FAMILY LIFE EDUCATION PROGRAM NOTIFICATION TO PARENTS AND GUARDIANS

The Morris Hills Regional District has had an ongoing Family Life Education Program infused into its Health Education Curriculum for many years. However, in compliance with Article 6:19-7.1 of the New Jersey Administrative Code, with respect to parental notification, you are hereby informed that Section b(1) of the code states the following:

The parents and guardians of pupils enrolled in the district shall receive annually an outline of the curriculum and a list of instructional materials for the grade of their child, including notification about how to receive a copy of the curriculum. The district shall make available for review in each school the complete curriculum and all instructional materials prior to use in the classrooms. Upon the request of the parents and guardians, the material shall be made available for their review.

Each of the items stated in the code shall be provided as shown below:

1. Curriculum: See attached New Jersey Student Learning Standards for course

objectives.

2. Instructional Materials List: See attached listing of instructional materials which are also

available for parental review. Call the building Principal.

3. Copy of Curriculum: Contact the Assistant Superintendent.

PROVISION FOR EXCUSING STUDENTS

Section (i) of the code states the following:

Any child whose parent or guardian presents to the school principal a signed statement that any part of the instructions in health, family life education or sex education is in conflict with his conscience, or sincerely held moral or religious beliefs shall be excused from the portion of the course where such instruction is being given and no penalties as to credit or graduation shall result in therefrom.(N.J.S.A. 18A:35-4.7.)

Parents or guardians who wish to excuse their child(ren) from any part of the health, family life, or sex education program should contact their building principal. An excuse form will be provided for parental signature. Any questions concerning the Health Program should be directed to the building principal.

MORRIS HILLS REGIONAL DISTRICT

FAMILY LIFE EDUCATION PROGRAM

INSTRUCTIONAL MATERIALS LIST 2024-2025

Below is a list of all materials used within our Health program. These **may be used** at either high school or both.

I. AUDIO VISUAL MATERIALS

GRADE 9 Human Sexuality Drugs/Alcohol/Tobacco Bullying/Nutrition	GRADE 10 Drivers Education	GRADE 11 CPR/AED/First Aid Mental Health - Healthy Relationships	GRADE 12 Human Sexuality Health Relationships
Videos: Body Story: Teen Dreams Odd Girl Out In the Womb Juno Girl Positive Speak Cyberbully Bully A Girl Like Her Radio Unguarded: Chris Heeren Story Chasing the Dragon Hoosiers Turning Red	Videos: • 5th Quarter • Just a Kid From Fall River - Bullying/Self Esteem, Drugs • I Am Only 17 • Sharing Network: Organ Donation • YouTube clips addressing driving skills and situations • Cars • DUI, Dead in 5 Seconds • Shattered Spirits • Smashed Programs: NJMVC DARTTS	Videos: I am Sam The Other Sister Pay It Forward Inside Out Cruella Front of the Class Radio Concussion It's Kind of a Funny Story Programs: SOS - Suicide Prevention Program EMS Safety - Instructional Video	Video: Daddy 17 Again The Pregnancy Pact The Miracle of Life Nine Months that Made You Fed Up Programs: Lifelines - Suicide Prevention Program
Programs: Lifelines - Suicide Prevention Program			

II. PUBLICATIONS

Text - Prentice Hall - Health New Jersey State Driving Manual EMS Safety Workbook

III. PRESENTATIONS; ORGANIZATIONS

Organizations such as Morris Cares and Jersey Battered Woman may present to classes as available.

Current periodicals such as local, area, and national newspapers and magazines will also be used for current events of related topics.

MORRIS HILLS REGIONAL DISTRICT

48 Knoll Drive Rockaway, New Jersey 07866-4088 Fax: (973)627-6588

www.mhrd.org

Morris Hills High School 520 W. Main Street Rockaway, NJ (973)663-2309 Morris Knolls High School 50 Knoll Drive Rockaway, NJ (973)664-2209

Exclusion Form

Grade 12 Health Curriculum Grade 11 Health Curriculum Grade 10 Health Curriculum Grade 9 Health Curriculum

Teacher's Signature	 Date		
Parent's Signature	Date	Principal's Signature	Date
I, therefore, request my chil	d	be excused from in	struction in this area
my conscience and/or my n		s:	is in conflict with

Twenty-first century themes and skills integrated into all content standards areas (N.J.A.C. 6A:8-1.1(a)3).

