

# HEALTHY, ACTIVE ADOLESCENCE

## A PARENT'S GUIDE TO HEALTH AND PHYSICAL EDUCATION STANDARDS



GRADES 9 THROUGH 12

District of Columbia Office of the  
State Superintendent of Education

# MESSAGE FROM THE STATE SUPERINTENDENT OF EDUCATION

1

September 30, 2008

Dear Parents/Guardians,

I strongly believe that the physical health and well-being of our District of Columbia students is a critical issue. In December 2007, the D.C. State Board of Education unanimously approved guidelines for health and physical education standards to be taught in District of Columbia public schools. The standards were developed using input from focus groups that included parents, civic leaders, health professionals, and educators. Research and statistical data also informed the development of the standards. These standards provide us with the opportunity to set the bar as high as it can be raised for the health and physical education of our students.



Health and physical education standards describe what your student is to know and be able to do in these areas of study. There are learning standards for Pre-Kindergarten through grade 8 and at the high school level. In order to graduate from a District of Columbia public high school, students in grades 9-12 must complete 1.5 units of health and physical education instruction.

The information contained in this guide is organized around five major themes that research has identified as impacting students in the District of Columbia. They are:

- Nutrition
- Physical Activity
- Safety
- Alcohol, Drugs, Tobacco
- HIV/AIDS

I hope that you will use the information and suggestions provided in this parent guide to help your child to become a healthy adult. Your child's school is expected to use these standards to teach your child, and I encourage you to hold the school accountable for ensuring that your child is learning about health and physical education. Participation in structured physical activity, in combination with good nutrition, is absolutely necessary to maintain good health and prevent obesity among children. Ultimately, a child's health is vital to ensuring that he or she is ready to receive an excellent education.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'D. Gist', written over a white background.

Deborah A. Gist  
State Superintendent of Education

## STATE BOARD OF EDUCATION

Robert C. Bobb  
President

Lisa Raymond  
Vice President  
District 3 (Wards 5 & 6)

Mary Lord  
District 1 (Wards 1 & 2)

Sekou Biddle  
District 2 (Wards 3 & 4)

William Lockridge  
District 4 (Wards 7 & 8)

Laura McGiffert Slover  
Appointed

Ted Trabue  
Appointed

Christine Johnson  
Student Representative

Loren A. Stevens  
Student Representative

Beverly R. Wheeler  
Executive Director

There is a strong and urgent need for health promotion and disease prevention among high school students in the District of Columbia. The need for early and often engagement from parents and guardians around healthy choices cannot be over-stressed. It is important that parents discuss what behaviors are risky, why behaviors are risky and help youth develop strategies to avoid and reduce risky behaviors. According to the 2007 Youth Risk Behavior Survey, nearly all youth undertake some forms of risky behavior.

Consider the facts:

- 28.5% of youth rode with a driver who had been drinking
- 50.0 % reported lifetime cigarette use
- 6.4% reported lifetime alcohol use
- 40.4% reported lifetime marijuana use
- 25.7% offered, sold or given an illegal drug on school property
- 17.1% reported being physically hurt by boyfriend or girlfriend on purpose
- 57.6% reported having sexual intercourse
- 13.5% had sexual intercourse first time before age 13
- 21.5% had sexual intercourse with four or more people in lifetime
- 40.6% had sexual intercourse with one or more people in last three months (currently active)
- Despite recent local and national decreases, the District still has among the highest teen pregnancy rates in the United States.
- The District's HIV/AIDS rate is the worst in the nation, according to a 2007 D.C. Department of Health Epidemiology Surveillance report, an estimated one in every 100 13- to 24-year-olds has HIV or AIDS.



Sexual health problems are not the only health issues District youths face:

- In 2003, 40 percent of 10- to 17-year-olds in the District were overweight, according to the 2003 National Survey of Children's Health.
- Ten to 15 teenagers per month seek help in the Domestic Violence Intake Center in the D.C. Superior Court every month, according to Women Empowered Against Violence ([www.weaveincorp.org](http://www.weaveincorp.org)).
- Accidents are the leading cause of death among youth and often happen in the context of risky behavior, including physical endangerment, impaired decision-making because of drug or alcohol use, and other factors which keep an individual from prioritizing their own well-being over other pressures.

Consider these facts regarding the leading causes of death among adolescents aged 15-19 (2004):

- o 32.9% of deaths due to unintentional injury
- o 9.3% due to homicide
- o 8.2% due to suicide
- o 3.5 due to malignant Neoplasms (Cancer)
- o 1.8% due to diseases of the heart

Deaths due to injury among adolescents aged 15-19 (2004) reveals:

- o 24.7% from motor vehicle traffic
- o 12.0% from firearms
- o 4.2% by poisoning
- o 1.6% by drowning

With all of the health issues that our young people face, it is important for teenaged children to talk about healthy decisions and behaviors—and get accurate information to make wise choices. One place that teenagers can have these conversations and get accurate health information is in their health and physical education classes in District of Columbia public schools. In high school health classes, students gain knowledge and skills about nutrition and obesity; personal safety; sexual health; and alcohol, tobacco and other drugs. In physical education classes, students develop physical abilities and skills, including motor skills and movements, and discover how to stay fit.

