CO-Health Resource Guide

A Guide to Local Resources for Poudre School District Educators Implementing the Colorado State Health Standards







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CO-Health Resource Guide

A Guide to Local Resources for Poudre School District Educators Implementing the Colorado State Health Standards

Purpose of this Guide: To assist Poudre School District educators in delivering the Colorado State Health Standards.

What makes this Guide unique: All of the organizations in this guide are registered on PSD's ShareIt! system and have a proven history of utilizing only evidence-informed practices. We all belong to the Partnership of Healthy Youth, an organization that has been collaborating with PSD since January 2013.

Partnership for Healthy Youth (PHY): Formed in January 2013, PHY is a group of community organizations and agencies that are all dedicated to positively affecting the health and wellness of youth. PHY advocates for effective collaboration with school districts in Northern Colorado to implement the Colorado Comprehensive Health Standards, increase the health and wellness of youth in our community, and give every child the best chance for a bright future.

Partnership for Healthy Youth members who have contributed to this Guide:

Alliance for Suicide Prevention

Boys and Girls Clubs of Larimer County

CanDo (Coalition for Activity and Nutrition to Defeat Obesity, University of Colorado Health)

Center for Family Outreach

Crossroads Safehouse

Healthier Communities Coalition (University of Colorado Health)

Healthy Hearts (University of Colorado Health)

Healthy Kids Club (University of Colorado Health)

Larimer County Department of Health and Environment (LCDHE)

Lutheran Family Services Rocky Mountains

Northern Colorado AIDS Project

Partners Mentoring Youth

Peace Circles LLC

Planned Parenthood of the Rocky Mountains

Safe Kids Larimer County

Sexual Assault Victim Advocate Center (SAVA)

Team Fort Collins

Tobacco Free Larimer County (LCDHE)





How to Use This Guide:

This PDF document is CLICKABLE. Hover your arrow over text to see if the little pointing hand appears for easy navigation within the document or to external links.

In alignment with the Colorado State Health Standards, this Guide is organized into seven categories:

- 1. Alcohol, Tobacco, and Drug Prevention
- 2. Emotional and Social Wellness
- 3. Health Promotion
- 4. Healthy Eating
- 5. Safety
- 6. Sexual Health
- 7. Violence-Free Relationships

Within each category the resources are color-coded by education level and "Other Health-related Community Resource":

Elementary (grades specified)

Middle School (grades specified)

High School (grades specified)

Other Healthrelated Community Resources

There are eight appendices. Appendix A is a helpful checklist and Appendices B – H offer rationale and sources for teaching the various Colorado State Health Standards categories to school aged children:

Appendix A: Guidelines for Having a Community Organization or Agency Instruct in Your Classroom

Appendix B: Rationale for Teaching Alcohol, Tobacco, and Drug Prevention to School Aged Children

Appendix C: Rationale for Teaching Emotional and Social Wellness to School Aged Children

Appendix D: Rationale for Teaching Health Promotion to School Aged Children

Appendix E: Rationale for Teaching Healthy Eating to School Aged Children

Appendix F: Rationale for Teaching Safety to School Aged Children

Appendix G: Rationale for Teaching Sexual Health to School Aged Children

Appendix H: Rationale for Teaching Violence-Free Relationships to School Aged Children





Alcohol, Tobacco, and Drug Prevention

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Mission: To enable all young people, especially those who need us most, to reach their full potential as productive, caring, responsible citizens through our three program areas; academic success, healthy lifestyles, and good character and citizenship.

Offerings to Poudre School District:

- After School Programs: Monday-Friday from 2:30pm-7:00pm
- **Summer Programs:** Monday-Friday from 7:30am-6pm
- Membership Fee: \$5.00 annually
- Location: Clubhouses are located in Fort Collins, Wellington and Loveland
- Core Program Areas: Healthy Lifestyles, Academic Success and Good Character and Leadership

Programs:

- Smart Moves: The SMART Moves (Skills Mastery and Resistance Training)
 prevention/education program addresses problems such as drug and alcohol
 use and premature sexual activity
- **Triple Play**: Encouraging health for the mind, body and soul, through interactive activities
- Sports Leagues: Basketball, baseball, and volleyball
- Snacks/Meals: Provided daily by Food Bank for Larimer County
 - ✓ The Boys & Girls Clubs of Larimer County serve on average 400 youth afterschool each day in Larimer County.
 - Programming occurs when schools are closed, winter and spring breaks and during the summer months.

Contact: Kaycee Headrick | kheadrick@bgclarimer.org | (970)223-1709 www.begreatlarimer.org

Alcohol, Tobacco, and Drug Preventior

Healthy Hearts Program



UNIVERSITY of COLORADO HEALTH

Healthy Hearts is an outreach heart health screening and preventive education program that is offered to elementary and high school students in Northern Colorado.

Offerings to Poudre School District:

Healthy Hearts for Elementary

- The program consists of three educational units (45-60 minute sessions) in the 4th or 5th grade
- Topics include Cardiovascular Health and Wellness, Healthy Eating, Exercise, Avoiding Tobacco, and Goal Setting
- Screening for students includes a non-fasting finger stick to measure total cholesterol and HDL, BMI, and blood pressure measurement (with parental permission)

Healthy Hearts for High School

- The program consists of one 95 minute educational unit
- Topics include Cardiovascular Health and Wellness, Healthy Eating, Exercise, Avoiding Tobacco, and Goal Setting
- Screening for students includes a non-fasting finger stick to measure total cholesterol and HDL, BMI, and blood pressure measurement (with parental permission)

In addition to Alcohol, Tobacco, and Drug Prevention, this program also meets Colorado State Health Standards for Healthy Eating and Health Promotion.

Goals of the Healthy Hearts Program:

- To provide standards-based cardiovascular health education to students
- To provide cholesterol, blood pressure, and BMI screenings
- To educate students and their families on the importance of healthy lifestyle choices to prevent heart disease
- To stop risk factors from developing in the first place by utilizing primordial prevention practices
- To provide an opportunity for intervention for high risk children
- To collect data from family health surveys and screenings

Contact: HealthyHearts@UCHealth.org | (970) 624-1680 | www.uchealth.org/Pages/Services/Community-Health/Healthy-Hearts

Alcohol, Tobacco, and Drug Preventior

Health-related Community Resources



Larimer County Department of Health & Environment

Tobacco Free Larimer County and TobacNO Youth Coalition

Mission: Tobacco Free Larimer County (TFLC) serves as a community resource for evidence—based practices in tobacco education, prevention, policy, and cessation for youth and adult populations. TFLC strives to prevent and reduce tobacco use and smoke exposure among individuals living in Larimer County.

Offerings to Poudre School District:

- Tobacco Prevention and Cessation Resources for Youth: TFLC Health
 Educators will connect PSD staff with evidence-based resources for youth
 tobacco prevention and cessation. Resources may include the American Lung
 Association's N-O-T cessation program, Second Chance alternative to
 suspension program, Colorado Quit Line materials, and free classroom
 tobacco prevention posters. Please call to inquire about other needs to
 support youth tobacco prevention and/or classroom academic standards.
- TobacNO Youth Coalition: In partnership with PSD, TFLC facilitates a coalition of youth, ages 12-18, who live in Larimer County. Youth coalition members work in partnership with adults to plan and implement activities that will prevent and reduce tobacco use among children and teens; Participation increases youth knowledge of tobacco, fosters positive youth development, aids in skill development and the prevention of risk behaviors. Participation in the TobacNO Coalition is a great way for students to learn new skills, have their voice hear, impact community change, and acquire school volunteer or community service hours. The coalition meets monthly during weekday evening hours.

Contact: (970)498-6752 | www.larimer.org/tobacco

Alcohol, Tobacco, and Drug Preventior



Mission: Team Fort Collins promotes healthy lifestyle choices through substance abuse prevention.

Offerings to Poudre School District:

- Elementary: Moving Up To Middle School: Awesomeness, Brains & Changes for 5th grade students (parents are welcome to attend)
- **Middle School: Transitions** for 8th grade students (parents are welcome to attend)
- High School: Brain Gain: Your Power Center to Success for 10th grade students and customized presentations available for classes
- Other Community Resources: Educational brochures and customized presentations for youth and parents on teen substance use and the developing brain

"I learned the number one reason why teens go to rehab is because of marijuana. In the future, I will keep going to school, make a plan of how to respond, and say no if I am offered drugs or alcohol."

Brynna, age 16

"I learned that an adult is less likely to get addicted to drugs than teenagers and the effects of drug use on teens can be devastating."

Sergio, age 15

"Thank you for coming in to talk about drugs and addiction. I learned a lot about how the brain gets addicted and what is going on. I plan to start doing more goal setting in my future to ensure that I stay on a path of awesomeness."

Thea, age 16

Contact: Laurel Carter, Program Director | laurel@teamfortcollins.org (970)224-9931 | www.teamfortcollins.org

Alcohol, Tobacco, and Drug Prevention

Emotional and Social Wellness

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Middle School (6th grade)

Our mission is to prevent suicide in Larimer County. We work to raise awareness, educate and train youth and adults about depression and suicide. We provide resources and support to those who have been affected.