"Twenty-first century themes and skills" means themes such as global awareness; financial, economic, business, and entrepreneurial literacy; civic literacy; health literacy; learning and innovation skills, including creativity and innovation, critical thinking and problem solving, and communication and collaboration; information, media, and technology skills; and life and career skills, including flexibility and adaptability, initiative and self-direction, social and cross-cultural skills, productivity and accountability, and leadership and responsibility.

The 2020 NJSLS-CHPE continue to incorporate New Jersey Legislative Statutes related to the health and well-being of students in New Jersey public schools, including those enacted from 2019:

Consent (N.J.S.A. 18A:35)

Requires age-appropriate instruction in grades six through 12 on the law and meaning of consent for physical contact and sexual activity as part of the district's implementation of the New Jersey Student Learning Standards in Comprehensive Health and Physical Education. The instruction shall be designed to increase discussion and awareness that consent is required before physical contact or sexual activity, as well as the social, emotional, and relational impact surrounding sexuality, the right to say no to unwanted physical contact or sexual activity, and the virtues of respecting the right of others to say no.

Mental Health (N.J.S.A. 18A:35-4.39)

A school district shall ensure that its health education programs for students in grades kindergarten through 12 recognize the multiple dimensions of health by including mental health and the relation of physical and mental health so as to enhance student understanding, attitudes, and behaviors that promote health, well-being, and human dignity. The instruction in mental health shall be adapted to the age and understanding of the students and shall be incorporated as part of the district's implementation of the New Jersey Student Learning Standards in Comprehensive Health and Physical Education. The instruction shall include, as appropriate, information on substance abuse provided pursuant to the implementation of these standards and to section 1 of P.L.2016, c.46 (C.18A:40A-2.1). The State Board of Education shall review and update the New Jersey Student Learning Standards in Comprehensive Health and Physical Education to ensure the incorporation of instruction in mental health in an appropriate place in the curriculum for students in grades kindergarten through 12. In its review, the State board shall consult with mental health experts including, but not limited to, representatives from the Division of Mental Health and Addiction Services in the Department of Human Services.

New Jersey Safe Haven Infant Protection Act (N.J.S.A. 18A:35-4.40 & 18A:35-4.41)

The Department of Education shall review the New Jersey Student Learning Standards for Comprehensive Health and Physical Education to ensure that information on the provisions of the "New Jersey Safe Haven Infant Protection Act," P.L.2000, c.58 (C.30:4C-15.5 et seq.) shall be included therein to public school students in grades 9 through 12.

Sexting (N.J.S.A. 18A:35-4.33)

A Board of education shall include instruction on the social, emotional, and legal consequences of distributing and soliciting sexually explicit images through electronic means once during middle school in an appropriate place in the curriculum as part as of the school district's implementation of the New Jersey Student Learning Standards in Comprehensive Health and Physical Education. The Commissioner of Education shall provide school districts with age-appropriate sample learning activities and resources designed to implement this requirement.

Sexual abuse and assault awareness and prevention education (N.J.S.A 18A:35-4.5a.)

Requires each school district shall incorporate age-appropriate sexual abuse and assault awareness and prevention education in grades preschool through 12 as part of the district's implementation of the New Jersey Student Learning Standards in Comprehensive Health and Physical Education. The Commissioner of Education, in consultation with the Department of Children and Families, the New Jersey Coalition Against Sexual Assault, Prevent Child Abuse New Jersey, the New Jersey Children's Alliance, and other entities with relevant expertise, shall provide school districts with age-appropriate sample learning activities and resources.

New Jersey Legislative Statutes Summary (Legislation enacted prior to 2014)

Accident and Fire Prevention (N.J.S.A. 18A:6-2)

Requires instruction in accident and fire prevention. Regular courses of instruction in accident prevention and fire prevention shall be given in every public and private school in this state. Instruction shall be adapted to the understanding of students at different grade levels.

