditional and new games and activities, provides opportunities for students to think critically and apply movement skills and concepts in different ways. Careful school-wide planning helps to ensure that students experience different kinds of activities in the different grades, with activities in each grade serving as the vehicle for broader learning connected with movement skills, concepts, and strategies, active living, fitness, and safety.

Daily physical activity (DPA) is a requisite part of a comprehensive health and physical education program. It can be incorporated into the instructional day in a variety of ways – one being the inclusion of twenty minutes or more of moderate to vigorous physical activity during a scheduled health and physical education class. However, since physical activity is only one component of a complete health and physical education program, there may be the occasional day when a health and physical education class does not include twenty minutes of physical activity. On these days (or on days when a health and physical education class is not scheduled), other opportunities for DPA must be provided. Physical activity can be integrated into other curriculum areas in a variety of ways, many of which are outlined in the ministry's **Daily Physical Activity documents** for Grades 1–3, 4–6, and 7 and 8.

Planning the Use of Facilities and Equipment

When planning the use of facilities and equipment, teachers should organize the learning environment in a way that allows for movement and ensures student comfort, accessibility, and safety. It is important to plan routines that students can follow as they move to and from the gymnasium or activity space, make transitions from one activity to another, and collect and put away equipment. Planning time and creating guidelines for changing clothes, using equipment, and other procedures can maximize student comfort and participation. In the classroom, teachers should strive to create a space that is comfortable and stimulating and that allows for flexible groupings for student discussion and activities. Displaying student work connected to healthy living discussions can help students make connections with learning in other subjects at school and with their lives outside school.

Since equipment and facilities in individual schools across the province will vary, care has been taken to ensure that the expectations of this curriculum can be met in a variety of settings and using a broad range of equipment. The curriculum contains a wide assortment of examples and prompts that illustrate different ways of meeting the expectations. Teachers can use these as a source of ideas for adapting the delivery of the expectations to meet the particular needs of their students. When making decisions about equipment and facilities, teachers should ensure that they are distributed in a way that provides fair and equal access for all students, taking into account criteria such as gender and range of abilities, and that allows for a variety of activities and choice in activities. The principles and guidelines of Universal Design for Learning (see p. 65, note 12) should also be

considered when planning the use of equipment and facilities, so that the needs of all students, including those with special education needs, can be met.

It is important to note that activities that help students fulfil the curriculum requirements do not necessarily require the use of a school gymnasium. The scheduling and accommodation of regular physical education classes, however, may require some creativity, especially if facilities are limited and must be shared by large numbers of students. Classes may be combined if there is sufficient space to permit students to participate safely, and hallways, portables, and outdoor spaces can also be put to use. It may be possible as well to use alternative venues, such as nearby parks, fields, and recreation centres. The use of these various settings will have the advantage of increasing students' awareness of the facilities that are available in their communities.

To support the development of specific skills and add interest to physical activities, a variety of equipment should be used. For example, an activity that focuses on students' catching objects of various sizes and shapes is more effective if it uses a variety of objects, such as beanbags, tennis balls, beach balls, rubber chickens, and discs. When supplies are limited, teachers will have to be resourceful to ensure that each student has opportunities to use as many different kinds of equipment as possible. Teachers must provide specific instruction to students on the appropriate handling of equipment, ensure that equipment is in good repair and suitably organized, and take into account the size, ability, and age of the students when choosing the most appropriate equipment to use.

Co-educational and Same-Sex Classes

Although all the curriculum expectations can be achieved in either co-educational or same-sex classes, addressing parts of the curriculum in same-sex settings may allow students to learn and ask questions with greater comfort. Same-sex settings may be of benefit to some students not only for the discussion of some health topics, but also for developing and practising some physical skills. Such considerations are particularly relevant in the case of adolescent learners.

It is also important to have time for co-educational learning, which can encourage learning about others, and about differences and commonalities among people, and allows for the development of relationship skills. Teachers should base their decisions about teaching in co-educational or same-sex settings on students' needs. Different strategies may be required at different times, so that students have opportunities to learn in a variety of different groupings.

When planning instruction and considering class groupings, teachers should be aware of and consider the needs of students who may not identify as “male” or “female”, who are transgender, or who are gender-non-conforming. For more information about gender identity, gender expression, and human rights, see the website of the [Ontario Human Rights Commission](#).

Acknowledgement of and respect for individual differences regardless of sex, gender identity, or gender expression will encourage student participation and help students learn to collaborate with and respect others. Strategies for encouraging understanding and mutual respect among students include:

- creating an inclusive and welcoming atmosphere in the class and supporting all students to be active participants;
- fostering authentic opportunities for students to provide input into learning activities and approaches;
- providing opportunities for all students to assume leadership roles;
- encouraging and respecting the interests and abilities of all students;
- ensuring that responsibilities are shared equally by all students.

Co-curricular Programs

Within the context of a healthy school, the health and physical education curriculum provides all students with the skills and strategies they need to participate in a wide variety of physical activities. A supportive school environment will provide opportunities for students to continue their learning either in the school, at home, or in the community. Intramural programs allow all students to participate in activities that are informal and not highly competitive. Interschool programs offer students opportunities to participate in more organized and competitive activities. Other recreational activities and clubs also provide opportunities for students with common interests to participate in physical activities in non-competitive settings. In planning and organizing the health and physical education curriculum, schools should use community organizations, facilities, and programs as resources to provide students with additional experiences and opportunities for physical activity and healthy living.

Health and Safety in Health and Physical Education

In Ontario, the **Education Act**, the **Occupational Health and Safety Act (OHSA)**, **Ryan's Law**, and **Sabrina's Law** collectively ensure that school boards provide a safe and productive learning and work environment for both students and employees. Under the Education Act, the teacher is required to ensure that all reasonable safety procedures are carried out in courses and activities for which the teacher is responsible (Regulation 298, subsection 20(g)). Teachers must model safe practices at all times; communicate safety requirements to students in accordance with school board and Ministry of Education policies and Ministry of Labour regulations; and encourage students to assume responsibility for their own safety and the safety of others. Students must be made aware that health and safety are everyone's responsibility – at home, at school, and in the workplace.

Teachers are responsible for ensuring the safety of students during instructional activities and also for encouraging and motivating students to assume responsibility for their own safety and the safety of others. Teachers are encouraged to review:

- their responsibilities under the **Education Act**;
- their rights and responsibilities under the **Occupational Health and Safety Act** and its **regulations**;
- their school board's health and safety policy for employees;
- their school board's policies and procedures on student health and safety (e.g., on concussions, on medical conditions such as asthma; with respect to outdoor education excursions);
- relevant provincial subject association guidelines and standards for student health and safety (e.g., **Ophea's Ontario Physical Activity Safety Standards in Education**, formerly the Ontario Physical Education Safety Guidelines);
- any additional requirements that may be mandatory, particularly for higher-risk activities (e.g., field trips that involve water-based activities), including approvals (e.g., from the Supervisory Officer), permissions (e.g., from parents/guardians), and qualifications (e.g., proof of successful swim test completion by students).

Teachers should follow board safety guidelines to ensure that students have the knowledge and skills needed for safe participation in health and physical education activities. Safety guidelines should outline the practices to be followed for each activity, addressing questions related to equipment, clothing and footwear, facilities, special rules and instructions, and supervision. They should also reflect school board policies on how to conduct activities, and they should be reviewed on a regular basis. While all physical activity involves an element of risk, administrators and teachers have an obligation to provide a safe environment to minimize that risk. Safety awareness, based on up-to-date information, common sense observation, action, and foresight, is the key to safe programming.

Concern for safety should be an integral part of instructional planning and implementation. The primary responsibility for ensuring safer practices rests with the school board and its employees. Wherever possible, potential risks must be identified and procedures developed to prevent or minimize, and respond to, incidents and injuries. In a safe learning environment, the teacher will:

- be aware of up-to-date safety information;
- plan activities with safety as a primary consideration;
- observe students to ensure safe practices are being followed;
- have a plan in case of emergency;
- show foresight;
- act quickly.

Teachers must establish and support a culture of safety-mindedness. They must think about safety before they ask students to participate in any activity. They must consider any potential dangers, assess those dangers, and implement control measures to protect the students from the risks. By implementing safer instructional practices, such as using

logical teaching progressions and transitions and choosing age-appropriate and developmentally appropriate activities, teachers can reduce risk and guard against injury. Board policies related to concussion prevention and management (including processes for returning to learning and to physical activity) are particularly relevant in physical education settings. (With respect to concussion, it is important to clarify for students and parents that helmets are designed primarily to prevent injury to the skull, and mouth guards to prevent injury to the teeth and gums. There is no current evidence that they prevent concussion. Helmets and mouth guards do not stop the brain from moving within the skull.)

Field trips may present additional health and safety issues that are not encountered in in-school activities. Field trips can provide a meaningful and authentic dimension to students' learning experiences, but they also take the teacher and students out of the predictable classroom environment and into unfamiliar settings. Teachers must plan these activities carefully in accordance with their school board's relevant policies and procedures and in collaboration with other school board staff (e.g., the principal, outdoor education lead, supervisory officer) in order to ensure students' health and safety.

Students demonstrate that they have the knowledge, skills, and habits of mind required for safe participation in health and physical education activities when they:

- understand why rules are in place;
- follow established routines (e.g., for entering and leaving the gym, changing clothes, and engaging in warm-up and cool-down activities) and apply personal safety skills related to physical activities in the classroom, gymnasium, or other locations in the school; outdoors; or in the community;
- identify possible safety concerns;
- suggest and implement appropriate safety procedures;
- follow the instructions outlined for each activity (e.g., for starting and stopping);
- consistently show care and concern for their safety and that of others;
- wear clothing and use protection appropriate to the activities (e.g., a hat and sunscreen for outdoor activities), wear appropriate footwear and ensure that shoelaces are tied, and remove jewellery when participating in physical activities;
- handle equipment safely and show awareness of the space around them;
- take age-appropriate and developmentally appropriate responsibility for safe behaviour (e.g., for the safe use of equipment) and take necessary precautions when engaging in activities (e.g., using a safety mat);
- follow rules and expectations pertaining to the setting for the activity (e.g., skiing only in designated areas, following venue rules).

When considering students' safety, including their physical safety, it is important to ensure that students feel comfortable physically, socially, and emotionally. For example, teachers should be aware of student comfort and safety when students are changing their clothing for physical education, forming groups, demonstrating physical tasks, and discussing health topics. They should also ensure that all students – students of all social and cultural backgrounds, abilities, sexes, gender identities, gender expressions, and sexual orientations – feel included and recognized in all activities and discussions.

It is vitally important that parents inform appropriate school staff members of any medical conditions, including allergies, diabetes, or hemophilia, that might affect their child's participation in physical activities. Sabrina's Law: An Act to Protect Anaphylactic Pupils requires all school boards to have an anaphylaxis policy. Boards must provide regular training of school staff in dealing with life-threatening allergies, and school principals are required to maintain individual plans for pupils who have an anaphylactic allergy, and have emergency procedures in place for anaphylactic students.

Cross-Curricular and Integrated Learning

In cross-curricular learning, students are provided with opportunities to learn and use related content and/or skills in two or more subjects. For example, all subjects, including health and physical education, can be related to the language curriculum. In health and physical education, students use a range of language skills: they build subject-specific vocabulary; they use words and their bodies to communicate feelings and share and interpret information; and they read about current health issues and research new information.

Teachers can also use reading material about health and physical education in their language lessons. Similarly, health and physical education lessons can be used as a vehicle for instruction in critical literacy. Students can interpret product information on food labels and critique media messages related to sex and gender stereotypes, body image, or alcohol use. Students can also analyse and adapt fitness plans with reference to criteria such as ability levels, individual interests, resource requirements, and personal goals.

In integrated learning, students are provided with opportunities to work towards meeting expectations from two or more subjects within a single unit, lesson, or activity. By linking expectations from different subject areas, teachers can provide students with multiple opportunities to reinforce and demonstrate their knowledge and skills in a range of settings. There are clear connections, for example, between the expectations in health and physical education and those in other subject areas, such as language, science and technology, and social studies, history, and geography. Health and physical education can be used to provide other ways of learning and making connections.

In integrated learning, teachers need to ensure that the specific knowledge and skills for each subject are taught. For example, if students are illustrating a number sentence in mathematics by means of jumping or if they are using their bodies to make the shapes of letters to spell a word in language, the teacher should ensure that health and physical education expectations for jumping and landing in control and for building fitness, including body strength and flexibility, are integrated into the activities.

Integrated learning can also be a solution to problems of fragmentation and isolated skill instruction – that is, in integrated learning, students can learn and apply skills in a meaningful context. In such contexts, students also have an opportunity to develop their ability to think and reason and to transfer knowledge and skills from one subject area to another.

Planning Health and Physical Education Programs for Students with Special Education Needs

Classroom teachers are the key educators of students with special education needs. They have a responsibility to help all students learn, and they work collaboratively with special education teachers, where appropriate, to achieve this goal. Classroom teachers commit to assisting every student to prepare for living with the highest degree of independence possible.

Learning for All: A Guide to Effective Assessment and Instruction for All Students, Kindergarten to Grade 12 (2013) describes a set of beliefs, based in research, that should guide program planning for students with special education needs in all subjects and disciplines. Teachers planning health and physical education courses need to pay particular attention to these beliefs, which are as follows:

- All students can succeed.
- Each student has their own unique patterns of learning.
- Successful instructional practices are founded on evidence-based research, tempered by experience.
- Universal design¹² and differentiated instruction¹³ are effective and interconnected means of meeting the learning or productivity needs of any group of students.
- Classroom teachers are the key educators for a student's literacy and numeracy development.
- Classroom teachers need the support of the larger community to create a learning environment that supports students with special education needs.
- Fairness is not sameness.

In any given classroom, students may demonstrate a wide range of strengths and needs. Teachers plan programs that are attuned to this diversity and use an integrated process of assessment and instruction that responds to the unique strengths and needs of each student. An approach that combines principles of universal design and differentiated instruction enables educators to provide personalized, precise teaching and learning experiences for all students.

In planning health and physical education courses for students with special education needs, teachers should begin by examining both the curriculum expectations for the

12. The goal of Universal Design for Learning (UDL) is to create a learning environment that is open and accessible to all students, regardless of age, skills, or situation. Instruction based on principles of universal design is flexible and supportive, can be adjusted to meet different student needs, and enables all students to access the curriculum as fully as possible.

13. Differentiated instruction is effective instruction that shapes each student's learning experience in response to their particular learning preferences, interests, and readiness to learn.

student’s appropriate grade level and the student’s particular strengths and learning needs to determine which of the following options is appropriate for the student:

- no accommodations¹⁴ or modified expectations; or
- accommodations only; or
- modified expectations, with the possibility of accommodations; or
- alternative expectations, which are not derived from the curriculum expectations for a grade and which constitute alternative programs.

If the student requires either accommodations or modified expectations, or both, the relevant information, as described in the following paragraphs, must be recorded in their Individual Education Plan (IEP). More detailed information about planning programs for students with special education needs, including students who require alternative programs,¹⁵ can be found in *Special Education in Ontario, Kindergarten to Grade 12: Policy and Resource Guide, 2017 (Draft)* (referred to hereafter as *Special Education in Ontario, 2017*). For a detailed discussion of the ministry’s requirements for IEPs, see Part E of *Special Education in Ontario*.

Students Requiring Accommodations Only

Some students with special education needs are able, with certain accommodations, to participate in the regular curriculum and to demonstrate learning independently. Accommodations allow the student with special education needs to access the curriculum without any changes to the grade-level expectations. The accommodations required to facilitate the student’s learning must be identified in the student’s IEP (*Special Education in Ontario, 2017*, p. E38). A student’s IEP is likely to reflect the same accommodations for many, or all, subject areas.

Providing accommodations to students with special education needs should be the first option considered in program planning. Instruction based on principles of universal design and differentiated instruction focuses on the provision of accommodations to meet the diverse needs of learners.

There are three types of accommodations:

- *Instructional accommodations* are changes in teaching strategies, including styles of presentation, methods of organization, or use of technology and multimedia. Some examples include the use of graphic organizers, photocopied notes, adaptive equipment, or assistive software.
- *Environmental accommodations* are changes that the student may require in the classroom and/or school environment, such as preferential seating or special lighting.

14. “Accommodations” refers to individualized teaching and assessment strategies, human supports, and/or individualized equipment (see *Growing Success: Assessment, Evaluation, and Reporting in Ontario Schools, First Edition, Covering Grades 1 to 12, 2010*, p. 72).

15. Alternative programs are identified on the IEP by the term “alternative (ALT)”.

- *Assessment accommodations* are changes in assessment procedures that enable the student to demonstrate their learning, such as allowing additional time to complete tests or assignments or permitting oral responses to test questions (See page E39 of *Special Education in Ontario, 2017*, for more examples.)

If a student requires “accommodations only” in health and physical education courses, assessment and evaluation of their achievement will be based on the regular grade-level curriculum expectations and the achievement levels outlined in this document. The IEP box on the student’s progress report card and provincial report card will not be checked, and no information on the provision of accommodations will be included.

Students Requiring Modified Expectations

In health and physical education, modified expectations for most students with special education needs will be based on the regular grade-level expectations, with an increase or decrease in the number and/or complexity of expectations. Modification may also include the use of expectations at a different grade level. Modified expectations must represent specific, realistic, observable, and measurable goals, and must describe specific knowledge and/or skills that the student can demonstrate independently, given the appropriate assessment accommodations.

It is important to monitor, and to reflect clearly in the student’s IEP, the extent to which expectations have been modified. Modified expectations must indicate the knowledge and/or skills that the student is expected to demonstrate and that will be assessed in each reporting period (*Special Education in Ontario, 2017*, p. E27). Modified expectations should be expressed in such a way that the student and parents can understand not only exactly what the student is expected to know or be able to demonstrate independently, but also the basis on which the student’s performance will be evaluated, resulting in a grade or mark that is recorded on the progress report card and the Provincial Report Card. The student’s learning expectations must be reviewed in relation to the student’s progress at least once every reporting period, and must be updated as necessary (*Special Education in Ontario, 2017*, p. E28).

If a student requires modified expectations in health and physical education, assessment and evaluation of their achievement will be based on the learning expectations identified in the IEP and on the achievement levels outlined in this document. On the progress report card and the provincial report card, the IEP box must be checked for any subject in which the student requires modified expectations, and, on the provincial report card, the appropriate statement from *Growing Success: Assessment, Evaluation, and Reporting in Ontario Schools, First Edition, Covering Grades 1 to 12, 2010*, page 61, must be inserted. The teacher’s comments should include relevant information on the student’s demonstrated learning of the modified expectations, as well as next steps for the student’s learning in the subject.

Guidelines for Meeting Special Needs in Health and Physical Education

The following general guidelines can help teachers ensure that students with special education needs are able to participate as fully as possible in health and physical education activities:

- Focus instruction on what the student is able to do rather than on their disability or special education needs.
- Consult with the student about their needs and about choosing strategies that will help them feel comfortable and included.
- Approach each situation on an individual basis, in consultation with the special education teacher and/or support systems and agencies, making individual adaptations in response to the student's needs, and requirements outlined in the IEP.
- Make adjustments only when necessary and consider adjustments to be temporary and fluid. Continue to make accommodations and modifications as needed.
- Break down new skills and focus on building each skill in a structured progression.
- Be fair to all participants and avoid drawing attention to accommodations or modifications that are provided for individual students.
- Make sure appropriate equipment is available, and use specialized equipment, such as balls of appropriate sizes, colours, weights, and/or textures, when necessary.
- Adjust the rules of activities to increase students' chances of success while retaining a suitable level of challenge (e.g., by increasing the number of tries/attempts allowed, making a target bigger or bringing it closer, adjusting the size of the playing area, varying the tempo of the music, lengthening or shortening the playing time).
- Give verbal cues or prompts.
- Have a partner provide assistance.
- Consider what accommodations, adjustments, or special guidelines may be required to assist students in understanding social rules and codes of conduct in a variety of spaces, and in coping with change room routines, transitions between activities, and moving to and from the gymnasium.

Depending on the special education needs of the students, some additional considerations may be relevant for their instruction in health education. These considerations may apply to all health topics, but are particularly relevant to human development and sexual health. Some students with intellectual and physical disabilities or other challenges may be at greater risk of exploitation and abuse, and some may not have experienced acknowledgment of their healthy sexuality or their right to enjoy their sexuality. These students may also have had fewer formal and informal opportunities to participate in sexual health education. Teachers need to ensure that these students' privacy and dignity are protected, and that the resources used are appropriate to their physical, cognitive, social, and emotional development and needs. Different kinds of accommodations and approaches will be required for different students, but it is important to ensure that all students have access to information and support regarding their sexual health.

Some students with special education needs may have difficulty with abstract thinking, including thinking about the consequences of their behaviour or the meaning of consent, and with understanding the boundaries between private and public with respect to behaviour or their own bodies. When teaching students with special education needs about sexual health, it is important to teach the information in a variety of ways and to provide ample opportunity for information to be repeated and for skills such as refusal skills to be practised and reinforced. Examples need to be concrete. Students need to be taught about their right to refuse and about ways of showing affection appropriately and recognizing and respecting consent.

Program Considerations for English Language Learners

Ontario schools have some of the most multilingual student populations in the world. The first language of approximately 26 per cent of the students in Ontario's English-language schools is a language other than English. In addition, some students use varieties of English – also referred to as dialects – that differ significantly from the English required for success in Ontario schools. Many English language learners were born in Canada and have been raised in families and communities in which languages other than English, or varieties of English that differ from the language used in the classroom, are spoken. Other English language learners arrive in Ontario as newcomers from other countries; they may have experience of highly sophisticated educational systems, or they may have come from regions where access to formal schooling was limited.

When they start school in Ontario, many of these students are entering a new linguistic and cultural environment. All teachers share in the responsibility for these students' English-language development.

English language learners (students who are learning English as a second or additional language in English-language schools) bring a rich diversity of background knowledge and experience to the classroom. These students' linguistic and cultural backgrounds not only support their learning in their new environment but also become a cultural asset in the classroom community. Teachers will find positive ways to incorporate this diversity into their instructional programs and into the classroom environment.

Most English language learners in Ontario schools have an age-appropriate proficiency in their first language. Although they need frequent opportunities to use English at school, there are important educational, emotional, and social benefits associated with continued development of their first language while they are learning English. Teachers need to encourage parents to continue to use their own language at home in rich and varied ways as a foundation for language and literacy development in English. It is also important for teachers to find opportunities to bring students' languages into the classroom, using parents and community members as a resource.

During their first few years in Ontario schools, English language learners may receive support through one of two distinct programs from teachers who specialize in meeting their language-learning needs:

English as a Second Language (ESL) programs are for students born in Canada or newcomers whose first language is a language other than English, or is a variety of English significantly different from that used for instruction in Ontario schools.

English Literacy Development (ELD) programs are primarily for newcomers whose first language is a language other than English, or is a variety of English significantly different from that used for instruction in Ontario schools, and who arrive with significant gaps in their education. These students generally come from countries where access to education is limited or where there are limited opportunities to develop language and literacy skills in any language. Some First Nations, Métis, or Inuit students from remote communities in Ontario may also have had limited opportunities for formal schooling, and they also may benefit from ELD instruction.

In planning programs for students with linguistic backgrounds other than English, teachers need to recognize the importance of the orientation process, understanding that every learner needs to adjust to the new social environment and language in a unique way and at an individual pace. For example, students who are in an early stage of English-language acquisition may go through a “silent period” during which they closely observe the interactions and physical surroundings of their new learning environment. They may use body language rather than speech or they may use their first language until they have gained enough proficiency in English to feel confident of their interpretations and responses. Students thrive in a safe, supportive, and welcoming environment that nurtures their self-confidence while they are receiving focused literacy instruction. When they are ready to participate, in paired, small-group, or whole-class activities, some students will begin by using a single word or phrase to communicate a thought, while others will speak quite fluently.

In a supportive learning environment, most students will develop oral language proficiency quite quickly. Teachers can sometimes be misled by the high degree of oral proficiency demonstrated by many English language learners in their use of everyday English and may mistakenly conclude that these students are equally proficient in their use of academic English. Most English language learners who have developed oral proficiency in everyday English will nevertheless require instructional scaffolding to meet curriculum expectations. Research has shown that it takes five to seven years for most English language learners to catch up to their English-speaking peers in their ability to use English for academic purposes.

Responsibility for students’ English-language development is shared by the classroom teacher, the ESL/ELD teacher (where available), and other school staff. Volunteers and peers may also be helpful in supporting English language learners in the classroom.

Teachers must adapt the instructional program in order to facilitate the success of these students in their classrooms. Appropriate adaptations include:

- modification of some or all of the subject expectations so that they are challenging but attainable for the learner at their present level of English proficiency, given the necessary support from the teacher;
- use of a variety of instructional strategies (e.g., modelling; use of music, movement, and gestures; open-ended activities; extensive use of visual cues, images, diagrams; visual representations of key ideas; graphic organizers; scaffolding; pre-teaching of key vocabulary; peer tutoring; strategic use of students' first languages);
- use of a variety of learning resources (e.g., simplified text, illustrated guides or diagrams that show how to use equipment or perform skills, word walls with vocabulary specific to health and physical education, food guides and other health resources available in languages that students speak at home, bilingual dictionaries, visual material, displays; music, dances, games, and materials and activities that reflect cultural diversity);
- use of assessment accommodations (e.g., provision of extra time; use of interviews and oral presentations; demonstration of learning through participation in movement activities, songs, or chants; use of portfolios, demonstrations, visual representations or models, or tasks requiring completion of graphic organizers or cloze sentences instead of essay questions and other assessment tasks that depend heavily on proficiency in English).

Teachers need to adapt the program for English language learners as they acquire English proficiency. For students in the early stages of language acquisition, teachers need to modify the curriculum expectations in some or all curriculum areas. Most English language learners require accommodations for an extended period, long after they have achieved proficiency in everyday English.

When curriculum expectations are modified in order to meet the language-learning needs of English language learners, assessment and evaluation will be based on the documented modified expectations. Teachers will check the ESL/ELD box on the progress report card and the provincial report card only when modifications have been made to curriculum expectations to address the language needs of English language learners (the box should *not* be checked to indicate simply that they are participating in ESL/ELD programs or if they are only receiving accommodations). There is no requirement for a statement to be added to the "Comments" section of the report cards when the ESL/ELD box is checked.

Although the degree of program adaptation required will decrease over time, students who are no longer receiving ESL or ELD support may still need some program adaptations to be successful.

For further information on supporting English language learners, refer to the following documents:

- *Supporting English Language Learners, Grades 1 to 8: A Practical Guide for Ontario Educators, 2008*

- *Supporting English Language Learners with Limited Prior Schooling: A Practical Guide for Ontario Educators, Grades 3 to 12, 2008*
- *English Language Learners – ESL and ELD Programs and Services: Policies and Procedures for Ontario Elementary and Secondary Schools, Kindergarten to Grade 12, 2007*
- *Many Roots, Many Voices: Supporting English Language Learners in Every Classroom, 2005*

Environmental Education and Health and Physical Education

Ontario’s education system will prepare students with the knowledge, skills, perspectives, and practices they need to be environmentally responsible citizens. Students will understand our fundamental connections to each other and to the world around us through our relationship to food, water, energy, air, and land, and our interaction with all living things. The education system will provide opportunities within the classroom and the community for students to engage in actions that deepen this understanding.

Acting Today, Shaping Tomorrow: A Policy Framework for Environmental Education in Ontario Schools, 2009, p. 6

Acting Today, Shaping Tomorrow: A Policy Framework for Environmental Education in Ontario Schools outlines an approach to environmental education that recognizes the needs of all Ontario students and promotes environmental responsibility in the operations of all levels of the education system.

The three goals outlined in *Acting Today, Shaping Tomorrow* are organized around the themes of teaching and learning, student engagement and community connections, and environmental leadership. The first goal is to promote learning about environmental issues and solutions. The second is to engage students in practising and promoting environmental stewardship, both in the school and in the community. The third stresses the importance of having organizations and individuals within the education system provide leadership by implementing and promoting responsible environmental practices throughout the system so that staff, parents, community members, and students become dedicated to living more sustainably.

Health and physical education offers many opportunities for accomplishing these goals. The learning environments for health and physical education include the school grounds, fields and trails in the vicinity of the school, and various other outdoor venues. Teaching students to appreciate and respect the environment is an integral part of being active in these spaces. Appreciating the value of fresh air and outdoor spaces, understanding the environmental benefits of healthy practices such as active transportation and the environmental implications of various food choices, being aware of the impact of using trails, and understanding the health risks associated with environmental factors such as sun exposure and air pollution are all components of environmental education that are integrated with learning in health and physical education. To facilitate these connections, health and physical education teachers are encouraged to take students out of the classroom

and into the world beyond the school to help students observe, explore, and appreciate nature as they discover the benefits of being active outdoors.

The development of social-emotional learning skills, which are integrated throughout the health and physical education curriculum, support environmental education. As students learn more about themselves through the development of self-awareness and self-confidence, learn to work effectively and respectfully with others through the development of relationship skills, and acquire the capacity for systems thinking through the development of critical and creative thinking skills, they increase their capacity to make connections with the world around them and to become environmentally responsible citizens. The skills of recognizing sources of stress, coping with challenges, and building positive motivation and perseverance also can be applied and linked to environmental education.

A resource document – *The Ontario Curriculum, Grades 1–8, and The Kindergarten Program: Environmental Education, Scope and Sequence of Expectations, 2017 Edition* – has been prepared to assist teachers in planning lessons that integrate environmental education with other subject areas. It identifies curriculum expectations and related examples and prompts in subjects across the Ontario curriculum that provide opportunities for student learning “in, about, and/or for” the environment. Teachers can use this document to plan lessons that relate explicitly to the environment, or they can draw on it for opportunities to use the environment as the *context for learning*. The document can also be used to make curriculum connections to school-wide environmental initiatives.

Healthy Relationships and Health and Physical Education

Every student is entitled to learn in a safe, caring environment, free from discrimination, violence, and harassment. Research has shown that students learn and achieve better in such environments. A safe and supportive social environment in a school is founded on healthy relationships – the relationships between students, between students and adults, and between adults. Healthy relationships are based on respect, caring, empathy, trust, and dignity, and thrive in an environment in which diversity is honoured and accepted. Healthy relationships do not tolerate abusive, controlling, violent, bullying/harassing, or other inappropriate behaviours. To experience themselves as valued and connected members of an inclusive social environment, students need to be involved in healthy relationships with their peers, teachers, and other members of the school community.

Several provincial policies, programs, and initiatives, including **Foundations for a Healthy School**, the **Equity and Inclusive Education strategy**, and **Safe Schools**, are designed to foster caring and safe learning environments in the context of healthy and inclusive schools. These policies and initiatives promote positive learning and teaching environments that support the development of healthy relationships, encourage academic achievement, and help all students reach their full potential.

In its 2008 report, *Shaping a Culture of Respect in Our Schools: Promoting Safe and Healthy Relationships*, the Safe Schools Action Team confirmed “that the most effective

way to enable all students to learn about healthy and respectful relationships is through the school curriculum” (p. 11). Educators can promote this learning in a variety of ways. For example, by giving students opportunities to apply critical thinking and problem-solving strategies and to address issues through group discussions, role play, case study analysis, and other means, they can help them develop and practise the skills they need for building healthy relationships. Co-curricular activities such as clubs, intramural and interschool sports, and groups such as gay-straight alliances provide additional opportunities for the kind of interaction that helps students build healthy relationships. Educators can also have a positive influence on students by modelling the behaviours, values, and skills that are needed to develop and sustain healthy relationships, and by taking advantage of “teachable moments” to address immediate relationship issues that may arise among students.

In health education, the study of healthy relationships includes learning about the effects and the prevention of all types of violence and bullying/harassment, whether face-to-face or online. Learning focuses on the prevention of behaviours that reflect sexism, racism, classism, ableism, sizeism, heterosexism, and homophobia and transphobia. Instances of harassment, such as teasing related to weight, appearance, identity, or ability, need to be addressed and can be related directly to concepts that students are learning. As teachers strive to create an inclusive and respectful learning environment, it is also important that they examine and address their own biases.

The skills that are needed to build and support healthy relationships can be found throughout the health and physical education curriculum. Expectations that focus on the characteristics of healthy relationships and on ways of responding to challenges in relationships introduce students, in age-appropriate ways, to the knowledge and skills they will need to maintain healthy relationships throughout their lives.

In particular, students need to develop and practise skills to support their ability to relate positively to others. The social-emotional learning skills component of the health and physical education curriculum provides the basis for developing the self-awareness, communication, relationship, and social skills that are necessary for forming and maintaining healthy relationships. Physical activities in the gymnasium and other spaces and health education discussions in the classroom provide numerous and varied opportunities for students to interact and refine these skills. In addition, students improve their ability to contribute to healthy relationships as they develop self-awareness skills, the ability to identify and manage emotions, cope with stress and challenges, persevere, and develop critical and creative thinking skills in all strands of the health and physical education curriculum.

Equity and Inclusive Education in Health and Physical Education

The **Ontario Equity and Inclusive Education strategy** focuses on respecting diversity, promoting inclusive education, and identifying and eliminating discriminatory biases, systemic barriers, and power dynamics that limit the ability of students to learn, grow, and contribute to society. Antidiscrimination education continues to be an important and integral component of the strategy.

In an environment based on the principles of inclusive education, all students, parents, caregivers, and other members of the school community – regardless of ancestry, culture, ethnicity, sex, physical or intellectual ability, race, religion, creed, gender identity, gender expression, gender, sexual orientation, socio-economic status, or other factors – are welcomed, included, treated fairly, and respected. Diversity is valued when all members of the school community feel safe, welcomed, and accepted. Every student is supported and inspired to succeed in a culture of high expectations for learning. In an inclusive education system, all students see themselves reflected in the curriculum, their physical surroundings, and the broader environment, so that they can feel engaged in and empowered by their learning experiences.

The implementation of antidiscrimination principles in education influences all aspects of school life. It promotes a school climate that encourages all students to work to high levels of achievement, affirms the worth of all students, and helps students strengthen their sense of identity and develop a positive self-image. It encourages staff and students alike to value and show respect for diversity in the school and the broader society. Antidiscrimination education promotes fairness, healthy relationships, and active, responsible citizenship.

Teachers can give students a variety of opportunities to learn about diversity and diverse perspectives. By drawing attention to the contributions of women, the perspectives of various ethnocultural, religious, and racialized communities, and the beliefs and practices of First Nations, Métis, and Inuit peoples, teachers enable students from a wide range of backgrounds to see themselves reflected in the curriculum. It is essential that learning activities and materials used to support the curriculum reflect the diversity of Ontario society. In addition, teachers should differentiate instruction and assessment strategies to take into account the background and experiences, as well as the interests, aptitudes, and learning needs, of all students.

Interactions between the school and the community should reflect the diversity of both the local community and the broader society. A variety of strategies can be used to communicate with and engage parents and members of diverse communities, and to encourage their participation in and support for school activities, programs, and events. Family and community members should be invited to take part in teacher interviews, the school council, and the parent involvement committee, and to attend and support activities such as plays, concerts, co-curricular activities and events, and various special events at the school. The school should be ready to receive and welcome all families and community members who attend school-based meetings and functions. Schools may consider offering assistance with childcare or making alternative scheduling arrangements in order to help caregivers

participate. Special outreach strategies and encouragement may be needed to draw in the parents of English language learners and First Nation, Métis, or Inuit students, and to make them feel more comfortable in their interactions with the school.

In implementing the active living and movement competence strands of the health and physical education curriculum, teachers should ensure that students are exposed to a wide range of activities and skills that appeal to all students. Sports and games should be balanced with small-group, individual, and recreation activities, including exercises for physical fitness and activities for stress reduction, such as simple yoga techniques.

Teachers must also provide accommodation for students from various faith communities, consistent with the board's religious accommodation guideline – for example, in some cases, segregated swimming classes for male and female students and same-sex partnering for small-group activities might be required – and be aware of clothing restrictions that might exist for some students. In addition, teachers may need to provide accommodations for students who are fasting for religious reasons.

The physical activity component of the curriculum should also take into account the range of student abilities and the diversity of their backgrounds and needs. Teachers should familiarize themselves with strategies that would allow them to involve all students in an appropriate way. Introducing games and activities that have roots in a particular community, for example, can make the learning environment more relevant for students from that community as well as promote cultural awareness and respect among all students. Lacrosse, with its origins in games played by the Haudenosaunee and other First Nations, is an example of a culturally relevant activity that can also appeal to students from all backgrounds. When including these kinds of activities in the program, teachers should seek out culturally relevant and appropriate resources that make the connection to the cultural heritage explicit, in order to build understanding, awareness, and respect.

The Healthy Living expectations contained in this document provide teachers with the opportunity to address a number of key issues related to equity, antidiscrimination, and inclusion. Among these are gender issues in the area of healthy sexuality, including the existence of differing norms for sexual behaviour and different risks associated with unprotected sexual activity. In addition, food choices and eating habits may be influenced by personal beliefs or by religious and cultural traditions (e.g., vegetarianism, religious fasting, traditional foods), and these should be addressed in instruction relating to healthy eating. The issue of body image and the detrimental effects of homogenized standards of beauty and physical appearance promoted in the media also have implications for equity and inclusiveness that may affect students. The use of steroids and drugs to enhance athletic performance and appearance, and harmful diets to achieve impossible standards of beauty, should be examined.

Financial Literacy in Health and Physical Education

The document *A Sound Investment: Financial Literacy Education in Ontario Schools, 2010* (p. 4) sets out the vision that:

Ontario students will have the skills and knowledge to take responsibility for managing their personal financial well-being with confidence, competence, and a compassionate awareness of the world around them.

There is a growing recognition that the education system has a vital role to play in preparing young people to take their place as informed, engaged, and knowledgeable citizens in the global economy. Financial literacy education can provide the preparation Ontario students need to make informed decisions and choices in a complex and fast-changing financial world.

Because making informed decisions about economic and financial matters has become an increasingly complex undertaking in the modern world, students need to build knowledge and skills in a wide variety of areas. In addition to learning about the specifics of saving, spending, borrowing, and investing, students need to develop broader skills in problem solving, inquiry, decision making, critical thinking, and critical literacy related to financial issues, so that they can analyse and manage the risks that accompany various financial choices. They also need to develop an understanding of world economic forces and the effects of those forces at the local, national, and global level. In order to make wise choices, they will need to understand how such forces affect their own and their families' economic and financial circumstances. Finally, to become responsible citizens in the global economy, they will need to understand the social, environmental, and ethical implications of their own choices as consumers. For all of these reasons, financial literacy is an essential component of the education of Ontario students – one that can help ensure that Ontarians will continue to prosper in the future.

Health and physical education is linked to financial literacy education in a number of ways. The Healthy Living expectations provide opportunities for the exploration of financial issues in connection with a variety of health topics, such as considering how affordability can impact healthy eating choices, and examining the economic costs associated with substance use. In making decisions related to achieving their personal fitness goals, students consider financial factors such as the affordability of different physical activity options. They will also have opportunities to develop consumer awareness as they consider choices that affect their health and well-being. The exploration of such issues involves the application of the social-emotional learning skills component of the program. The awareness of their own identity and sense of self, the skills for positive motivation, perseverance, and stress management, and the relationship and thinking skills that students develop in the program may support them in making sound and informed financial decisions throughout their lives.

A resource document – *The Ontario Curriculum, Grades 4–8: Financial Literacy Scope and Sequence of Expectations, 2016* – has been prepared to assist teachers in bringing financial literacy into the classroom. This document identifies the curriculum expectations and related examples and prompts, in various subjects from Grade 4 to Grade 8, that provide opportunities through which students can acquire skills and knowledge related to financial literacy. The document can also be used to make curriculum connections to school-wide initiatives that support financial literacy.

Literacy, Inquiry Skills, and Numeracy in Health and Physical Education

A vision of literacy for all learners in Ontario schools might be described as follows:

All students will be equipped with the literacy skills necessary to be critical and creative thinkers, effective meaning makers and communicators, collaborative co-learners, and innovative problem solvers. These are the skills that will enable them to achieve personal, career, and societal goals.

Students, individually and in collaboration with others, develop skills in three areas, as follows:

- *Thinking*: Students access, manage, create, and evaluate information as they think imaginatively and critically in order to solve problems and make decisions, including those related to issues of fairness, equity, and social justice.
- *Expression*: Students use language and images in rich and varied forms as they read, write, listen, speak, view, represent, discuss, and think critically about ideas.
- *Reflection*: Students apply metacognitive knowledge and skills to monitor their own thinking and learning, and in the process, develop self-advocacy skills, a sense of self-efficacy, and an interest in lifelong learning.

As this vision description suggests, literacy involves a range of critical-thinking skills and is essential for learning across the curriculum. Literacy instruction takes different forms of emphasis in different subjects, but in all subjects, literacy needs to be explicitly taught. Literacy, mathematical literacy, and inquiry and research skills are critical to students' success in all subjects of the curriculum and in all areas of their lives.

Providing a solid foundation of language, communication, and thinking skills that enable students to develop the skills, knowledge, and attitudes they need to make healthy decisions with competence and confidence is at the heart of both health and physical literacy.

In the health and physical education program, literacy includes researching, discussing, listening, viewing media, communicating with words and with the body, connecting illustrations and text, role playing to create meaning through stories, and – especially important for kinesthetic learners – communicating through physical activity. Students use language to record their observations, to describe their critical analyses in both informal and formal contexts, and to present their findings in oral, written, graphic, and multimedia forms.

Understanding in health and physical education requires the understanding and use of specialized terminology. In all health and physical education programs, students are required to use appropriate and correct terminology and are encouraged to use language with care and precision in order to communicate effectively.

Fostering students' literacy skills is an important part of the teacher's role in health and physical education. In addition to developing reading, writing, and media literacy skills, students in health and physical education need to be able to communicate orally by listening and speaking and to communicate physically through body language. (Oral communication skills are traditionally thought to include using and interpreting body language. In the health and physical education curriculum, this skill is broadened into its own category of "physical communication skills".) Developing these skills will help students to acquire other learning in health and physical education and to communicate their understanding of what they have learned.

Physical communication skills are fundamental to the development of physical literacy. Students learn to understand how their bodies move and how to use their bodies to communicate their intended movements. They learn to adjust their movements through self-correction and peer feedback in order to improve the efficiency or effectiveness of the action. As students develop movement skills, they are also developing social-emotional skills: they learn to use their bodies to express their feelings and share information and they also learn to interpret body language for a variety of purposes, such as recognizing signs of danger and resistance in the body language of others, recognizing physical signs of emotions during conflict resolution, and reading body cues in personal interactions or game situations. To develop their physical communication skills, students need to observe movement and to practise moving and expressing themselves through their bodies. Physical education activities and active and experiential learning in health education provide students with numerous opportunities for hands-on practice and observation of the physical communication skills that allow them to send, interpret, and receive information without saying a word.

Although physical communication skills are an important component of health and physical education, oral communication skills are also a key part of the development of health and physical literacy and are essential for thinking and learning. Through purposeful talk, students not only learn to communicate information but also to explore and to understand ideas and concepts, identify and solve problems, organize their experience and knowledge, and express and clarify their thoughts, feelings, and opinions. To develop their oral communication skills, students need numerous opportunities to talk about a range of topics in health and physical education. These opportunities are available throughout the curriculum. The expectations in all strands give students a chance to engage in brainstorming, reporting, and other oral activities to identify what they know about a new topic, discuss strategies for solving a problem, present and defend ideas or debate issues, and offer critiques or feedback on work, skill demonstrations, or opinions expressed by their peers.

Whether students are talking, writing, or showing their understanding in health and physical education, teachers can prompt them, through questioning, to explain the reasoning that they have applied to a particular solution or strategy, or to reflect on what they have done. Because rich, open-ended questioning is the starting point for effective inquiry or for addressing a problem, it is important that teachers model this style of questioning for their students and allow students multiple opportunities to ask, and find answers to, their own questions.

When reading texts related to health and physical education, students use a different set of skills than they do when reading fiction. They need to understand vocabulary and terminology that are unique to health and physical education, and must be able to interpret symbols, charts, and diagrams. To help students construct meaning, it is essential that teachers continue to help students develop their reading skills and strategies when they are reading to learn in health and physical education. In addition, there are many works of fiction that can be used to illustrate key concepts in health and physical education, such as resilience, mental health, healthy living, and active living. Teachers of Language could assign works of fiction that model concepts from the health and physical education curriculum in order to provide opportunities for meaningful discussion about healthy, active living.

Critical Thinking and Critical Literacy

Critical thinking is the process of thinking about ideas or situations in order to understand them fully, identify their implications, make a judgement, and/or guide decision making. Critical thinking includes skills such as questioning, predicting, analysing, synthesizing, examining opinions, identifying values and issues, detecting bias, and distinguishing between alternatives. Students who are taught these skills become critical thinkers who can move beyond superficial conclusions to a deeper understanding of the issues they are examining. They are able to engage in an inquiry process in which they explore complex and multifaceted issues, and questions for which there may be no clear-cut answers.

Students use critical-thinking skills in health and physical education when they assess, analyse, and/or evaluate the impact of something and when they form an opinion and support that opinion with a rationale. In order to think critically, students need to ask themselves effective questions in order to: interpret information; analyse situations; detect bias in their sources; determine why a source might express a particular bias; examine the opinions, perspectives, and values of various groups and individuals; look for implied meaning; and use the information gathered to form a personal opinion or stance, or a personal plan of action with regard to making a difference. In the health and physical education curriculum, the social-emotional learning skills expectations address both critical thinking and creative thinking skills, and students have opportunities to apply these skills in a variety of contexts and situations across the curriculum.

Students approach critical thinking in various ways. Some students find it helpful to discuss their thinking, asking questions and exploring ideas. Other students may take time to

observe a situation or consider a text carefully before commenting; they may prefer not to ask questions or express their thoughts orally while they are thinking.

Critical literacy is the term used to refer to a particular aspect of critical thinking. Critical literacy involves looking beyond the literal meaning of a text to determine what is present and what is missing, in order to analyse and evaluate the text's complete meaning and the author's intent. Critical literacy is concerned with issues related to fairness, equity, and social justice. Critically literate students adopt a critical stance, asking what view of the world the text advances and whether they find this view acceptable, who benefits from the text, and how the reader is influenced.

Critically literate students understand that meaning is not found in texts in isolation. People make sense of a text, or determine what a text means, in a variety of ways. Students therefore need to take into account: points of view (e.g., those of people from various cultures); context (e.g., the beliefs and practices of the time and place in which a text was created and those in which it is being read or viewed); the background of the person who is interacting with the text (e.g., upbringing, friends, communities, education, experiences); intertextuality (e.g., information that a reader or viewer brings to a text from other texts experienced previously); gaps in the text (e.g., information that is left out and that the reader or viewer must fill in); and silences in the text (e.g., the absence of the voices of certain people or groups).

In health and physical education students who are critically literate are able, for example, to actively analyse media messages and determine possible motives and underlying messages. They are able to determine what biases might be contained in texts, media, and resource material and why that might be, how the content of these materials might be determined and by whom, and whose perspectives might have been left out and why. Only then are students equipped to produce their own interpretation of an issue. Opportunities should be provided for students to engage in a critical discussion of "texts", including books and textbooks, television programs, movies, web pages, advertising, music, gestures, oral texts, and other forms of expression. Such discussions empower students to understand the impact on members of society that was intended by the text's creators. Language and communication are never neutral: they are used to inform, entertain, persuade, and manipulate.

The literacy skill of *metacognition* supports students' ability to think critically through reflection on their own thought processes. Acquiring and using metacognitive skills has emerged as a powerful approach for promoting a focus on thinking skills in literacy and across all disciplines, and for empowering students with the skills needed to monitor their own learning. As they reflect on their strengths and needs, students are encouraged to advocate for themselves to get the support they need in order to achieve their goals. In health and physical education, metacognitive skills are developed in a number of ways. For example, the social-emotional learning skills expectations include the development of skills for building self-awareness, identifying and managing emotions, managing stress, coping, and staying positive and motivated. As students develop these skills, they learn

to recognize their strengths and needs, develop coping strategies, monitor their progress, and develop plans for making healthier choices and for healthy living. Similarly, students reflect on technique and monitor personal progress to develop and refine movement skills, and monitor personal progress to help improve personal fitness.

Inquiry Skills

Inquiry and research are at the heart of learning in all subject areas. In health and physical education, students are encouraged to develop their ability to ask questions and to explore a variety of possible answers to those questions. Teachers can support this process through their own use of effective questioning techniques and by planning instruction to support inquiry (particularly in the context of experiential learning). Different kinds of questions that can be used to stimulate thinking include the following:

- *simple skill-related questions*, which elicit purposeful feedback and develop skill awareness (e.g., How was your head positioned when you landed from the jump? What information should you be looking for when reading a food label?)
- *analytical questions*, which develop decision-making and problem-solving skills with respect to game or activity strategy or a personal health choice by asking how or why (e.g., How can you and your partner work together in order to keep possession of the ball longer? How would you go about solving a problem in a relationship? What steps do you need to take?)
- *review questions*, which develop thinking skills related to reflecting on an activity or on the development of a skill and devising ways to improve the activity or approach (e.g., What could you change in this activity so that everyone has more of a chance to be involved in the play? What did you like about that activity? What skills are you developing by playing this game? What might you have done differently to reduce the risk of injury or harm?)

The ability to respond to such questions helps students build their confidence and competence as they develop physical and health literacy. The teacher's questioning also provides students with a model for developing their own habits of inquiry.

As they advance through the grades, students acquire the skills to locate and gather relevant information from a wide range of print and electronic sources, including books, periodicals, dictionaries, encyclopedias, interviews, videos, and relevant Internet sources. The questioning they practised in the early grades becomes more sophisticated as they learn that all sources of information have a particular point of view and that the recipient of the information has a responsibility to evaluate it, determine its validity and relevance, and use it in appropriate ways.

The ability to locate, question, and validate information allows a student to become an independent, lifelong learner.

Numeracy Skills

The health and physical education program also builds on, reinforces, and enhances numeracy, including fundamental math skills, particularly in areas involving computation and graphing. For example, calculations and graphing are often used when tracking changes in fitness or when recording food intake in connection with the development of healthy eating plans. Conversely, students' well-being and sense of self-worth and efficacy can be enhanced through learning in the mathematics classroom (see Ontario Ministry of Education, “[Yes, I can! Paying Attention to Well-Being in the Mathematics Classroom](#)”, *Capacity Building K–12*, January 2018).

The Role of the School Library in Health and Physical Education Programs

The school library program can help build and transform students' knowledge in order to support lifelong learning in our information- and knowledge-based society. The school library program supports student success across the health and physical education curriculum by encouraging students to read widely, teaching them to examine and read many forms of text for understanding and enjoyment, and helping them improve their research skills and effectively use information gathered through research.

The school library program enables students to:

- develop a love of reading for learning and for pleasure;
- develop literacy and research skills using non-fiction materials;
- obtain access to programs, resources, and integrated technologies that support all curriculum areas;
- understand and value the role of public library systems as a resource for lifelong learning.

The school library program plays a key role in the development of information literacy and research skills. Teacher-librarians, where available, collaborate with classroom or content-area teachers to design, teach, and provide students with authentic information and research tasks that foster learning, including the ability to:

- access, select, gather, process, critically evaluate, create, and communicate information;
- use the information obtained to explore and investigate issues, solve problems, make decisions, build knowledge, create personal meaning, and enrich their lives;
- communicate their findings to different audiences, using a variety of formats and technologies;
- use information and research with understanding, responsibility, and imagination.

In addition, teacher-librarians can work with teachers of health and physical education to help students:

- develop literacy in using non-print forms, in order to access relevant information, databases, demonstrations, and a variety of performances;
- design inquiry questions for research for health and physical education projects;
- create and produce single-medium or multimedia presentations.

Teachers of health and physical education are also encouraged to collaborate with both local librarians and teacher-librarians in collecting digital, print, and visual resources for projects (e.g., storybooks on a theme or topic to inspire role play in the primary grades; picture books for inspiration, culture-specific image collections, informational and performance videos); helping students access health and physical education information, demonstrations, and performances online and using digital tools; and design inquiry questions for research for health and physical education projects.

In addition to resource materials in the school library, teachers may be able to access collections of copyright-free music in specialized libraries for use in rhythm and movement education and dance. Teachers need to discuss with students the concept of ownership of work and the importance of copyright in all forms of media.

The Role of Information and Communications Technology in Health and Physical Education

Information and communications technology (ICT) provides a range of tools that can significantly extend, diversify, and enrich teachers' instructional strategies and support student learning. ICT tools include multimedia resources, databases, websites, and apps. Tools such as these can help students to collect, organize, and sort the data they gather and to write, edit, and present reports on their findings. ICT can also be used to connect students to other schools, at home and abroad, and to bring the global community into the local classroom.

Whenever appropriate, students should be encouraged to use ICT to support and communicate their learning. Current technologies are useful both as research tools and as creative media. For example, students working individually or in groups can use digital technology (e.g., mobile applications and devices, the Internet) to gain access to health, fitness, or safety information. Mobile or online applications or software can be used to record food choices over a period of time, calculate nutrient intake, maintain a fitness profile, monitor fitness targets, illustrate movement skills, and assist with other tasks that help students achieve healthy living goals. Wearable devices can provide data and feedback to support tracking and monitoring of fitness goals. Students can use apps or interactive software to participate in a range of simulated physical activities and to analyse their individual movement competence. They can use fitness apps and digital recording devices to set and track fitness goals and monitor progress and improvements. In addition, students can use digital devices to design and present multimedia works, to record the process of

creating their dance or movement sequences, to support the development of movement skills, to record role-playing scenarios while practising communication, problem-solving, and decision-making skills related to healthy relationships, and for numerous other purposes.

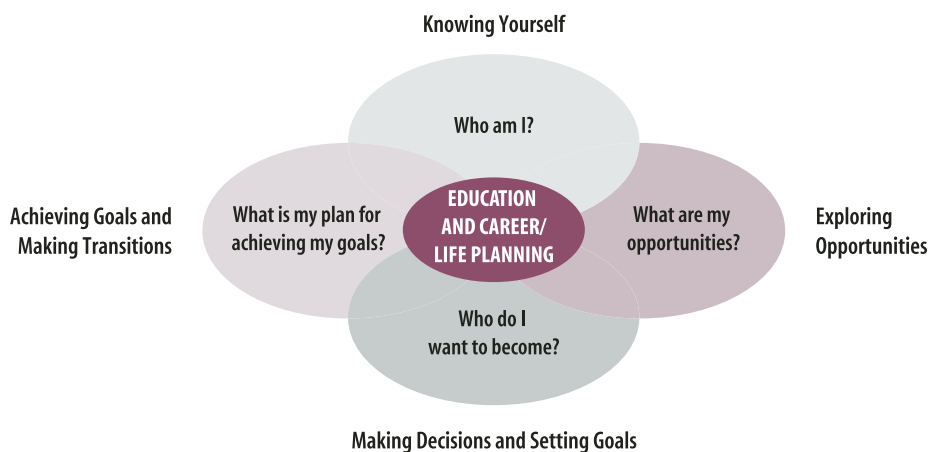
Although the Internet is a powerful learning tool, there are potential risks attached to its use. All students must be made aware of issues related to inaccurate information, Internet privacy, safety, and responsible use, as well as of the potential for abuse of this technology, particularly when it is used in a way that has a negative impact on the school community, or to promote hatred.

Education and Career/Life Planning through the Health and Physical Education Curriculum

The curriculum expectations provide opportunities to relate classroom learning to the education and career/life planning program outlined in *Creating Pathways to Success: An Education and Career/Life Planning Program for Ontario Schools – Policy and Program Requirements, Kindergarten to Grade 12, 2013*. The goals of the Kindergarten to Grade 12 education and career/life planning program are to:

- ensure that all students develop the knowledge and skills they need to make informed education and career/life choices;
- provide classroom and school-wide opportunities for this learning; and
- engage parents and the broader community in the development, implementation, and evaluation of the program, to support students in their learning.

The framework of the program is a four-step inquiry process based on four questions linked to four areas of learning: (1) Knowing Yourself – Who am I?; (2) Exploring Opportunities – What are my opportunities?; (3) Making Decisions and Setting Goals – Who do I want to become?; and (4) Achieving Goals and Making Transitions – What is my plan for achieving my goals?.



Classroom teachers support students in education and career/life planning by providing them with learning opportunities, filtered through the lens of the four inquiry questions, that allow them to reflect upon and apply subject-specific knowledge and skills to work-related situations; explore subject-related education and career/life options; and become competent, self-directed planners who will be prepared for success in school, work, and life. Developing self-awareness (as part of students' development of the social-emotional learning skills) links closely to the question "Who am I?". Social-emotional learning skills expectations that relate to critical and creative thinking support decision making, goal setting, and planning for transitions – all important aspects of career/life planning.

Ethics in the Health and Physical Education Program

The health and physical education curriculum provides varied opportunities for students to learn about ethical issues, explore ethical standards, and demonstrate ethical responsibility. As students learn and apply the principles of fair play – through concepts such as inclusion and respect for all – in a variety of settings and activities, they are developing an understanding of ethics. This understanding deepens as they develop social-emotional learning skills – as they learn about themselves and their interactions with others, and as they practise thinking critically and creatively. The health and physical education program also provides opportunities to explore ethical issues related to topics such as violence in sport, the use of performance-enhancing substances, and the notion of winning at all costs. Similarly, students can explore how sports and physical activity can be used to build community, and they can consider ethical questions related to health promotion and the use of human subjects in research. The website of the [Canadian Centre for Ethics in Sport](#) provides numerous other examples.

Students can also learn and apply citizenship education skills through health and physical education. Educators can consult the Citizenship Education Framework that appears on page 10 of *The Ontario Curriculum: Social Studies, Grades 1 to 6; History and Geography, Grades 7 and 8, 2018* to make relevant connections.

