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## School Health Education

## Classroom Teacher Interview

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#### I.COURSE ORGANIZATION AND CONTENT

Let me define some terms so that we'll be talking about the same things. When I say "<u>course</u>," I mean an entire set of classes that a group of students attend throughout a school term. When I use the term "<u>class</u> <u>section</u>," I mean one group of students that meets for a particular course. Do you have any questions about how I'll be using these terms? **IF NEEDED, REVIEW DEFINITIONS**.

1.HANDCARD #1. Look at <u>Handcard #1</u>. The last time you taught (READ NAME OF COURSE), was the course <u>mainly</u> about <u>health education topics</u>, such as these, or about <u>another subject</u>? CHECK THE <u>ONE</u> BEST ANSWER. IF ANOTHER SUBJECT (BOX 2) IS SELECTED, ASK: What subject was your course about? RECORD RESPONSE.

1 Health education topics

2 Another subject (SPECIFY):

2.Mainly what <u>grade</u> were the students who took your course? CHECK <u>ALL</u> THAT APPLY (1-7). RECORD (8) OTHER.

- 1 **□**6th
- 2 **□**7th
- 3 **□**8th
- 4 **□**9th
- 5 🗆 10th
- 6 🛛 1 1 th
- 7 🛛 12th

8 DOther (SPECIFY):

3.How many weeks did the course last? **RECORD NUMBER OF WEEKS.** 

Weeks:\_\_\_\_\_

4. How many times per week did the course meet? CHECK THE ONE BEST ANSWER (1-6).

- 1 □One day
- 2 □Two days
- 3 Two days one week/three days the next (alternating)
- 4 □Three days
- 5 
  Four days
- 6 □Five days

5. How many minutes were in one class period? **RECORD NUMBER OF MINUTES.** 

Minutes:\_\_\_\_\_

School Health Education--Classroom Teacher

6.Did your course include <u>all boys</u> or <u>all girls</u>, OR did you teach boys and girls together in <u>coed</u> classes? CHECK <u>ALL</u> THAT APPLY (1-3), SINCE RESPONDENT MAY HAVE TAUGHT MORE THAN ONE CLASS SECTION.

1 □All boys

2 
All girls

3 Coed

7.The last time you taught your course, did you assess your students' <u>needs and interests</u> at any time, through methods such as class discussions, written questionnaires, or a suggestion or question box? IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK <u>ALL</u> THAT APPLY (2-4). RECORD (5) OTHER.

1 **□**No

- 2 Discussion with class
- 3 **W**ritten questionnaire
- 4 Suggestion or question box
- 5 Other (SPECIFY):

8.HANDCARD #2. Look at <u>Handcard #2</u>. Did you use <u>written</u> curricular materials such as these for your course? IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, SAY: Please tell me the <u>titles</u>, if applicable, and the approximate dates they were developed. (NOTE: MATERIALS SUCH AS THOSE THAT ARE TEACHER-DEVELOPED MAY NOT HAVE A FORMAL TITLE.) CHECK <u>ALL</u> THAT APPLY (2-9). RECORD THE TITLES AND DATES FOR EACH. IF TEACHER DID <u>NOT</u> BRING WRITTEN MATERIALS FOR INTERVIEW, SAY: If you don't have the materials with you, just tell me the titles and dates you can remember.

 $1 \square$  No written curricular materials

2 □Student textbook: Date:

3 □Teacher's Guide for student textbook: Date:

4 □State curriculum/guidelines/framework: Date:

5 District curriculum/guidelines/framework: Date:

6 □School curriculum/guidelines/framework Date:

7 Dother state, district, or school materials: Date:

8 Teacher-developed lesson plans or other materials: Date:

9 □Other commercial materials: Date: 9.HANDCARD #1. Looking at <u>Handcard #1</u> again, please tell me the <u>major topics, by number</u>, that you taught in your course. By major topics, I mean those on which you spent the <u>majority of your class periods</u>. THEN ASK: Approximately <u>how many class periods</u> did you spend on <u>each major topics</u>? RECORD THE <u>NUMBER</u> (2-23) OF EACH MAJOR TOPIC COVERED IN COLUMN 1. RECORD THE <u>NUMBER OF CLASS PERIODS</u> FOR EACH TOPIC IN COLUMN 2. THEN ASK: Did you cover any other topics that aren't listed? RECORD FOR (24) OTHER IN COLUMN 1 AND NUMBER OF CLASS PERIODS IN COLUMN 2.

(1) TOPICS NUMBER	(2) NUMBER OF CLASS PERIODS
24. Other topics ( <b>SPECIFY</b> ):	

10.In your course, did you use <u>teaching materials from community agencies or voluntary organizations</u>, such as the American Cancer Society or the American Heart Association? IF NO, CHECK
 BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK: <u>Whose</u> materials did you use?
 DO <u>NOT</u> READ LIST. CIRCLE <u>ALL</u> THAT APPLY. RECORD (7) OTHER.

1 **□**No

2 American Cancer Society

3 American Heart Association

4 American Lung Association

6 □Planned Parenthood

7  $\Box$ Other (SPECIFY):

11.Did you use any <u>audiovisual (AV) materials</u> to teach your course? IF NEEDED, SAY: Audiovisual materials include videotapes, films, slides, overheads, filmstrips, and cassette tapes. IF NO, CHECK BOX 1, AND SKIP TO Q13. IF YES, ASK: What's the subject and copyright date of your <u>newest</u> AV material? CHECK BOXES 2 AND 3, AND RECORD SUBJECT AND COPYRIGHT DATE.

1 DNo AV materials used--SKIP TO Q.13

2 □Subject: \_

3 Copyright date: \_\_\_\_\_

12.IF RESPONDENT DID <u>NOT</u> LIST HIV PREVENTION (TOPIC #15) IN Q.9, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF HIV PREVENTION <u>WAS</u> LISTED IN Q.9 AND <u>NOT</u> NAMED IN Q.11, ASK: What's the subject and copyright date of your newest AV material for teaching about HIV/AIDS? CHECK BOX 2 IF RESPONDENT DOES <u>NOT</u> HAVE HIV/AIDS AV MATERIALS. CHECK BOXES 3-4, AND WRITE IN SUBJECT AND COPYRIGHT DATE IF RESPONDENT <u>DOES</u> HAVE HIV/AIDS AV MATERIALS.