Breast Self-Examination (N.J.S.A. 18A:35-5.4)

Requires instruction on breast self-examination. Each board of education which operates an educational program for students in grades 7 through 12 shall offer instruction in breast self-examination. The instruction shall take place as part of the district's implementation of the Core Curriculum Content Standards in Comprehensive Health and Physical Education, and the comprehensive health and physical education curriculum framework shall provide school districts with sample activities that may be used to support implementation of the instructional requirement.

Bullying Prevention Programs (N.J.S.A. 18A:37-17)

Requires the establishment of bullying prevention programs. Schools and school districts are encouraged to establish bullying prevention programs and other initiatives involving school staff, students, administrators, volunteers, parents, law enforcement, and community members. To the extent funds are appropriated for these purposes, a school district shall: (1) provide training on the school district's harassment, intimidation, or bullying policies to school employees and volunteers who have significant contact with students; and (2) develop a process for discussing the district's harassment, intimidation, or bullying policy with students. Information regarding the school district policy against harassment, intimidation, or bullying shall be incorporated into a school's employee training program.

CPR/ AED Instruction (N.J.S.A. 18A:35-4.28-4.29)

Requires public high schools to provide instruction in cardiopulmonary resuscitation and the use of an automated external defibrillator to each student prior to graduation.

Cancer Awareness (N.J.S.A. 18A:40-33)

Requires the development of a school program on cancer awareness.

Dating Violence Education (N.J.S.A. 18A: 35-4.23a)

Requires instruction regarding dating violence in grades 7 through 12. Each school district shall incorporate dating violence education that is age appropriate into the health education curriculum as part of the district's implementation of the Core Curriculum Content Standards in Comprehensive Health and Physical Education for students in grades 7 through 12. The dating violence education shall include, but not be limited to, information on the definition of dating violence, recognizing dating violence warning signs, and the characteristics of healthy relationships.

Domestic Violence Education (N.J.S.A. 18A:35-4.23)

Allows instruction on problems related to domestic violence and child abuse. A board of education may include instruction on the problems of domestic violence and child abuse in an appropriate place in the curriculum of elementary school, middle school, and high school pupils. The instruction shall enable pupils to understand the psychology and dynamics of family violence, dating violence, and child abuse; the relationship of alcohol and drug use to such violence and abuse; and the relationship of animal cruelty to such violence and abuse; and to learn methods of nonviolent problem-solving.

Drugs, Alcohol, Tobacco, Controlled Dangerous Substances, and Anabolic Steroids (N.J.S.A. 18A:40A-1)

Requires instructional programs on drugs, alcohol, anabolic steroids, tobacco, and controlled dangerous substances and the development of curriculum guidelines. Instructional programs on the nature of drugs, alcohol, anabolic steroids, tobacco, and controlled dangerous substances, as defined in section 2 of P.L.1970, c.226 (C.24:21-2), and their physiological, psychological, sociological, and legal effects on the individual, the family, and society shall be taught in each public school and in each grade from kindergarten through 12 in a manner adapted to the age and understanding of the pupils. The programs shall be based upon the curriculum guidelines established by the Commissioner of Education and shall be included in the curriculum for each grade in such a manner as to provide a thorough and comprehensive treatment of the subject.

Gang Violence Prevention (18A:35-4.26)

Requires instruction in gang violence prevention for elementary school students. Each board of education that operates an educational program for elementary school students shall offer instruction in gang violence prevention and in ways to avoid membership in gangs. The instruction shall take place as part of the district's implementation of the Core Curriculum Content Standards in Comprehensive Health and Physical Education, and the comprehensive health and physical education curriculum framework shall provide school districts with sample materials that may be used to support implementation of the instructional requirement.

Lyme Disease Prevention (N.J.S.A. 18A, 35-5.1)

Requires the development of Lyme disease curriculum guidelines. The guidelines shall emphasize disease prevention and sensitivity for victims of the disease. The Commissioner of Education shall periodically review and update the guidelines to ensure that the curriculum reflects the most current information available.