When exploring issues related to health and physical education as part of an inquiry process, students may need to make ethical judgements. Such judgements may be necessary in evaluating evidence and positions on various issues or in drawing conclusions about issues, claims, or events. Teachers may need to help students in determining the factors to consider when making these judgements. In addition, teachers provide support and supervision throughout the inquiry process, helping students become aware of potential ethical concerns and of appropriate ways to address those concerns. Students who are conducting surveys or interviews may need guidance to ensure that they respect the dignity, privacy, and confidentiality of their participants. Teachers also supervise the choice of research topics to ensure that student researchers are not inadvertently exposed to information and/or perspectives for which they are not emotionally or intellectually prepared (e.g., personal interviews that lead to disclosure of abuse).

In all subjects and disciplines, students must have a clear understanding of the issue of plagiarism. In a digital world that allows free access to abundant information, it is easy to copy the words of others and present them as one's own. Students need to be reminded of the ethical issues surrounding plagiarism, and have a clear understanding of the consequences of plagiarizing before they engage in research and writing. The skill of writing in one's own voice, while appropriately acknowledging the work of others, should be explicitly taught to all students in all classes, including health and physical education.

Overview of Grades 1 to 3

Children’s early learning experiences have a profound effect on their later development. The health and physical education program for Grades 1 to 3 therefore focuses on the foundational knowledge and skills that students will need in order to support mental health and well-being, develop physical and health literacy, and acquire the commitment and capacity to lead healthy, active lives. Through participating in health and physical education in the classroom and gymnasium, out of doors, in schoolyards and school gardens, and in the community, students learn to make healthy active living a part of everyday life. The expectations in these grades provide opportunities for students to strengthen their oral language and knowledge of subject-specific vocabulary, their kinesthetic awareness and understanding of movement concepts, their capacity for imagining, pretending, and reflecting, and their higher-order thinking skills. All of this learning builds on the foundation laid in the learning expectations of the Kindergarten program, particularly in the areas (Kindergarten “frames”) of Self-Regulation and Well-Being, which includes learning about healthy active living and its effects on the mind and body, and Belonging and Contributing.

Student Development and Program Implications

Program design and delivery must take into account the physical, cognitive, social, and emotional development of students, and their sense of self, or spirit.* The following descriptions of the developmental characteristics of students in the primary grades are general in nature, and individual student characteristics will vary depending on the child’s age, sex, gender identity, body size, experience, and background.

Physical Domain

Students in the primary grades exhibit a number of developmental characteristics that affect their ability to participate in physical activity. Their large muscle movement is more developed than their small muscle movement, and they are still learning to refine basic motor patterns. Consequently, many students in the primary grades can perform motor skills singly but may have difficulty combining these skills. Although they can master most locomotor activities, their manipulative skills and visual and tracking abilities are still developing. Their stability skills are also developing, and their centre of gravity is generally still high. Muscular endurance is often limited, and there is no significant difference in physical abilities between the sexes.

* For more information about child and youth development, see “Early Learning Framework Full Report” (for children from birth to 8 years of age); *On My Way: A Guide to Support Middle Years Child Development* (for children ages 6 to 12); and *Stepping Stones* (for youth, ages 12 to 25).

Programs at this level should involve students in moderate to vigorous activity and provide opportunities for them to take breaks when they tire. Activities should focus on gross motor skill development before proceeding to fine motor development. Throwing and catching activities, for example, should start with large balls or textured objects that are easy to catch before proceeding to the use of smaller objects. Activities should provide opportunities for all children, regardless of sex, to play together. It is important that students be able to explore a wide range of activities, but they should also have a chance to revisit activities instead of experiencing them only once.

As in all elementary programs, those for the primary grades should offer opportunities for all students to participate fully (e.g., by ensuring that each child has a piece of equipment needed to participate in the activity) and explore a wide range of activities. Equipment and activities should be modified as needed to permit students with a range of developmental needs and physical abilities to take part and allow all children to progress at their own rate. The program should provide opportunities for child-initiated individual expression, and students should be free to use their observations, experiences, and background knowledge when choosing activities and equipment. Activities should promote risk taking in a safe environment.

Cognitive Domain

Children at this age have well-developed imaginations and learn best through play and exploration. They are developing thought processes as well as vocabulary, memory, and concepts of time, weight, and space. Their perceptual abilities are also developing rapidly. They tend to be motivated and excited about learning new skills, but their ability to concentrate on a task varies.

Students in the primary grades generally find it easier to learn when learning experiences are divided into manageable pieces. They require concise instructions, short demonstrations, maximum time to explore and create, and opportunities for repetition and practice. Rules for activities should be simple and set clear boundaries. In addition to learning to follow instructions, students in the primary grades should be challenged to think in more sophisticated ways, and they should be given opportunities to question, integrate, analyse, and apply ideas.

Affective Domain

Most students in the primary grades respond well to positive reinforcement and are also learning to respond to constructive feedback. They tend to be egocentric, as their sense of self is still developing, but they are also beginning to develop interpersonal skills and are learning to share and take turns. They are beginning to develop an understanding of game concepts, but winning and losing can be emotionally challenging for them.

Programs for these students should emphasize participatory and inclusive activities that focus on exploration and creativity rather than on game play that involves winning or losing. The children should be able to explore and play in a safe, cooperative environment. To help

them develop the skills they need to interact positively with others, they should also have multiple opportunities to interact in different ways in small groups.

Focus of Learning in Health and Physical Education for the Primary Division

The expectations for health and physical education build upon the prior knowledge, experience, and skills that students bring to the classroom. This base varies naturally from student to student as a result of different levels of prior exposure to the skills, forms, and experiences of health and physical activity. The diversity of the students' cultural and linguistic backgrounds in Ontario classrooms adds a further dimension to this variability. It is therefore important for instruction and assessment to be differentiated to meet the needs of a wide range of students. Exposure to a broad range of stimuli that reflect diversity is also crucial, with instruction being planned in a way that honours and includes the cultural traditions of students from all groups in the community.

Social-Emotional Learning Skills

Although the social-emotional learning skill expectations remain the same throughout all grades, the approaches and strategies used to help students build these skills vary with the developmental level of the students. In the primary division, students are at early stages of developing their sense of self, while also learning to identify and manage their emotions and feelings. Learning in this division is therefore focused on skills related to self-awareness, identifying and managing emotions, and learning to cope with challenges. At the same time, primary students are also beginning to develop relationship skills and critical and creative thinking. The curriculum provides opportunities for learning beginning relationship skills, including ways to communicate respectfully with others, and basic problem-solving processes.

Active Living Strand

The Active Living strand includes a number of core elements and learning objectives that begin in the primary grades and recur throughout the elementary program. Through physical activity, students begin to learn about the connections between physical and mental health. These include the daily requirement for at least twenty minutes of moderate to vigorous physical activity, an understanding of the benefits of daily physical activity and the factors that contribute to their enjoyment of physical activity, and the development of behaviours that enhance their readiness and ability to take part in the school's physical activity programs. All of these provide a foundation on which to build the habit of being active on a daily basis. Students also learn how to recognize indicators of fitness, improve their cardiorespiratory fitness, and set simple personal fitness goals. Through other expectations, students learn how to introduce more physical activity into their daily lives and how to take responsibility for their own safety and the safety of those around them while being active, including learning about concussions.

Movement Competence Strand

Through exploration and play, students in the primary grades learn to develop fundamental movement skills and a variety of stability and locomotor skills. Simple manipulation skills, beginning with throwing and catching, are also introduced. Students learn about positive motivation and persevering through challenges as they learn new skills. Learning about movement concepts begins with an emphasis on body and spatial awareness and expands later to include the concepts of effort and relationship. In addition, students learn about the components – the skills, equipment, rules, and conventions of fair play and etiquette – of physical activities and how to use simple tactics to enhance their success and develop their confidence and sense of self as they participate in a variety of activities.

Healthy Living Strand

In the primary grades, students are introduced to basic health concepts, given opportunities to apply this knowledge to decisions about their own health, and encouraged to make connections between their physical and mental health and well-being and their interactions with others and the world around them. Emphasis is placed on having students begin to learn how to take responsibility for their own safety, at home and in the community, both in person and online. Students learn about the importance of consent, how to stand up for themselves, how to listen to and respect others, and how to get help in situations involving bullying or abuse or where they feel uncomfortable, confused, or unsafe. Students also learn to understand and apply basic concepts related to healthy food choices, healthy relationships, diversity, and substance use and potentially addictive behaviours. They learn about mental health as a part of overall health and begin to build understanding about the connections between thoughts, emotions, and actions. They learn the names of body parts, begin to understand and appreciate how their bodies work and develop, and acquire an understanding of some of the factors that contribute to healthy physical, social, and emotional development.

Overall Expectations At a Glance

Strand A. Social-Emotional Learning Skills

Throughout Grade 1, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1.** apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.

Strand B. Active Living

By the end of Grade 1, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

Strand C. Movement Competence

By the end of Grade 1, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

Strand D. Healthy Living

By the end of Grade 1, students will:

- D1.** demonstrate an understanding of factors that contribute to healthy development;
- D2.** demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;
- D3.** demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others' health and well-being.

Strand A

Social-Emotional Learning Skills

This strand focuses on the development of students' social-emotional learning skills to foster their overall health and well-being, positive mental health, and ability to learn, build resilience, and thrive. In all grades of the health and physical education program, the learning related to this strand takes place in the context of learning related to the Active Living, Movement Competence, and Healthy Living strands, and it should be assessed and evaluated within these contexts.

OVERALL EXPECTATION

Throughout Grade 1, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1. apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.**

SPECIFIC EXPECTATIONS

Throughout Grade 1, students will, to the best of their ability:

Identification and Management of Emotions*

- A1.1** apply skills that help them identify and manage emotions as they participate in learning experiences in health and physical education, in order to improve their ability to express their own feelings and understand and respond to the feelings of others (e.g., **Active Living:** explain how participating in daily physical activity [DPA] as part of a group makes them feel; **Movement Competence:** be aware of their feelings when learning new skills that seem easy and when learning skills that seem more difficult; **Healthy Living:** identify feelings they might experience in response to caring behaviours and behaviours by others that might be harmful to them)

* To support program planning, many specific expectations in strands B, C, and D are tagged to indicate the social-emotional skills that can be integrated into teaching and learning associated with the expectation. The tags are given in square brackets after the expectation, and use the identifiers A1.1 Emotions, 1.2 Coping, 1.3 Motivation, 1.4 Relationships, 1.5 Self, 1.6 Thinking.

Stress Management and Coping*

A1.2 apply skills that help them to recognize sources of stress and to cope with challenges, including help-seeking behaviours, as they participate in learning experiences in health and physical education, in order to support the development of personal resilience (e.g., **Active Living:** apply knowledge of safety procedures to make themselves feel safer; be aware of their own strengths and abilities and of their sense of personal boundaries to help them develop confidence when playing on the playground; **Movement Competence:** try to express themselves positively when they are excited or disappointed during a game; **Healthy Living:** explain how they can access help if needed by asking a trusted adult or calling 9-1-1 in an emergency)

Positive Motivation and Perseverance*

A1.3 apply skills that help them develop habits of mind that support positive motivation and perseverance as they participate in learning experiences in health and physical education, in order to promote a sense of optimism and hope (e.g., **Active Living:** show openness to trying different ways of being physically active; **Movement Competence:** show enthusiasm for trying out new skills and a willingness to persevere as they practise them; **Healthy Living:** reframe feelings of worry about situations that concern them, such as fearing they might burn themselves on the stove, by having a safety procedure in place)

Healthy Relationships*

A1.4 apply skills that help them build relationships, develop empathy, and communicate with others as they participate in learning experiences in health and physical education, in order to support healthy relationships, a sense of belonging, and respect for diversity (e.g., **Active Living:** speak respectfully and pay attention to others when sharing equipment; **Movement Competence:** communicate clearly, using eye contact, body cues, and words, as needed, when sending and receiving objects or when sharing space in the gymnasium; **Healthy Living:** listen respectfully, paying attention to words and non-verbal signals such as facial expressions and tone of voice, to show they care about someone)

Self-Awareness and Sense of Identity*

A1.5 apply skills that help them develop self-awareness and self-confidence as they participate in learning experiences in health and physical education, in order to support the development of a sense of identity and a sense of belonging (e.g., **Active Living:** create connections with peers through the discovery of shared enjoyment in various activities as they participate in DPA in the classroom; **Movement Competence:** describe how their body feels when they move in different ways; **Healthy Living:** show an understanding of, and respect for, themselves and their bodies by using proper names for body parts)

Critical and Creative Thinking*

- A1.6** apply skills that help them think critically and creatively as they participate in learning experiences in health and physical education, in order to support making connections, analysing, evaluating, problem solving, and decision making (e.g., **Active Living:** *make connections between being active and staying healthy, both physically and mentally; **Movement Competence:** use creative thinking skills to come up with new ways of moving and balancing – for instance, balancing on four body parts, three body parts, or five body parts; **Healthy Living:** explain choices that they can make when planning ahead to protect themselves from the sun, such as wearing a hat and applying sunscreen)*)

Strand B

Active Living

OVERALL EXPECTATIONS

By the end of Grade 1, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

SPECIFIC EXPECTATIONS

B1. Active Participation

By the end of Grade 1, students will:

- B1.1** actively participate in a wide variety of program activities (*e.g., activity centre and circuit activities, tag games, parachute activities*), according to their capabilities, while applying behaviours that enhance their readiness and ability to take part (*e.g., joining in willingly, showing respect for others, following directions, taking turns*) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “We show respect in many ways. In our classroom, we show respect for people of all cultures and abilities by including everyone in our activities. In our school, we show that we respect the environment by recycling and cleaning up. Showing respect for others is an important part of participating in physical activities. How do you show respect for others when you are being active?”

Student:* “I show respect by tagging other people gently when we are playing tag and speaking politely to others.”

* Throughout this curriculum, student responses often follow the teacher prompts. They are provided to illustrate content, and do not attempt to capture the speech patterns, syntax, or word choices typical of students in this grade.

- B1.2** demonstrate an understanding of factors that contribute to their personal enjoyment of being active (e.g., *having the opportunity to participate fully in all aspects of an activity, having a comfortable environment for activities, being able to explore different ways of being active, having the opportunity to take part in activities that relate to their cultural background*) as they participate in a wide variety of individual and small-group activities [A1.3 Motivation, 1.5 Self]

Teacher prompt: “What are some things that help you enjoy being physically active?”

Students: “I like it when everyone has their own ball, so we all get to play and practise a lot.” “I have more fun when I have lots of space to run and move.” “I love playing outside. When it is really hot, I play under the trees so I am in the shade.” “I liked this activity because it reminded me of a game my grandma taught me.” “Playing outside is more fun when it feels safe. Where I live, the parents and community members are working together to make the playground safer, and they also have a neighbourhood watch program where the adults work together to look out for the kids.”



Teacher prompt: “Each person pick up a ball or a beanbag. See how many different ways you can toss and catch your object while travelling around the gymnasium. Which way is your favourite?”

- B1.3** identify a variety of ways to be physically active at school and at home every day (e.g., **at school:** *playing actively at recess; participating in a variety of physical activities in class, including DPA; participating in after-school physical activities; at home:* *helping with outdoor activities like gardening, raking, or shovelling snow; going for a walk with family members; playing in the park; riding bikes on the community trail*) [A1.6 Thinking]

B2. Physical Fitness

By the end of Grade 1, students will:

- B2.1** **Daily physical activity (DPA):** participate in moderate to vigorous physical activity, with appropriate warm-up and cool-down activities, to the best of their ability for a minimum of twenty minutes each day (e.g., *doing an animal walk, a fitness circuit, parachute activities; galloping to music, wheeling their wheelchair around the gym*) [A1.1 Emotions, 1.3 Motivation, 1.5 Self]

Teacher prompt: “As you are moving like animals, see how long you can keep moving without stopping. How does your jumping look different if you are jumping like a frog instead of hopping like a rabbit? How do your arms look different if you are showing how you would fly like a bird instead of climbing a tree like a squirrel?”



Teacher prompt: “When you are exploring different ways of moving using hoops, what do you need to think about as you move?”

Student: “When I roll a hoop, I need to watch out for other children around me so I don’t hit anyone. When I jump into a hoop, I need to be careful not to land on the hoop, because I could slip. If I am holding a hoop with my partner, we should be careful not to pull the hoop and bend it.”

- B2.2** demonstrate an understanding of how being active helps them to be healthy, both physically and mentally [A1.2 Coping]

Teacher prompt: “Your heart is always beating and pumping blood to the muscles and the rest of the body. When you move faster, this will make your heart and lungs work harder, which makes them stronger and healthier. Being physically active can also make you feel good.”

- B2.3** identify the physical signs of exertion during a variety of physical activities (*e.g., heart beats faster, body gets warmer, breathing becomes faster and deeper, perspiration increases*) [A1.3 Motivation]

B3. Safety

By the end of Grade 1, students will:

- B3.1** demonstrate behaviours and apply procedures that maximize safety and lessen the risk of injury, including the risk of concussion, for themselves and others during physical activity (*e.g., cooperating; listening carefully; wearing appropriate footwear; keeping a safe distance away from others while doing physical activities, either in class or on the playground; staying within defined boundaries; treating their wheelchair as part of their body*) [A1.4 Relationships]

Teacher prompt: “How do you know that you have chosen a good spot for doing your cool-down stretches today?”

Student: “I can stretch my arms out and not touch anyone or the wall from where I’m standing/sitting.”

- B3.2** identify environmental factors that pose safety risks, including the risk of concussion, during their participation in physical activity (*e.g., extreme heat may cause fatigue, too much sun exposure will cause sunburn, extreme cold and wind chill may cause frostbite, objects on the ground may trip someone who cannot see, wet pavement or floors may create a slipping hazard*), and describe ways of preparing themselves to enjoy outdoor activities safely [A1.5 Self, 1.6 Thinking]

Teacher prompt: “If you are dressed properly, you will have more fun when you are being active outside. What do you need to wear in the summer/winter to participate safely in outdoor activities in any weather?”

Student: “In the summer, I should wear a hat and sunscreen when I go outside. In the winter, I need to wear a warm coat, a hat, mittens, and boots. If I wear a scarf, it needs to be tucked in so it does not catch on anything. When I am walking to school in freezing weather, I should wear snow boots, look for a clear pathway, and avoid walking on ice.”

Movement Competence: Skills, Concepts, and Strategies

OVERALL EXPECTATIONS

By the end of Grade 1, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

SPECIFIC EXPECTATIONS

C1. Movement Skills and Concepts

By the end of Grade 1, students will:

- C1.1** perform a variety of static balances, using different body parts at different levels (e.g., **low level:** crouch with weight balanced on hands and feet; **medium level:** stand and lean forward with arms outstretched; **high level:** stretch tall with arms overhead and legs wide apart) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “See if you can make different shapes with your body while you balance your weight on different body parts. Can you balance at a low level? Can you balance while stretching up high? How many different shapes can you make with your body when you are balancing on three body parts?”

- C1.2** demonstrate the ability to move and stop safely and in control, with an awareness of people and equipment around them [A1.2 Coping, 1.4 Relationships]

Teacher prompt: “Find your own spot where you cannot touch anyone or anything, even when you stretch out your arms. When the music starts, skip or gallop to the music. When the music stops, stop moving and freeze in place as quickly as you

can. Stay on your feet and check your spot. Are you still in your own space where you cannot touch anyone or anything?”

- C1.3** perform a variety of locomotor movements, travelling in different directions and using different body parts (e.g., *jump over lines; walk carefully backwards along a line while looking over their shoulder; move forward with different body parts touching the ground; move arms in different ways while walking, dancing, or skipping; take giant steps while moving sideways*) [A1.5 Self]

Teacher prompt: “Each time the music changes, change the way you are moving. Can you run or wheel your wheelchair in a big circle? Straight lines? Zigzags? Can you travel forward? Sideways? Can you skip? Hop? Run? Crawl? Can you make up a new way of moving?”

Students: “Look how I can pull my body along the floor with my arms to move like a seal.” “I am using my arms to make big circles while I jump over all the lines in the gym.” “I can slide sideways taking big steps.”

- C1.4** send objects of different shapes and sizes at different levels and in different ways, using different body parts (e.g., *roll a ball along a line, throw a rubber chicken underhand to a chosen spot, kick a ball to a specific area, toss or drop a beanbag into a hula hoop, pass a sponge ball over their head to the next person in a short line who passes it between their legs to the next person*) [A1.5 Self]

Teacher prompt: “Which body parts (hand, foot, elbow) can you use to send the ball forward?”

- C1.5** receive objects of different shapes and sizes at different levels and in different ways, using different body parts (e.g., *catch or trap a ball with two hands, catch a beanbag that they toss themselves or that a partner tosses to them, stop a rolling ball with hands or feet*) [A1.1 Emotions, 1.5 Self]

Teacher prompt: “When you get ready to catch, put your arms out with your hands up and your fingers spread wide. When you catch or trap an object, pull it in to your body as you grab it to help cushion it.”

C2. Movement Strategies

By the end of Grade 1, students will:

- C2.1** demonstrate an understanding that different physical activities have different components (e.g., *movement skills, basic rules and boundaries, conventions of fair play and etiquette*), and apply this understanding as they participate in and explore a variety of individual and small-group activities [A1.3 Motivation, 1.4 Relationships]

Teacher prompt: “What do you need to think about when we are playing tag? What about when you and a partner are playing with a hula hoop – what is different?”

Student: “When we are playing tag, I need to keep moving, watch out for the person who is ‘it’, and make sure I don’t run into anybody else. When I am rolling a hoop with a partner, I need to be able to roll the hoop in one direction and catch it when it comes back. I only need to be ready to move if my partner doesn’t send the hoop close to me. I need to make sure nobody is in between me and my partner when I roll it to her, so I don’t hit anyone.”



Teacher prompt: “When you are choosing a ball to practise throwing and catching, what can you do to play fairly and show respect for your classmates? What about when you are playing with the ball?”

Student: “When I am picking the ball I am going to use, I can wait my turn without pushing. When I am throwing the ball, if it bounces into someone else’s space, I need to wait until the way is clear before I run after the ball so I don’t wreck their game.”

- C2.2** apply a variety of simple tactics to increase their chances of success while participating in and exploring physical activities (*e.g., extend arms to improve stability when balancing on one foot; change speed, direction, or level to avoid being tagged; move closer to a target to increase the likelihood of success when sending an object*) [A1.5 Self, 1.6 Thinking]*

Teacher prompt: “What did you do to improve your chances of success in the activity we just did?”

Students: “I am a fast runner/I can make my wheelchair move fast. I kept moving the whole time so I wouldn’t get tagged.” “I am deaf and can’t hear the music, but I watched for your hand signal so I knew when to change direction.”

* Critical and creative thinking skills and processes are involved in choosing or devising tactical solutions at any age. However, the focus of social-emotional learning skill development shifts with the student’s stage of development, and this shift may be evident in the context of applying tactical solutions. Students in Grades 1–3 may be focusing on identifying and managing emotions and learning about themselves (*e.g., understanding that success in an activity leads to increased self-awareness and self-esteem; improving the ability to be aware of themselves and others and of what they are doing to control their bodies while moving*); students in Grades 4–6 may be ready to strengthen skills for interacting with others, persevering, and coping with challenges; and students in Grades 7 and 8 may be prepared to focus on deepening thinking skills and their understanding of themselves and others.

Strand D

Healthy Living

Instruction should focus on the overall expectation (D1, D2, D3 in the chart below) and should, where possible, be planned to illustrate connections across topics (listed in column 1) in an integrated way. The chart provides a brief summary of topics to support learning about health concepts, making healthy choices, and making connections for healthy living.

HEALTHY LIVING LEARNING SUMMARY BY TOPIC FOR GRADE 1

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating	D1.1 Food for healthy bodies and minds	D2.1 Canada's Food Guide D2.2 Hunger and thirst cues	
Personal Safety and Injury Prevention	D1.2 Safe practices – personal safety	D2.3 Caring and exploitative behaviours and feelings D2.4 Safety at school	D3.1 Potential risks at home, in the community, outdoors
Substance Use, Addictions, and Related Behaviours			D3.2 Unhealthy habits, healthy alternatives
Human Development and Sexual Health	D1.3 Body parts D1.4 Senses and functions	D2.5 Hygienic procedures	
Mental Health Literacy	D1.5 Mental health and overall health		D3.3 Thoughts, emotions, actions

OVERALL EXPECTATIONS

By the end of Grade 1, students will:

- D1. demonstrate an understanding of factors that contribute to healthy development;**
- D2. demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;**
- D3. demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others' health and well-being.**

SPECIFIC EXPECTATIONS

D1. Understanding Health Concepts

By the end of Grade 1, students will:

Healthy Eating

- D1.1** explain why people need food to have healthy bodies and minds (*e.g., food provides energy and nutrients for the healthy growth of teeth, skin, bones, and muscles and the healthy development of the brain*) [A1.6 Thinking]

Teacher prompt: “There are many things that contribute to a healthy body and mind, and healthy eating is one. When we talk about ‘a healthy body and mind’, we’re talking about your whole body, including your brain and your feelings and thoughts. Just as some toys need batteries to run, we need healthy foods to be active, to grow and be well, and to learn. How does eating breakfast every day and eating healthy meals and snacks throughout the day help you learn?”

Student: “It gives me energy to help me stay alert and concentrate through the day.”

Personal Safety and Injury Prevention

- D1.2** demonstrate an understanding of essential knowledge and practices for ensuring their personal safety (*e.g., knowing their home phone numbers; knowing how to contact 9-1-1; seeking help from a police officer, teacher, youth worker, or other trusted adult; knowing routines for safe pickup from school or activities*) [A1.2 Coping]

Teacher prompt: “Why is it important to know your phone number and your address?”

Student: “It is important to know how to contact someone for help in an emergency.”

Human Development and Sexual Health

- D1.3** identify body parts, including genitalia (*e.g., penis, testicles, vagina, vulva*), using correct terminology and body-positive language [A1.5 Self]

Teacher prompt: We talk about all body parts with respect, and we decide who can touch our body. Why is it important to know about your own body, and use correct names for the parts of your body?”

Student: “All parts of my body are a part of me, and I need to know how to take care of and talk about my own body. If someone touches me anywhere that I don’t want them to, or if I’m hurt or need help, I need to know the right words for the parts of my body, so that when I tell a trusted adult about what’s happened, they will know what I’m talking about.”

D1.4 identify the five senses and describe how each functions (e.g., **sight:** the eyes give the brain information about the world to help us see colours, shapes, and movement; **touch:** receptors in the skin tell us how things feel – if they are hot, cold, wet, dry, hard, soft; **hearing:** the ears pick up vibrations and send messages to the brain to help us hear sounds that are loud or soft, high- or low-pitched; **smell and taste:** the tongue is covered with thousands of taste buds and the nose has tiny hairs and nerves that send messages to the brain about how things taste and smell)

Teacher prompt: “How do you use your senses as you explore outside in the natural world? If you close your eyes, what other senses can you use to get information about what is around you? Can you give me an example of a tool that a person with a disability might use when they are exploring the natural world?”

Students: “I like to smell the air and feel the wind and the textures of leaves and tree trunks.” “People who are blind might use a white cane or a service animal so they can move freely when they are outside. The feel and sound of the cane on the ground, or the movement of the service animal, guides them.”

Mental Health Literacy

D1.5 demonstrate an understanding that mental health is a part of overall health and reflect on the things they can do to appreciate and take care of their body and mind [A1.2 Coping, 1.4 Relationships, 1.5 Self]

Teacher prompt: “We have talked about our health, ways that we take care of our body to feel well, and how we appreciate what our body can do. Now we are going to talk about our mental health. There are different ways to think about mental health. Some people talk about ways that we can take care of a special part of our body, our brain. Our brain helps us to think, to feel, and to act. When we can think, feel, and act in ways that make us happy most of the time, and help us get along well with others, we have positive mental health. Other people think about mental health as having all parts of yourself in balance – your body, your head, your heart, and your mind. Just as with our physical health, it is important for us to do things to make sure that our mental health stays strong. What are some things that you do that make you feel good and that can also help you take care of your mental health? You might think of things like playing with your friends, taking a deep breath, resting when you feel tired, or spending time with your family or community. What helps you take care of your mental health?”

Students: “I like to work on puzzles. It makes me feel relaxed to put the pieces together, and I feel good when I finish one.” “I like it when Uncle takes me out on the land. I feel good when I hear the birds and feel the earth.”

D2. Making Healthy Choices

By the end of Grade 1, students will:

Healthy Eating

- D2.1** describe how Canada’s Food Guide can help them develop healthy eating habits [A1.6 Thinking]

Teacher prompt: “Canada’s Food Guide makes recommendations that can help you develop healthy eating habits. What are some of the healthy habits recommended in the Food Guide?”

Student: “The guide suggests that you eat plenty of vegetables and fruits, whole grain foods, and protein foods, and choose protein foods that come from plants more often. It also says that healthy eating is about more than just the foods you eat; it’s also about being mindful of your eating habits, enjoying your food, and eating meals with others.”

- D2.2** know and recognize cues to hunger, thirst, and the feeling of fullness, and explain how they can use these cues to develop healthy eating habits [A1.5 Self]

Teacher prompt: “What does your body do to let you know you are hungry or thirsty?”

Student: “My stomach grumbles when I’m hungry and my mouth is dry when I’m thirsty and sometimes I feel tired or grumpy.”

Teacher: “What should you do when this happens?”

Student: “I should try to have a snack when I feel hungry or a drink when I feel thirsty. I give my body time to digest and feel full before I decide to have more.”

Personal Safety and Injury Prevention

- D2.3** demonstrate the ability to recognize caring behaviours (*e.g., listening with respect, being helpful, respecting boundaries*) and behaviours that can be harmful to physical and mental health (*e.g., ignoring or excluding others; bullying; manipulative behaviours; sexually exploitative or abusive behaviours, including inappropriate touching; verbal, emotional, or physical abuse*), and describe the feelings associated with each, as well as appropriate ways of responding, demonstrating an understanding of the importance of consent [A1.1 Emotions, 1.2 Coping, 1.4 Relationships]

Teacher prompt: “Caring behaviours are found in healthy relationships. How might you feel in a healthy relationship?”

Student: “I might feel happy, safe, secure, cared for, and listened to. In a healthy relationship, I would know that if I said I was uncomfortable or wanted someone to stop doing or saying something, they would stop.”

Teacher: “How might you feel in a relationship that is not healthy?”

Student: “I might feel sad, scared, angry, confused, hurt.”

Teacher: “What are some situations in which you might feel that way, and how might you respond to your feelings in these situations?”

Student: “I might feel that way if someone was being mean or leaving me out, if someone was touching me when I didn’t want to be touched, or if I was left at home alone. If I did not feel safe or secure, I could tell a trusted adult about how I felt, and keep telling them until I got help.”

- D2.4** apply their knowledge of essential safety practices to take an active role in their own safety at school (*e.g., inform teacher of allergies, be aware of food safety issues, play in supervised areas, follow safe routines for travelling to and from school*) [A1.3 Motivation, 1.5 Self, 1.6 Thinking]

Teacher prompt: “What are some things that students may be allergic to?”

Student: “They may be allergic to nuts and other foods, bee stings, or medicine.”

Teacher: “What can we do to make the classroom as safe as possible?”

Student: “We should not bring anything that might have nuts in it to school. People with allergies who need to use medicine if they have a reaction should carry their medicine [epinephrine autoinjector] with them. We should know who has an allergy and what the signs of an allergic reaction are, and we should get an adult to help if someone is having a reaction.”

Human Development and Sexual Health

- D2.5** demonstrate an understanding of and apply proper hygienic procedures for protecting their own health and preventing the transmission of disease to others (*e.g., washing hands with soap, using a tissue, sleeve sneezing, brushing and flossing teeth, not sharing hats or hairbrushes*)

Teacher prompt: “Why is it important to wash your hands before you eat and after you use the washroom?”

Student: “Washing your hands helps to stop germs from spreading. We should wash with warm water and soap for as long as it takes to say the alphabet.”

D3. Making Connections for Healthy Living

By the end of Grade 1, students will:

Personal Safety and Injury Prevention

- D3.1** demonstrate an understanding of how to stay safe and avoid injuries to themselves and others in a variety of situations, using knowledge about potential risks at home, in the community, when online, and outdoors (*e.g., items or situations that could lead to poisoning, slips, falls, fire, or injury, including injuries from household products, medicines, kitchen tools and equipment, unstable furniture, candles, toys; road, water, and playground hazards; the danger of landing on websites that are not age-appropriate; weather and sun hazards*) [A1.5 Self, 1.6 Thinking]

Teacher prompt: “What do you do to stay safe and avoid injuries at home and when you are outside?”

Student: “I wear a helmet* when I ride my bike or go tobogganing. I wear sunscreen and a hat in the summer. I never swim alone. I only take medicine if my parents/caregivers give it to me.”

Teacher: “What can you do to stay safe when you’re online?”

Students: “I only use the sites or apps that a parent or trusted adult has set up for me.” “I follow household rules about being online and using devices.”

Teacher: “How do you cross the road safely?”

Student: “I cross where there is a traffic light or a crosswalk, or at a corner. I look carefully both ways to make sure no cars are coming before crossing. I make sure that the drivers can see me, and that I am not hidden by bushes or cars.”

Teacher: “What can you do to stay safe in the kitchen?”

Student: “I make sure an adult is with me when I’m doing things in the kitchen. I do not use a knife or other sharp tools on my own, and I don’t touch cleaners and products that are marked with danger symbols.”

Substance Use, Addictions, and Related Behaviours

- D3.2** identify habits and behaviours (*e.g., excessive screen time or video game usage, smoking,** vaping*) that can be detrimental to health, and explain how people can be encouraged to adopt healthier alternatives [A1.2 Coping, 1.5 Self, 1.6 Thinking]

* It is important for students and parents to understand that helmets are designed primarily to prevent injury to the skull and that there is no current evidence that they prevent concussion. Helmets do not stop the brain from moving within the skull.

** This expectation focuses on understanding that smoking commercial tobacco products is a detriment to health. It does not refer to the ceremonial use of natural tobacco in First Nations and Métis cultures.

Teacher prompt: “What are some behaviours that can be harmful to your health? What are some things you can do that are healthier or that protect your health and the health of other people?”

Student: “Spending too much time watching television or playing computer games keeps us from getting all the physical activity we need. We can play outside after school instead. Smoking cigarettes is unhealthy, and so is breathing smoke that is in the air when other people are smoking cigarettes. We can ask people not to smoke or vape around us. It is against the law for people to smoke or vape in cars when there are children in the car.”

Mental Health Literacy

D3.3 demonstrate an understanding that a person’s thoughts, emotions, and actions can affect mental health [A1.6 Thinking]

Teacher prompt: “When we talk about staying healthy, we talk about all the things that contribute to keeping our body well. We are mindful of what we eat, make sure that we get enough sleep, and are active every day. When we take care of our body in these ways, we are also taking care of our brain’s health, because our brain is a part of our body! When our brain is healthy, this helps our mental health. What sorts of things can you do to take care of your brain?”

Student: “My brain gets tired when I’m working on things at school that are hard for me. After I’ve been doing something hard for a while, I can give myself a ‘brain break’ and do something different for a few minutes, like colouring on my page.”

Teacher: “There are other ways to keep our mental health strong besides caring for our body. How we think, how we feel, and the actions we take can help. The way we *think* about something can change the way we *feel* about it. For example, when you think that someone took a toy you were playing with on purpose, you might feel sad or angry. But if you think instead that maybe the person didn’t know you were in the middle of using it and took it by mistake, you might feel more okay about it. Also, how we *feel* – our feelings or emotions – can change the way we *act*. So, if you are angry because you think the person took the toy on purpose, you might yell at them. If you feel less upset because you think it was an accident, you might just tell them you weren’t finished using the toy and ask for it back. The second way probably makes things go better. So, our thinking can change our feelings or emotions, and our emotions can change our actions. When we think well, we feel well, and we can act in ways that make us, and others, feel good. Let’s try this with another example. If someone bumps into you when you are in line for the water fountain, what are some thoughts you might have?”

Student: “At first, I might think, Hey, don’t bump me like that. I almost hit my tooth! But maybe I could also think, Well, there are a lot of people in the hallway, and it was probably an accident.”

Overall Expectations At a Glance

Strand A. Social-Emotional Learning Skills

Throughout Grade 2, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1.** apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.

Strand B. Active Living

By the end of Grade 2, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

Strand C. Movement Competence

By the end of Grade 2, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

Strand D. Healthy Living

By the end of Grade 2, students will:

- D1.** demonstrate an understanding of factors that contribute to healthy development;
- D2.** demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;
- D3.** demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others' health and well-being.

Strand A

Social-Emotional Learning Skills

This strand focuses on the development of students' social-emotional learning skills to foster their overall health and well-being, positive mental health, and ability to learn, build resilience, and thrive. In all grades of the health and physical education program, the learning related to this strand takes place in the context of learning related to the Active Living, Movement Competence, and Healthy Living strands, and it should be assessed and evaluated within these contexts.

OVERALL EXPECTATION

Throughout Grade 2, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1. apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.**

SPECIFIC EXPECTATIONS

Throughout Grade 2, students will, to the best of their ability:

Identification and Management of Emotions*

- A1.1** apply skills that help them identify and manage emotions as they participate in learning experiences in health and physical education, in order to improve their ability to express their own feelings and understand and respond to the feelings of others (*e.g., **Active Living:** if feeling unhappy or upset before the start of a physical activity, take a moment to breathe deeply and refocus, so they can be ready to participate fully; **Movement Competence:** be aware of the feelings they and their partner are experiencing as they work cooperatively to throw and catch objects of varying sizes, and respond by making adjustments in how they are sending the objects; **Healthy Living:** show understanding for the feelings of someone who is voicing objections and refusing to participate in an activity that they do not like*)

* To support program planning, many specific expectations in strands B, C, and D are tagged to indicate the social-emotional skills that can be integrated into teaching and learning associated with the expectation. The tags are given in square brackets after the expectation, and use the identifiers A1.1 Emotions, 1.2 Coping, 1.3 Motivation, 1.4 Relationships, 1.5 Self, 1.6 Thinking.

Stress Management and Coping*

- A1.2** apply skills that help them to recognize sources of stress and to cope with challenges, including help-seeking behaviours, as they participate in learning experiences in health and physical education, in order to support the development of personal resilience (e.g., **Active Living:** dress appropriately for outdoor activity, recognizing that they help themselves feel more comfortable by doing so; **Movement Competence:** describe the value of positive self-talk to help manage several variables when engaged in an activity, such as sending objects of different sizes, at different levels, using different body parts; **Healthy Living:** in response to teasing, try different solutions – walking away, telling the person to stop, telling the person how the teasing makes them feel, getting help)

Positive Motivation and Perseverance*

- A1.3** apply skills that help them develop habits of mind that support positive motivation and perseverance as they participate in learning experiences in health and physical education, in order to promote a sense of optimism and hope (e.g., **Active Living:** understand the connection between getting a good sleep and feeling ready to participate; **Movement Competence:** show perseverance in exploring ways of using different body parts and balancing; **Healthy Living:** show appreciation for all the things their bodies can do)

Healthy Relationships*

- A1.4** apply skills that help them build relationships, develop empathy, and communicate with others as they participate in learning experiences in health and physical education, in order to support healthy relationships, a sense of belonging, and respect for diversity (e.g., **Active Living:** demonstrate how they can help one another while using equipment; **Movement Competence:** in a mirroring activity, copy a partner's movements by following their non-verbal signals as well as body language that signals the next movement; **Healthy Living:** use positive language when talking to peers, as part of developing healthy relationships, and encourage others to do the same)

Self-Awareness and Sense of Identity*

- A1.5** apply skills that help them develop self-awareness and self-confidence as they participate in learning experiences in health and physical education, in order to support the development of a sense of identity and a sense of belonging (e.g., **Active Living:** monitor their body's physical and mental responses when they are participating in a physical activity; **Movement Competence:** after jumping, consider what they did well as they tried to land in a stable position, and what they could do better; **Healthy Living:** complete a checklist to monitor their daily care of their teeth and explain how the checklist can help build their awareness of health habits that contribute to their overall health)

Critical and Creative Thinking*

- A1.6** apply skills that help them think critically and creatively as they participate in learning experiences in health and physical education, in order to support making connections, analysing, evaluating, problem solving, and decision making (e.g., **Active Living:** *explain how participating in moderate to vigorous activity is connected to better fitness and better health; describe what is needed to play safely and comfortably outside in different kinds of weather; **Movement Competence:** explore the use of many pieces of equipment and explain how each is different and why they prefer one over another; **Healthy Living:** explain how to stay safe by identifying household products that might be dangerous)*

Strand B

Active Living

OVERALL EXPECTATIONS

By the end of Grade 2, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

SPECIFIC EXPECTATIONS

B1. Active Participation

By the end of Grade 2, students will:

- B1.1** actively participate in a wide variety of program activities, according to their capabilities (e.g., individual and small-group activities, dancing to music, cooperative games), while applying behaviours that enhance their readiness and ability to take part (e.g., being engaged and moving throughout the activity; knowing what to do; demonstrating appropriate interpersonal skills, such as active listening, communicating with respect, and providing help to and asking for help from group members) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “What does it look like and feel like when you are ready to participate?”

Student:* “I am wearing my running shoes, I’m listening to instructions, and I’m excited about doing the activities. I try to find a partner or get into a group quickly.”

* Throughout this curriculum, student responses often follow the teacher prompts. They are provided to illustrate content, and do not attempt to capture the speech patterns, syntax, or word choices typical of students in this grade.

- B1.2** demonstrate an understanding of factors that contribute to their personal enjoyment of being active (*e.g., having the opportunity to participate fully in all aspects of an activity, being able to choose the activities they participate in and having choice within the activities, having adequate practice time, having access to safe outdoor play space, being able to take part in activities that are connected to their cultural background*) as they participate in a wide variety of individual and small-group activities [A1.1 Emotions, 1.5 Self]
- B1.3** identify reasons for participating in physical activity every day (*e.g., to have fun, learn through play, be with classmates who are involved in after-school physical activities, pursue personal interests in certain kinds of activities, enjoy a change from the classroom routine, emulate a role model, interact with family members, improve physical and mental health, follow cultural teachings*) [A1.1 Emotions, 1.2 Coping, 1.6 Thinking]

Teacher prompt: “The Canadian 24-Hour Movement Guidelines recommend that children limit the amount of time that they spend sitting without being active. The Canadian Physical Activity Guidelines for Children recommend that children build physical activity into their daily routines to create a pattern that will stay with them for the rest of their lives. The guidelines recommend that children gradually increase active time and decrease non-active time, including screen time. Why is it important to be active every day? What do you like to do to be active?”

Student: “Being active every day helps to make you strong and healthy. I like to do outdoor activities with my friends or family.”

B2. Physical Fitness

By the end of Grade 2, students will:

- B2.1 Daily physical activity (DPA):** participate in moderate to vigorous physical activity, with appropriate warm-up and cool-down activities, to the best of their ability for a minimum of twenty minutes each day (*e.g., playing continuous tag games, skipping, wheeling their wheelchair, using hula hoops*) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “Today, we will be doing a chair aerobics routine for our DPA activity. We will be starting with slow music, and we will move our arm and leg muscles slowly in order to stretch them and warm them up. We will stretch again during the cool-down after our muscles are warm. How will that help us?”

Student: “Moving slowly at the beginning helps to get our bodies ready for more activity. Then, when the music gets faster, we can really move our bodies to the beat! We stretch at the end because our muscles are warm then and they stretch more easily. We move slowly in the cool-down to relax our bodies and get ready to move on to something else.”

- B2.2** describe different types of activities that improve the strength of the heart and lungs (e.g., *running, wheeling fast, walking fast, skipping, dancing to music, doing a fitness circuit, other whole-body or large muscle activities*)

Teacher prompt: “What types of activities do we do that make our hearts and lungs stronger?”

Student: “We can make our hearts and lungs stronger by doing activities that make our hearts beat faster and make us breathe hard. Activities like dancing, running, and jumping do that for me.”

- B2.3** recognize their degree of exertion in physical activities by using simple assessment methods (e.g., *putting their hand on their chest to feel the increase in heart rate as they move faster, using the talk test [monitoring whether they can talk while being physically active]*), and identify factors that affect their performance level (e.g., *humidity, extremely cold or warm air, poor air quality, personal fitness level, sleep, feelings, stressful events*) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “Think about how you feel when you are active. Put your thumb up if you feel you were working really hard. Put your thumb down if you feel you were not working hard. Put your thumb somewhere in between if you feel that you were in between.”

Student: “I put my thumb at the ‘in between’ spot because my heart was beating faster and I was breathing harder, but I think I could have done even more. I was a bit tired today because I went to bed late last night, so I did not go as fast as I could have.”

- B2.4** participate in setting and achieving realistic personal and group goals related to physical activity (e.g., *a personal goal of doing a physical activity for a specified period of time, a group goal of completing a collective number of class star jumps in a given time frame*) [A1.3 Motivation, 1.6 Thinking]

Teacher prompt: “For the next two songs, keep moving fast for as long as you can. See if you can keep moving in different and interesting ways – galloping, skipping, jumping, wheeling, moving in a zigzag pattern. When you need to rest, walk or wheel slowly, then start moving faster again. Before you start, set a goal for yourself about how long you will try to move. How many breaks do you think you will need to take? What is realistic for you? What will help you achieve your goal?”

Students: “I am going to try to move for the next two songs, and I’ll only take one ‘slow down’ break. I love this music, so that will help me keep going.” “If I am tired, it helps me if someone encourages me.” “I like trying to beat my record.”

B3. Safety

By the end of Grade 2, students will:

- B3.1** demonstrate behaviours and apply procedures that maximize safety and lessen the risk of injury, including the risk of concussion, for themselves and others during physical activity (e.g., *being aware of personal space; making sure their shoelaces are tied; warming up to prevent injury; wearing a properly fitting helmet* when cycling, skiing, or playing hockey; taking turns when sharing equipment; avoiding overcrowding when using equipment both in class and on the playground; making sure straps are done up before pushing a wheelchair*) [A1.4 Relationships, 1.5 Self]

Teacher prompt: “You and your partner are each going to be given a beanbag, a pylon, and a plastic hoop to make up your own game. How will you make sure that both of you have a chance to play safely?”

Student: “We will make sure that we have enough space around us so that we are not throwing near another group. We will take turns throwing.”



Teacher prompt: “When you are skipping or hopping in the gym or classroom, what do you need to think about to move safely?”

Student: “I need to keep my head up and pay attention to the people and equipment around me so that I do not bump into anyone. If my head, neck, or body gets hit, I will stop my activity right away and tell an adult. I also need to be able to stop with control when the teacher gives a signal.”

- B3.2** identify ways of protecting themselves and others, including those with medical conditions, from safety risks while participating in physical activity (e.g., *avoiding broken glass on the field or on the playground and reporting it to the teacher, carrying an epinephrine autoinjector if needed, reducing intensity of physical activity if poor air quality causes breathing difficulties, bringing an inhaler if needed, tucking in the tubing of an insulin therapy pump to prevent it from getting caught*) [A1.4 Relationships, 1.6 Thinking]

Teacher prompt: “Before we go outside to be active, what do you need to have with you to be safe?”

Students: “I need to have my puffer in my pocket in case I need it for my breathing.”
“I need to have my medicine [epinephrine autoinjector] in my pouch in case I get stung by a bee.”

* It is important for students and parents to understand that helmets are designed primarily to prevent injury to the skull and that there is no current evidence that they prevent concussion. Helmets do not stop the brain from moving within the skull.

Movement Competence: Skills, Concepts, and Strategies

OVERALL EXPECTATIONS

By the end of Grade 2, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

SPECIFIC EXPECTATIONS

C1. Movement Skills and Concepts

By the end of Grade 2, students will:

- C1.1** perform a variety of static balances with and without equipment (e.g., balance on the floor, on a line, on a bench; balance objects on different body parts), using different body parts at different levels and making different body shapes (e.g., **low level** – perform a V-sit: balance on buttocks with legs in the air, hold with muscles tight and legs together and arms either supporting the body or held at their sides; **medium level** – perform a standing scale: balance on one foot with the other leg stretched behind in the air, torso bent forward, and arms out parallel to the floor for balance; **high level** – perform a standing balance: using a walker for balance, lift one foot or one hand) [A1.3 Motivation]

Teacher prompt: “Create an interesting balance, with your weight on one or two feet. Now create a balance with one body part touching the floor and another on a bench. How did you change your balance – by shifting your weight, changing your body position, changing the body parts your weight was on, or by using another method?”



Teacher prompt: “Show me three balances that you can hold steady for ten seconds without moving. Make one balance a low one close to the ground, one at a medium level, and one stretched to a high level. Now make three new balances at each level, using different body parts. What do you need to do to hold your body steady in each position?”

Student: “Squeezing my muscles tight, using bigger body parts, and keeping my eyes on one spot make it easier to balance. Balances where I have my arms and legs stretched out into a wide position are easier to hold steady than ones where I am balancing on one body part or in a narrow position. It is easier to balance in positions that are closer to the ground than ones where I am stretched up high.”

- C1.2** demonstrate the ability to jump, hop, and land safely and in control, taking off from one foot or from two feet [A1.3 Motivation]

Teacher prompt: “When you start a jump taking off from two feet, bend your knees and swing your arms forward to help push you forward and up. To land safely, think about putting your body into a position as if you were riding a bicycle. Keep your hands out, knees bent, and head up. While you land, think ‘toes-heels-knees-freeze’, which means that as you land you should touch the ground with your toes first and then your heels, then bend your knees to absorb the impact, and finally ‘stick’ the landing by holding your position in control.”



Teacher prompt: “When hopping on one foot, keep your head up and use your arms for balance. Practise hopping with each of your feet.”

- C1.3** perform a variety of locomotor movements with and without equipment, travelling in different directions and at different speeds, and using different pathways (e.g., *hop sideways across a line, gallop in a curved pathway around trees or objects, skip quickly using a rope, slide or wheel slowly in a zigzag pattern, move at different speeds in response to the beat of a drum, run quickly following a curving pathway, jog slowly backwards while checking over their shoulder*) [A1.3 Motivation, 1.4 Relationships]

Teacher prompt: “In how many different ways can you travel along the lines of the gym? Can you skip? Run? Hop? Use tiny steps or giant steps? Wheel forward and backwards? Go slowly? Go quickly? Go sideways? Jump over lines that cross the one you are travelling on? Can you walk or wheel at different speeds while balancing a beanbag on your head? In how many ways can you move the ribbon as you skip around the gym?”

- C1.4** send objects of different shapes and sizes at different levels and in different ways, using different body parts (e.g., *slide a beanbag across the floor to a partner; throw a beanbag or ball underhand, using two hands or their dominant hand, and catch it or have a partner catch it; throw a disc through an upright hula hoop; kick a utility ball to a partner; strike a beach ball, using their hands, knees, chest, or foot*) [A1.1 Emotions, 1.2 Coping, 1.5 Self]

Teacher prompt: “Strike a ball with your hand so that your partner can catch it in the air. Now strike the ball with your hand so that it rolls along the ground to your partner. Now do the same using your feet. What do you do that is the same in all these cases? What changes when you send a different type of object?”

Student: “No matter how I send an object, it helps to face my partner and stretch my hand or foot towards my partner when I throw or kick, so that the object will travel in a straight line. That works for any kind of object, but bigger objects are easier to hit. Lighter objects move more slowly.”

Teacher: “What part of your foot should you use to contact the ball if you want to kick it along the ground?”

Student: “I should use the side of my foot, not my toe.”

- C1.5** receive objects of different shapes and sizes at different levels and in various ways, using different body parts (*e.g., stop a low bouncing ball with their hands or feet; catch or trap a beanbag that they or a partner toss, using two hands or their dominant hand*) [A1.1 Emotions, 1.5 Self, 1.6 Thinking]

Teacher prompt: “In how many different ways can you stop a ball without using your hands? Can you stop it with your feet? Your thigh? Your chest? Your shin?”



Teacher prompt: “What do you do to make it easier to catch the ball?”

Student: “I keep my eyes on the ball the whole time it is coming to me.” “I like using the mitt that the ball sticks to better than the scoop, because the mitt makes it easier to catch the ball. The ball sometimes bounces out of the scoop.”

C2. Movement Strategies

By the end of Grade 2, students will:

- C2.1** demonstrate an understanding that different physical activities have different components (*e.g., movement skills, basic rules and boundaries, conventions of fair play and etiquette*), and apply this understanding as they participate in and explore a variety of individual and small-group activities [A1.3 Motivation, 1.4 Relationships]

Teacher prompt: “What are some skills that you might use when you are playing ball with a partner? What do you need to do and watch for when you practise these skills? What changes in a bigger group?”

Student: “When I am playing with a ball with a partner, we can work on sending the ball in different ways – by kicking it, throwing it, striking it, or rolling it. We can also try to receive it in different ways – by catching it with our hands or stopping it with our feet. My partner and I need to stand close enough to each other that we can get

the ball to each other. I need to make sure my partner sees that I am going to throw the ball before I throw it. We need to watch out for other pairs of students and make sure we don't get too close to them. If I'm in a bigger group, we need to make sure that everyone gets to throw the ball sometimes and that we're not too close together or too far apart."



Teacher prompt: "When you are sharing a scooter with your partner, how do you show that you are playing fair? What can you do to follow good playing etiquette?"

Student: "If we are sharing the scooter, we take turns so we both have about the same time with the scooter. When we are finished with the scooter, we show good etiquette by putting the scooter away where it belongs."

- C2.2** apply a variety of simple tactics to increase their chances of success during physical activities (*e.g., wheel their wheelchair or run into open space when playing tag games in order to more easily avoid being tagged; choose an object for a throwing activity that they think they can successfully throw and catch multiple times – a cloth ball, a utility ball, a tennis ball, a beanbag; use adapted or specialized equipment, such as a ball with a bell inside that can provide an auditory cue*) [A1.6 Thinking]*

Teacher prompt: "When you choose an object to throw and catch, what do you think about to make a choice that is good for you?"

Students: "Catching is hard for me, so I picked a bigger ball." "I picked a bouncy ball because I like running fast to get it if I drop it." "I can't see very well, so I chose a ball with a bell inside. Hearing the bell lets me know where the ball is." "I use a walker and have a hard time moving around, so I picked a beanbag that won't roll away if I drop it." "I picked a stuffed animal to catch because it is fun, and I can practise with my own stuffed animals at home. It is also really easy to catch because it is soft."

* Critical and creative thinking skills and processes are involved in choosing or devising tactical solutions at any age. However, the focus of social-emotional learning skill development shifts with the student's stage of development, and this shift may be evident in the context of applying tactical solutions. Students in Grades 1–3 may be focusing on identifying and managing emotions and learning about themselves (*e.g., identifying what activities they like best and which ones they are good at by experimenting with a wide variety of activities and equipment*); students in Grades 4–6 may be ready to strengthen skills for interacting with others, persevering, and coping with challenges; and students in Grades 7 and 8 may be prepared to focus on deepening thinking skills and their understanding of themselves and others.

Strand D

Healthy Living

Instruction should focus on the overall expectation (D1, D2, D3 in the chart below) and should, where possible, be planned to illustrate connections across topics (listed in column 1) in an integrated way. The chart provides a brief summary of topics to support learning about health concepts, making healthy choices, and making connections for healthy living.

HEALTHY LIVING LEARNING SUMMARY BY TOPIC FOR GRADE 2

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating		D2.1 Healthy eating patterns D2.2 Food choices (snacks, meals)	
Personal Safety and Injury Prevention	D1.1 Personal safety – home, online, and outdoors D1.2 Food allergies	D2.3 Consent, standing up for yourself and others	D3.1 Relating to others
Substance Use, Addictions, and Related Behaviours	D1.3 Prescription / non-prescription medicines		D3.2 Medication, healthy alternatives
Human Development and Sexual Health	D1.4 Stages of development D1.5 Body appreciation	D2.4 Oral health	
Mental Health Literacy	D1.6 Body and brain – responses and feelings	D2.5 Knowing when to seek help	

OVERALL EXPECTATIONS

By the end of Grade 2, students will:

- D1. demonstrate an understanding of factors that contribute to healthy development;**
- D2. demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;**
- D3. demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others’ health and well-being.**

SPECIFIC EXPECTATIONS

D1. Understanding Health Concepts

By the end of Grade 2, students will:

Personal Safety and Injury Prevention

- D1.1** demonstrate an understanding of practices that enhance personal safety in the home (e.g., observing precautions for answering the phone and door, establishing home fire escape strategies, respecting electrical outlet covers, following precautions for preparing and storing foods, washing hands), outdoors (e.g., using UV protection; observing safety rules when riding the bus, riding a bicycle, walking to school, approaching railway tracks and crossings; carrying medication for allergic reactions; being cautious when approaching animals), and when online (e.g., not sharing personal information, checking with an adult if information found online is true) [A1.5 Self, 1.6 Thinking]

Teacher prompt: “What are some things you should do to stay safe when you are at home, outside, or riding on the school bus?”

Students: “At home, you should make sure that an adult always knows where you are when you’re playing outside. You should not touch any household product that has a symbol on it that means danger or poison. You should have a plan and know what to do in an emergency.” “When you’re outside, you should wear a hat to protect you from the sun and a helmet when you’re riding your bike, tobogganing, or snowboarding.” “You should sit facing the front of the school bus, and always cross the road in front of the bus when you get off. Don’t get so close to the bus that you can touch it. Get help from the driver or another adult if you drop something in the ‘danger zone’ – the area around the bus where the driver can’t see you.” “If you have a nut allergy, tell your friends and their parents about it when you’re playing at their house. Make sure your snacks do not have nuts, and always carry an autoinjector.” “If you want to come up to an animal or touch it, you have to ask permission from an adult and learn how to do it safely.”

Teacher: “What are some things you should do to stay safe when you are playing online games, searching the Internet, or accessing videos?”

Student: “I know that whenever I am on a device, I need to use it with respect for myself and others and think about my personal safety. If I see a picture or video online and feel uncomfortable, confused, or unsafe, I should stop and tell a parent or trusted adult right away. It is important not to talk to strangers in the virtual world because they may not be who they say they are. Also, I should follow household rules about being online.”