- 1  $\Box$  Did not teach HIV/AIDS
- 2 **D** No HIV/AIDS AV materials
- 3 □Subject: \_\_\_

4 Copyright date: \_\_\_\_\_

- 13.HANDCARD #3. Did you teach any students with <u>cognitive disabilities</u>? By cognitive disabilities, I mean students who are learning disabled, developmentally disabled, or behavior disordered. IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK: Looking at <u>Handcard #3</u>, did you modify your teaching or expectations in any of these ways? CHECK <u>ALL</u> THAT APPLY (2-14). THEN ASK: Did you use any other ways that aren't listed? RECORD (15) OTHER.
- 1  $\Box$ No students with special needs
- 2 □Preferred seating
- 3 Assigned note takers for classwork
- 4 **D**Assigned readers for classwork
- 5 Gave untimed tests or allowed extra time
- 6 Had someone read tests to students
- 7 **Gave modified tests**
- 8 Gave modified assignments
- 9 □Gave hard copies of overheads
- 10 Gave summaries of lectures
- 11 DUsed more "hands-on" activities
- 12 Gave vocabulary in advance
- 13 Teamed with academically strong students
- 14 DModified instructional content
- 15 Other (SPECIFY):

 14.HANDCARD #4. In your course, did you use any activities to highlight <u>different cultural values</u>? IF NO ACTIVITIES, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK: Looking at <u>Handcard #4</u>, did you use any of these types of activities? CHECK <u>ALL</u> THAT APPLY (2-8). THEN ASK: Did you use any other activities that aren't listed? RECORD (9) OTHER.

- 1  $\square$ No activities
- 2 Used books about different cultures
- 3 Used posters about different cultures
- 4 Discussed customs of different cultures
- 5 □Celebrated holidays or awareness days of different cultures
- 6 Displayed flags or other emblems from different cultures
- 7 Asked students to share their own cultural experiences related to class topics
- 8 Taught about the importance of respecting cultural differences
- 9 Other (**SPECIFY**):

Now I'm going to show you a series of eight lists of health education topics.

# 15.SHOW HANDCARD #5. Please take a moment to review <u>Handcard #5</u>. Did you teach anything on this list? IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK <u>ALL</u> THAT APPLY (2-9). THEN ASK: Did you cover anything else about accidents and unintentional injuries that's not listed? RECORD (10) OTHER.

- 1  $\square$ None of these
- 2 Always wearing <u>bicycle helmets</u>
- 3 Always wearing motorcycle helmets
- 4 Always wearing <u>seatbelts</u>
- 5 □Always wearing protective equipment for roller blades and skateboards, such as knee pads, elbow pads, or helmets
- 6 TRisks associated with <u>driving under the influence</u> of alcohol or other drugs
- 7 DStatistics on adolescent deaths and injuries from accidents and unintentional injuries
- 8 <u>Group attitudes</u> (social norms) toward <u>risk behaviors</u> related to accidents and unintentional injuries.
- 9 □<u>Actual amount</u> (true prevalence) of risk behavior related to accidents and unintentional injuries among adolescents and adults
- 10  $\Box$ Other (SPECIFY):

- 16.HANDCARD #6. Please take a moment to review <u>Handcard #6</u>. Did you teach anything on this list? IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK <u>ALL</u> THAT APPLY (2-10). THEN ASK: Did you cover anything else about intentional injuries and violence that's not listed? **RECORD** (11) OTHER.
- 1  $\square$ None of these
- 2 How to settle conflicts without physical fighting
- 3  $\Box$ How to handle <u>stress</u> in healthy ways
- 4  $\Box$ <u>Risks</u> associated with <u>physical fighting</u>
- 5 **<u>Risks</u>** associated with carrying and using <u>weapons</u>
- 6  $\Box$ <u>Risks</u> associated with <u>gang activities</u>
- 7  $\Box$ <u>What to do</u> if someone is thinking about <u>suicide</u>
- 8 DStatistics on adolescent deaths and injuries from violence and suicide
- 9 <u>Group attitudes</u> (social norms) toward <u>risk behaviors</u> related to intentional injuries and violence
- 10 Actual amount (true prevalence) of risk behavior related to intentional injuries and violence among adolescents and adults
- 11  $\Box$ Other (**SPECIFY**):

- 17.HANDCARD #7. Please take a moment to review <u>Handcard #7</u>. Did you teach anything on this list? IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK <u>ALL</u> THAT APPLY (2-14). THEN ASK: Did you cover anything else about tobacco use that's not listed? RECORD (15) OTHER.
- 1  $\square$ None of these
- 2 □<u>Short-term risks</u> associated with <u>cigarette smoking</u> (yellow teeth/bad breath, effects of tobacco on the body, effects on athletic performance)
- 3 □<u>Long-term risks</u> associated with <u>cigarette smoking</u> (heart disease, lung cancer, emphysema, premature wrinkling)
- 4 <u>Risks</u> associated with <u>sidestream/second-hand smoke</u> (lung cancer, other respiratory diseases)
- 5 Short-term risks associated with chewing tobacco or snuff (yellow teeth/bad breath, mouth/tongue sores)
- 6 <u>Long-term risks</u> associated with <u>chewing tobacco or snuff</u> (oral cancer, tooth loss)
- 7 DStatistics on death and disability associated with tobacco use
- 8 <u>Group attitudes</u> (social norms) toward <u>risk behaviors</u> related to tobacco use
- 9 Actual amount (true prevalence) of risk behavior related to tobacco use among adolescents and adults
- 10 School policies about tobacco use
- 11 □<u>Social influences</u> on tobacco use (wanting to be part of a group, feeling like an adult, advertising, media)
- 12 Healthy <u>alternatives</u> to smoking
- 13 Effects of tobacco-related disease on <u>health care costs</u>
- 14 Advocacy skills and social action concerning tobacco use
- 15  $\Box$ Other (**SPECIFY**):