Another place that health issues should be discussed and skills practiced is at home. Parents and family members can supplement what students learn at school by encouraging healthy choices and behaviors. This guide informs you about what your teenager is learning in health class and physical education class. It also provides you with tips, checklists, discussion starters, activities and resources to use at home with your teenager to promote a healthy lifestyle.





To graduate from the District of Columbia Public Schools, high school students are required to take 1.5 Carnegie units of health and physical education. Courses to meet this requirement include standards from Level 1 and Level 2.

High school students are required to take one health course and two physical education courses to graduate—a Level 1 class and a Level 2 class. Each course is worth 0.5 Carnegie units.

Physical education courses help students gain a greater understanding of their physical abilities, develop motor and movement skills, and learn how to stay fit.

## LEVEL 1 HEALTH STANDARDS

### In Level 1 health, your teenager will:

- Learn about the growth and development of the body and mind, including communication, relationships, self-esteem and body image.
- Learn the benefits of abstinence (not having sex), birth control other disease prevention strategies.
- Understand the possible consequences of teen pregnancy, sexually transmitted infections)
- Understand the importance of regular testing for HIV and other sexually transmitted infections (STIs), especially before becoming sexually active with a new partner.
- Describe things that increase risk for heart disease, cancer and diabetes—and how to prevent these diseases.
- Learn about recommendations and community resources for healthy eating.
- Describe how healthy and unhealthy eating impacts the body.
- Learn why people become dependent on alcohol, tobacco and other drugs.
- Learn about public health policies and laws about alcohol, tobacco and other drugs—and how these laws influence personal health and disease prevention.
- Rate the safety of his/her own home and workplace and the risk for injury—and learn how to prevent and take care of injuries.
- Learn the signs of physical, emotional and sexual abuse—and the places in the community to go for help.
- Identify why positive communication and respect are important in relationships, especially dating and sexual relationships.
- Explain how having a long-term relationship with your primary care doctor can positively impact personal health.



## **Health: Support Good Nutrition and Prevent Obesity and Disease**

- Create a family health history tree. Then discuss diseases that are common in your family and how to prevent them.
- Talk about the food pyramid and healthy food choices from the U.S. Department of Agriculture (USDA), using the information sheet on page 10. Make a family meal plan together using the USDA recommendations. Make sure your plan includes whole grains, fruits, vegetables and lean meats and fish. For vegans who don't eat animal products, your plan should include enough protein, vitamins and minerals found in whole grains, fruits, vegetables, peas, beans, nuts and seeds.
- Take your teen grocery shopping with you. Read food labels and then decide together which foods are healthy choices. Look for foods that are high in fiber, protein, vitamins and minerals and low in saturated and trans-fats, cholesterol, sugar and sodium (salt).
- If your teen does not have a primary care doctor, look into finding one. Let your teen help pick out the doctor. Make sure your teen visits the doctor yearly for a physical exam and the dentist twice a year.

## **Safety: Prepare Your Home and Talk about the Laws**

- Using the checklist on page 24, walk around the house together looking for safety issues.
- Make an emergency contact list, using the template on page 23, and put it on your refrigerator.
- Create a first-aid kit together. Include bandages, antibiotic ointment, antiseptic wipes, gauze, scissors, an Ace bandage, a thermometer, tweezers, pain reliever and a first-aid instruction booklet. Keep your first-aid kit handy in the bathroom or kitchen. For more information, go to [www.redcross.org](http://www.redcross.org).
- Look up the laws about underage drinking, tobacco use and illegal drugs, such as marijuana, together. Discuss how breaking these laws would impact your teen and your family.

## Discussion Starters for Talking with Your Teen

The high school years are transition years for teenagers—but you can be a strong and positive influence in helping your teenager make healthy choices. Sometimes, though, it is hard to know how to start the conversation about important topics. Here are some suggestions:

### Relationships and Sexual Health

- “I think \_\_\_\_\_ and \_\_\_\_\_ have a very healthy relationship because ...”
- “Can you think of an example of an unhealthy relationship? Why do you think it is unhealthy?”
- “What can you do if you feel unsafe in a relationship?”
- “Besides sex, there are many other ways to express emotions in relationships, such as ...”
- “What do you think it would be like to be a parent right now? How would your life change?”
- “What are some lyrics that you have heard in music or seen in the movie that might not foster good relationships?”

### Alcohol, Tobacco and Other Drugs

- “Why do you think people decide to start using drugs?”
- “What are some things you could do to feel good besides using drugs?”
- “Many people use drugs to cope with stressful situations or events in their lives. What are other healthy ways you can manage your stress?”
- “If you are worried that one of your friends is using drugs you can ...”