- D1.2** identify common food allergies and sensitivities (e.g., to peanuts, tree nuts, milk, eggs, fish) and the reactions they might cause (e.g., swelling, skin rash, difficulty breathing, abdominal cramps, vomiting, diarrhea, coma, death)

Teacher prompt: “Anaphylaxis is a serious allergic reaction that can be life threatening. Food is the most common cause of anaphylaxis, but insect stings, medicine, latex, or exercise can also cause a reaction. What is the reason for our school policy that asks students not to bring nut products to school?”

Student: “A lot of people have allergies to nuts. If you have a nut allergy, you can have a very dangerous reaction if you eat or come into contact with nuts or something that is made with nuts.”

Substance Use, Addictions, and Related Behaviours

- D1.3** describe the difference between prescription medicines and non-prescription medicines, giving examples of each, and identify rules for the proper use of all medicines [A1.6 Thinking]

Teacher prompt: “Prescription medicines, such as penicillin and other antibiotics, are prescribed by a physician or nurse practitioner and are available only at a pharmacy. How can you recognize a prescription medicine?”

Student: “On the label of the bottle, it has the name of the patient, instructions for using the medicine, and a prescription number.”

Teacher: “How are commonly used non-prescription medicines and health care supplements – for example, cough syrup; vitamins; herbal, homeopathic, and naturopathic remedies; and First Nations, Métis, and Inuit medicines – different from prescription medicines?”

Student: “You don’t need a prescription from a physician or nurse practitioner to get them. You can get them in places like health food stores and not just in pharmacies. Some First Nations, Métis, and Inuit medicines come from the land, and are considered a gift.”

Teacher: “What should we do to ensure that medicines are used safely and correctly?”

Student: “You should only take medicine that an adult who is caring for you gives you. You should never share prescription medicines. All instructions, like how much you should take and when you should take it, for all medicines should be followed carefully.”

Human Development and Sexual Health

- D1.4** outline the basic stages of human development (*e.g., infant, child, adolescent, adult, older adult*) and related changes, and identify physical, mental, social, and environmental factors that are important for healthy growth and living throughout life [A1.5 Self]

Teacher prompt: “How does your body change as you grow? What helps you to grow and be healthy?”

Student: “As you grow, you get taller and bigger. Your bones grow. Your muscles grow. You grow faster at some stages than at others and not everyone grows the same amount at the same time. When you’re an adult, your body doesn’t grow anymore, but it still changes – for example, your skin gets more wrinkled and your hair might turn grey. Things that help make you healthy all through your life are eating well, being active, getting enough sleep, and having people to care for you.”

Teacher: “When we look at growth and change throughout life, we can consider teachings from different cultures, including First Nations, Métis, and Inuit cultures, about the cycles of birth, life, and death. Indigenous communities have rite of passage ceremonies for each life stage, and teachings about growing and changes in roles and responsibilities at each stage. For example, the Anishinaabe teach about seven stages of life, and believe that at each stage, learning traditional teachings, such as the seven-grandfather teachings, from family, community, and Elders contributes to their overall mental, physical, spiritual, and emotional health.”

- D1.5** demonstrate the ability to identify and appreciate aspects of how their bodies work and describe what they can do to ensure that they will continue to appreciate their bodies as they grow and change [A1.1 Emotions, 1.3 Motivation, 1.5 Self]

Teacher prompt: “You have already identified what you like about what your body can do. How can you show appreciation for what your body can do?”

Student: “I take care of my body by brushing my teeth, getting enough sleep, being active, and eating well.”

Teacher: “Our bodies’ job is to *work* a certain way, not to *look* a certain way. How can you focus on the things your body helps you do, instead of what your body looks like?”

Student: “I can remind myself that every person’s body is unique, and that’s why I do not compare the size or shape of my body to others. I will focus on recognizing and appreciating what my body can do, like how my feet spring up when I jump or how my stomach moves out and in as I breathe.”

Mental Health Literacy

- D1.6** demonstrate an understanding of how a person’s body and brain respond to challenging or uncomfortable situations (*e.g., they may feel tired, easily overwhelmed, confused, or overstimulated; they may want to cry or they may have very intense feelings; they may get a headache or feel hot*), and describe what they can do to feel better at those times [A1.1 Emotions, 1.4 Relationships, 1.5 Self]

Teacher prompt: “When you are worried or feel uncomfortable about something, your body may let you know about it in different ways. This is something everyone experiences in different ways. What are some of these ways?”

Student: “I get tired and don’t want to be around anyone. I feel like I want to cry.”

Teacher: “It’s helpful to recognize what you’re feeling. Sometimes crying or being on your own helps. What are some other things that you can do when you feel like that?”

Students: “When I’m sad, I like to play with my cat.” “When I’m at school, it helps me to talk with a friend or my teacher about how I’m feeling.”

Teacher: “How do you know if someone else might be feeling worried or uncomfortable about something? How would you treat them?”

Student: “Sometimes you can tell by looking at someone’s face but sometimes it’s hard to tell how another person is feeling, so it’s good to ask. If someone doesn’t want to talk or play, I can give them space but I could also check on them in case they want to join later – or maybe ask if they want to talk.”

D2. Making Healthy Choices

By the end of Grade 2, students will:

Healthy Eating

- D2.1** use Canada’s Food Guide to identify food and beverage choices that contribute to healthy eating patterns

Teacher prompt: “The term ‘eating pattern’ refers to what you eat and drink on a regular basis, and helps support your overall health. Here are pictures of a week of school lunches. What variety of foods do you see? Do they support healthy eating patterns? What might make these lunches healthier?”

Student: “Healthy eating patterns can be developed by regularly eating vegetables and fruits, whole grain foods, and protein foods, and choosing protein foods that come from plants more often, if possible. Most of the lunches here include a variety of healthy foods. They could contribute to an even healthier eating pattern if they included water more often.”

- D2.2** demonstrate an understanding of how to make healthy food choices for meals and snacks, considering the factors they can and cannot control (*e.g., the food that’s available in the home; the food that’s available when eating out; energy needed at different times of day; allergies; food guidelines associated with medical conditions such as diabetes or celiac disease; food safety related to food preparation, storage, handling, and cleanliness*) [A1.3 Motivation, 1.6 Thinking]

Teacher prompt: “What are some things to consider when choosing a snack?”

Student: “A snack should give me energy and it should be safe to eat. Snacks with less sugar – like vegetables and fruit – are better for my teeth. Also, some foods need to be kept cold to be safe to eat.”

Teacher: “What can you do if you are going to be somewhere where there are only a few healthy choices or none at all?”

Student: “I could try to make the healthiest choice I can, like having a salad instead of fries at a fast-food restaurant. Or I can go ahead and eat what is available. It’s okay to eat some things that are less healthy sometimes, knowing that I don’t do this regularly or too often. If I’m not hungry, though, I can wait to eat something healthier at my next meal or snack. I can try to bring a healthy snack from home next time, or if my school has a healthy snack program, I can have a snack at school.”

Personal Safety and Injury Prevention

- D2.3** explain the importance of consent and demonstrate the ability to stand up for themselves and others, to enhance well-being and safety (e.g., *speaking confidently; stating boundaries, whether in person or online; saying no; respecting the right of a person to say no and encouraging others to respect that right also; reporting exploitative behaviours, such as improper touching of their bodies or others’ bodies*) [A1.1 Emotions, 1.2 Coping, 1.4 Relationships]

Teacher prompt: “Why is standing up for yourself and showing respect for others important in a friendship?”

Student: “It helps you when you can say what you think or what you need. Friends should listen to each other and show respect. When someone tells a person to stop, that person should stop. For example, if someone teases me about my allergy to nuts, I can tell them to stop and let them know that contact with nuts could make me stop breathing.”

Teacher: “What can standing up for yourself look like?”

Student: “You can hold your head up high, make eye contact, and speak strongly. You can say what you feel and think in a polite but firm way and refuse to do anything that makes you uncomfortable.”

Teacher: “In some cultures, making eye contact is considered disrespectful. What can you do then?”

Student: “You can stand up for yourself in other ways, such as speaking firmly to say what you are or are not comfortable with.”

Teacher: “If someone touches you in an inappropriate way, or asks to touch you, or asks you to touch them, in a way that makes you feel uncomfortable, confused, or unsafe, how can you stand up for yourself?”

Student: “I can say no and move away. My body is mine. I can tell someone – like a parent, a teacher, a doctor, or an adult that I trust – that I need help. I can keep telling until I get help.”

Human Development and Sexual Health

- D2.4** demonstrate an understanding of and apply practices that contribute to the maintenance of good oral health (e.g., *brushing, flossing, going to the dentist regularly for a checkup*) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “How should you care for your teeth when you lose a tooth?”

Student: “I should make sure my hands are clean when I touch my teeth and remember to brush the gap between the teeth.”

Teacher: “It is important to brush your teeth after eating, but if you can’t, what else can you do?”

Student: “I can rinse my mouth with water.”

Mental Health Literacy

- D2.5** explain how understanding and being able to name their feelings (e.g., *happy, relaxed, calm, uncomfortable, sad, angry, frustrated, scared, worried*) can help in knowing when they might need to get help [A1.2 Coping, 1.3 Motivation, 1.5 Self]

Teacher prompt: “We’ve talked about things you might do to feel better when things are difficult or scary. Sometimes you can help yourself. Sometimes you might need to get help. You might also want to help a friend who is worried or upset. What can you do to get help if you or your friend needs it?”

Student: “I can talk with an adult that I can trust. It could be a parent or someone at school or someone else in my family.”

Teacher: “Why might it be important to ask for help from a trusted grown-up?”

Students: “Sometimes I don’t know what to do to make myself feel better.” “Sometimes I’m not sure what to do and talking to my teacher helps me figure it out.” “Sometimes it’s hard to tell if someone is in trouble, so it’s best to get help from a grown-up.”

D3. Making Connections for Healthy Living

By the end of Grade 2, students will:

Personal Safety and Injury Prevention

- D3.1** describe how to relate positively to family members, caregivers, and others (e.g., *cooperate, show respect, communicate openly, manage anger, pay attention to what people say and to their facial expressions and body language*), and describe behaviours that can be harmful in relating to others (e.g., *verbal abuse, including both online and face-to-face name calling, insults, and mocking; deliberately ignoring someone, or ignoring the feelings*)

they express; physical violence, including pushing, kicking, and hitting) [A1.1 Emotions, 1.2 Coping, 1.4 Relationships]

Teacher prompt: “What are some respectful ways you can let someone know that you disagree with them?”

Student: “In our family, when there is a disagreement, each person gets a chance to let each other know what they feel and think, and we pay attention to what everyone has to say, without interrupting them. I feel better when I share my feelings and don’t keep them bottled up inside.”

Teacher: “What does being a good friend look like? How can you show that you’re a friend while working in groups?”

Student: “I can make sure to include everyone, be kind to anyone who wants to be my partner, share toys and equipment, be encouraging, keep my hands to myself, and speak nicely.”

Teacher: “Calling someone a name or leaving them out of a group because of how they learn, speak, or look are examples of abusing or mistreating someone with your words or behaviour. We are learning how to prevent and change this behaviour and also how to respond to this behaviour if it happens. What could you do to help in this kind of situation?”

Student: “I could make sure I don’t behave that way. If I saw someone else doing it, I could tell the person to stop, or get help from an adult. I could also be friendly to the person who is being treated badly.”

Substance Use, Addictions, and Related Behaviours

- D3.2** describe methods that may be used instead of or in combination with medication to maintain good physical and mental health and prevent or treat various health problems (*e.g., getting more sleep to help get rid of a cold; getting more fresh air and physical activity to relieve headaches; eating healthier meals as recommended in Canada’s Food Guide or Canada’s Food Guide for First Nations, Inuit, and Métis; using natural healing treatments, Indigenous health practices*) [A1.2 Coping, 1.6 Thinking]

Overall Expectations At a Glance

Strand A. Social-Emotional Learning Skills

Throughout Grade 3, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1.** apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.

Strand B. Active Living

By the end of Grade 3, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

Strand C. Movement Competence

By the end of Grade 3, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

Strand D. Healthy Living

By the end of Grade 3, students will:

- D1.** demonstrate an understanding of factors that contribute to healthy development;
- D2.** demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;
- D3.** demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others' health and well-being.

Strand A

Social-Emotional Learning Skills

This strand focuses on the development of students' social-emotional learning skills to foster their overall health and well-being, positive mental health, and ability to learn, build resilience, and thrive. In all grades of the health and physical education program, the learning related to this strand takes place in the context of learning related to the Active Living, Movement Competence, and Healthy Living strands, and it should be assessed and evaluated within these contexts.

OVERALL EXPECTATION

Throughout Grade 3, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1. apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.**

SPECIFIC EXPECTATIONS

Throughout Grade 3, students will, to the best of their ability:

Identification and Management of Emotions*

- A1.1** apply skills that help them identify and manage emotions as they participate in learning experiences in health and physical education, in order to improve their ability to express their own feelings and understand and respond to the feelings of others (e.g., **Active Living:** when helping others observe safety rules, be aware of their feelings and speak in a positive and supportive way; **Movement Competence:** when learning new activities, show awareness of self and others as they demonstrate fair play; **Healthy Living:** identify the emotions shown by characters in fictional depictions of violence in various media forms, and describe how they may be different from the emotions involved when violence is real)

* To support program planning, many specific expectations in strands B, C, and D are tagged to indicate the social-emotional skills that can be integrated into teaching and learning associated with the expectation. The tags are given in square brackets after the expectation, and use the identifiers A1.1 Emotions, 1.2 Coping, 1.3 Motivation, 1.4 Relationships, 1.5 Self, 1.6 Thinking.

Stress Management and Coping*

- A1.2** apply skills that help them to recognize sources of stress and to cope with challenges, including help-seeking behaviours, as they participate in learning experiences in health and physical education, in order to support the development of personal resilience (e.g., **Active Living:** explain how being physically active can help to moderate strong feelings and emotions; **Movement Competence:** take a deep breath to centre themselves when feeling overwhelmed or nervous about performing a new skill; **Healthy Living:** do their best to make sure that they are getting enough sleep and eating in healthy ways to help them meet daily challenges and participate fully in activities)

Positive Motivation and Perseverance*

- A1.3** apply skills that help them develop habits of mind that support positive motivation and perseverance as they participate in learning experiences in health and physical education, in order to promote a sense of optimism and hope (e.g., **Active Living:** show a growth mindset when setting personal goals for physical activity; **Movement Competence:** experiment with adopting a positive attitude if they are not feeling confident as they learn a new skill, and describe how doing so affects their skill development; **Healthy Living:** with respect to healthy development, recognize and appreciate the factors they can influence, and accept and work with the factors over which they have less influence)

Healthy Relationships*

- A1.4** apply skills that help them build relationships, develop empathy, and communicate with others as they participate in learning experiences in health and physical education, in order to support healthy relationships, a sense of belonging, and respect for diversity (e.g., **Active Living:** be willing to be anyone's partner for physical activities and be welcoming of everyone when working in small groups; **Movement Competence:** when practising throwing and catching, talk with a partner to decide which piece of equipment to use and what distance to stand apart from each other; **Healthy Living:** demonstrate awareness of doing or saying things in a way that acknowledges the unique characteristics of others in a positive way rather than in a disrespectful or hurtful way)

Self-Awareness and Sense of Identity*

- A1.5** apply skills that help them develop self-awareness and self-confidence as they participate in learning experiences in health and physical education, in order to support the development of a sense of identity and a sense of belonging (e.g., **Active Living:** show awareness of family activities that support physical and mental health – such as family walks, family meals, and times for relaxing together – by explaining how they use a Healthy Living calendar on the fridge in their home to plan and record such activities;

Movement Competence: check whether they feel stable when performing a static balance and adjust their position if they do not; check to see if they are starting to feel more sure of themselves as they practise static balances; **Healthy Living:** identify some of the characteristics that make them unique, showing an understanding that we all have things that make us unique, whether they are visible on the surface or not, such as different abilities and different physical attributes)

Critical and Creative Thinking*

- A1.6** apply skills that help them think critically and creatively as they participate in learning experiences in health and physical education, in order to support making connections, analysing, evaluating, problem solving, and decision making (e.g., **Active Living:** come up with ideas for things they could do to be physically active in their family's home; **Movement Competence:** after performing a movement sequence, reflect on what they could have done differently to make the transitions from one movement to another smoother; **Healthy Living:** plan what they might bring to a family picnic or a community potluck, focusing on healthy foods and healthy practices, and give reasons for their choices)

Strand B

Active Living

OVERALL EXPECTATIONS

By the end of Grade 3, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

SPECIFIC EXPECTATIONS

B1. Active Participation

By the end of Grade 3, students will:

- B1.1** actively participate in a wide variety of program activities (*e.g., tag games, cooperative games, movement exploration with equipment, dance, outdoor activities*), according to their capabilities, while applying behaviours that enhance their readiness and ability to take part (*e.g., trying new activities, being engaged and maintaining movement throughout the activity, actively cooperating with peers, having the required equipment to take part, accepting and showing respect for others in the group, listening actively, following rules, playing fair*) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “You and your classmates will be participating in a lot of different physical activities together this year. Remember, when playing with others, it’s always important to show respect and to follow the rules. What are some examples of showing respect and following rules in your daily life?”

Students:* “We show respect for other people and for things, too. We show respect for other cultures, for our own family and other people’s families, for our friends, and also for the environment. We show respect for other people by working well together at school or greeting people politely when we are introduced.” “We show that we respect the environment by turning off lights when we are not in the room, by not littering, and, whenever we can, by walking, wheeling, or biking instead of using a car.” “We also follow many different kinds of rules at home and in our communities. For example, a rule that we follow to stay safe is to always tell an adult when we are going to play outside, so they will know where we are.”

- B1.2** demonstrate an understanding of factors that contribute to their personal enjoyment of being active (*e.g., having the opportunity to participate fully in all aspects of an activity, having support from their peers, being exposed to a variety of activities, being outdoors*) as they participate in a wide variety of individual and small-group activities [A1.1 Emotions, 1.5 Self]

Teacher prompt: “What kinds of physical activities do you like best?”

Students: “I like games in which everyone gets to play and people are not eliminated. If you get eliminated, you do not get the chance to play and get better at the activity.” “I like outdoor activities, where I feel connected to the land. I can breathe fresh air, listen to the water ripple, and hear the birds.”

- B1.3** describe the physical and mental benefits of participating in physical activity every day (*e.g., physical benefits, such as better sleep, more energy, reduced risk of getting sick; social benefits, such as improved interaction with peers, greater empathy, stronger interpersonal skills, improved independence; emotional/mental benefits, such as stress release, greater self-confidence, improved concentration*) [A1.2 Coping, 1.6 Thinking]

Teacher prompt: “Being physically active has many benefits, such as giving us more energy to play with friends. What are some other benefits of being active every day?”

Student: “I have so much fun when my friend and I go skating after school. Being active every day helps me feel alert and prepared for school.”

* Throughout this curriculum, student responses often follow the teacher prompts. They are provided to illustrate content, and do not attempt to capture the speech patterns, syntax, or word choices typical of students in this grade.

B2. Physical Fitness

By the end of Grade 3, students will:

B2.1 **Daily physical activity (DPA):** participate in moderate to vigorous physical activity, with appropriate warm-up and cool-down activities, to the best of their ability for a minimum of twenty minutes each day (*e.g., moving to music at a variety of speeds during warm-up, participating in a variety of dance activities, moving on scooter boards*) [A1.3 Motivation, 1.5 Self]

B2.2 identify new capabilities and other benefits that may result from improved cardio-respiratory fitness (*e.g., being able to sustain activity over a greater distance or longer period of time, requiring shorter rest periods, feeling better after activity*) [A1.6 Thinking]

Teacher prompt: “We have been doing a lot of physical activities that work our hearts over the past two weeks. How will continuing to do this type of activity improve your fitness?”

Students: “Physical activity is good for the heart because the heart is like other muscles and it works better when it gets exercise. Today I snowshoed all the way up the hill and didn’t need to stop and take a break.” “I find it a lot easier to push myself up a ramp in my wheelchair since I’ve been doing exercises to build up my arm strength.”

B2.3 assess their degree of physical exertion during cardiorespiratory fitness activities, using simple self-assessment methods (*e.g., talk test, breath sound check, increase in heart rate or breathing rate, change in how one feels during the activity*) [A1.5 Self, 1.6 Thinking]

Teacher prompt: “How did you check how you were feeling during today’s activity?”

Student: “I did the talk test. I knew my heart and lungs were working too hard because I couldn’t breathe and talk with my partner while I was running. I needed to slow down for a while to catch my breath.”

B2.4 develop and act on personal goals related to physical activity (*e.g., jumping rope continuously for a specified period of time, doing something active indoors or outdoors with family members on the weekend*) [A1.3 Motivation, 1.5 Self, 1.6 Thinking]

Teacher prompt: “What goal have you set for yourself, and how will this goal help you?”

Student: “My goal is to be able to do all the DPA activities without needing to stop and rest in the middle. When I can do that, I’ll know that I’m getting fitter and healthier.”

B3. Safety

By the end of Grade 3, students will:

- B3.1** demonstrate behaviours and apply procedures that maximize safety and lessen the risk of injury, including the risk of concussion, for themselves and others during physical activity (e.g., *self-monitoring, being in control of themselves and aware of their surroundings, cooperating with others, abiding by rules and playing fair, communicating positively to help others be safe, using equipment appropriately both in class and on the playground*) [A1.4 Relationships, 1.5 Self]

Teacher prompt: “What do you need to do to be safe when playing wall ball? When using a scooter board?”

Students: “When I’m playing wall ball, I need to be aware of how much space there is around me and also of how hard I throw. If I throw the ball too hard at the wall, it may come back really fast and hit me or someone else.” “When I’m using a scooter board, I need to be careful not to get my fingers caught underneath. I should always sit or kneel and not stand on the board. I need to keep my hair away from the wheels. I need to stay in control when I move and be careful not to bump into other people or things.”

- B3.2** describe how to respond to accidents or injuries, including concussions, that are incurred while participating in physical activity (e.g., *remain calm, stop all activity immediately and hold the equipment, ask an injured person if they need help, tell an adult what happened, avoid crowding the person who is injured*) [A1.1 Emotions, 1.2 Coping, 1.6 Thinking]

Teacher prompt: “If you hit your head accidentally while playing hockey with friends outside or on a community team, what would you have to do?”

Student: “I would have to stop playing immediately to help prevent further injury. Then I would have to tell my parents and my coach. I would then visit my doctor and ask my parents to report the injury to my principal, even though it didn’t happen at school, so that the principal can start a return-to-school plan for me.”

Movement Competence: Skills, Concepts, and Strategies

OVERALL EXPECTATIONS

By the end of Grade 3, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

SPECIFIC EXPECTATIONS

C1. Movement Skills and Concepts

By the end of Grade 3, students will:

- C1.1** perform controlled transitions between static positions, using different body parts and shapes and different levels, with and without equipment (*e.g., move smoothly between yoga positions, from a stork balance to a standing-scale balance, from a knee scale on a bench to a standing position on the bench*) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “Create a balance by making a twisted shape with your body at a low level and another using a wide shape at a medium level. When you are ready, demonstrate a controlled transition between the two balances. What helps you control the transition?”

Student: “To move in control from one balance to another, I keep my eyes focused on one spot, I move slowly, and I hold my muscles tight. I can move more smoothly if I take a breath before I move, then let my breath out slowly as I’m moving. I also need to think about the order of my movements.”

- C1.2** demonstrate the ability to jump for distance or height, using two-foot and one-foot take-offs, while remaining in control (e.g., *jump high over lines or blocks; jump far past markers, over beanbags, or into a hula hoop that is held horizontally a short distance above the ground*) [A1.5 Self]

Teacher prompt: “To jump far or high and land safely, what do you need to do?”

Student: “I need to start by bending my knees and crouching, so when I take off, I can push hard on the ground and stretch out my body to get farther or higher. To land safely, I need to bend my knees to cushion my landing and keep my feet apart, my head up, and my arms out.”

- C1.3** perform a variety of locomotor movements with and without equipment, alone and with others, moving at different levels, using different pathways, and travelling in different directions (e.g., *leap for distance in a zigzag pathway; alternate between walking and sprinting in a warm-up activity; travel sideways, alternately reaching high then bending low to touch the ground; move as close to others as possible without touching them, then far from others to find their own space; skip with a partner, matching their steps and arm actions; make patterns with a scarf; make up a movement sequence in response to action words or words of a poem*) [A1.3 Motivation, 1.4 Relationships]

Teacher prompt: “When you are changing direction or moving around an object, how is your movement different from when you are going in a straight line?”

Students: “I slow down a little to make sure I am in control.” “I hold tight to my walker, look to make sure the way is clear to move it, and then turn it in the new direction.”

- C1.4** send and receive objects of different shapes and sizes in different ways, using different body parts, at different levels, and using various types of equipment (e.g., *throw a sponge ball underhand and overhand through a hoop with their dominant hand; catch an object such as a rubber chicken or beanbag, using two hands both above and below the waist; throw and catch a ball, using scoops or soft lacrosse sticks, over a line, a low net, or a bench; kick a ball with the right foot and then the left to a partner in a specific targeted area and then receive it back; use specialized objects and equipment to assist with catching, such as a textured ring or ball for easier gripping*) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “In how many different ways can you and your partner send and receive a tennis ball over a bench? How about a beanbag? A beach ball? What about when you are using scoops?”



Teacher prompt: “As you throw to a partner, what are your feet doing?”

Student: “I take a step as I throw the ball. If I am throwing with my right arm, I step with my left foot because I get more power that way. Stepping towards the target also helps me to make the ball go where I want it to go.”

C1.5 retain objects of different shapes and sizes in different ways, using different body parts and equipment (e.g., carry a beach ball while running and tag others with it in a game; balance a ball on a racquet; hold a plastic ball in a scoop while jogging; control a ball with right and left feet while moving around pylons; bounce a ball using dominant and non-dominant hands while seated or kneeling) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “What can you do to maintain control as you are moving (dribbling) a ball with your feet?”

Student: “I bend my knees and use the sides of my feet to keep the ball close to my feet as I move it.”

Teacher: “Can you dribble the ball using both your left foot and your right foot? Why is it important to be able to dribble using both feet?”

Student: “It lets me move in different ways quickly and makes it difficult for others to get the ball away from me.”

C2. Movement Strategies

By the end of Grade 3, students will:

C2.1 demonstrate an understanding that different physical activities have different components (e.g., movement skills, rules and boundaries, conventions of fair play and etiquette), and apply this understanding as they participate in and explore a variety of individual and small-group activities [A1.1 Emotions, 1.4 Relationships, 1.6 Thinking]

Teacher prompt: “When you are demonstrating your dance sequence to others, what things do you need to think about to make your demonstration most effective?”

Student: “We should have a ‘front’ for our sequence, so our audience can see well. We should have a starting position that we hold still.”



Teacher prompt: “What skills are you using at each station in the activity circuit? What guidelines do you need to follow so that the activity goes well?”

Student: “We are practising different throwing, catching, and jumping skills at different stations. At the first jumping station, we are working on jumping to touch the wall as high up as we can. At the second jumping station, we are trying to jump as far as we can from the line. There are a few throwing and catching stations where we are practising throwing and catching by throwing through hoops, throwing at a target, and catching with our hands, with scoops, and when holding small nets, blankets, or towels with a partner. At each station, we take turns and share the

equipment. When the music stops, we stop right away and get ready to move to the next station. We record how we are feeling and how we are doing on our tracking sheets.”



Teacher prompt: “When playing a tag game like cat and mouse, how do you play fairly, showing use of etiquette?”

Student: “I follow the rules. If I am tagged, I switch roles to be a chaser without arguing.”

- C2.2** apply a variety of simple tactics to increase their chances of success during physical activities (e.g., assume a ready position in preparation to receive the ball when playing small-sided games such as two-on-two or to be ready for a quick start in a race; practise a balance routine on a line in the gymnasium while waiting for a turn on a balance beam or a bench) [A1.3 Motivation, 1.5 Self, 1.6 Thinking]*

Teacher prompt: “What did you and your partner do well when working together in your activity? What could you work on next time?”

Student: “We worked together well when we were playing the ‘popcorn’ game. In this game, you have to try to bounce the balls off the parachute while other people try to keep throwing the balls back onto the parachute. My partner was beside me and we worked well together because we cooperated to lift the parachute, then ‘snap’ it down quickly together to bounce the balls off. Next time, we could work at paying attention the whole time so we are ready when the balls come our way.”



Teacher prompt: “If you have a medical condition or a physical disability, what can you do to improve your chances of success in a particular physical activity?”

Student: “I can do most things in physical education but because of a congenital heart disease, I sometimes need to adjust *how much* physical activity I do. If I need to make a change, my health care providers, my teacher, and I work together to make the activity work better for me.”

* Critical and creative thinking skills and processes are involved in choosing or devising tactical solutions at any age. However, the focus of social-emotional learning skill development shifts with the student’s stage of development, and this shift may be evident in the context of applying tactical solutions. Students in Grades 1–3 may be focusing on identifying and managing emotions and learning about themselves (e.g., understanding that experiencing success in performing new movement skills leads to increased confidence and to an awareness of themselves as competent movers); students in Grades 4–6 may be ready to strengthen skills for interacting with others, persevering, and coping with challenges; and students in Grades 7 and 8 may be prepared to focus on deepening thinking skills and their understanding of themselves and others.

Strand D

Healthy Living

Instruction should focus on the overall expectation (D1, D2, D3 in the chart below) and should, where possible, be planned to illustrate connections across topics (listed in column 1) in an integrated way. The chart provides a brief summary of topics to support learning about health concepts, making healthy choices, and making connections for healthy living.

HEALTHY LIVING LEARNING SUMMARY BY TOPIC FOR GRADE 3

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating	D1.1 Food origins, nutritional value, and environmental impact	D2.1 Oral health, food choices	D3.1 Local and cultural foods, eating choices
Personal Safety and Injury Prevention	D1.2 Concussion awareness	D2.2 Safety guidelines outside of class	D3.2 Real and fictional violence
Substance Use, Addictions, and Related Behaviours	D1.3 Impact of use of legal/illegal substances	D2.3 Decision making – substance use / behaviours	
Human Development and Sexual Health	D1.4 Healthy relationships, bullying, consent D1.5 Physical and social-emotional development		D3.3 Visible, invisible differences, respect
Mental Health Literacy	D1.6 Brain stress response system		D3.4 External factors that contribute to stressful feelings

OVERALL EXPECTATIONS

By the end of Grade 3, students will:

- D1. demonstrate an understanding of factors that contribute to healthy development;**
- D2. demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;**
- D3. demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others’ health and well-being.**

SPECIFIC EXPECTATIONS

D1. Understanding Health Concepts

By the end of Grade 3, students will:

Healthy Eating

- D1.1** demonstrate an understanding of how the origins of food (*e.g., where the food is grown, harvested, trapped, fished, or hunted; whether and how it is processed or prepared*) affect its nutritional value and how those factors and others (*e.g., the way we consume and dispose of food*) can affect the environment [A1.6 Thinking]

Teacher prompt: “Almost all the food we eat is processed in some way. Can you describe the difference between minimally processed and highly processed foods – for example, between a baked potato and instant mashed potatoes, and between prepackaged apple slices and sweetened apple sauce?”

Student: “Unprocessed foods are foods that are raw or in their original form. Processed foods have been changed in some way to help preserve them or make them more convenient to use or easier to sell. Minimally processed foods, like bagged apple slices or frozen vegetables, haven’t been changed very much. Highly processed foods, like instant mashed potatoes or sweetened breakfast cereals, have changed a lot from the way they were to begin with. The more that food is processed, the more nutrients it may lose; however, some types of minimal processing, such as freezing, can help food retain nutrients.”

Teacher: “The way our food is produced, processed, and distributed can have environmental impacts. The way we consume and dispose of food – potentially resulting in food loss and food waste – can also have environmental impacts. What are some of these impacts and what are some choices we can make to reduce them?”

Student: “The way highly processed foods are manufactured and the way they have to be shipped can increase air and water pollution and contribute to other environmental problems. In addition, packaging creates extra waste that is hard to recycle. To lessen our environmental impact, we can use more unprocessed or minimally processed foods. We can opt for reusable water bottles and food containers. When cooking at home, we can make sure to use perishable items first and remember to eat our leftovers.”

Personal Safety and Injury Prevention

- D1.2** demonstrate an understanding of concussions and how they occur, as well as an awareness of the school board’s concussion protocol [A1.5 Self, 1.6 Thinking]

Teacher prompt: “Physical activity brings great benefits that can last a lifetime. However, physical activity may involve some risk. Sustaining a concussion is one of those risks. What is a concussion and how might it occur during physical or other activities?”

Student: “A concussion changes the way the brain normally functions. It can occur as the result of a bump to the head, neck, or body that causes the brain to move rapidly within the skull – for example, if someone accidentally runs into a goal post during a soccer game or collides with another student during recess. I know that even when I wear a helmet, my brain can still be injured, as the helmet was designed to protect my skull but not to prevent concussions. You can’t see right away that a concussion has happened, but there can be signs and symptoms afterwards.”

Teacher: “If a student suffers a hit to the head or neck while playing soccer during recess and acts differently – seems more angry or more sad – afterwards, could these increased emotions be related to the hit?”

Student: “Yes, if your brain is injured, it can affect your emotions, behaviour, and mental health. The student who got hit needs to tell a teacher so the school board can follow through with the steps necessary whenever a student has a concussion.”

Substance Use, Addictions, and Related Behaviours

- D1.3** demonstrate an understanding of different types of legal and illegal substance use (e.g., dependency on nicotine in cigarettes or vapour products, or caffeine in coffee, energy drinks, and colas, or sugar and salt in sports drinks, or alcohol in beer, wine, and spirits) and both the mental and physical impacts of problematic use of these substances on themselves and others (e.g., dependencies or addictions, relationship stresses, financial stresses, legal issues, health issues, environmental issues) [A1.4 Relationships, 1.5 Self]

Teacher prompt: “When a family member is consuming alcohol in a harmful way, there is an impact on that person, and there is also an impact on others. What impact does it have on others in the family?”

Student: “People who consume alcohol in a harmful way may not be able to take good care of their families. They may miss important events, spend money that is needed for other things on alcohol, or get involved in arguments. Sometimes they may become emotionally or physically abusive.”

Teacher: “Energy drinks, pop, and sports drinks are not illegal substances, but consuming too much of them can still lead to problems. What problems might be associated with drinking too much of these kinds of drinks?”

Student: “Drinking too much of these drinks can give you more caffeine, sugar, or salt than is good for your body. Too much caffeine can make you jittery or too excited and may even make you addicted. When you are addicted to caffeine, you sometimes get a headache when you do not have the caffeine. Too much sugar can lead not only

to tooth decay but also to many other health problems. Too much salt makes your blood pressure go up and is not good for the heart. Also, you can get too full drinking these drinks and then not eat enough healthy foods.”

Human Development and Sexual Health

- D1.4** identify the characteristics of healthy relationships (*e.g., accepting and respecting differences, avoiding assumptions, being inclusive, communicating openly, establishing and respecting personal boundaries, listening, showing mutual respect and caring, being honest*) and describe ways of responding to bullying and other challenges (*e.g., exclusion, discrimination, peer pressure, abuse*) and of communicating consent in their interactions with others [A1.1 Emotions, 1.2 Coping, 1.4 Relationships]

Teacher prompt: “Consider different types of relationships – with friends, siblings, parents, other adults – and think about the kinds of behaviour that help to make those relationships healthier. What can you do if you are having problems with a relationship?”

Students: “I can tell the person how I’m feeling, and we can try to work something out that we both agree on. If we can’t solve the problem ourselves, we could try to get advice from a trusted adult. It’s normal for friends to disagree sometimes, but we always need to be respectful of each other’s feelings and boundaries. It might be a good idea to spend some time apart until we can communicate openly and listen respectfully.” “I can remember that just being kind is always a good place to start. For example, when a new student joins our class, I could invite them to sit with us for lunch.”

- D1.5** identify factors (*e.g., sleep, food, physical activity, heredity, environment, support from a caring adult, sense of belonging, peer influence*) that affect physical development (*e.g., of hair, skin, teeth, body size and shape*), social-emotional development (*e.g., of self-awareness, adaptive skills, social skills*), and the development of a healthy body image (*e.g., of the ability to enjoy, respect, and celebrate one’s body, to acknowledge one’s thoughts and feelings about it, to accept its shape and size and to focus instead on what it can do*) [A1.1 Emotions, 1.2 Coping, 1.3 Motivation, 1.5 Self]

Teacher prompt: “Our body image is the way we think and feel about our physical appearance. When you have a healthy body image, most of your feelings about your body and appearance are positive. You feel comfortable and confident in your body, and you accept and appreciate it. What are some ways of developing a healthy body image?”

Student: “I can focus on caring for my body and respecting what it can do. I can spend time doing physical activities that I enjoy, such as climbing and dancing. It’s important to remember that everyone’s body is unique, so it’s not helpful to compare my body to anyone else’s.”



Teacher prompt: “There are factors that affect your development that you can control and other factors that you cannot control. Can you give me examples of both types of factors?”

Student: “I can’t control my heredity, which can affect my body size and shape, skin colour, and type of hair. I can’t control my family situation, or my cultural background, or where I grow up. I can usually control how often I brush my teeth, what foods I choose to eat from those that are available, how much I talk about and focus on my appearance, how I choose my friends, and some of the activities I do.”



Teacher prompt: “Having a sense of belonging and of being accepted, understood, and listened to is important for emotional development. How can you show acceptance or understanding of everyone, regardless of shape and size, ability, background, family, skin colour, culture, who they love, or the way they do things?”

Students: “I can stand up for someone who is being teased because someone thinks they are different. I could try to learn more about people who do things differently than I do – such as learning about how some people who are deaf can talk using their hands, how some people with physical disabilities move with a wheelchair, or what someone who has a different religion from mine believes in.” “I can pay attention to what people do for me to make me feel that I’m included and that I belong, then try to do the same for others.”

Mental Health Literacy

- D1.6** explain how the brain responds (i.e., the brain’s stress response – fight, flight, freeze) when it thinks there is a threat and how that response might affect thoughts, emotions, and actions [A1.1 Emotions]

Teacher prompt: “If our brain senses that we are worried about a threat or danger, it sets off an alarm to alert us by making us feel that something is not okay – it might make our heart beat a little faster, or our stomach might feel upset. This alarm can be very important in getting us ready to take action. But sometimes, like a real alarm, the ‘alarm’ in our body can be too sensitive and we experience a ‘false alarm’ – we get nervous feelings in our body, even when there is nothing really to be afraid of. This is our brain’s way of letting us know that there is something we need to pay attention to. When the alarm goes off, we need to figure out if there is a real threat or not. Then it’s easier to know how to respond. What are some of the things that you think can make this alarm go off in our body? What do you do about it?”

Students: “When I heard a sound last night, my heart raced and I couldn’t get back to sleep. Later I figured out it was just the cat jumping off the bed.” “When I have to share my work in front of the class, I get butterflies in my stomach. It helps me to take a few deep breaths and remember that it’s okay to feel a bit nervous and that I’ll get through it.”

D2. Making Healthy Choices

By the end of Grade 3, students will:

Healthy Eating

- D2.1** demonstrate an understanding of the importance of good oral health to overall health, and assess the effect of different food choices on oral health [A1.3 Motivation, 1.5 Self]

Teacher prompt: “Problems with teeth or gums can be painful, can make it difficult to eat, and can affect our appearance. Oral health problems can also contribute to health problems that affect other parts of the body, like the heart, lungs, and digestive system. We can keep our teeth healthy by brushing and flossing and going to the dentist for regular checkups. Being careful about what we eat can also help. What kinds of foods should you eat only in smaller portions, or only occasionally? What could you eat in larger portions, or more often?”

Student: “I should only have sugary foods and beverages – like soft drinks, fruit juices, and foods like caramel popcorn that stick to your teeth – on occasion or in small portions. I can eat popcorn without the candy coating more often, have bigger servings of vegetables such as carrots or radishes, and make water my drink of choice.”

Personal Safety and Injury Prevention

- D2.2** apply their understanding of good safety practices by developing safety guidelines for a variety of places and situations outside the classroom, including online (*e.g., guidelines for water safety; guidelines and protocols for safe drinking water; safe routes and practices for going to school; home fire safety and emergency plans; safe camping checklists; guidelines for safe online communication; guidelines for personal hygiene and the prevention of infectious diseases; guidelines for proper use of hand sanitizers; wildlife safety precautions; guidelines for managing allergies; Halloween safety practices; rules for behaviour around guide dogs, other service animals, and animals in general*) [A1.6 Thinking]

Teacher prompt: “What are some examples of how you might prepare yourself or your family to respond in an emergency – like a fall into deep water or a house fire?”

Student: “In an emergency, it helps to have a plan. To prepare for an emergency around water, I could learn basic swimming skills, such as finding the surface, supporting myself at the surface, and swimming a short distance. I could also learn about basic boating safety rules, such as wearing a personal flotation device whenever I’m in a boat and staying with the boat if it overturns. To prepare for a home

emergency like a fire, I could help make a family escape plan that we could use in case of fire, with escape routes and meeting places.”

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Teacher prompt: “How do you stay safe when walking to school?”

Student: “I am careful when going by driveways and parking lots. I make eye contact with drivers before crossing the road, so that I know they have seen me. I walk with someone else.”

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Teacher prompt: “How do you stay safe when you are doing an Internet search, or when you are playing an online game?”

Student: “I know that there is information online that is untrue, hurtful, and not okay for kids. Sometimes there are advertisements or links that are confusing, and I feel uncomfortable or unsafe. Sometimes something pops up on my screen out of the blue or what I’m seeing suddenly changes and I don’t understand what happened. When I see something I didn’t expect to see or something I know is wrong, I should stop and tell an adult.”

Substance Use, Addictions, and Related Behaviours

- D2.3** apply decision-making strategies to make healthy choices about behaviours and the use of various substances in ways that could lead to dependencies, identifying factors that should be considered (*e.g., short-term use of medications can be helpful for an illness, but misuse of some medications could lead to dependency or harm; moderated television watching or computer use can provide healthy entertainment or new learning or be necessary to complete school work, but too much screen time can reinforce sedentary habits and inactivity, which can lead to social isolation and increased vulnerability to physical and mental health problems; cultural teachings can provide guidance when considering the impact of using substances*) [A1.5 Self, 1.6 Thinking]

Teacher prompt: “What can you do to make healthier choices about using substances or about behaviours that could lead to dependencies?”

Student: “I need to think about what is healthy for me and what could be harmful to my physical and mental health and also what is legal and illegal. I can collect information and check facts about what I hear. I can find out where to get help if needed. I can pay attention to my choices and my behaviour and think about what needs to change. I can discuss things that are a problem with a friend or an adult and start looking for solutions.”

D3. Making Connections for Healthy Living

By the end of Grade 3, students will:

Healthy Eating

- D3.1** explain how local foods and foods from various cultures (*e.g., berries, curries, chapatis, lychees, kale, lentils, corn, naan, wild game, fish, tourtière*) can be used to expand their range of healthy eating choices [A1.6 Thinking]

Teacher prompt: “Why is it a good idea to eat local foods when they are available?”

Student: “They are usually more nutritious and taste better, and are better for the environment, because they don’t have to be shipped so far.”



Teacher prompt: “Look at these food guides from around the world. What is the same about these guides? What is different about their recommendations, and why are they still healthy choices?”

Student: “These guides show groupings of food, but the foods in the groups and the number of groups are different. They are still healthy choices because they provide all of the nourishment that people need to stay healthy. For example, the First Nations, Métis, and Inuit guide shows the food groups as a part of a circle. It also shows pictures of some foods from the land, like berries, wild plants, and wild game, and includes healthy living tips that fit with the cultures of First Nations, Métis, and Inuit people.”

Personal Safety and Injury Prevention

- D3.2** explain how the portrayal of fictional violence in various media, both on- and offline (*e.g., television dramas, video games, Internet, movies*), can create an unrealistic view of the consequences of real violence (*e.g., physical trauma, chronic disability, family stress, death*) [A1.1 Emotions, 1.6 Thinking]

Teacher prompt: “Watching violence in movies or on television, or carrying out violent acts in a video game, might make you think that violent behaviour is normal or acceptable. How is violence in the virtual world different from real life?”

Student: “In the virtual world, characters aren’t really hurt. If they are badly hurt in one scene, they may suddenly be all right in the next. In real life, a person involved in violence can be seriously hurt, physically and emotionally.”

Teacher: “Why is play fighting not a good idea?”

Student: “Nobody intends to hurt anybody in a play fight, but someone may get hurt accidentally. If the person who gets hurt gets angry, then the play fighting can turn into real fighting.”

Human Development and Sexual Health

- D3.3** describe how visible differences (e.g., skin, hair, and eye colour; facial features; body size and shape; physical aids or different physical abilities; clothing; possessions) and invisible differences (e.g., learning abilities, skills and talents, personal or cultural values and beliefs, mental illness, family background, personal preferences, allergies and sensitivities) make each person unique, and identify ways of showing respect for differences in others [A1.1 Emotions, 1.4 Relationships, 1.5 Self]

Teacher prompt: “Sometimes we are different in ways you can see. Sometimes we are different in ways you cannot see – such as how we learn, what we think, who we love, and what we are able to do. Give me some examples of things that make each person unique.”

Student: “People live in all kinds of families. Some students live with two parents, some live with one. Some live with parents who are married, some have parents who live apart. Some live with grandparents or caregivers. Various other things make people unique too, like their cultural or faith backgrounds. We also all have unique talents and abilities, and things that each of us finds difficult to do.”

Teacher: “How can you be a role model and show respect for differences in other people?”

Student: “I can include others in what I am doing, invite them to join a group, be willing to be a partner with anyone for an activity, be willing to stand up for others, and be willing to learn about others.”

Mental Health Literacy

- D3.4** reflect on external factors, including environmental factors, that may contribute to experiencing a range of strong feelings, including uncomfortable feelings such as worry (e.g., transitions, such as starting a new grade, moving, or family separation; excessive heat, cold, or noise; unexpected changes in routine; significant losses, such as the death of a family member or pet) and identify ways to help them manage these feelings [A1.1 Emotions]

Teacher prompt: “When might you experience strong feelings in your day-to-day lives?”

Students: “When we start a new grade in September.” “When someone won’t play with me.” “When I have a fight with my friend.”

Teacher: “What are some of the feelings you have in these situations? What do you do to help manage these feelings?”

Students: “Excited! Also a little scared.” “Sad, lonely.” “Frustrated, angry.” “Sometimes, I just take some time by myself.” “Sometimes I talk with a teacher or another person. Or I might give it a bit of time, then try to talk with my friend about it.”

Overview of Grades 4 to 6

The expectations for Grades 4 to 6 build on students' experiences in the primary grades and further develop the knowledge and skills they need for physical and health literacy. Because the base of knowledge, experience, and skills varies from student to student, it is important for instruction to be differentiated to meet a wide range of student needs. The emphasis in the junior grades should be on building students' understanding of themselves in relation to others.

Student Development and Program Implications

Program design and delivery must take into account the physical, cognitive, social, and emotional development of students, as well as their sense of self, or spirit.* The following descriptions of the developmental characteristics of students in the junior grades are general in nature, and individual student characteristics will vary depending on the child's age, sex, gender identity, body size, experience, and background.

Physical Domain

Students in the junior grades tend to have significant individual differences, reflecting a wide range of growth rates and life experiences. Some may have begun a major growth spurt. Sex- and gender-related differences in development are also evident. As they approach puberty, the average weights and heights of the girls will generally be greater than those of the boys. Some students may begin to develop secondary sex characteristics, and some may feel awkward performing skills as they get used to changes in their bodies. As a result, there is a significant need for differentiated instruction and assessment in these grades. Students in these grades also have more developed locomotor and fine motor skills than students in the primary grades and are developing a greater ability to combine motor skills in sequence. Generally, however, their bodies tend to be less flexible than those of the younger students.

Programs for these students should provide opportunities to participate in a wide range of activities and should avoid concentrating on only one type of activity, as this can lead to overuse injuries. Providing a wide range of activities also exposes students to new ideas and experiences that may further encourage their commitment to making active and healthy choices whenever they can. Individual and small-group lead-up activities give all students

* For more information about child and youth development, see "Early Learning Framework Full Report" (for children from birth to 8 years of age); *On My Way: A Guide to Support Middle Years Child Development* (for children ages 6 to 12); and *Stepping Stones* (for youth, ages 12 to 25).

opportunities to be engaged in their learning. Because of the variability in individual development, students will benefit from having a choice of activities or being able to modify activities to suit their varied needs.

Cognitive Domain

Students in the junior grades show a growing capacity for abstract thought and a greater ability to process visual information rapidly. Their attention spans are increasing, and they demonstrate greater thought retention and increased problem-solving abilities. They tend to enjoy challenges, contests, and intellectual activities. They are also generally less ego-centric than students in the primary grades and more conscious of external influences.

Students in the junior grades need opportunities to use their creativity and apply their expanding intellectual capabilities. They like to be involved in making decisions and should be given opportunities to analyse movement and activities, to offer suggestions for improving their skills, to modify activities to give themselves the right level of challenge, and to inquire more deeply about topics that are personally relevant during health discussions. They should have frequent opportunities to question, integrate, analyse, and apply information.

Affective Domain

Peer relationships assume increasing importance in the junior grades. Students are more influenced by their peers and tend to seek peer approval for their actions. They are more likely to become involved in clubs, close social groups, and cliques and may sometimes experience tension with adults as they develop closer relationships with their peers. They may demonstrate a desire to be popular and to assert themselves and often perceive their ability and success in relation to others rather than themselves. They may be more aware of gender role expectations and stereotypes and look to social media, shows, movies, and the Internet, as well as to peers and the community beyond the family, for role models. Relations between sexes can become more complex as students develop.

To help students develop their sense of self and an awareness of their own abilities, likes, and dislikes, programs in the junior grades should encourage them to think in terms of self-improvement rather than peer comparison. To help them develop their own rules and value systems, they also need to be exposed to models of fair decision making and be given many opportunities to think about and solve their own problems. Program activities should emphasize participation and teamwork and help students understand the concepts of fair play, ethics, and healthy competition. Students at this level should be encouraged to ask questions and take responsibility for their learning.

Focus of Learning in Health and Physical Education for the Junior Division

Social-Emotional Learning Skills

For students in the junior division, relationship skills assume increasing importance, and there is therefore an emphasis in this portion of the curriculum on developing the communication skills, social skills, and behaviours needed to work effectively with others. At the same time, students will continue to develop their identity, increase their awareness of self, and further develop skills in identifying and managing emotions, managing stress, and embracing optimism and positive motivation. They will also continue to develop critical and creative thinking skills as they learn to use clear processes for making decisions, setting goals, and solving problems.

Active Living Strand

Students in the junior grades continue to participate in individual and small-group activities, but are introduced to a variety of lead-up activities as well. By examining and understanding the factors that motivate or inhibit involvement in daily physical activity and considering ways of overcoming obstacles to participation, they expand their ability to take responsibility for their own fitness. They continue to build their understanding of the relationship between physical and mental health. They are introduced to new concepts, such as the components of health-related fitness (cardiorespiratory endurance, muscular strength, muscular endurance, and flexibility) and intrinsic and extrinsic factors that affect exertion. They also learn to use a variety of self-assessment and monitoring techniques to identify areas for improvement and set more advanced fitness goals. The study of safety expands to include precautions for accident and injury prevention during physical activity and simple treatment procedures. Students build on their learning from the primary grades about concussions and concussion prevention.

Movement Competence Strand

Students in the junior grades continue to develop stability and locomotor skills as they learn to perform various combinations of movements and to associate movement skills with more specific manipulation skills (i.e., throwing, catching, and retaining). Through exploration and experimentation in a variety of activities, they acquire an understanding of the movement concepts of body awareness, spatial awareness, effort, and relationship as well as an understanding of simple movement principles, such as maintaining a low centre of gravity, as in a “ready position”, to improve stability. Students in the junior grades learn how to relate these concepts and principles to their movement skills in order to improve the quality of movement and further develop their sense of self and their identity as competent movers. They also learn to categorize games and activities on the basis of common features, and they acquire an expanded understanding of activity components, movement strategies, and the use of different tactical solutions to increase success in physical activities.

Healthy Living Strand

In the junior grades, students continue to develop an understanding of the factors that contribute to their physical and mental health and the health of others in their family and community, but with a particular focus on choices and decisions connected to their personal health.

Their ability to make healthy eating decisions is further developed as they acquire additional knowledge about nutrition and nutritional labelling, and as they learn how to understand and manage their food choices and set healthy eating goals for themselves.

As they become more independent and more responsible for their own safety and that of others, they also learn how to assess risk, respond to dangerous situations in person and online, and protect themselves from a variety of social dangers, including bullying, abuse, violence, and a range of technology-related risks. Students continue to build on their understanding of consent and healthy relationships. They learn about the hazards of tobacco, vaping, alcohol, cannabis and other drugs, and addictive behaviours and develop the decision-making and communication skills needed to resist pressures to engage in behaviours that can lead to injury or harm.

Students also learn how to behave inclusively, responsibly, and respectfully with others, in person and online, and to protect their mental health and emotional safety, and that of others, through a better understanding of stereotyping and assumptions and ways of challenging these.

Because students at this age are approaching or beginning puberty, the curriculum expectations provide an opportunity for students to develop the knowledge and skills that they will need to understand the physical, emotional, and social changes that they are experiencing or are about to go through. Topics include reproduction, self-concept, care for self and others, relationships, consent, sexually explicit media, stress management, and decision making.

Students have the opportunity to continue to develop their mental health literacy, deepening their understanding about the connections between thoughts, emotions, and actions, learning about seeking help when needed for their own and others' mental health, and knowing the limits of their ability to help others with mental health-related challenges. They also continue to learn strategies for making healthy choices to support mental health.

Students who are well informed, who have had the opportunity to do some thinking in advance, and who have been able to practise the appropriate decision-making skills are likely to make wiser decisions about their health.

Overall Expectations At a Glance

Strand A. Social-Emotional Learning Skills

Throughout Grade 4, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1.** apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.

Strand B. Active Living

By the end of Grade 4, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

Strand C. Movement Competence

By the end of Grade 4, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

Strand D. Healthy Living

By the end of Grade 4, students will:

- D1.** demonstrate an understanding of factors that contribute to healthy development;
- D2.** demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;
- D3.** demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others' health and well-being.

Strand A

Social-Emotional Learning Skills

This strand focuses on the development of students' social-emotional learning skills to foster their overall health and well-being, positive mental health, and ability to learn, build resilience, and thrive. In all grades of the health and physical education program, the learning related to this strand takes place in the context of learning related to the Active Living, Movement Competence, and Healthy Living strands, and it should be assessed and evaluated within these contexts.

OVERALL EXPECTATION

Throughout Grade 4, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1. apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.**

SPECIFIC EXPECTATIONS

Throughout Grade 4, students will, to the best of their ability:

Identification and Management of Emotions*

- A1.1** apply skills that help them identify and manage emotions as they participate in learning experiences in health and physical education, in order to improve their ability to express their own feelings and understand and respond to the feelings of others (e.g., **Active Living:** recognize feelings of happiness or satisfaction when doing physical activities and keep those feelings in mind when setting goals for fitness and health; **Movement Competence:** manage emotions such as frustration or excitement while playing games in a small group – for example, by identifying that they are frustrated or excited and taking a breath or a quick time-out in order to moderate their feelings; **Healthy Living:** identify new feelings they may experience with the onset of puberty)

* To support program planning, many specific expectations in strands B, C, and D are tagged to indicate the social-emotional skills that can be integrated into teaching and learning associated with the expectation. The tags are given in square brackets after the expectation, and use the identifiers A1.1 Emotions, 1.2 Coping, 1.3 Motivation, 1.4 Relationships, 1.5 Self, 1.6 Thinking.

Stress Management and Coping*

A1.2 apply skills that help them to recognize sources of stress and to cope with challenges, including help-seeking behaviours, as they participate in learning experiences in health and physical education, in order to support the development of personal resilience (e.g., **Active Living:** describe how joining a school-wide activity such as an intramural team or club can help them manage stress and cope with challenges by building social connections; **Movement Competence:** choose equipment that provides an appropriate level of challenge and support to help them succeed in learning or refining a skill; **Healthy Living:** describe how knowing about the physical and emotional changes that will come with puberty can help them cope with those changes when they occur)

Positive Motivation and Perseverance*

A1.3 apply skills that help them develop habits of mind that support positive motivation and perseverance as they participate in learning experiences in health and physical education, in order to promote a sense of optimism and hope (e.g., **Active Living:** recognize that mental health is an intrinsic factor that can have an impact on motivation for exertion; **Movement Competence:** when carrying an object, persevere to find creative ways to protect and retain the object; **Healthy Living:** show awareness of their food choices and habits and persevere in the practice of choosing healthy alternatives)

Healthy Relationships*

A1.4 apply skills that help them build relationships, develop empathy, and communicate with others as they participate in learning experiences in health and physical education, in order to support healthy relationships, a sense of belonging, and respect for diversity (e.g., **Active Living:** use encouraging words to support teammates when playing in small groups, and describe the impact of doing so; **Movement Competence:** cooperate with group members to develop a creative movement sequence; **Healthy Living:** explain what they can do to avoid saying something in a text or on social media that they wouldn't say face to face; identify some of the teachings of First Nations, Métis, or Inuit cultures that can help them strengthen their own relationships)

Self-Awareness and Sense of Identity*

A1.5 apply skills that help them develop self-awareness and self-confidence as they participate in learning experiences in health and physical education, in order to support the development of a sense of identity and a sense of belonging (e.g., **Active Living:** explain what makes them enjoy their favourite activities, and consider what this tells them about themselves; **Movement Competence:** identify which skills they perform with the most confidence and which ones are most difficult for them; **Healthy Living:** set a healthy eating goal that meets Canada's Food Guide recommendations and also suits their own and their family's preferences, needs, and circumstances)

Critical and Creative Thinking*

A1.6 apply skills that help them think critically and creatively as they participate in learning experiences in health and physical education, in order to support making connections, analysing, evaluating, problem solving, and decision making (e.g., **Active Living:** *think through and apply the steps they will take to avoid injury while participating in a physical activity; **Movement Competence:** group different games and activities according to features that the games/activities have in common; explore different body positions [arms up or down, body stretched or loose] when doing a log roll to determine which position works best for keeping the roll straight; **Healthy Living:** with a classmate, brainstorm ways of avoiding unhealthy behaviours or situations that make them feel uncomfortable, and list healthy alternatives)*)

Strand B

Active Living

OVERALL EXPECTATIONS

By the end of Grade 4, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

SPECIFIC EXPECTATIONS

B1. Active Participation

By the end of Grade 4, students will:

- B1.1** actively participate in a wide variety of program activities (e.g., lead-up and small-group games, recreational activities, cooperative games, fitness activities, dance activities), according to their capabilities, while applying behaviours that enhance their readiness and ability to take part (e.g., taking the initiative to be involved in the activity, being open to playing different positions and playing in different groups, respecting others' ideas and opinions, encouraging others, speaking kindly, maintaining self-control at all times)
[A1.3 Motivation, 1.5 Self]
- B1.2** demonstrate an understanding of factors that contribute to their personal enjoyment of being active (e.g., knowing rules of etiquette and fair play will be observed, having the opportunity to think creatively and adapt activities to individual needs or preferences, being physically and emotionally comfortable in the activities), as they participate in a wide variety of individual and small-group activities and lead-up games
[A1.3 Motivation, 1.5 Self]

Teacher prompt: “How can we make sure that all students have a chance to be active and participate fully in the game? You want the activity to be not too hard, not too easy, but just right. Can you work in your group to come up with another activity that is just right for you and just right for your group? What makes it just right for you and for your group?”