Organ Donation (N.J.S.A. 18A:7F-4.3)

Requires information relative to organ donation to be given to students in grades 9 through 12. The goals of the instruction shall be to:

- Emphasize the benefits of organ and tissue donation to the health and well-being of society generally and to individuals whose lives are saved by organ and tissue donations, so that students will be motivated to make an affirmative decision to register as donors when they become adults.
- Fully address myths and misunderstandings regarding organ and tissue donation.
- Explain the options available to adults, including the option of designating a decision-maker to make the donation decision on one's behalf.
- Instill an understanding of the consequences when an individual does not make a decision to become an organ donor and does not register or otherwise record a designated decision-maker.

The instruction shall inform students that, beginning five years from the date of enactment of P.L.2008, c.48 (C.26:6-66 et al.), the New Jersey Motor Vehicle Commission will not issue or renew a New Jersey driver's license or personal identification card unless a prospective or renewing licensee or card holder makes an acknowledgement regarding the donor decision pursuant to section 8 of P.L.2008, c.48 (C.39:3-12.4).

Sexual Assault Prevention (N.J.S.A. 18A:35-4.3)

Requires the development of a sexual assault prevention education program. The Department of Education in consultation with the advisory committee shall develop and establish guidelines for the teaching of sexual assault prevention techniques for utilization by local school districts in the establishment of a sexual assault prevention education program. Such program shall be adapted to the age and understanding of the pupils and shall be emphasized in appropriate places of the curriculum sufficiently for a full and adequate treatment of the subject.

Stress Abstinence (N.J.S.A. 18A:35-4.19-20)

Also known as the "AIDS Prevention Act of 1999," requires sex education programs to stress abstinence. Any sex education that is given as part of any planned course, curriculum, or other instructional program and that is intended to impart information or promote discussion or understanding in regard to human sexual behavior, sexual feelings and sexual values, human sexuality and reproduction, pregnancy avoidance or termination, HIV infection or sexually transmitted diseases, regardless of whether such instruction is described as, or incorporated into, a description of "sex education," "family life education," "family health education," "health education," "family living," "health," "self-esteem," or any other course, curriculum program, or goal of education, and any materials including, but not limited, to handouts, speakers, notes, or audiovisuals presented on school property concerning methods for the prevention of acquired immune deficiency syndrome (HIV/AIDS), other sexually transmitted diseases, and of avoiding pregnancy, shall stress that abstinence from sexual activity is the only completely reliable means of eliminating the sexual transmission of HIV/AIDS and other sexually transmitted diseases and of avoiding pregnancy.

Suicide Prevention (N.J.S.A. 18A: 6-111)

Requires instruction in suicide prevention in public schools. Instruction in suicide prevention shall be provided as part of any continuing education that public-school teaching staff members must complete to maintain their certification; and inclusion of suicide prevention awareness shall be included in the Core Curriculum Content Standards in Comprehensive Health and Physical Education.

Time devoted to course in Health, Safety and Physical Education (N.J.S.A. 18A: 35-5)

N.J.S.A. 18A: 35-5 requires each board of education shall conduct as a part of the instruction in the public schools' courses in health, safety and physical education, which courses shall be adapted to the ages and capabilities of the pupils in the several grades and departments. To promote the aims of these courses any additional requirements or rules as to medical inspection of school children may be imposed. Every pupil, except kindergarten pupils, attending the public schools, insofar as he is physically fit and capable of doing so, as determined by the medical inspector, shall take such courses, which shall be a part of the curriculum prescribed for the several grades, and the conduct and attainment of the pupils shall be marked as in other courses or subjects, and the standing of the pupil in connection therewith shall form a part of the requirements for promotion or graduation (N.J.S.A. 18A: 35-7). The time devoted to such courses shall aggregate at least two and one-half hours in each school week, or proportionately less when holidays fall within the week (N.J.S.A. 18A: 35-8).

Legislation that can apply to all content areas

Amistad Law N.J.S.A. 18A 52:16A-88

Every board of education shall incorporate the information regarding the contributions of African Americans to our country in an appropriate place in the curriculum of elementary and secondary school students.

Holocaust Law (N.J.S.A. 18A:35-28)

Every board of education shall include instruction on the Holocaust and genocides in an appropriate place in the curriculum of all elementary and secondary school pupils. The instruction shall further emphasize the personal responsibility that each citizen bears to fight racism and hatred whenever and wherever it happens.