Offerings to Poudre School District:

• Raising Awareness of Personal Power (R.A.P.P.) This 90 minute educational program covers the symptoms of common mood disorders, warning signs of suicide, and how to help a friend. Students are provided a booklet of information that includes Larimer County resources. After each presentation, we give students a chance to anonymously refer someone they think needs help. These referrals are then given to your school counselor(s). Trained staff and volunteers with first-hand experience with mental illness present R.A.P.P. The program requires a laptop and projector in the classroom for PowerPoint presentation.

"Last spring, her teenage daughter sat through your presentation and it sounds like she was paying attention! Her daughter heard her friend at school talk about giving away some of her possessions and heard some other warning signs. This worried the girl because she recognized the warning signs of suicide, so she told an adult about her concerns. It turns out the girl was planning to commit suicide, however an intervention was made and she did not end her life."

-Christy Doyon, Boys and Girls Club

- ✓ R.A.P.P. has been a part of Larimer County health classes since 1995.
- ✓ In 2012 R.A.P.P. was presented to over 4,000 students. Out of those students, 283 immediately asked for help for themselves or a friend.
- ✓ Since 2005, thanks to increased education, youth suicide rates have decreased by 50%.

motional and Social Wellness

Contact: Kalie McMonagle, R.A.P.P. Coordinator | (970) 482-2209 info@allianceforsuicideprevention.org | www.allianceforsuicideprevention.org





Our mission is to help Larimer County youth (ages 8-18) and their families achieve and sustain long-term positive changes and healthy relationships. We do this by providing individual assessment, education, and custom designed programs to develop successful and positive citizens.

Offerings to Poudre School District:

- Youngest at Heart: Ages 8-10. 5 week curriculum. This is for our youngest participants. It focuses on preventing delinquent behavior and has a strong anti-bullying component. Each class is 45 minutes long.
- Young at Heart: Ages 10-12. 5 week curriculum. Same as Youngest at Heart, but for older participants. Helps participants develop healthy habits and communication skills prior to entering high school. Each class is 45 minutes long.
- **Teen Perspectives:** Ages 13⁺. 7 week curriculum. This program explores the dangers of using illegal drugs and alcohol. Each class is 45 minutes long.
- Anger, Bullying, and Communication: Ages 13⁺. 7 week curriculum. Helps participants develop healthy communication skills, develop empathy, and learn coping skills for dealing with destructive behaviors. Classes are 45 minutes long.
- Challenges, Choices, and Change: Ages 13⁺. 10 week curriculum. A class offering handson activities for young women who are demonstrating high-risk behaviors and addresses issues unique to adolescent girls. Classes are 45 minutes long.
- Cognitive Behavioral Therapy: Ages 13⁺. 10 weeks of 45 minute sessions. Participants learn basic cognitive skills which enable them to look at their thinking, beliefs, attitudes and values critically and identify errors allowing for positive cognitive restructuring.
- **Dialectical Behavioral Therapy:** Ages 13⁺. 7 weeks of 45 minute sessions. This form of therapy focuses on youth with emotional regulation, anxiety, and self-harm problems.
- **Relapse Prevention:** Ages 13⁺. 10 weeks of 45 minute sessions. Helps youth with addiction problems avoid relapse.
- **Parent/Grandparent Support:** 5 weeks of one hour sessions. Provides support to parents and grandparents through examination of adolescent development.
 - ✓ The Center consistently ranks number one in costeffectiveness and positive outcomes for our participants in Poudre School District (source: Colorado State University, School of Social Work, Marc Winokur).
 - √ 84% of our participants graduate successfully from our programs.

Contact: Laurie Klith | Iklith@aol.com | (970)495-0084 www.centerforfamilyoutreach.org motional and Social Wellness

Elementary (K – 5th)

Middle School (6th – 8th)

High School (9th – 12th)

Other Health Related Community Resources



Mission: To create and support one to one mentoring relationships between positive adult role models and youth facing challenges in their personal, social and/or academic lives.

Offerings to Poudre School District:

- Partners provides best practice mentoring services to youth who are referred
 to our program because they are facing identified risk in their lives and could
 benefit from additional adult support. Extensive screening, training, and
 support are provided to mentors in the Partners program.
- We serve youth through two programs, our Community Based Program and our School Based Program. In both programs, either in the context of school or community, volunteers are spending one to one time mentoring students with social, emotional, and academic support/goal achievement being the focus.
- Group life skill building activities, recreational activities, and community service opportunities compliment these mentoring relationships.

Extensive National Research, along with our own program evaluation results, documents Best Practice Mentoring as an effective strategy in promoting positive youth development. Mentoring promotes assets for youth, both internal and external, that help them overcome negative cycles in substance abuse and delinquent behaviors, increased school bonding and academic success, and increased ability to plan for the future. Mentoring works! In 2014, over 500 youth annually will benefit from Partners services.

Contact: Heather Vesgaard, LCSW | heatherv@partnersmentoringyouth.org (970)484-7123 | www.partnersmentoringyouth.org

motional and Social Wellness



Mission: Peace Circles LLC offers training and facilitation of preventive restorative practices called PeaceKeeper Circles and Peace Circles. Both are social emotional tools designed to build a caring and compassionate culture and climate in the classroom and school community.

Offerings to Poudre School District:

- PeaceKeeper Circle (Kindergarten 5th)
 - This 10-week training is held in the classroom with teachers and students together. Each session lasts approximately 30 minutes.
 - Teachers do not have to find subs or go to class outside of their school day, they have the great benefit of hands-on learning with their students.
 - Skills for life all participants learn respectful communication, which becomes a conflict resolution, community building and classroom management tool.
 - The social/emotional communication skills learned are applied during the safe classroom circle and then naturally as needed outside of circle.
- Peace Circles (6th 12th)
 - o This is a singular event that can last from one class period to a full day
 - o Ideally students are in Circle at least one time per year to experience community building and learn compassionate listening and communication.
 - There is always a trained adult facilitator and when possible a few trained students who co-facilitate the circle. Student training is available.
 - Peace Circles often result in a dramatically cohesive interchange between students. They experience letting go of prejudice, preconceived ideas, and build connection through listening to common and/or diverse stories of peers.
 - The intention of Peace Circles is to have a ripple effect that reaches the entire school to foster respect and compassion for all.
 - o The Circle process is adaptable for teacher and parent groups.

In addition to Emotional and Social Wellness, both programs also meet Colorado State Health Standards for Violence Free Relationships.

"[Because of Peace Circles] students are able to communicate how they feel before an interaction reaches a bullying level."

Amy Smith, Principal, McGraw Elementary

Contact: Kiri Saftler,MSD | kiri@peacecircles.com | (970)493-1427 www.peacecircles.com

motional and Social Wellness

Middle School (8th grade)





The SAVA Center's mission is to serve all those affected by sexual violence in Northern Colorado and to enable a culture change that leads to a violence-free community.

Offerings to Poudre School District:

• The SAVA Center Speak Up! program

- Using 8 24 sessions (depending on school's preference), this research-based sexual violence prevention program is for girls and guys in 8th grade
- SAVA program facilitators (2) advertise to 8th grade students at the start of the school-year or semester (for groups starting later)
- Students opt to join the gender-specific groups, which typically meet during free periods or lunch periods
- Groups meet weekly to move through each lesson and end the school year with a joint celebration and experiential field trip

In addition to Emotional and Social Wellness, this program also meets Colorado State Health Standards for Sexual Health and Violence Free Relationships.

Program outcomes:

Students who complete the 8 week to 24 week Speak Up! groups demonstrate statistically significant positive change in:

- Acceptance of violence
- Support of gender equity
- Levels of homophobia and sexism
- o Bystander intervention
- Age-appropriate understanding of sexual violence
- o Support for healthy relationships with peers

Contact: Katie Ashby, SAVA Director of Prevention Education katie@savacenter.org | (970)472-4204 | www.savacenter.org

Health Promotion

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Healthy Hearts Program



UNIVERSITY of COLORADO HEALTH

Healthy Hearts is an outreach heart health screening and preventive education program that is offered to elementary and high school students in Northern Colorado.

Offerings to Poudre School District:

Healthy Hearts for Elementary

- The program consists of three educational units (45-60 minute sessions) in the 4th or 5th grade
- Topics include Cardiovascular Health and Wellness, Healthy Eating, Exercise, Avoiding Tobacco, and Goal Setting
- Screening for students includes a non-fasting finger stick to measure total cholesterol and HDL, BMI, and blood pressure measurement (with parental permission)

Healthy Hearts for High School

- The program consists of one 95 minute educational unit
- Topics include Cardiovascular Health and Wellness, Healthy Eating, Exercise, Avoiding Tobacco, and Goal Setting
- Screening for students includes a non-fasting finger stick to measure total cholesterol and HDL, BMI, and blood pressure measurement (with parental permission)

In addition to Health Promotion, this program also meets Colorado State Health Standards for Healthy Eating and Alcohol, Tobacco, and Drug Prevention.

Goals of the Healthy Hearts Program:

- To provide standards-based cardiovascular health education to students
- To provide cholesterol, blood pressure, and BMI screenings
- To educate students and their families on the importance of healthy lifestyle choices to prevent heart disease
- To stop risk factors from developing in the first place by utilizing primordial prevention practices
- To provide an opportunity for intervention for high risk children
- To collect data from family health surveys and screenings

Health Promotion

Contact: HealthyHearts@UCHealth.org | (970) 624-1680 | www.uchealth.org/Pages/Services/Community-Health/Healthy-Hearts

Elementary

(Kindergarten)



Healthy Kids Club is a community health program sponsored by University of Colorado Health to promote health and physical activity among elementary age children. Initiated in 1998, Healthy Kids Club works with elementary schools in Poudre, Thompson and Weld school districts, as well as youth serving organizations and coalitions.