Teacher prompt: “Some people like keeping score in activities. In class we usually don’t. Why not? What are other ways to challenge yourself besides keeping score?”

Student:* “In class we play to have fun and to learn. We don’t want people to be more worried about points than about playing a good game. Keeping score isn’t necessarily a bad thing, but not keeping score can help us cooperate and work as a team, and we can concentrate on using and practising what we have been taught in class. To challenge yourself, you can focus on how well you are playing or how well the team is playing.”

- B1.3** identify factors that motivate participation in physical activity every day at school, at home, or in their communities (e.g., *enjoyment; availability and cost of programs; proximity and accessibility of facilities such as community centres, lakes, or nature trails; availability of bike racks; support of family and peer group; cultural relevance of activities*) [A1.2 Coping, 1.3 Motivation, 1.6 Thinking]

Teacher prompt: “What motivates you to be active at school? What motivates you to be active at home?”

Students: “My friends are joining the new cricket intramural program at lunch. I want to join too.” “At school, having good music to move to during DPA makes me want to be active.” “Our environment club at school is making a school garden. I love being outside, digging in the earth and watching things grow, but I don’t have a chance to do it at home because I live in an apartment. I am active every day as I help with digging and watering.” “My friends and I often cycle on the trails near our house. It’s a lot of fun.” “There is a free drop-in program at our local community centre. I am allowed to go there after school. It’s fun because anyone can go.” “I enjoy dancing and playing games at Friendship Centre socials and feasts.”

* Throughout this curriculum, student responses often follow the teacher prompts. They are provided to illustrate content, and do not attempt to capture the speech patterns, syntax, or word choices typical of students in this grade.

B2. Physical Fitness

By the end of Grade 4, students will:

B2.1 Daily physical activity (DPA): participate in moderate to vigorous physical activity, with appropriate warm-up and cool-down activities, to the best of their ability for a minimum of twenty minutes each day (*e.g., running, wheeling their wheelchair to music, skipping to music, doing light warm-up aerobic activity before stretching, doing parachute activities*) [A1.3 Motivation, 1.5 Self]

B2.2 identify how different physical activities affect the body and contribute to physical fitness and good physical and mental health (*e.g., dancing and cross-country running develop cardiorespiratory fitness and endurance, abdominal crunches develop muscular endurance and/or strength, climbing activities develop muscular strength, yoga develops flexibility and muscular strength, proper stretching activities develop flexibility and prevent injury, outdoor physical activity with a friend contributes to both physical and mental health and provides a sense of belonging*) [A1.3 Motivation, 1.6 Thinking]

Teacher prompt: “Today we will spend a good deal of time stretching during the warm-up and cool-down. However, stretching alone should not be done as a warm-up to an activity, as you could injure your muscles when they are cold. We will begin by doing three to five minutes of light walking, running, or wheeling so that our muscles gradually warm up. We will then slowly stretch each of the major muscles to get them ready for our fitness routine. Which component of fitness will we be working on when we do this, and why is it important?”

Student: “We will be working on our flexibility. Good flexibility can reduce the chance of getting an injury when we are dancing, playing sports, or doing everyday activities.”

B2.3 assess their level of exertion during physical activity, using simple self-assessment techniques (*e.g., taking pulse rates before, during, and after taking part in physical activities; checking how they feel during physical activity*), and explain how intrinsic and extrinsic factors affect the exertion required to perform physical activities (*e.g., intrinsic: level of fitness, state of physical and mental health, energy level; extrinsic: familiarity with the activity; weather extremes such as heat, humidity, or cold*) [A1.1 Emotions, 1.3 Motivation, 1.5 Self, 1.6 Thinking]

Teacher prompt: “Compare how you feel before doing the DPA activity and after. What feels different? What affects how you feel when you are being active?”

Student: “I am definitely warmer and more energized after doing DPA. My heart rate goes up during the activity but goes back to normal fairly quickly after. Lots of things affect how I feel during DPA. The more fit I am, the easier it is to do. It gets easier with practice. I have different amounts of energy on different days. If I have had a good breakfast, a good sleep the night before, and things are going well with

my friends and family, I feel better overall and doing DPA feels easier. The temperature of the room also affects how I feel. I like doing DPA in a room that is a bit cool.”

- B2.4** develop and act on personal fitness goals based on their interests, self-assessments, and feelings when participating in physical activity [A1.1 Emotions, 1.3 Motivation, 1.5 Self, 1.6 Thinking]

Teacher prompt: “Now that you have participated in a variety of physical activities that focus on your heart and lungs, what goals do you want to set that relate to cardiorespiratory fitness?”

Students: “I want to develop my cardiorespiratory fitness so that I can ride my bike without stopping for an hour and take part in a charity fundraiser that’s coming up.”
“I want to develop cardiorespiratory fitness so I can push my wheelchair for that race.”

B3. Safety

By the end of Grade 4, students will:

- B3.1** demonstrate behaviours and apply procedures that maximize safety and lessen the risk of injury, including the risk of concussion, for themselves and others during physical activity (*e.g., cooperating with others, monitoring their own actions and maintaining control of their bodies and equipment, using equipment such as hula hoops and playground apparatus appropriately, ensuring all chairs are pushed in before beginning DPA in the classroom*) [A1.4 Relationships, 1.5 Self]

Teacher prompt: “What kinds of things do you need to remember in order to participate safely in various physical activities?”

Student: “If I’m skipping rope, I need to remember that my personal space is much larger. I need to make sure that there is enough room between my classmates and me so that we are not hitting each other with our ropes. If I’m doing activities with a lot of movement, I need to keep my own movement under control so that I don’t bump into other people. If I’m playing floor hockey, I need to use my equipment properly. I should never raise my stick above my waist.”

- B3.2** describe common precautions for preventing accidents and injuries, including concussions, while participating in different types of physical activity (*e.g., wearing goggles to protect the eyes when playing badminton, wearing a properly fitting helmet to protect the head, tucking in drawstrings to avoid catching them on equipment or other players, fastening all straps on a hockey sledge, staying clear of mud puddles on fields to avoid slipping*) [A1.6 Thinking]

Teacher prompt: “What can you do to prevent a concussion, and to recognize and respond to a suspected concussion?”

Student: “To prevent a concussion, I can be aware of the environment we are playing in and make sure there is nothing that I might trip over or slip on, and inform an adult if I think there is something unsafe. When I’m using the stairs, I can make sure to hold the handrail. I’ve learned that it’s very important to wear a helmet that fits properly when I play a sport like hockey or participate in activities such as skateboarding or cycling, because it will minimize the chance of a skull fracture or a brain bleed. However, I understand that wearing a helmet will *not* prevent a concussion. To recognize a concussion, I need to be aware of the signs and symptoms. Then I might be able to identify them in myself or speak up for a classmate, and I can tell an adult that I suspect a concussion.”

Movement Competence: Skills, Concepts, and Strategies

OVERALL EXPECTATIONS

By the end of Grade 4, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

SPECIFIC EXPECTATIONS

C1. Movement Skills and Concepts

By the end of Grade 4, students will:

- C1.1** perform a variety of controlled static balances and transitions between balances, using a variety of body parts and shapes, at different levels, individually, and with partners and equipment (*e.g., balance on a bench; balance with abdomen on an exercise ball; perform a four-point, three-point, and two-point balance, with weight on hands; stretch to hold a balance while reaching up while their partner holds a balance at a medium level*) [A1.4 Relationships, 1.5 Self]

Teacher prompt: “When balancing with a partner, you can create different shapes when you are supporting each other. You can also create interesting balances together when each person is balancing on their own, for example, with one person in a high shape and one person in a low shape. With a partner, create a balance where a total of three body parts between you are touching the ground. How many different three-point balances can you come up with?”

Student: “We can balance with my hands on the ground and one of my partner’s feet on the ground. We can balance with me on my buttocks and my partner on both feet. We can balance with me on one hand and one foot and my partner on just one foot.”



Teacher prompt: “Check your body position in your plank balance. Make sure your back is straight and your hips are not up in the air or sagging low.”

- C1.2** demonstrate the ability to jump and land, in control, from a low height (*e.g., jump off a bench and land in a stable position*) [A1.5 Self]

Teacher prompt: “To have a stable and safe landing, you need to lower your centre of gravity and have a wide base of support. Check your position. Are your arms out, head up, feet shoulder-width apart, and knees bent? Did you make a soft landing on your feet? Pretend there are bells tied to your shoes, and when you land, you want to land gently enough so you don’t hear them.”

- C1.3** perform different combinations of locomotor movements with and without equipment, alone and with others, moving at different speeds and levels, using different pathways, and going in different directions (*e.g., travel under, over, around, and through equipment in an obstacle course; hop and skip in a zigzag pattern, following a specific rhythm; run and leap over a line; use different levels while performing folk, cultural, and creative dances; perform t’ai chi or yoga movements slowly and at a moderate pace; wheel their wheelchair through an obstacle course, turn, and wheel back*) [A1.4 Relationships, 1.5 Self]

Teacher prompt: “Create a movement sequence. Use a combination of different speeds, directions, pathways, and levels. Make sure to consider how you will transition smoothly from one action to the next.”

- C1.4** send and receive objects of a variety of shapes and sizes at different levels and speeds, using different body parts and equipment, while applying basic principles of movement (*e.g., balance on the balls of their feet to be ready to move when receiving; step forward with the opposite foot and use the whole body when throwing a ball to achieve maximum force; use a scoop to explore different ways of catching a ball or beanbag; perform underhand and overhand throws with their dominant and non-dominant hands while keeping their eyes on the target; kick or trap a ball at various heights while remaining aware of their surroundings; move their feet and transfer their weight backwards to absorb force when receiving; move arms or legs faster to send with more force; toss and catch scarves in front of their bodies, following a simple pattern, when learning to juggle*) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “What do you do when you strike a beach ball in order to get it to your partner?”

Students: “I point my striking hand at my partner to help direct the ball where I want it to go.” “I use a wheelchair. I need to position my wheelchair to face my partner before I hit the beach ball. I also need to position it to suit my strength – I might have to

move it closer to my partner to make sure the beach ball reaches them.” “I am visually impaired. I ask my partner to clap his hands or make a noise to help show me where to send the ball.”

- C1.5** retain objects of various shapes and sizes in different ways, using different body parts, with and without equipment, while moving around others and equipment (*e.g., hold a rubber ring close to their body while running; bounce and cradle a ball while pivoting during a rhythmic gymnastics routine; practise keeping their head up while dribbling a ball between pylons or people with their dominant and non-dominant hand and foot; keep a basketball on their lap while wheeling in a straight line; carry a ball in a scoop from one end of the gym to the other while avoiding contact with others*) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “When you are travelling down the field with your stick and ball, be sure to keep your head up and plan your route to avoid contact with others and with equipment.”

C2. Movement Strategies

By the end of Grade 4, students will:

- C2.1** demonstrate an understanding of the basic components of physical activities (*e.g., movement skills, game structures, basic rules and guidelines, conventions of fair play and etiquette*), and apply this understanding as they participate in a variety of physical activities (*e.g., lead-up games such as two-on-two soccer, beach-ball volleyball, and small-group keep-away; recreational activities such as scooter-board activities, hula hoop challenges, and throwing and catching a disc; cooperative games, such as keep-it-up, team monster walk, and group juggling; fitness activities such as circuits, running, and flexibility exercises; dance activities such as creative movement, folk dance, and First Nations, Métis, and Inuit dances**) [A1.1 Emotions, 1.4 Relationships, 1.6 Thinking]

Teacher prompt: “When your group of three is creating a dance movement sequence, what do you need to do to cooperate to create the sequence? What movement skills and concepts do you need to know to do this?”

Student: “To cooperate, we need to respect the abilities of all the group members and choose activities that everyone can do. Different people can do different moves, depending on their abilities. We may have to compromise about what we include, so that everyone agrees on the parts of the movement sequence. We need time to listen to one another, share ideas, and practise together. To put together interesting routines, we need to use our balancing skills and our understanding of how to move

* When including culturally based dances of Indigenous communities, educators should consult with members of the cultural community to ensure that the dances may be used and that any protocols related to their use are being observed.

in different ways, and also consider how and where our bodies move and how we interact with others.”



Teacher prompt: “When setting up a game of two-on-two keep-away, what rules do you need to agree to as a group?”

Student: “We need to agree on the equipment we will use and the boundaries, and then on any rules we decide to add, like number of passes, number of steps you can take with the ball, or number of seconds you can hold the ball.”

- C2.2** identify common features of specific categories of physical activities (e.g., *individual, target, net/wall, striking/fielding, territory*), and identify common strategies and tactics that they found effective while participating in a variety of physical activities in different categories [A1.6 Thinking]

Teacher prompt: “Games and activities can be grouped into categories that have similar characteristics. You can use similar strategies and transfer learning from one activity to another in the same category. For example, think of some individual activities that have commonalities. What common strategies might you use in activities like dance, figure skating, diving, and synchronized swimming to refine your movements and develop body control?”

Student: “In all of those activities, you need to have good control of your body as you move. I could work on improving my core muscle strength and body control. I could also get feedback from others and experiment with different pieces of the sequence to get new and creative ideas. I can practise the full sequence so that I can move more smoothly from one body position to the next.”



Teacher prompt: “The target games of curling, golf, bocce, horseshoes, lawn bowling, bowling, archery, and blind curling all emphasize accuracy and control as you try to get an object as close as possible to a target. What similar strategies might you use in some or all of these activities?”

Student: “In all of these games, you have to plan the path to the target. In some of the games, if you are playing against someone else, you can use equipment, such as your ball, rock, or beanbag, to block your opponent’s path to the target.”

- C2.3** apply a variety of tactical solutions to increase their chances of success as they participate in physical activities (e.g., **individual activities:** *establish a breathing rhythm when swimming, use a video showing tricks and moves with a skipping rope to learn how to break down a new move into simpler steps; target activities:* *choose a larger target for optimal success; net/wall activities:* *assume a ready position that will allow them to be ready to move in a variety of directions to defend a space; striking/fielding activities:* *throw or kick the ball away from fielders; territory activities:* *help their team keep*

possession of the ball by making short passes to teammates in a keep-away game or by changing directions quickly when dribbling a basketball) [A1.2 Coping, 1.4 Relationships, 1.6 Thinking]*

Teacher prompt: “Why is it important to be on the balls of your feet and ready to move in a net/wall activity?”

Student: “In net/wall activities, you need to be ready to move quickly if the ball comes near you. If you have your feet moving or are on the balls of your feet, you are always ready to react quickly.”



Teacher prompt: “Is it a good idea to hit the object to one place all the time in a striking/fielding activity?”

Student: “In striking and fielding activities, it is best to hit the ball to different places in order to keep the other team guessing.”

* Critical and creative thinking skills and processes are involved in choosing or devising tactical solutions at any age. However, the focus of social-emotional learning skill development shifts with the student’s stage of development, and this shift may be evident in the context of applying tactical solutions. Students in Grades 1–3 may be focusing on identifying and managing emotions and learning about themselves; students in Grades 4–6 may be ready to strengthen skills for interacting with others, persevering, and coping with challenges (*e.g., showing respect and understanding of game etiquette by remaining quiet while opponents take their turn in bocce; cooperating with others to get a ball over a net by striking the ball so others can hit it and moving into position to hit the ball; communicating with teammates; moving with an awareness of others in the same space*); and students in Grades 7 and 8 may be prepared to focus on deepening thinking skills and their understanding of themselves and others.

Strand D

Healthy Living

Instruction should focus on the overall expectation (D1, D2, D3 in the chart below) and should, where possible, be planned to illustrate connections across topics (listed in column 1) in an integrated way. The chart provides a brief summary of topics to support learning about health concepts, making healthy choices, and making connections for healthy living.

HEALTHY LIVING LEARNING SUMMARY BY TOPIC FOR GRADE 4

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating	D1.1 Nutrients	D2.1 Personal eating habits	D3.1 Healthier eating in various settings
Personal Safety and Injury Prevention	D1.2 Safe use of technology D1.3 Bullying, abuse, and non-consensual behaviour	D2.2 Decision making – assessing risk	
Substance Use, Addictions, and Related Behaviours	D1.4 Tobacco and vaping	D2.3 Decisions about smoking and vaping	D3.2 Short- and long-term effects of smoking and vaping
Human Development and Sexual Health	D1.5 Puberty – changes; emotional, social impact	D2.4 Puberty – personal hygiene and care	
Mental Health Literacy		D2.5 Healthy choices to support mental health	D3.3 Stress management (cognitive, behavioural)

OVERALL EXPECTATIONS

By the end of Grade 4, students will:

- D1. demonstrate an understanding of factors that contribute to healthy development;**
- D2. demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;**
- D3. demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others’ health and well-being.**

SPECIFIC EXPECTATIONS

D1. Understanding Health Concepts

By the end of Grade 4, students will:

Healthy Eating

- D1.1** identify the key nutrients (*e.g., fat, carbohydrates, protein, vitamins, minerals*) provided by foods and beverages, and describe their importance for growth, mental and physical health, learning, and physical performance [A1.6 Thinking]

Teacher prompt: “Report what you found from your research about nutrients.”

Students: “You can get calcium, which is important for healthy bones and teeth, from a wide variety of food sources, such as milk or a fortified soy beverage; dairy products like yogurt and cheese with reduced fat and sodium; dark leafy greens; beans or lentils; and sardines or canned salmon.” “Whole grains are a good source of carbohydrates and fibre. Carbohydrates give you energy. Fibre-rich foods help you feel full and satisfied, help your bowels function normally, and help reduce the risk of heart disease later in life. Grain products that are lower in saturated fat, sugar, and salt are best. Choose whole grains, like oatmeal or whole-grain pasta, when possible, because whole grains have more fibre and have not lost nutrients through processing.”

Personal Safety and Injury Prevention

- D1.2** identify risks associated with the use of communications technology, including Internet use, texting, and gaming (*e.g., difficulty developing healthy interpersonal skills and relationships offline; spending too much time online and not enough with family and friends; exposure to online predators; experiencing social isolation, depressed mood, preoccupation with comparing themselves to others and seeking validation, unhealthy sleeping patterns, and other risks to mental health*), and describe precautions and strategies for using these technologies safely [A1.4 Relationships, 1.6 Thinking]

Teacher prompt: “There are many benefits to the prevalence of the Internet and cell phones, including a great increase in our ability to get and share information and to communicate and collaborate with each other. But with these benefits come risks and potential dangers as well, such as exposure to people who ask you for sexual pictures or want you to share personal information. It is helpful to have frequent conversations with a parent or trusted adult about how to use the Internet and their smart phone in order to stay safe. Too much time spent on social media, playing online games, or on our phones is not good for our health and well-being if it interferes with other important parts of our life, like spending time in person with family and friends or getting school work done. What are some things you should do to use this technology safely and in a way that supports your mental health? How can you get help if you get into trouble?”

Students: “I should make sure that a parent or trusted adult knows what I am doing when I’m using any digital device, so I have someone there who can help, if needed. When I can, I should use a computer in a shared space, like a kitchen, living room, or library, instead of alone in my bedroom. I shouldn’t share my password or personal information, like my phone number, the school I go to, or my address.” “I try to limit the amount of time I spend gaming, texting, watching videos, or surfing the Internet, because I know it’s healthier to spend time with people in person or to be outdoors. It’s easy to lose track and spend too much time alone.” “Sometimes I feel bad because my friends’ posts get so many more likes than mine do. Getting away from social media for a while usually helps me feel better.” “I should be aware that things are not always as they seem in the virtual world, and people are not always who they say they are. So, if someone asks me to open an attachment or click on a link, I should not do it. Instead, I should close and delete the message right away, without responding. If anyone asks me to move to a chat room or a website when I’m online, I will check first with a parent or trusted adult. If something makes me feel uncomfortable, confused, or unsafe, I should stop right away and tell an adult instead of trying to solve the problem online. I should also help my friends by reminding them of these tips.”

- D1.3** describe various types of bullying, abuse, and other non-consensual behaviour (e.g., social, emotional, physical, verbal), including cyberbullying (e.g., via social media, apps, e-mail, text messaging, chat rooms, websites), and identify the impacts they can have and appropriate ways of responding [A1.1 Emotions, 1.2 Coping]

Teacher prompt: “What is an example of social bullying? Physical bullying? Verbal bullying? Is one type of bullying any more or less hurtful than another?”

Student: “Social bullying could include leaving someone out of the group, refusing to be someone’s partner, spreading rumours in person or online, sharing someone’s personal information or photos without their consent, or totally ignoring someone. Physical bullying could include pushing someone, pulling their hair, or knocking them down. No one should touch another person without their consent. Verbal bullying could include name calling, mocking, teasing about ability or appearance, including weight, size, or clothing, and making sexist or racist comments in person or online. When any type of bullying is used to target someone because of who they are – their ethnocultural background, gender, abilities, or socio-economic status – then it is also an example of identity-based bullying. If a person tells someone to stop whatever they are doing, they should stop. Any of these kinds of bullying could cause emotional pain. Social or emotional bullying is more difficult to see but it can be just as hurtful, or even worse.”



Teacher prompt: “In cases of abuse, it is not uncommon for the person being abused to know the person who is abusing them. Also, the person being abused does not always recognize that they are being abused. If a friend told you that they had a

secret and that someone in their family was screaming at them a lot, hitting them, touching them inappropriately, or doing something else abusive, how could you help?”

Student: “I would tell my friend to tell an adult that they trust and, if necessary, keep telling other adults, until they get help, because it can be unsafe to keep these kinds of things secret. Along the way, I would listen and be there to support my friend.”

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Teacher prompt: “If you are a bystander to cyberbullying, what can you do?”

Student: “I can stand up for the person who is being bullied online. I can tell the person to get offline and try to help them get help. I can tell an adult I trust.”

Substance Use, Addictions, and Related Behaviours

- D1.4** identify substances (e.g., *nicotine, carbon monoxide, tar*) found in tobacco* and vaping products (e.g., *cigarettes, e-cigarettes, cigars, pipe tobacco, chewing tobacco, snuff*) and smoke, and describe their effects on health

Teacher prompt: “What are the dangers of nicotine? What are the dangers of tar?”

Student: “Nicotine is very addictive and is absorbed quickly into your body. The craving for nicotine can make a person very uncomfortable, and that can be stressful. Tobacco smoke contains tar, which has chemicals that can cause cancer and other illnesses. Tar is made up of thousands of harmful chemicals, and when it is inhaled it can form a sticky layer on the inside of the lungs.”

Human Development and Sexual Health

- D1.5** describe the physical changes that occur at puberty (e.g., *growth of body hair, breast development, changes in voice and body size, production of body odour, skin changes*) and the emotional and social impacts that may result from these changes [A1.1 Emotions, 1.2 Coping, 1.4 Relationships]

Teacher prompt: “During puberty, our bodies undergo many changes. Everyone experiences these changes at different rates and at different times. Increases in weight and body fat are normal. Sometimes it is hard to get used to the changes that are happening so quickly. Feelings can be much more intense. What are some of the feelings you might have as you start to experience changes with with puberty, and how can you manage them?”

* This expectation focuses on understanding that smoking commercial tobacco products is a detriment to health. It does not refer to the ceremonial use of natural tobacco in First Nations and Métis cultures.

Student: “Excitement, happiness, embarrassment, confusion, and fear are some of the feelings I might have. It is sometimes hard to recognize what I am feeling and why things feel different. I know that all of this is a part of growing up. I try to notice what I’m feeling and what is happening, and that helps. I can ask questions, talk with a friend, parent, or trusted adult, and get help if I need it. I can also use some of the strategies that I’ve been learning for taking care of my physical and mental health, such as being physically active.”



Teacher prompt: “What can change socially as you start to develop physically?”

Student: “Relationships with friends can change, because sometimes people start being interested in different things at different times. Some people start ‘liking’ others. They want to be more than ‘just friends’ and become interested in going out. Sometimes people treat you as if you are older than you actually are because of how you look, but you should be treated in an age-appropriate and respectful way. Sometimes classmates, friends, or family make comments or tease you about the changes. That’s not okay.”



Teacher prompt: “Some cultures have traditions associated with puberty that mark the transition from childhood to adulthood. Can you give me some examples of these?”

Student: “In Judaism, a bar mitzvah or bat mitzvah is celebrated at age thirteen, when a person comes of age, according to religious law, and can now participate as an adult in the religious life of the community. Many Indigenous communities have rites of passage that signal that an adolescent is ready to take on an adult role in society.”

D2. Making Healthy Choices

By the end of Grade 4, students will:

Healthy Eating

- D2.1** identify personal eating habits through self-monitoring over time, and set a goal for developing healthier eating habits, on the basis of the recommendations and guidelines in Canada’s Food Guides (*e.g., make water their drink of choice; eat plenty of vegetables and fruits; eat meals with others; help with food shopping and meal preparation at home; trap, fish, hunt, harvest, and cultivate food*) [A1.3 Motivation, 1.5 Self, 1.6 Thinking]

Teacher prompt: “When setting your goal for developing healthier eating habits, what do you need to do to ensure that you accomplish your goal?”

Student: “I need to keep track of where I start and how I am doing. I need to have a plan. I can help to accomplish my goal by talking with my family about healthy eating, learning how to cook simple meals, helping with making my lunch, and trying to eat with friends or family whenever I can.”



Teacher prompt: “Being aware of your eating habits is important. As a Grade 4 student, you don’t always have control over what you eat, but you can do your best to make informed choices to develop healthier personal eating habits. For example, you can make water your drink of choice, if possible. However, healthy eating is about more than just the foods you eat; it is also about where, when, why, and how you eat. Describe a recent eating experience and identify what you might have done to make it healthier.”

Student: “I ate a variety of healthy foods, but I ate alone on the couch while watching television and I didn’t really pay attention to the food I was eating. I can be more mindful of my eating habits and take more time to eat, notice when I am hungry or full, get involved in planning and preparing meals, and really enjoy my food.”

Personal Safety and Injury Prevention

- D2.2** apply a decision-making process (e.g., *identify potential dangers and risks, consider ways to stay safe, consider the pros and cons of each option, consider whether they need to check with an adult, choose the safest option, act, reflect on their decision, consider whether there is anything they could improve for next time*) to assess risks and make safe decisions in a variety of situations (e.g., *when using a wheelchair, cycling, preparing food, going online*) [A1.2 Coping, 1.6 Thinking]

Teacher prompt: “What safety considerations do you need to think about when you go online? Who can help you make safe decisions?”

Student: “I need to remember that the information I find online may not be true, or that it may only show one point of view. The Internet may show or tell me things that are unhealthy, unsafe, or against the law. I need to check anything I find before I believe, repeat, or forward it. I should not share any of my personal information online – for example, my age, my phone number, or where I live. I should not give financial information to anyone online. I know that information about my online behaviour, such as playing games, sharing pictures, or sending texts, can remain recorded for years, and may have consequences in the future, so I am very careful about what I do online. I respect the privacy of my peers by not posting or sharing videos of them without their consent. If someone asks me for any personal information or a personal photo, I should not respond, and I should tell a parent or trusted adult about what happened.”

Teacher: “How can you identify whether a website is unsafe?”

Student: “I need to realize that some websites are unsafe. They can be unsafe if they are asking for personal information or have pop-ups or links that lead to unexpected sites. Some websites are unsafe because they have very negative information, show violence, promote hate, or have images that make me feel confused or uncomfortable. Some websites encourage users to engage in scams or other illegal activities. If I’m not sure, I should ask a parent or trusted adult to guide me to the best sites, and always let them know about the sites I visit.”



Teacher prompt: “What safety considerations do you need to think about when you make a snack after school?”

Student: “I need to think about whether food that needs refrigeration has been kept cold and whether my hands, work surfaces, and utensils are clean. I also need to be sure that I know how to use the appliances and utensils safely.”



Teacher prompt: “Before riding your bike to school, what do you need to think about and what do you need to do to be safe?”

Student: “I should think about what I need to have and how to stay safe. Do I have a helmet that fits right and that’s properly fastened? Do I need to take any precautions because of the weather? What routes can I take, and how much traffic is there on them? How will I carry my books and lunch? Will I be riding with anyone else, and should we ride side by side or in a line? What is my plan if there is a problem, like a crash, or if something breaks on my bike?”

Substance Use, Addictions, and Related Behaviours

- D2.3** demonstrate the ability to make and support healthy, informed choices about smoking and vaping, using their understanding of factors that affect decisions about smoking and vaping and a variety of social-emotional learning skills (*e.g., applying decision-making, assertiveness, and refusal skills; considering alternative coping strategies for stressful situations; thinking in advance about values, cultural beliefs, and personal choices; identifying the pros and cons of both making a change and not making a change; being aware of peer pressure; avoiding situations where people will be smoking or vaping; using conversational strategies, such as saying no strongly and clearly, giving reasons, changing the topic, making a joke, asking a question*) [A1.2 Coping, 1.4 Relationships, 1.6 Thinking]

Teacher prompt: “What are some examples of things that might influence someone to smoke or vape or not to smoke or vape?”

Student: “Kids might be more likely to try smoking or vaping if their friends and family members smoke or vape, or if someone dares them to try, or if it is easy for

them to get the products. They might be less likely to try smoking or vaping if it's harder to get the products because of legal age requirements or if they know someone who got cancer or emphysema from smoking.”



Teacher prompt: “How is tobacco used traditionally in First Nations and Métis societies? What is the difference between the spiritual or sacred use of tobacco in First Nations and Métis cultures and the recreational use of commercially produced tobacco?”

Student: “Among some First Nations and the Métis, tobacco is often used in ceremonies connected to cleansing and communicating with the spirit world. In these cultures, tobacco is one of many sacred medicines, and is often used with three other sacred medicines – cedar, sage, and sweetgrass. In its original form, tobacco has a spiritual purpose. The tobacco used in cigarettes and cigars is harmful to our health and not connected to spirituality.”

Human Development and Sexual Health

- D2.4** demonstrate an understanding of personal care needs and the application of personal hygienic practices associated with the onset of puberty (*e.g., increased importance of regular bathing/showering and regular clothing changes; use of hygiene products; continuing importance of regular hygiene practices, including hand washing, oral health care, and care of prosthetic devices and residual limbs*) [A1.5 Self]

Teacher prompt: “Why is it important to shower and change clothes more often as you approach puberty? What other things do you need to think about?”

Student: “As our bodies change, we perspire more. We should also be aware of spreading germs, and avoid sharing hats, lip gloss, hairbrushes, drinks, or towels.”

Mental Health Literacy

- D2.5** demonstrate an understanding of how choices they make every day can have a positive impact on their mental health (*e.g., taking time to identify what they are feeling [doing a “self check-in” regarding feelings]; getting adequate sleep; engaging in genuine, face-to-face social interaction; being physically active; using mindfulness strategies; having connections to responsible, caring adults; taking part in something “bigger” than themselves that involves giving back to the community*) [A1.2 Coping, 1.5 Self, 1.6 Thinking]

Teacher prompt: “We have talked a lot about healthy choices related to things like healthy eating habits, staying safe, healthy development, and avoiding vaping, smoking, and substance use. Since mental health is a big part of overall health, all our healthy choices also keep us mentally healthy. There are some other things that we can do to take care of our mental health, and we get better at doing them over time, with

practice and support from others. What are some of the things you can do every day to take care of yourself, mentally?”

Student: “Just being aware of your mental health and your feelings is a good start. By paying attention to how you’re feeling, understanding how different things can make you feel, you can be prepared for ups and downs. You can think about how to help yourself or get help from someone else when you need to. Different people do different things to take care of themselves. I think physical activity helps everyone, but for some people, a game of hockey might help, and for others, it might be a quiet walk. For some people, deep breathing is a strategy that might help. For others, talking with a friend or using an app that helps with mindfulness or doing something creative, like drawing, is what might make a difference.”

D3. Making Connections for Healthy Living

By the end of Grade 4, students will:

Healthy Eating

- D3.1** identify ways of promoting healthier eating habits in a variety of settings and situations (*e.g., school, arena, recreation centre, stores, food courts, special events; when camping, having a snack or meal at a friend’s house, eating on weekends versus weekdays*) [A1.6 Thinking]

Teacher prompt: “Our school is a healthy school, and we have a breakfast program and a snack program. How do these programs affect people’s eating habits? How can the programs promote healthier eating habits?”

Student: “The programs give us an opportunity to regularly eat breakfast and offer healthy foods to choose from. They give all the students a chance to prepare and try different kinds of healthy foods that they might not otherwise have and provide an environment to enjoy our healthy food with others. To promote healthier eating habits, there could be a suggestion box where we can submit ideas for healthy food to be included as part of the program.”

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Teacher prompt: “If you had to go directly to a lesson or practice after school, what could you prepare ahead of time for a snack that would be healthy and give you sustained energy?”

Student: “I could cut up vegetables and fruit, prepare a snack-sized portion of lower-fat and lower-sodium cheese, or bring a small container of whole-grain crackers or cereal from home. If I buy a snack, I need to think about what would be the healthiest choice from what is available.”

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Teacher prompt: “What kinds of things might you consider before inviting a friend to your home for a meal or a sleepover?”

Student: “I would ask if my friend has any food allergies or food sensitivities or if they cannot eat certain foods for religious or cultural reasons and make sure my parents know about these. We could also prepare our snacks together, with this information in mind.”

Substance Use, Addictions, and Related Behaviours

- D3.2** describe the short- and long-term effects of first- and second-hand smoke on smokers and on people around them, and the effects of vaping

Teacher prompt: “What are some effects of smoking?”

Student: “Some of the short-term effects can include bad breath and bad clothing and hair odours, and possibly some problems with family and friends, like arguments with parents. Young people who smoke are more likely to try other drugs. Longer-term effects can include addiction, yellow teeth, getting out of breath easily, reduced energy and activity levels, respiratory diseases, and lung or oral cancer. Second-hand smoke makes the air unpleasant to breathe and makes clothing smell. Over the long term, exposure to second-hand smoke increases a person’s risk of getting lung cancer or other respiratory diseases.”



Teacher prompt: “Vaping is not intended for youth or non-smokers. What are some effects of vaping?”

Student: “Vaping is not harmless. Some of the short-term effects on those who vape can include exposure to harmful chemicals, including varying levels of nicotine. Non-smokers who vape can develop a nicotine addiction. Other long-term effects of inhaling the substances used in vaping products are still unknown and continue to be researched.”

Mental Health Literacy

- D3.3** demonstrate an understanding of different strategies they can use to manage stress in situations in which they have some control (*e.g., peer relationships, maintaining life balance*), as well as to adapt to challenging situations over which they have less immediate influence (*e.g., moving to a new home, family stresses, environmental stresses*) [A1.2 Coping, 1.6 Thinking]

Teacher prompt: “Stress is something your body feels when you are worried or uncomfortable about something. It is a part of life, and there are times when stress can be helpful and give you energy or motivation. Being aware of our thoughts and feelings helps us to decide what we can do to support ourselves at challenging times,

both when we have some control or influence over what is causing the stress and when we don't. Different strategies work in different situations. What are some strategies you might use in stressful situations where you have some control?"

Student: "Getting my school work done when I also have a lot of other things to do outside of school, like playing sports or spending time with my friends, is a situation where I may feel stressed but I have some control. I could get help with organizing my time and figuring out when to get things done. I could also talk with my teachers about how I'm feeling."

Teacher: "Now, can you give an example of a situation where you might have less influence over what is creating the stress?"

Student: "If I were feeling stressed and sad because my friend was moving, I wouldn't be able to change what was happening, but I would be able to help myself by writing about my feelings in my journal or finding someone to talk with about my feelings. I might find a way to stay in touch with my friend. I would still feel sad, but all of these things could help me feel a bit better."

Overall Expectations At a Glance

Strand A. Social-Emotional Learning Skills

Throughout Grade 5, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1.** apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.

Strand B. Active Living

By the end of Grade 5, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

Strand C. Movement Competence

By the end of Grade 5, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

Strand D. Healthy Living

By the end of Grade 5, students will:

- D1.** demonstrate an understanding of factors that contribute to healthy development;
- D2.** demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;
- D3.** demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others' health and well-being.

Strand A

Social-Emotional Learning Skills

This strand focuses on the development of students' social-emotional learning skills to foster their overall health and well-being, positive mental health, and ability to learn, build resilience, and thrive. In all grades of the health and physical education program, the learning related to this strand takes place in the context of learning related to the Active Living, Movement Competence, and Healthy Living strands, and it should be assessed and evaluated within these contexts.

OVERALL EXPECTATION

Throughout Grade 5, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1. apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.**

SPECIFIC EXPECTATIONS

Throughout Grade 5, students will, to the best of their ability:

Identification and Management of Emotions*

- A1.1** apply skills that help them identify and manage emotions as they participate in learning experiences in health and physical education, in order to improve their ability to express their own feelings and understand and respond to the feelings of others (e.g., **Active Living:** demonstrate awareness that feeling confident and included can affect a person's motivation to participate in physical activities; **Movement Competence:** describe how different activities can generate a range of emotions, including feelings of calm, satisfaction, energy, and excitement; **Healthy Living:** describe how they would be able to tell if a person is feeling threatened by someone, and identify the actions they could take, as a bystander, to help that person)

* To support program planning, many specific expectations in strands B, C, and D are tagged to indicate the social-emotional skills that can be integrated into teaching and learning associated with the expectation. The tags are given in square brackets after the expectation, and use the identifiers A1.1 Emotions, 1.2 Coping, 1.3 Motivation, 1.4 Relationships, 1.5 Self, 1.6 Thinking.

Stress Management and Coping*

A1.2 apply skills that help them to recognize sources of stress and to cope with challenges, including help-seeking behaviours, as they participate in learning experiences in health and physical education, in order to support the development of personal resilience (e.g., **Active Living:** use problem-solving strategies to make physical activities that seem difficult more fun and interesting; **Movement Competence:** explain how trying different approaches, such as adjusting body position or speed, can help them maintain control of a ball with their feet while running down the field; **Healthy Living:** identify how to get help in different situations – when feeling really sad or worried, in emergencies, when confronted with violence, when being bullied or witnessing someone else being bullied, to prevent injury)

Positive Motivation and Perseverance*

A1.3 apply skills that help them develop habits of mind that support positive motivation and perseverance as they participate in learning experiences in health and physical education, in order to promote a sense of optimism and hope (e.g., **Active Living:** reframe their mindset to focus on strengths when establishing fitness goals; **Movement Competence:** when developing a routine involving balls and locomotor movements, strive to include new elements that they've never tried before; **Healthy Living:** take time to reflect on an event that caused them disappointment, and describe another way they might view that event)

Healthy Relationships*

A1.4 apply skills that help them build relationships, develop empathy, and communicate with others as they participate in learning experiences in health and physical education, in order to support healthy relationships, a sense of belonging, and respect for diversity (e.g., **Active Living:** work collaboratively with peers by taking turns leading warm-up activities; **Movement Competence:** listen closely to a partner's ideas when working with them to create a developmental gymnastics sequence; **Healthy Living:** show respect for others by giving classmates encouragement and praise and by avoiding behaviours such as calling people names or excluding them; show respect for cultural and all other forms of diversity)

Self-Awareness and Sense of Identity*

A1.5 apply skills that help them develop self-awareness and self-confidence as they participate in learning experiences in health and physical education, in order to support the development of a sense of identity and a sense of belonging (e.g., **Active Living:** monitor progress towards meeting their fitness goals, noting improvements and/or areas that need work; **Movement Competence:** describe how knowing their strengths and

areas for improvement can help when they are learning new skills; **Healthy Living:** describe things to think about when determining how they can help a friend who might be experiencing mental health challenges, and identify the boundaries and limits on what they can do on their own and when they might need to get help from a caring adult)

Critical and Creative Thinking*

A1.6 apply skills that help them think critically and creatively as they participate in learning experiences in health and physical education, in order to support making connections, analysing, evaluating, problem solving, and decision making (e.g., **Active Living:** make connections between being active and working towards personal fitness goals and overall mental health; **Movement Competence:** explain the idea of “healthy competition”, what it involves and what it should not involve, and how the presence or absence of those features might affect motivation to participate in physical activity; **Healthy Living:** describe how the media can influence their food choices)

Strand B

Active Living

OVERALL EXPECTATIONS

By the end of Grade 5, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

SPECIFIC EXPECTATIONS

B1. Active Participation

By the end of Grade 5, students will:

- B1.1** actively participate in a wide variety of program activities (*e.g., lead-up games, recreational activities, fitness and endurance activities, dance*), according to their capabilities, while applying behaviours that enhance their readiness and ability to take part (*e.g., encouraging others with positive comments, displaying fair play by respecting the decisions of others*) [A1.3 Motivation, 1.5 Self]
- B1.2** demonstrate an understanding of factors that contribute to their personal enjoyment of being active (*e.g., having the opportunity to modify games to make them more inclusive and to increase opportunities for participation, being exposed to new and different activities such as rubber chicken tag, having the opportunity to respond creatively to music and poetry, being able to take part in activities that emphasize healthy competition with themselves and others, having access to play spaces that are clean and attractive*), as they participate in a wide variety of individual and small-group activities and lead-up games [A1.2 Coping, 1.3 Motivation, 1.5 Self]

Teacher prompt: “What can you do to keep school and community play spaces clean, tidy, and attractive so that you can enjoy being physically active outside?”

Student:* “We can get the school or community to put garbage and recycling containers in the area, use them ourselves, and encourage others to use them. We could also volunteer to plant trees. Trees provide shady places where we can go to keep cool.”

- B1.3** identify factors that can either motivate or make it difficult for people to be physically active every day (*e.g., enjoyment; self-confidence; level of peer support; sense of belonging; availability of transportation, equipment, time, and financial resources; availability of community resources; gender barriers or expectations; personal abilities; accessibility of facilities; personal organizational skills; family support, responsibilities or curfews*), and describe ways of overcoming obstacles to staying active [A1.1 Emotions, 1.3 Motivation, 1.4 Relationships]

Teacher prompt: “Identify a challenge that might make it difficult to be active every day and offer a solution that could help.”

Students: “I have to take care of my younger brother every day after school, so I cannot join an after-school club. Instead, I play outside with my brother at home and sometimes invite a friend to join us.” “I would like to play in a hockey league, but my family does not have time to drive me to the practices and the equipment is too expensive. Instead, I play road hockey with my friends and family after school and on the weekends.” “I want to join an after-school club, but my parents are concerned about me getting home safely. I’m going to suggest asking my friend to join the club too, so we can walk home or take the bus together.”

B2. Physical Fitness

By the end of Grade 5, students will:

- B2.1** **Daily physical activity (DPA):** participate in moderate to vigorous physical activity, with appropriate warm-up and cool-down activities, to the best of their ability for a minimum of twenty minutes each day (*e.g., power walking, wheeling, playing small-sided games, skipping rope*) [A1.3 Motivation, 1.5 Self]
- B2.2** identify the components of health-related fitness (*e.g., cardiorespiratory endurance, muscular strength, muscular endurance, flexibility*) and the benefits associated with developing and maintaining each of them (*e.g., increased cardiorespiratory endurance provides more stamina for prolonged activity, increased muscular strength and muscular endurance improve performance in activities, good flexibility allows for ease of movement during activities*) [A1.6 Thinking]

* Throughout this curriculum, student responses often follow the teacher prompts. They are provided to illustrate content, and do not attempt to capture the speech patterns, syntax, or word choices typical of students in this grade.

Teacher prompt: “Today, you will be doing a variety of fitness activities in this circuit. What is the purpose of each of the different activities?”

Student: “Doing the activities in this fitness circuit helps us work on different areas of fitness. The wall push-ups and crunches help us develop our arm and abdominal muscles. The continuous skipping will help build our cardiorespiratory fitness, and the stretching in the cool-down helps our flexibility when we do bending, twisting, and reaching activities.”

- B2.3** assess a specific component of their health-related fitness (e.g., *cardiovascular fitness, flexibility, muscular strength, muscular endurance*) by noting physical responses during various physical activities, and monitor changes over time [A1.5 Self, 1.6 Thinking]

Teacher prompt: “Record your pulse before, during, and after the activity. Also, record how you felt. Keep track of the number of steps you take during the day, when you are wearing the pedometer. Come back to this information next week and the following week and comment on any changes you see.”

Students: “I can see that my heart rate goes up during the activity and back down afterwards. My heart rate recovers to a normal range more quickly, and I am starting to feel less tired.” “I have been tracking the number of steps I take with my pedometer, and I’ve been able to increase from ten thousand steps in a day to over fifteen thousand on some days.”

- B2.4** develop and implement personal plans relating to a specific component of health-related fitness, chosen on the basis of their personal fitness assessments and interests [A1.3 Motivation, 1.5 Self]

Teacher prompt: “What do you need to consider when setting your physical fitness and activity goal?”

Student: “I need to consider which aspect of my fitness I want to improve, assess where I am now, and decide what I will do to reach the level I want to be at. I want to be able to throw farther, so I need to improve my upper-body strength. I can do five push-ups now, but I want to be able to do ten by the end of the month. I can do that by trying to increase the number of push-ups I do every couple of days.”

B3. Safety

By the end of Grade 5, students will:

- B3.1** demonstrate behaviours and apply procedures that maximize safety and lessen the risk of injury, including the risk of concussion, for themselves and others during physical activity (e.g., *demonstrating personal responsibility for safety, using proper stretching techniques during cool-down activities, ensuring that their actions promote*

a positive emotional experience for themselves and others, reporting any equipment that is not in good working condition) [A1.4 Relationships, 1.5 Self]

Teacher prompt: “What safety considerations do you need to remember when playing flag football with your friends?”

Student: “We need to be in control when we pull the flag and we shouldn’t tackle or push.”

■ ■ ■

Teacher prompt: “If a peer is trying a new skill for the first time, what can you do to help that person feel safe or more comfortable in performing the skill in front of the group?”

Student: “I can try to be supportive by making encouraging comments and not being disruptive. I can also be a role model by trying new and challenging things myself.”

■ ■ ■

Teacher prompt: “If you are playing in a soccer game, and you witness your teammate getting hit in the head and then notice them acting differently, what should you do?”

Student: “I would tell the coach or another adult, because a change in behaviour or emotions may be a sign of a concussion, and my teammate may not recognize that they have suffered a brain injury.”

B3.2 demonstrate an understanding of proactive measures that should be taken to minimize environmental health risks that may interfere with their safe participation in and enjoyment of outdoor physical activities (*e.g., drinking fluids to avoid dehydration, before, during, and after vigorous activities; applying sunscreen and wearing a hat and sunglasses to protect the skin and eyes from sun damage; checking weather reports for the humidex, wind chill, air quality index, and UV index to determine what preparations may be needed to be safe and comfortable outdoors; bringing inhalers and epinephrine autoinjectors if needed; reading warning signs posted in recreational areas*) [A1.6 Thinking]

Teacher prompt: “Using ‘active transportation’ means using muscle power instead of vehicles to get ourselves around. It helps to reduce air pollution. When using active transportation, what can you do to keep yourself safe?”

Student: “I can travel with a buddy or a group because there’s safety in numbers. When I’m biking, walking, or skateboarding, I can follow the rules of the road and also use trails or side streets instead of the main roads whenever I can. That way, I avoid the dangers of travelling in traffic and I don’t have to breathe in the exhaust from cars.”

Movement Competence: Skills, Concepts, and Strategies

OVERALL EXPECTATIONS

By the end of Grade 5, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

SPECIFIC EXPECTATIONS

C1. Movement Skills and Concepts

By the end of Grade 5, students will:

- C1.1** perform controlled transfers of weight in a variety of situations involving static and dynamic balance, using changes in speed and levels, with and without equipment (*e.g., perform a sequence of movements on a floor line or a bench; stay in control while rolling, balancing, twisting, dodging, jumping, skipping quickly and slowly*) [A1.5 Self]

Teacher prompt: “How do you keep your balance when changing speed or levels?”

Students: “When I am speeding up while skating, I keep my balance by keeping my knees bent and my body low.” “When I am contracting from a high balance to a low balance, my movement needs to be quick and firm, and I need to keep my core muscles tight to help maintain my balance.”

- C1.2** demonstrate the ability to jump in control for height or distance, using a variety of body actions (e.g., *push off strongly during take-off when jumping for height; keep a tight body position when turning in the air; land smoothly and safely after a vertical jump and half turn in a dance sequence; maintain body control when landing after a long jump*) [A1.5 Self]

Teacher prompt: “When you are in the air, squeeze your muscles so your body stays in control.”



Teacher prompt: “When you are landing after a long jump or a jump from a height, what do you need to do to maintain control?”

Student: “When the jump is an especially big one, I need to land on the balls of my feet and bend my knees more than usual to absorb the force of landing and keep my balance. I also need to keep my arms out and my head up.”

- C1.3** explore different combinations of locomotor movements with and without equipment, alone and with others, moving at different speeds and levels, and using different pathways (e.g., *dodge or change speed or direction to avoid people or objects; incorporate different movements at varying speeds when creating a dance with a partner; use ribbons or balls to develop a movement sequence that includes jumps, turns, movements in different directions, and balances*) [A1.3 Motivation]

Teacher prompt: “Try the movement sequence at full speed, then very slowly. Which movements are easier to do faster and which ones are easier to do more slowly?”

Student: “For some of the moves, like footwork with complicated steps, going slowly gives me time to do the sequence well. For other moves, like a transition from a low balance to a stretched shape, moving more slowly is more difficult because I need good body control to hold the position steady as I move.”

- C1.4** send and receive objects using different body parts and equipment, adjusting for speed, while applying basic principles of movement (e.g., *kick a ball with the inside of their dominant foot at varying speeds to a partner who absorbs the ball with their body when it is received; strike a beach ball with a hand paddle and follow through in the direction of the intended target; experiment with using different amounts of force to send at different speeds*) [A1.3 Motivation, 1.4 Relationships]

Teacher prompt: “What do you need to do to throw an object faster? When catching an object, how do you adjust for different speeds?”

Student: “To throw faster, I need to put my whole body into the throw, stepping with the opposite foot, turning my body, and following through with my arm after I release the ball. When I am catching, I need to keep my eyes on the ball. If the ball is coming

slowly, I can step towards it to catch it. If it is coming fast, I need to be ready to absorb the catch with my body so the ball does not bounce away from me. I do the same things if I am receiving with my feet.”

- C1.5** retain objects with and without equipment in a variety of situations while moving in different pathways around others and equipment (*e.g., dribble a ball around pylons, slowing down as needed to maintain control; stickhandle a felt disc towards a goal or target while shifting the direction of forward movement to avoid defenders or obstacles; catch and carry a ball in a scoop; [for students who are visually impaired] maintain control of a sound ball while dribbling around classmates who are acting as guides*) [A1.5 Self]

Teacher prompt: “How do you maintain control of the ball when you are moving in a zigzag pattern down the field? Does that change when your speed changes?”

Student: “I need to keep the ball fairly close to my foot or stick to control it. I can let it get a bit farther away when I am moving faster.”

C2. Movement Strategies

By the end of Grade 5, students will:

- C2.1** demonstrate an understanding of the components of physical activities (*e.g., movement skills, game structures, rules and guidelines, conventions of fair play and etiquette*), and apply this understanding as they participate in a variety of physical activities (*e.g., lead-up games such as three-on-three lacrosse, mini tennis, and keep-it-up; recreational activities such as disc golf, parachute activities, orienteering, and cooperative games; fitness activities such as yoga, isometric muscle-building activities, and endurance activities; dance activities such as creative movement, hip hop–type moves, and novelty dances*) [A1.1 Emotions, 1.4 Relationships, 1.6 Thinking]

Teacher prompt: “How is a lead-up game such as four-corner soccer structured to make sure the game is inclusive and works for everyone?”

Student: “A game like four-corner soccer has four different goals and several balls so everyone has lots of opportunities to play. People with different skill levels can play together and everyone has a chance to participate to the best of their ability.”



Teacher prompt: “If we are striving for healthy competition when playing, what does that look like?”

Student: “With healthy competition, everyone is trying their best, supporting each other, and playing fairly. You don’t always have to be in a game situation to compete. For example, I might compete against myself, trying to keep a soccer ball going as I juggle it, hitting it up with my foot, chest, and head.”

Teacher: “What components of an activity could be adjusted to make it challenging and enjoyable for everyone?”

Student: “We could change the boundaries to make the game either easier or harder. We could change the type of equipment we use. We could add a rule – for example, all players have to touch the beach ball once before we are allowed to try to score a point. When we are playing with someone who is blind or partially sighted, we can use a ball with a bell inside or make a sound when sending the object so the person who cannot see is able to hear where the object is.”

- C2.2** describe common features of specific categories of physical activities (e.g., *individual, target, net/wall, striking/fielding, territory*), and describe strategies that they found effective while participating in a variety of physical activities in different categories [A1.6 Thinking]

Teacher prompt: “The net/wall games of volleyball, wall ball, badminton, squash, table tennis, paddleball, and wheelchair tennis all emphasize moving and controlling an object in a confined space and hitting it over a net or to a wall. What strategies might work in all of these activities?”

Student: “In all of these games, you try to place the object in a spot where the other team or player will have trouble returning it. You need to be ready to move quickly so you can return the object if it comes near you.”



Teacher prompt: “Consider what is similar about activities like cross-country running or skiing, orienteering, long-distance running in track, and power walking. What strategies might you use in all of these activities?”

Student: “These activities all involve being able to keep going for a long period of time. Most of them don’t need a lot of equipment and can be done anywhere. These activities help build your level of fitness and endurance. A strategy you would use in all of these activities is pacing. It helps to learn how to manage your energy so you can keep going and be able to finish and also have the ability to go faster at different parts of the course.”

- C2.3** apply a variety of tactical solutions to increase their chances of success as they participate in physical activities (e.g., **individual activities:** *interpret feedback from a partner and adjust their position in a yoga activity; target activities:* *choose an appropriate distance from the target to maximize level of challenge and opportunity for success; work on accuracy by maintaining eye contact with the target and following through in the direction of the target; net/wall activities:* *place shots away from their opponent;*

striking/fielding activities: choose their position to effectively cover a space when fielding;
territory activities: make quick passes to keep the object moving when playing a modified team handball game) [A1.2 Coping, 1.4 Relationships, 1.6 Thinking]*

Teacher prompts: “In target games, choose a position (closer to or farther from the target) that will give you the best balance between optimal challenge and the greatest chance of success.” “Why is it important to communicate with your teammates during territory activities?” “What do you need to do to work well with others when creating and performing a creative dance in a group of four?”

* Critical and creative thinking skills and processes are involved in choosing or devising tactical solutions at any age. However, the focus of social-emotional learning skill development shifts with the student’s stage of development, and this shift may be evident in the context of applying tactical solutions. Students in Grades 1–3 may be focusing on identifying and managing emotions and learning about themselves; students in Grades 4–6 may be ready to strengthen skills for interacting with others, persevering, and coping with challenges (*e.g., showing respect for others by not talking when others are aiming and taking their turn, communicating effectively with teammates during play, being aware of others’ positions*); and students in Grades 7 and 8 may be prepared to focus on deepening thinking skills and their understanding of themselves and others.

Strand D

Healthy Living

Instruction should focus on the overall expectation (D1, D2, D3 in the chart below) and should, where possible, be planned to illustrate connections across topics (listed in column 1) in an integrated way. The chart provides a brief summary of topics to support learning about health concepts, making healthy choices, and making connections for healthy living.

HEALTHY LIVING LEARNING SUMMARY BY TOPIC FOR GRADE 5

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating		D2.1 Nutrition fact tables, food labels	D3.1 Media influences – food choices
Personal Safety and Injury Prevention	D1.1 Supports – injury prevention, emergencies, bullying, violence	D2.2 Strategies – threats to personal safety	D3.2 Actions, self-concept
Substance Use, Addictions, and Related Behaviours	D1.2 Short- and long-term effects of alcohol use	D2.3 Refusal skills – alcohol use and other behaviours	D3.3 Decision to drink alcohol, use cannabis; influences
Human Development and Sexual Health	D1.3 Reproductive system D1.4 Menstruation, spermatogenesis	D2.4 Self-concept, sexual orientation D2.5 Emotional, inter-personal stresses – puberty	
Mental Health Literacy		D2.6 How to help others, when to seek help	D3.4 Stigma awareness

OVERALL EXPECTATIONS

By the end of Grade 5, students will:

- D1. demonstrate an understanding of factors that contribute to healthy development;**
- D2. demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;**
- D3. demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others’ health and well-being.**

SPECIFIC EXPECTATIONS

D1. Understanding Health Concepts

By the end of Grade 5, students will:

Personal Safety and Injury Prevention

- D1.1** identify trusted people (*e.g., parents, guardians, family members, neighbours, teachers, crossing guards, police, older students, coaches*) and support services (*e.g., help lines, including professional online chat support such as Kids Help Phone, youth or community hubs, 9-1-1, Telehealth, public health units, community mental health services, student services*) that can assist with injury prevention, emotional distress, emergencies, bullying, non-consensual photo sharing and other non-consensual behaviour, and abusive and violent situations [A1.1 Emotions, 1.2 Coping]

Teacher prompt: “If you are being bullied, to whom can you turn for help?”