### Refusal Skills (Sex, Alcohol, Tobacco and Other Drugs)

- “I know it can be difficult to say ‘no’ to someone you care about. Let’s think of some things you could say if you are in that kind of situation.”
- “What could you say to a friend who wants you to do something or try something that you are uncomfortable with?”



### In Level 2 health, your teenager will:

- Demonstrate caring and respectful ways to have conversations about delaying sex, being abstinent (not having sex) and ending relationships.
- Describe the benefits of abstinence and possible consequences of sex.
- Identify the costs of having a child and parenting skills that are important when raising a child.
- Know that women should start going to the gynecologist yearly when they turn 18 years old—or when they start having sex.
- Know that men should go to their primary care doctor for regular sexual health exams when they turn 18—or when they start having sex.
- Look at factors that influence choices about contraceptives (such as abstinence, condoms and birth control) and know the importance of consistent and effective contraceptive use.
- Create a healthy eating plan, based on cost, availability, culture and food pyramid recommendations.
- Describe nutritional needs for lifelong health.
- Explain that combining certain drugs can be very dangerous.
- Describe the effect of alcohol and other drugs on the mind and body, including impaired behavior, judgment and memory—and how these effects lead to unsafe decisions.
- Demonstrate ways to avoid, reduce and report dating violence and sexual assault.
- Identify the health consequences of abuse and other forms of violence—including physical injuries, emotional harm and unhealthy behaviors—and ways to deal with and prevent violence.
- Explain why responsibility, love, respect, generosity, kindness and forgiveness are important for a healthy relationship.
- Identify factors that influence violent behavior, such as peers, alcohol and drug use, and the media.



### Health: Support Positive Relationships and Sexual Health

- Talk about healthy and unhealthy relationships and abuse.
- Investigate domestic violence resources.
- If you know your teen is sexually active, encourage a visit to the doctor.
- Accompany your teen on a sexual health check-up visit to the doctor.
- Talk to your teen about the responsibilities (physical, financial, social) that come with being a parent.
- Help your teen understand the financial costs of being a parent. Share and discuss your household budget. If your teen has a job, help create a budget for themselves that includes a savings plan.
- Learn about the latest options for birth control and STI prevention.



### Safety: Keep Tabs on Your Teen and Prevent Violence

- Develop a safety plan for when your teen is out of the house. Make sure your plan includes expectations for curfew—and make sure you know where your teen will be, how he or she will get home and how you can reach each other.
- Take a self-defense class together.
- When you see or hear about violence in your community or in the media, talk to your teen about it. Discuss the consequences of violence to people, families and the community.
- Discuss non-violent ways of dealing with problems, such as communicating and expressing emotions without anger, managing stress before it becomes too overwhelming and seeking help when problems become too much to handle.

### Nutrition: Encourage Healthy Food Choices to Prevent Obesity and Disease

- Ask your teen to help you create a healthy eating plan for the family.
- Go through the fridge and pantry together. Use the food labels to identify foods that are high in fiber, protein, vitamins, and minerals and low in saturated and trans-fats, cholesterol, sugar and sodium (salt).
- Encourage your teen to be a nutrition role model and educator for younger siblings and/or relatives.

## Relationships and Sexual Health

- “What character traits do you want someone you are dating to possess? Why?”
- “What does a respectful relationship look like to you?”
- “If you or someone you know is being abused, do you know where you can go for help?”

Some places are ...”

- “I know talking to the person you are dating about sex might be difficult or uncomfortable at first, but it is important that he/she knows how you feel about sex. What do you think are important things to talk about? ... Let’s think of some ways you could start the conversation.”
- “If you decide to have sex, what will you do to prevent pregnancy and protect yourself from sexually transmitted infections?” “What do you think are some of the pros and cons of that method and other methods?”
- “There are many sexual health resources in the District. Some are ...”

## Alcohol, Tobacco & Other Drugs

- “If you are at a party where there are drugs and alcohol, there are some things you can do to be safe, such as ...”
- “When people use alcohol and drugs, they often make poor choices, such as ...” “Some ways to stay safe are ...”
- “What can you do at a party where drugs and alcohol are present?”

## Media Literacy

Use reports you see and hear in the media—TV, movies, newspapers, magazines, radio, advertisements and the Internet—to start discussions about health issues.

- “What did you think when you saw \_\_\_\_\_? What kind of health messages did that give you?”
- “What was that commercial/advertisement trying to get you to do? Would that be a healthy choice for you?”
- “Do you think \_\_\_\_\_ [the character] made a safe and healthy decision for themselves and others? What other safe and healthy decisions could he/she have made?”
- “Is what we just saw realistic?” “What might actually happen in that situation in real life?” “What could be the good or bad health outcomes in real life?”