Offerings to Poudre School District:

Healthy Kids, Healthy Start!
 Healthy Kids, Healthy Start! is a standards-based, 8 week curriculum for kindergartners. The curriculum consists of four 30-minute lessons in the fall semester and four 30-minute lessons in the spring semester.

In addition to Health Promotion, this program also meets Colorado State Health Standards for Healthy Eating and Safety.

What Kindergarten Teachers Say about Healthy Kids Healthy Start:

"This program is awesome! The activities were geared for this age-group. Superb teacher. PLEASE come back next year!"

 Within PSD, Healthy Kids, Healthy Start! is currently taught in 16 classrooms across 5 schools, reaching nearly 350 kindergarten students

Contact: Laurie Zenner, Healthy Kids Club Manager | laurie.zenner@uchealth.org (970)495-7511 | www.healthykidsclub.org

Health Promotion

Health-related Community Resources



Healthy Kids Club is a community health program sponsored by University of Colorado Health to promote health and physical activity among elementary age children. Initiated in 1998, Healthy Kids Club works with elementary schools in Poudre, Thompson and Weld school districts, as well as youth serving organizations and coalitions.

Community resources available to Poudre School District:

- Healthy Kids Run Series Offered since 1998, the run series offers kids ages 5-12 the
 opportunity to participate in nine free, non-competitive 1 mile kids fun runs. Kids who
 complete four or more runs earn prizes. Over 1500 kids participate in the series.
- **Fit.Teen Run Series** This program includes nine local 5K runs for teens ages 13-18 (discounted registration fees required). Teens who participate in four or more of runs earn prizes.
- The Schools on the Move 5210 Challenge Each February, participating elementary schools track daily 5210 healthy habits (5 fruits and veggies, 2 hours or less of screen time, 1 hour of physical activity and 0 sugary drinks). Participants who reach the established goal earn a t-shirt. The schools with the highest percentage of participants receive prize money to use for PE equipment and/or school wellness initiatives. Over 80 schools and 12,000 students and staff participate in the Challenge.
- Walkathon Fundraisers Healthy Kids Club sponsors "walkathon" fundraisers at many area elementary schools. Kids get pledges and then run or walk around their school's track or playground on a designated day. All participants get t-shirts, and a portion of the walkathon proceeds are designated to fund school wellness initiatives.
- Classroom Resources HKC has developed three popular classroom resources that support
 integrating movement, activity and brain breaks in to the school day. Resources include Minds
 in Motion Fit Sticks, Kids on the Move Activity Decks and CD, and the Minds in Motion Math
 and Literacy Activities. Additional resources are available on our website at
 healthykidsclub.org.
- **Fit Families on the Move** Fit Families on the Move is a summer program designed to keep families active. Registered families receive an all-access pass for over 75 free and low cost family activities in northern Colorado (swims, hikes, bike rides, laser tag, mini golf and more).
- **BstrongBfit** This eight-week program for 5th and 6th grade girls promotes physical activity through running, and includes standards-based lessons with an emphasis on positive selfesteem. BstrongBfit is typically held before or after school. Interested schools attend a "train the trainer" program, and Healthy Kids Club supplies all of the curriculum and materials. The program finishes with a 5K.
- Healthy Kids News

Published in September, January and May, Healthy Kids News is an eight page newsletter provided in both English and Spanish. Healthy Kids News is distributed to all elementary students and their families.

Health Promotion

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Offerings to Poudre School District:

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- **Summer Programs:** Monday-Friday from 7:30am-6pm
- Membership Fee: \$5.00 annually
- Location: Clubhouses are located in Fort Collins, Wellington and Loveland
- Core Program Areas: Healthy Lifestyles, Academic Success and Good Character and Leadership

Programs:

- Smart Moves: The SMART Moves (Skills Mastery and Resistance Training)
 prevention/education program addresses problems such as drug and alcohol
 use and premature sexual activity
- **Triple Play**: Encouraging health for the mind, body and soul, through interactive activities
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 - Programming occurs when schools are closed, winter and spring breaks and during the summer months.

Contact: Kaycee Headrick | kheadrick@bgclarimer.org | (970)223-1709 <u>www.begreatlarimer.org</u>

Health-related Community Resources



Mission: To engage community members and organizations in healthy eating and active living through capacity building, advocacy, and education.

Offerings to Poudre School District:

While CanDo does not offer classroom presentations for school age children, we do work with young people on projects that engage them in civic leadership opportunities within the realm of healthy eating and active living as well as health equity issues.

Built Environment Work Group: Engages young people in projects that
increase access to nutritious food and remove obstacles to participating in
physical activities, by changing the built environment. (Example: Using
Photo Voice to influence decision makers to build much needed sidewalks
in their neighborhood in order to increase pedestrian use and safety.)

CanDo is a standing member of Poudre School District's Wellness Advisory Council for Schools (WACS).

Fort Collins is a healthy place to live AND we have work to do:

- ✓ While we are the leanest state in the nation when it comes to adults, our kids rank an alarming 29th (RWJF and Trust for America's Health 2011 Report).
- ✓ Hispanic children in Colorado are 3 times more likely to be obese than their white counterparts (CDC National Survey of children's Health, 2007).

Contact: Kim Barman, CanDo Supervisor | kimberly.barman@uchealth.org (970)495-7517 | www.candoonline.org

Healthy Hearts Program



UNIVERSITY of COLORADO HEALTH

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Offerings to Poudre School District:

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Healthy Hearts for High School

- The program consists of one 95 minute educational unit
- Topics include Cardiovascular Health and Wellness, Healthy Eating, Exercise, Avoiding Tobacco, and Goal Setting
- Screening for students includes a non-fasting finger stick to measure total cholesterol and HDL, BMI, and blood pressure measurement (with parental permission)

In addition to Healthy Eating, this program also meets Colorado State Health Standards for Alcohol, Tobacco, and Drug Prevention, and Health Promotion.

Goals of the Healthy Hearts Program:

- To provide standards-based cardiovascular health education to students
- To provide cholesterol, blood pressure, and BMI screenings
- To educate students and their families on the importance of healthy lifestyle choices to prevent heart disease
- To stop risk factors from developing in the first place by utilizing primordial prevention practices
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(Kindergarten)



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In addition to Healthy Eating, this program also meets Colorado State Health Standards for Health Promotion and Safety.

What Kindergarten Teachers Say about Healthy Kids Healthy Start:

"This program is awesome! The activities were geared for this age-group. Superb teacher. PLEASE come back next year!"

✓ Within PSD, Healthy Kids, Healthy Start! is currently taught in 16 classrooms across 5 schools, reaching nearly 350 kindergarten students

Contact: Laurie Zenner, Healthy Kids Club Manager | laurie.zenner@uchealth.org (970)495-7511 | www.healthykidsclub.org

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In addition to Safety, this program also meets Colorado State Health Standards for Health Promotion and Healthy Eating.

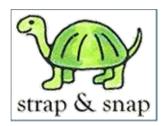
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Contact: Laurie Zenner, Healthy Kids Club Manager | laurie.zenner@uchealth.org (970)495-7511 | www.healthykidsclub.org





Safe Kids Larimer County Strap & Snap Program

Mission: Safe Kids is dedicated to protecting kids from unintentional injuries.

Offerings to Poudre School District:

Strap & Snap is a 45-60 minute interactive program to educate students in understanding the importance of wearing a bicycle helmet. It is offered to all third grade classes each spring and all materials are provided. Vouchers are provided to students who cannot afford bicycle helmets and can be redeemed at helmet fit stations that are located throughout the county. A smart board presentation is available.

✓ In 2013, we reached 1,898 third graders in Poudre School District.

Contact: safekids@uchealth.org | (970)495-7504 | www.sklarimer.org



Mission: Safe Routes to School is a nationwide effort to get more children biking and walking to school for their health, academic achievement, and the environment. In Fort Collins, our goal is to get at least 50 percent of K–12 schoolchildren biking or walking to school on a regular basis.

Offerings to Poudre School District:

- **Bicycle and Pedestrian Safety Education** Held during PE class (K-8). Two sessions, one indoor and one outdoor; includes "bike rodeo" to teach bike-safety skills. Bikes are provided for students who are unable to bring them, and helmets given away to students who don't own one.
- After-school Bike Rodeo Offered outside normal school hours (K-8). This 2 to 3 hour program is offered to the entire school after school or on the weekend. It includes helmet safety, helmet giveaways, and bike-skills course. It is a perfect addition to School Wellness Day or other school-wide activity. Bikes provided for students to use if they can't bring one.
- **Bike/Ped Safety Assembly** Offered as a school assembly (K-5). This program is offered to kindergarten through 3rd grade and 4th through 5th grade students separately. It covers pedestrian safety lessons, bike safety, and helmet safety in a fun, interactive format.
- Walking School Buses and Bike Trains (K-8). We can assist your school in setting up a group of students who walk or bike to school together, accompanied by safe adults (parents and/or community volunteers).
- Bike Field Trips (K-12). We can assist with bike field trips set up and coordinated by teachers at your school to visit places such as the Museum of Discovery, Environmental Learning Center, or The Farm at Lee Martinez Park.
- International Walk to School Day and National Bike to School Day (K-12). We can provide prizes and incentives for students to participate in these major events.
- Informational Presentations and Trainings for Adults We provide presentations to PTO/PTAs and wellness teams, and we can also provide free training to teachers/staff/parents on how to teach bike/ped safety.