Student: “I can turn to any adult I trust – a parent, a teacher, a coach, an Indigenous youth worker, or a community mentor. I need to continue to ask for help until I get the help I need.”

Teacher: “What should you do in a situation in which someone is being violent?”

Student: “Get out of the way, get help, and do not try to intervene directly.”

Teacher: “If you notice that a friend’s behaviour has changed and they seem very sad and upset, who could you ask to get help for your friend?”

Student: “I could ask my parents or my teacher or someone from my friend’s family.”

Substance Use, Addictions, and Related Behaviours

- D1.2** describe the short- and long-term effects of alcohol use, and identify factors that can affect intoxication (*e.g., amount consumed; speed of consumption; sex, body size, emotional state; combinations with other drugs, such as cannabis, food, or substances such as energy drinks*)

Teacher prompt: “Drinking even a small amount of alcohol can affect your body. The more you drink, the greater the effects. What are the short-term effects of alcohol use?”

Student: “Short-term effects can include relaxation but also reduced coordination, higher body temperature, slower reflexes, drowsiness, lowered inhibitions, slurred speech, and problems making good decisions. Alcohol can be dangerous if it’s used with cannabis, because using cannabis and alcohol together increases impairment. Becoming drunk, or intoxicated, could lead to vomiting, loss of consciousness, or even alcohol poisoning. If any of these things happen, medical attention is needed.”

Teacher: “What long-term consequences can result from consuming alcohol in a harmful way?”

Student: “Addiction, liver damage, financial problems, family or relationship issues, and emotional and mental problems are some of the possible consequences of long-term problematic alcohol use. People who consume alcohol in a harmful way may lose interest in school or in activities they used to find enjoyable.”

Human Development and Sexual Health

- D1.3** identify the parts of the reproductive system, and describe how the body changes during puberty [A1.5 Self]

Teacher prompt: “Female body parts that mature and develop as a part of puberty include the vagina, cervix, uterus, fallopian tubes, ovaries, endometrium, and clitoris. Male body parts that mature and develop during puberty include the penis (with or without the foreskin), scrotum, urethra, testicles, prostate gland, seminal vesicles, and vas deferens. These changes occur as people become capable of reproduction. Not all bodies experience changes of the same kind, or at the same time. What are some physical changes that may happen during puberty?”

Student: “Female bodies develop breasts and start menstruating for the first time during puberty. An increase in weight and body fat is normal. Male bodies become more muscular, develop deeper voices, and grow facial and body hair. The penis and testicles grow larger. As part of puberty, adolescents grow hair under the arms, on the legs, and in the pubic area. The rate at which these changes occur varies for each individual.”

- D1.4** describe the processes of menstruation and spermatogenesis, and explain how these processes relate to reproduction and overall development

Teacher prompt: “Menstruation is the medical term for having a ‘period’ and is the monthly flow of blood from the uterus. This begins at puberty. Not all female bodies begin menstruation at the same age. Generally, every month, an egg leaves one of the ovaries and travels down one of the fallopian tubes towards the uterus. In preparation, the walls of the uterus develop a lining of extra blood and tissue to act as a cushion for the egg in case fertilization occurs. When an egg is fertilized, it attaches itself to the lining of the uterus and begins to develop into an embryo. If fertilization does not occur, the lining of the uterus is no longer needed and is discharged through the vagina. This is the monthly flow of blood. The whole process is called the menstrual cycle. Can you summarize its purpose?”

Student: “It is how the female body gets ready for pregnancy.”

Teacher: “In the male body, the testicles are glands within the scrotum that produce sperm and hormones, beginning at puberty. After sperm develops in the testicles, it can travel through the epididymis until it reaches the vas deferens where it is stored

until ejaculation occurs. During ejaculation, the prostate gland releases a liquid that mixes with the sperm from the vas deferens to make semen, which then leaves the body through the urethra. Fertilization can occur when sperm is ejaculated into the vagina, and the sperm and egg connect. Babies can also be conceived by having the sperm and egg connect using assisted reproductive technologies. What is the purpose of sperm production?”

Student: “Sperm is needed for fertilization. When the sperm from the male and the egg from the female join together, pregnancy occurs.”

Teacher: “We’ve described what menstruation and spermatogenesis mean from a physical point of view. How do these changes affect you in other ways?”

Students: “Not everyone experiences these changes at the same time and in the same way, so teasing people about these changes isn’t right. It can be very hurtful.” “In my culture and my family, becoming an adult is a cause for celebration. In various Indigenous cultures, women are viewed with the highest regard, and menstruation is seen as sacred.” “We don’t talk about it in my family. What I see in the media and online is a bit confusing, so it’s good to know what these changes in my body actually mean. The more I know, the better I can take care of myself.”

D2. Making Healthy Choices

By the end of Grade 5, students will:

Healthy Eating

D2.1 explain how to use nutrition fact tables and ingredient lists on food labels to make informed choices about healthy and safe foods [A1.6 Thinking]

Teacher prompt: “Food labels contain a lot of information, including the product name, the serving size and the number of calories per serving, product claims, an ingredient list, and a nutrition fact table, which identifies the nutrients in the product, and other information, such as the amount of sodium. How can you use this information to evaluate food choices?”

Students: “I can check the nutrition fact table to see how much saturated fat, sugar, and salt is in the product. When I use information from the nutrition fact table, it can help me make healthier food choices at home and when I go shopping with my family. Making healthier food choices on a regular basis can help us reduce our intake of sodium, sugars, and saturated fat. I can also compare and choose foods with more nutrients like fibre, potassium, and calcium.” “The nutrition fact tables and ingredient lists are useful, but I also make choices based on what I enjoy, because I know that healthy eating patterns take place over time and so I can eat treats occasionally.” “I can also check the ingredients list to identify and avoid foods that

have peanuts in them, if someone in my family is allergic to them or if I'm selecting snacks to bring to school. I can use similar available information about the ingredients and nutrition values in food at restaurants and fast-food places.”

Personal Safety and Injury Prevention

- D2.2** demonstrate the ability to deal with threatening situations by applying social-emotional learning skills (e.g., self-awareness skills, including self-monitoring, coping, and emotion-management skills; relationship skills, including conflict resolution skills; communication skills, including assertiveness and refusal skills) and safety strategies (e.g., having a plan and thinking before acting; looking confident, being aware of their surroundings and of people's body language, tone of voice, or facial expressions; seeking help; drawing on cultural teachings, where appropriate, to analyse situations and develop responses) [A1.1 Emotions, 1.2 Coping, 1.3 Motivation, 1.4 Relationships, 1.5 Self]

Teacher prompt: “What can you do to help if a friend tells you about a situation where they are feeling bullied or unsafe? What could you do if you were there when it happened?”

Student: “I can listen to my friend and talk about ways we can stand up for ourselves when someone is bullying us, including by naming the behaviour – stating firmly that it's not okay to say things that are racist or homophobic, even in a joking way. I can stand up for my friend if I am there when it happens, or I can get help by telling a trusted adult.”



Teacher prompt: “What strategies could you use in a situation where you were being harassed, criticized, left out, or treated differently because of what someone thought about your sex, race, culture, religion, sexual orientation, body shape, weight, or ability?”

Student: “Different situations may require different strategies. Sometimes it is best to be assertive and stand up to the person who is treating me badly, by speaking confidently. If I feel threatened, it is safer to avoid confrontation by ignoring the person, making an excuse and walking away, or getting help. It is always good to notice how these kinds of situations make me feel and to share my feelings with an adult I trust.”



Teacher prompt: “How might the medicine wheel teachings of the Anishinaabe help you to consider strategies for personal safety?”

Student: “The four components of the Anishinaabe medicine wheel can help me think about my safety and well-being in terms of my physical, emotional, spiritual, and mental health. Each Indigenous community has its own way of thinking about the holistic health of people, communities, and the environment. I can look to Indigenous cultures to help me think through ways of seeing myself and the world.”

Substance Use, Addictions, and Related Behaviours

- D2.3** demonstrate the ability to apply decision-making, assertiveness, and refusal skills to deal with pressures pertaining to alcohol use or other behaviours that could later lead to addiction (*e.g., smoking,* vaping, drug use, gambling, video game use*) [A1.4 Relationships, 1.6 Thinking]

Teacher prompt: “What might you do if someone is pressuring you to try alcohol or a cigarette?”

Student: “I can try to avoid situations where I might be offered alcohol or cigarettes. If I can’t, I can say strongly and clearly that I do not want to participate. I can also mention problems that I’d rather avoid, like bad breath, disease, and impairment – or I can just make a joke and change the subject.”

Human Development and Sexual Health

- D2.4** identify intersecting factors that affect the development of a person’s self-concept, including their sexual orientation (*e.g., self-awareness, self-acceptance, social environment, opinions of others who are important to them, influence of stereotypical thinking, awareness of their own strengths and needs, social competency, cultural identity, availability of support, body image, mental health and emotional well-being, physical abilities*), and how these factors can support their personal health and well-being [A1.1 Emotions, 1.2 Coping, 1.5 Self]

Teacher prompt: “A person’s self-concept and mental health and well-being can be affected by a number of internal and external factors that work together. Internal factors come from within yourself. They include having a sense of purpose in life, being able to arrive at and sustain a clear sense of who you are, having a strong sense of cultural identity, feeling that you have the right – and the ability – to take steps to make things better, having clear boundaries, being optimistic, having high expectations of yourself, and having the skills you need to solve problems. Sexual orientation refers to a person’s sense of sexual attraction to people of the same or different sex. Having an understanding of your sexual orientation is an important part of developing your sense of self and well-being. There are also external factors that impact your development. These come from outside yourself. Can you give me examples of external factors that are protective – things that help a person develop a positive self-concept and improve their mental health and well-being?”

Student: “Protective external factors include having support from friends, family, and caring adults, having a safe place to live, and being involved in activities that make you feel proud of what you’ve accomplished. Together, internal and external factors shape who you are, and help you *understand* who you are.”

* This reference is to smoking commercial tobacco products. It does not refer to the ceremonial use of natural tobacco in First Nations and Métis cultures.

D2.5 describe emotional and interpersonal stresses related to puberty (e.g., questions about changing bodies and feelings, adjusting to changing relationships, crushes and more intense feelings, conflicts between personal desires and cultural teachings and practices), recognize signs that could indicate mental health concerns, and identify strategies that they can apply to manage stress, build resilience, keep open communication with family members and caring adults, and enhance their mental health and emotional well-being (e.g., being active, writing feelings in a journal, accessing information about their concerns, taking action on a concern, talking to a trusted peer or adult, breathing deeply, meditating, seeking cultural advice from Elders, Métis Senators, knowledge keepers or knowledge holders) [A1.1 Emotions, 1.2 Coping, 1.4 Relationships, 1.5 Self]

Teacher prompt: “Think about some things that could lead to stress for adolescents. For example, as they grow, people sometimes feel self-conscious about their bodies, but we all grow at different rates and you can’t control how fast you grow. When you think about how to respond to stress, consider what is within your control and what is not.”

Student: “Things I can control include whether I have a positive or negative attitude about things, how I show respect for myself and others, whether I ask for help when I need it, whether I am involved in activities at school and in my community, the actions I take, whether I am open to new ideas, and whether I make my own decisions about things or let myself be influenced by others. Things I cannot control include what others may think about where I was born, who is in my family, how much money my family has, and personal characteristics such as my skin colour, hair colour, sexual orientation, and body shape and structure, or whether I have a learning disability, a physical disability, or a health issue. All of these things are a part of who I am. I cannot control how others see these aspects of me, but I can control what I do and how I act. For example, I may feel self-conscious about my body when I am running or swimming, but I like these activities and I will continue to do them.”



Teacher prompt: “It is normal to have stress and to have different feelings, including being happy, sad, angry, and excited at different times. Part of taking care of your mental health and emotional well-being is learning to be aware of and to monitor your own feelings. How do you know if you need help with your feelings?”

Student: “If you feel one way for a very long time – for example, if you always feel sad, anxious, or tired – that might be a sign that you need to get help to learn what is causing those feelings and what you can do about them.”



Teacher prompt: “As you enter adolescence, you may begin to develop new kinds of relationships and new feelings that you have not had before. Your relationships with your peers can become more stressful. Understanding how to respond to these new

feelings and situations can reduce some of the stress that goes with them. For example, if you feel you ‘like someone in a special way’, what are some appropriate ways of sharing that information with that person and what are ways that are inappropriate?”

Student: “You can show that you like someone by being extra nice to them, talking with them more, spending time with them, or telling them that you like them. Ways of showing that you like someone that are inappropriate include touching them without their permission, spreading rumours about them to others or online, and making fun of them in order to get attention. Sharing private sexual photos with others or posting sexual rumours online is hurtful, unacceptable, and illegal.”

Mental Health Literacy

- D2.6** demonstrate an understanding of their role, and the limits of their role, in helping others who may need mental health support [A1.2 Coping, 1.4 Relationships, 1.5 Self]

Teacher prompt: “How might you know that a friend, or someone you know, might be trying to manage a mental health problem and may need help?”

Students: “I might notice a mood change or behaviour that is a lot different from what I usually see. I might notice that the person doesn’t join the group anymore or seems to be feeling sad or is falling behind in classwork.” “I’d pay attention if I heard them saying things about wanting to feel better but not knowing how to change.”

Teacher: “What could you do to help a friend? What is important to understand about the limits of how you can help?”

Student: “I can try to encourage them by reminding them of things that have worked for them in the past – like taking a break, having fun together outside, taking some deep and grounding breaths. But if that’s not working, I can encourage them to ask for help. If they don’t and I’m really worried about them, I can tell an adult I trust. I need to remember that getting help is important. Especially if I’m worried that the person might hurt themselves or be in danger, I need to make sure I’m not trying to help on my own.”

Teacher: “If the problem seems like something you need help from an adult to deal with, who could you ask for help?”

Student: “My teacher, my coach, a family member, an Elder, a Métis Senator, or another trusted adult in my community.”

D3. Making Connections for Healthy Living

By the end of Grade 5, students will:

Healthy Eating

- D3.1** describe how advertising, food marketing, and media affect food choices (e.g., TV commercials, product packaging, celebrity endorsements and social media postings, product placements in movies and programs, idealized and unrealistic body images in movies and programs, magazine articles promoting fad diets, loyalty programs), and explain how these influences can be evaluated to help people make healthier choices (e.g., by critically examining the reasons for celebrity endorsements or public personas or the plausibility of product claims, checking whether there is information in an advertisement to verify its claims, asking for information about product ingredients and nutrients, critically examining the reality and healthiness of idealized body images in the media) [A1.6 Thinking]

Teacher prompt: “What might you think about when you see a professional athlete drinking an energy drink in a commercial?”

Student: “The advertisement is trying to influence me to buy the drink. But just because the ad says a professional athlete drinks it does not mean that the athlete actually drinks that drink, or that it is healthy for me or that I need to drink it when I am being active.”

Teacher: “What do you think when you see a magazine cover promoting a fad diet?”

Student: “I remind myself that the dieting industry is primarily focused on making money, not on making people healthier. I make a point of ignoring all messages about dieting for weight and shape control, and stay focused on health instead.”

Personal Safety and Injury Prevention

- D3.2** explain how a person’s actions, either in person or online, including making homophobic or other hurtful comments, can affect their own and others’ feelings, self-concept, mental health and emotional well-being, and reputation (e.g., negative actions such as name calling, making sexist or racist remarks, mocking appearance or ability, excluding others, bullying/cyberbullying, sexual harassment [including online activities such as making sexual comments, sharing sexual pictures, or asking for such pictures to be sent]; positive actions such as praising, supporting, including, and advocating) [A1.1 Emotions, 1.4 Relationships, 1.5 Self]

Teacher prompt: “Negative actions that hurt the feelings of others can also result in stigma. When someone appears to be different from us, whether it is because of something visible like a physical disability or something less visible like having an illness such as HIV/AIDS, a mental health problem like depression, or a visual or hearing impairment, we may view them in a stereotyped manner and make

assumptions. Stereotypes can have a strong, negative impact on someone’s self-concept and well-being. Even stereotypes that might seem positive are harmful, because they do not let people be their real selves. On the other hand, you can also make a big difference in a positive way with your actions. Give an example of an action that can affect someone’s feelings, self-concept, or reputation in a positive way.”

Student: “Actions that can have a positive effect include asking someone who has been left out to be a partner, praising someone for their accomplishments, recognizing someone’s talent or skill, and making sure everyone gets a turn.”

Teacher: “How do your actions – positive or negative – have an impact on your own self-concept and reputation?”

Student: “Having a positive attitude towards other people can make you feel good about yourself. It can also make people want to be around you. Always being negative or putting other people down reflects badly on you and can make you feel worse about yourself.”

Substance Use, Addictions, and Related Behaviours

D3.3 identify personal and social factors (*e.g., emotional, physical, mental, spiritual, cultural, legal, media, and peer influences*) that can affect a person’s decision to drink alcohol or use cannabis at different points in their life [A1.2 Coping, 1.6 Thinking]

Teacher prompt: “How realistic are the messages that we get from the media about drinking alcohol and using cannabis?”

Student: “On shows and in movies, you see people having fun, being sociable, doing cool things while drinking or using cannabis, or drinking and smoking because they feel stressed. You do not often see images in the media of someone who has passed out or who has caused a car crash or who is in an abusive relationship because of alcohol or cannabis. I can think of other ways to manage stress – such as talking to a friend or throwing a ball for my dog.”



Teacher prompt: “Some adults choose to drink alcohol or use cannabis in social settings or during celebrations. How is this different from a young person drinking alcohol or using cannabis?”

Student: “It is legal for adults to drink alcohol and use cannabis. Drinking in moderation, avoiding becoming impaired, and following the law about using substances and driving are some of the responsibilities that adults who choose to drink alcohol or use cannabis have to accept.”

Mental Health Literacy

- D3.4** demonstrate an understanding of how our attitudes about mental health affect those around us and how they might contribute to or prevent creating stigma [A1.6 Thinking]

Teacher prompt: “We know that from time to time we all feel challenging emotions that make it difficult for us to feel like we fit in or belong. Everyone experiences these ups and downs at different points. It’s important for all of us to think about the ways we can make it easier for ourselves and others to recognize, accept, and manage these feelings. For example, let’s think about language. Sometimes we make statements that we think are funny but that can cause stigma and make others feel uncomfortable. When it comes to supporting one another’s mental health, what are some of the things we can do at school and in the classroom to make everyone feel safe to talk about their mental health and ask for help?”

Student: “When we talk about mental health in a positive way it makes it safe for us to be open and honest about our feelings. Sometimes people are made fun of if they seem ‘different’ or if they show emotion or cry at school. When someone is having a bad day, we could put ourselves in their shoes and think about how that might feel. We could ask them if they want to talk and respect their need for space if that is what they want.”

Teacher: “When we talk about ‘putting ourselves in someone’s shoes’, that’s called empathy – it’s when we have understanding for the feelings of others. Showing empathy is a great way to make our classroom and school safe for everyone to be themselves. When we talk about mental health as a positive concept, it makes it safe for everyone to share when they are feeling emotions that are challenging or if they’re having a bad day.”

Overall Expectations At a Glance

Strand A. Social-Emotional Learning Skills

Throughout Grade 6, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1.** apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.

Strand B. Active Living

By the end of Grade 6, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

Strand C. Movement Competence

By the end of Grade 6, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

Strand D. Healthy Living

By the end of Grade 6, students will:

- D1.** demonstrate an understanding of factors that contribute to healthy development;
- D2.** demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;
- D3.** demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others' health and well-being.

Strand A

Social-Emotional Learning Skills

This strand focuses on the development of students' social-emotional learning skills to foster their overall health and well-being, positive mental health, and ability to learn, build resilience, and thrive. In all grades of the health and physical education program, the learning related to this strand takes place in the context of learning related to the Active Living, Movement Competence, and Healthy Living strands, and it should be assessed and evaluated within these contexts.

OVERALL EXPECTATION

Throughout Grade 6, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1. apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.**

SPECIFIC EXPECTATIONS

Throughout Grade 6, students will, to the best of their ability:

Identification and Management of Emotions*

- A1.1** apply skills that help them identify and manage emotions as they participate in learning experiences in health and physical education, in order to improve their ability to express their own feelings and understand and respond to the feelings of others (e.g., **Active Living:** identify what they feel when participating in different activities – their energy level and level of engagement, for example – and describe how these feelings affect their enjoyment of the activities; **Movement Competence:** explain how their feelings differ when performing an activity that is fairly easy, such as stationary throwing and catching, and when doing something more challenging, such as throwing and catching a smaller object while on the move; **Healthy Living:** explain how feelings can impact eating habits and food choices and how a person's awareness of this impact can help them make healthier choices)

* To support program planning, many specific expectations in strands B, C, and D are tagged to indicate the social-emotional skills that can be integrated into teaching and learning associated with the expectation. The tags are given in square brackets after the expectation, and use the identifiers A1.1 Emotions, 1.2 Coping, 1.3 Motivation, 1.4 Relationships, 1.5 Self, 1.6 Thinking.

Stress Management and Coping*

A1.2 apply skills that help them to recognize sources of stress and to cope with challenges, including help-seeking behaviours, as they participate in learning experiences in health and physical education, in order to support the development of personal resilience (e.g., **Active Living:** explain why properly fitted helmets and well-secured straps on wheelchairs allow them to participate in physical activities with a greater sense of safety, comfort, security, and confidence; **Movement Competence:** use tactical solutions to improve play or alleviate discomfort, such as adjusting pace or stride when running; **Healthy Living:** when preparing to babysit a younger child, explain the strategies they might use to manage any challenging situations that could arise)

Positive Motivation and Perseverance*

A1.3 apply skills that help them develop habits of mind that support positive motivation and perseverance as they participate in learning experiences in health and physical education, in order to promote a sense of optimism and hope (e.g., **Active Living:** when faced with transportation challenges in a rural community, use creative solutions such as ride sharing to access recreational activities; **Movement Competence:** demonstrate awareness both of strengths and of skills that need more work, such as using their non-dominant hand or foot when working on retaining objects, then focus on ways to build on the strengths and to stretch the limits; **Healthy Living:** show understanding of how healthy eating habits contribute to raising energy levels and improving self-image)

Healthy Relationships*

A1.4 apply skills that help them build relationships, develop empathy, and communicate with others as they participate in learning experiences in health and physical education, in order to support healthy relationships, a sense of belonging, and respect for diversity (e.g., **Active Living:** use encouraging words to support other students when participating in physical activities; show respect for the decisions and calls of teammates when they are serving as referees; **Movement Competence:** contribute ideas when working in a group to accomplish a collaborative task; **Healthy Living:** show awareness of how best to help others by asking questions and then helping in the way the person prefers; describe how you can let someone know how you feel about them in both verbal and non-verbal ways)

Self-Awareness and Sense of Identity*

A1.5 apply skills that help them develop self-awareness and self-confidence as they participate in learning experiences in health and physical education, in order to support the development of a sense of identity and a sense of belonging (e.g., **Active Living:** identify which of the factors known to motivate participation in physical activity in most people are the strongest motivators for them; **Movement Competence:** assess their awareness of the technique they are using when catching throws of different speeds – are

*they remembering to move farther away when a ball is thrown hard and fast?; **Healthy Living:** reflect on how stereotypes affect their self-concept, and identify other factors, including acceptance by others, that influence their sense of themselves)*

Critical and Creative Thinking*

A1.6 apply skills that help them think critically and creatively as they participate in learning experiences in health and physical education, in order to support making connections, analysing, evaluating, problem solving, and decision making (e.g., **Active Living:** *describe the steps that should be taken when responding to minor injuries; **Movement Competence:** plan a variety of offensive and defensive tactics that could be used in different situations in striking/fielding games; **Healthy Living:** describe what can be done to challenge stereotypes and false assumptions, and to encourage respectful interaction, acceptance of differences, and inclusion of all people in social activities)*

Strand B

Active Living

OVERALL EXPECTATIONS

By the end of Grade 6, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

SPECIFIC EXPECTATIONS

B1. Active Participation

By the end of Grade 6, students will:

- B1.1** actively participate in a wide variety of program activities (e.g., lead-up games, recreational activities, fitness activities, dance), according to their capabilities, while applying behaviours that enhance their readiness and ability to take part (e.g., being engaged and moving throughout the activity, using time effectively, being open to new activities, displaying fair play by taking turns and sharing, listening to others, not blaming or taking advantage of others) [A1.3 Motivation, 1.5 Self]
- B1.2** demonstrate an understanding of factors that contribute to their personal enjoyment of being active (e.g., having the opportunity to participate in activities in various sizes of groups and using various types of equipment, having a choice of activities, being able to take part in activities that are modified to suit their individual needs, being able to participate actively in a game or activity rather than having to sit it out, having a chance to take part in both team games and individual activities, experiencing pleasure in both the physical experiences and the aesthetic aspects of movement), as they participate in a wide

variety of individual and small-group activities and lead-up games [A1.1 Emotions, 1.3 Motivation, 1.4 Relationships]

Teacher prompt: “Involving everyone in the activity makes the activity more enjoyable for all. How can you ensure everyone is involved?”

Student:* “By playing in groups of four instead of groups of eight, everyone gets lots of turns. Our group adjusted the boundaries to make it easier for everyone to play.”



Teacher prompt: “When your group creates its dance sequence, all of you have to agree about what you are going to do and participate fully. If someone doesn’t agree, you need to find ways to negotiate or compromise.”

- B1.3** describe factors that motivate them to participate in physical activity every day, at school and during leisure time, and that influence their choice of activities (*e.g., influence of friends, enthusiasm for the outdoors, a preference for either team or individual activities, encouragement from others, increased time with friends, availability and affordability of a program, enjoyment of healthy competition, influence of media role models*) [A1.1 Emotions, 1.2 Coping, 1.3 Motivation, 1.5 Self]

Teacher prompt: “How do the things that motivate you to be active affect what you choose to do?”

Students: “I really like being outdoors, so I will pick activities that give me a chance to be outside. There is a new hiking and outdoor activities club being started at lunch. None of my friends are joining, but I think it sounds interesting, and I might meet someone new.” “I am learning traditional dancing because I want to learn about something that has a connection to my culture.” “I love competing and I love team sports and activities. Lots of team sports, like soccer, are available in my community.” “I do not like team sports, but I do like being active with other people. I kayak with my aunt on the weekends and, whenever I can, I go to the skateboard park with my friends.”

* Throughout this curriculum, student responses often follow the teacher prompts. They are provided to illustrate content, and do not attempt to capture the speech patterns, syntax, or word choices typical of students in this grade.

B2. Physical Fitness

By the end of Grade 6, students will:

- B2.1** **Daily physical activity (DPA):** participate in moderate to vigorous physical activity, with appropriate warm-up and cool-down activities, to the best of their ability for a minimum of twenty minutes each day (*e.g., hiking, playing lead-up soccer, doing fitness circuits, doing aerobic routines, orienteering; walking to reduce heart rate after activity, holding stretches after running*) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “After our vigorous activity during DPA, we will walk slowly as our heartbeats return to a resting rate. We will stretch when our muscles are warm. Why is it important to stretch when our muscles are warm, and what should we remember as we do our stretches?”

Student: “Stretching when our muscles are warm reduces the risk of injury. It is important to stretch after doing any physical activity. As we do our stretches, we need to hold each stretch at the point of tension or tightness, but not to the point of pain.”

- B2.2** explain how participation in physical activities affects personal health-related fitness (*e.g., muscular strength and endurance activities help tone and strengthen muscles, flexibility activities can help prevent injuries, cardiorespiratory activities can improve the immune system*) [A1.6 Thinking]

Teacher prompt: “According to the Canadian 24-Hour Movement Guidelines, young people should trade indoor time for outdoor time, limit sedentary behaviours, and increase physical activity. This includes limiting their recreational screen time to no more than two hours per day, and getting nine to eleven hours of uninterrupted sleep per night. The Canadian Physical Activity Guidelines for Youth recommend getting at least sixty minutes of moderate-to-vigorous physical activity during the day. This activity should include a combination of flexibility, strength, and endurance activities – both cardiorespiratory and muscular. What physical activities do you participate in on a regular basis, and how do they affect your physical and mental health?”

Student: “I go swimming once a week, I ride my bike or walk to school every day, and I play road hockey as often as I can after school. The walking, biking, swimming, and hockey all help my ‘cardio’, because they are activities that make my heart beat faster and make me breathe deeply. These activities also help to build my muscular endurance. They help with my flexibility too, but I probably need to do more work specifically on my flexibility and also on my muscular strength. As I develop my fitness I find I have more energy, I get sick less often, and I generally feel more positive and happier.”

- B2.3** assess their level of health-related fitness (i.e., cardiorespiratory endurance, muscular strength, muscular endurance, flexibility) as they participate in various physical activities (*e.g., comparing how they feel before, during, and after an activity or simple fitness tasks*),

and monitor changes in their physical fitness over time (e.g., comparing their personal results and physical activity participation over a period of time, such as the beginning, middle, and end of the school term) [A1.3 Motivation, 1.5 Self, 1.6 Thinking]

Teacher prompt: “Can you give me examples of things that would be signs of fitness development over time?”

Students: “Holding myself in a front support or plank position has gotten easier from the beginning of the school year. I used to have to put my knees down after about ten seconds. I have been practising a lot and now I can hold a solid plank position for more than twenty seconds. I can tell that my core muscles are getting stronger.” “I felt a burning sensation again in my legs after doing the wall-sit, but it is not as difficult to hold as it was last month. I think my legs are getting stronger.” “I am working on being able to hold myself up out of my wheelchair for longer periods of time. My arms used to get very shaky, and I would just drop into the seat. I am getting stronger. I can hold myself for longer before I begin to shake.”

- B2.4** develop and implement plans of action based on both their assessments of their health-related components of fitness (i.e., cardiorespiratory endurance, muscular strength, muscular endurance, flexibility) and their interests, in order to achieve personal fitness goals (e.g., improving cardiorespiratory fitness by doing activities that increase the heart rate in order to be able to walk or run faster or wheel a specified distance; enhancing flexibility by holding a stretch for a designated amount of time) [A1.3 Motivation, 1.6 Thinking]

Teacher prompt: “You have identified which health-related component of fitness you are going to focus on for your fitness goal. What will you do to help achieve your goal?”

Students: “I want to work on my cardiorespiratory fitness so I can go around the school property five times without stopping. I know that I will have to build up to this goal gradually. I will start by running and taking walking breaks when I need to, but gradually I won’t need to take them as often.” “I want to be able to play in a wheelchair basketball league, but I know I need to develop my arm strength to be able to play for as long as I need to during a game. I plan to work on doing lifts from my chair to help develop my arm strength.” “Because of my muscular dystrophy, I have muscle weakness. I have an individualized fitness plan, which was developed by my health care team – my doctor, my occupational and physical therapists, and my teacher. My plan outlines the kinds of exercise and the movements I can do safely. I will work towards the goals in my plan at my own pace, and I’ll ask for support when I need it.”

B3. Safety

By the end of Grade 6, students will:

B3.1 demonstrate behaviours and apply procedures that maximize safety and lessen the risk of injury, including the risk of concussion, for themselves and others during physical activity (e.g., *demonstrating personal responsibility and compliance with the school board’s concussion protocol; checking that equipment is in good working order; wearing an appropriate and properly fitting helmet* when taking part in activities such as bike riding, playing on community sports teams, tobogganing, snowboarding, downhill skiing, or skateboarding; helping someone adjust the straps on their wheelchair*) [A1.4 Relationships, 1.5 Self]

Teacher prompt: “What do you need to check to make sure your equipment is safe to use?”

Student: “I need to make sure the equipment fits and that it’s not broken. For example, if a bat is cracked, it shouldn’t be used.”

B3.2 describe appropriate methods for treating minor injuries that may occur while participating in physical activity (e.g., *applying pressure and ice to reduce swelling, cleaning and bandaging minor cuts, applying pressure to reduce bleeding, treating injuries quickly so they do not become worse*) [A1.6 Thinking]

* It is important for students and parents to understand that helmets are designed primarily to prevent injury to the skull and that there is no current evidence that they prevent concussion. Helmets do not stop the brain from moving within the skull.

Movement Competence: Skills, Concepts, and Strategies

OVERALL EXPECTATIONS

By the end of Grade 6, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

SPECIFIC EXPECTATIONS

C1. Movement Skills and Concepts

By the end of Grade 6, students will:

- C1.1** perform smooth transfers of weight in relation to others and equipment in a variety of situations involving static and dynamic balance (*e.g., shift weight smoothly during hip hop dancing; perform twists and balances on a stability ball; with a partner, use resistance [pushing] and counter-tension [pulling] by shifting and adjusting their weight and position to create a stable partner balance; move smoothly from a downward dog pose in yoga to a standing pose*) [A1.4 Relationships, 1.5 Self]

Teacher prompt: “When creating a partner balance, how do you use your weight and your balance skills to create a stable balance?”

Student: “My partner and I experiment with leaning backwards and forward to find the spot where we feel most balanced and secure. We sometimes need to change where our feet are positioned or how close we are to the ground to find a position where we feel stable. Just like when we are balancing on our own, keeping low to the ground, using a wide base of support, and keeping our muscles tight are things that help to make the balance more stable.”

- C1.2** perform a wide variety of locomotor movements, in combination, at different speeds, in different directions, and using different pathways, while moving around others and/or equipment (*e.g., wheel their wheelchair around objects and at different speeds in a fitness circuit; create a developmental gymnastics sequence with a partner that uses a range of movements and shows changes in speed, level, and formation*) [A1.4 Relationships, 1.5 Self]

Teacher prompt: “When creating your sequence to the music using a hula hoop, consider how to use your hula hoop in different ways – spinning it, tossing it to a partner, rolling it in different directions. Consider also how you move your body through, around, over and under the hoop, changing your own speed in relation to the movement of the hoop.”

- C1.3** send and receive a variety of objects (*e.g., rubber chickens, rings, beanbags, soft foam balls, discs, tennis balls, utility balls*), adjusting for speed and distance, while applying basic principles of movement (*e.g., use different amounts of force to send an object to a teammate, with an awareness of the weight of the object thrown and the force of its impact when the teammate receives it, depending on relative positions and type of object being thrown, batted, or kicked; send an object through a hoop, into a bucket, to a target on a wall, to a specific spot on the other side of a net, to a partner; bend knees, keeping arms out and head up in a ready position to prepare to receive an object; use the body to absorb an object that is sent with greater force; follow through in the direction of the target to improve aim and accuracy*) [A1.1 Emotions, 1.4 Relationships, 1.5 Self]

Teacher prompt: “Make sure you communicate clearly with your partner so you both know how comfortable you are with sending and receiving different amounts of force. Once you are comfortable throwing and catching an object with a partner when you are stationary, try sending the object so your partner needs to move to catch it. After that, try sending and receiving it when both people are moving.”

- C1.4** retain objects in a variety of situations while travelling in different pathways and at different speeds in relation to others and equipment (*e.g., run a “down and out” pattern, catch the football, then use “dekes” [deceptive manoeuvres, typically involving changes in direction] to retain the ball; stickhandle a felt disc slowly and then quickly while keeping their head up*) [A1.3 Motivation, 1.4 Relationships, 1.5 Self]

Teacher prompt: “Experiment with how you need to cradle the ball with the lacrosse stick as you run quickly, slowly, forwards, backwards, change direction, and spin around.”

C2. Movement Strategies

By the end of Grade 6, students will:

- C2.1** demonstrate an understanding of the basic components of physical activities (e.g., *movement skills, game structures, basic rules and guidelines, conventions of fair play and etiquette*), and apply this understanding as they participate in a variety of physical activities (e.g., *lead-up games such as four-on-four rubber-chicken keep-away, basketball shooting games, and two-base softball; recreational activities such as mini-triathlons, hiking, skipping rope, and cooperative games; fitness activities such as t'ai chi, activities with exercise bands and exercise balls, and personal fitness challenges; dance activities such as cultural dance, creative movement, and jazz steps*) [A1.5 Self, 1.6 Thinking]

Teacher prompt: “How can you apply basic dance steps like a grapevine or a step-touch in different dances and other activities?”

Student: “The grapevine step – step-behind-step-touch – or a simple step-touch is used in many folk dances. Those same movements are used in jazz and hip hop moves, and you can use them in your own creative dances. You can make the steps look different by changing the way you move or adding arm movements. The same kind of footwork as a grapevine step, without stepping behind, is used when playing basketball or badminton as you shuffle or slide sideways.”



Teacher prompt: “What movement skills and concepts do you use when you are playing a game like beach ball volleyball?”

Student: “You use skills like sending and receiving in control, getting under the ball to send it upwards, and using different amounts of force. You have to be able to move quickly to different positions on the court to hit the beach ball into an open space.”

- C2.2** describe common features of specific categories of physical activities (e.g., *individual, target, net/wall, striking/fielding, territory*), and describe strategies that they found effective while participating in a variety of physical activities in different categories [A1.6 Thinking]

Teacher prompt: “Striking/fielding games such as cricket, softball, lob ball, three-pitch, stickball, kickball, soccer baseball, and beep baseball all involve striking, running, retrieving an object, and returning it. Runners hit, kick, or throw an object, then score runs by running around a designated area or areas, usually called bases. Fielders work to retrieve the object quickly and return it to stop the runner. What strategies might be common to all of these activities?”

Student: “In all of these games, sending the object away from the fielders can help you score more runs. You need to watch the position of the ball, think about how far you have to run, and think about how fast you can run in order to plan when it is safe

to run from base to base. Fielders need to be ready to retrieve the object quickly and work together to try to stop the runner.”



Teacher prompt: “Consider what is similar about activities like fencing, t’ai chi, yoga, karate, kendo, qigong, and Pilates. What strategies might you use to improve your performance in all of these activities?”

Student: “Some of these activities are martial arts and were originally about defending yourself. With most of these activities, body form, control, breathing, flexibility, and alignment are important. There is a mind-body connection in these activities, and they require focus and concentration. To improve in these activities, I would need to work on overall fitness, core strength, and flexibility. Developing better control of my breathing would be an important strategy for improving my concentration and control of my movements.”

- C2.3** apply a variety of tactical solutions to increase their chances of success as they participate in physical activities (e.g., **individual activities:** find a comfortable pace when running, wheeling a wheelchair, or speed-walking; work with a partner to develop different ways of using an exercise ball to improve core strength; **target activities:** in a game like bocce, hit opponents’ balls out of the way in order to make space for their own ball closer to the target; **net/wall activities:** assume a position of readiness to move to receive an object; practise sending the ball to specific parts of the opposite court; **striking/fielding activities:** throw the ball promptly to teammates after retrieving it to stop opponents from scoring; **territory activities:** defend territory by anticipating an opponent’s actions; bounce a utility ball at different heights to keep it from an opponent in a keep-away game; throw a disc to a stationary partner, then move down the field to receive a return pass)
[A1.2 Coping, 1.4 Relationships, 1.6 Thinking]*

Teacher prompt: “When you are running, how do you find and maintain a steady, comfortable pace?”

Student: “Finding a comfortable pace takes practice. I try different paces and pay attention to how I feel. Running with a partner who likes to run at the same speed is sometimes a good way to maintain a steady pace.”



* Critical and creative thinking skills and processes are involved in choosing or devising tactical solutions at any age. However, the focus of social-emotional learning skill development shifts with the student’s stage of development, and this shift may be evident in the context of applying tactical solutions. Students in Grades 1–3 may be focusing on identifying and managing emotions and learning about themselves; students in Grades 4–6 may be ready to strengthen skills for interacting with others, persevering, and coping with challenges (e.g., giving encouraging feedback to others, asking clarifying questions when planning the next move with teammates); and students in Grades 7 and 8 may be prepared to focus on deepening thinking skills and their understanding of themselves and others.

Teacher prompt: “How do you, as a team, stop an opponent from scoring in a striking/fielding game?”

Student: “In striking/fielding games, we can stop opponents from scoring by spreading out in the field to cover the space effectively and working together to field the ball quickly, using a relay person to throw the ball in from the outfield so our team can quickly tag the base.”



Teacher prompt: “Why is it important to create space by spreading out around the playing area for your team in territory games?”

Student: “In territory games, creating space gives your team clearer paths to pass the object and move it up the field or the gym towards the goal.”

Strand D

Healthy Living

Instruction should focus on the overall expectation (D1, D2, D3 in the chart below) and should, where possible, be planned to illustrate connections across topics (listed in column 1) in an integrated way. The chart provides a brief summary of topics to support learning about health concepts, making healthy choices, and making connections for healthy living.

HEALTHY LIVING LEARNING SUMMARY BY TOPIC FOR GRADE 6

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating		D2.1 Influences on healthy eating D2.2 Eating cues and guidelines	D3.1 Benefits of healthy eating / active living
Personal Safety and Injury Prevention	D1.1 Benefits of inclusion, respect, and acceptance	D2.3 Safe and positive social interaction, conflict management	D3.2 Responsibilities, risks – care for self and others, safety practices
Substance Use, Addictions, and Related Behaviours	D1.2 Effects of cannabis, drugs	D2.4 Strategies, safe choices, influences, alcohol, tobacco, cannabis	
Human Development and Sexual Health	D1.3 Sexually explicit media	D2.5 Understanding of puberty changes, healthy relationships D2.6 Decision making, consent	D3.3 Stereotypes and assumptions – impacts and strategies for responding
Mental Health Literacy	D1.4 Seeking help – professional helpers D1.5 Connecting thoughts, emotions, and actions		

OVERALL EXPECTATIONS

By the end of Grade 6, students will:

- D1. demonstrate an understanding of factors that contribute to healthy development;**
- D2. demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;**
- D3. demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others’ health and well-being.**

SPECIFIC EXPECTATIONS

D1. Understanding Health Concepts

By the end of Grade 6, students will:

Personal Safety and Injury Prevention

- D1.1** demonstrate ways of being inclusive, respectful, and accepting, and describe how this benefits everyone, including themselves [A1.1 Emotions, 1.4 Relationships, 1.5 Self]

Teacher prompt: “What are some ways we can make our classroom and our school welcoming and accepting of everyone?”

Students: “We can get to know each other better and not make assumptions based on what we think we know.” “We take turns and listen respectfully to each other. We don’t interrupt.” “To remove barriers, our school has an elevator to make sure students can get around easily if they cannot take the stairs.” “When we are working in groups, the teacher makes sure that everyone has a chance to partner with others.” “Everyone has someone to play with, or talk to at recess, if they want.” “We read books and use materials in class that describe various types of families and relationships. We know that not everyone has a mother and a father – someone might have two mothers or two fathers (or just one parent or a grandparent, a caregiver, or a guardian). Reading books and using materials that show this can make everyone feel included.”

Teacher: “Why is it important to be inclusive?”

Student: “Feeling like you don’t belong in class, at school, or in society can have a major impact on your mental health and well-being. When I feel included and welcome at school, I am more self-confident and better able to value myself and others. I enjoy going to school every day, I am motivated to do my best, I like supporting my classmates, and I feel like I have something to offer. Everyone wants to feel that way. We learn more about one another when everyone feels confident enough to share their experiences, and when we recognize that what makes each of us unique, what we have in common, and our different perspectives are valuable.”

Substance Use, Addictions, and Related Behaviours

- D1.2** describe the range of effects associated with using cannabis, other drugs (*e.g., prescription medications such as opioids; illicit opioids such as heroin, crack, cocaine, Ecstasy, crystal methamphetamine*), and intoxicating substances (*e.g., gas, glue*) [A1.6 Thinking]

Teacher prompt: “Different types of psychoactive drugs can have very different effects on you, depending on whether they are stimulants, depressants, hallucinogens, or any

of the various drugs prescribed to treat a mental illness. Cannabis is a psychoactive substance. The effect of cannabis on your body depends on a number of things: how much you use, how often and how long you use it, how you consume it [smoke, vape, drink, eat, or other], your mood and existing mental health, your environment, your age, whether you've taken other drugs, and your medical condition and history. What are some possible effects of using cannabis?"

Student: "Cannabis can change the way you see and feel things – distances can seem shorter or longer than they really are, and things that are serious can seem funny. Larger amounts can lead to feelings of losing control, panic, or confusion. Physical effects include red eyes, dry mouth, a higher heart rate, and a feeling of hunger. Using cannabis often and over the long term can lead to being physically dependent on it, and it can also have adverse effects on brain development and mental health. After people stop using cannabis, they can experience withdrawal symptoms, which can include feeling irritable, anxious, or nauseated, not having an appetite, or not being able to sleep well."

Teacher: "How can these effects of cannabis influence a person's life?"

Student: "They can affect both your mental and physical health and your relationships as well. Cannabis can affect your performance at school because it makes it harder to concentrate. It can contribute to behaviours like withdrawing from family and friends, and it can have an impact on your motivation to do things. Cannabis can be dangerous, especially if it's used with alcohol, because using alcohol and cannabis together increases impairment. It can affect your ability to drive safely. If you are pregnant, it can affect your baby. In Ontario, if you are under 19, cannabis can also get you into trouble with the law, because it is illegal to use, buy, possess, cultivate, or share recreational cannabis if you are underage. Cannabis is also used for some medical purposes, such as relieving nausea and stimulating appetite in patients who are living with cancer, AIDS, or other medical conditions, but medical cannabis is prescribed by a doctor or nurse practitioner. People should not use it to treat themselves."

Human Development and Sexual Health

- D1.3** demonstrate an understanding of the impacts of viewing sexually explicit media, including pornography (*e.g., leads to a limited or distorted understanding of relationships; reinforces harmful gender norms; promotes an unrealistic or idealized body image*)

Teacher prompt: "Sexually explicit material is easily accessible and can be found in a variety of media, including social media, online games, music videos, movies, and pornography. This content can portray people and relationships in ways that are misleading and inaccurate, and can promote harmful gender stereotypes. It may not show people behaving with respect for themselves or their partners, or giving or respecting consent. What are some other ways in which viewing sexually explicit media can affect healthy development?"

Student: “In pornography, relationships are usually portrayed by actors, and they are not realistic. Unrealistic scenes are not models of healthy relationships, and they can affect people’s understanding of what respectful relationships look like, or should look like.”



Teacher prompt: “If you have questions about something you see online, where can you get answers?”

Student: “I can talk with an adult I trust. It really matters to me to have someone I feel safe talking to answer my questions.”

Mental Health Literacy

- D1.4** identify people, resources, and services in the school and the community (e.g., *mental health and addiction workers, family members, social workers, psychologists, community agencies, churches, mosques, synagogues, public health units, telephone help lines, recreation facilities*) that can provide support when a person is dealing with mental health issues and choices or situations involving substance use and addictive behaviours, and describe how to access these supports [A1.1 Emotions, 1.2 Coping, 1.6 Thinking]

Teacher prompt: “How can calling a telephone help line or speaking with an adult you trust provide support?”

Student: “Talking with someone about problems can help you look at things from different perspectives. Sometimes you need to get help to deal with stress and to cope.”



Teacher prompt: “We’ve talked about people, resources, and places to go for help when someone is struggling with different issues such as substance use and addictions. Sometimes people experience overwhelming feelings that they are not able to manage on their own. When this happens, they may need to get help from a professional who is trained to provide specific types of support to those who are experiencing mental health problems or who have a diagnosed mental illness. What are some examples of professional supports in our school and community?”

Student: “Youth mental health workers from our local Friendship Centres, social workers, psychologists, counsellors, doctors, nurse practitioners, outreach workers.”

Teacher: “Sometimes it can be hard to know where to turn. You can start by talking to your family, your doctor, or a trusted adult at school or in the community, or by finding information online at Kids Help Phone or another reputable site. If you or someone you knew needed help and wanted to get connected to a professional, where would you start?”

Students: “I think I would feel most comfortable talking to an Elder or to the Indigenous youth outreach worker who works with our school community.” “I would talk to my basketball coach.”

- D1.5** demonstrate an understanding of the interconnections between a person’s thoughts, emotions, and actions, and of the potential impact of positive and negative thinking on mental health [A1.1 Emotions, 1.5 Self, 1.6 Thinking]

Teacher prompt: “Learning to take care of your mental health involves learning skills that are honed through practice and that develop over time. It is important to understand the connections between our thoughts, our feelings, and our behaviours and how they can interact and influence each other. In any given situation, our thoughts and feelings can impact our behaviour and how we respond. Let’s say, for example, that you overhear some friends talking about going to the park together. You haven’t been invited to join. Imagine how this scenario could play out – both with a positive outcome and with a less positive outcome.”

Student: “When you overhear this, your first thought might be, ‘Hey – why wasn’t I invited? They don’t like me.’ Your feelings could be hurt, and you might either withdraw and feel horrible or do something like talk about those friends in a negative way. *Or*, your first thought might be ‘Oh, great – we’re going to the park’ – you would just assume that you’re included. That thought would lead to feeling excited about going to the park after school, and you’d do it!”



Teacher prompt: “What strategies can you use to counter negative thoughts so that you can better manage your feelings and actions – which, in most cases, will lead to a more positive outcome?”

Student: “My mom always says to me, ‘Assume positive intent’ – assume that the person means well by what they are saying or doing. I also do this thing called a ‘four-finger affirmation’. I tap each finger to my palm and say a word to myself for each finger. I say things like, ‘I-Can-Do-This’ or ‘It-Will-Be-Okay’.”

D2. Making Healthy Choices

By the end of Grade 6, students will:

Healthy Eating

- D2.1** apply their knowledge of medical, emotional, practical, and societal factors that influence eating habits and food choices (*e.g., allergies and sensitivities, likes and dislikes, feelings of stress, dental health, food availability, media influence, cultural influence of family and friends, school food and beverage policies, environmental impact, cost*) to develop personal guidelines for healthier eating [A1.1 Emotions, 1.2 Coping, 1.4 Relationships, 1.6 Thinking]

Teacher prompt: “How can a busy life lead to poor eating habits and food choices, and what can you do to eat better when you are busy?”

Student: “When you’re busy, it is easy to eat whatever is quick and convenient, which is not always healthy. To eat better, you have to fit your healthy eating goals into your lifestyle. If I prepare and bring a snack with me, I usually eat healthier food than if I grab something on my way. If I have to pick something up on the way, I try to make the healthiest choice from what is available. In our family, we eat meals together whenever we can. Many of my family’s traditional recipes are made from healthy food ingredients. When our family eats together, we eat healthier food and have time to enjoy the food and the company.”



Teacher prompt: “How do you handle emotional and social factors that could lead to poor eating habits or choices?”

Student: “I try to be aware of why I am eating. Sometimes I eat because I’m bored or lonely and have a treat to make me feel better or because the people I am with are eating. Sometimes I eat without thinking because I’m distracted. Sometimes, when I’m feeling sad or anxious, I might actually ignore my hunger signals and then I don’t eat enough. I make healthier choices when I’m feeling better. If I think about *why* I want to eat and whether I’m really hungry, I might sometimes decide to eat and other times not. I make better food choices when I’m with people who are also making healthy choices. Thinking about the situations where it’s easier to make healthy choices is useful for me. I also try to be aware of media messages about eating and know that what I am seeing and hearing may not always match up with healthy eating practices.”

- D2.2** apply their recognition of internal hunger and thirst cues and their knowledge of physical factors that influence the desire to eat and drink (*e.g., stage of development, growth spurts, level of physical activity, eating larger portions*) to develop personal guidelines for healthier eating [A1.1 Emotions, 1.5 Self, 1.6 Thinking]

Teacher prompt: “How do you feel if you wait until you are very hungry to eat? How does your body feel when you have eaten too much?”

Student: “When I’m very hungry, I get a lot more irritable and on-edge. I can’t concentrate well, my head and stomach may start to hurt, and sometimes I feel dizzy. Then, when I finally do eat, I eat quickly and I don’t really taste my food. Sometimes it’s harder to realize that I’m full and I may end up eating too much and feeling uncomfortable. I need to be aware of those things and try to eat when I’m hungry and stop when I’m full.”

Personal Safety and Injury Prevention

- D2.3** apply social-emotional learning skills (e.g., *self-awareness and self-management skills, including anger management; communication skills, including listening skills and assertiveness skills*) to promote positive interaction and avoid or manage conflict in social situations, in person or online (e.g., *classroom groups, groups of friends, sports teams, school clubs, social media sites, online games*) [A1.1 Emotions, 1.2 Coping, 1.4 Relationships, 1.5 Self]

Teacher prompt: “If you are in a situation where you find yourself feeling angry, what can you do to manage your anger? If you need help, who can you ask for help?”

Students: “I can take some deep breaths, walk away, and give myself some time and space to cool down. Doing something physical outdoors, like running, swimming, playing basketball, or biking, helps me. I can also consult my physical education teacher, who knows a lot of other strategies and can walk me through them. Once I am calmer, I can think about what made me angry and about whether there is anything I would like to do about it, like calmly explaining to someone that the way they treated me upset me. I can also think about what I can do to prevent the situation from happening again.” “If I see something online that I disagree with and feel angry about, I pause instead of responding right away. I need to take time to decide if I should respond, and how, because I know that whatever I post online lasts forever.”



Teacher prompt: “When working in groups, what have you found helpful for making your group function well?”

Student: “Our group works best when we make sure everyone gets a turn to speak, if they want to; when we are clear about what everyone is supposed to do; and when we listen to each other and treat each other with respect. When we work together online, our group agrees on some ground rules for being respectful to one another.”

Teacher: “If someone does something online that you disagree with or that is intrusive, what can you do?”

Students: “I can stop whatever I’m doing online, and tell an adult about what’s happened. If the person I disagree with is a friend, I can also follow up with them in person to let them know that I disagree with their actions online.” “My family and I can investigate privacy tool options.”

Substance Use, Addictions, and Related Behaviours

- D2.4** use decision-making strategies and skills and an understanding of factors influencing drug use (e.g., *personal values, peer pressure, media influence, curiosity, legal restrictions, cultural, religious, and spiritual teachings*) to make safe personal choices about the use

of drugs such as alcohol, tobacco,* and cannabis, and about activities such as vaping, including the choice to abstain [A1.2 Coping, 1.4 Relationships, 1.5 Self, 1.6 Thinking]

Teacher prompt: “How can peers influence your decisions about using drugs, smoking, or vaping? How might you respond to those influences?”

Student: “Some peers may try to influence you to do drugs, or to start smoking or vaping, by saying it’s cool to do them, or sometimes you may just want to be part of a crowd that’s into those things. To avoid this kind of influence, you have to be strong as an individual, think about what you really want and what you value, and make up your own mind about things. Even if someone tells you ‘everyone is doing it’, your decisions are your own, and so are the consequences. But peers can be a positive influence too. Hanging out with friends who don’t use drugs and don’t smoke or vape can keep you from starting.”

Human Development and Sexual Health

- D2.5** describe how they can build confidence and lay a foundation for healthy relationships by acquiring a clearer understanding of the physical, social, and emotional changes that occur during adolescence (e.g., **physical:** voice changes, skin changes, body growth; **social:** changing social relationships, increasing influence of peers; **emotional:** increased intensity of feelings, new interest in relationships, confusion and questions about changes) [A1.1 Emotions, 1.4 Relationships, 1.5 Self]

Teacher prompt: “By getting questions answered with factual information from reliable sources and understanding that questions and changes are ‘normal’, adolescents will be better equipped to understand themselves, relate to others, respond to challenges and changes in relationships, and build confidence. What are some questions that young people might have as changes happen during puberty and adolescence?”

Student: “Is how I am feeling normal? Why is my body different from everybody else’s? How do you tell someone you like them? Who can answer my questions about...?”



Teacher prompt: “Things like ejaculating when you are asleep (wet dreams) or experiencing vaginal lubrication are normal and happen as a result of physical changes that come with puberty. Exploring one’s body by touching or masturbating is something that many people do because it feels good. It is common and is not harmful and is one way of learning about your body.”

* This reference is to smoking commercial tobacco products. It does not refer to the ceremonial use of natural tobacco in First Nations and Métis cultures.

D2.6 make informed decisions that demonstrate respect for themselves and others and an understanding of the concept of consent to help build healthier relationships, using a variety of social-emotional learning skills (e.g., *self-awareness and identity skills; emotion management skills; critical and creative thinking skills; skills based on First Nations, Métis, and Inuit cultural teachings, such as medicine wheel teachings connected to the life cycle, the seven-grandfather teachings, or other cultural teachings*) [A1.1 Emotions, 1.4 Relationships, 1.5 Self, 1.6 Thinking]

Teacher prompt: “In many ways, dating or intimate relationships can be similar to other relationships, such as those with friends or family. Relationships we see online or in the media are not always accurate and can send false messages. What are some of the signs of a healthy relationship, and what are some signs of potential trouble? How can you help a friend who may be in an unhealthy relationship?”

Student: “In a healthy relationship, people show respect and care for each other. They try to communicate well and are honest with each other. When someone in a relationship is jealous, controlling, or abusive, or does anything that makes you feel uncomfortable, that is a sign of trouble. Sometimes a relationship can start out as healthy but then become unhealthy. If I saw this happening to a friend of mine, I would talk to them about what I’m noticing, listen to their response without judgement, and encourage them to seek help when needed. I would also try to get help for them from a parent or a teacher, or through a help line.”



Teacher prompt: “How does knowing yourself help you to make healthy decisions when you are in a relationship?”

Student: “Being clear about your own values, priorities, strengths, boundaries, and needs can help you separate what is important to you from what is not. Knowing yourself well can help you see what you need to work on to make the relationship better.”



Teacher prompt: “What communication skills can help you send information, receive information, and interpret information in an effective way in a relationship?”

Student: “Being respectful but clear about your ideas and feelings; listening actively; interpreting body language, tone of voice, and facial expressions; respecting signals of agreement or disagreement and consent or lack of consent – all these are important skills. A clear, specific, and enthusiastic ‘yes’ that is ongoing and given freely is a signal of consent. A response of ‘no’, an uncertain response, or silence needs to be understood as no consent. It is important to remember that a person can change their mind and say no at any time to something that they said yes to before.”



