Global Leadership for Health Education & Health Promotion

SOPHE 2019 HEALTH EDUCATION TEACHER PREPARATION STANDARDS

Sample Assessment # 6: Curriculum and Planning (Health 315) Program Proposal

SAMPLE Assessment from a Response to Conditions report (thus data from only 1 administration)

- 1. A brief description of the assessment and its use in the program: The required upper division writing course for all candidates is *Curriculum and Planning* (Health 315). It is the second course they take in the Health Education majors program of study. As a requirement of this class, candidates write proposals for designing, gaining funding, implementing, and evaluating health education curricular interventions in school and/or community settings. This assessment evaluates the program proposals. The assessment results are used for candidate improvement. Candidates' writing skills and the proposal design are evaluated. Feedback on improving both writing skills and design components contributes to candidate improvement. Students who need remediation with writing skills are referred to the XXX University Writing Lab. Department faculty analyze the aggregated results of this assessment and use them for program improvement.
- 2. <u>A description of how this assessment specifically aligns with the standards</u>: The 2019 SOPHE standards in bold and how the assessment aligns are as follows:

STANDARD 1: FUNCTIONAL KNOWLEDGE. Candidates possess functional health education knowledge about effective curricula, health behavior theories, health education standards, the whole child approach, risk and protective factors, ways to prevent chronic and communicable diseases, and the multidimensionality of health plus the literacy skills of an informed consumer that helps them create meaningful learning experiences.

¹*Component 1a: Candidates describe characteristics of effective health education curricula, including the theoretical foundations of health behavior.

Candidates must describe a behavior change theory of model that underlies their proposal and explain why they selected it.

*Component 1c: Candidates describe factors that promote or compromise health or safety, including social determinants such as race, ethnicity, socio-economic status, and family life.

¹*Indicates a Component required for determining that a Standard is met.

In explaining the need for the proposed lesson/intervention, the candidate identifies a targeted factor that promotes or compromises health or safety and explains why that is appropriate for the target population.

Component 1e: Candidates analyze the multidimensional nature of health, including intellectual, mental/emotional, social, physical, environmental, occupational, and spiritual well-being.

As candidates explain the need for their proposal, they will identify one or more aspects of health that the project/lesson will address.

STANDARD 2: ASSESSING NEEDS. Candidates assess needs and assets of learners, learning, and the learning community in order to inform their practice.

Component 2d: Candidates synthesize data about school and community assets and deficits and their context including culture in support of developing a healthy school environment. Candidates describe the target population's demographics as well as interests and health needs.

STANDARD 3: PLANNING. Candidates use needs assessment data, health education standards, and principles of learning to plan cohesive, sequential lessons and units that include ways to accommodate students' differing strengths and needs and that use 21st Century technology in order to support students' acquisition of functional health knowledge, health-related skills, and health beliefs.

*Component 3a: Candidates apply data to guide prioritizing and planning health instruction that addresses identified strengths and needs of learners within the classroom, school, and home or community context.

Candidates justify their proposal using data to explain why their proposal is important.

*Component 3c: Candidates plan a health education curriculum scope and sequence aligned with National and/or state health education standards.

Candidates describe plans for their intervention/lesson.

cuidades describe plans for their intervention/lesson.

*Component 3d: Candidates design and align measurable learning outcomes, assessments and instructional practices that support acquisition of functional health knowledge, health-related skills, and health beliefs.

Candidates develop goals and objectives for their proposal and align them with the intervention and evaluation as well as with the underlying issue to be addressed.

*Component 3e: Candidates select and create developmentally appropriate, culturally appropriate, inclusive and challenging instructional experiences that engage learners regardless of their race, ethnic origin, religion, gender, gender identity, sexual orientation, family structure, English language proficiency, and physical or cognitive ability. Candidates describe specific strategies they plan to use.

STANDARD 4: IMPLEMENTATION. Candidates employ a variety of research/theory-based instructional strategies in a well-managed classroom that

encourages all learners regardless of race, ethnic origin, religion, gender, gender identity, sexual orientation, family structure, English-language proficiency, and physical or cognitive ability to adopt healthy behaviors and to interact positively with others; candidates reflect on their practice and adapt practice in order to meet students' and instructional needs.