"SRTS visited our school, Lincoln IB World Middle School, in September 2013. They taught bicycle education and safety to most of our 500+ students over the course of three weeks. Not only did they teach the lessons, but they also provided equipment to make the lessons possible. Our students had a lot of fun learning the bike safety lessons and then applying those lessons during our bike rides. Not only were the lessons really fun, but they also helped us meet some of our state physical education standards." —Dan Schrom and Terri Rice

Contact: Nancy Nichols, SRTS Coordinator | nnichols@fcgov.com | (970)416-2357 www.fcgov.com/saferoutes

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Mission: To enable all young people, especially those who need us most, to reach their full potential as productive, caring, responsible citizens through our three program areas; academic success, healthy lifestyles, and good character and citizenship.

Offerings to Poudre School District:

- After School Programs: Monday-Friday from 2:30pm-7:00pm
- **Summer Programs:** Monday-Friday from 7:30am-6pm
- Membership Fee: \$5.00 annually
- Location: Clubhouses are located in Fort Collins, Wellington and Loveland
- Core Program Areas: Healthy Lifestyles, Academic Success and Good Character and Leadership

Programs:

- Smart Moves: The SMART Moves (Skills Mastery and Resistance Training)
 prevention/education program addresses problems such as drug and alcohol
 use and premature sexual activity
- Triple Play: Encouraging health for the mind, body and soul, through interactive activities
- Sports Leagues: Basketball, baseball, and volleyball
- Snacks/Meals: Provided daily by Food Bank for Larimer County
 - ✓ The Boys & Girls Clubs of Larimer County serve on average 400 youth afterschool each day in Larimer County.
 - Programming occurs when schools are closed, winter and spring breaks and during the summer months.

Contact: Kaycee Headrick | kheadrick@bgclarimer.org | (970)223-1709 www.begreatlarimer.org



Larimer County Department of Health & Environment Reproductive Health and Family Planning Program

Mission: To make every child a wanted and planned addition to the family by providing reproductive health care, family planning and health education services. LCDHE provides medically accurate classroom health presentations by a professional health educator who covers topics in PSD's High School Human Sexuality Curriculum.

Offerings to Poudre School District:

- Contraception: One 50 to 90 minute classroom PowerPoint presentation. Covers the
 health benefits of planning for a healthy pregnancy and of avoiding an unintended
 pregnancy and details the facts about birth control methods (how they work,
 effectiveness, potential side effects and benefits). Visuals include actual examples of
 methods (pills, patch, ring, IUD, implant, condoms). The health benefits of correct
 condom use, talking with a partner, and obtaining resources from a health care provider
 are discussed in detail.
- STDs/STIs: One 50-90 minute classroom PowerPoint presentation that reviews trends in STDs/STIs nationally and in Larimer County, how STDs/STIs are transmitted (and how they're not), symptoms of and types of STDs, testing, treatment and prevention. The benefits of abstinence, frequent testing, correct condom use, and open communication are discussed as prevention methods.
 - ✓ We present approximately 150 sexual health education classes to approximately 2,000 individuals ages 12-29 in Larimer County annually.
 - ✓ For the past 15 years, we have been providing classroom presentations, resources, teacher trainings, and assisting with curriculum development. .
 - ✓ We operate an anonymous sexual health texting line "Protext Yourself!" which has responded to nearly 1,000 questions since 2010. Text ASKFP and your question to 66746.
 - ✓ We provide information to local community agencies and individuals about clinical Family Planning services, including specific Teen Clinic Hours.

Contact: Kori Wilford, MPH Health Educator | kwilford@larimer.org | (970)498-6743 www.larimer.org/health

Middle School (8th grade)

High School (9th – 12th)



Developed in 1995, the Ready or Not? Teen Pregnancy Prevention Program focuses on teen pregnancy prevention and 'why' not to get pregnant instead of 'how' not to get pregnant, filling a gap in teen education.

Offerings to Poudre School District:

Ready or Not? Teen Pregnancy Prevention Program

- Requires approximately 7.5 hours of class time
- All supplies needed are provided by Lutheran Family
- Instruction usually takes place over a two-week time period
- Comprehensive sexual education approach, focusing on the realities of teen pregnancy rather than an avoidance of teen sexual behavior altogether
- Curriculum features the use of infant simulators checked out to each student for a weekend
- Ready or Not? educators provide a comprehensive assessment of risk factors associated with teen pregnancy and work with students on limit setting and increasing parent-child communication
- Available to all high school grades and 8th grade middle school students
- Presented in Weld and Larimer County schools since 1999
 - √ 85% of Colorado parents support comprehensive sexual education in the classrooms (Colorado Youth Matter, 2013). This means that both abstinence and contraception are discussed.
 - ✓ Each year, *Ready or Not?* program evaluation reveals a 10% increase in students who 1) talk to their parents; 2) disagree that having a baby would make their relationships stronger; and 3) agree that they are NOT ready to be a parent.
 - √ 1,500 students in Weld and Larimer participate in this program annually. Approximately 500 of these students are from PSD!

Sexual Health

Contact: Kim Penney, LCSW | kim.penney@lfsrm.org | (970)232-1156 www.lfsrm.org

Other Health-related Community Resources

 $(9^{th} - 12^{th})$



Mission: Our mission is to equitably meet the evolving needs of people affected by HIV through prevention, care and advocacy.

Offerings to Poudre School District:

- **HIV 101 and Hepatitis C 101**: 90-minute presentations for teachers and students
- School Group Talks
- Parent Education Evenings

Within the next few years, 1 in 4 new cases of HIV in the United States will be youth ages 13 to 24 (source: Centers for Disease Control and Prevention). It is vital to our prevention efforts that schools understand how to talk about HIV and its transmission in order to promote and empower individual sexual health.

Contact: Lori Daigle, Regional Director | Lori.Daigle@coloradoAIDSproject.org (970)484-4469 | www.ncaids.org





Mission: The Responsible Sex Education Institute educates and empowers individuals and communities to make responsible choices regarding their sexuality and sexual health.

Offerings to Poudre School District

• Short Term Programs (Speaker's Bureaus): Lasting 1 hour in length these presentations are designed using current Best Practice curriculum development models. Topics are available in 3 levels based on grade level (those marked by * are not available for elementary schools):

Anatomy
 Contraception*

o Puberty o STIs*

Abstinence
 Realities of Teen Parenting*

Refusal Skills
 Pregnancy Options*

Healthy Relationships

- Long Term Programs: All of our long-term programs have been evaluated and are either evidence based or labeled a promising practice by the Center for Disease Control and Prevention.
 - o Middle School
 - Draw the Line/Respect the Line: 11-hour program that focuses on peer pressure, decision making, and puberty
 - ¡Cuidate!: 6 hour program that is culturally-based and designed to reduce sexual risk among Latino youth
 - o High School
 - All Together Now: 6 hour program that focuses on STIs, prevention methods, and self-care
 - Safer Choices: 14 hour program that focuses on refusal skills, risk factors, and HIV/AIDS awareness
 - ¡Cuidate!: 6 hour program that is culturally-based and designed to reduce sexual risk among Latino youth
 - ✓ The Responsible Sex Education Institute educates over 20,000 individuals each year at over 200 schools and organizations.
 - "I have had sex-ed in school but I feel like I can ask more questions here and get real answers."
 -16 year old male participant

Molly Alderton, Education Program Manager | molly.alderton@pprm.org | (970)482-5748

www.plannedparenthood.org

Sexual Healt



SART Peers Program is an official Poudre School District program, with community partner The SAVA Center. The SAVA Center's mission is to serve all those affected by sexual violence in Northern Colorado and to enable a culture change that leads to a violence-free community. SART Peers (Sexual Assault Resource Team) provides peer to peer research-based information on sexual violence prevention.

Offerings to Poudre School District:

Middle School

- Sexual harassment presentations (60 90 minutes)
- Bystander intervention training
- Presentations available in Spanish

High School

- Sexual harassment presentations (60 90 minutes)
- Sexual assault presentations (60 90 minutes)
- Healthy and safe sexuality program for students with developmental disabilities (8 sessions)
- Presentations available in Spanish

In addition to Sexual Health, this program also meets Colorado State Health Standards for Violence Free Relationships

- ✓ This program reaches over 3,500 students annually
- ✓ Presentations can be tailored to fit your needs

Participants say...

"I feel like these presentations are very important and can help me make a difference in our community."

"...men and women should be treated equal, and if I ever witness sexual harassment/assault I will help the situation."

"Stand up for what you believe – I will."

Contact: Audrey Swenson, SART Peers Coordinator | audrey@psdschools.org (970)218-4519 | www.savacenter.org

Middle School

(8th grade)





The SAVA Center's mission is to serve all those affected by sexual violence in Northern Colorado and to enable a culture change that leads to a violence-free community.