- 18.HANDCARD #8. Please take a moment to review <u>Handcard #8</u>. Did you teach anything on this list? IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK <u>ALL</u> THAT APPLY (2-19). THEN ASK: Did you cover anything else about alcohol and other drug use that's not listed? RECORD (20) OTHER.
- 1  $\square$ None of these
- 2 □<u>Short-term risks</u> associated with <u>alcohol use</u> (DUI injuries, risks associated with heavy/binge drinking)
- 3 □<u>Long-term risks</u> associated with <u>alcohol use</u>, such as problems associated with addiction (health, family, career), alcohol-related diseases (cirrhosis, other liver damage), effects of having a DUI arrest record
- 4 Drink equivalents and blood alcohol content
- 5 □<u>Short-term risks</u> associated with <u>other drug use</u> (marijuana, cocaine, crack, and other illegal drugs, such as LSD, PCP, ecstasy, mushrooms, speed, ice, heroin, or pills)
- 6 <u>Long-term risks</u> associated with <u>other drug use</u>
- 7  $\Box$ <u>Classifications</u> of drugs and <u>how they work</u> in the body
- 8 **<u>Identification</u>** of drugs
- 9  $\Box$ <u>OTC</u> and <u>prescription</u> drugs
- 10 **Risks** associated with <u>illegal steroid</u> use
- 11  $\Box$  <u>Effects</u> of AOD on the <u>mind and body</u>
- 12 Effects of AOD on decision-making
- 13 Healthy <u>alternatives</u> to AOD use
- 14 DStatistics on death and disability from AOD use
- 15 Group attitudes (social norms) toward risk behaviors related to AOD use
- 16 Actual amount (true prevalence) of risk behavior related to AOD use among adolescents and adults
- 17 School policies on AOD use
- 18 DSocial influences on AOD use
- 19 
  Potential <u>legal consequences</u> of AOD use
- 20  $\Box$ Other (**SPECIFY**):

- 19.HANDCARD #9. Please take a moment to review <u>Handcard #9</u>. Did you teach anything on this list? IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK <u>ALL</u> THAT APPLY (2-16). THEN ASK: Did you cover anything else about sexual behavior that's not listed? RECORD (17) OTHER.
- 1  $\square$ None of these
- 2 Parts and <u>functions</u> of the <u>reproductive system</u>
- 3  $\Box$ <u>Reasons</u> for choosing sexual <u>abstinence</u>
- 4  $\Box$ <u>Contraceptive</u> methods to <u>prevent pregnancy</u>
- 5 How to prevent <u>sexually transmitted diseases</u> (STD)
- 6  $\Box$ <u>Signs</u> and <u>symptoms</u> of STD
- 7  $\Box$ How and where to get <u>STD testing</u>
- 8 **D**Social influences on sexual behavior
- 9 Dating and relationships
- 10 
  Marriage
- 11 
  <u>Risks</u> associated with having <u>multiple sexual partners</u>
- 12 Perception of risk for STD and pregnancy
- 13 DStatistics on adolescent pregnancies and STD rates
- 14 Group attitudes (social norms) toward risk behaviors related to sex
- 15 Actual amount (true prevalence) of risk behavior related to sex among adolescents and adults
- 16 Sexual orientation
- 17  $\Box$ Other (SPECIFY):

- 20. HANDCARD #10. Please take a moment to review <u>Handcard #10</u>. Did you teach anything on this list? IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK <u>ALL</u> THAT APPLY (2-18). THEN ASK: Did you cover anything else about HIV/AIDS that's not listed? RECORD (19) OTHER.
- 1  $\square$ None of these
- 2  $\square$ <u>Basic facts</u> about HIV/AIDS
- 3 How HIV is and is not transmitted
- 4 □How HIV affects the <u>immune system</u>
- 5 Disease progression of AIDS
- 6 Deedle-sharing behaviors that transmit HIV
- 7 Description **Sexual behaviors** that transmit HIV
- 8 **D**<u>Reasons</u> for choosing sexual <u>abstinence</u>
- 9  $\Box$ <u>Correct use of condoms</u>
- 10 Condom efficacy/how well condoms work
- 11 Influence of alcohol and other drugs on HIV risk behaviors
- 12 DStatistics on adolescent death and disability related to HIV/AIDS
- 13 Group attitudes (social norms) toward risk behaviors related to HIV
- 14 Actual amount (true prevalence) of risk behavior related to HIV among adolescents and adults
- 15 Information on HIV testing and counseling
- 16 Compassion and support for persons living with HIV/AIDS
- 17 Derceptions of risk for HIV/AIDS
- 18 DSocietal impact of HIV/AIDS
- 19 □Other (**SPECIFY**):

- 21.HANDCARD #11. Please take a moment to review <u>Handcard #11</u>. Did you teach anything on this list? IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK <u>ALL</u> THAT APPLY (2-20). THEN ASK: Did you cover anything else about nutrition and dietary behavior that's not listed? RECORD (21) OTHER.
- 1  $\square$ None of these
- 2 Dutrients and foods where they are found
- 3 <u>Vitamin-</u> and <u>mineral</u>-related <u>disorders</u>
- 4 **□**Four food groups
- 5 DFood Guide Pyramid
- 6  $\Box$ <u>Five a Day</u> (fruits and vegetables)
- 7 Dietary Guidelines for Americans
- 8  $\Box$ <u>Choosing</u> healthy <u>meals and snacks</u>
- 9 □<u>Label</u> reading
- 10 Preparing healthy meals and snacks
- 11 Healthy weight management
- 12 <u>Myths</u> associated with <u>diet supplements</u>
- 13 IRisks associated with crash diets/low-calorie diets
- 14 **Risks** associated with using <u>diet pills</u>
- 15 **Risks** associated with <u>purging</u> (vomiting, laxatives) for weight loss
- 16 Signs and symptoms of eating disorders (anorexia nervosa, bulimia nervosa)
- 17 **What to do if someone has an <u>eating disorder</u>**
- 18  $\Box$ <u>Overeating</u> as a response to <u>stress</u>
- 19 DSocial pressures for thinness, especially for female students
- 20 Statistics on death and disability associated with dietary causes
- 21  $\Box$ Other (**SPECIFY**):