### Nutrition: Eat Healthy, Stay Healthy

All parents want their teenagers to be healthy. Remember, teenagers still learn by example, so be a good role model at home: eat and serve healthy meals. Here are a few good habits for you and your family:

- Never skip meals—especially breakfast.
- Eat moderate portions.
- Try new foods.
- Limit junk food.
- Serve vegetables and fruits with meals and snacks—and vary your veggies.
- Bake or broil foods instead of frying.
- Choose whole grains and other high-fiber foods.
- Choose fat-free, 1 percent or 2 percent milk instead of whole milk.
- Drink plenty of water.



### DID YOU KNOW?

#### YOUR TEEN'S NUTRITIONAL NEEDS ARE CHANGING

You can see that your teen's body is changing. But did you know that as children become teenagers, their nutritional needs also change? Your teen may need more calories than usual to support growth and puberty. But not just any calories will do. Teenagers need high-nutrient calories that provide essential vitamins and minerals:

- Calcium to support bone growth (milk, yogurt and low-fat cheese; black, navy and soy beans; mustard greens; almonds; cereals and juices with added calcium)
- Protein for muscle development (lean meat, poultry, fish (marine fish), eggs, nuts, seeds, milk)
- Iron for girls (lean red meats and seafood; green leafy vegetables; dried beans and fruits; nuts; egg yolks; and cereals, oatmeal, pasta, rice and grits with added iron)

Typical teenagers don't get enough calcium or vegetables—and they get too much sugar, salt and fat. You can help your teen make better food choices.

**1. Myth:** “I haven’t been exposed to STIs because we haven’t gone all the way. We usually only kiss and touch each other—well, we did have oral sex, but only once.”

**Fact:** There are four ways to transmit STIs:

- Vaginal intercourse
- Anal intercourse
- Genital “rubbing”—genital-to-genital contact
- Oral sex

Don’t deceive yourself just because you’ve only had one or a few sexual experiences. Being sexually active even once puts you at risk for STIs, and having vaginal intercourse once puts you at risk for unplanned pregnancy.

**2. Myth:** “I’m protected from STIs because I take the Pill.”

**Fact:** This myth is probably one of the most common and dangerous misconceptions about STIs. While taking the Pill decreases your risk of unplanned pregnancy drastically when taken as directed, oral contraceptives and other birth control methods never offer protection from STIs.

- Tip: Even if you are taking the Pill or using another contraceptive method, you need to know that your risk of catching STIs can only be reduced through consistent and proper use of either male or female condoms, never both types, during every sexual encounter.

**3. Myth:** “My boyfriend has herpes, but we never have sex when he has outbreaks of herpes and sores or blisters are visible. We are always careful, so I’m sure I won’t get infected with the herpes virus.”

**Fact:** Just because visible signs of genital herpes are not clearly present when you engage in sex with someone infected with herpes does not mean the virus is not present and in the earliest stage of herpes outbreak. In fact, genital herpes is transmittable for several days prior to the appearance of herpes sores or blisters. While using condoms does offer almost certain protection against most STIs, the herpes virus is often present on areas of the male or female genitalia not covered by a condom, which increases your risk of getting genital herpes through skin-to-skin contact. If your partner has a history of herpes outbreaks, take care of yourself and be sure your partner is seeing a physician regularly and taking any prescribed medications. Also, make sure that (s)he learns to become more aware of the symptoms that often occur at the start of each herpes outbreak.

**4. Myth:** “I had an STI and took most of the medicine the doctor gave me, so I didn’t go back for my follow-up appointment because my prescription got rid of the STI.”

**Fact:** The number-one rule for anyone diagnosed with any type of STI is to take all your medication as prescribed, as well as to follow all other instructions (including follow-up appointments) as directed by your health care professional. Not finishing all of your medication exactly as prescribed may mean the STI is still present—regardless of whether or not you have any signs or symptoms. The only way to know if the STI is no longer present is to follow up with your doctor for retesting and examination. Previously diagnosed STI patients also should be sure to always use condoms to protect themselves from potentially fatal STIs.

**5. Myth:** “I don’t have any of the signs or symptoms of STIs, so I can’t be infected.”

**Fact:** It is not uncommon for women, in particular, to have an STI without experiencing any of the common signs or symptoms. The symptoms of STDs are often confused with other conditions, which results in a misdiagnosis and delay in proper treatment.

**6. Myth:** “I have a vaginal discharge and am a little itchy. I don’t need to see a doctor when I can just buy one of those vaginal yeast infection products that are sold at my pharmacy or grocery store.”

**Fact:** Not all vaginal infections are yeast infections. You should never buy a product for self-treating a vaginal yeast infection, unless a doctor has previously diagnosed yeast infection, and you’re confident that this is the exact same infection. Although you may think that vaginal yeast infections are the most common cause of vaginal discharge, many STIs cause discharges, and actually the most common cause of vaginal discharge is actually bacterial vaginosis.