*Component 4a: Candidates demonstrate multiple research/theory-based instructional strategies that help learners adopt healthy behaviors.

Candidates link their plans to research and theory-based interventions.

STANDARD 5: EVALUATION. Candidates use multiple assessment methods that are aligned with standards and learning objectives to measure students' achievement, document their progress and guide instructional practice.

*Component 5a: Candidates select and create multiple methods designed to assess changes in functional knowledge, health-related skills, and health beliefs.

Candidates plan how they will evaluate their proposed lesson/project.

*Component 5b: Candidates align formative and summative assessments with educational standards, learning objectives, and instructional practice.

Evaluation plans must include both formative and summative assessments intended to demonstrate progress toward achieving the stated goals and objectives.

*Component 5c: Candidates interpret assessment results and use them to improve future instruction for diverse learners.

Candidates describe how they plan to use evaluation information they collect and how they will use it for future planning.

STANDARD 6: PROFESSIONALISM. Candidates demonstrate professionalism and ethical practices; make the case for the value of health education to academic success as well as wellness; advocate for both programs and students' welfare; make appropriate referrals; engage students' families regardless of race, ethnic origin, religion, gender, gender identity, sexual orientation, family structure, English language proficiency and physical or cognitive ability; engage colleagues within the school and community as well as the community at large using a variety of media including social media; and demonstrate a life-long learner disposition.

*Component 6a: Candidates can explain how school health education and students' health contribute to academic achievement and wellness across the lifespan.

To justify the value of their proposed intervention or lesson, candidates need to show how it will improve some aspect pf the targeted population's health or academic outcomes.

*Component 6b: Candidates advocate for learners' health and well-being and make referrals to other school and community professionals when appropriate.

In an oral presentation, candidates advocate for their lesson/project.

*Component 6d: Candidates demonstrate a variety of ways that include social media and other forms of technology to engage colleagues, and the community-at-large when promoting, planning and implementing best practices in health education.

Candidates identify community resources that could help with their proposal and suggest ways to access those resources.

- 3. A brief analysis of data findings: Out of a total of 7 candidates in the Spring 2017 semester, six (86%) candidates scored at the acceptable level (2) or above. The mean score of candidates in all of the categories was 2.5 which is in the acceptable level and is considered standard practice for an entry level health educator. The strongest category was *Theoretical Rationale*, *Goals and Objectives* (2.6), and the weakest category was *Implementation* (2.38).
- **4.** How the data provide evidence for meeting the standards: The assessment of candidates' proposals for designing, gaining funding/resources, implementing, and evaluating health education curricular interventions in school and/or community settings provides evidence of meeting all 6 standards, including three components of Standard 1; one component of Standard 2; four components of Standard 3, one component of Standard 4, all the components of Standard 5, and three components of Standard 6. All candidates except one were proficient in writing the proposal, and the mean of all candidates met the acceptable standard. This course provides the candidates with their first proposal writing experience, and they were able to reach the acceptable level of performance as a group. The one student, who did not achieve the score of 2, was very close with a score of 1.9. That student was referred to the writing lab for intensive writing tutorials. In our previous report in 2016, we expressed concern about the candidates' ability to evaluate. In this assessment every candidate (except one) met or exceeded the score of 2 in evaluation, with an average score of 2.43. We emphasized this aspect of health education in numerous courses, and the resulting improvement in the scores is gratifying.

Section IV: Evidence for Meeting Standards Assessment # 6- Curriculum and Planning (Health 315) Program Proposal Attachment A- Assessment Tool

The following are the guidelines given to candidates for writing the program proposal. 2019 SOPHE Standards are listed in bold.