LGBT and Disabilities Law (N.J.S.A. 18A:35-4.35)

A board of education shall include instruction on the political, economic, and social contributions of persons with disabilities and lesbian, gay, bisexual, and transgender people, in an appropriate place in the curriculum of middle school and high school students as part of the district's implementation of the New Jersey Student Learning Standards. N.J.S.A.18A:35-4.36 A board of education shall have policies and procedures in place pertaining to the selection of instructional materials to implement the requirements of N.J.S.A. 18A:35-4.35.



2020 New Jersey Student Learning Standards – Comprehensive Health and Physical Education 2.1 Personal and Mental Health by the End of Grade 12

Personal Growth and Development

Core Idea	Performance Expectations
The decisions one makes can influence an individual's growth and development in all dimensions of wellness.	 2.1.12.PGD.1: Develop a health care plan that includes practices and strategies designed to support an active lifestyle, attend to mental health, and foster a healthy, social and emotional life. 2.1.12.PGD.2: Predict how healthy and unhealthy behaviors can affect brain development and impact physical, social and emotional stages of early adulthood.

Pregnancy and Parenting

Core Idea	Performance Expectations
There are a variety of strategies that individuals can use to prevent pregnancy and sexually transmitted infections.	 2.1.12.PP.1: Compare and contrast the advantages and disadvantages of contraceptive and disease prevention methods (e.g., abstinence, condoms, emergency contraception, dental dams). 2.1.12.PP.2: Develop a plan to eliminate or reduce risk for unintended pregnancy and/or STIs (including HIV) and identify ways to overcome potential barriers to prevention. 2.1.12.PP.3: Identify trusted adults, including family members, caregivers, school staff, and health care professionals to ask questions and discuss pregnancy and other health topics.

Core Idea	Performance Expectations
There are many decisions to be made related to pregnancy and childbirth that will have short-and long-term impacts.	 2.1.12.PP.4: List the major milestones of each trimester of fetal development utilizing medically accurate information. 2.1.12.PP.5: Analyze factors that can impact the health of a baby (e.g., fetal alcohol syndrome, sudden infant death syndrome, low birth weight, premature birth, genetics). 2.1.12.PP.6: Analyze personal and societal factors that can influence decisions about pregnancy options, including parenting, abortion, safe haven, and adoption. 2.1.12.PP.7: Analyze the emotional, social, physical, and financial effects of being a teen of young adult parent. 2.1.12.PP.8: Assess the skills needed to be an effective parent. 2.1.12.PP.9: Evaluate parenting strategies used at various stages of child development based on reliable sources of information.

Emotional Health

Core Idea	Performance Expectations
Self-confidence, personal traits, stress, limitations, and strengths impact the mental and emotional development of an individual.	 2.1.12.EH.1: Recognize one's personal traits, strengths, and limitations and identify how to develop skills to support a healthy lifestyle. 2.1.12.EH.2: Analyze factors that influence the emotional and social impact of mental health illness on the family.
Healthy individuals demonstrate the ability to prevent and resolve interpersonal conflicts in constructive ways.	 2.1.12.EH.3: Describe strategies to appropriately respond to stressors in a variety of situations (e.g., academics, relationships, shootings, death, car accidents, illness). 2.1.12.EH.4: Analyze and adapt mental and emotional health messages and communication techniques to peers and other specific target audience (e.g., dimensions of health).