**7. Myth:** “I think I might have some type of STI. But I’m not too worried, after all I just need to get a prescription and it will be gone.”

**Fact:** This casual attitude toward STIs is likely one reason that the rate of STIs continues to increase. Simply taking a pill will not cure all types of STIs. A virus is the cause of several STIs. Antibiotic treatments only cure STIs caused by bacteria. Viral STIs are lifelong diseases and you must constantly remain aware of their continual presence. STIs caused by viruses include HIV, the virus that causes AIDS; the human papilloma virus or HPV, genital herpes; and cytomegalovirus, a virus often called CMV.

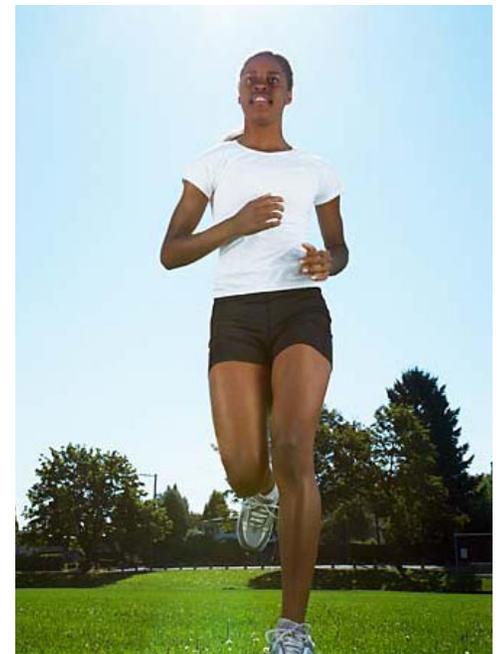
**8. Myth:** “I’ve only been sexually active with one person, so I don’t have to worry about STIs.”

**Fact:** That is great, but how many other people did your partner have sex with before you? Even if (s)he says you’re his/her first, it is impossible to be sure that you’re getting the full truth. Always worry about STIs. The only 100- percent protection from STIs is sexual abstinence. Condoms provide a significant amount of protection against STIs, but things can sometimes go wrong and the possibility of getting STIs is always there.

The goal of Level 1 physical education is for students to continue to learn how to develop motor skills and movement patterns.

**In Level 1 physical education, your child will learn to:**

- Perform simple and more complex movements and skills.
- Identify and apply movement skills to everyday life, including balance, reaction time, coordination, power, speed and agility.
- Determine which training and conditioning practices have the greatest impact on skill performance.
- Create a personal practice/training plan based on participation in class activities.
- Create and maintain a physically and emotionally safe environment for physical activity.
- Demonstrate good character based on core ethical values and good sportsmanship.
- Identify the role that physical activities play in social and family venues.
- Work cooperatively with members of a group.
- Look at the value of physical activity in understanding multiculturalism.



You can encourage your teen to stay active with family activities that will help the whole family stay fit:

- Put on some music and dance while you do household chores.
- Take a family walk around the neighborhood or go downtown and walk around the National Mall.
- Add steps to your day: Take stairs instead of the elevator and park further from your destination than usual.
- Challenge your teen to a game of basketball, catch, soccer or bowling.
- Ask open-ended questions (ones with “yes” or “no” answers), such as “What activities did you do in physical education class today? Which activity helped you to maintain your fitness level? After you exercised, how do you feel?”
- Ask your teen, “What activity do you like to do?” “What would you like to try?”



The goal in Level 2 physical education is for students to develop an appreciation for team and individual sports, which will help them to build social relationships that will last a lifetime.

**In Level 2 physical education, your teen will learn to:**

- Explain the use of the principles of biomechanics (the study of human movement) and how it influences performance.
- Look at the physical, emotional, cognitive and scientific factors that affect performance and the relationship among these factors.
- Look at different situations, give feedback and determine the best plan of action for improvement of performance, and evaluate decisions.
- Determine various ways in which preference for activities may change over a lifetime.
- Participate in physical activities for building and maintaining healthy lifestyles.
- Identify the effects of individual differences that influence physical activity.
- Complete a group project that enhances the strengths of all group members.

**Elective Physical Education Courses**

In some high schools, students have the opportunity to take elective physical education classes, including:

- Aerobics
- Aquatics
- Badminton
- Dance
- Golf
- Gymnastics
- Racquetball
- Tennis
- Weight training

### Family Activities: Get Moving!

- Create a family fitness plan that includes a healthy diet and plenty of exercise.
- Set aside a specific day for “Family Time,” which includes walking, dancing, playing games or sports, and cooking, for example.
- Go to the museums, historical sites, parks, gardens, the zoo and other cultural and community spots where you can take a walk together.
- Enroll in after-school exercise classes or activities at your neighborhood recreation center.