Offerings to Poudre School District:

• The SAVA Center Speak Up! program

- Using 8 24 sessions (depending on school's preference), this research-based sexual violence prevention program is for girls and guys in 8th grade
- SAVA program facilitators (2) advertise to 8th grade students at the start of the school-year or semester (for groups starting later)
- Students opt to join the gender-specific groups, which typically meet during free periods or lunch periods
- Groups meet weekly to move through each lesson and end the school year with a joint celebration and experiential field trip

In addition to Sexual Health, this program also meets Colorado State Health Standards for Emotional and Social Wellness and Violence Free Relationships.

Program outcomes:

Students who complete the 8 week to 24 week Speak Up! groups demonstrate statistically significant positive change in:

- Acceptance of violence
- Support of gender equity
- Levels of homophobia and sexism
- o Bystander intervention
- o Age-appropriate understanding of sexual violence
- Support for healthy relationships with peers

Contact: Katie Ashby, SAVA Director of Prevention Education katie@savacenter.org | (970)472-4204 | www.savacenter.org

Violence-Free Relationships

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Violence Free Relationships

High School



Crossroads Safehouse is a domestic violence emergency shelter for victims of intimate partner abuse and their children. Crossroads offers a continuum of services, including advocacy, intervention, awareness and education.

Offerings to Poudre School District:

Teen Dating Violence Institute (TDVI)

- TDVI works to educate each student on violence free relationships. Crossroad's Advocates work with the Peer Ambassadors/Counselors in each high school, training them on healthy relationships, red flags of dating violence, the different types of abuse, the cycle of abuse, and how to help a student who is dealing with teen dating violence. The Peers are given a full day of in-depth training. The trained Peers then go into each health class and present a 90 minute presentation on healthy relationships and dating violence prevention.
- Each 90 minute TDVI Presentation covers:
 - Dating Violence Myths and Facts
 - Healthy Relationships
 - Red Flags and Warning Signs
 - Types of Abuse
 - The Cycle of Abuse
 - How to Help Someone in a Dating Violent Relationship
- TDVI is currently presented in 4 high schools in the Poudre School
 District and is well received by both the Peers and the kids who see the
 presentation.

Crossroads serves all victims of intimate partner violence and we believe that prevention is key to helping teenagers live happy healthy lives. In a time when media is often filled with mixed messages about relationships and technology keeps us connected 24/7, learning to be safe in relationships and recognize the warning signs in now more important than ever.

Contact: Barbara Dean, Youth Advocate | (970)482-3535 bdean@crossroadssafehouse.org | www.crossroadssafehouse.org



Mission: Peace Circles LLC offers training and facilitation of preventive restorative practices called PeaceKeeper Circles and Peace Circles. Both are social emotional tools designed to build a caring and compassionate culture and climate in the classroom and school community.

Offerings to Poudre School District:

- PeaceKeeper Circle (Kindergarten 5th)
 - This 10-week training is held in the classroom with teachers and students together. Each session lasts approximately 30 minutes.
 - Teachers do not have to find subs or go to class outside of their school day, they have the great benefit of hands-on learning with their students.
 - Skills for life all participants learn respectful communication, which becomes a conflict resolution, community building and classroom management tool.
 - The social/emotional communication skills learned are applied during the safe classroom circle and then naturally as needed outside of circle.
- Peace Circles (6th 12th)
 - o This is a singular event that can last from one class period to a full day
 - Ideally students are in Circle at least one time per year to experience community building and learn compassionate listening and communication.
 - There is always a trained adult facilitator and when possible a few trained students who co-facilitate the circle. Student training is available.
 - Peace Circles often result in a dramatically cohesive interchange between students. They experience letting go of prejudice, preconceived ideas, and build connection through listening to common and/or diverse stories of peers.
 - The intention of Peace Circles is to have a ripple effect that reaches the entire school to foster respect and compassion for all.
 - o The Circle process is adaptable for teacher and parent groups.

In addition to Violence Free Relationships, both programs also meet Colorado State Health Standards for Emotional and Social Wellness.

"[Because of Peace Circles] students are able to communicate how they feel before an interaction reaches a bullying level."

Amy Smith, Principal, McGraw Elementary

Contact: Kiri Saftler, MSD | kiri@peacecircles.com | 970-493-1427 www.peacecircles.com

Violence Free Relationships

Violence Free Relationships



SART Peers Program is an official Poudre School District program, with community partner The SAVA Center. The SAVA Center's mission is to serve all those affected by sexual violence in Northern Colorado and to enable a culture change that leads to a violence-free community. SART Peers (Sexual Assault Resource Team) provides peer to peer research-based information on sexual violence prevention.

Offerings to Poudre School District:

Middle School

- Sexual Harassment presentations (60 90 minutes)
- Bystander intervention training
- Presentations available in Spanish

High School

- Sexual harassment presentations (60 90 minutes)
- Sexual assault presentations (60 90 minutes)
- Healthy and safe sexuality program for students with developmental disabilities (8 sessions)
- Presentations available in Spanish

In addition to Violence Free Relationships, this program also meets Colorado State Health Standards for Sexual Health

- ✓ This program reaches over 3,500 students annually
- ✓ Presentations can be tailored to fit your needs

Participants say...

"I feel like these presentations are very important and can help me make a difference in our community."

"...men and women should be treated equal, and if I ever witness sexual harassment/assault I will help the situation."

"Stand up for what you believe – I will."

Contact: Audrey Swenson, SART Peers Coordinator | audrey@psdschools.org (970)218-4519 | www.savacenter.org

Middle School (8th grade)





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Offerings to Poudre School District:

The SAVA Center Speak Up! program

- Using 8 24 sessions (depending on school's preference), this research-based sexual violence prevention program is for girls and guys in 8th grade
- SAVA program facilitators (2) advertise to 8th grade students at the start of the school-year or semester (for groups starting later)
- Students opt to join the gender-specific groups, which typically meet during free periods or lunch periods
- Groups meet weekly to move through each lesson and end the school year with a joint celebration and experiential field trip

In addition to Violence Free Relationships, this program also meets Colorado State Health Standards for Emotional and Social Wellness and Sexual Health.

Program outcomes:

Students who complete the 8 week to 24 week Speak Up! groups demonstrate statistically significant positive change in:

- Acceptance of violence
- Support of gender equity
- Levels of homophobia and sexism
- Bystander intervention
- o Age-appropriate understanding of sexual violence
- Support for healthy relationships with peers

Contact: Katie Ashby, SAVA Director of Prevention Education katie@savacenter.org | (970)472-4204 | www.savacenter.org

Violence Free Relationships

Appendix A

Guidelines for Having a Community Organization or Agency Instruct in Your Classroom

Checklist for teachers

Organization/agency is listed in PSD's Share It registry
Organization/agency is listed in CO-Health Resource Guide and has a presentation or curriculum that is
in line with and addresses Colorado Academic Standards for Comprehensive Health
Organization/agency has provided you with the name and contact information of the specific person
who will be presenting
You are aware of whether the person presenting is a professional employed and trained by the agency
or a volunteer
If presenter is a volunteer, you have confirmed the type of training and experience the person has and
you are confident in his/her abilities to facilitate in your classroom
You have clearly communicated the date, time, length, and location of the presentation
The presenter has sent you an outline of the presentation and you have discussed any information that
you'd like removed or added
You have reviewed the presentation materials (handouts, videos that will be shown, PowerPoint slides,
evaluation surveys, etc.) that will be used and are certain they are educational, accurate, and
appropriate for student learning
If the topic being presented could be potentially controversial, you have informed parents/guardians
and received permission for students to attend, if necessary
You have informed the presenter of any concerns or special student needs that he or she should be
aware of

Presenters should be able to

- ✓ Provide scientific sources for facts and information presented when applicable
- ✓ Give you detailed information about what will be presented.
- ✓ Provide evaluation data relating to the effectiveness of their program
- ✓ Provide you with a list of other teachers that have experienced the presentation should you want to get a reference
- ✓ Be clear and upfront about the goals and mission of the organization/agency they represent
- ✓ Cleary articulate the specific desired outcomes of the presentation (to impact a health behavior, to encourage students to use the agency's services, to provide facts and statistics about a health topic, to prevent a health risk behavior, etc.)

Appendix B

Rationale for Teaching Alcohol, Tobacco, and Drug Prevention to School Aged Children

Research indicates that adolescents who begin drinking before age 14 are significantly more likely to experience alcohol dependence at some point in their lives compared to individuals who begin drinking after 21 years of age (Hingson, R. W, et.al 2006). Additionally, negative consequences such as sexual and physical assault, unintentional injury, problems with memory, issues with the legal system, and impairments in academic performance are more likely to be experienced by youth who begin to drink during adolescence.

Although customarily, alcohol has been our youth's drug of choice, the recent legalization of marijuana in Colorado has contributed to an increased accessibility of the drug, as well as perceived reduction of harm. The Healthy Kids Colorado Survey that took place in 2011-2012, indicates that more high school students have smoked a joint than a cigarette in the last 30 days, and that 10% of high school students have used marijuana at school. Furthermore, 10 percent of high school students reported to have driven after using marijuana, and overall traffic fatalities involving drivers testing positive for marijuana has increased 114 percent since August of 2013 (The Impact, 2013). In Denver, where there is a high concentration of marijuana outlets, 61 percent of high school seniors report they have used marijuana. Regular marijuana use before the age of 17 has been shown to negatively impact academic performance, result in higher high school dropout rates, lead to lower adult employment rates, and cause "persistent" and "long-term neurocognitive deficits," with one-sixth of kids using becoming addicted (Carlson, 2013).