- 22.HANDCARD #12. Please take a moment to review <u>Handcard #12</u>. Did you teach anything on this list? IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK <u>ALL</u> THAT APPLY (2-16). THEN ASK: Did you cover anything else about physical activity that's not listed? RECORD (17) OTHER.
- 1  $\square$ None of these
- 2 <u>Benefits</u> of regular participation in <u>aerobic activity</u>
- 3  $\Box$ <u>Benefits</u> of regular participation in <u>stretching exercises</u>
- 4 <u>Benefits</u> of regular participation in <u>strengthening exercises</u>
- 5 <u>Overcoming barriers</u> to regular <u>physical activity</u>
- 6 □Planning a <u>personal fitness</u> program
- 7 DHealthy weight management
- 8 Fitness <u>fads/gimmicks</u>
- 9 DReducing risk for certain diseases, such as cardiovascular disease or osteoporosis
- 10 How to measure one's own fitness
- 11 Statistics on death and disability associated with sedentary lifestyle
- 12 Community opportunities for physical activity
- 13 Dereventing injury during physical activity
- 14 DPhysiological benefits of exercise
- 15 Deschological benefits of exercise
- 16  $\Box$ <u>Social</u> benefits of exercise
- 17 Dother (**SPECIFY**):

23.Did you teach about <u>immunizations to protect against vaccine-preventable diseases</u>, such as polio, whooping cough, rubella, and hepatitis B? **CHECK THE ONE BEST ANSWER.** 

1 **□**No

2 □Yes

#### **II.SKILLS AND METHODS**

- 24.**HANDCARD #13.** Look at <u>Handcard #13</u>. Now, I'd like to ask about <u>skills for healthy behaviors</u>. This list includes <u>six</u> major types of skills. For each type of skill, please tell me whether you <u>taught about</u> these skills. **CHECK COLUMN 1 OR 2 FOR EACH SKILL.**
- THEN <u>ONLY</u> FOR THE SKILLS TEACHER TAUGHT, ASK: Did your students <u>practice</u> the skills as part of your course? By practice, I mean that your students participated in activities where the skills could be <u>used</u>, in or out of class. CHECK COLUMN 3 FOR <u>ALL</u> THAT APPLY. THEN ASK: Did you teach about or have students practice other health-related skills that aren't listed? RECORD (7) OTHER, AND CHECK COLUMNS 2 AND/OR 3.

SKILLS	(1) Teacher did not teach skill	(2) Teacher taught skill	(3) Students practiced skill
1Communication			
2Decision-making			
3Goal-setting			
4Non-violent conflict resolution			
5Resisting social pressures for unhealthy behaviors			
6Stress management			
70ther (SPECIFY):			

SKILLS

25.HANDCARD #14. Look at <u>Handcard #14</u>. Now I'd like to ask about the <u>teaching methods</u> you used to teach health education. Using the categories of <u>often</u>, <u>sometimes</u>, <u>rarely</u>, <u>or never</u>, written at the bottom of the handcard, how often would you say you used each of these methods the last time you taught your course? WORKING ACROSS THE GRID FOR <u>EACH</u> METHOD, ASK: How often did you use (READ METHOD) in your course? CHECK <u>ONE</u> COLUMN (1-4) TO SHOW HOW OFTEN RESPONDENT USED EACH METHOD (1-15). THEN ASK: Did you use other methods that aren't listed? RECORD (16) OTHER, AND CHECK APPROPRIATE COLUMNS (1-4).

TEACHING METHOD	(1) Often	(2) Sometimes	(3) Rarely	(4) Never
1Class (seat) work				
2 Lecture (teacher lecturing to class)				
3 Large group discussions				
4 Small group discussions				
5 Games				
6 Simulations				
7 Cooperative activities				
8 Arts (literature, stories)				
9 Role play				
10Physical practice				
11AV materials				
12Interactive video				
13 Computer-assisted instruction				
14 Contracts for behavior change				
15 Contests for behavior change				
16 Other (SPECIFY):				

26.HANDCARD #15. Look at <u>Handcard #15</u>. This is a list of health-related pledges that students sometimes make. In your course, did your students make any <u>written</u> or <u>verbal</u> pledges like these? IF NO, CHECK BOX AT TOP OF GRID, AND SKIP TO Q.28. IF YES, CHECK <u>ALL</u> THAT APPLY (1-13) IN COLUMN 1 AND/OR COLUMN 2. THEN ASK: Did your students make any other health-related pledges that aren't listed? RECORD (14) OTHER, AND CHECK COLUMNS 1 AND/OR 2.

□No pledges--SKIP TO Q.28

PLEDGE	Written	Verbal
1 Not to use alcohol or drugs during adolescence		
2 Not to use alcohol or drugs at a particular time, such as prom night		
3 Not to drink and drive or ride with a drinking driver		
4 Not to use tobacco		
5 Not to use weapons		
6 To settle conflicts without fighting		
7 To abstain from sexual intercourse during adolescence		
8 To practice safer sex		
9To practice healthful nutrition		
10 To exercise regularly		
11 To always wear a seatbelt		
12 To always wear a helmet while biking		
13 To support others in their decisions to practice healthful behaviors		
14 Other (SPECIFY):		

- 27.Did students do anything <u>in your class</u> to <u>reinforce</u> their pledges, such as discussing their progress or designing a partner or buddy system? IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, CHECK <u>ALL</u> THAT APPLY (2-3). THEN ASK: Did your students do any other things in your class to reinforce their pledges that aren't listed? RECORD (4) OTHER.
- 1 DNo reinforcement in class
- 2 Discussed their progress or adherence to their pledges
- 3 Designed a partner or buddy system to help support each other
- 4  $\Box$ Other (SPECIFY):

28.HANDCARD #16. Look at <u>Handcard #16</u>. Did you bring in <u>adults</u> such as these as <u>guest speakers</u> in your course? IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK: What types of adult guest speakers did you bring in? CHECK <u>ALL</u> THAT APPLY (2-11). THEN ASK: Did you use any other types of adult guest speakers that aren't listed? RECORD (12) OTHER.