### Discussion Starters: Talk about Physical Fitness

- Ask your teen about the types of activities he or she likes to participate in.
- Ask your teen who their favorite athlete is and why.
- Discuss how teams operate—athletic, business, families and church, for example.
- “How do you feel before you exercise? How do you feel after you have exercised?”



You can help your teen make good decisions about health, physical activity, safety, substance use and sexuality. Make the most of teachable moments by using this six-step process for making decisions and setting goals:

1. **State the situation.** Ask your child questions, such as, “Why is there a decision to make? Why are you in this situation? Who is involved?”
2. **List the options.** “What ways do you have to deal with the situation?”
3. **Weigh the possible outcomes.** “What could be the positive and negative results of each option?”
4. **Consider your values.** “What are the beliefs and ideas that are important to you and your family that could help in this situation?”
5. **Make a decision and act.** “Are you using everything you know at this point to make your decision?”
6. **Evaluate your decision.** “Did you make the right decision or would you act differently now?”



## Health

### Community Resources

#### Children's Hospital

111 Michigan Ave., NW  
Washington, D.C 20010  
(202) 476-5000  
[www.childrensnational.org](http://www.childrensnational.org)

#### District of Columbia Department of Health

825 North Capitol Street NE  
Washington, DC 20002  
(202) 671-5000  
[www.doh.dc.gov](http://www.doh.dc.gov)

#### District of Columbia Department of Mental Health

77 P Street, N.E., 4th Floor  
Washington, D.C. 20002  
Mental Health Access Hotline  
1-888-793-4357

#### Latin American Youth Center (LAYC)

1419 Columbia Road NW  
Washington, DC 20009  
(202) 319-2225  
[www.layc-dc.org](http://www.layc-dc.org)

#### Women, Infant, Children (WIC)

Nutrition Programs Administration  
WIC State Agency  
2100 Martin Luther King Jr. Avenue, SE  
Suite 409  
Washington, DC 20020  
(202) 645-5663  
(202) 645-0516 Fax  
(800) 345-1WIC Appointments  
<http://app.doh.dc.gov/services/wic/index.shtm>

### Online Resources

- <http://www.brainpop.com/health/>
- [http://www.cdc.gov/nchs/data/has\\_hus07pdf#075](http://www.cdc.gov/nchs/data/has_hus07pdf#075)
- <http://www.nih.gov>
- <http://www.coolnurse.com/>
- <http://www.teengrowth.com/>
- <http://www.realtalkdc.org/resources.php>
- [www.kff.org](http://www.kff.org)
- [www.teenshealth.org](http://www.teenshealth.org)
- [www.mayoclinic.com](http://www.mayoclinic.com)

## Sexual Health Community Resources

**DC Campaign to Prevent Teen Pregnancy**  
1112 Eleventh Street, NW, Suite 100  
Washington, DC 20001  
<http://www.dccampaign.org>

**District of Columbia Department of Health  
Sexually Transmitted Diseases (STD)  
Control Program**  
Southeast STD Clinic  
DC General Hospital Campus  
19th and Massachusetts Avenue, SE  
Building 8  
Washington, DC 20003  
Phone (202) 698-4050  
<http://www.dchealth.dc.gov/doh/site/default.asp>

**Metro TeenAIDS**  
651 Pennsylvania Avenue, SE  
Washington, DC 20003  
(202) 543-9355  
[www.metroteenaids.org](http://www.metroteenaids.org)

**Ophelia Egypt Health Center**  
3937A Minnesota Avenue, NE  
Washington, DC 20019  
(202) 388-4770, Appointments  
[www.ppmw.org](http://www.ppmw.org)

**Planned Parenthood of Metropolitan Washington  
Schumacher Health Center**  
1108 16th Street, NW  
Washington, DC 20036  
(202) 347-8512, Appointments  
[www.ppmw.org](http://www.ppmw.org)

**Whitman-Walker Clinic**  
1407 S Street, NW  
Washington, DC 20009  
(202) 797-3500  
(202) 797-4444 (Crisis Intervention)  
[www.wwc.org](http://www.wwc.org)

## Online Resources

- [http://kidshealth.org/teen/sexual\\_health/](http://kidshealth.org/teen/sexual_health/)
- [http://www.bbc.co.uk/worldservice/sci\\_tech/features/health/sexwise/the\\_journey\\_starts.shtml](http://www.bbc.co.uk/worldservice/sci_tech/features/health/sexwise/the_journey_starts.shtml)
- <http://www.mysistahs.org/>
- <http://www.nlm.nih.gov/>
- <http://www.realtalkdc.org/resources.php>
- <http://www.sexetc.org/>
- <http://www.scarleteen.com/>
- <http://www.smyal.org/>
- [medlineplus/teensexualhealth.html](http://medlineplus.gov/teensexualhealth.html)
- [www.ashastd.org](http://www.ashastd.org)
- [www.teenpregnancy.org](http://www.teenpregnancy.org)
- [www.siecus.org](http://www.siecus.org)
- [www.sexedlibrary.org](http://www.sexedlibrary.org)