Social and Sexual Health

Core Idea	Performance Expectations
How individuals feel about themselves, their identity, and sexual orientation can be positively or negatively impacted by a wide variety of factors.	 2.1.12.SSH.1: Analyze the influences of peers, family, media, social norms and culture on the expression of gender, sexual orientation, and identity. 2.1.12.SSH.2: Advocate for school and community policies and programs that promote dignity and respect for people of all genders, gender expressions, gender identities, and sexual orientations. 2.1.12.SSH.3: Analyze current social issues affecting perceptions of sexuality, culture, ethnicity, disability status and make recommendations to address those issues.
Healthy individuals establish and maintain healthy relationships by utilizing positive communication and social skills to interact effectively with others.	 2.1.12.SSH.4: Demonstrate strategies to prevent, manage, or resolve interpersonal conflicts without harming self or others (defining and understanding the laws of consent and dating violence). 2.1.12.SSH.5: Demonstrate ways to show respect for the boundaries of others as they relate to intimacy and sexual behavior. 2.1.12.SSH.6: Analyze the benefits of abstinence from sexual activity using reliable resources. 2.1.12.SSH.7: Analyze factors that influence the choices, and effectiveness of safer sex methods and contraception, including risk-reduction and risk-elimination strategies.
There are many factors that influence how we feel about ourselves and the decisions that we make.	 2.1.12.SSH.8: Describe the human sexual response cycle, including the role of hormones and pleasure. 2.1.12.SSH.9: Analyze the personal and societal factors that could keep someone from leaving an unhealthy relationship.
There are state and federal laws which provide access to sexual health care services for minors and to protect minors from unhealthy sexual situations.	2.1.12.SSH.10: Analyze the state and federal laws related to minors' ability to give and receive sexual consent and their association with sexually explicit media.

Community Health Services and Support

Core Idea	Performance Expectations
Healthy individuals demonstrate the ability to identify who, when where and/or how to seek help for oneself or others.	 2.1.12.CHSS.1: Analyze the opportunities available at home, in school, and in the community to support the mental health of oneself or an individual. 2.1.12.CHSS.2: Develop an advocacy plan for a health issue and share this information with others who can benefit. 2.1.12. CHSS.3: Explain the purpose of the Safe Haven Law and identify locations in your community. 2.1.12.CHSS.4: Identify medically accurate sources of information and local services that provide contraceptive methods (including emergency contraception and condoms) and pregnancy options (including parenting, abortion, safe haven, adoption, and prenatal care).
Affordability and accessibility of health care impacts the prevention, early detection, and treatment of health conditions.	 2.1.12.CHSS.5: Analyze a variety of health products and services based on cost, availability, accessibility, benefits and accreditation in the home, school, and in the community (e.g., suicide prevention, breast/testicular self-examination, CPR/AED, life skills training, menstrual products). 2.1.12.CHSS.6: Evaluate the validity of health information, resources, services, in school, home and in the community.
Local, state, and global advocacy organizations provide accurate and reliable resources and strategies designed to address common health and social issues.	 2.1.12.CHSS.7: Describe how individuals and local, state, and global advocacy organizations can collaborate to address common local and global health and social issues (e.g., hunger, clean water, organ/tissue donation). 2.1.12.CHSS.8: Investigate how local, state, and global agencies are addressing health issues caused by climate change and share this information in an appropriate setting.
Knowledge of and access to resources is beneficial in providing support to individuals and families dealing with difficult situations.	2.1.12.CHSS.9: Develop an action plan to assist individuals who have feelings of sadness, anxiety stress, trauma, or depression and share this information with individuals who will benefit.

2020 New Jersey Student Learning Standards – Comprehensive Health and Physical Education 2.3 Safety by the End of Grade 12

Personal Safety

Core Idea	Performance Expectations
Consideration of the short- and long-term impact of decisions can assist individuals in determining whether a choice is likely to result in healthy or unhealthy consequences.	 2.3.12.PS.1: Apply a thoughtful decision-making process to evaluate situations and influences that could lead to healthy or unhealthy consequences (e.g., peers, media). 2.3.12.PS.2: Analyze the short- and long-term consequences of sharing sexually explicit images (sexting) or messages with individuals or posting online. 2.3.12.PS.3: Summarize New Jersey motor vehicle laws and regulations, Safe Stops, and determine their impact on health and safety (e.g., organ/tissue donation, traffic safety, avoid driving distractors, seatbelt use, the use of hand-held devices). 2.3.12.PS.4: Investigate the relationship between alcohol, drug use, and motor vehicle crashes and analyze the short- and long-term consequences of these actions.
State and federal laws are designed to protect individuals from abuse and may help to break the cycle of abuse.	 2.3.12.PS.5: Identify the state and federal laws related to intimate partner and sexual violence (e.g., sexual harassment, sexual abuse, sexual assault, domestic violence). 2.3.12.PS.6: Describe the types of abuse (e.g., physical, emotional, psychological, financial, sexual) and the cycle of violence as it relates to sexual abuse, domestic violence, dating violence, and gender-based violence. 2.3.12.PS.7: Analyze recruitment tactics that sex traffickers/exploiters use to exploit vulnerabilities and recruit youth.
Technology increases the capacity of individuals to communicate in multiple and diverse ways, which can complicate interpersonal relationships and self-esteem.	 2.3.12.PS.8: Develop strategies to communicate effectively, safely, and with empathy when using digital devices in a variety of situations (e.g., cyberbullying, sexting). 2.3.12.PS.9: Evaluate strategies to use social media safely, legally, and respectfully. 2.3.12.PS.10: Analyze the short- and long-term consequences of sharing sexually explicit images (sexting) or messages with individuals or posting online.