- 1  $\Box$ None of these
- 2 Law enforcement official
- 3 🛛 Athlete
- 4 Derson living with HIV/AIDS
- 5 □Recovering AOD addict
- 6 **U**Victim of drunk driving
- 7 **□**Former drunk driver
- 8 □Family planning representative
- 9 □Minister/clergy
- 10 □Food service personnel
- 12 Other (**SPECIFY**):
- 29.Did you bring in <u>youth</u>, the same age or older than your students, as guest speakers or to conduct health-related activities in your course? CHECK THE <u>ONE</u> BEST ANSWER. IF NO, SKIP TO Q.31.

1 □No--**SKIP TO Q.31** 2 □Yes

30.Were any of the youth specifically <u>trained to be peer educators</u> by your school or by some other group or agency? **CHECK THE ONE BEST ANSWER (1-3).** 

1 **□**No

2 □Yes 3 □Don't know

#### **III.STUDENT ASSESSMENT AND ASSIGNMENTS**

- 31.HANDCARD #17. Now I'd like to ask about your students' grades and assignments. Did students receive a grade in your health education course? IF NO, CHECK BOX 1, AND GO ON TO NEXT QUESTION. IF YES, ASK: Looking at Handcard #17, did you use any of the criteria on this list for grading? CHECK <u>ALL</u> THAT APPLY (2-7). THEN ASK: Did you use any other criteria for grading that aren't listed? RECORD (8) OTHER.
- 1 □No grade
- $2 \square$  Attendance
- 3 Participation
- 4 🛛 Attitude
- 5 □Skills
- 6 Homework assignments
- 7 **W**ritten tests
- 8  $\Box$ Other (SPECIFY):

- 32.HANDCARD #18. Look at <u>Handcard #18</u>. As part of your course, did you give assignments to students to participate in health-related <u>community activities</u>, such as these? IF NO, CHECK BOX 1, AND GO TO NEXT QUESTION. IF YES, ASK: Which of these activities did you assign to students? CHECK <u>ALL</u> THAT APPLY (2-8). THEN ASK: Did you assign any other health-related community activities that aren't listed? RECORD (9) OTHER.
- 1  $\Box$ None of these
- 2 Perform voluntary work at a health department or other health-related community organization
  - 3 D Participate in a community-based health fair
  - $4 \square$  Conduct community member surveys
  - 5 □Gather information about a school or community health service (e.g., screenings, clinic services)
  - $6 \square$  Use a school or community health service (e.g., a hotline, a clinic)
  - 7 **U** Visit a pharmacy to compare prices on health products
  - $8 \square$  Identify potential injury sites at school or in the community
  - 9  $\Box$  Other (**SPECIFY**):

- 33.HANDCARD #19. Look at <u>Handcard #19</u>. As part of your course, did you give assignments to students to participate in health-related activities such as these <u>at home</u> or <u>with family members</u>? IF NO, CHECK BOX 1 AND GO TO NEXT QUESTION. IF YES, ASK: Which of these activities did you assign to students? CHECK <u>ALL</u> THAT APPLY (2-5). THEN ASK: Did you assign any other health-related activities to be done at home or with family members? RECORD (6) OTHER.
  - $1 \square$  None of these
  - $2 \square$  Conduct health survey of family members
  - 3 Share health information with family members
  - 4 Count medications in family medicine chest
  - $5 \square$  Identify products or hazards that pose a potential health threat
  - 6  $\Box$  Other (**SPECIFY**):

#### **IV.PARENTAL AND COMMUNITY SUPPORT**

34.HANDCARD #1. Next, I'd like to ask about any <u>response or reaction</u> to your health education course you've had from <u>parents of students in this school OR other community members</u>. Look at <u>Handcard #1</u> again. Please tell me the <u>topics by number</u>, if any, on which you <u>increased or expanded your coverage</u> because of parental or other community feedback. IF NO TOPICS, CHECK THE "NO TOPICS" BOX ABOVE THE GRID. IF YES, RECORD TOPIC NUMBERS FROM HANDCARD #1 IN COLUMN 1. FOR EACH TOPIC, ASK: Was the feedback on this topic from parents of students in your school, from other community members, or both? CHECK THE PARENT AND COMMUNITY COLUMNS (2-3) THAT APPLY.

#### **D**No topics

(1) TOPIC NUMBER	(2) Parent feedback	(3) Community feedback

35.HANDCARD #1. Still looking at <u>Handcard #1</u>, please tell me the <u>topic numbers</u>, if any, on which you <u>reduced or restricted your coverage</u> because of parental or other community feedback. IF NO TOPICS, CHECK THE "NO TOPICS" BOX ABOVE THE GRID. IF YES, RECORD TOPIC NUMBERS FROM HANDCARD #1 IN COLUMN 1. FOR EACH TOPIC, ASK: Was the feedback on this topic from parents of students in your school, from other community members, or both? CHECK THE PARENT AND COMMUNITY COLUMNS (2-3) THAT APPLY.