## Safety

### Community Resources

#### Break the Cycle

P.O. Box 21034  
Washington, DC 20009  
(202) 824-0707  
[www.breakthecycle.org](http://www.breakthecycle.org)  
[www.thesafespace.org](http://www.thesafespace.org)

#### District of Columbia Fire and Emergency

##### Medical Services

1923 Vermont Avenue, NW  
Suite 201  
Washington, DC 20001  
(202) 673-3331  
IN CASE OF EMERGENCY CALL 911  
[www.fems.dc.gov](http://www.fems.dc.gov)

#### District of Columbia Metropolitan

##### Police Department

300 Indiana Avenue, NW  
Washington, DC 20001  
(202) 727-4218  
IN CASE OF EMERGENCY CALL 911  
[www.mpdc.dc.gov](http://www.mpdc.dc.gov)

#### District of Columbia Rape Crisis Center

P.O. Box 34125  
Washington, DC 20043  
Business: 202-232-0789  
Hotline: 202-333-7273  
[www.dcrcc.org](http://www.dcrcc.org)

### Online Resources

- [http://kidshealth.org/teen/safety/safebasics/internet\\_safety.html](http://kidshealth.org/teen/safety/safebasics/internet_safety.html)
- <http://life.familyeducation.com/teen/safety/34464.html>
- <http://loveisrespect.org/>
- [http://www.dps.iastate.edu/wordpress/?page\\_id=121](http://www.dps.iastate.edu/wordpress/?page_id=121)
- <http://www.extension.iastate.edu/Publications/PM1621.pdf>
- <http://www.cdc.gov/ncipc/pubres/datingabusefactsheet.pdf>
- [http://www.kidshealth.org/parent/firstaid\\_safe/home/household\\_checklist.html](http://www.kidshealth.org/parent/firstaid_safe/home/household_checklist.html)
- [www.endabuse.org](http://www.endabuse.org)
- [www.homesafetycouncil.org](http://www.homesafetycouncil.org)
- [www.ndvh.org](http://www.ndvh.org)
- [www.redcross.org](http://www.redcross.org)

## Nutrition and Fitness

### Community Resources

#### District of Columbia Department of Parks and Recreation

3149 16th Street, NW  
Washington, DC 20010  
(202) 673-7647  
www.dpr.dc.gov

#### The Physicians Committee for Responsible Medicine

5100 Wisconsin Ave., NW, Suite 400  
Washington, DC 20016  
202-686-2210  
www.KidsGetHealthy.org

#### Capital Community News, Inc.

224 7th Street, SE, Suite 300  
Washington, DC 20003  
202-543-8300  
www.capitalcommunitynews.com

## Online Resources

- <http://aom.americaonthemove.org/site/c.krLXJ3PJKuG/b.1524889/>
- <http://ific.org/>
- <http://life.familyeducation.com/teen/fitness/34463.html>
- <http://www.acefitness.org/>
- <http://www.nlm.nih.gov/medlineplus/childnutrition.html>
- <http://www.nps.gov/state/dc/>
- <http://www.pamf.org/teen/health/nutrition/>
- [http://www.youngwomenshealth.org/my\\_fitness\\_plan.html](http://www.youngwomenshealth.org/my_fitness_plan.html)
- <http://www.presidentschallenge.org/>
- [www.nutrition.gov](http://www.nutrition.gov)
- [www.Kidshealth.org](http://www.Kidshealth.org)
- [www.educationcenter.dc.gov/ec/cwp/view.a.1306.q.581255.asp](http://www.educationcenter.dc.gov/ec/cwp/view.a.1306.q.581255.asp)

Places to meet (if family becomes separated):

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Friend or relative who can relay messages to other family members:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Utilities locations:

Gas shutoff valve: \_\_\_\_\_

Water shutoff valve: \_\_\_\_\_

Main electrical box: \_\_\_\_\_

Emergency supplies (type and location): \_\_\_\_\_

\_\_\_\_\_

Family & medical information:

Father's workplace \_\_\_\_\_ Mother's workplace \_\_\_\_\_

Work phone \_\_\_\_\_ Work phone \_\_\_\_\_

Cell phone/pager \_\_\_\_\_ Cell phone/pager \_\_\_\_\_

Children's schools & phone numbers \_\_\_\_\_

\_\_\_\_\_

Doctor's name \_\_\_\_\_ Doctor's phone \_\_\_\_\_

Nearest emergency room \_\_\_\_\_ Nearest hospital \_\_\_\_\_

Other important numbers and addresses:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# EMERGENCY CONTACT INFORMATION

Name	Phone	Alternate Phone
Local contact:		
Out-of-state contact:		
Next of kin/relationship:		
Work contact:		
Physician name:		
Neighbor or landlord/homeowner association contact:		
Other emergency contact:		
Police/ambulance:	911	
Fire department:	911	
Gas company:		
Electric company:		
Water company:		
Poison control center:		



The three most common causes of home injuries are falls, fire and burns, and poisoning. Use this checklist to help keep your home safe and your family injury-free. For more information, go to [www.homesafetycouncil.org](http://www.homesafetycouncil.org)

## Falls Prevention

Falls are the leading cause of unintentional injury in the home. You can stay safer by:

- Using a rubber bath mat or non-slip strips in the tub.
- Keeping stairs and pathways clear of clutter.
- Using baby gates at the top and bottom of stairs (if you have babies or toddlers).
- Using bright lights at the top and bottom of stairs.
- Making sure hallways and dark areas in the home are well lit at night with nightlights.