Writing

A. Needs Analysis Paper (7 pages minimum)

Describe why the proposed program/intervention is needed (and should be funded!). The parts required for this paper include:

- 1. Introduction/Specific Aims/Objectives: Briefly describe the basic elements of the proposed lesson, intervention, or grant. Use previous literature and similar projects, outlining how this project will match the objectives of the funder or sponsoring organization or school. It should be approximately one page long. (1a; 6a)
- 2. Literature review: Review current and reliable data from at least six sources, including primarily peer-reviewed journals. Provide supporting data and evidence about the need for implementing the intervention as designed. Why will this intervention succeed and why will the likely target population participate and learn from this experience? (1a; 1c; 2d; 3a; 3c; 5c; 6a)

B. Theoretical Rationale/Goals and Objectives Paper (4 pages minimum)

Describe the theoretical rationale underlying your project and which shapes your goals and objectives and will help you convince others to support it. This paper is to include:

- 1. Theoretical Rationale: Describe the behavior change theory or model that informs your lesson/project and explain how it applies to your intervention/lesson. This section should be at least three pages long. (1a; 1c; 2b; 4a; 6a)
- 2. Goals and Objectives: List the specific goals and objectives of this project and explain how they are connected with the theory you have chosen to guide it. This section should be at least one page long. (3a; 3d)

C. Implementation and Evaluation Paper (6 pages minimum)

Describe the strategies for carrying out the intervention and for evaluating its success. Include in this paper:

- 1. Methods and Interventions/Lesson Plans: Describe your plans for implementation. Describe how you will get needed resources/materials, what you will do to prepare in advance, how you expect to do the project/lesson. Estimate the cost of materials (if any) and suggest how you might get the funds. Consider the resources available in the community and how you could access them. Include a time frame for what needs to happen and for each part of a lesson. Include the goals and objectives for the intervention/lesson. This section should be approximately four pages long. (3d; 3e; 6d)
- **2. Evaluation:** Describe plans for evaluating the lesson/project, include both formative and summative measures. Explain how you will use the results. This section should be approximately two pages long. (5a; 5b; 5c)

Oral presentation:

Each candidate makes a ten-minute presentation about the need for the proposed lesson/intervention and the plans for implementation. The presentation should include the nature of your selected health problem, the target population, the theoretical background, goals and objectives, and the way(s) in which you would implement and evaluate your program. Consider this an opportunity to advocate for your lesson/project. These presentations should be professionally presented with one-page handouts of key points for your audience. (1a; 1c; 2d; 4a; 6a; 6b; 6d)

Section IV: Evidence of Meeting Standards Assessment # 6: Curriculum & Planning (Health 315) Program Proposal Attachment B- Rubric Scoring Guide

Analysis Scale:

3= Target.

2=Acceptable.

1=Unacceptable.

I. Needs Assessment

| SOPHE Standards | Torget-4 Acceptable-7 Incoceptable- | | Unacceptable=1 | Score |
|--------------------|---|---|--|-------|
| 5c | Candidates: use information from research literature about a selected health concern to plan ways to changes students'/clients' functional knowledge, health-related skills, or beliefs | Candidates: reference information from research about a selected health concern | Candidates: use information from poor quality references | |
| 2d | completely evaluate health- related data to determine assets and deficits of the targeted school or community | include appropriate data sources for determining assets and deficits of the targeted school or community | include inappropriate or no data sources for determining assets and deficits of the targeted school or community | |
| 1c | identify behavioral and non- behavioral factors that promote or compromise a specific health or safety concern | identify behavioral or non- behavioral factors that promote or compromise a specific health or safety concern | Identify no or inappropriate factors that promote or compromise a specific health or safety concern | |
| 1a | identify and explain a behavior-change theory or model that explains the chosen health concern and provides the rationale for the proposed lesson/intervention | identify a behavior-change theory or model that explains the chosen health concern or that provides a rationale for the proposed lesson/intervention | Identifies no appropriate behavior- change theory or model | |
| 3a | Use data to justify selection of targeted health concern and the specific population to work with | Use data to justify selection of either the selected health concern or the targeted population | The data presented do not support the selection of the health concern or targeted population | |
| 3c | Plan a lesson or intervention that is likely to meet the objectives/goals and explains how it is consistent with the identified theory or model | Plan a lesson or intervention that is likely to meet the objectives/goals Plan a lesson or intervention that is loosely connected to the objectives/goals | | |
| 6a | Present theoretical and research evidence for health education interventions improving students' health or academic achievement | Use position statements or opinion pieces to argue for health education interventions improving students' health | Give personal opinions arguing for the importance of health education | |