Teacher prompt: “What social attitudes and behaviours are important in building a healthy relationship?”

Student: “It is important to have respect for others, show that you value differences, and be cooperative.”

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Teacher prompt: “What should you consider when making any decision regarding a relationship?”

Student: “My comfort level, my personal and family values, my personal limits, and the limits and comfort of others are some of the things I should consider.”

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Teacher prompt: “Changing or ending relationships can be difficult. What are some ways to deal positively with changing or ending relationships?”

Student: “Talk about how you feel with someone you trust. Think about what you can learn from the situation that you can apply in the future. Remember that although the hurt feelings can be very intense at the beginning, you will start feeling a little better over time. If you are the one ending the relationship, treat the other person with respect and empathy and consider how they may be feeling. Try to explain how you feel. Ending a relationship over the phone or online may not be a sensitive approach.”

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Teacher prompt: “Why might people decide to get married?”

Student: “Many religions and cultures place importance on marriage. Marriage can be a healthy and loving committed partnership between two people who respect each other. Many religions and cultures affirm and celebrate marriage and family life as a fulfilling aspect of human life.”

D3. Making Connections for Healthy Living

By the end of Grade 6, students will:

Healthy Eating

- D3.1** explain how healthy eating and active living work together to improve a person’s overall physical and mental health and well-being (*e.g., both provide more energy and contribute to improved self-concept and body image, greater resistance to disease, and better overall health; both help a person to maintain a weight that is healthy for them*) and how the benefits of both can be promoted to others [A1.2 Coping, 1.3 Motivation, 1.5 Self, 1.6 Thinking]

Teacher prompt: “Why is healthy eating important for active living? How does active living affect the way we eat and the way our bodies use the food we eat?”

Student: “Eating healthy foods gives me the nutrients I need to be energetic and active. Healthy food and physical activity are both necessary to build stronger bones and muscles.”



Teacher prompt: “How can you promote the benefits of healthy eating and active living at school?”

Student: “I can lead by example. I can be a role model for younger students at recess by having a healthy snack, like a piece of fruit, and playing an active game, like tag, instead of standing around.”

Personal Safety and Injury Prevention

- D3.2** recognize the responsibilities and risks associated with caring for themselves and others (e.g., while babysitting, staying home alone, running errands for a senior relative or neighbour, caring for pets, volunteering in the community, assisting someone with a disability, preparing meals, travelling to and from school and other locations), and demonstrate an understanding of related safety practices and appropriate procedures for responding to dangerous situations (e.g., safe practices for preparing food; responses to allergic reactions, fire, sports injuries, dental emergencies, hypothermia, bullying, abuse) [A1.4 Relationships, 1.5 Self, 1.6 Thinking]

Teacher prompt: “What should you do to protect yourself before volunteering in the community?”

Student: “Have a parent or caregiver check to make sure the situation is safe.”



Teacher prompt: “What are some ways in which you could help someone who has a physical disability?”

Student: “I could ask the person if they would like help and, if so, what kind of help. I could help someone who is blind or partially sighted by walking with them as a guide. I might be able to help a person in a wheelchair transfer to a chair, if I were given instructions about how to help.”



Teacher prompt: “If you are preparing a meal for yourself or others, what are some things to be aware of to stay safe?”

Student: “Be cautious and handle all equipment carefully when preparing food and using appliances, sharp knives, or utensils. Keep young children away from sharp

knives, hot things, and other objects that could cause injury. Wash hands before and after working with food, and keep work surfaces clean.”

Human Development and Sexual Health

- D3.3** assess the effects of stereotypes and assumptions regarding gender roles and expectations, sexual orientation, race, ethnicity, culture, mental health, and abilities on an individual’s self-concept, social inclusion, and relationships with others, and propose appropriate ways of responding to and changing harmful assumptions and stereotypes that can lead to destructive social attitudes including homophobia and racism [A1.1 Emotions, 1.4 Relationships, 1.5 Self, 1.6 Thinking]

Teacher prompt: “Assumptions are often made about what is ‘normal’ or expected for people based on their sex or gender – for example, men take out the garbage; nursing is a woman’s job; boys play soccer at recess and girls skip rope or stand around and talk; boys are good at weightlifting and girls are good at dancing. It is all right for people to be interested in things that are not associated with traditional gender roles, because each person is an individual who has their own interests. Assumptions based on traditional gender roles can make people who do not fit into the expected norms feel confused or bad about themselves, damaging their self-concept, and can lead them to stop doing the things they love. Such assumptions can also cause people to discriminate against and exclude those who are seen as ‘different’. Assumptions about sexual orientations, learning disabilities, mental illnesses, or cultural differences are harmful in similar ways, leading to homophobia and other prejudices based on fear, hatred, and mistrust. Everyone needs to feel accepted in school and in the community. Why do you think such stereotyped assumptions come about? What can be done to change or challenge them?”

Students: “Stereotypes are usually formed when we do not have enough information and we make assumptions. They can also come from widely held societal beliefs. One way we can start to address stereotypes is by finding out more about people. By being open-minded, observing and listening, asking questions, getting more information, and considering different perspectives, we can work to change stereotypes. We know that not all couples are male-female, and we show this by the words we use. For example, we could use a word like ‘partner’ instead of ‘husband’ or ‘wife’. We need to be inclusive and welcoming.” “If we have newcomers from another country in our class, we can try to find out more about them, their culture, and their interests.” “If we hear things that are sexist, homophobic, or racist, we can show our support for those who are being disrespected.” “If we hear someone using words like ‘crazy’ or ‘nuts’ to describe a person who has a mental illness, we can explain that having a mental illness is no different from having any other illness, and that we wouldn’t call someone names if they had any other illness.”

Overview of Grades 7 and 8

No longer children but not yet adults, adolescents are beginning to face life decisions that may have major consequences for them as well as others. Their lives are changing rapidly, and they need more advanced knowledge and skills to understand and cope with the changes they are experiencing and to make responsible decisions about their physical and mental health. As they grow into their adult selves, they have the opportunity to establish patterns of healthy, active living that will benefit them throughout their lives.

Student Development and Program Implications

Program design and delivery must take into account the physical, cognitive, social, and emotional development of students, as well as their sense of self, or spirit.* The following descriptions of the developmental characteristics of students in the intermediate grades are general in nature, and individual student characteristics will vary depending on the child's age, sex, gender identity, body size, experience, and background. Because the developmental characteristics and needs of students in these grades cover such a wide range, awareness of individual needs is critically important at this level.

Physical Domain

Students in the intermediate grades may still be going through a growth spurt. For females, the growth spurt tends to occur between the ages of 9 and 13 years, and for males, between 11 and 15 years. Thus, students may vary considerably in their physical development, and growth differences may still account for differences in physical abilities and skills. At this age, most gross and fine motor skills are developed. Students tend to be able to combine motor skills and have the ability to participate in modified or full versions of sports, activities, and dance. Students may also develop specialized skills related to specific activities that they have become interested in and may be ready to learn and practise performance-related components of fitness – agility, coordination, balance, speed, and power – that will help them in these activities.

It is important at this level not only to recognize the developing abilities and skills of the students but to continue to differentiate instruction and assessment to address students' individual needs. In particular, it is important to provide:

- opportunities for students to make their own choices of activities and equipment and ways of modifying these;

* For more information about child and youth development, see “Early Learning Framework Full Report” (for children from birth to 8 years of age); *On My Way: A Guide to Support Middle Years Child Development* (for children ages 6 to 12); and *Stepping Stones* (for youth, ages 12 to 25).

- opportunities for students to choose a level of participation that suits their stage of development and abilities;
- constructive feedback to guide students as they develop and refine their physical skills.

Cognitive Domain

Students in the intermediate grades are becoming capable of handling more complex thought processes. They are generally able to process and understand more complex instructions and strategies, although cognitive abilities will vary, and they generally have well-developed attention spans. Accompanying these expanding intellectual capacities is a greater understanding of their individual learning preferences. Some students may know that they learn best when given the opportunity to explore and discover on their own. Others may know that they learn best by collaborating with others or that they benefit from more direct guidance and supervision.

Programs for students in these grades should offer instructional activities that are personally relevant and meaningful. Students need to see themselves reflected in the curriculum. This underlies the importance of recognizing and including all students of all backgrounds and abilities. Programs should also offer students opportunities to make their own creative adaptations to activities in order to stimulate their thinking and create an optimal level of challenge, one that is neither too hard nor too easy and that is interesting for all participants.

Affective Domain

Students in the intermediate grades are in the process of forming their adult identities and consolidating their moral beliefs and values. They are very much influenced by the world around them, and especially by their peers, who are a major source of motivation. They are continuing to develop their interpersonal skills and generally enjoy participating in activities with their peers. Their responses to winning and losing vary individually but can be very emotional.

Programs for these students should provide opportunities for students to interact positively with their peers, to continue developing and improving their relationship skills, and to learn and apply concepts of equity, fair play, ethics, and social justice. Larger group activities should be introduced gradually. However, students should still have the opportunity to participate in individual activities and play in small groups in order to facilitate maximum participation and accommodate individual preferences and learning styles.

Sport and physical activity can be powerful socializing agents for adolescents. In some cases, they can also create environments of exclusion. Some adolescents move away from physical activity because of physical, social, and emotional changes or stresses at puberty. Adolescence is a key time for using the opportunities provided within health and physical education to reach and connect with youth and provide them with positive social, emotional, and physical experiences.

Focus of Learning in Health and Physical Education for the Intermediate Division

Social-Emotional Learning Skills

In the intermediate grades, there continues to be an emphasis on developing relationship skills. There is also a focus on recognizing and coping with stress and challenges in positive ways, to build resilience and an attitude of positive motivation; developing self-awareness and self-confidence in order to nurture a sense of identity and belonging; and applying critical and creative thinking skills in deeper and more complex ways. Students will have opportunities to practise processes for solving problems, setting goals, resolving conflicts, and making decisions. They will also continue to develop their awareness of emotions, intentions, and motivations as they communicate and interact with others.

Active Living Strand

Expectations in the intermediate grades consolidate and build on much of the work done in previous grades, adding new knowledge and extending the range of application to new situations. Students become acquainted with a greater range of opportunities and environments for physical activity. They also expand their knowledge of factors that motivate people to be physically active, including understanding connections between physical and mental health, and of ways to motivate others. Physical fitness activities in these grades continue to emphasize self-assessment, self-monitoring, and goal setting, but within the context of a more detailed understanding of fitness that includes factors affecting fitness and the application of training principles to the enhancement of both health-related and skill-related fitness. The safety expectations are expanded to take in the broader range of venues that older students are active in and the greater level of responsibility that they are capable of handling, including reducing the risk of injury such as concussion. In particular, students learn how to anticipate and protect themselves from outdoor hazards and how to respond to emergency situations.

Movement Competence Strand

As they continue their development of movement skills, students in the intermediate grades work on more complex combinations of stability and locomotor skills and their application in relation to stimuli (e.g., other students, equipment, music) in their immediate environment. The work on manipulation skills (throwing, catching, and retaining) emphasizes the use of these skills in combination and in relation to external stimuli in the playing area (e.g., other students, equipment, boundaries). They learn to apply their understanding of movement principles and the phases of movement to refining these skills and have multiple opportunities to explore previously learned movement concepts, with a particular emphasis on the concepts of effort and relationship. Their study of activity components, categories, and strategies expands to include: a wider range of activities and activity environments; the use of critical and creative thinking skills to reflect more deeply on how applying different tactics affects their participation in an activity; and an examination of similarities

and differences between various activities in terms of their rules and the skills and tactics they call for.

Healthy Living Strand

Students will continue to learn about the factors that contribute to healthy development and consider how that information connects to their personal health choices and to the health of others in the world around them. In the intermediate grades, they will focus on making connections between their own health and the physical and mental health and well-being of those around them.

Grade 7 and 8 students add to their knowledge of healthy eating practices and deepen their understanding of the relationship between eating patterns and disease, making healthier food choices, and promoting healthy eating to others.

The study of personal safety and injury prevention expands to include situations that students in these grades may encounter as they become more independent and active in a wider variety of situations and environments, including online and virtual environments. Students also consider the consequences of bullying, harassment, and violent behaviour, including gender-based and racially based violence, and examine ways of preventing or responding to it. In addition, they continue to learn about concussions, including strategies to support healthy recovery.

Expectations relating to substance use, addictions, and related behaviour introduce them to linkages with mental health and stress, expand their understanding of the personal and social consequences of addictions, and examine how concerns with body image, which are very prevalent at this age, can lead to problematic substance use.

The human development and sexual health expectations recognize that students at this age are developing their sense of personal identity, which includes their sexual identity. Students may already be involved in or contemplating sexual activity or dealing with relationship issues that affect their self-concept and sense of well-being. Consequently, there is an emphasis on developing the skills needed for maintaining healthy relationships, understanding the importance of consent, and acquiring the knowledge and skills needed to make informed decisions about their sexual health. Key topics include delaying sexual activity, preventing pregnancy and sexually transmitted and blood-borne infections, understanding how gender identity and sexual orientation affect overall identity and self-concept, and making decisions about sexual health and intimacy.

As part of developing mental health literacy, students learn to distinguish between mental health and mental illness and build awareness of the impact of stigma associated with mental illness. In preparation for the transitions that come with adolescence, students continue to build their “toolkit” of strategies for supporting mental health, including self-care strategies and an understanding of how to access additional help, if needed.

Overall Expectations At a Glance

Strand A. Social-Emotional Learning Skills

Throughout Grade 7, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1.** apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.

Strand B. Active Living

By the end of Grade 7, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

Strand C. Movement Competence

By the end of Grade 7, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

Strand D. Healthy Living

By the end of Grade 7, students will:

- D1.** demonstrate an understanding of factors that contribute to healthy development;
- D2.** demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;
- D3.** demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others' health and well-being.

Strand A

Social-Emotional Learning Skills

This strand focuses on the development of students' social-emotional learning skills to foster their overall health and well-being, positive mental health, and ability to learn, build resilience, and thrive. In all grades of the health and physical education program, the learning related to this strand takes place in the context of learning related to the Active Living, Movement Competence, and Healthy Living strands, and it should be assessed and evaluated within these contexts.

OVERALL EXPECTATION

Throughout Grade 7, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1. apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.**

SPECIFIC EXPECTATIONS

Throughout Grade 7, students will, to the best of their ability:

Identification and Management of Emotions*

- A1.1** apply skills that help them identify and manage emotions as they participate in learning experiences in health and physical education, in order to improve their ability to express their own feelings and understand and respond to the feelings of others (e.g., **Active Living**: explain how their choice of physical activities can be influenced by whether they feel safe and comfortable with the people involved and the location or surroundings of the activity; **Movement Competence**: describe the impact of shared game time or shared play time on their own and others' feelings and emotions; **Healthy Living**: recognize that feelings about family and peers can change at different times of their lives)

* To support program planning, many specific expectations in strands B, C, and D are tagged to indicate the social-emotional skills that can be integrated into teaching and learning associated with the expectation. The tags are given in square brackets after the expectation, and use the identifiers A1.1 Emotions, 1.2 Coping, 1.3 Motivation, 1.4 Relationships, 1.5 Self, 1.6 Thinking.

Stress Management and Coping*

A1.2 apply skills that help them to recognize sources of stress and to cope with challenges, including help-seeking behaviours, as they participate in learning experiences in health and physical education, in order to support the development of personal resilience (e.g., **Active Living:** when trying to balance priorities – for instance, doing homework, spending time with family and friends, and being active every day – use organizational and time-management skills to prevent feeling overwhelmed; **Movement Competence:** identify what they do to manage stressful feelings during fast-paced territory games; **Healthy Living:** describe how to access different sources of support when dealing with mental health challenges or issues related to substance use)

Positive Motivation and Perseverance*

A1.3 apply skills that help them develop habits of mind that support positive motivation and perseverance as they participate in learning experiences in health and physical education, in order to promote a sense of optimism and hope (e.g., **Active Living:** use awareness of feelings in their body to push themselves to work hard; **Movement Competence:** be prepared for and responsive to outdoor weather conditions to help with motivation to participate actively outdoors in most weather conditions; **Healthy Living:** persevere in trying to reframe negative judgements about their body in order to achieve body acceptance and to adopt healthy strategies for fitness and overall health and well-being)

Healthy Relationships*

A1.4 apply skills that help them build relationships, develop empathy, and communicate with others as they participate in learning experiences in health and physical education, in order to support healthy relationships, a sense of belonging, and respect for diversity (e.g., **Active Living:** make adjustments to activities that will allow all group members to be included and to enjoy participating; **Movement Competence:** show readiness to receive a pass in a game by moving into position, making eye contact, and holding a hand out to act as a target; when the other team scores in a game of handball, say something supportive, such as “Good try!”, to the goalie; **Healthy Living:** explain how appreciating the things that make each person unique can contribute to positive relationship building; practise effective responses to a homophobic or racial slur directed at them or another student)

Self-Awareness and Sense of Identity*

A1.5 apply skills that help them develop self-awareness and self-confidence as they participate in learning experiences in health and physical education, in order to support the development of a sense of identity and a sense of belonging (e.g., **Active Living:** describe the role models that may have influenced some of their choices with respect to

physical activity; consider what effect their family and their cultural background have had on the way they think about participation in physical activity or on their choice of activities; **Movement Competence:** when working on a challenging skill such as a weight transfer with rotation – like a cartwheel – explain how breaking down the skill into parts can help build awareness of what they need to work on to improve it; **Healthy Living:** describe ways in which they can monitor and stay aware of their own physical, emotional, and mental health)

Critical and Creative Thinking*

A1.6 apply skills that help them think critically and creatively as they participate in learning experiences in health and physical education, in order to support making connections, analysing, evaluating, problem solving, and decision making (e.g., **Active Living:** describe how they can use health-related fitness-assessment information when making action plans for personal fitness; **Movement Competence:** demonstrate how to refine movements by adjusting body position during the preparation, execution, and follow-through stages of an action; **Healthy Living:** explain how someone might have a mental illness but can still be mentally healthy)

Strand B

Active Living

OVERALL EXPECTATIONS

By the end of Grade 7, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

SPECIFIC EXPECTATIONS

B1. Active Participation

By the end of Grade 7, students will:

- B1.1** actively participate in a wide variety of program activities, according to their capabilities (e.g., individual activities, small- and large-group activities, movement and rhythmic activities, dance, outdoor pursuits), while applying behaviours that enhance their readiness and ability to take part (e.g., striving to do their best, displaying good sports etiquette along with healthy competition) in all aspects of the program [A1.3 Motivation, 1.5 Self]

Teacher prompt: “What does healthy competition look like? How does it contribute to active participation?”

Student:* “Healthy competition includes doing your best and pushing yourself to play as hard as you can, whether you are competing with yourself or as a member

* Throughout this curriculum, student responses often follow the teacher prompts. They are provided to illustrate content, and do not attempt to capture the speech patterns, syntax, or word choices typical of students in this grade.

of a team. It contributes to active participation by giving you a goal that makes you want to be completely involved. Competition isn't healthy if you are just playing to win without following rules of etiquette and fair play."

- B1.2** demonstrate an understanding of factors that contribute to their personal enjoyment of being active (*e.g., being able to modify games for different purposes; being able to take part in activities that suit their individual abilities and interests; being exposed to a variety of activities, including recreational, team, individual, and dance and fitness activities; feeling comfortable about the activities; being able to take part in activities that are culturally relevant*), as they participate in a diverse range of physical activities in a variety of indoor and outdoor environments [A1.1 Emotions, 1.3 Motivation, 1.5 Self]

Teacher prompt: "What is a physical activity that you like to do or a skill that you like to practise? What is it about these games or skills that you particularly like?"

Students: "I love to run fast. I can do that in cross-country running, soccer, and tag." "I love activities that provide a mental challenge as well as a physical challenge. For example, in my karate class after school, I have to think about how I'm going to execute every move that I perform. I also like team games because they involve strategy."

- B1.3** demonstrate an understanding of the factors that motivate or impede participation in physical activity every day (*e.g., peer influence, sense of belonging, self-confidence, availability and cost of resources and opportunities, influence of role models, compatibility or conflict with family responsibilities*) [A1.1 Emotions, 1.3 Motivation, 1.4 Relationships, 1.6 Thinking]

Teacher prompt: "What motivates you to be active, and what stops you from being more active?"

Students: "Hearing great music, having a space to move, and just enjoying the feeling of dancing motivates me." "I understand that some of my Métis ancestors paddled sixteen to eighteen hours a day and that it is part of my heritage to be physically active." "I'm supposed to stay home when my parents work on weekends. This sometimes keeps me from getting outside and being more active."

B2. Physical Fitness

By the end of Grade 7, students will:

- B2.1** **Daily physical activity (DPA):** participate in moderate to vigorous physical activity, with appropriate warm-up and cool-down activities, to the best of their ability for a minimum of twenty minutes each day (*e.g., aerobic fitness circuits, floorball, capture the flag, wheelchair soccer*) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “How do you know that you are being active to the best of your ability when participating in physical activities?”

Student: “It is a personal measure. I know what it feels like to push myself hard. My heart rate goes up, I breathe faster, I get hot, and my muscles get tired. I know that if I am taking frequent breaks, not breathing very hard, or not feeling my muscles work, I am not working my hardest for that activity.”

- B2.2** identify factors that can affect health-related fitness (*e.g., heredity, nutrition, developmental stage, environmental factors, social and emotional factors, mental health, cultural teachings*), and describe how training principles (*e.g., frequency, intensity, duration, type of activity*) can be applied to develop fitness [A1.6 Thinking]

Teacher prompt: “During puberty, bodies change in size and shape. This can have an effect on your energy levels and on your level of participation in fitness activities. What other factors can affect your fitness development?”

Student: “How I am feeling about my body can affect the kind of activities I choose to do. Having access to safe places to be active outdoors would help me be more active. Good nutrition is important for fitness, so I can help to develop my fitness by eating healthy foods that provide energy for being active.”



Teacher prompt: “What are some things you can do to develop your fitness?”

Student: “I need to do different kinds of activities, such as aerobic, stretching, and strengthening activities, to develop different aspects of fitness. If I am working on my cardiorespiratory endurance, I need to gradually increase the length and frequency of my workouts and also the intensity of my training. I can gradually increase the number of laps I do, or the length of time I am active, to build up my endurance. If I am working on improving my flexibility, I need to do specific stretches for the parts of my body that I’m working on.”

- B2.3** assess their level of health-related fitness (*i.e., cardiorespiratory endurance, muscular strength, muscular endurance, flexibility*) during various physical activities and monitor changes in fitness levels over time (*e.g., by tracking heart rates, recovery time, changes in how one feels during and after activity; by comparing activity participation and changes in fitness levels*) [A1.3 Motivation, 1.6 Thinking]

Teacher prompt: “What is a good indication that your fitness is getting better?”

Student: “Tracking my heart rate recovery time and how I feel during activities is an indication of my fitness level. If my heartbeat is returning to its resting rate fairly quickly after I work out, then I know that my cardiorespiratory fitness is improving. Checking how I feel after skipping or playing soccer at recess also gives me information about my fitness level.”

- B2.4** develop, implement, and revise a personal plan to meet short-term, health-related fitness goals (e.g., by using personal assessment information to set realistic short-term goals, using appropriate training principles, identifying possible challenges, identifying sources of support, determining what will indicate when goals have been reached, monitoring progress and comparing achievements to planned goals, acknowledging successes, changing goals or approaches as needed) [A1.3 Motivation, 1.6 Thinking]

Teacher prompt: “What things do you need to consider when you set a short-term fitness goal? How do you know if you have accomplished your goal?”

Student: “I need to consider what aspects of health-related fitness I want to focus on, then I need to identify what I can do to improve or maintain those aspects of my fitness. I need to think about what will help me accomplish my plan. If I set a goal to improve my core strength, I would need to think about what activities would be most helpful, and then about what activities I like to do that are both available and affordable for me. I might join a yoga or Pilates class, but if one were not available in my community, I would need to think about alternatives. I could do activities on my own at home, or I might be able to use a video that would help me, or work out with a friend. To know if I had accomplished my goal, I would need to track how I am feeling and compare what I was able to do before I started with what I could do after I had worked on my fitness for a while. Depending on the results, I might need to consider doing some things differently.”

B3. Safety

By the end of Grade 7, students will:

- B3.1** demonstrate behaviours and apply procedures that maximize safety and lessen the risk of injury, including the risk of concussion, for themselves and others during physical activity (e.g., following appropriate procedures and guidelines, demonstrating social responsibility, checking that they have their puffers and/or epinephrine autoinjectors, checking for hazards such as pencils or other objects on the floor or potholes on the field before beginning activities, using mouth guards* when necessary during recreational activities in the community, avoiding pressuring a peer to participate in unsafe activities, being respectful of others who may be hesitant to try new skills) in a variety of physical activity settings (e.g., school, community recreational facilities, outdoor recreational venues) [A1.2 Coping, 1.5 Self, 1.6 Thinking]

Teacher prompt: “What does all safe behaviour in physical activity have in common, whether you are participating in activities at school or in the community?”

* It is important for students and parents to understand that mouth guards are designed primarily to prevent injury to the teeth and gums, and helmets (see expectation B3.2) to prevent injury to the skull. There is no current evidence that they prevent concussion. Helmets and mouth guards do not stop the brain from moving within the skull.

Student: “Wherever you are participating, you need to be aware of yourself and others in your surroundings. Also, depending on the activity, you need to apply appropriate safety procedures. Using good judgement, thinking for yourself, and thinking before you act are good general guidelines.”

- B3.2** demonstrate an understanding of procedures for anticipating and responding to hazards that may lead to sickness or injury, including concussion, while participating in physical activity outdoors (e.g., *be aware of common hazards that could be encountered and take appropriate precautions; apply systems thinking to risk assessment by making connections between possible hazards and their outcomes; recognize unexpected hazards, assess the risk, and control the hazard by telling someone about it, removing it, or removing themselves from the danger*) [A1.1 Emotions, 1.2 Coping, 1.6 Thinking]

Teacher prompt: “Being safe helps you enjoy your time outdoors. When cycling on a forest trail, what do you need to be mindful of?”

Student: “I need to make sure to wear a helmet,* follow trail etiquette, and stay in control, so that if there is a fallen tree or another unexpected object on the trail I can avoid it and not be hurt. By following trail etiquette, I am less likely to get into situations where I can hurt myself or somebody else, or damage the environment.”

■ ■ ■

Teacher prompt: “What can you do to protect yourself from the sun’s UV radiation outdoors?”

Student: “I need to be aware of the UV index for the day and limit my time in the sun during peak periods. I can protect myself by wearing sunglasses and a hat and applying sunscreen.”

■ ■ ■

Teacher prompt: “What should you do if you find a pothole on the playing field?”

Student: “I should do something to warn everyone of the danger – for example, I could put a pylon on the pothole and tell an adult.”

■ ■ ■

Teacher prompt: “After a school soccer game, you notice a teammate who is not ‘acting right’, seems very angry, is complaining that the lights are too bright, and says that she has a headache. She is scheduled to play again the next day. What would you do?”

Student: “Our teacher taught us about the school board concussion protocol. I would tell the teacher, because I think my teammate may have suffered a concussion that was not recognized at the time. Reported symptoms such as light sensitivity and headaches, and observed signs such as heightened emotions, may be caused by a concussion. She needs to get checked. If she has a concussion, it’s a hazard for her to play again tomorrow, because if she’s hit again, the consequences could be very serious.”

Movement Competence: Skills, Concepts, and Strategies

OVERALL EXPECTATIONS

By the end of Grade 7, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

SPECIFIC EXPECTATIONS

C1. Movement Skills and Concepts

By the end of Grade 7, students will:

- C1.1** perform smooth transfers of weight and rotations, in relation to others and equipment, in a variety of situations involving static and dynamic balance (e.g., perform a rhythmic gymnastic sequence such as throwing a ball, performing a shoulder roll, and catching the ball; demonstrate a dance sequence with a partner, including a series of steps, jumps, turns, and balances; perform a smooth high jump approach, take-off, and landing; use a low stance for balance during a pivot turn; move smoothly between positions in a yoga sequence) [A1.4 Relationships, 1.5 Self]

Teacher prompt: “When doing a series of steps, jumps, and balances in a dance routine, what helps you to maintain control and make the movement transitions smooth?”

Student: “Holding my muscles tight, practising transitions between movements, counting the steps in my head, matching my steps to the rhythm of the movement, and asking for feedback from a partner.”

C1.2 perform a wide variety of locomotor movements, with and without equipment, while responding to a variety of external stimuli (*e.g., dodge and fake in response to others, accelerate before taking off for a high jump or a running long jump, respond to changes in music during creative dance by changing arm movements, lift feet and show awareness of trail conditions and obstacles when running cross-country on trails*) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “Describe how your running changes as you approach a long jump. How is it different with a high jump?”

Student: “With a long jump, I should be running my fastest just before I take off, so that I have the maximum forward momentum. With a high jump, I need to change my forward momentum to upward momentum, so I should run in a C or a J pattern, starting out fast, then slowing down a little just before I take off to go over the bar.”



Teacher prompt: “How can you move your body to show a response to different types of music in a dance sequence that you are putting together?”

Student: “For loud and dramatic music, we could use large movements with lots of arm action. Our movements might be smooth or sharp, depending on the rhythm of the music.”

C1.3 send, receive, and retain a variety of objects, while taking into account their position and motion in relation to others, equipment, and boundaries, while applying basic principles of movement (*e.g., use different strokes and varying degrees of force, depending on their opponent’s position on the court, to return the shuttle in badminton; assume a ready position to prepare to receive a short pass; strike a ball by shifting their weight as they contact the ball and following through in the intended direction to send it between or over opposing players; cradle or control the ball on the side of the body that is away from opponents when moving up the field*) [A1.1 Emotions, 1.4 Relationships, 1.5 Self]

Teacher prompt: “How do you need to adjust your position when receiving a pass on the move?”

Student: “When receiving a pass, I need to have my weight forward and on my toes so that I’ll be ready to move in different ways, depending on how fast the object is coming. When receiving an object when I am on the move, I may need to back up and be prepared to absorb the force if it is coming quickly. If it is coming slowly, I may need to move forward quickly in time to meet the object.”

C1.4 demonstrate an understanding of the phases of movement (i.e., preparation, execution, follow-through), and apply this understanding to the refinement of movement skills as they participate in a variety of physical activities (*e.g., jumping during a dance routine: bend knees to get ready to jump, thrust arms up for extra force while jumping, hold a controlled body position in flight, bend knees and put arms out for a stable landing*) [A1.5 Self, 1.6 Thinking]

Teacher prompt: “Watch a partner serve a volleyball underhand against a wall. What are some tips you can share with your partner to help them send the volleyball successfully?”

Student: “Start in a ready position and prepare by holding the ball in your opposite hand. To serve underhand, bend your knees and step with the opposite foot, swing your striking arm back, then swing it straight forward, with force, in the direction you want the ball to go. Shift your weight forward as your hand contacts the ball. Follow through in the direction of the target.”

C2. Movement Strategies

By the end of Grade 7, students will:

C2.1 demonstrate an understanding of the components of a range of physical activities (e.g., movement skills, game structures, basic rules and guidelines, conventions of fair play and etiquette), and apply this understanding as they participate in a variety of physical activities in indoor and outdoor environments [A1.5 Self, 1.6 Thinking]

Teacher prompt: “We’ve been trying out some traditional Inuit physical activities, like leg wrestling, push-up hop, and jump kick. What movement skills and components of fitness do you need for these activities?”

Student: “All of these activities require stability skills and some locomotor skills. They also require physical strength, endurance, and agility. With leg wrestling, you need core strength and also balance. With the push-up hop, you need strength to be able to move forward while hopping in a push-up position. For the jump kick, you need flexibility as well as strength and balance to be able to kick an object that is held over your head.”



Teacher prompt: “Why do you need to consider etiquette and how to work well with others when engaging in various kinds of activities?”

Student: “When doing an activity with others, you need to be able to work together to agree on things like team selection, rules, equipment, and boundaries. If teams are uneven or rules make the activity too challenging, the game isn’t fun. Rules of etiquette are needed to ensure that people show respect for each other. Even with individual activities, you need to be aware of proper etiquette in relation to others. For example, when jogging, you show respect for others when passing on sidewalks. Another part of etiquette is showing that you respect the environment as well as other people. For example, you could show that you respect the environment when running by staying on trails or pathways rather than running off the path.”

- C2.2** describe and compare different categories of physical activities (e.g., *individual, target, net/wall, striking/fielding, territory*), and describe strategies that they found effective while participating in a variety of physical activities in different categories [A1.6 Thinking]

Teacher prompt: “Territory games such as lacrosse, basketball, ultimate disc, rugby, soccer, broomball, speedball, ringette, wheelchair basketball, goal ball, and sledge hockey all involve controlling an object, keeping it away from opponents, and working together as a team to move it across the playing area until someone on the team can score. These games commonly involve the use of kicking, carrying, running, and/or throwing skills. Territory games have the most complex structures of all of the game categories because of the number of variables and the number of people involved. What strategies might you apply in any territory game?”

Student: “Teamwork is very important in all of these games. When you or your team has the object, important strategies involve focusing on ways of working together as a team to keep possession of the object, moving it down the playing area, and getting into an open space so you can either receive a pass or get a clear shot at the goal. When you do not have the object, important strategies include working together as a team to try to regain possession of the object by staying between the offensive player and the goal, and using your hands, feet, or stick (depending on the game) to keep your opponent from scoring.”



Teacher prompt: “Territory games often involve fast transitions from offence to defence. How is this different from net/wall activities, striking/fielding activities, or target activities?”

Student: “Because the transition from offence to defence is often very quick in territory activities, players need to be ready to switch directions and strategies as the play changes. That also happens in net/wall activities, but in those games, each team stays on its own court while changing from offence to defence. In striking/fielding and target activities, there is a stop in the game as teams switch from offence to defence, so the pace is slower and more controlled.”



Teacher prompt: “Consider what is similar about activities like canoeing, triathlons, and track and field. What do these activities have in common, and what strategies might you use in all of these activities?”

Student: “These activities all involve a combination of skills. With canoeing, you need to paddle, but often you also need to be able to carry the canoe. A triathlon involves swimming, biking, and running. There are a number of activities in track and field, including running races of different distances and different types of jumps and throws. In each of these activities, you need to practise and develop your fitness

to improve. Strategies for all these activities focus on pacing and on planning transitions from one phase of the activity to another.”

C2.3 apply a variety of tactical solutions to increase chances of success as they participate in physical activities (e.g., **individual activities:** practise a dance or gymnastics sequence in parts to refine each move, then put it back together in a sequence; **target activities:** adjust force when sending the object so that it will stop or land in a position to block the opponent; **net/wall activities:** work with teammates to cover space effectively; **striking/fielding activities:** hit or kick in different ways, varying the distance the object is sent, so that it will be more difficult for opponents to field and return the object; **territory activities:** use a “give and go” by sending the object to a teammate [give] then running to an open space to receive the object back again from the teammate [go]; kick a leading pass to a moving teammate to maintain possession) [A1.2 Coping, 1.4 Relationships, 1.6 Thinking]*

Teacher prompt: “How do you make it difficult for opponents to hit the ball in striking/fielding activities?”

Student: “Change the speed and pathway of the ball. Change the level of the throw. Put a spin on the ball.”

* Critical and creative thinking skills and processes are involved in choosing or devising tactical solutions at any age. However, the focus of social-emotional learning skill development shifts with the student’s stage of development, and this shift may be evident in the context of applying tactical solutions. Students in Grades 1–3 may be focusing on identifying and managing emotions and learning about themselves; students in Grades 4–6 may be ready to strengthen skills for interacting with others, persevering, and coping with challenges; and students in Grades 7 and 8 may be prepared to focus on deepening thinking skills and their understanding of themselves and others (e.g., transferring understanding from one activity to another; applying systems thinking by transferring their learning from a specific context to a more global context, as in considering the environmental benefits as well as the fitness and recreational benefits of using active transportation; including a variety of different moves in a creative way in a dance or fitness routine).

Strand D

Healthy Living

Instruction should focus on the overall expectation (D1, D2, D3 in the chart below) and should, where possible, be planned to illustrate connections across topics (listed in column 1) in an integrated way. The chart provides a brief summary of topics to support learning about health concepts, making healthy choices, and making connections for healthy living.

HEALTHY LIVING LEARNING SUMMARY BY TOPIC FOR GRADE 7

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating		D2.1 Eating patterns and health problems	D3.1 Personal, external factors in food choices
Personal Safety and Injury Prevention	D1.1 Benefits and dangers – technology	D2.2 Impact of bullying/harassment	
Substance Use, Addictions, and Related Behaviours	D1.2 Mental health, substances, support	D2.3 Body image, substance use	D3.2 Implications of substance use, addictions, and related behaviours
Human Development and Sexual Health	D1.3 Delaying sexual activity D1.4 Sexually transmitted and blood-borne infections (STBBIs) D1.5 STBBIs and pregnancy prevention	D2.4 Sexual health and decision making	D3.3 Relationship changes at puberty
Mental Health Literacy	D1.6 Mental health, mental illness		

OVERALL EXPECTATIONS

By the end of Grade 7, students will:

- D1. demonstrate an understanding of factors that contribute to healthy development;**
- D2. demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;**
- D3. demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others’ health and well-being.**

SPECIFIC EXPECTATIONS

D1. Understanding Health Concepts

By the end of Grade 7, students will:

Personal Safety and Injury Prevention

- D1.1** describe benefits and dangers, for themselves and others, that are associated with the use of computers and other digital technologies (e.g., **benefits:** efficiency and time savings; increased access to information; improved communication, including global access; **dangers:** misuse of private information; negative impact on mental health, including possible social isolation, feelings of depression, and addiction; identity theft; cyberstalking; exposure to online predators, including those involved in sex trafficking and/or soliciting explicit sexual images; hearing damage and/or traffic injuries associated with earphone use; financial losses from online gambling), and identify protective responses [A1.2 Coping, 1.4 Relationships, 1.5 Self]

Teacher prompt: “We’ve already discussed the benefits of using technology. Along with the benefits, there are risks, such as being targeted for harmful online interactions, encountering online violence and hate, including that generated by hate groups, and dealing with unsafe social media challenges. Another risk is encountering pornography and other sexually explicit material that promotes gender stereotypes, unsafe sex practices, and unrealistic portrayals of sex, sexuality, and relationships. What are some ways of staying safe when you are online? What should you keep in mind when you are using a computer or mobile device? What can you do to take care of your physical and mental health when it comes to digital media?”

Students: “It’s important to be aware of how much time you are spending online and to set healthy limits for screen time. There are apps to help with this.” “Everyone should be aware that anything they write or post could become public information. If you do not want someone else to know about something, or someone has not given you permission to share something, you should not write about it or post it.” “You should never share your password.” “Not everything we come across online is real. For example, some social media challenges are hoaxes, and may be harmful. I need to think carefully and critically about what I see online.” “If you are a target of online harassment, you should save and print the messages you received and get help from a parent, teacher, or other trusted adult.”



Teacher prompt: “Sexting – or the practice of sending explicit sexual messages or photos electronically, predominantly by smart phone – is a practice that has significant risks and potential legal consequences. What are some of the risks? What can you do to minimize those risks and treat others with respect?”

Students: “Photos and messages can become public even if shared for only a second. They can be manipulated or misinterpreted. If they become public, they can have an impact on the well-being of the individuals involved, their future relationships, and even their jobs. There are also legal penalties for anyone sharing images without consent.” “You shouldn’t pressure people to send photos of themselves. If someone does send you a photo, you should delete it. Do not send it to anyone else or share it online, because respecting privacy and treating others with respect are just as important with online technology as with face-to-face interactions.”

Substance Use, Addictions, and Related Behaviours

- D1.2** demonstrate an understanding of linkages between mental health problems and problematic substance use, as well as between brain development and cannabis use, and identify school and community resources (*e.g., trusted adults at school, guidance counsellors, public health services, help lines*) that can provide support for mental health concerns relating to substance use, addictions, and related behaviours [A1.2 Coping, 1.4 Relationships, 1.6 Thinking]

Teacher prompt: “*Problematic substance use* is a term that refers to the pattern and types of use of substances in ways that have a higher risk of negative individual and societal health impacts. One type of problematic substance use is *potentially harmful use*. Examples of potentially harmful use include underage drinking, binge drinking, or harmful ways of using substances, such as injecting drugs. *Substance use disorder* is use that has become a physical and/or mental addiction, involving frequent and compulsive use despite negative health and social effects. Problematic substance use and mental health problems are often closely connected. Many people suffer from both, although it is important to note that one doesn’t necessarily cause the other. In some cases, the causes may be quite different, or both may be caused by a common factor, which could be genetic, developmental, or environmental. For example, traumatic events (an environmental factor) can lead to both mental health and substance use problems. In other cases, mental health problems may contribute to problematic substance use: alcohol and drugs may be used as a means to cope with a mental health problem and may make the symptoms worse. Conversely, long-term drug use can lead to a loss of contact with reality and to the development of delusions and other psychotic symptoms similar to those seen with some mental health problems. What are some mental health problems that are sometimes connected with problematic substance use?”

Student: “Sometimes people use drugs or alcohol as a way of coping with overwhelming feelings. But problematic substance use is also sometimes associated with having a mental illness, such as an anxiety disorder.”

Teacher: “Cannabis is a psychoactive drug, and contains THC [Tetrahydrocannabinol], which can impair the development of the pre-frontal cortex of the brain. Why are teenagers especially susceptible to the negative effects of any drug use, including cannabis use?”

Student: “The brain is not fully developed until around age 25. Frequent and long-term cannabis use at a young age can harm the brain and lead to problems with memory, concentration, thinking, learning, handling emotions, decision making, and mental health.”

Human Development and Sexual Health

- D1.3** explain the importance of having a shared understanding with a partner about the following: delaying sexual activity until they are older (*e.g., choosing to abstain from any genital contact; choosing to abstain from vaginal or anal intercourse; choosing to abstain from oral-genital contact*); the reasons for not engaging in sexual activity; the concept of consent, the legal age of consent, and how consent is communicated; and, in general, the need to communicate clearly with each other when making decisions about sexual activity in a healthy, loving relationship [A1.1 Emotions, 1.4 Relationships, 1.5 Self, 1.6 Thinking]

Teacher prompt: “The term *abstinence* can mean different things to different people. People can also have different understandings of what is meant by having or not having sex. Be clear in your own mind about what you are comfortable or uncomfortable with. Being able to talk about these boundaries with a partner is an important part of sexual health. Having sex can be an enjoyable experience. It can also be an important part of a close, loving, and committed relationship, such as marriage or a long-term, healthy relationship, when you are older. Some people may think that sex is the best way to express love, but there are many other important and meaningful ways in which it can be expressed. Having sex has risks too, including the possibility of getting sexually transmitted and blood-borne infections (STBBIs) or becoming a parent when you don’t want to. There are also emotional and other considerations to think about. What are some of them?”

Students: “It’s best to wait until you are older to have sex because you need to be emotionally ready, which includes being able to talk with your partner about how you feel, being prepared to talk about and use protection against STBBIs or pregnancy, and being prepared to handle the emotional ups and downs of a relationship, including the ending of a relationship. Some people see sex as little more than a physical act and do not realize the emotional impact it can have. Engaging in any type of sexual activity with a partner can make the relationship more emotional or more complicated.” “Some people choose to or are encouraged to wait to be sexually active for personal, cultural, or religious reasons.” “People should not feel that they need to engage in sexual acts in order to please their partner or to gain social acceptance. A person should not have sex if they are feeling pressured, if they are unsure, if they are under the influence of drugs or alcohol, or if their partner is not ready or has not given consent. It is also important to remember that a person is free to change their mind about any type of activity at any time, and that their boundaries must be respected.”

- D1.4** identify sexually transmitted and blood-borne infections (STBBIs), and describe their symptoms

Teacher prompt: “Common sexually transmitted and blood-borne infections include human papillomavirus (HPV), genital herpes, chlamydia, HIV, gonorrhea, and hepatitis. In some cases when a person has an STBBI, there are visible symptoms, but in many cases, the person has no visible symptoms, so it’s hard to tell if you or someone else has an STBBI. All STBBIs can have a significant impact on your health if they are not treated. What are some symptoms of an STBBI? If an STBBI has no symptoms, how can you find out if you have it?”

Student: “Sometimes when you have an STBBI, you can see symptoms, such as pubic lice or genital warts. In other instances you may experience itching, redness, or pain when urinating. If you are sexually active you should be regularly tested by a health-care provider even if you don’t see or experience any symptoms. Depending on the STBBI, tests can be done by taking swabs from the cervix, vagina, urethra, or other body parts, or by taking urine or blood samples.”

- D1.5** identify ways of preventing STBBIs and/or unplanned pregnancy, such as delaying first intercourse and other sexual activities until a person is older and using condoms and other forms of protection consistently [A1.2 Coping, 1.4 Relationships, 1.5 Self]

Teacher prompt: “Engaging in sexual activities like oral sex, vaginal intercourse, and anal intercourse means that you can contract an STBBI. The most reliable way to avoid sexually transmitted infections is to not have sex. If a person is thinking of having sex, what can they do to protect themselves?”

Student: “They should go to a health clinic or see a nurse or doctor who can provide important information about protection and HPV vaccination. People who think they will be having sex sometime soon should keep a condom or other effective and suitable form of protection with them so they will have it when they need it. They should also talk with their partner about being emotionally ready to have sex and about using protection before they have sex, so both partners will know that protection will be used. If a partner says they do not want to use a condom, for example, a person should say, ‘I will not have sex without a condom.’ If you do have sex, it is important that you use protection every time, to help prevent contracting an STBBI or becoming a parent before you are ready.”



Teacher prompt: “HIV [Human Immunodeficiency Virus] is a serious viral infection that can be controlled with treatments. HIV attacks the cells in the body that help to fight infections until they are no longer able to do their job. With treatment, the damage that HIV does to the body’s immune system can be slowed or prevented. The only way to know if you have HIV is to get an HIV test. Today, with antiviral and other medicines, people with HIV are living longer, with a better quality of life. HIV can lead to AIDS [Acquired Immune Deficiency Syndrome], a state of health in which a

person's immune system has been weakened by HIV and the person can no longer fight other infections. It is common for a person with AIDS to develop other infections, such as pneumonia or some kinds of cancer. HIV can be transmitted whether or not someone has symptoms of the infection. However, HIV treatment can reduce the amount of HIV in someone's body to the point where it cannot be transmitted. HIV transmission results from specific activities and does not occur through everyday contact with someone living with HIV or AIDS. What are some of the ways a person can be infected with HIV, and what can be done to prevent the transmission of HIV?"

Student: "HIV may be transmitted through contact with bodily fluids – semen, blood, vaginal or rectal fluid, and breast milk. HIV cannot live outside the body. For you to be infected, the virus must enter your bloodstream. That can happen through the sharing of needles as well as through unprotected vaginal or anal intercourse, which is the most common method of infection. It is very important that you use protection, such as a condom, if you do have sex. Avoid sharing drug-use equipment or using needles that have not been sterilized for any purpose, including piercing, tattooing, or injecting steroids. One of the best things you can do to stop HIV is to stop the stigma that is associated with having the infection. Gossiping about someone with HIV, shaming them, or avoiding everyday contact with them makes it more challenging for them to tell others that they have HIV or to get tested for it. These things make it easier for HIV to spread."

Mental Health Literacy

- D1.6** demonstrate an understanding of the relationship between mental health and mental illness and identify possible signs of mental health problems [A1.6 Thinking]

Teacher prompt: "Mental health and mental illness are like physical health and physical illness. A person can be in good health but have a diagnosed illness. We don't say that someone who has a diagnosed health condition, such as diabetes or asthma, is 'unhealthy'. If they make healthy choices, as circumstances allow, such as getting adequate sleep, being physically active daily, and eating healthy nutritious foods, they can maintain their health while still having a diagnosed illness. The same is true of mental health. If a person takes care of their mental health, as best they can, and has a sense of well-being and resilience, they can be mentally healthy even if they have a diagnosed mental illness, such as an anxiety disorder or depression. Whether or not we have a diagnosed mental illness, our mental health is impacted by our feelings, thoughts, and actions, and by our experiences and circumstances in our day-to-day lives. How would you explain the relationship between mental health and mental illness?"

Student: "Mental health refers to a person's overall sense of well-being – when the person knows what they are good at and when they need help, and when even if they have ups and downs, they can operate pretty well every day. Mental illness is

something that a doctor would tell you you have, just like a physical illness. It's like any illness, only it affects your ability to think, to relate to others, or to function every day.”

Teacher: “Everyone experiences stress from time to time. There are common stressors that all students experience, like having tests and assignments or being worried about making a team or about being included in something. And sometimes life can be very stressful for young people – times when a parent loses a job or someone moves away or someone gets really sick. It's important to know that although we all have stress and that it sometimes leads to feelings of anxiety, this does not mean that we have an ‘anxiety disorder’ or some other form of mental illness. Experiencing a range of feelings is normal as we develop and learn about how our bodies and brains work together. When problems go on for a long time, it might be a sign that a person needs help. Possible signs of a mental health problem include frequently having feelings of sadness or anxiety that are stronger than usual or last longer; having difficulty paying attention; having problems with eating, sleeping, or managing expectations at school; or being addicted to substances. What are some other signs that a person might benefit from seeking support from a trusted adult?”

Student: “Signs that someone might need help include having feelings that interfere with everyday activities. For example, a person who feels too sad and tired to get up for school, or who loses interest in activities they normally enjoy, or whose behaviour suddenly changes a lot might need some support. A person who can't go to a friend's party because they are sure everyone will be judging them and talking about them might also need help. If you are unsure about your own mental health or someone else's, it's good to ask for help.”

D2. Making Healthy Choices

By the end of Grade 7, students will:

Healthy Eating

- D2.1** demonstrate the ability to develop healthier eating patterns, using information about the role that different foods play as contributing or preventive factors in a variety of health disorders (*e.g., cancer, Type 2 diabetes, cardiovascular disease, obesity, food allergies and anaphylaxis, tooth decay, osteoporosis*) [A1.2 Coping, 1.5 Self, 1.6 Thinking]

Teacher prompt: “Your eating patterns can contribute positively to your overall physical and mental health, but they can also contribute to health problems. Paying attention to how you feel in connection with not only what you eat but also when you eat and with whom you eat can make a difference in your mental health. Canada's Food Guide recommends being mindful of your eating, eating meals with others, and taking time to enjoy your food. In other words, it's helpful to pay attention to

your ‘food-mood’ connections! Regularly eating healthy foods gives you the vitamins, minerals, and nutrients you need to be healthy. An unhealthy eating pattern is one of the many factors, including obesity, physical inactivity, smoking,* and high blood pressure, that can increase the risk of illness and disease. Fruit and vegetable consumption has been linked to a lower risk of heart disease, whereas a diet high in processed meat has been linked to an increased risk of colorectal cancer. Consuming fewer sugar-sweetened foods and drinks (including 100 per cent fruit juice) and following good oral hygiene practices helps reduce the risk of obesity, type 2 diabetes, and tooth decay. Vegetables, fruit, whole grains, and protein foods should be consumed regularly. Choose protein foods that come from plants more often. Foods that contain mostly healthy fats should replace foods that contain mostly saturated fat, to help lower the risk of cardiovascular disease.”

Personal Safety and Injury Prevention

- D2.2** assess the potential impact on themselves and others of various types of bullying, abuse, exploitation, or harassment, including homophobic bullying or harassment and other forms of identity-based bullying, and of the type of coercion that can occur in connection with sexting and online activities, and identify ways of preventing or resolving such incidents (*e.g., communicating feelings; reporting incidents involving themselves or others; encouraging others to understand the social responsibility to report incidents and support others rather than maintaining a code of silence or viewing reporting as “ratting”; seeking help from support services; learning skills for emotional regulation; using strategies for defusing tense or potentially violent situations*) [A1.1 Emotions, 1.2 Coping, 1.4 Relationships, 1.5 Self]

Teacher prompt: “What are some of the consequences of using homophobic put-downs or racial slurs? How can this hurtful behaviour be prevented?”

Student: “Using homophobic or racist language is discriminatory and it can be harmful to the targeted person’s well-being. It can also have harmful consequences for the whole atmosphere in the school. Sometimes, people speak without thinking about what they are actually saying and how they are hurting others. To change this behaviour, everyone needs to take responsibility for the words they use and also to challenge others who make discriminatory comments or put people down, whether in person or online.”



Teacher prompt: “Inappropriate sexual behaviour, including things like touching someone’s body as they walk by in the hall, making sexual comments, or pulling pieces of clothing up or down, is sexual harassment. Texting someone constantly can also be harassment. What can you do to stop this kind of thing?”

* This reference is to smoking commercial tobacco products. It does not refer to the ceremonial use of natural tobacco in First Nations and Métis cultures.

Students: “Don’t do it. Don’t encourage others to do it. Don’t accept it if you see it happening – whether in person or on social media. Tell the person to stop, or report them.” “Online, you can call someone on unacceptable language, but it’s better to have a face-to-face conversation about it afterwards.”



Teacher prompt: “A common form of harassment is spreading hurtful gossip about others. Is this type of bullying any less harmful than physical bullying? How can it be stopped?”

Student: “Verbal and social bullying and harassment – whether done in person, online, or through texting – are just as harmful as physical bullying and can have a negative impact on the targeted person’s mental health. There are legal consequences for both physical assault and verbal harassment. If we hear it or see it, we should not tolerate it. It is up to everyone to make sure that this type of behaviour is not tolerated.”



Teacher prompt: “What kind of support will the person who was bullied and the bystander need?”

Student: “The person who was bullied and the bystander need to be listened to and given a chance to express their feelings about the harm that has been done and to contribute their ideas about what needs to be done to put things right. They need to be given help to make sure the bullying stops. They might be afraid and may need counselling to recover emotionally from being bullied or witnessing bullying. To prevent future bullying, we should all try to discover and affirm the uniqueness of each person and support one another.”

Teacher: “It is often helpful to work with the person who did the bullying, in order to prevent such an incident from happening again. It can be helpful to use an approach that puts the emphasis on the wrong done to the person as well as the wrong done to the community. It requires wrongdoers to recognize the harm they have caused, accept responsibility for their actions, and be actively involved in improving the situation. What is needed for this to happen?”

Student: “Both parties need to be willing to work through the issue together, looking for a solution that helps everyone. The person who did the bullying has to admit guilt and accept responsibility for their actions. The person who was targeted needs to participate without feeling pressured. It is really important for their participation to be voluntary and for the process not to cause further harm. Someone who is skilled in guiding this approach can make sure that the outcome is helpful for everyone.”

Substance Use, Addictions, and Related Behaviours

- D2.3** explain how preoccupation with body image or athletic performance can contribute to harmful or problematic eating habits and substance use, and demonstrate the ability to make informed choices about caring for their bodies [A1.3 Motivation, 1.5 Self, 1.6 Thinking]

Teacher prompt: “What are the dangers of cutting out certain types of nutrients in an attempt to lose weight or alter body shape?”

Student: “All nutrients, including carbohydrates and fats, have important functions. For example, carbohydrates provide us with the energy we need to function every day. When we cut out or significantly limit our intake of carbohydrates, several problems can arise. First, because our bodies and brains are not getting what they need, we can start to feel sluggish, have trouble concentrating, and feel moody or irritable. Second, when we are very rigid about what we eat, we may become more rigid in other areas of our lives, and that can make us less able to enjoy ourselves. We can start to feel more anxious and more socially isolated, and we can become more vulnerable to developing an eating disorder.”



Teacher prompt: “What are the dangers of using substances to alter body shape? What is a healthier alternative?”

Student: “Using substances to change body shape or to control weight is dangerous because of the hazards associated with different substances. Diet pills and laxatives can cause dehydration. Steroids have many side effects, including increased irritability, aggressiveness, mood swings, acne, changes in sex organs, hair loss, and addiction. Prolonged use of high dosages can lead to organ damage. A balanced combination of healthy eating and physical activity is a safer and healthier alternative to using drugs to alter body shape. If we find we’re feeling very preoccupied with our bodies, it’s a good idea to talk to a trusted adult for support.”

Human Development and Sexual Health

- D2.4** demonstrate an understanding of physical, emotional, social, and cognitive factors that need to be considered when making decisions related to sexual health (*e.g., sexually transmitted and blood-borne infections [STBBIs], possible side effects of contraceptives, pregnancy, protective value of vaccinations, social labelling, gender identity, gender expression, sexual orientation, self-concept issues, relationships, love, respect, desire, pleasure, cultural teachings*) [A1.1 Emotions, 1.2 Coping, 1.4 Relationships, 1.5 Self]

Teacher prompt: “Thinking about your sexual health is important. It’s important to have a good understanding of yourself before you get involved with someone else. It’s not just about making a decision to have sex or waiting until you are older. It’s also about things like your physical and emotional readiness; having safer sex and avoiding

consequences such as becoming a parent before you want to or contracting an STBBI; your sexual orientation and gender identity; your understanding of your own body, including what gives you pleasure; and the emotional implications of sexual intimacy or being in a relationship. Some people can experience anxiety and a range of other emotions after the breakup of a relationship that has had strong physical and emotional components. People can seek help or counselling if they feel that they are caught in a cycle of unhealthy relationships. Thinking about your sexual health can also include thinking about religious, cultural, or spiritual beliefs. Moral and ethical considerations are involved as well, including the need to respect the rights of other people. Can you explain what is meant by a moral consideration?”

Student: “A moral consideration is what you believe is right or wrong. It can be influenced by your personal, family, religious, cultural, or spiritual values. Every person in our society should treat other people fairly and with respect. It is important to take this into account when we think about our relationships, sexual behaviour, and activities.”

Teacher: “Like any other decision, a decision about sexual health requires you to look at all sides of an issue. How can you do that?”

Student: “You need to consider the pros and cons of any decision you are making, and how those decisions will affect both you and others.”