## Fire and Burn Prevention

Fifty-seven percent of fire- and burn-related injuries occur in the home. You can protect your family by:

- Installing smoke alarms on each level of your home (especially in or near sleeping areas).
- Testing each smoke alarm every month by pushing the test button until you hear a loud noise.
- Replacing smoke alarm batteries with new ones at least once a year.
- Having a fire evacuation plan. Find two exits out of every room (the door and another exit—maybe a window). Choose an outside meeting place in front of the house. Practice your plan at least twice a year as a family.
- Staying in the kitchen while using the stove.
- Not leaving lit candles unattended by an adult.
- Keeping matches and lighters locked up and away from children.



## Poisoning Prevention

More than two-thirds of homes with young children report that household chemicals are stored in unlocked places. You can prevent poisoning by:

- Knowing the National Poison Control Center number: 1-800-222-1222. Keep the number on your refrigerator and by every phone in your home.
- Installing child locks on all cabinets, especially where potentially harmful items are stored.
- Looking around your home for cleaning products, automotive fluids, pesticide and paint thinners that say “Caution,” “Warning,” or “Danger” on the label. Store these in locked cabinets (away from food) and out of sight and reach of children.
- Keeping all medicines and vitamins in their original containers and in a locked cabinet, out of sight and reach of children.

Adapted from the Hands on Home Safety Checklist by the Home Safety Council

This guide was developed in collaboration with the Mid-Atlantic Comprehensive Center (MACC) at The George Washington University Center for Equity and Excellence in Education. Educators representing the District of Columbia Public Schools and Charter Schools and parents contributed to this guide. Many thanks to these members of the Writing Committee and Parent Focus Group:

### **Writing Committee**

Maia Banks-Scheek  
Building Educational Alternatives Together for  
Health (B.E.A.T. for Health)

Rebecca C. Bradshaw-Smith  
Teacher  
Anacostia Senior High School

Darshon Brown  
Teacher  
Friendship Public Charter School

Dianne Harris  
Director of Health Services  
Friendship Public Charter School

Heather Holaday  
Program Specialist for Health and Physical  
Education  
District of Columbia Public Schools

Sara Martin  
Teacher  
Cesar Chavez Public Charter School

### **Parent Focus Group**

*Healthy, Active Beginnings:  
A Parent's Guide to Health and Physical Education  
Standards Pre-Kindergarten through Grade 5*

Tylila Bradshaw  
Friendship Public Charter School

Ronald Cook  
Tyler Elementary School

*Healthy, Active Transitions:  
A Parent's Guide to Health and Physical  
Education Standards*

Grades 6, 7 and 8  
Jennifer Galloway  
Raymond Elementary School

*Healthy, Active Adolescence:  
A Parent's Guide to Health and Physical  
Education Standards*

Grades 9 through 12  
Michelle Coley  
Archdiocese High School

Karen Willis-Henry  
Cardozo Senior High School

## **Mid-Atlantic Comprehensive Center (MACC)**

Janet Brown  
Senior Research Associate

Emily Crandall  
Senior Research Scientist

Maria Helena Malagon  
Senior Research Associate

Marjorie Rosenberg  
Senior Research Associate

Editor  
Martha Vockley  
Vockley•Lang

## **District of Columbia**

### **Office of the State Superintendent of Education**

Kimberly A. Statham, Ph.D.  
Deputy State Superintendent of Education  
Division of Education Excellence

Shanika L. Hope, Ph.D.  
Assistant Superintendent, Elementary and  
Secondary Education  
Division of Education Excellence

Gloria L. Benjamin  
Director of Curriculum and Instruction  
Division of Education Excellence

Dawanna James-Holly, Ph.D.  
Public Health Nutritionist  
Department of Nutrition Services

Maria Ibañez  
Director of Communications &  
Community Outreach



Robert C. Bobb, President, State Board of Education

Deborah A. Gist, State Superintendent of Education

**Office of the State Superintendent of Education**

**441 4th Street, NW – Suite 350N**

**Washington, DC 20001**

**Tel: 202-727-6436**

**[www.osse.dc.gov](http://www.osse.dc.gov)**

The Office of the State Superintendent of Education is an Equal Opportunity Employer