Health Conditions, Diseases and Medicines

Core Idea	Performance Expectations
Health-enhancing behaviors can contribute to an individual reducing and avoiding health risks.	• 2.3.12.HCDM.1: Develop a health care plan to help prevent and treat diseases and health conditions one may encounter (e.g., breast/testicular exams, Pap smear, regular STIs testing, HPV vaccine).
Medicines treat or relieve diseases or pain and are prescribed by a physician or accessed over the counter.	 2.3.12.HCDM.2: Provide examples of how drugs and medication mimic or block the action of certain cells in the body, and how abusing drugs can affect the human body. 2.3.12.HCDM.3: Evaluate the benefits of biomedical approaches to prevent STIs (e.g., hepatitis B vaccine, HPV vaccine) and HIV (e.g., PrEP, PEP).
Public health policies are created to influence health promotion and disease prevention and can have global impact.	 2.3.12.HCDM.4: Evaluate emerging methods to diagnose and treat diseases and health conditions that are common in young adults in the United States and in other countries (e.g., hepatitis, stroke, heart attacks, cancer,). 2.3.12.HCDM.5: Analyze local, state, and international public health efforts to prevent and control diseases and health conditions (e.g., vaccinations, immunizations, medical exams, gene editing, artificial organ systems, prosthesis).
Mental health conditions affect individuals, family members, and communities.	2.3.12.HCDM.6: Analyze and discuss the evidence of the emotional and social impact of mental health illness on families, communities, and states (e.g., depression, anxiety, Alzheimer's, panic disorders, eating disorders, impulse disorders).

Alcohol, Tobacco and other Drugs

Core Idea	Performance Expectations
Long-term and short-term consequences of risky behavior associated with substance use and abuse can be damaging physically, emotionally, socially, and financially to oneself, family members and others.	 2.3.12.ATD.1: Examine the influences of drug use and misuse on an individual's social, emotional and mental wellness. 2.3.12.ATD.2: Compare and contrast the incidence and impact of commonly abused substances on individuals and communities in the United States and other countries (e.g., tobacco, e-cigarettes, vaping products, alcohol, marijuana products, inhalants, anabolic steroids, other drugs). 2.3.12.ATD.3: Explore the relationship between individuals who abuse alcohol, tobacco, and other drugs with an increase in intentional and unintentional health-risk behaviors.

Dependency, Substances Disorder and Treatment

Core Idea	Performance Expectations
Alcohol and drug dependency can impact the social, emotional, and financial well-being of individuals, families, and communities.	 2.3.12.DSDT.1: Correlate duration of drug use and abuse to the incidence of drug-related deaths, injuries, illness, and academic performance. 2.3.12.DSDT.2: Analyze personal choices and behaviors related to substance use and misuse to determine if they align with personal values and beliefs. 2.3.12.DSDT.3: Examine the drug laws, and regulations of the State of New Jersey, other states and the affects; healthy and unhealthy on individuals, families, schools, and communities (e.g., vaping products, e-cigarettes, cannabis and CBD products, opioids). 2.3.12.DSDT.4: Utilize peer support and societal norms to formulate a health-enhancing message to remain drug free.
Substance abuse, dependency, and substance disorder treatment facilities and treatment methods require long-term or repeated care for recovery.	 2.3.12.DSDT.5: Evaluate the effectiveness of various strategies and skills that support an individual's ability to stop misusing and abusing drugs and remain drug free (counseling, peer coaching, professional peer support group, and family counseling and support).