II. Theoretical Rational/Goal and Objectives

| SOPHE Standards | Target=3 | Acceptable=2 | Unacceptable=1 | Score |
|--------------------|--|---|---|-------|
| 1a | Candidates: show an in-depth knowledge of the selected behavioral change theory | Candidates: explain the selected behavioral change theory | Candidates: do not clearly understand appropriate behavioral change theory | |
| 1c | demonstrate substantive health knowledge | include accurate health information | do not demonstrate accurate health knowledge | |
| 2b, 4a | connect theories related to learning to plans for differentiating health education lessons/interventions | Connect theories of learning to plans for health education | Ignore theories of learning when planning health education lessons/interventions | |
| 3c | formulate meaningful and measurable learner and program objectives | formulate good learner and program objectives | include objectives that are not measurable and meaningful | |
| 3e | propose multiple strategies to support health instruction/program | Includes strategies to support health instruction | Choose strategies that do not reflect objectives | |
| 6a | Explain how the proposed health education lesson/intervention contributes to improved health and achievement outcomes both short and long term | Explain how the proposal contributes to either health or achievement outcomes | Assert that the proposed lesson/intervention will contribute to a desired outcome | |

III. Implementation

| SOPHE Standards | Target=3 | Acceptable=2 | Unacceptable=1 | Score |
|--------------------|--|--|--|-------|
| 3d | Candidates: include learning experiences that accurately match specific learner objectives | Candidates: include learning experiences that match specific learner objectives | Candidates: include learning experiences that do not match objectives | |
| 3e | create meaningful learning experiences with diverse, innovative instructional techniques | create learning experiences that are meaningful | include arbitrary, meaningless learning experiences | |
| 3e | include multiple strategies and activities that are developmentally and culturally appropriate and inclusive | describe strategies and activities that are developmentally and culturally appropriate | that are nentally and | |
| 6d | Identify appropriate needed resources, likely sources in a community, and realistic ways of securing the resources | Identify needed resources and likely community sources | Identify needed resources and no or unrealistic sources | |

IV. Evaluation

| SOPHE Standards | Target=3 | Acceptable=2 | Unacceptable=1 | Score |
|--------------------|---|--|---|-------|
| 5a | Candidates: adapt or develop valid and reliable performance-based tools to measure outcome | Candidates: select at least one appropriate method of measuring outcomes | Candidates: Identify methods of measuring outcomes that do not align with the desired outcomes | |
| 5b | select excellent formative and summative evaluation strategies that are aligned with the outcomes and proposed strategies | select at least one appropriate formative and summative evaluation strategy for measuring outcomes | Proposed evaluation strategies are either formative or summative | |
| 5c | Include plans for analyzing data and displaying it in a way that will be helpful for making plans for improvement | Explain how planned evaluation could contribute to future plans | Suggest that evaluation results will be used for program improvement, with no plan for how that will happen | |

Section IV: Evidence for Meeting Standards Assessment # 6- Curriculum and Planning (Health 315) Program Proposal Attachment C- Candidate Data

Candidate Performance on Assessment #6, Spring 2017

| | | Theoretical | | | |
|----------------|------------|------------------|----------------|------------|-------|
| Candidates | Needs | Rationale | Implementation | Evaluation | Mean |
| | Assessment | Goals/Objectives | | | Score |
| 1. | 3.00 | 3.00 | 2.67 | 3.00 | 2.9 |
| 2. | 2.00 | 2.40 | 2.17 | 2.00 | 2.1 |
| 3. | 2.80 | 2.80 | 2.67 | 2.75 | 2.9 |
| 4. | 2.80 | 3.00 | 2.67 | 3.00 | 2.8 |
| 5. | 2.40 | 2.40 | 2.33 | 2.00 | 2.5 |
| 6. | 1.80 | 2.00 | 2.00 | 2.00 | 1.9 |
| 7. | 2.60 | 2.60 | 2.17 | 2.25 | 2.4 |
| Mean score All | | | | | |
| Candidates | 2.49 | 2.60 | 2.38 | 2.43 | 2.5 |

Six out of seven (86%) of the candidates scored at the acceptable level or above.