Even with the increased use of marijuana, tobacco remains to be one of the most highly addictive drugs used in today's society, and is the single leading preventable cause of death and disease in the United States. Results from the 2010 National Survey on Drug Use and Health indicate that over 19 percent of high school students and 5.2 percent of middle school students smoked cigarettes in 2009. Every day about 3,800 teens begin smoking. Contributing to more than 400,000 deaths per year, tobacco ranks higher in annual deaths than AIDS, alcohol abuse, car accidents, illegal drug abuse, murders, suicides and fires combined (McGinnis J, 1993).

The statistics mentioned above clearly show the devastating effects of drugs for our youth today. What is additionally concerning is the *accessibility* of substances on and off school grounds. CASA's 2011 National Survey of American Attitudes on Substance Abuse found that almost one in four middle school students perceive their school as drug-infected, and the number jumps to more than 60 percent for high school students. Compared to teens attending drug-free schools, teens attending drug-infected schools are twice as likely to have used tobacco, alcohol, and marijuana, and report similarly to be able to obtain these substances, as well as prescription drugs, in an hour or less.

There is a large body of evidence indicating that effective implementation of a substance abuse prevention curriculum delays the initiation of use, and decreases current use (SAMHSA 2008). With this knowledge, we are aware that the longer we are able to delay use of dangerous substances, the less likely it is that our youth use at all, or use to the point of developing a dependence or addiction. It is the *age of initiation* that is an important factor in the negative consequences associated with substance use, and even just delaying the onset is considered prevention.

Given the social, emotional, behavioral, and developmental effects of underage drinking, stopping use before it begins can increase a young person's chances of living a longer, healthier, more productive life. According to the Substance Abuse and Mental Health Services Administration, if effective school-based substance use prevention curricula were implemented nationwide, substance use initiation would decline by 1.5 million youth and delay the onset of use by two years (2008).

As our youth are persistently exposed to various substances through society's every day media messages, it is imperative that education be provided that is age-specific, developmentally appropriate, and culturally sensitive throughout their formative years. Our young people deserve every opportunity to live up to their full potential, and exposure to effective school-based drug prevention education improves their chances to do so (Hawkins, et al., 2009 Spoth, et al., 2011).

By ensuring that PSD students receive education about substance use, PSD educators are helping students stay in school, achieve their academic goals and move on to productive activities after graduation.

The community agencies and professionals listed in this resource booklet can assist teachers in addressing substance abuse prevention topics with respect to Colorado legislation and standards.

Sources:

Carlson, Diane. Protect our Youth from the Marijuana Tsunami. *The Denver Post*.

http://www.denverpost.com/opinion/ci_24672734/protect-our-youth-from-marijuana-

tsunami#ixzz2xelBexKW. Accessed on 12/08/2013.

Hawkins, J., Oesterle, S. Brown, E., Arthur, M., Abbott, R., Fagan, A., & Catalano, R. (2009). Results of a type 2 translational research trial to prevent adolescent drug use and delinquency: A test of communities that care. *Archives of Pediatric and Adolescent Medicine*, 163, 789-798.

Healthy Kids Colorado Survey 2011-2012.

Hingson, R. W., Heeren, T., and Winter, M. R. (2006). Age at drinking onset and alcohol dependence: Age at onset, duration, and severity.

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McGinnis J, Foege WH. *Actual Causes of Death in the United States*. Journal of American Medical Association 1993; 270:2207-12.

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Results from the 2010 National Survey on Drug Use and Health: Summary of National Findings.

Substance Abuse and Mental Health Services Administration. National Registry of Evidence-based Programs and Practices. www/nrepp.samhsa.gov. Accessed on 08/25/12.

Of communities that care. *Archives of Pediatric and Adolescent Medicine*, 163, 789-798.

Substance Abuse and Mental Health Services Administration (2008). Substance abuse prevention in dollars and cents: A cost-benefit analysis. DHHS Publication No. (SMA) 07-4298.

The Legalization of Marijuana in Colorado: The Impact Aug 2013.

Appendix C

Rationale for Teaching Emotional and Social Wellness to School Aged Children

Emotional and Social Wellness (ESW) is one of the Colorado Department of Education's Academic Standards and is located within the Comprehensive Health & Physical Education content area. The ESW standard provides a developmental framework regarding social-emotional skills that are expected at each grade level. The Emotional and Social Wellness Standard includes mental, emotional, and social health skills that enable a student to:

- recognize and manage emotions, develop care and concern for others, establish positive relationships, make responsible decisions, handle challenging situations constructively, resolve conflicts respectfully, manage stress, and make ethical and safe choices;
- examine internal and external influences on mental and social health; and
- identify common mental and emotional health problems and their effect on physical health.

Successful post-secondary workforce readiness depends on an array of social and emotional competencies. Furthermore, social skills are critical for negotiating life's challenges and developing satisfying relationships. By providing a progression of grade level expectations of the skills necessary for students to engage in healthy and productive relationships, the ESW Standard promotes 21st century learning and workforce readiness.

Research on Social-Emotional Learning

The ESW Standard is grounded in the research on Social-Emotional Learning (SEL), a growing body of research that demonstrates the importance of recognizing this area as a significant part of students' overall skill development.

Emotional and Social Wellness will be even more successful if it occurs in the home and community. The Colorado Behavioral Health Transformation Council, a group representing state agencies and community stakeholders concerned with behavioral health, proposes expanding the use of CDE's Emotional and Social Wellness Standard to other state agencies. Through this process, representatives from agencies, such as the Division of Behavioral Health, Child Welfare, Juvenile Justice, etc., would share a common language and be able to work with students and their families on the same goals.

The positive outcomes and benefits of SEL are clearly established in the research. Over the past three decades, this research has indicated the need for educators to take on this responsibility. When educators include SEL in their daily practices, they are promoting skills necessary to increase student academic achievement, as well as those skills necessary for lifelong personal and professional success.¹

A recent meta-analysis of 213 school-based, universal SEL programs involving 270,034 kindergarten through high school students found that these students demonstrated significantly improved social and emotional skills, attitudes, behavior, and an 11 percentile-point gain in academic achievement.²

This research overwhelmingly demonstrates the effectiveness and positive outcomes for all school-age students. It proves that classroom teachers and other school staff have the ability to implement SEL programs effectively and with fidelity.³

How SEL helps students and schools: What the research says

SEL improves academic performance and academic achievement by increasing students' capacity for learning.

Students who received SEL demonstrated:

- ✓ Increased pro-social behavior
- ✓ Increased mastery of subject material
- ✓ Improved grades
- 11-percentile-point gain in academic achievement²
- ✓ Increased motivation to learn
- ✓ Improved attendance
- ✓ Better attitude towards school
- ✓ Increased graduation rates
- ✓ More commitment and attachment to school
- ✓ Improved prospects for employment

SEL also reduces behavior problems, leading to:

- Fewer suspensions and expulsions
- Decreased violent delinquency
- ✓ Fewer disciplinary referrals
- Reduced substance abuse
- Decreased grade retention

Key steps of SEL programming that support implementation of the Emotional and Social Wellness Standards

The research regarding SEL also demonstrates that, like the teaching of any subject, the selected

instructional materials and level of teacher training affects the degree to which students can apply and transfer the material. The most effective approach is to teach these skills explicitly and to make connections across all content areas. Researchers found that student gains in all five of the outcome areas occurred when SEL programs were well-implemented in the school, classroom teachers trained in SEL were the primary implementers, and the programs met S.A.F.E. 4 criteria.

The S.A.F.E. criteria are:

- 1. Use a **Sequenced** set of activities to develop SEL skills in a step-by-step fashion.
- 2. Use **Active** forms of learning, such as role-plays and behavioral rehearsal that provide students with opportunities to practice SEL skills.
- 3. **Focus** attention on SEL, with at least eight sessions devoted to SEL skill development.
- 4. **Explicitly** target particular SEL skills for development, with skills identified in learning objectives.

[Adapted from "A Brief Overview of Colorado's Emotional and Social Wellness Standards", available at: http://www.cde.state.co.us/sites/default/files/docume nts/pbis/bullying/downloads/pdf/briefoverview_colora doemotionalsocialwellnessstandards.pdf]

Sources:

¹ Weissberg, R. P., & O'Brien, M. U. (2004). What works in school-based social and emotional learning programs for positive youth development. The Annals of the American Academy, 591(1), 86-96

- ² Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., & Schellinger, K. B. (2011). The impact of enhancing students' social and emotional learning A meta-analysis of school based universal interventions. Child Development, 82(1), 405-432.
- ³ Collaborative for Academic, Social, and Emotional Learning (n.d.). Social and emotional learning (SEL) and student benefits: Implications for safe schools/healthy students core elements. Chicago, IL: Author.
- ⁴ Elias, M. J (1997). Promoting social and emotional learning: Guidelines for educators. Alexandria, VA: Association for Supervision and Curriculum Development.