D3. Making Connections for Healthy Living

By the end of Grade 7, students will:

Healthy Eating

- D3.1** demonstrate an understanding of personal and external factors that affect people’s food choices and eating habits (e.g., **personal:** likes and dislikes, basic food skills, busy schedules, food allergies or sensitivities, health conditions, personal values, cultural practices or teachings; **external:** family or household budget, cost of foods, access to clean drinking water, type of food available at home, at school, or in the community), and identify ways of encouraging healthier eating practices [A1.2 Coping, 1.3 Motivation, 1.5 Self, 1.6 Thinking]

Teacher prompt: “How can people make healthy food choices if their choices are limited by a dislike of certain foods, by a food allergy, by personal beliefs about ethical food choices, by cultural preferences or religious food rules, or by budget limitations?”

Student: “Some limitations can be removed or overcome. People often dislike certain foods without ever having tried them. We should always consider at least trying a food before rejecting it. Often we discover that we like a food when we learn to

prepare or serve it in a different way. In other cases, we just have to work within the limitations. A lot of tasty food choices are available for people who are making ethical choices or following religious and cultural food rules, or who have allergies. If we have a limited budget, we can still eat well by making careful food choices. Highly processed food products are usually readily available, but are also usually less nutritious than fresh foods cooked at home. If available, local produce can be relatively inexpensive in season. One limitation that is hard to overcome is a lack of access to safe drinking water.”

Substance Use, Addictions, and Related Behaviours

- D3.2** analyse the personal and societal implications of issues related to substance use, addictions, and related behaviours (*e.g., effects of technology dependence on school and workplace performance, personal relationships, and physical health; impacts of pornography viewing patterns on relationships; risks associated with vaping and chewing tobacco; effects of second-hand smoke on non-smokers and children; legal and health implications of underage drinking and cannabis use; body damage and reputation loss among athletes as a result of the use of steroids and other performance-enhancing drugs; risk of HIV/AIDS with intravenous drug use; risk of fetal alcohol spectrum disorder [FASD] as a result of alcohol use during pregnancy*) [A1.6 Thinking]

Teacher prompt: “Underage drinking is a concern in our school. Who can be harmed by underage drinking, and how?”

Student: “Underage drinking can be harmful to the person doing it because it can lead to legal charges and physical, mental, and emotional harm. Intoxication can also lead to taking more risks, which can result in injury or death. It is also associated with violence in relationships, which causes harm to others. Alcohol poisoning can be fatal. Underage drinking can be harmful to family members and the community because of the personal injuries or property damage that can result from actions or behaviour associated with impaired judgement, including car crashes. Underage drinkers also risk losing the trust of their peers, parents, and other adults.”



Teacher prompt: “What are some of the potential negative impacts of viewing of sexually explicit media such as pornography and certain video and online games?”

Student: “There can be issues both with the amount of time spent online and with what is being viewed. Viewing this kind of material can lead to spending too much time online, which can get in the way of things that keep people healthy, like being outdoors, being physically active, spending time with friends and family, and getting enough sleep. It can become difficult to stop going online, and this can have an impact on other areas of a person’s life, like school and social life. Issues with the content of pornography include that it often portrays sexuality and relationships in unrealistic and harmful ways. It reduces people to sexual objects and is often disrespectful to

women. This can also be true of video and online games. Also, pornography often shows sexual behaviours that are high risk for STBBIs. If a person sees pornography, it is important for them to understand that it may be showing things that are unrealistic, unhealthy, or harmful.”

Human Development and Sexual Health

- D3.3** explain how relationships with others (*e.g., family, peers*) and sexual health may be affected by the physical and emotional changes associated with puberty (*e.g., effect of physical maturation and emotional changes on family relationships; effect of growing interest in intimate relationships on peer relationships; increased risk of STBBIs and/or pregnancy with onset of sexual activity*) [A1.1 Emotions, 1.4 Relationships]

Teacher prompt: “How can the changes experienced in puberty affect relationships with family and others?”

Student: “Adolescents may become interested in having an intimate relationship with someone. They may feel ‘grown up’, but still get treated like a kid, and this sometimes leads to conflicts with parents. They may want more independence.”

Overall Expectations At a Glance

Strand A. Social-Emotional Learning Skills

Throughout Grade 8, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1.** apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.

Strand B. Active Living

By the end of Grade 8, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

Strand C. Movement Competence

By the end of Grade 8, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

Strand D. Healthy Living

By the end of Grade 8, students will:

- D1.** demonstrate an understanding of factors that contribute to healthy development;
- D2.** demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;
- D3.** demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others' health and well-being.

Strand A

Social-Emotional Learning Skills

This strand focuses on the development of students' social-emotional learning skills to foster their overall health and well-being, positive mental health, and ability to learn, build resilience, and thrive. In all grades of the health and physical education program, the learning related to this strand takes place in the context of learning related to the Active Living, Movement Competence, and Healthy Living strands, and it should be assessed and evaluated within these contexts.

OVERALL EXPECTATION

Throughout Grade 8, in order to promote overall health and well-being, positive mental health, and the ability to learn, build resilience, and thrive, students will:

- A1. apply, to the best of their ability, a range of social-emotional learning skills as they acquire knowledge and skills in connection with the expectations in the Active Living, Movement Competence, and Healthy Living strands for this grade.**

SPECIFIC EXPECTATIONS

Throughout Grade 8, students will, to the best of their ability:

Identification and Management of Emotions*

- A1.1** apply skills that help them identify and manage emotions as they participate in learning experiences in health and physical education, in order to improve their ability to express their own feelings and understand and respond to the feelings of others (e.g., **Active Living:** give examples of how to communicate information clearly and concisely in an emergency situation while managing feelings associated with the situation; **Movement Competence:** explain how awareness of emotion, such as feeling nervous about having to make a key shot in curling, can impact performance; **Healthy Living:** explain how social media can create feelings of stress, and describe strategies that can help maintain balance and perspective)

* To support program planning, many specific expectations in strands B, C, and D are tagged to indicate the social-emotional skills that can be integrated into teaching and learning associated with the expectation. The tags are given in square brackets after the expectation, and use the identifiers A1.1 Emotions, 1.2 Coping, 1.3 Motivation, 1.4 Relationships, 1.5 Self, 1.6 Thinking.

Stress Management and Coping*

A1.2 apply skills that help them to recognize sources of stress and to cope with challenges, including help-seeking behaviours, as they participate in learning experiences in health and physical education, in order to support the development of personal resilience (e.g., **Active Living:** manage their improvement of different health-related components of fitness by monitoring the frequency of their physical activity, the intensity of the activity, the types of activities they choose, and the length of time they are being active, and make connections between improving fitness levels and improving their ability to cope with stress; **Movement Competence:** use visualization strategies to increase success when applying principles of movement as they perform skills; **Healthy Living:** explain when daily healthy habits and coping strategies may not be enough to maintain mental health and when professional help may be required)

Positive Motivation and Perseverance*

A1.3 apply skills that help them develop habits of mind that support positive motivation and perseverance as they participate in learning experiences in health and physical education, in order to promote a sense of optimism and hope (e.g., **Active Living:** show an understanding of how seeing improvements in fitness over time can impact their motivation to persevere in their efforts; **Movement Competence:** use tactics to increase success, and in that way contribute to motivation, when learning a new skill; **Healthy Living:** explain how a person might be more motivated to make healthy and safe choices if they know that one of the factors influencing decisions about sexual activity is having a sense of hope and optimism for the future)

Healthy Relationships*

A1.4 apply skills that help them build relationships, develop empathy, and communicate with others as they participate in learning experiences in health and physical education, in order to support healthy relationships, a sense of belonging, and respect for diversity (e.g., **Active Living:** cooperate with others by respecting their choice of activities; encourage others when participating in activities like cross-country running; **Movement Competence:** work with a partner to try out different types of passes to evade opponents; congratulate opponents with sincerity when they make a good play; **Healthy Living:** explain the positive aspects and the risks associated with close personal relationships and different levels of physical intimacy; make adjustments to suit particular audiences – parents, peers, younger students, community members – when communicating to promote healthy eating)

Self-Awareness and Sense of Identity*

A1.5 apply skills that help them develop self-awareness and self-confidence as they participate in learning experiences in health and physical education, in order to support the development of a sense of identity and a sense of belonging (e.g., **Active Living:**

*explain how knowing themselves – their likes, dislikes, strengths, abilities, and areas for growth – can help them determine which health-related and skill-related components of fitness to focus on when developing their fitness plan; **Movement Competence:** monitor improvements in their body control as they apply their understanding of the phases of movement – preparation, execution, follow-through – to the refinement of a variety of movement skills; **Healthy Living:** describe the importance of self-awareness in building an understanding of identity, including gender identity and sexual orientation)*

Critical and Creative Thinking*

- A1.6** apply skills that help them think critically and creatively as they participate in learning experiences in health and physical education, in order to support making connections, analysing, evaluating, problem solving, and decision making (e.g., **Active Living:** *track and analyse changes in their health-related components of fitness over a designated period of time, and make any necessary adjustments in their fitness plans; plan ways to promote the involvement of all the students in the school in “healthy schools” activities such as waste-free lunch programs and active recess activities; **Movement Competence:** explain the relationship between developing movement competence and building confidence and the extent to which people participate in physical activity; **Healthy Living:** analyse potentially dangerous situations and devise solutions for making them safer)*

Strand B

Active Living

OVERALL EXPECTATIONS

By the end of Grade 8, students will:

- B1.** participate actively and regularly in a wide variety of physical activities, and demonstrate an understanding of how physical activity can be incorporated into their daily lives;
- B2.** demonstrate an understanding of the importance of being physically active, and apply physical fitness concepts and practices that contribute to healthy, active living;
- B3.** demonstrate responsibility for their own safety and the safety of others as they participate in physical activities.

SPECIFIC EXPECTATIONS

B1. Active Participation

By the end of Grade 8, students will:

- B1.1** actively participate according to their capabilities in a wide variety of program activities (e.g., individual, small-group, and large-group activities; movement and rhythmic activities; dance; outdoor activities on the land) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “In the next ten minutes, you will have the opportunity to go to three different fitness stations. Think about what stations you will choose to visit.”

Student:* “I am going to pick two stations that connect to my fitness goals and one for fun. I am going to go to the exercise band station because I need to work on my arm strength. I am going to go to the stability ball station because I am working on my core strength and balance. I’m going to pick skipping as my third station because my friend and I are having a contest to see who can skip rope the longest without stopping.”

* Throughout this curriculum, student responses often follow the teacher prompts. They are provided to illustrate content, and do not attempt to capture the speech patterns, syntax, or word choices typical of students in this grade.

B1.2 demonstrate an understanding of factors that contribute to their personal enjoyment of being active (e.g., *being able to adapt activities to suit individual needs and preferences; having a choice of activities and choices within activities; being comfortable with the activities, both socially and emotionally; being able to take part in activities in a natural environment; being able to take part in activities that are culturally relevant*), as they participate in a diverse range of physical activities in a variety of indoor and outdoor environments [A1.1 Emotions, 1.3 Motivation, 1.5 Self]

Teacher prompt: “In class, we play in different groups to experience working with different people who have different skill levels. What kinds of groups do you find most comfortable to participate in?”

Student: “I’m comfortable playing with people who are at my skill level, but I also like playing with people who are better than I am, because it gives me a good challenge and I can learn from playing with them.”



Teacher prompt: “Activities are more enjoyable when you can play at a level that is challenging but still not too difficult. How does this badminton activity do this?”

Student: “With this activity, you can choose to serve the shuttle from any of three lines. If you choose the distance that allows you to get the shuttle over the net most of the time and into one of the three areas marked on the floor with pylons, then you are choosing the distance that is not too easy and not too hard.”

B1.3 demonstrate an understanding of factors that motivate personal participation in physical activities every day (e.g., *gaining health benefits, including release from stress; having interpersonal interactions; becoming more independent in daily living activities; experiencing personal enjoyment*), and explain how these factors can be used to influence others (e.g., *friends, family, members of the community*) to be physically active [A1.1 Emotions, 1.3 Motivation, 1.4 Relationships, 1.6 Thinking]

Teacher prompt: “How can your participation in physical activity have an impact on others?”

Students: “By being active, you can be a good role model and influence others. At school I am a fitness buddy for a Grade 2 student. Our classes get together and we help the younger students participate in physical activities.” “Sometimes just by participating, you can motivate others to join you. Because I play water polo, my younger sister wants to try it.” “On the weekends when I go for a bike ride, my father often comes with me. He might not go out on his own if I were not going.”

B2. Physical Fitness

By the end of Grade 8, students will:

B2.1 Daily physical activity (DPA): participate in moderate to vigorous physical activity, with appropriate warm-up and cool-down activities, to the best of their ability for a minimum of twenty minutes each day (*e.g., capture the flag, four-corner soccer, ball fitness activities*) [A1.3 Motivation, 1.5 Self]

B2.2 recognize the difference between health-related components of personal fitness (i.e., cardiorespiratory endurance, muscular strength, muscular endurance, flexibility) and skill-related components (i.e., balance, agility, power, reaction time, speed, and coordination), and explain how to use training principles to enhance both components [A1.6 Thinking]

Teacher prompt: “How do you use training principles, such as considering the frequency and intensity of your workout and the timing and types of activities you choose, to improve your health-related fitness, particularly cardiorespiratory fitness? What do the Canadian Physical Activity Guidelines for Youth recommend?”

Student: “I need to decide what activities to do, and how often and how long I need to be active to get the fitness benefits I want. To improve my cardiorespiratory fitness, I need to choose activities that will raise my heart rate and make my heart and lungs work harder. Doing something like swimming for forty minutes three days a week, for example, would improve my cardiorespiratory fitness. The physical activity guide recommends that young people improve their fitness by increasing the time they currently spend on physical activity each day and reducing non-active time.”



Teacher prompt: “Health-related components of fitness contribute to your overall health and well-being. Skill-related components of fitness help improve the quality of your movements during activity. Agility is a skill-related component of fitness. Explain what agility is. Why is it important?”

Student: “Agility is the ability to change directions and change smoothly and easily from one movement to another. It is helpful when playing sports like soccer or basketball but also when participating in recreational activities like in-line skating or skateboarding. Having good agility helps you move more smoothly and efficiently and makes the activity more fun.”

B2.3 assess their level of health-related fitness (i.e., cardiorespiratory endurance, muscular strength, muscular endurance, flexibility) during various physical activities and monitor changes in fitness levels over time (*e.g., by tracking heart rates, recovery time, how they feel during and after activity, level of participation; noting increase in range of motion when doing yoga stretches; tracking increases in the number of repetitions when doing arm curls with exercise bands*) [A1.3 Motivation, 1.5 Self, 1.6 Thinking]

Teacher prompt: “How has monitoring your work on different fitness components helped improve your fitness?”

Student: “Seeing improvements over time has given me encouragement to keep working and become even more fit. Tracking my progress on different components has also helped me focus on those that need more work, so my overall fitness has become better.”

- B2.4** develop, implement, and revise a personal plan to meet short- and long-term health-related fitness and physical activity goals [A1.3 Motivation, 1.5 Self, 1.6 Thinking]

Teacher prompt: “What have you chosen as your goal? When setting your goal and developing your plan to achieve it, consider your time frame as well as your assessment information. Is your goal short-term or long-term? How do you know that your goal is realistic? How will you know whether you’ve achieved your goal? What will help you achieve your goal? How will achieving this goal help you?”

Student: “I’m working at improving my long-distance running/wheeling to improve my overall fitness. I want to run/wheel the 1500-metre event at the track meet in the spring. I am also thinking of doing a 10K charity run/wheel. I think my goal is realistic. It is October, so this is a long-term goal – and I have time to train. And I did complete the 1500-metre event last year, although it was fairly challenging. Here is my plan to accomplish my goal: I plan to practise three times a week for the next ten weeks. And if I work with a partner, I think I will be more successful, because my partner can give me tips, suggestions, and encouragement. I can also talk with my partner about my plan and consider whether I need to change anything I am doing. I don’t have a goal to complete the race in any set time. Finishing the race will be my goal. I will definitely be more fit and I will be really proud of myself if I can do this.”

B3. Safety

By the end of Grade 8, students will:

- B3.1** demonstrate behaviours and apply procedures that maximize safety and lessen the risk of injury, including the risk of concussion, for themselves and others during physical activity (*e.g., following appropriate procedures and guidelines; demonstrating social responsibility; encouraging others to act safely; wearing sunscreen, long sleeves, sunglasses, and a hat to limit UV exposure*) in a variety of physical activity settings (*e.g., school, community recreational facilities, outdoor recreational venues*) [A1.2 Coping, 1.5 Self, 1.6 Thinking]

Teacher prompt: “Other than school facilities, what are some local indoor and outdoor recreational venues in our community that we can use for physical activities? What safety considerations do you need to think about, whether you are participating in physical activity at school or in the community?”

Student: “We have several parks, including a skateboard park, as well as fields, hiking and snow trails, bike paths, a rink, and a lake that is close by. Wherever we participate in physical activities, we need to be aware of ourselves and others in our surroundings. Different activities have specific safety considerations and rules that we need to think about and follow. We also need to use and wear the proper safety equipment for these activities. Using good judgement, thinking for yourself, following posted rules and signs, and thinking before you act are good general guidelines.”

- B3.2** demonstrate a basic understanding of how to deal with emergency situations that may occur while participating in physical activity, including situations involving suspected concussions (*e.g., remain calm; know when more help is needed or when to call 9-1-1; know where to get more help; follow the school board’s concussion protocol if a concussion is suspected; know how to recognize symptoms of asthma or anaphylaxis; move objects that may be a safety hazard away from the injured person; know what an automated external defibrillator [AED] is and be aware of where they are located in community facilities*) [A1.1 Emotions, 1.2 Coping, 1.6 Thinking]

Movement Competence: Skills, Concepts, and Strategies

OVERALL EXPECTATIONS

By the end of Grade 8, students will:

- C1.** perform movement skills, demonstrating an understanding of the basic requirements of the skills and applying movement concepts as appropriate, as they engage in a variety of physical activities;
- C2.** apply movement strategies appropriately, demonstrating an understanding of the components of a variety of physical activities, in order to enhance their ability to participate successfully in those activities.

SPECIFIC EXPECTATIONS

C1. Movement Skills and Concepts

By the end of Grade 8, students will:

- C1.1** perform smooth transfers of weight and rotations, in relation to others and equipment, in a variety of situations involving static and dynamic balance (*e.g., display control while stepping and turning on and off steps during an aerobic routine; move smoothly between positions and twists during a Pilates activity; work with a partner to create a sequence that involves holding a partner’s partial or whole weight when transferring from one balance to another*) [A1.4 Relationships, 1.5 Self]

Teacher prompt: “Create a series of tableaux that demonstrates the different phases of your favourite physical activity, such as the three phases involved in sprinting or in swinging a cricket bat, showing how you get ready, showing the action itself, and showing the follow-through. Be sure to show three distinct movements and a smooth transition from each movement to the next.”

- C1.2** perform a wide variety of locomotor movements, with and without equipment, while responding to a variety of external stimuli (*e.g., approach, take off, and land when doing a triple jump into a pit; strive to beat a time record in orienteering; choreograph a dance*)

sequence in response to music; perform step aerobics at different tempos; change styles of cross-country skiing depending on snow and terrain conditions, using a skate technique on open, flat sections and a classic technique on narrower trails) [A1.3 Motivation, 1.5 Self]

Teacher prompt: “How might you modify the movements in your dance sequence as the music changes or as you develop new movement sequences using different types of music?”

Student: “With slower, more lyrical music, my movements would be slower and bigger. With fast music, I would use quicker and stronger steps in response to the fast tempo.”

- C1.3** use and combine sending, receiving, and retaining skills in response to a variety of external stimuli, while applying basic principles of movement (*e.g., shift weight and use all joints for maximum force when throwing against the wind; put an appropriate spin on the ball when throwing a football or rolling a ball around an obstacle in front of a target; sprint to catch a pass that has been thrown short to an open space away from defenders; while moving to music, transfer a rhythmic gymnastics ball from one hand to the other, using the momentum of the movement to hold on to the ball; show awareness of others’ positions when taking off and landing in a basketball layup; move body to retain an object in flag tag while evading defenders; keep the basketball on their lap while moving and evading a defender in wheelchair basketball*) [A1.2 Coping, 1.4 Relationships, 1.5 Self]

Teacher prompt: “How will you adjust for the wind when throwing an object?”

Student: “I will need to throw harder or softer, or adjust my aim, depending on the direction of the wind.”

- C1.4** demonstrate an understanding of the phases of movement (i.e., preparation, execution, follow-through) and apply this understanding to the refinement of movement skills in a variety of physical activities (*e.g., assume a ready position, swing, and follow through in a badminton stroke; reach, pull, and recover when doing the back crawl*) [A1.5 Self, 1.6 Thinking]

Teacher prompt: “How does the preparation phase for sprinting differ from the preparation phase for cross-country running?”

Student: “With sprinting, you stay low to the ground and prepare to explode from the start. With cross-country running, you want to start in more of an upright position, and you start more slowly because you want to conserve energy and pace yourself all the way through the run.”

C2. Movement Strategies

By the end of Grade 8, students will:

- C2.1** demonstrate an understanding of the components of a range of physical activities (e.g., movement skills, game structures, basic rules and guidelines, conventions of fair play and etiquette), and apply this understanding as they participate in a variety of physical activities in indoor and outdoor environments [A1.6 Thinking]

Teacher prompt: “Working in your small group, consider what rule you could change in this activity to make it more or less challenging.”

Student: “When playing ultimate disc, we could change the rules so that everyone has to throw with their non-dominant hand. That gives everyone good practice and also makes the play a little more equal because it makes it challenging for everyone.”

Teacher: “Now change the activity again, considering how you might adapt the activity for a person in your group who has different needs; for example, you may adapt the activity for someone who doesn’t understand the language or someone who may not understand the rules of the activity.”

Student: “We might change the rules to make it a lot simpler – for example, we would not worry about the rules about the number of seconds you can hold the disc or the number of steps you are allowed to take with the disc. Once everyone seems to understand the game, we could add those rules back in. Or we might play the game with a person who needs help paired up with a more experienced player, or with everyone working in pairs, so people can help each other follow the game. In this variation, both players would handle the disc – for example, one catches it and the other throws it – before it goes on to another pair.”

- C2.2** demonstrate an understanding of how movement skills, concepts, and strategies are transferable across different physical activities within various categories (e.g., individual, target, net/wall, striking/fielding, territory), and identify skills, concepts, and strategies that they found effective while participating in a variety of physical activities in different categories [A1.6 Thinking]

Teacher prompt: “Think about activities you do at school and those you do on your own time. How can knowing how to do an activity well affect your performance in that activity and in other activities?”

Students: “At school, we did cross-country running. I also go running sometimes at home. Learning how to pace myself when I run has made it a lot easier for me to run in my neighbourhood.” “We worked on our stability and balance when we did fitness and developmental gymnastics at school. My balance has improved and that has helped me with trail riding when I am working on strategies for riding over logs

and bumps. The better I get, the more confident I get and the more I am able to do. I can also use the skills, like balance, and the strategies, like ways of negotiating bumps and jumps, when I do other activities, like skateboarding.”



Teacher prompt: “What are some common elements of a variety of individual activities, such as yoga, qigong, and track and field? What about common elements among team sports such as soccer, rugby, and softball?”

Student: “Activities like yoga and qigong involve core strength, balance, and flexibility. Paying attention to breathing is also really important. There is also a certain etiquette that you should follow in these activities – for example, you shouldn’t talk while doing the activity. You should focus on your own practice. In team activities like soccer, rugby, and softball, you use sending, receiving, and carrying skills. You need an understanding of the basic rules. You need to be aware of the boundaries and work together as a team.”

C2.3 apply a variety of tactical solutions to increase chances of success as they participate in physical activities (e.g., **individual activities:** use conscious breathing to enhance movement during a fitness activity; toss balls or beanbags in an even pattern and keep eyes focused at the peak of the toss when learning to juggle with three objects; **target activities:** position balls or rocks in a place that makes it difficult for the opposing team to score in games such as bocce or curling; **net/wall activities:** choose the type of shot and consider the placement of the shot to gain an offensive advantage; **striking/fielding activities:** send the object away from the defenders to allow for more time to score before the fielders retrieve the object; **territory activities:** send a pass that places the object closer to the goal; keep their body between the object and the defender while moving; practise using a fast transition from offence to defence) [A1.1 Emotions, 1.3 Motivation, 1.6 Thinking]*

Teacher prompt: “How do you use a breathing rhythm, planning when to inhale and when to exhale, to help you when doing activities such as push-ups, curl-ups, and stretches?”

Student: “I find it easier to do curl-ups when I concentrate on breathing in when I’m lying back and on breathing out when I’m sitting up.”



* Critical and creative thinking skills and processes are involved in choosing or devising tactical solutions at any age. However, the focus of social-emotional learning skill development shifts with the student’s stage of development, and this shift may be evident in the context of applying tactical solutions. Students in Grades 1–3 may be focusing on identifying and managing emotions and learning about themselves; students in Grades 4–6 may be ready to strengthen skills for interacting with others, persevering, and coping with challenges; and students in Grades 7 and 8 may be prepared to focus on deepening thinking skills and their understanding of themselves and others (e.g., working as a team to choose tactics that will result in the greatest success, adjusting play in response to an opponent’s actions or conditions in the environment).

Teacher prompt: “What are some important ideas that transfer across different types of activities done in the natural environment, such as canoeing, hiking, and skiing?”

Student: “When taking part in any activity in the natural environment, you should always respect the environment and everything that lives in it. Your activities should not harm or significantly change the environment. You should also take steps to ensure your safety. Monitor the weather conditions, have an emergency action plan, and always make sure others know where you will be and when you will return.”

Strand D

Healthy Living

Instruction should focus on the overall expectation (D1, D2, D3 in the chart below) and should, where possible, be planned to illustrate connections across topics (listed in column 1) in an integrated way. The chart provides a brief summary of topics to support learning about health concepts, making healthy choices, and making connections for healthy living.

HEALTHY LIVING LEARNING SUMMARY BY TOPIC FOR GRADE 8

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating		D2.1 Personal eating behaviours	D3.1 Promoting healthy eating
Personal Safety and Injury Prevention	D1.1 Concussions – signs and symptoms D1.2 Reducing risk of injuries, death	D2.2 Assessing situations for potential danger	D3.2 Impact of violent behaviours; supports
Substance Use, Addictions, and Related Behaviours	D1.3 Warning signs, consequences		
Human Development and Sexual Health	D1.4 Decisions about sexual activity; supports D1.5 Gender identity, gender expression, sexual orientation, self-concept	D2.3 Decision making considerations and skills	D3.3 Relationships and intimacy
Mental Health Literacy		D2.4 Routines and habits for mental health	D3.4 Societal views, impact of stigma

OVERALL EXPECTATIONS

By the end of Grade 8, students will:

- D1. demonstrate an understanding of factors that contribute to healthy development;**
- D2. demonstrate the ability to apply health knowledge and social-emotional learning skills to make reasoned decisions and take appropriate actions relating to their personal health and well-being;**
- D3. demonstrate the ability to make connections that relate to health and well-being – how their choices and behaviours affect both themselves and others, and how factors in the world around them affect their own and others’ health and well-being.**

SPECIFIC EXPECTATIONS

D1. Understanding Health Concepts

By the end of Grade 8, students will:

Personal Safety and Injury Prevention

- D1.1** describe the signs and symptoms of concussions, as well as strategies that support healthy recovery [A1.2 Coping, 1.5 Self]

Teacher prompt: “A concussion is a brain injury that causes changes in how the brain functions. What are some of the symptoms associated with concussions?”

Student: “There can be physical symptoms, such as headaches, increased tiredness or fatigue, dizziness, and/or nausea. Other symptoms may include difficulty concentrating or remembering, or feeling sad and anxious. Sometimes sleep patterns are affected. Signs and symptoms can appear immediately after an injury or they may take hours or days to emerge, and they can be different for everyone. Just one sign or symptom is enough to suspect a concussion. Most people with a concussion do not lose consciousness. If you think you or someone else might have a concussion, it is important to stop the activity, to tell an adult, and to see a physician or nurse practitioner right away.”

Teacher: “Every school board has a concussion protocol that includes developing a Return to School Plan, with a medically supervised ‘return to learning/physical activity’ plan. Recognizing that every concussion is unique, what are some things that can be done to help the brain recover from a concussion?”

Student: “It is important to let the brain rest after a concussion. Screen time, school work, and physical activity can prevent the brain from resting. The amount of physical, social, and academic activities should be reduced significantly. Sleep is important; it helps the brain recover. It is important to follow the return-to-school/physical activity plan to ensure that the brain isn’t further harmed while it’s healing. For example, a student who has been injured should not be exposed to environments that would have a risk of falls or physical contact.”

- D1.2** identify situations that could lead to injury or death (*e.g., concussions from contact sports or accidents; traumatic head, brain, or spinal cord injuries from falls or diving into unknown water; injuries in car accidents; mental, physical, emotional, or social harm resulting from mental health and/or addiction problems*), and describe behaviours that can help to reduce risk (*e.g., wearing protective gear, especially helmets;* thinking before acting; avoiding conflicts that could lead to violence; avoiding diving into unknown water;*

* It is important for students and parents to understand that helmets are designed primarily to prevent injury to the skull and that there is no current evidence that they prevent concussion. Helmets do not stop the brain from moving within the skull.

being cautious when driving or riding ATVs, tractors, boats, or snowmobiles; following hunting and trapping protocols; being aware of food safety when cooking and preparing food; using self-acceptance, coping, and help-seeking skills) [A1.2 Coping, 1.5 Self, 1.6 Thinking]

Teacher prompt: “Unintentional injury is a leading cause of death for children and youth in Canada. Unrecognized repetitive hits to the head or body in the same game or in games that are played within hours or days of each other can cause catastrophic brain injury and death [second-impact syndrome (SIS)], or result in prolonged recovery associated with post-concussion syndrome [PCS]. Adolescents need to be aware of the potential hazards connected with higher-risk activities. What are some other possible consequences of injuries to the spinal cord or head?”

Student: “Spinal cord injuries can cause complete or partial paralysis. Severe head injuries can cause brain damage that may result in impairments of movement, sight, hearing, speech, cognitive functioning, or sensation or that may even lead to death.”

Substance Use, Addictions, and Related Behaviours

- D1.3** identify and describe the warning signs of problematic substance use and related behaviours for a variety of activities and substances, including cannabis (*e.g., changes in behaviour, negative impact on mental health, gradual withdrawal from social circles, a drop in academic performance*), and the consequences that can occur (*e.g., financial problems resulting from online gaming or gambling; unhealthy expectations of intimacy from repeated exposure to unrealistic portrayals of sex online; legal consequences connected with underage cannabis use; aggressive behaviours related to alcohol use that can lead to gender-based violence, dating violence, or sexual assault; overdose as a result of misuse of prescription medications, including pain relievers such as opioids, or as a result of taking illicit drugs; inability to make healthy decisions as a result of drug use; binge drinking and alcohol poisoning; injury, death, or legal charges resulting from accidents caused by impaired driving; self-harming behaviours related to having a mental illness such as depression that are exacerbated by substance abuse; fetal alcohol spectrum disorder [FASD] in children as a result of alcohol abuse by the mother during pregnancy*)

Human Development and Sexual Health

- D1.4** identify and explain factors that can affect an individual’s decisions about sexual activity (*e.g., previous thinking about reasons to wait, including making a choice to delay sexual activity and establishing personal limits; perceived personal readiness; peer pressure; desire; curiosity; self-concept; awareness and acceptance of gender identity and sexual orientation; physical or cognitive disabilities and possible associated assumptions; legal concerns such as the legal age of consent; awareness of the risk of sexually transmitted and blood-borne infections [STBBIs]; concerns about the risk of becoming a parent; use of alcohol or drugs; personal or family values; religious beliefs; cultural teachings; access to information; media messages*), and identify sources of support regarding sexual health (*e.g., a health professional [doctor, nurse, public health practitioner], a teacher, a guidance*

counsellor, a religious leader, a parent or other trusted adult, a reputable website)
[A1.1 Emotions, 1.2 Coping, 1.5 Self]

Teacher prompt: “How would thinking about your personal limits and life goals influence decisions you may choose to make about sexual activity?”

Student: “Thinking in advance about what I value and what my personal limits are would help me to respond and make decisions that I felt comfortable with in different situations. I would be able to approach a situation with more confidence and stick to what I had planned. I would be less likely to be caught off guard and have to react without having thought through the options and possible consequences.”



Teacher prompt: “Why is it important to get information from a credible source before making a decision that has to do with sexual health or sexual activity? Why is this important for all students – including those with physical or cognitive disabilities?”

Students: “Having more information – and information that you can trust – helps you make better decisions. Taking time to get more information also gives you more time to think. Teens who are well informed about sexual health and who are aware of the possible health consequences of becoming sexually active will be more likely to use the protection they need.” “Teens with physical or cognitive disabilities still need information about sexual health, just like everybody else. They may be dealing with different issues, like adapting sexual health information to their particular needs, or with variations on the same issues, like privacy and self-image.”

- D1.5** demonstrate an understanding of gender identity (*e.g., male, female, Two-Spirit, transgender*), gender expression, and sexual orientation (*e.g., heterosexual, gay, lesbian, bisexual, pansexual, asexual*), and identify factors that can help individuals of all identities and orientations develop a positive self-concept [A1.2 Coping, 1.5 Self]*

Teacher prompt: “Gender identity refers to a person’s internal sense or feeling of being a woman, a man, both, neither, or anywhere on the gender spectrum, which may or may not be the same as the person’s birth-assigned sex. It is different from and does not determine a person’s sexual orientation. Sexual orientation refers to a person’s sense of sexual attraction to people of the same or different sex. It is essential to treat people of all sexual orientations, gender identities, and gender expressions with respect and acceptance. Gender expression refers to how you demonstrate your gender through the ways you act, dress, and behave, and the pronouns you choose to use in reference to yourself. Gender identity, gender expression, and sexual orientation are connected to the way you see yourself and to your interactions with others. Understanding and accepting your gender identity and your sexual orientation can

* Instruction and assessment of learning connected with this expectation must take place in the second reporting period of the school year (January–June).

have a strong impact on the development of your self-concept. Young people can develop positively if they understand their gender identity and their sexual orientation and if these are respected by themselves, their family, and their community. What kind of support do people need to help them understand their gender identity and their sexual orientation?”

Student: “It is important for people to have role models that they can relate to – for example, people of similar ages or cultures. It’s also important to have all gender identities and sexual orientations portrayed positively in the media, in literature, and in materials we use at school. When we treat everyone with respect and kindness, we provide the support that people need. Family, school, and community support are crucial. Additional help can come from trusted adults, community organizations, and school support groups such as gay-straight alliances.”



Teacher prompt: “How can we recognize and respect the uniqueness of all people so that everyone can develop a positive self-concept?”

Student: “Every person is worthy of respect and has the right to be free from discrimination, regardless of their sexual orientation, gender identity, or gender expression. We can talk about our differences and what makes us unique with respect, and listen carefully when others share their experiences. We can accept that sometimes we will have to agree to disagree. Accepting the uniqueness of every individual may be a way to become more accepting of ourselves. We can treat others with dignity and the same degree of respect we would like to be treated with ourselves. We all need love and support as we grow and mature. When needed, support can come from school and community organizations.”

D2. Making Healthy Choices

By the end of Grade 8, students will:

Healthy Eating

- D2.1** evaluate personal eating habits and food choices on the basis of the recommendations in Canada’s Food Guide, taking into account behaviours that support healthy eating (e.g., *mindful eating, enjoying your food, choosing a variety of healthy foods, awareness of food marketing, using food labels, making water your drink of choice more often*) [A1.1 Emotions, 1.2 Coping, 1.5 Self, 1.6 Thinking]

Teacher prompt: “How can being mindful create a sense of awareness of your everyday eating decisions?”

Student: “Being mindful when eating includes: making conscious food choices, taking time to eat, paying attention to feelings of hunger and fullness, and avoiding

distractions when eating. Being mindful of the food you eat encourages you to pay attention to the aromas, textures, flavours, and tastes of food.”



Teacher prompt: “If you do not eat regularly throughout the day, how does this affect how you feel?”

Student: “It’s important to pay attention to hunger and thirst cues. I feel sluggish in the morning, and I’m really hungry by ten o’clock. When I’m so hungry, I’m grumpy and more likely to eat less nutritious food and to eat more than I need when I do get the chance to eat.”

Personal Safety and Injury Prevention

- D2.2** demonstrate the ability to assess situations for potential dangers (*e.g., getting into a car with a stranger or an impaired, unlicensed, or inexperienced driver; dependencies or coercion in dating relationships; joining gangs; participating in violence; attending a party where alcohol or drugs are being used; using cosmetic procedures or treatments such as piercing, tattooing, crash diets, or tanning without exploring potential health risks; exposure to infectious diseases through direct contact, sneezing, or coughing*), and apply strategies for avoiding dangerous situations [A1.2 Coping, 1.6 Thinking]

Teacher prompt: “What are some things you could do instead of getting into a car with a driver who has been drinking or who is under the influence of cannabis?”

Student: “I could call a family member or friend, stay over where I am, walk home with a friend if there is a safe route, or take a bus or taxi if one is available. I should have a plan and, if I can, carry money or a phone, so that I do not have to depend on someone else to get home safely.”



Teacher prompt: “What are some things to be aware of in a relationship to keep yourself and your partner safe?”

Student: “Thinking about what makes a relationship healthier is a good start. Things that could lead to danger in relationships include an uneven balance of power in the relationship and situations that involve alcohol or drugs. I can stay safer by defining my own limits, listening to my gut feelings, and letting others know what I am doing and where I am going. If something does not feel good or right, I need to have the confidence to tell the other person to stop immediately. And if someone tells me – verbally or non-verbally – to stop, I need to stop immediately.”

Human Development and Sexual Health

- D2.3** demonstrate an understanding of abstinence, contraception and the use of effective and suitable protection to prevent pregnancy and STBBIs, and the concept of consent,

as well as the skills (e.g., *self-awareness, communication, assertiveness, and refusal skills*) they need to apply in order to make safe and healthy decisions about sexual activity (e.g., *delaying first intercourse; establishing, discussing, and respecting boundaries; showing respect; opting to seek additional information and support; having safer sex*) [A1.3 Motivation, 1.5 Self, 1.6 Thinking]

Teacher prompt: “What do teenagers need to know about contraception and safer sex in order to protect their sexual health?”

Student: “Teenagers need to know about the benefits and risks of different types of contraception. They need to understand that the only 100 per cent sure way of not becoming a parent is to abstain from sexual contact. Those who choose to be sexually active also need to know which contraceptive methods provide a protective barrier against disease as well as pregnancy. For example, condoms provide protection against both pregnancy and STBBIs – but to be effective, they need to be used properly and used every time.”



Teacher prompt: “The decision to be sexually active is a personal choice that everyone gets to make for themselves. No one should feel pressured to engage in sexual activity. What do teenagers need to know and think about in order to set appropriate personal limits with respect to sexual activity?”

Student: “Not all students choose to be sexually active. When thinking about what choice they will make, students need to consider their personal or family values, religious beliefs, and cultural teachings. They need to understand how important it is to talk with their partners about sexual health choices, consent, and keeping safe. They have to develop the skills to communicate their thoughts effectively, listen respectfully, and read body cues in these conversations. This takes practice.”

Mental Health Literacy

- D2.4** demonstrate an understanding of how incorporating healthy habits and coping strategies into daily routines (e.g., *starting the day with physical activity, limiting screen time before going to bed, using tools such as online apps to support mindful practices, using deep breathing and grounding strategies, engaging in activities that involve positive social interaction and supporting others*) can help maintain mental health and resilience in times of stress [A1.1 Emotions, 1.2 Coping, 1.3 Motivation, 1.6 Thinking]

Teacher prompt: “Maintaining mental health involves using strategies that help balance the different aspects of life: the physical, intellectual, social, emotional, and spiritual. It involves thinking, feeling, acting, and interacting in ways that allow you to enjoy life and cope with challenges that arise. How can incorporating healthy coping strategies into daily routines help us maintain mental health and remain resilient in times of stress? And, when would you consider reaching out to a trusted adult?”

Student: “Incorporating daily coping strategies involves planning ahead so you are not just reacting when things go wrong. I think it helps us manage stress overall, so that maybe we respond better to challenging situations. Self-care needs to be a priority. It’s not selfish to take care of yourself! If I still feel that the stress is too much, I would ask for help.”



Teacher prompt: “The transition from elementary school to high school can be stressful. What are some things that you are doing or could do to lessen the stress?”

Student: “I know our class is going to visit the high school and that there are programs where you can go early in August to have a walk-through. That will help, I think. Also, I know a few people – like my brother and a friend in my building – who are already in high school. It helps to know I can talk with them and ask questions about what it’s like.”



Teacher prompt: “When we continue to explore and gather a variety of strategies to support our mental health, over time we build a ‘toolbox’ of strategies that allows us to take better care of ourselves. Different things work for different people in different situations, and these can change over time. You have to find the way that works best for you. Some First Nations people smudge, a practice in which people fan smoke from herbal medicines like sage or sweetgrass over their bodies to cleanse themselves, in order to restore balance, emotionally, mentally, spiritually, and physically. What are some of the strategies that you might incorporate into your life to support your mental health?”

Students: “I think that having a plan for my week ahead helps me to stay focused on what I need to take care of myself. I make sure I give myself time to be active and to get outside. I like to do some of these things with my friends, because it makes it more fun and I’m more motivated to actually do it!” “I try to turn my device off at night and have some quiet time before I go to bed. Doing that helps me sleep better. It also means I’m less tired and less rushed in the morning, which makes my day go smoother.”

D3. Making Connections for Healthy Living

By the end of Grade 8, students will:

Healthy Eating

- D3.1** identify strategies for promoting healthy eating habits and food choices within the school, home, and community (*e.g., implementing school healthy food policies, launching healthy-eating campaigns, choosing healthy food items to sell in fundraising campaigns,*

getting involved in family meal planning, learning food preparation skills, urging local restaurants to highlight healthy food choices) [A1.6 Thinking]

Teacher prompt: “How could you promote healthy eating habits and food choices at home?”

Student: “I could help with meal planning, shopping, and preparation, or discuss healthy eating habits and choices with my family.”

Teacher: “Where can you get more information about healthy eating habits and food choices in your community?”

Student: “The public health unit, registered dietitians, medical clinics, family health centres, and reputable websites are all good sources of information about healthy eating habits and choices.”

Teacher: “What might you do to promote healthy eating habits and food choices at school?”

Student: “I could ask about healthy food policies and join clubs or groups to support healthy eating habits, such as eating together, preparing food, and enjoying our food choices. I could model healthy eating habits and choices. As a class, we could put together information about healthy food choices to share with younger students. Instead of selling chocolates to raise funds, we could do something healthy like have a dance-a-thon.”

Personal Safety and Injury Prevention

- D3.2** analyse the impact of violent behaviours, including bullying (online or in-person), violence in intimate and sexual relationships, and gender-based violence (*e.g., violence against women, girls, people who are transgender or gender non-conforming*) or racially based violence, on the person being targeted, the perpetrator, and bystanders, and describe the role of support services in preventing violence (*e.g., help lines, school counsellors, social workers, youth programs, shelters, gay-straight student alliances*) [A1.1 Emotions, 1.2 Coping, 1.4 Relationships, 1.6 Thinking]

Teacher prompt: “Managing emotions in heated situations is an essential skill. Consider this situation: Students are playing basketball on the playground; someone gets pushed aggressively, and tempers flare. What is the impact on those playing and those watching?”

Student: “This situation could escalate into a fight. Someone could be hurt, and that could lead to suspension or assault charges and damage the relationships between the players on and off the court and in the classroom. It could scare or injure the people watching.”



Teacher prompt: “What are some of the impacts of violence?”

Students: “Violence can have short-term and long-term impacts on the person who has been targeted, including: psychological impacts, such as sadness or shame; physical and mental health impacts, such as physical injury, stress, depression, or post-traumatic stress disorder [PTSD]; and social impacts, such as withdrawal from people, out of fear for safety; loss of reputation; or loss of income. Bystanders can also experience some of these impacts. The perpetrator may experience legal consequences and psychological impacts, such as guilt or shame.” “‘Hazing’ is a form of violence that can have long-term effects on members of a group or team. Hazing rituals are often repeated every season, and group or team members who were targeted when they joined the group are often expected to participate in violence against new members.”



Teacher prompt: “Gender-based violence includes any form of behaviour – psychological, physical, or sexual – that is based on an individual’s gender and is intended to control, humiliate, or harm the individual. Sexually explicit media, such as pornography, that depicts women as sex objects and unequal to men can contribute to gender-based violence. Gender-based violence can affect all people, but it disproportionately affects women, girls, people who are transgender or gender non-conforming, and marginalized communities. One example of gender-based violence is the systemic violence that Indigenous women and girls have experienced in Canada for decades. Can you give me some other examples?”

Student: “It can include things like having your rear end pinched in the hallway, having your top pulled down or lifted up, or being held down and touched. Gender-based violence can include physical assault in a relationship, sexual assault, and rape. In addition, sex trafficking is a form of gender-based violence. It involves someone being controlled by someone else and coerced to perform sex acts for money, food, alcohol, or drugs. A trafficker may target a person by offering praise and support online or through social media, and then pretend to be their boyfriend or girlfriend. The targeted person may become stressed, nervous, and secretive, and may start to miss school. The person may own expensive new things that normally they could not afford. However, there may also be no signs that a person is being sex trafficked.”



Teacher prompt: “How can a person dealing with violent behaviour find support? How do support programs help?”

Student: “If you are concerned about a violent situation, you should tell a trusted adult. You can also reach out to a help line (phone, text, or mobile app) that will provide information and advice, tell you about other services that may help you, or just listen if you have a problem or if you’re frustrated. It’s also good to join after-school youth programs and clubs. They can help by providing a fun, safe place to socialize with friends or meet new people.”

Human Development and Sexual Health

- D3.3** analyse the attractions and benefits associated with being in a healthy relationship (e.g., support, understanding, camaraderie, pleasure), as well as the benefits, risks, and drawbacks, for themselves and others, of relationships involving different degrees of sexual intimacy (e.g., hurt when relationships end or trust is broken; in more sexually intimate relationships, risk of STBBIs and related risk to future fertility, becoming a parent before you are ready, sexual harassment and exploitation; potential for dating violence) [A1.1 Emotions, 1.4 Relationships, 1.6 Thinking]

Teacher prompt: “There are pros and cons to being in a relationship, and when you are in a relationship, there are positive things and drawbacks associated with different levels of intimacy. All of them are important to think about. There is a range of intimate behaviours that people can use to show caring and connection in a relationship, and different levels of risk associated with different levels of intimacy. Intimate behaviours can include holding hands, hugging, kissing, touching bodies and genitals, and engaging in sexual intercourse. When considering the level of intimacy that is appropriate for their relationship, what do people need to think about?”

Student: “Individuals need to consider their own values and beliefs and treat each other’s choices and limits with respect. If one partner chooses to abstain from a sexual activity – for example, a person might want to kiss but not want to have any genital contact – the other partner needs to respect that decision. Both partners need to have the confidence and comfort level to talk about how they can show their affection while respecting each other’s decisions.”

Teacher: “Being intimate with someone includes having a good understanding of the concept of consent and incorporating that understanding into behaviour. What are some of the important things that we need to understand about consent?”

Student: “Consent is necessary in a sexual relationship. It is important to know that consent to one sexual activity does not imply consent to *all* sexual activities, so partners must ask for consent at every stage. Consent is always communicated, never assumed. You can ask your partner simple questions to be sure that they want to continue: ‘Do you want to do this?’, ‘Are you okay to go on?’, or ‘Do you want to stop?’ At any stage, a ‘no’, or an indication that someone wants to stop, means *no* and does not require any further explanation. If your partner hesitates or doesn’t respond clearly, the activity should stop. It is against the law to have any type of sexual activity with someone without their consent.”

Teacher: “How can being in an intimate relationship affect other relationships in your life?”

Student: “When you have a partner, sometimes you might start hanging out with different people or spending less time with some of your friends. You might have less time to spend with family. It’s important to be aware of what is happening, so

that you can take steps to avoid neglecting other relationships that are important to you.”

Mental Health Literacy

- D3.4** explain how word choices and societal views about mental health and mental illness can affect people and perpetuate stigma, and identify actions that can counteract that stigma [A1.4 Relationships, 1.6 Thinking]

Teacher prompt: “Mental health is often misunderstood, and when people hear someone mention ‘mental health’, they may automatically think ‘mental illness’. Negative feelings or judgements about mental illness can be the result of not understanding or of being afraid. We all have ‘mental health’. How might societal views on mental health and mental illness perpetuate stigma and even cause harm?”

Student: “They can stop people from getting the help they need. If people who have a mental illness do not feel safe to talk about it or to get help, they can end up feeling hopeless, lonely, and hurt.”

Teacher: “There are lots of things that we can do individually or as part of a group to address stigma and help get rid of it. The way we treat people and talk about mental health and mental illness is one way. There are also groups and organizations in the community that we can be a part of that help create awareness about mental health. Can you think of some ways that you could take action to reduce stigma associated with mental health?”

Students: “Lots of schools, like ours, have wellness clubs that create awareness and plan events to bring attention to the importance of mental health. They also provide an opportunity for us to learn about different strategies and to support one another. I know that there are also youth groups in the community and even across the province that focus on mental health and on giving youth a way to use their voice to help bring about change. I think being involved in groups like this not only helps others, but can make us feel good too, because we’re being a part of something bigger and we’re doing something that is making a difference.”
“I think the best thing we can do is show kindness and compassion. Listening to others, respecting what is different and unique about everyone, and showing empathy for other people’s feelings and experiences encourages others to respond in the same way.”

Appendices

The four appendices on the following pages provide a summary of the key topics/skills, concepts, and strategies addressed by the expectations in each of the four strands, respectively, from Grade 1 to Grade 8.

Appendix A provides a summary of the social-emotional learning skills in strand A. The expectations in strand A are the same for all grades, and learning related to these expectations occurs in the context of learning related to the other three strands, progressing in depth and complexity within that context through the grades. A list of references on social-emotional learning skills is included in this appendix.

The charts in the appendices for strands B, C, and D convey, in just a few words, the focus of the learning in the strand for every grade, to give teachers a quick overview of the strand across all grades. In a number of cases, indicated in the charts by means of shaded arrows, the topic of an expectation remains essentially the same across several grades. In these cases, grade-to-grade variations in content are summarized in brief additional phrases. For example, the summary description in the Movement Competence chart for expectation C1.2, at Grade 2, reads “jumping, hopping, and landing – maintaining control, landing safely, using different body actions, jumping for distance/height and from low heights”. Although the focus of the expectation from Grade 2 to Grade 5 remains the same (jumping, hopping, and landing), students in Grade 2 are expected to jump, hop, and land in control; students in Grade 3 learn to jump for distance and height; students in Grade 4 are focusing on landing in control when jumping from a low height; and students in Grade 5 are jumping for height and distance using a variety of body actions. In order to understand when specific requirements are introduced, readers must consult the expectations, examples, and teacher prompts in the body of the curriculum document. There, they will find indications of the specific, age-appropriate content, scope, and depth of coverage of the expectations in particular grades.

Some of the boxes, or cells, in the charts in strands B, C, and D are shaded. Depending on the organizing principle of the chart, a shaded box may indicate that a particular expectation is not included in a given grade, or that there is a shift in topic in an expectation from one grade to the next, or that the topic is not considered from a particular perspective in a given grade (e.g., in Grade 1 in the Healthy Living chart, the topic Healthy Eating is considered from the perspective of “Understanding Health Concepts” and “Making Healthy Choices”, but not from the perspective of “Making Connections for Healthy Living”, so the cell in the last column is shaded).

Appendix A. Social-Emotional Learning Skills Summary, with References

The following information is provided to support program planning and instruction related to the social-emotional learning (SEL) skills outlined in strand A. The chart below provides an “at-a-glance” summary of the skills, and the chart starting on the following page provides information about each of the skills, by specific expectation, A1.1 through A1.6. A list of references for social-emotional learning skills and mental health education is provided after the charts.

Learning and assessment of learning related to SEL skills are woven throughout the health and physical education program.

SOCIAL-EMOTIONAL LEARNING SKILLS AT A GLANCE

Students will learn skills to:	So that they can:
<ul style="list-style-type: none">• identify and manage emotions	<ul style="list-style-type: none">• express their feelings and understand the feelings of others
<ul style="list-style-type: none">• recognize sources of stress and cope with challenges	<ul style="list-style-type: none">• develop personal resilience
<ul style="list-style-type: none">• maintain positive motivation and perseverance	<ul style="list-style-type: none">• foster a sense of optimism and hope
<ul style="list-style-type: none">• build relationships and communicate effectively	<ul style="list-style-type: none">• support healthy relationships and respect diversity
<ul style="list-style-type: none">• develop self-awareness and self-confidence	<ul style="list-style-type: none">• develop a sense of identity and belonging
<ul style="list-style-type: none">• think critically and creatively	<ul style="list-style-type: none">• make informed decisions and solve problems

(continued)

SOCIAL-EMOTIONAL LEARNING SKILLS BY SPECIFIC EXPECTATION

<p style="text-align: center;">Skills</p> <p style="text-align: center;"><i>What are the skills? How do they help?</i></p> <p style="text-align: center;"><i>What do they look like in HPE?</i></p>	<p style="text-align: center;">Key Components and Sample Strategies</p>
<p>A1.1 Identification and Management of Emotions</p> <p>Students often experience a range of emotions over the course of their day at school. They may feel happy, sad, angry, frustrated, or excited, or any number of emotions in combination. Students, and especially younger children, may struggle to identify and appropriately express their feelings. Learning to recognize different emotions, and to manage them appropriately, can help students function and interact more effectively. When students understand the impact of thoughts and emotions on behaviour, they can improve the quality of their interactions. In health and physical education, as they learn new movement skills, interact with others in physical activities, and learn about their health and well-being, students have many opportunities to develop awareness of their emotions and to use communication skills to express their feelings and to respond constructively when they recognize emotions in others.</p>	<ul style="list-style-type: none"> • Recognizing a range of emotions in self and others • Gauging the intensity and/or the level of emotion • Understanding connections between thoughts, feelings, and actions • Managing strong emotions and using strategies to self-regulate • Applying strategies such as: <ul style="list-style-type: none"> » using a “feelings chart” to learn words to express feelings » using a “feelings thermometer” or pictures to gauge intensity of emotion
<p>A1.2 Stress Management and Coping</p> <p>Every day, students are exposed to big and small challenges that can contribute to feelings of stress. As they learn stress management and coping skills, they come to recognize that stress is a part of life and that it can be managed. We can learn ways to respond to challenges that enable us to “bounce back” and, in this way, build resilience in the face of life’s obstacles. Over time, with practice, observation, and coaching, students begin to build a personal “coping toolbox” that they can carry with them through life. In health and physical education, students learn the benefits of physical activity for stress management and learn to apply healthy coping strategies to broader life situations.</p>	<ul style="list-style-type: none"> • Managing stress through physical activity • Seeking support • Problem solving • Applying strategies such as: <ul style="list-style-type: none"> » deep breathing » guided imagery » stretching » pausing and reflecting » “unplugging” before sleep

(continued)

<p style="text-align: center;">Skills</p> <p style="text-align: center;"><i>What are the skills? How do they help?</i></p> <p style="text-align: center;"><i>What do they look like in HPE?</i></p>	<p style="text-align: center;">Key Components and Sample Strategies</p>
<p>A1.3 Positive Motivation and Perseverance</p> <p>Positive motivation and perseverance skills help students to “take a long view” and remain hopeful even when their personal and/or immediate circumstances are difficult. With regular use, practices and habits of mind that promote positive motivation help students approach challenges in life with an optimistic and positive mindset and an understanding that there is struggle in most successes and that repeated effort can lead to success. These practices include noticing strengths and positive aspects of experiences, reframing negative thoughts, expressing gratitude, practising optimism, and practising perseverance – appreciating the value of practice, of making mistakes, and of the learning process. In health and physical education, students have regular opportunities to apply these practices as they learn new physical skills and practise behaviours that support physical and mental health.</p>	<ul style="list-style-type: none"> • Reframing negative thoughts and experiences • Practising perseverance • Applying a growth mindset • Reflecting on things to be grateful for and expressing gratitude • Practising optimism • Applying strategies such as: <ul style="list-style-type: none"> » sharing positive messages for peers » using personal affirmations
<p>A1.4 Healthy Relationships</p> <p>When students interact in positive and meaningful ways with others, mutually respecting diversity of thought and expression, their sense of belonging within the school and community is enhanced. Learning healthy relationship skills helps students establish positive patterns of communication and inspires healthy, cooperative relationships. These skills include the ability to understand and appreciate another person’s perspective, to empathize with others, to listen, to be assertive, and to apply conflict-resolution skills. In health and physical education, students have unique opportunities to develop and practise skills that support positive interaction with others in small-group and team situations and as they navigate decisions that impact their health.</p>	<ul style="list-style-type: none"> • Being cooperative and collaborative • Using conflict-resolution skills • Listening • Being respectful • Considering other perspectives • Practising kindness and empathy • Applying strategies such as: <ul style="list-style-type: none"> » seeking opportunities to help others and “give back” » using role play to practise language and actions

(continued)

<p style="text-align: center;">Skills</p> <p style="text-align: center;"><i>What are the skills? How do they help?</i></p> <p style="text-align: center;"><i>What do they look like in HPE?</i></p>	<p style="text-align: center;">Key Components and Sample Strategies</p>
<p>A1.5 Self-Awareness and Sense of Identity</p> <p>Knowing who we are and having a sense of purpose and meaning in our lives enables us to function in the world as self-aware individuals. Our sense of identity enables us to make choices that support our well-being and allows us to connect with and have a sense of belonging in various cultural and social communities. Educators should note that for First Nations, Métis, and Inuit students, the term “sense of identity and belonging” may also mean belonging to and identifying with a particular community and/or nation. Self-awareness and identity skills help students explore who they are – their strengths, difficulties, preferences, interests, values, and ambitions – and how their social and cultural contexts have influenced them. In health and physical education, students learn to develop daily self-care routines for mental health that promote a sense of personal confidence and comfort with their developing identities. As they learn new skills, they use self-awareness skills to monitor their progress and identify their strengths. Educators play a key role in reinforcing that each student matters and brings value to the classroom.</p>	<ul style="list-style-type: none"> • Knowing oneself • Caring for oneself • Having a sense of mattering and of purpose • Identifying personal strengths • Having a sense of belonging and community • Communicating with assertiveness • Applying strategies such as: <ul style="list-style-type: none"> » monitoring progress in skill development » reflecting on strengths and accomplishments and sharing these with peers or caring adults
<p>A1.6 Critical and Creative Thinking</p> <p>Critical and creative thinking skills enable us to make informed judgements and decisions on the basis of a clear and full understanding of ideas and situations, and their implications, in a variety of settings and contexts. Students learn to question, interpret, predict, analyse, synthesize, detect bias, and distinguish between alternatives. They practise making connections, setting goals, creating plans, making and evaluating decisions, and analysing and solving problems for which there may be no clearly defined answers. Executive functioning skills – the skills and processes that allow us to take initiative, focus, plan, retain and transfer learning, and determine priorities – are part of critical and creative thinking. In all aspects of the health and physical education curriculum, students have opportunities to develop critical and creative thinking skills. Students have opportunities to build on prior learning, go deeper, and make personal connections through real-life applications.</p>	<ul style="list-style-type: none"> • Making connections • Making decisions • Evaluating choices • Communicating effectively • Managing time • Setting goals • Applying organizational skills • Applying strategies such as: <ul style="list-style-type: none"> » using webs and diagrams to help identify connections and interrelationships » using Teaching Games for Understanding (TGfU) to develop strategic thinking » using organizational strategies and tools, such as planners and goal-setting frameworks

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Appendix B. Active Living Summary: Key Topics*

B1. Active Participation			B2. Physical Fitness				B3. Safety		
1	B1.1 Participation in program activities, behaviours showing readiness	B1.2 Enjoyment of activity (individual and small-group activities)	B1.3 Ways of being active	B2.1 Daily physical activity (DPA) – moderate to vigorous activity, 20 minutes per day, including warm-up and cool-down	B2.2 Health benefits of being physically active	B2.3 Physical signs of exertion		B3.1 Behaviours and procedures that maximize safety of self and others, and minimize risk of concussion	B3.2 Environmental safety risks, including risks related to concussions
2					B2.2 Activities to improve heart and lung health	B2.3 Exertion, self-assessment	B2.4 Personal and group goal setting related to physical activity		B3.2 Safety precautions for selves and others, including those with medical conditions
3					B2.2 Benefits of improved cardiorespiratory fitness		B2.4 Developing and acting on personal physical activity goals		B3.2 Responding to accidents and injuries, including concussions
4		B1.2 Enjoyment of activity (individual, small-group, and lead-up activities)	B1.3 Factors that motivate or challenge participation (in and outside of school)		B2.2 Physical activity and health-related fitness	B2.3 Exertion, self-assessment, intrinsic, extrinsic factors			B3.2 Prevention of accidents and injuries, including concussions
5						B2.3 Assessment and monitoring of health-related fitness	B2.4 Developing and implementing personal fitness plans		B3.2 Minimizing environmental health risks
6									B3.2 Treating minor injuries
7		B1.2 Enjoyment of activity (diverse indoor/outdoor activities)			B2.2 Factors affecting fitness; application of training principles		B2.4 Developing a fitness plan to meet a fitness goal		B3.2 Procedures for anticipating and responding to outdoor hazards, concussions
8			B1.3 Application of motivating factors, influencing others		B2.2 Health-related and skill-related components of fitness; use of training principles to enhance fitness				B3.2 Responding to emergencies, including suspected concussion

Expectations are tagged to indicate the social-emotional skills that can be integrated into teaching and learning associated with the expectation. See the curriculum text for details.