□No topics

(1) TOPIC NUMBER	(2) Parent feedback	(3) Community feedback

#### V.IMPROVING SCHOOL HEALTH EDUCATION

- 36.What would you like to DO, if anything, in health education that you have NOT been able to do? IF NOTHING, CHECK BOX 1, AND SKIP TO Q.38. IF WOULD LIKE TO DO, CHECK BOX 2, AND RECORD RESPONSE.
- 1 DNothing--SKIP TO Q.38 (Section VI)
- 2 Would like to do (**SPECIFY**):

37. What needs to happen so that you can do these things? **RECORD RESPONSE.** 

School Health Education--Classroom Teacher

#### **VI.PROFESSIONAL PREPARATION**

To end our interview, I'd like to ask you about your own professional background.

38.How many years, counting this year as a full year, have you been teaching health education? **RECORD NUMBER OF YEARS.** 

Years: \_\_\_\_\_

39.How many years, counting this year as a full year, have you been teaching health education <u>in this</u> <u>school</u>? **RECORD NUMBER OF YEARS.** 

Years: \_\_\_\_\_

40.Do you currently teach health education in <u>any other schools</u>? CHECK THE <u>ONE</u> BEST ANSWER. IF YES, ASK: How many other schools? RECORD NUMBER OF SCHOOLS FOR (2) YES.

1 **□**No

2 □Yes--NUMBER OF OTHER SCHOOLS: \_\_\_\_\_

41.I'd like to ask about your education background and certification or endorsement. WORK ACROSS COLUMNS 1-4 AT THE TOP OF THE GRID. ASK ABOUT EACH TYPE OF DEGREE OR CERTIFICATION/ENDORSEMENT <u>ONE AT A TIME</u>. ASK: Do you have (a college major, a college minor, a graduate degree or 30 graduate credits, state education agency certification or endorsement)? IF NO, CHECK "NO" OR "NOT AVAILABLE" IN CORRESPONDING COLUMNS. IF YES, ASK: In what area(s)? DO <u>NOT</u> READ LIST. CHECK <u>ALL</u> THAT APPLY IN EACH COLUMN. RECORD OTHER, AND CHECK CORRESPONDING COLUMNS.

DEGREE OR CERTIFICA- TION	(1) College major	(2) College minor	(3) Graduate degree or 30 graduate credits	(4) SEA certification or endorsement
	□ No	□ No	□ No	□ No □ Not available
Health education <u>AND</u> physical education				
Health education				
Physical education				
Exercise science				
Biology or other science				
Kinesiology				
Recreation				
Social studies				
Public health				
Administration				
Nursing				
Home economics				
Nutrition				
Counseling				
Other (SPECIFY):				

42.DO <u>NOT</u> ASK THIS QUESTION IF RESPONDENT HAS <u>NO</u> SEA CERTIFICATION/ENDORSEMENT (Q.41, COLUMN 4). GO ON TO NEXT QUESTION. OTHERWISE, ASK: What levels and grades are you certified or endorsed to teach? DO <u>NOT</u> READ LIST. SELECT THE <u>ONE</u> BEST ANSWER (1-3). RECORD (4) OTHER.

- 1 **□**K-12
- 2 Elementary school (SPECIFY GRADES):
- 3 Secondary school (SPECIFY GRADES):
- 4 Other (SPECIFY):

43.HANDCARD #1. Look at <u>Handcard #1</u> again. During the <u>past two years</u>, have you received four or <u>more hours</u> (at least a half-day) of in-service training on any of these topics? DO <u>NOT</u> READ LIST. IF NO, CHECK "NO" IN COLUMN 1 IN GRID. OTHERWISE, CHECK COLUMN 1 FOR <u>ALL</u> TOPICS THAT APPLY (2-23). NEXT, ASK: Which of these topics, if any, would you select as your top three priorities to receive in-service training? These could be different topics or some of the same ones you selected before. IF NO TOPICS, CHECK "NO" IN COLUMN 2 IN GRID. OTHERWISE, CHECK COLUMN 2 FOR <u>ALL</u> TOPICS THAT APPLY (2-23). THEN ASK: Are there other topics on which you've received training during the past two years or <u>would like to receive</u> in-service training? IF YES, RECORD (24) OTHER, AND CHECK COLUMNS 1 AND/OR 2.

ΤΟΡΙΟ	(1) Received training	(2) Would like training
$(\downarrow$ Numbered to match handcard)	□ No	□ No
2 Alcohol and other drug use prevention		
3 Community health		
4 Conflict resolution/Violence prevention		
5 Consumer health		
6 C.P.R.		
7 Death and dying		
8 Dental and oral health		
9 Dietary behaviors and nutrition		
10 Disease prevention and control		

ΤΟΡΙϹ	(1) Received training	(2) Would like training
11Emotional and mental health		
12Environmental health		
13First aid		
14Growth and development		
15HIV prevention		
16Human sexuality		
17Injury prevention and safety		
18Personal health		
19Physical activity and fitness		
20Pregnancy prevention		
21Sexually transmitted disease (STD) prevention		
22Suicide prevention		
23Tobacco use prevention		
24Other (SPECIFY TOPIC):		

44.To end our interview, I'd like your opinion about <u>teaching school health education today</u>. Would you recommend it to teachers starting out? Why or why not? **RECORD RESPONSE.** 

**AT END OF INTERVIEW, SAY:** Thank you very much for your time talking with me! Your answers will really help us get a feel for what schools are doing and what they need!

#### HEALTH EDUCATION TOPICS

1 None of these

2Alcohol and other drug use prevention

3Community health

4Conflict resolution/Violence prevention

5Consumer health

6C.P.R.