Appendix D

Rationale for Teaching Health Promotion to School Aged Children

Empowering students with overall strategies for maintaining good health and personal wellness can have tremendous benefits on academic performance. Numerous research studies recognize the link between healthy habits with positive behavior and ability to focus at school.

Obesity rates are on the rise both locally and nationally. Being overweight is now the most common medical condition of childhood, with more than 9 million overweight children in the US and is linked to diseases such as heart disease and diabetes. The prevalence of childhood and adolescent obesity has tripled in the past 20 years.

In Northern Colorado during the 2012-13 school year, 1,678 students participated in the Healthy Hearts Program Screening. Of those in elementary school, 24% were overweight (14% overweight; 10% obese). Of those in high school, 21% of those screened were overweight (12% overweight; 9% obese).

In addition, The American Academy of Pediatrics recommends universal cholesterol screening of all 9 to 11-year old children. According to Healthy Hearts Data, 18% of elementary school students and 16% of high school students screened had high total cholesterol.

Teaching Health Promotion in school can have a big impact on the health choices students make and therefore reduce students' risk of diseases such as heart disease, stroke and cancer. According to Healthy Hearts Program data, as the number of positive health behaviors attained increased in 4th Grade students, so did the effort put towards lowering negative health behaviors. There was also a slight decrease in stress levels as a child achieved more of the ideal health behaviors. This correlation demonstrates a compelling reason to teach overall wellness concepts in addition to one specific health concept at a time.

School-aged youth who learn about wellness have the opportunity to connect their personal choices with their overall health status therefore having a positive outcome on their academic performance. Students who participate in Health Promotion education are exposed to compelling reasons "why" they should make good health choices.

The community resources listed in this booklet can assist schools in meeting the wellness needs of their students by addressing the Colorado Wellness Standards.

Sources:

The Gallup Organization (2001). Gallup Institute "Health of the Nation" Audit Offer Good News

Centers for Disease Control and Prevention (1999). Obesity Epidemic Increases Dramatically in the United States: CDC Director Calls for National Prevention Effort

Coalition for Activity and Nutrition to Defeat Obesity School (CanDo) Wellness Resource Kit

University of Colorado Health – Healthy Hearts Program 2013 Outcomes Report

Appendix E

Rationale for Teaching Healthy Eating to School Aged Children

When we teach students how to make healthy choices, they are more likely to be successful in school and in life.

- Cathy Martin, Ph.D., DPS Director of Mathematics and Science

Students who are well-nourished and physically active are not only healthier, but they are also better able to reach their academic potential and exhibit positive behaviors in the classroom. Schools are a natural and logical place to promote healthful eating and physical activity. Our impact can be a win-win.

To begin, prevention of childhood obesity is moving to the top of public health priorities because obesity significantly impacts general health, development and well-being. Poor nutrition, physical inactivity and obesity are considered the most pressing health issues in pediatrics and child health. About 75% of U.S. students do not consume 5 or more fruits and vegetables per day. The main dietary factors causing disease are excess intakes of free sugar, saturated fats and trans-fatty acids, and sodium, much of which is added during food processing and a lack of fruits and vegetables. By providing education on healthy eating, we can help children improve the quality of their dietary intake. Schools have the opportunity to educate all students and their families about healthy diets and therefore impact the health of our community.

Secondly, parents and educators want kids primed to learn! Many children consume half of their calories at school. In 2010, the Academy of Nutrition and Dietetics, the School Nutrition Association, and the Society for Nutrition Education jointly called for comprehensive, integrated nutrition services for students from kindergarten through high school as a means of not only improving students' nutritional status and health, but also their academic performance. Their message is that it's key for schools to provide students with nutritious foods and beverages and also to teach them why eating well is important. Not only do we want students to choose more fresh fruits and vegetables and less processed food, but we also want them to start their day with a nutritious breakfast. A review of 50 studies,

which appeared in the September 2011 issue of the Journal of School Health, pointed to growing research that reveals that skipping breakfast hurts kids' overall cognitive performance as demonstrated through their levels of alertness, attention, memory, problem solving and mathematics skills. There are several other studies that support this finding. One study found that, on average, students who eat school breakfast have been shown to attend 1.5 more days of school per year and score 17.5 percent higher on standardized math tests. Another study highlighted the link between breakfast and academic performance with a snapshot of results in Maryland, where schools serving breakfast in their classrooms experienced as much as a 7.2% lower rate of chronic absenteeism and students in schools serving breakfast in their classrooms were up to 12.5% more likely to achieve proficiency on standardized math tests. Most educators and parents would be interested in the magic bullet that preps their children to learn better, and breakfast is the closest thing we have at this moment.

If we expect children to make healthy choices such as starting their day with breakfast and eating more fruits and vegetables, we have a responsibility to educate them on healthy eating. We can impact their health and address the school's bottom line of education and achievement.

Sources:

Action for Healthy Kids (2013). The Learning Connection: What You Need to Know to Ensure Your Kids are Healthy and Ready to Learn. http://www.actionforhealthykids.org/storage/documen ts/pdfs/afhk thelearningconnection digitaledition.pdf

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FIT: Rationale, design and baseline characteristics of a school- and community-based intervention to address physical activity and healthy eating among low-income elementary school children. BMC Public Health, (11):607.

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Waters E¹, de Silva-Sanigorski A, Hall BJ, Brown T, Campbell KJ, Gao Y, Armstrong R, Prosser L, Summerbell CD. (2011). Interventions for preventing obesity in children. Cochrane Database of Systematic Reviews, (12): CD001871.

Appendix F

Rationale for Teaching Safety to School Aged Children

The Colorado Academic Standards in Comprehensive Health – Standard 4, prioritizes that students know how to "apply personal safety knowledge and skills to prevent and treat intentional and unintentional injury." This standard includes grade-level specific knowledge expectations around health and safety issues.

The American Academy of Pediatrics, in its *Mental Health and Safety Guidelines for Schools* states, "Effective implementation of health and safety education requires administrative support and sufficient time and resources. Policies help to ensure that support continues and becomes institutionalized. Studies show that adequate instructional time and opportunities to learn are crucial if students are to develop mastery of essential knowledge, skills, and competencies for health and safety."

It also states, "Having sufficient time for health and safety education allows students time to model, practice, receive feedback, and develop competency in relevant skills. When time is insufficient, teachers often omit skills practice, which is an essential part of health and safety lessons. To address the concern of insufficient time in the school day, some schools have sought funding to lengthen the school day or year."

In Larimer County, there are several community agencies and professionals listed in this resource booklet that can assist teachers address the "insufficient time" factor by teaching a variety of safety lessons that are aligned with Colorado education standards.

INJURIES TO MINORS IN OUR COUNTY

Children Age Birth-14 Years

In 2011, the rate of injury hospitalizations for Larimer County children age less than 1 year was 178.0 per 100,000 compared to 257.1 per 100,000 statewide. The rate for children age 1-14 years was 107.6 per 100,000 compared to 137.8 per 100,000 statewide. There were a total of 60 injury hospitalizations for birth-14 years during 2011 in Larimer County.

In 2011, falls were the number one cause of unintentional injury hospitalizations for Larimer County children age birth-14 years; there were 16 incidents.

Motor vehicle/transportation was the number two cause of unintentional injury hospitalizations for children birth-14 years with 14 incidents. Suicide attempts were the number one cause of intentional injury hospitalizations for youth age 10-14 years with 15 incidents.

(Source: Colorado Department of Public Health and Environment, Injury Hospitalizations)

According to Safe Kids Larimer County, from 2007 to 2011, the hospitalization and emergency department data

from local sources, including Poudre Valley Health System and McKee Medical Center, shows the five leading causes of childhood accidental injury for children birth to 14 years old in Larimer County are:

- 1. Falls
- 2. Motor Vehicle Accidents
- 3. Bicycle Accidents
- 4. Sports Related Injury
- 5. Horse Injury/Motorcycle Accident

Youth Age 15-19 Years

In 2011, the rate of injury hospitalizations for Larimer County youth age 15-19 years was 513.8 per 100,000 compared to 408.3 per 100,000 statewide. There were a total of 116 injury hospitalizations for this age group and time period in Larimer County.

In 2011, suicide attempts were the number one cause of intentional injury hospitalizations for Larimer County youth age

15-19 years with 64 incidents. Motor vehicle/transportation was the number one cause of unintentional injury hospitalizations for youth age 15-19 years with 24 incidents.

(Source: Colorado Department of Public Health and Environment, Injury Hospitalizations)

CHILD AND TEEN DEATHS IN OUR COUNTY Children Age 1-14 Years

Between 2009 and 2011 in Larimer County, the rate of deaths for children age 1-14 years was 10.7 per 100,000 compared to 16.0 per 100,000 statewide. The total number of deaths was 16.

Between 2009 and 2011, unintentional injury (e.g., motor vehicle crash, fall, drowning) was the leading cause of death for children age 1-14 years in Larimer County; there were 5 deaths. There were a total of 3 deaths due to suicide.