* See page 291 for important information about the content, purpose, and design of this chart.

Appendix C. Movement Competence Learning Summary: Skills, Concepts, and Strategies*

C1. Movement Skills and Concepts**						C2. Movement Strategies				
	Stability		Locomotion		Manipulation					
1	C1.1 Static balance – using different body parts, levels, shapes, working with equipment and others, making transitions • <i>Concepts:</i> body and space, later expanding to include relationship		C1.2 Moving and stopping safely, in control, with awareness of others and equipment • <i>Concepts:</i> body, space, relationship	C1.3 Moving in different directions, using different body parts • <i>Concepts:</i> body, space		C1.4 Sending objects – using different shapes/ sizes, levels, body parts • <i>Concepts:</i> body, space, building to include relationship	C1.5 Receiving objects – using different shapes/ sizes, levels, body parts • <i>Concepts:</i> body, space	C2.1 Activity components – individual and small-group activities		C2.2 Simple tactics to increase success in activities
2		C1.2 Jumping, hopping, and landing – maintaining control, landing safely, using different body actions, jumping for distance/ height and from low heights • <i>Concepts:</i> body, later expanding to include effort and relationship		C1.3 Moving in different directions, using different speeds, pathways, levels, with/ without equipment, alone/ with others • <i>Concepts:</i> body, progressing to space, then effort, then relationship		C1.4 Sending and receiving – using different shapes/ sizes, levels, speeds, distances, body parts/ equipment • <i>Concepts:</i> all movement concepts	C1.5 Retaining objects – using different shapes/ sizes, body parts, equipment • <i>Concepts:</i> body, progressing to space, then awareness, then relationship			
3										
4				C1.3 Movement combinations – with/ without equipment, alone/with others, using different speeds, pathways, directions, levels • <i>Concepts:</i> all, progressing from body to space to effort to relationship		C1.4 Sending and receiving – using different shapes/sizes, levels, speeds, body parts/ equipment • <i>Concepts:</i> all movement concepts, movement principles		C2.1 Activity components – variety of lead-up, recreational, fitness, and dance activities	C2.2 Categories of games and activities – common features and strategies	C2.3 Tactical solutions to increase success in activities
5	C1.1 Static & dynamic balance – weight transfers, changing speed, levels, with/without equipment, alone/with others • <i>Concepts:</i> all, progressing to a focus on effort and relationship									
6			C1.2 Movement combinations – wide variety, with/without equipment, alone/with others, using different speeds, pathways, directions, levels • <i>Concepts:</i> all, progressing from body to space to effort to relationship		C1.3 Sending and receiving – different shapes/sizes, using different levels, speeds, distances, body parts/ equipment • <i>Concepts:</i> focus on space, effort, relationship, movement principles	C1.4 Retaining objects – using different shapes/ sizes, body parts, equipment • <i>Concepts:</i> focus on space, effort, relationship				
7	C1.1 Static & dynamic balance – weight transfers, rotations, with others and equipment • <i>Concepts:</i> all, with focus on effort and relationship		C1.2 Movement combinations – with/without equipment, in response to external stimuli • <i>Concepts:</i> space, effort and relationship		C1.3 Sending, receiving, and retaining – in relation to others, in response to external stimuli • <i>Concepts:</i> focus on effort, relationship movement principles	C1.4 Phases of movement		C2.1 Activity components – variety of lead-up, recreational, fitness, and dance activities in diverse indoor/outdoor environments		
8									C2.2 Categories of games and activities – connection between skills, concepts, strategies	

Expectations are tagged to indicate the social-emotional learning (SEL) skills that can be integrated into teaching and learning associated with the expectation. See the curriculum text for details.

* See page 291 for important information about the content, purpose, and design of this chart.

** The movement skills are stability, locomotion, and manipulation. The movement concepts are body, space, effort, and relationship. See detailed information on pages 30–38. The chart is organized by skill category and grade. Movement concepts are outlined in the body of the chart as they relate to the development of each skill category.

Appendix D. Healthy Living Learning Summary: Key Topics*

GRADE 1

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating	D1.1 Food for healthy bodies and minds	D2.1 Canada's Food Guide D2.2 Hunger and thirst cues	
Personal Safety and Injury Prevention	D1.2 Safe practices – personal safety	D2.3 Caring and exploitative behaviours and feelings D2.4 Safety at school	D3.1 Potential risks at home, in the community, outdoors
Substance Use, Addictions, and Related Behaviours			D3.2 Unhealthy habits, healthy alternatives
Human Development and Sexual Health	D1.3 Body parts D1.4 Senses and functions	D2.5 Hygienic procedures	
Mental Health Literacy	D1.5 Mental health and overall health		D3.3 Thoughts, emotions, actions

GRADE 2

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating		D2.1 Healthy eating patterns D2.2 Food choices (snacks, meals)	
Personal Safety and Injury Prevention	D1.1 Personal safety – home, online, and outdoors D1.2 Food allergies	D2.3 Consent, standing up for yourself and others	D3.1 Relating to others
Substance Use, Addictions, and Related Behaviours	D1.3 Prescription / non-prescription medicines		D3.2 Medication, healthy alternatives
Human Development and Sexual Health	D1.4 Stages of development D1.5 Body appreciation	D2.4 Oral health	
Mental Health Literacy	D1.6 Body and brain – responses and feelings	D2.5 Knowing when to seek help	

(continued)

* See page 291 for important information about the content, purpose, and design of this chart.

GRADE 3

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating	D1.1 Food origins, nutritional value, and environmental impact	D2.1 Oral health, food choices	D3.1 Local and cultural foods, eating choices
Personal Safety and Injury Prevention	D1.2 Concussion awareness	D2.2 Safety guidelines outside of class	D3.2 Real and fictional violence
Substance Use, Addictions, and Related Behaviours	D1.3 Impact of use of legal/illegal substances	D2.3 Decision making – substance use / behaviours	
Human Development and Sexual Health	D1.4 Healthy relationships, bullying, consent D1.5 Physical and social-emotional development		D3.3 Visible, invisible differences, respect
Mental Health Literacy	D1.6 Brain stress response system		D3.4 External factors that contribute to stressful feelings

GRADE 4

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating	D1.1 Nutrients	D2.1 Personal eating habits	D3.1 Healthier eating in various settings
Personal Safety and Injury Prevention	D1.2 Safe use of technology D1.3 Bullying, abuse, and non-consensual behaviour	D2.2 Decision making – assessing risk	
Substance Use, Addictions, and Related Behaviours	D1.4 Tobacco and vaping	D2.3 Decisions about smoking and vaping	D3.2 Short- and long-term effects of smoking and vaping
Human Development and Sexual Health	D1.5 Puberty – changes; emotional, social impact	D2.4 Puberty – personal hygiene and care	
Mental Health Literacy		D2.5 Healthy choices to support mental health	D3.3 Stress management (cognitive, behavioural)

(continued)

GRADE 5

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating		D2.1 Nutrition fact tables, food labels	D3.1 Media influences – food choices
Personal Safety and Injury Prevention	D1.1 Supports – injury prevention, emergencies, bullying, violence	D2.2 Strategies – threats to personal safety	D3.2 Actions, self-concept
Substance Use, Addictions, and Related Behaviours	D1.2 Short- and long-term effects of alcohol use	D2.3 Refusal skills – alcohol use and other behaviours	D3.3 Decision to drink alcohol, use cannabis; influences
Human Development and Sexual Health	D1.3 Reproductive system D1.4 Menstruation, spermatogenesis	D2.4 Self-concept, sexual orientation D2.5 Emotional, inter-personal stresses – puberty	
Mental Health Literacy		D2.6 How to help others, when to seek help	D3.4 Stigma awareness

GRADE 6

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating		D2.1 Influences on healthy eating D2.2 Eating cues and guidelines	D3.1 Benefits of healthy eating / active living
Personal Safety and Injury Prevention	D1.1 Benefits of inclusion, respect, and acceptance	D2.3 Safe and positive social interaction, conflict management	D3.2 Responsibilities, risks – care for self and others, safety practices
Substance Use, Addictions, and Related Behaviours	D1.2 Effects of cannabis, drugs	D2.4 Strategies, safe choices, influences, alcohol, tobacco, cannabis	
Human Development and Sexual Health	D1.3 Sexually explicit media	D2.5 Understanding of puberty changes, healthy relationships D2.6 Decision making, consent	D3.3 Stereotypes and assumptions – impacts and strategies for responding
Mental Health Literacy	D1.4 Seeking help – professional helpers D1.5 Connecting thoughts, emotions, and actions		

(continued)

GRADE 7

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating		D2.1 Eating patterns and health problems	D3.1 Personal, external factors in food choices
Personal Safety and Injury Prevention	D1.1 Benefits and dangers – technology	D2.2 Impact of bullying/harassment	
Substance Use, Addictions, and Related Behaviours	D1.2 Mental health, substances, support	D2.3 Body image, substance use	D3.2 Implications of substance use, addictions, and related behaviours
Human Development and Sexual Health	D1.3 Delaying sexual activity D1.4 Sexually transmitted and blood-borne infections (STBBIs) D1.5 STBBIs and pregnancy prevention	D2.4 Sexual health and decision making	D3.3 Relationship changes at puberty
Mental Health Literacy	D1.6 Mental health, mental illness		

GRADE 8

Topic	D1. Understanding Health Concepts	D2. Making Healthy Choices	D3. Making Connections for Healthy Living
Healthy Eating		D2.1 Personal eating behaviours	D3.1 Promoting healthy eating
Personal Safety and Injury Prevention	D1.1 Concussions – signs and symptoms D1.2 Reducing risk of injuries, death	D2.2 Assessing situations for potential danger	D3.2 Impact of violent behaviours; supports
Substance Use, Addictions, and Related Behaviours	D1.3 Warning signs, consequences		
Human Development and Sexual Health	D1.4 Decisions about sexual activity; supports D1.5 Gender identity, gender expression, sexual orientation, self-concept	D2.3 Decision making considerations and skills	D3.3 Relationships and intimacy
Mental Health Literacy		D2.4 Routines and habits for mental health	D3.4 Societal views, impact of stigma

Glossary

The definitions provided in this glossary are specific to the curriculum context in which the terms are used.

Many of the definitions related to sexual health are taken from two publications of the Ontario Human Rights Commission (OHRC): Teaching Human Rights in Ontario: A Guide for Ontario Schools, at <http://www.ohrc.on.ca/en/teaching-human-rights-ontario-guide-ontario-schools>, and Policy on Preventing Discrimination because of Gender Identity and Gender Expression, at <http://www.ohrc.on.ca/en/policy-preventing-discrimination-because-gender-identity-and-gender-expression>.

abstinence. A conscious decision to refrain from a behaviour or activity. This document uses the term in reference to abstinence from all forms of sexual intercourse and other sexual activities.

abusive behaviour. Behaviour that is intended to intimidate, isolate, dominate, or control another person, which may be a single incident or a pattern of behaviour. Abusive behaviour includes physical abuse, sexual abuse and exploitation, neglect, emotional maltreatment, and exposure to domestic violence.

active listening. A communication skill in which the listener focuses closely on the speaker's verbal and nonverbal messages and summarizes these messages to confirm understanding.

active transportation. Any type of human-powered transportation – walking, cycling, skateboarding, wheeling a wheelchair, and so on – used to get oneself or others from one place to another. Active transportation may include a combination of methods, such as combining human-powered motion with public transportation.

addiction. A physiological and psychological dependence on a substance or behaviour, such as alcohol or gambling.

aerobic activity. A type of exercise that increases the body's demand for oxygen because of the continuous use of large muscles and a temporary increase in respiration and heart rate. Aerobic activity contributes to improving the efficiency of the heart, lungs, and circulatory system in using oxygen.

agility. A skill-related component of physical fitness that relates to the ability to change the position of the body with speed and accuracy while moving from one point to another. *See also* **skill-related fitness**.

allergies and sensitivities/intolerances. Types of reactions to foods and other substances or chemicals. Food allergies are caused by the body's immune system reacting inappropriately to particular proteins in a food, whereas food intolerances are usually related to the body's inability to digest particular foods. Some allergic reactions can be life-threatening. *See also* **anaphylaxis**.

anaphylaxis. A serious allergic reaction that happens quickly and that can be life-threatening. Food is the most common cause of anaphylaxis (most typically peanuts, tree nuts, seafood, and egg and milk products), but insect stings, medicine, latex, or exercise can also cause a reaction. (Adapted from Food Allergy Canada, "Food Allergy FAQs", <https://foodallergycanada.ca/food-allergy-basics/food-allergies-101/food-allergy-faqs/>.)

asexual. A person who experiences little or no sexual attraction. They may or may not feel emotionally or romantically attracted to others.

assault. The intentional direct or indirect application of force to another person, or the attempt or threat to do so. (Adapted from the Criminal Code, RSC 1985, c. C-46, s. 265 (1).)

assisted reproductive technology. A term for a variety of methods used to achieve pregnancy by artificial or partially artificial means, such as embryo transfer and in vitro fertilization.

automated external defibrillator (AED).

A portable electronic device that an untrained person can use to check the heart rhythm of another person. It recognizes rhythms that are not regular and uses voice prompts and messages to guide the rescuer to use the machine to provide a shock to the heart. The shock helps the heart to re-establish a regular rhythm.

balance. A skill-related component of physical fitness that relates to the ability to maintain equilibrium while stationary (static balance) or moving (dynamic balance). *See also* **skill-related fitness.**

beep baseball. A striking/fielding game in which offensive players work in teams to strike a ball, then score runs by running to a base that is activated to make a sound or a beep. Fielding players work together with spotters, who help to identify ball position using a numbering system. The game is designed to be played by blind and visually impaired players along with a sighted pitcher and catcher.

bisexual. According to the Ontario Human Rights Commission, “a person who is emotionally, physically, spiritually and/or sexually attracted to members of more than one gender.” (From *Teaching Human Rights in Ontario: A Guide for Ontario Schools.*) *See also* **sexual orientation.**

bocce. A target game in which teams attempt to score by throwing (or “bowling”) larger balls as close as possible to a smaller ball (a “jack”).

body awareness. *See* **movement concepts.**

breath sound check. A self-assessment tool in which participants can monitor the intensity of an exercise or activity. When participants can “hear their own breathing”, the intensity of the activity is moderate to vigorous and their heart rate will be between 55 and 85 per cent of their maximum heart rate.

bullying. Under the Education Act (s.1(1)), “aggressive and typically repeated behaviour

by a pupil, where (a) the behaviour is intended by the pupil to have the effect of, or the pupil ought to know that the behaviour would be likely to have the effect of, (i) causing harm, fear, or distress to another individual, including physical, psychological, social, or academic harm, harm to the individual’s reputation, or harm to the individual’s property, or (ii) creating a negative environment at a school for another individual, and (b) the behaviour occurs in a context where there is a real or perceived power imbalance between the pupil and the individual based on factors such as size, strength, age, intelligence, peer group power, economic status, social status, religion, ethnic origin, sexual orientation, family circumstances, gender, gender identity, gender expression, race, disability, or the receipt of special education” and where the intimidation includes the use of any physical, verbal, electronic, written, or other means. *See also* **cyber-bullying.**

cardiorespiratory endurance. A health-related component of physical fitness that involves the ability to perform sustained physical activity requiring considerable use of the circulatory and respiratory systems. Also referred to as cardiovascular endurance, aerobic fitness, or cardiorespiratory fitness. *See also* **health-related fitness.**

concussion. A type of traumatic brain injury that may be caused either by a direct blow to the head, face, or neck, or by a blow to the body that transmits a force to the head, that causes the brain to move rapidly within the skull. It causes changes in the way the brain functions and can lead to symptoms that may be physical (e.g., headache, dizziness), cognitive (e.g., difficulty in concentrating or remembering), emotional/behavioural (e.g., depression, irritability), and/or related to sleep (e.g., drowsiness, difficulty in falling asleep). It can occur even if there has been no loss of consciousness and cannot normally be seen on X-rays, CT scans, or MRIs. A concussion is a clinical diagnosis made by a medical doctor. (Adapted from Government of Ontario, “Rowan’s Law: Concussion Safety”, <https://www.ontario.ca/page/rowans-law-concussion-safety>.)

contraception. A term for a variety of methods used to prevent pregnancy, including barrier,

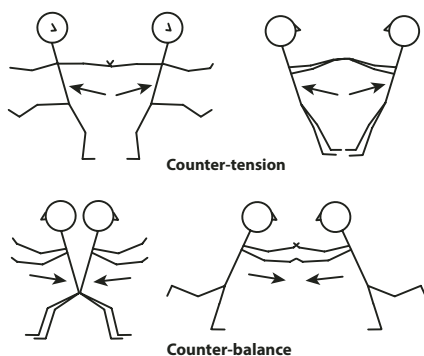
hormonal, natural, and surgical methods. Some types of barrier contraception also provide protection against sexually transmitted and blood-borne infections.

cool-down. The transitional process of returning the body to its normal state after being physically active. A cool-down may consist of slower, gentler movements and/or stretches.

coordination. A skill-related component of physical fitness that relates to the ability to combine sensory input with the movement of body parts in order to perform movement skills smoothly and efficiently. *See also skill-related fitness.*

core muscle strength. The ability of the core muscles – the muscles of the abdominal and back area – to support the spine and keep the body stable and balanced. Core muscles are involved in most movements performed during physical activity, and strengthening them can reduce vulnerability to lower back pain and injury.

counter-tension. In the context of movement done with a partner, the application of each partner's body weight and force away from the other partner. Partners can use counter-tension at different levels and in different directions. Counter-tension can be contrasted with counter-balance, in which body weight and force are applied by each partner towards the other partner using a variety of body parts as points of contact.



cyber-bullying. Under the Education Act (s.1.0.0.2), bullying by electronic means, including by “(a) creating a web page or a blog in which the creator assumes the identity of another person; (b) impersonating another person as the author of content or messages posted on the Internet;

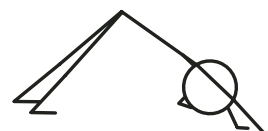
and (c) communicating material electronically to more than one individual or posting material on a website that may be accessed by one or more individuals.” Cyber-bullying can involve the use of email, cell phones, text messages, and/or social media sites to threaten, harass, embarrass, socially exclude, or damage reputations and friendships. It may include put-downs or insults and can also involve spreading rumours; sharing private information, photos, or videos; or threatening to harm someone. Cyber-bullying is always aggressive and hurtful.

defence. The practice or role of preventing opponents from scoring. *See also offence.*

discrimination. Unfair or prejudicial treatment of individuals or groups on the basis of grounds set out in the Ontario Human Rights Code (e.g., race, sexual orientation, disability) or on the basis of other factors. Discrimination, whether intentional or unintentional, has the effect of preventing or limiting access to opportunities, benefits, or advantages that are available to other members of society. Discrimination may be evident in organizational and institutional structures, policies, procedures, and programs, as well as in the attitudes and behaviours of individuals.

dominant hand/foot. Refers to the hand or foot that an individual feels most comfortable using. For example, a right-handed student may be more comfortable throwing with his or her right hand. The non-dominant hand or foot is the other hand or foot. It is important for students to have opportunities to practise skills with both their dominant and non-dominant hands and feet.

downward dog pose. A static balance with hands and feet on the floor and hips in the air. Hands and feet are both shoulder-width apart. Arms, legs, and back are straight, or as straight as possible, and the backs of the legs are stretched. The student pushes down through the shoulders and arms, which lengthens the spine. The hips are pushed back and up, with weight evenly distributed between hands and feet.



dynamic balance. A type of stability skill in which core strength is used to maintain balance and control of the body while moving through space. *See also* **stability**.

effort awareness. *See* **movement concepts**.

Elder. An Indigenous individual whose wisdom about spirituality, culture, and life is recognized and affirmed by the community. Not all Elders are “elderly”. Indigenous communities and individuals will normally seek the advice and assistance of Elders on various traditional, as well as contemporary, issues.

epinephrine autoinjector. A syringe used to inject potentially lifesaving epinephrine (adrenaline) into someone who is experiencing anaphylaxis. *See also* **anaphylaxis**.

execution. The action phase of movement, which includes the movements prior to producing force, including gathering momentum, and the instant when force is applied to carry out the movement skill. The body is positioned, weight is transferred, and joints work together to produce the action. *See also* **follow-through, phases of movement, and preparation**.

external stimuli affecting movement. Any force outside of the body that can have an impact on an intended movement. External stimuli could include environmental factors such as wind, sun, or temperature. It could also include factors such as music, equipment, or teammates.

fair play. An attitude or way of thinking that is based on the principles of integrity, fairness, and respect and the equitable or impartial treatment of all participants in an activity.

fetal alcohol spectrum disorder (FASD). A term used to describe a range of disabilities that may affect people whose mothers drank alcohol while they were pregnant. (From Public Health Agency of Canada, “Fetal Alcohol Spectrum Disorder [FASD]: Frequently Asked Questions”, <https://www.canada.ca/en/public-health/services/health-promotion/childhood-adolescence/programs-initiatives/fetal-alcohol-spectrum-disorder-fasd/frequently-asked-questions.html>.)

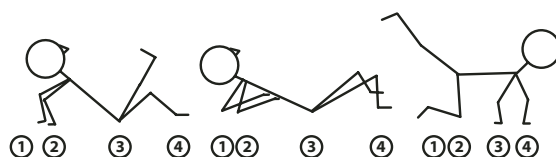
fitness. *See* **health-related fitness and physical fitness**.

fitness circuit. A series of stations, each set up for a different physical activity that targets a particular aspect of fitness; for example, a flexibility station where students work on sitting and reaching forward, or a cardiorespiratory fitness station where students work on continuous skipping. Circuits may be organized in a number of ways, including a closely structured format where each student visits every station for a specified period of time, or a less structured format where students choose stations that correspond with their fitness goals and may choose to visit some stations more than once. Music may be used as a motivator for students and as a stop/start indication to signal when it is time to change stations.

flexibility. A health-related component of physical fitness involving the ability to move a joint through its full range of motion. *See also* **health-related fitness**.

follow-through. The final phase of movement, which includes the movements after the instant when force is applied. In this phase, the transfer of weight is completed, movement continues in the direction of action, the movement slows down, and stability is regained. *See also* **execution, phases of movement, and preparation**.

four-point balance. Any static balance in which four body parts are touching the ground. *See also* **three-point balance and two-point balance**.



gallop. A locomotor movement in which the body moves forward or backwards. To gallop, students step forward with one foot and quickly draw the second foot up to the first foot, then repeat. Knees are bent slightly and arms stay out for balance. Galloping is a fundamental skill that can be used as students learn more complex skills. By learning to balance the body and control the motion,

students can apply this action to other, more complex skills or combine it with other actions. See also **skip** and **slide**.

gay. According to the Ontario Human Rights Commission, “people whose enduring physical, romantic and/or emotional attractions are to people of the same sex.” (From *Teaching Human Rights in Ontario: A Guide for Ontario Schools*.)

gay-straight alliance. A student-run club that provides a safe space for any and all students to meet and learn about different sexual orientations, socialize, support each other, talk about issues related to sexual orientation and gender identity, and work to end homophobia and to raise awareness and promote equality for all. (Adapted from Canadian Federation for Sexual Health, “How to Form a Gay/Straight Alliance”, www.cfsh.ca/Your_Sexual_Health/Gender-Identity-and-Sexual-Orientation/Gay-Straight-Alliance.aspx.)

gender. According to the Ontario Human Rights Commission, “the social classification of people as masculine and/or feminine.” (From *Teaching Human Rights in Ontario: A Guide for Ontario Schools*.) See also **gender identity**, **gender expression**, and **sex**.

gender-based violence. Any form of behaviour – including psychological, physical, and sexual behaviour – that is based on an individual’s gender and is intended to control, humiliate, or harm the individual. This form of violence is generally directed at women and girls and individuals who are transgender or gender non-conforming and is based on an attitude or prejudice, which can be conscious or unconscious and which exists on the individual and institutional level, that aims to subordinate an individual or group on the basis of sex, gender identity, and/or gender expression.

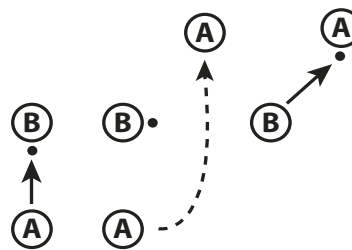
gender expression. According to the Ontario Human Rights Commission, “how a person publicly presents or expresses their gender. This can include behaviour and outward appearance, such as dress, hair, make-up, body language and voice. A person’s chosen name and pronoun are also common ways people express their gender. Others perceive a person’s gender through these

attributes.” (From *Policy on Preventing Discrimination because of Gender Identity and Gender Expression*.)

gender identity. According to the Ontario Human Rights Commission, “each person’s internal and individual experience of gender. It is their sense of being a woman, a man, both, neither, or anywhere along the gender spectrum. A person’s gender identity may be the same as or different from their birth-assigned sex. . . . [P]eople . . . may see their gender identity as fluid and moving between different genders at different times in their life.” (From *Policy on Preventing Discrimination because of Gender Identity and Gender Expression*.)

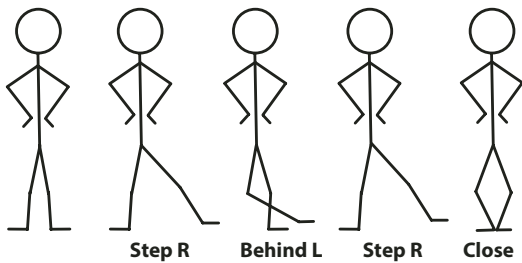
gender non-conforming. According to the Ontario Human Rights Commission, “individuals who do not follow gender stereotypes based on the sex they were assigned at birth. They may identify and express themselves as ‘feminine men’ or ‘masculine women’ or as androgynous, outside of the categories ‘boy/man’ and ‘girl/woman’. People who are gender non-conforming may or may not identify as trans.” (From *Policy on Preventing Discrimination because of Gender Identity and Gender Expression*.)

give and go. A type of play used, most often in territory activities, as a strategy for maintaining possession of the object and moving it down the playing area towards the goal. During this play, Player A passes the object to Player B (“give”). Then Player A moves quickly ahead, towards the goal or an open space (“go”). Player A remains ready to receive the object back from Player B. After Player A has moved ahead, Player B tries to pass the object back. The object is now closer to the goal.



goal ball. A territory activity in which players work in teams of three to score by throwing a ball across an end goal line. Primarily played by blind and visually impaired players.

grapevine step. A step sequence used in many dances. This step can be performed in any direction – left, right, forward, back, or diagonally. A grapevine step to the right would be performed as follows. Step to the right with the right foot. Step behind with the left foot. Step to the right with the right foot again. Bring the left foot beside the right foot to finish.



harassment. A form of discrimination that may include unwelcome attention and remarks, jokes, threats, name-calling, touching, or other behaviour (including the display or sharing of images) that insults, offends, or demeans someone because of their identity. Harassment involves conduct or comments that are known to be, or should reasonably be known to be, offensive, inappropriate, intimidating, and hostile.

health-related fitness. Refers to the components of physical fitness that contribute to optimal health. For the purposes of this document, the components are defined as cardiovascular fitness, flexibility, muscular endurance, and muscular strength. Body composition is a fifth component of health-related fitness.

heterosexual. According to the Ontario Human Rights Commission, “a person who has emotional, physical, spiritual and sexual attraction to persons of the opposite sex.” (From *Teaching Human Rights in Ontario: A Guide for Ontario Schools*.)

HIV/AIDS. HIV stands for Human Immunodeficiency Virus. This is the virus that leads to Acquired Immune Deficiency Syndrome (AIDS).

homeopathy. A system of medicine in which disease is treated by giving patients tiny amounts of natural substances with the intention of stimulating the body’s natural healing abilities.

homophobia. According to the Ontario Human Rights Commission, “the irrational aversion to, fear or hatred of gay, lesbian or bisexual people and communities, or of behaviours stereotyped as ‘homosexual’.” (From *Teaching Human Rights in Ontario: A Guide for Ontario Schools*.)

hop. A locomotor movement that involves taking off on one foot and landing on the same foot. The movement includes a take-off phase (preparation), a flight phase (execution), and a landing (follow-through). See also **jump, leap, and phases of movement**.

individual activities. Activities in which students work individually with their own equipment. In this way, opportunities for participation are maximized. In this document, the term “individual activities” is used to refer to physical activities that are not structured as games. Students can engage in these activities while also interacting with others, such as in dancing or canoeing. For more on individual activities, see pp. 37–38. See also **modified activities**.

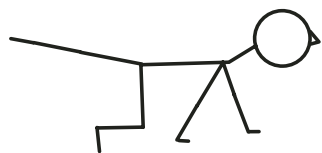
insulin therapy pump. A method of delivering insulin for people with diabetes. This method includes a device with a small catheter, which is inserted under the skin, and a pump, which is worn outside the body. (Adapted from Diabetes Canada, “Thinking of Starting Insulin”, <https://www.diabetes.ca/DiabetesCanadaWebsite/media/Managing-My-Diabetes/Tools%20and%20Resources/thinking-of-starting-insulin.pdf?ext=.pdf>.)

intersex. According to the Ontario Human Rights Commission, “a term used to describe a person born with reproductive systems, chromosomes and/or hormones that are not easily characterized as male or female. This might include a woman with XY chromosomes or a man with ovaries instead of testes. Intersex characteristics occur in one out of every 1,500 births. Typically intersex people are assigned one sex, male or female, at birth. Some intersex people identify with their assigned sex, while others do not. Some choose to identify as intersex. Intersex people do not typically identify as transgender or transsexual.” (From *Policy on Preventing Discrimination because of Gender Identity and Gender Expression*.) See also **gender identity and transgender**.

jump. A locomotor movement that involves taking off and landing with two feet. The movement includes a take-off phase (preparation), a flight phase (execution), and a landing (follow-through). *See also hop, leap, and phases of movement.*

kendo. A physical activity from Japan that combines martial arts values with sport-like physical elements. It involves the use of bamboo swords.

knee scale. A static balance performed with both hands and one knee and lower leg as the contact points on the ground and the other leg extended behind the body. Head is up and the body is held tight for balance. *See also standing scale.*



knowledge holder. An individual who is recognized by the community as having the responsibility for the cultural and spiritual knowledge of traditions, teachings, and practices; in First Nations communities, the knowledge holder is usually an Elder. The knowledge held is unique to the given culture or society. It is passed down from generation to generation and also acquired through lived experience. A knowledge holder often helps to guide the community or nation. (The terms *knowledge holder* and *knowledge keeper* are interchangeable in some communities.)

knowledge keeper. A traditional teacher who may or may not be recognized as an Elder, but who still carries the teachings of the community, and can be called upon for that expertise. The teachings may pertain to language, culture, the arts, dancing, and/or singing, among other things. A knowledge keeper is often supported by a knowledge holder. (The terms *knowledge keeper* and *knowledge holder* are interchangeable in some communities.)

leap. A locomotor movement that involves taking off from one foot and landing on the other. Leaping is performed much like running, but the flight phase is longer. *See also hop, jump, and phases of movement.*

lesbian. According to the Ontario Human Rights Commission, “a woman who has emotional, physical, spiritual and/or sexual attraction to other women.” (From *Teaching Human Rights in Ontario: A Guide for Ontario Schools.*)

locomotion, locomotor movement. A type of movement skill used to move the body from one point to another in various ways. *See also movement skills.*

manipulation. The act of giving force to or receiving force from objects as one sends, receives, or retains them. *See also movement skills, receiving, retaining, and sending.*

mental health. According to the Public Health Agency of Canada, positive mental health is “the capacity of each and all of us to feel, think, act in ways that enhance our ability to enjoy life and deal with the challenges we face. It is a positive sense of emotional and spiritual well-being that respects the importance of culture, equity, social justice, interconnections and personal dignity.” (From Public Health Agency of Canada, “Mental Health Promotion”, <https://www.canada.ca/en/public-health/services/health-promotion/mental-health/mental-health-promotion.html>.)

mental illness. According to the Government of Canada, a range of illnesses that “are characterized by alterations in thinking, mood or behaviour associated with significant distress and impaired functioning.” A mental illness is clinically diagnosed. Examples of specific mental illnesses include anxiety disorders; mood disorders, such as depression; personality disorders; and schizophrenia. (Adapted from Government of Canada, “Mental Illness”, <https://www.canada.ca/en/public-health/services/chronic-diseases/mental-illness.html>.)

Métis Senator. A Métis individual recognized and respected by the community, who has knowledge of Métis culture, traditions, and experience, and is dedicated to preserving Métis ways of life and governance. In Ontario, the Métis self-governance system includes one Métis Senator on each community council.

moderate to vigorous physical activity. The degree to which an activity is moderate to vigorous is directly related to its ability to raise the heart rate, to improve cardiorespiratory fitness, and to maintain this increase for a sustained period of time. Moderate to vigorous physical activities are aerobic in nature, enhancing the health of the heart and lungs, dependent on the frequency, intensity, time, and type of activity.

modified activities, modified games. Activities or games that have been altered from their traditional or formal structure to allow for maximum participation or to allow students of differing experiences and abilities to participate. For example, two-on-two basketball is a modified version of basketball; multi-base baseball is a modified version of softball.

movement concepts. A framework for increasing the effectiveness of movement by helping students become more skilful, knowledgeable, and expressive in their movements. Movement concepts include body awareness, spatial awareness, effort awareness, and relationship. (See p. 34 for examples.)

movement principles. A set of biomechanical principles that can be applied to improve the efficiency and effectiveness of movements. The principles are related to stability, effort, and motion in different directions. Application of these principles becomes more refined as movement competence increases. (See p. 35 for examples.)

movement skills. These skills (stability, locomotion, and manipulation) are the foundation of all physical activity and are essential both to an individual's development of effective motor skills and to the application of these skills in a wide variety of physical activities. *See also locomotion, manipulation, and stability.*

movement strategies. A term encompassing a variety of approaches that help a player or team attain the ultimate goal or objective of an activity or game, such as moving to an open space to be in a position to receive an object or hitting an object away from opponents to make it difficult for opponents to retrieve the object. Similar

activities within game categories often employ common or similar strategies. (See p. 35 for further information.)

muscular endurance. A health-related component of physical fitness that relates to the muscle's ability to continue to exert force over a period of time without fatigue. *See also health-related fitness.*

muscular strength. A health-related component of physical fitness that relates to the ability of the muscle to exert force or maximum effort. *See also health-related fitness.*

naturopathy. A system of medicine in which disease is treated by the use of a variety of natural remedies rather than by drugs or surgery.

net/wall activities. Activities in which players send an object towards a court or target area that their opponent(s) are defending. The aim is to make it difficult for opponent(s) to return the object and to cause it to land in the target area.

nutrient. A substance that provides essential nourishment. Types of nutrients include carbohydrates, fats, proteins, vitamins, and minerals.

obesity. An accumulation of excess body fat. Obesity occurs when a person consumes more food energy than is needed to provide for all of the day's activities, including work and exercise. Obesity is a risk factor in a number of chronic diseases. Achieving and maintaining a healthy weight is important for reducing the risk of those diseases and improving overall health.

offence. The practice or role of working proactively to gain an advantage and score. *See also defence.*

open space. During game play, refers to the part of the playing area that is clear and available for movement at any given time. Players use open spaces during games to receive passes and move without obstacles. Strategically, students may use open space differently in different categories of activities, such as hitting to open spaces in striking/fielding or net/wall activities, or running to open spaces that are close to the goal area in territory activities.

pansexual. A person who has emotional, physical, spiritual, and/or sexual attraction to people regardless of their gender or sex.

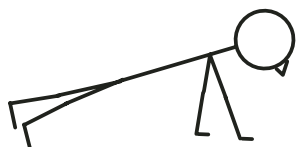
pedometer. An app or small, portable electronic device that automatically counts each step a person takes in a day. Some pedometers are able to multiply the number of steps by the wearer's step length to calculate the distance the wearer has walked that day.

phases of movement. The three parts that a fundamental movement skill can be broken into: a preparation phase, an execution phase, and a follow-through phase. Practising a skill with these three phases in mind can help a student perform the skill more effectively and efficiently. *See also* **execution, follow-through, movement skills, and preparation.**

physical fitness. A state of well-being that allows people to perform daily activities with vigour, reduces the risk of health problems related to lack of physical activity, and establishes a fitness base for participation in a variety of physical activities.

Pilates. A type of physical activity focused on building core muscle strength through the use of stretches, strength-building activities, and focused breathing.

plank balance. A static balance performed with hands on the floor and shoulder width apart, and the body stretched out with the feet on the floor. The hips should be aligned so that the back and legs form a straight line, with the hips neither sagging down or sticking up. To hold this position, core muscles need to be held tight. A plank balance can also be performed in different positions, such as on the forearms instead of the hands or with the elbows bent and the hands holding the body close to the ground. *See also* **static balance.**



power. A skill-related component of physical fitness that combines strength and speed and relates to

the ability to perform the greatest effort in the shortest time. *See also* **skill-related fitness.**

preparation. The initial phase of movement, which involves getting the body ready to initiate a movement. This phase includes ensuring that the feet are in a position such that they are ready to move, and lowering the centre of gravity to create a stable body position. *See also* **execution, follow-through, and phases of movement.**

problematic substance use. Refers to the use of substances in ways that have a higher risk of negative impacts on both an individual and society. The term encompasses both potentially harmful use, which is the use of substances in ways that are illegal or not recommended medically, and substance use disorder, which involves frequent and compulsive use of substances despite the physical, mental, emotional, social, legal, or economic harm that this use may cause to oneself or others.

protective factors. Traits, characteristics, or environmental contexts that research has shown to promote positive mental health in childhood or adolescence. Examples of protective factors include personal strengths (e.g., intelligence, relaxed temperament), family strengths (e.g., a supportive home environment, socio-economic advantages), and school and community strengths (e.g., safe and effective schools; participation in social groups; having at least one significant, caring relationship with an adult). Enhancement of protective factors at the individual, family, and community level is now believed to reduce the likelihood of mental health problems and illnesses later in life. (Adapted from Ministry of Children and Youth Services [now the Ministry of Children, Community, and Social Services], *A Shared Responsibility: Ontario's Policy Framework for Child and Youth Mental Health*, 2009.) *See also* **resilience and risk factors.**

qigong. A type of physical exercise and meditative practice from China that uses slow movements and controlled breathing. The intent of the movements is to enhance the movement of energy throughout the body. Some of the movements are similar to ones used in t'ai chi or yoga. Qigong is pronounced "chee-gung".

reaction time. A skill-related component of physical fitness that relates to the length of time between stimulation and response. *See also* **skill-related fitness.**

ready position. A stance used in many sports and activities, in which the body is in a position that allows it to move and respond easily. Knees are bent, feet are apart, head is up, arms are out for balance, and attention is focused.

receiving. A manipulation skill that relates to the intent to catch an incoming object. Receiving skills include catching, trapping, and collecting. Basic skills associated with receiving include keeping one's eyes on the object, anticipating where the object will arrive and moving to get into position, and preparing the body by being in a ready position with weight evenly distributed, knees bent, and a low centre of gravity. *See also* **manipulation and ready position.**

recovery time. The length of time that it takes for the heart to return to its regular (resting) rate after physical activity.

recreational activities. Physical activities that an individual or group chooses to do to make their leisure time interesting, enjoyable, and personally satisfying. Recreational activities include hiking and walking for pleasure, gardening, participating in sports, and doing a wide variety of other indoor and outdoor physical activities.

relationship (movement concept). *See* **movement concepts.**

resilience. The ability to recover quickly or “bounce back” from disruptive change, illness, or misfortune without being overwhelmed or acting in dysfunctional ways. Resilient people possess the skills to cope with life's challenges, respond to stress, and move forward. Children and youth have a naturally resilient nature, but it must be nurtured and strengthened, particularly in the face of one or more risk factors for mental health problems or illness. (Adapted from Ministry of Children and Youth Services [now the Ministry of Children, Community, and Social Services], *A Shared Responsibility: Ontario's Policy Framework for Child and Youth Mental Health*, 2009.) *See also* **protective factors and risk factors.**

retaining. A manipulation skill that relates to the intent to maintain possession of an object while stationary or moving. Retaining skills include carrying (for example, holding a football while running); dribbling (for example, bouncing a basketball with a hand or controlling a soccer ball with the feet); and cradling (for example, keeping an object tucked close to the body or protecting an object while carrying it in a scoop or the pocket of a lacrosse stick). Basic skills associated with retaining include being able to change directions, controlling the object with either the hand or the foot, and maintaining control. *See also* **manipulation.**

rhythmic activities. A term encompassing a variety of movement-based activities, including dance, gymnastics, and creative movement. Music or instruments may be used to provide opportunities to move in response to a beat or sound.

risk factors. Traits, characteristics, or environmental contexts that research has shown to be predictive of mental health problems or illnesses in childhood or adolescence. Examples of risk factors include a child or youth living in poverty, having parents with limited parenting skills or mental illness, abuse of alcohol and/or drugs, the lack of experience of success in school, premature birth, or low birth weight. The effect of a given risk factor tends to be stronger when it is combined with other risk factors, may vary during different periods of a child or youth's life, and is often cumulative. (Adapted from Ministry of Children and Youth Services [now the Ministry of Children, Community, and Social Services], *A Shared Responsibility: Ontario's Policy Framework for Child and Youth Mental Health*, 2009.) *See also* **protective factors and resilience.**

rounders. A striking/fielding game in which offensive players work in teams to strike a ball, then score runs by running to bases. Fielding players work together to retrieve the ball and get offensive players out by catching the ball, tagging a base, or tagging a runner. The game is very similar to softball, with some rule and equipment variations.

sacred medicines. In many Indigenous cultures, many sacred medicines are commonly used for ceremonial purposes. For example, four sacred medicines used by some First Nations and Métis peoples for smudging are tobacco, cedar, sage, and sweetgrass. These medicines are used in personal and ceremonial contexts for purification of the mind, body, and spirit. Other sacred medicines may be harvested and used in traditional Indigenous approaches to healing and in ceremonies.

scale. See **knee scale** and **standing scale**.

self-concept. The perception a person has of his or her own identity. People form their self-concept using interpretations of information they acquire about themselves through experiences and interactions with others and their environment. A person's self-concept can be influenced by the opinions of others, reinforcement of behaviour, and explanations or understanding of one's own behaviour or actions. Unlike self-esteem, self-concept is not positive or negative, but rather accurate or inaccurate, or extensive or narrow.

sending. A manipulation skill that relates to intent to move an object away from oneself. Sending skills include throwing, kicking, striking, punting, and volleying. Basic skills associated with sending include balancing the body to prepare, transferring body weight as the object is sent, and following through. See also **manipulation and phases of movement**.

sepak takraw. A net/wall game also known as kick volleyball. The game originated in Malaysia, and variations are played in other South Asian countries and around the world. It is played with a woven rattan ball or a synthetic version of this ball. Players in teams of three use the feet, knees, chest, and other body parts – but not the hands – to pass the ball to each other and move the ball over the net.

seven grandfather teachings. The principles and values central to the Anishinaabe: honesty, humility, bravery/courage, wisdom, respect, truth, and love. They are also known as the Seven Teachings.

seven stages of life. First Nations, Métis, and Inuit cultures use a variety of conceptual frameworks, often in stages, to represent the journey of life. Each stage has its own unique challenges and gifts for the individual, the family, and the community. The seven stages of life is a framework used by the Anishinaabe.

sex. The category of male or female, based on characteristics that are biologically determined. See also **gender, gender identity, and intersex**.

sex trafficking. The illegal activity of recruiting, harbouring, transporting, obtaining, or providing a person for the purpose of sex. Most individuals who are trafficked for sex are women and girls, but people of any sex, sexual orientation, or gender identity may be targeted. Indigenous and racialized individuals are especially vulnerable to experiencing sex trafficking. The average age of recruitment in Canada is 13. Children and youth under the age of 18 cannot consent to engaging in sex work, and no one can consent to being sex trafficked.

sexual health. A state of physical, emotional, mental, and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction, or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination, and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected, and fulfilled. Sexual health is influenced by a complex web of factors ranging from sexual behaviours, attitudes, and societal factors to biological risk and genetic predispositions. (Adapted from UNESCO, *International Technical Guidance on Sexuality Education: An Evidence-Informed Approach*, https://www.unaids.org/sites/default/files/media_asset/ITGSE_en.pdf.)

sexual orientation. According to the Ontario Human Rights Commission, “the direction of one’s sexual interest or attraction. It is a personal characteristic that forms part of who you are. It covers the range of human sexuality from lesbian and gay, to bisexual and heterosexual.” (From *Teaching Human Rights in Ontario: A Guide for Ontario Schools*.)

sexuality. A term that encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy, and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles, and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, ethical, legal, historical, religious, and spiritual factors. (From World Health Organization, *Defining Sexual Health: Report of a Technical Consultation on Sexual Health* [Geneva, Switzerland: WHO, 2002]; referenced in Sex Information and Education Council of Canada [SIECCAN], *Canadian Guidelines for Sexual Health Education*, 2019, at <http://sieccan.org/sexual-health-education/>.)

sexually transmitted and blood-borne infections. See **STBBIs**.

skill-related fitness. Refers to the components of physical fitness that are related to quality of movement and enhanced performance with respect to sports and motor skills. The components are commonly defined as balance, coordination, agility, speed, power, and reaction time. Skill-related fitness is sometimes referred to as motor fitness or performance-related fitness.

skip. A locomotor movement that involves rhythmically alternating steps followed by a hop with the lead foot. Skipping can be performed forward or backwards. To skip forward, students take a step forward with one foot, hop on that foot, then step forward with the other foot and hop on that foot. Then the whole sequence is repeated. Knees are slightly bent, and arms can be moved forward and back to help with rhythm. Skipping is a more complex action than galloping or sliding and is generally best taught after students have learned to gallop and slide. See also **gallop** and **slide**.

sledge hockey. A territory game similar to ice hockey, played with six players on each team, including a goalie. Players sit on a sledge, which is a narrow platform with skate blades attached to the bottom, and propel themselves using two specially constructed hockey sticks that have

picks on the end. The specially designed sledges can be adapted to meet the needs of each player. Primarily played by players with a wide range of physical disabilities, including but not limited to wheelchair users, amputees, people with spinal cord injuries, and people with cerebral palsy.

slide. A locomotor movement in which the body moves sideways. To slide, students step to the side with one foot and quickly draw the second foot over to the first foot, then repeat. Knees are bent slightly, and arms stay out for balance. Sliding is a fundamental skill that allows students to make quick lateral (sideways) movements in a number of activities. See also **gallop**.

smudging. A process of cleansing or purification that uses the smoke from the burning of sacred medicines or plants to say prayers, cleanse the senses, and start the day in a good way. Smudging is commonly practised by First Nations peoples. Although Inuit and Métis people did not traditionally smudge, many follow the practice today.

social-emotional learning. According to the Collaborative for Academic, Social, and Emotional Learning (CASEL), “the process through which children and adults understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions.” (From “What is SEL?”, <https://casel.org/what-is-sel/>.) See Appendix A in this document for further information.

spatial awareness. See **movement concepts**.

specialized equipment. A term encompassing a variety of materials designed to help students with a variety of needs to participate in physical activity. For example, specialized equipment might include balls of different sizes, colours, weights, and/or textures to make the ball easier to see, feel, or catch, or balls with a bell inside to help a student who is unable to see to track the ball using the auditory cue.

speed. A skill-related component of physical fitness that relates to the ability to move from one point to another within a short period of time. See also **skill-related fitness**.

stability. Stability skills involve the ability to balance the body in one place (static) or keep the body balanced while moving (dynamic) by sensing a shift in the relationship of the body parts and altering body position to maintain balance. *See also dynamic balance, movement skills, and static balance.*

standing scale. A static balance performed with one foot as the contact point on the ground and one leg extended behind the body. Head is up, arms are out, and the body is held tight for balance. *See also knee scale.*



static balance. A stability skill in which the body maintains a desired shape in a stationary position. *See also stability.*

STBBIs (sexually transmitted and blood-borne infections). According to the Public Health Agency of Canada, infections that are “either sexually transmitted or transmitted through blood. This includes, but is not limited to: human immunodeficiency virus (HIV), hepatitis B (HBV) and C (HCV), chlamydia, gonorrhea, syphilis, and human papilloma virus (HPV).” (From Public Health Agency of Canada, “Reducing the Health Impact of Sexually Transmitted and Blood-Borne Infections in Canada by 2030: A Pan-Canadian STBBI Framework for Action”, <https://www.canada.ca/en/public-health/services/infectious-diseases/sexual-health-sexually-transmitted-infections/reports-publications/sexually-transmitted-blood-borne-infections-action-framework.html>.)

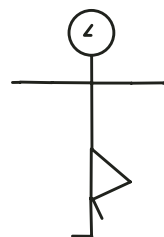
stereotype. A false or generalized, and usually negative, conception of a group of people that results in the unconscious or conscious categorization of each member of that group, without regard for individual differences. Stereotyping may be based on race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, age, marital status, family

status, or disability, as set out in the Ontario Human Rights Code, or on the basis of other factors.

stickhandling. A method of retaining or maintaining possession of an object while moving, using a stick such as a hockey, field hockey, or ringette stick. *See also manipulation and retaining.*

stigma. Opinions or judgements held by individuals or society that negatively reflect on a person or a group of individuals. Stigma leads to discrimination when it is acted on. (Adapted from UNESCO, *International Technical Guidance on Sexuality Education: An Evidence-Informed Approach*, https://www.unaids.org/sites/default/files/media_asset/ITGSE_en.pdf.)

stork stand. A static balance performed by standing on one foot and holding the other foot against the supporting leg. Arms may be out to the sides or held above the head, or the hands may be placed on the waist.



striking/fielding activities. Activities in which striking players try to score by striking an object and running to designated playing areas (bases) while fielding players try to prevent them from scoring by retrieving the object and returning it to stop the play.

systems thinking. A method of thinking and problem-solving in which elements are considered as part of a complex whole, rather than in isolation. Analysing the ways in which elements interact with and depend on each other can yield greater understanding than looking at each element separately.

talk test. A simple assessment tool that students can use to monitor their level of exertion during moderate to vigorous activity to ensure that they are at a level that is appropriate for their training

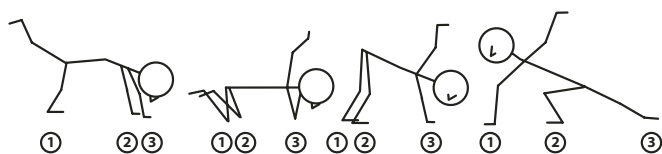
and participation goals and optimal for improving cardio-respiratory endurance. During moderate activity, students can hear their own breathing and can talk comfortably. During more vigorous activity, students can still talk, but it is more challenging to do so. *See also moderate to vigorous physical activity.*

target activities. Activities in which players score by avoiding obstacles to get an object closer to a target or hit a target more often than their opponents.

tchoukball. A territory game in which players score by throwing and bouncing a ball on a small trampoline-like goal set up at each end of the playing area. Tchoukball is a no-contact game.

territory activities. Activities that involve controlling an object, keeping it away from opponents, and moving it into position to score. The same playing area is shared by both offensive and defensive players as they work to prevent the other team from scoring.

three-point balance. Any static balance in which three body parts are touching the ground. *See also four-point balance and two-point balance.*



tobacco (ceremonial/traditional). The tobacco plant that is used for medicines and ceremonies in some First Nations and Métis cultures, also known as sacred tobacco. In these cultures, tobacco is offered up and used in ceremonies to establish a connection to the spirit world. There are protocols for using traditional tobacco, which can include offering tobacco as a sign of respect or to give thanks when asking for guidance, or before taking things from nature. Traditional tobacco and commercial tobacco are different in the way they are grown, harvested, and/or used.

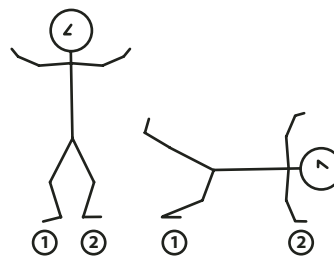
training principles. The factors that need to be considered for improving and maintaining fitness. A handy mnemonic is the FITT principle: frequency (how often different body parts are exercised); intensity (the level of physical exertion); time (duration of the activity); and type of exercise. The concepts in the FITT principle are tied to the principles of overload (working the muscles more than accustomed), specificity (improving specific body parts with specific activities), and progression (gradually increasing the amount or intensity of activity).

transgender/trans. According to the Ontario Human Rights Commission, “an umbrella term that describes people with diverse gender identities and gender expressions that do not conform to stereotypical ideas about what it means to be a girl/woman or boy/man in society. ‘Trans’ can mean transcending beyond, existing between, or crossing over the gender spectrum.” (From *Policy on Preventing Discrimination because of Gender Identity and Gender Expression.*)

transphobia. According to the Ontario Human Rights Commission, “the aversion to, fear or hatred or intolerance of trans people and communities.” (From *Policy on Preventing Discrimination because of Gender Identity and Gender Expression.*)

travelling skills. *See locomotion, locomotor movement.*

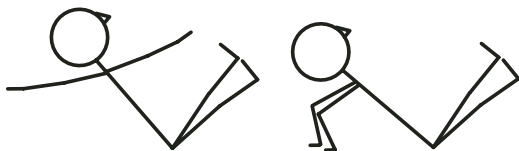
two-point balance. Any static balance in which two body parts are touching the ground. *See also four-point balance and three-point balance.*



Two-Spirit. An Indigenous person who possesses both a masculine and feminine spirit. The term can also be used to identify gender, sexual, and spiritual identities outside of traditional Western definitions and binaries.

vaping. The act of inhaling and exhaling a spray of liquid droplets (aerosol) produced by an electronic cigarette or other vaping device. The device heats a liquid into a vapour, which is often flavoured and may contain nicotine or chemical substances found in cannabis. Unlike cigarettes, vaping does not involve burning. (Adapted from Government of Canada, “About Vaping”, <https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping.html>.)

v-sit. A static balance performed with the buttocks on the ground and legs held tight and together in the air. Arms can support the body or be held at the sides or over the head. *See also* **static balance**.



warm-up. The process of preparing the body for more vigorous activity by moving muscles and joints lightly and gradually increasing intensity of movement.

The Ministry of Education wishes to acknowledge the contribution of the many individuals, groups, and organizations that participated in the development and refinement of this curriculum policy document.