7Death and dying

8Dental and oral health

9Dietary behaviors and nutrition

10Disease prevention and control

11Emotional and mental health

12Environmental health

13First aid

14Growth and development

15HIV prevention

16Human sexuality

17Injury prevention and safety

18Personal health

19Physical activity and fitness

20Pregnancy prevention

21Sexually transmitted disease (STD) prevention

22Suicide prevention

23Tobacco use prevention

## WRITTEN HEALTH EDUCATION MATERIALS

1 None of these

2Student textbook

3Teacher's Guide for student textbook

- 4 State curriculum/guidelines/framework
- 5 District curriculum/guidelines/framework

6School curriculum/guidelines/framework

70ther state, district, or school materials

8Teacher-developed lesson plans or other materials

90ther commercial materials

### HANDCARD #3 MODIFICATIONS FOR STUDENTS WITH COGNITIVE DISABILITIES

- 1 No students with special needs
- 2 Preferred seating
- 3 Assigned note takers for classwork
- 4 Assigned readers for classwork
- 5 Gave untimed tests or allowed extra time
- 6 Had someone read tests to students
- 7 Gave modified tests
- 8 Gave modified assignments
- 9 Gave hard copies of overheads
- 10Gave summaries of lectures
- 11Used more "hands-on" activities
- 12Gave vocabulary in advance
- 13Teamed with academically strong students

14Modified instructional content

## HIGHLIGHTING CULTURAL VALUES

- 1 None of these
- 2 Used books about different cultures
- 3 Used posters about different cultures
- 4 Discussed customs of different cultures
- 5 Celebrated holidays or awareness days of different cultures
- 6 Displayed flags or other emblems from different cultures
- 7 Asked students to share their own cultural experiences related to class topics
- 8 Taught about the importance of respecting cultural differences

## ACCIDENTS AND UNINTENTIONAL INJURIES

1None of these

2Always wearing bicycle helmets

3Always wearing motorcycle helmets

- 4Always wearing seatbelts
- 5 Always wearing <u>protective equipment</u> for roller blades and skateboards, such as knee pads, elbow pads, or helmets
- 6 Risks associated with <u>driving under the influence</u> of alcohol or other drugs
- 7 <u>Statistics</u> on adolescent deaths and injuries from accidents and unintentional injuries
- 8 <u>Group attitudes</u> (social norms) toward <u>risk behaviors</u> related to accidents and unintentional injuries
- 9 <u>Actual amount</u> (true prevalence) of risk behavior related to accidents and unintentional injuries among adolescents and adults

## INTENTIONAL INJURIES AND VIOLENCE

- 1 None of these
- 2 How to settle conflicts without physical fighting
- 3 How to handle stress in healthy ways
- 4 <u>Risks</u> associated with <u>physical fighting</u>
- 5 <u>Risks</u> associated with carrying and using <u>weapons</u>
- 6 Risks associated with gang activities
- 7 <u>What to do</u> if someone is thinking about <u>suicide</u>
- 8 <u>Statistics</u> on adolescent deaths and injuries from violence and suicide
- 9 <u>Group attitudes</u> (social norms) toward <u>risk behaviors</u> related to intentional injuries and violence
- 10 <u>Actual amount</u> (true prevalence) of risk behavior related to intentional injuries and violence among adolescents and adults

# TOBACCO USE

- 1 None of these
- 2 <u>Short-term risks</u> associated with <u>cigarette smoking</u> (yellow teeth/bad breath, effects of tobacco on the body, effects on athletic performance)
- 3 <u>Long-term risks</u> associated with <u>cigarette smoking</u> (heart disease, lung cancer, emphysema, premature wrinkling)
- 4 <u>Risks</u> associated with <u>sidestream/second-hand smoke</u> (lung cancer, other respiratory diseases)
- 5 <u>Short-term risks</u> associated with <u>chewing tobacco or snuff</u> (yellow teeth/bad breath, mouth/tongue sores)
- 6 <u>Long-term risks</u> associated with <u>chewing tobacco or snuff</u> (oral cancer, tooth loss)
- 7 <u>Statistics</u> on death and disability associated with tobacco use
- 8 <u>Group attitudes</u> (social norms) toward <u>risk behaviors</u> related to tobacco use
- 9 <u>Actual amount</u> (true prevalence) of risk behavior related to tobacco use among adolescents and adults
- 10 <u>School policies</u> about tobacco use
- 11<u>Social influences</u> on tobacco use (wanting to be part of a group, feeling like an adult, advertising, media)
- 12 Healthy <u>alternatives</u> to smoking
- 13 Effects of tobacco-related disease on health care costs
- 14 Advocacy skills and social action concerning tobacco use

# ALCOHOL AND OTHER DRUG (AOD) USE

- 1 None of these
- 2 <u>Short-term risks</u> associated with <u>alcohol use</u> (DUI injuries, risks associated with heavy/binge drinking)
- 3 <u>Long-term risks</u> associated with <u>alcohol use</u>, such as problems associated with addiction, health, family, and career; alcoholrelated diseases, such as cirrhosis or other liver damage; and effects of having a DUI arrest record
- 4 Drink equivalents and blood alcohol content
- 5 <u>Short-term risks</u> associated with <u>other drug use</u> (marijuana, cocaine, crack, and other illegal drugs, such as LSD, PCP, ecstasy, mushrooms, speed, ice, heroin, or pills)
- 6 Long-term risks associated with other drug use
- 7 <u>Classifications</u> of drugs and <u>how they work</u>
- 8 Identification of drugs
- 9 OTC and prescription drugs
- 10Risks associated with illegal steroid use
- 11Effects of AOD on the mind and body
- 12Effects of AOD on decision-making
- 13Healthy <u>alternatives</u> to AOD use
- 14<u>Statistics</u> on death and disability from AOD use
- 15 <u>Group attitudes</u> (social norms) toward <u>risk behaviors</u> related to AOD use
- 16 <u>Actual amount</u> (true prevalence) of risk behavior related to AOD use among adolescents and adults
- 17 School policies on AOD use
- 18 <u>Social influences</u> on AOD use
- 19 Potential legal consequences of AOD use

# SEXUAL BEHAVIORS

1 None of these

2 Parts and functions of the reproductive system

3 <u>Reasons</u> for choosing sexual <u>abstinence</u>

4 Contraceptive methods to prevent pregnancy

5 How to prevent <u>sexually transmitted diseases</u> (STD)

6 Signs and symptoms of STD

- 7 How and where to get <u>STD testing</u>
- 8 Social influences on sexual behavior
- 9 Dating and relationships