(Source: Colorado Department of Public Health and Environment, Injury Hospitalizations)

According to Safe Kids Larimer County, from 2007 to 2011, the accidental childhood deaths reported by the Larimer County Coroner's office and the Fatality Analysis Reporting System (FARS) were as follows:

Cause	Age 0 -1 Years		-	Age 8 - 14 Years	Total
Motor Vehicle Accident*	2	1	0	0	3
Bicycle Accident	0	0	0	2	2
Drowning	0	1	0	0	1
SIDS/SUIDS**	4	0	0	0	4
				TOTAL	10

(Source: Safe Kids Larimer County)

*NOTE: All three cases were "unbelted or unrestrained" and one was alcohol related

**NOTE: Larimer County Coroner's Office considers Sudden Infant Death Syndrome (SIDS) and Sudden Undetermined Infant Deaths (SUIDS)"natural" deaths.

Youth Age 15-19 Years

Between 2009 and 2011 in Larimer County, the rate of deaths for youth age 15-19 years was 41.8 per 100,000 compared to 48.5 per 100,000 statewide. The total number of deaths in Larimer County was 28.

Between 2009 and 2011 in Larimer County, the rate of suicide deaths for youth 15-19 years was 11.9 per 100,000 compared to 12.7 per 100,000 statewide. Suicide was the leading cause of death for youth age 15-

19 years; there were 8 deaths. Unintentional injury (e.g., motor vehicle crash, fall, drowning) was the second leading cause of death for children age 15-19 years in Larimer County; there were 7 deaths. There were a total of 4 deaths due to cancer and 3 deaths due to cardiovascular disease.

(Source: Colorado Department of Public Health and Environment, Injury Hospitalizations)

Appendix G

Rationale for Teaching Sexual Health to School Aged Children

The Colorado Department of Public Health and Environment defines "sexual health" as the integration of the physical, emotional, intellectual and social aspects of sexual well-being in ways that are positively enriching and that enhance personality, communication and love. Includes not only the physical aspects of sexual development and reproductive health, but also valuing one's own body, developing interpersonal skills to achieve meaningful relationships, interacting with others in a manner that reflects respect and equality and expressing love and intimacy, free of coercion, discrimination and violence.

Colorado has implemented policies relating to comprehensive sexuality education, including Colorado House Bills 07-1292 and 13-1081. Colorado HB 13-1081 defines "comprehensive human sexuality education" as a program that is evidence based, culturally sensitive, includes positive youth development principles, comprehensive, and is medically accurate. In 2010 the Colorado Department of Education developed Academic Standards for Comprehensive Health . These standards include grade-level specific knowledge expectations around health issues, including sexual and reproductive health and violence-free relationships.

Today, a large body of research shows that comprehensive sexuality education programs are effective because they delay initiation of first sex, improve contraceptive use, or reduce the incidence of teen pregnancy or sexually transmitted infections (Santelli, 2006).

Schools can help students reduce sexual risk taking and therefore help reduce unintended pregnancy and STDs by implementing comprehensive sexuality education curricula.

Teens today live in a complex world, and school-based sexuality education should address the many factors that contribute to sexual health and wellness across the lifespan, including unintended teen pregnancy, sexually transmitted infections and HIV/AIDS, healthy relationships and decision making, and gender-based violence.

Pregnancy and birth are significant contributors to high school drop-out rates among girls. Only about 50% of

teen mothers receive a high school diploma by 22 years of age, versus approximately 90% of women who had not given birth during adolescence (Perper, et.al. 2010). In the United States, approximately 50% of pregnancies (women ages 15-44) are unintended, meaning they are unwanted or mistimed, and 85% of pregnancies to teens are unintended (Johnson, et.al., 2006). By age 45, more than ½ of all American women will have experienced an unintended pregnancy and 3 in 10 will have had an abortion (Guttmacher, 2012).

With regard to sexually transmitted infections, although adolescents and young adults comprise only one-quarter of the population who have experienced sex, they acquire nearly half of all new sexually transmitted infections in the U.S. The need to educate teens about these issues using evidence-based, medically accurate, age-appropriate and culturally sensitive approaches is critical.

Violence, specifically gender-based violence, is also associated with having a negative impact on the sexual health of teens. One study found that adolescents who experienced sexual coercion and violence are more likely to engage in other risky behaviors and are four times more likely to become pregnant and nine times more likely to attempt suicide (Silverman, et.al. 2001). According to the Colorado Youth Risk Behavior Survey, 11.1 percent of female youth and 4.4 percent of male youth reported having been physically forced to have sexual intercourse, which represents an increase from 2005 (CDPHE, 2010a). If people view sexuality as an important piece of their own humanity, it is also an important piece of others' humanity and therefore less likely to be manipulated, coerced, abused or violated.

The community agencies and professionals listed in this resource booklet can assist teachers in addressing sexual health topics with respect to Colorado legislation and standards.

Sources:

Colorado Department of Public Health and Environment. (2010a). 2009 Youth Risk Behavior Survey Results. Retrieved April 6, 2012 from: http://www.cdphe.state.co.us/hs/yrbs/2009COH%20Summary%Tables.pdf Guttmacher Institute. (2012). In Brief: Facts on Unintended Pregnancy in the U.S. www.guttmacher.org/pubs/FB-Unintended-Pregnancy-US.html

Johnson, K., et al. (2006). Recommendations to Improve Preconception Health and Health Care-United States. A Report of the CDC/ATSDR Preconception Care Work Group and the Select Panel on Preconception Care. *MMWR Reports and Recommendations,* April 21, 2006.

Perper K, Peterson K, Manlove J. Diploma Attainment Among Teen Mothers. Child Trends, Fact Sheet Publication #2010-01: Washington, DC: Child Trends; 2010.

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Appendix H

Rationale for Teaching Violence-Free Relationships to School Aged Children

1 in 5 college women will be the victim of physical or sexual abuse at some point in her college life (Black et.al., 2011). Sexual violence is something that will affect 1 in 4 women and 1 in 6 men in their lifetimes (Briere & Elliot, 2003). Primary prevention of interpersonal and sexual violence is crucial to changing these statistics.

Violence, specifically gender-based violence, is also associated with having a negative impact on the sexual health of teens. One study found that adolescents who experienced sexual coercion and violence are more likely to engage in other risky behaviors and are four times more likely to become pregnant and nine times more likely to attempt suicide (Silverman, et.al. 2001).

According to the Colorado Youth Risk Behavior Survey, 11.1 percent of female youth and 4.4 percent of male youth reported having been physically forced to have sexual intercourse, which represents an increase from 2005 (CDPHE, 2010a). If people view sexuality as an important piece of their own humanity, it is also an important piece of others' humanity and therefore less likely to be manipulated, coerced, abused or violated.

The Rape Abuse and Incest National Network states that sexual assault significantly increases the risk of substance abuse, suicide, mental health concerns, and eating disorders. A 2011 American Association of University Women report found that nearly half of all students, including 56% of girls and 40% of boys, experience sexual harassment at school. The effects of sexual harassment on young girls include skipping or wanting to skip school and quitting an activity or sport in order to avoid the harasser. Similarly, the Women's Foundation of Colorado cited sexual assault and sexual harassment as a contributing factor to school dropout among girls. A 2010 CDC report found that 23.8% of women in Colorado experienced a completed rape, while the national average is 18%. Sexual violence against men in Colorado was also higher than the national average. The report also stated that 42% of victims experienced the first completed rape before the age of 18.

Title IX of the Federal Education Amendments of 1972 mandates that schools receiving federal funding have

the obligation to take seriously instances of interpersonal violence, sexual assault, and sexual harassment. This law strongly urges schools to provide prevention education and safety training to all students (Department of Education, 1998).

There is a large body of research around preventing interpersonal and gender-based violence. The Centers for Disease Control and Injury Prevention cite the existence of risk and protective factors for interpersonal and sexual violence prevention (CDC, 2014).

Risk factors for perpetration and victimization include alcohol and drug use; coercive sexual fantasies; impulsive and antisocial tendencies; preference for impersonal sex; hostility towards women: hypermasculinity; childhood history of sexual and physical abuse; witnessed family violence as a child; association with sexually aggressive and delinquent peers; family environment characterized by physical violence and few resources; strong patriarchal relationship or familial environment; emotionally unsupportive familial environment; general tolerance of sexual violence within the community; and weak community sanctions against sexual violence perpetrators.

Protective factors include positive social orientation; sense of belonging; sense of self-efficacy; life and interpersonal skills; positive identity; information, skills, and knowledge for healthy sexuality; pro-social peers; bonding with caring adults; effective sanctions in schools which address harassment and violence; community-based and youth-led organizing; and inclusive relationship norms that promote equity and non-violence (CDC, 2014).

The community agencies and professionals listed in this resource booklet can assist teachers in addressing violence prevention with respect to Colorado legislation and standards.

Sources:

Briere, J. & Elliot, D.M. (2003). Prevalence and psychological sequence of self-reported childhood physical and sexual abuse in a general population

sample of men and women. Child Abuse & Neglect, 27, 1205–1222.

"Title IX and Sex Discrimination." *US Department of Education*. August 1998. Web. March 26th, 2014. http://www2.ed.gov/about/offices/list/ocr/docs/tix_dis.html

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Colorado Department of Public Health and Environment. (2010a). 2009 Youth Risk Behavior Survey Results. Retrieved April 6, 2012 from: http://www.cdphe.state.co.us/hs/yrbs/2009COH%20Summary%Tables.pdf

Black, M.C., Basile, K.C., Breiding, M.J., Smith, S.G., Walters, M.L., Merrick, M.T., Chen, J., & Stevens, M.R. (2011). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.