10<u>Marriage</u>

- 11<u>Risks</u> associated with having <u>multiple sexual partners</u>
- 12Perception of risk for STD and pregnancy
- 13<u>Statistics</u> on adolescent pregnancies and STD rates
- 14<u>Group attitudes</u> (social norms) toward <u>risk behaviors</u> related to sex
- 15 <u>Actual amount</u> (true prevalence) of risk behavior related to sex among adolescents and adults

16Sexual orientation

# HIV AND AIDS

1 None of these

2 Basic facts about HIV/AIDS

3 How HIV is and is <u>not transmitted</u>

4 How HIV affects the <u>immune system</u>

5 Disease progression of AIDS

6 <u>Needle-sharing behaviors</u> that <u>transmit</u> HIV

- 7 Sexual behaviors that transmit HIV
- 8 Reasons for choosing sexual abstinence
- 9 Correct use of condoms
- 10<u>Condom efficacy</u>/how well condoms work
- 11<u>Influence</u> of <u>alcohol and other drugs</u> on HIV <u>risk behaviors</u>
- 12<u>Statistics</u> on adolescent death and disability related to HIV/AIDS

13<u>Group attitudes</u> (social norms) toward <u>risk behaviors</u> related to HIV

- 14 <u>Actual amount</u> (true prevalence) of risk behavior related to HIV among adolescents and adults
- 15Information on HIV testing and counseling
- 16<u>Compassion and support</u> for persons living with HIV/AIDS
- 17Perceptions of risk for HIV/AIDS
- 18Societal impact of HIV/AIDS

# NUTRITION AND DIETARY BEHAVIORS

1 None of these

- 2 Nutrients and foods where they are found
- 3 <u>Vitamin-</u> and <u>mineral</u>-related <u>disorders</u>
- 4 Four food groups
- 5 Food Guide Pyramid
- 6 <u>Five a Day</u> (fruits and vegetables)
- 7 Dietary Guidelines for Americans
- 8 Choosing healthy meals and snacks
- 9 <u>Label</u> reading
- 10 Preparing healthy meals and snacks
- 11 Healthy weight management
- 12 Myths associated with diet supplements
- 13 Risks associated with crash diets/low-calorie diets
- 14 Risks associated with using diet pills
- 15 <u>Risks</u> associated with <u>purging</u> (vomiting, laxatives) for weight loss
- 16 <u>Signs</u> and <u>symptoms</u> of <u>eating disorders</u> (anorexia nervosa, bulimia nervosa)
- 17 What to do if someone has an eating disorder
- 18 <u>Overeating</u> as a response to <u>stress</u>
- 19 Social pressures for thinness, especially for female students
- 20 Statistics on death and disability associated with dietary causes

# PHYSICAL ACTIVITY

- 1 None of these
- 2 Benefits of regular participation in aerobic activity
- 3 Benefits of regular participation in stretching exercises
- 4 Benefits of regular participation in strengthening exercises
- 5 Overcoming barriers to regular physical activity
- 6 Planning a <u>personal fitness</u> program
- 7 Healthy weight management
- 8 Fitness fads/gimmicks
- 9 <u>Reducing risk</u> for certain <u>diseases</u>, such as cardiovascular disease and osteoporosis
- 10 How to measure one's own fitness
- 11 <u>Statistics</u> on death and disability associated with sedentary lifestyle
- 12 Community opportunities for physical activity
- 13 Preventing injury during physical activity
- 14 Physiological benefits of exercise
- 15 Psychological benefits of exercise
- 16 Social benefits of exercise

School Health Education--Classroom Teacher

# SKILLS FOR HEALTHY BEHAVIORS

- 1 Communication
- 2 Decision-making
- 3 Goal-setting
- 4 Non-violent conflict resolution

5Resisting social pressures for unhealthy behaviors

6 Stress management

#### **TEACHING METHODS**

1Class (seat) work
2Lecture (teacher lecturing to class)
3Large group discussions
4Small group discussions
5Games
6Simulations
7Cooperative activities
8Arts (literature/stories)
9Role play
10Physical practice
11AV materials
12Interactive video
13Computer-assisted instruction
14Contracts for behavior change
15Contests for behavior change

# OFTEN SOMETIMES RARELY NEVER

### HEALTH-RELATED PLEDGES

- 1 Not to use alcohol or drugs during adolescence
- 2 Not to use alcohol or drugs at a particular time, such as prom night
- 3 Not to drink and drive or ride with a drinking driver
- 4 Not to use tobacco
- 5 Not to use weapons
- 6 To settle conflicts without fighting
- 7 To abstain from sexual intercourse during adolescence
- 8 To practice safer sex
- 9 To practice healthful nutrition
- 10To exercise regularly
- 11 To always wear a seatbelt
- 12 To always wear a helmet while biking
- 13 To support others in their decisions to practice healthful behaviors

# ADULT GUEST SPEAKERS

- 1 None of these
- 2 Law enforcement official
- 3 Athlete
- 4 Person living with HIV/AIDS
- 5 Recovering AOD addict
- 6 Victim of drunk driving
- 7 Former drunk driver
- 8 Family planning representative
- 9 Minister/clergy
- 10 Food service personnel
- 11 Health services personnel

# STUDENT ASSESSMENT

- 1 No grade
- 2 Attendance
- 3 Participation
- 4 Attitude
- 5 Skills
- 6 Homework assignments
- 7Written tests

# HEALTH-RELATED COMMUNITY ACTIVITIES

#### 1 None of these

- 2 Perform voluntary work at a health department or other health-related community organization
- 3 Participate in a community-based health fair
- 4 Conduct community member surveys

5Gather information about a school or community health service (e.g., screenings, clinic services)

6Use a school or community health service (e.g., a hotline or clinic)

7Visit a pharmacy to compare prices on health products

8Identify potential injury sites at school or in the community

#### HEALTH-RELATED HOME AND FAMILY ACTIVITIES

1	None of these
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2 Conduct health survey of family members
3Share health information with family members
4 Count medications in family medicine chest
5Identify products or hazards that pose a potential health threat