

# It's Time to Take Action for Ontario's Kids



21st century students are still using a 20th century Health and Physical Education curriculum... and it's taking a toll on their health.



By now it's common knowledge: Ontario's kids are less active and less healthy than ever before. In fact, according to a report from the Chief Medical Officer of Health, if current levels of childhood obesity continue, today's youth will have a shorter life expectancy than their parents for the first time in generations.<sup>i</sup> Put plainly, it's more than a problem: it's a life and death situation.

Kids need to get moving. They also need the knowledge to make informed choices about their health and well-being. While we all have a role to play in helping our youth lead healthy, active lives, with more than 2 million<sup>ii</sup> children and youth attending public schools in Ontario, the most logical place for the change to begin is in our school system.

Many schools have already laid a good deal of the groundwork for improved student health (including getting parents and communities on-board and implementing school health policies and initiatives established by the Ministry of Education)—however, one major piece of the puzzle is missing.

In April 2010, after misinformation was used to attack the revised Human Development and Sexual Health section of the elementary health and physical education (H&PE) curriculum, the Ministry withdrew that portion of the document. A few months later, they also backed away from releasing the secondary H&PE curriculum. Ever since, students have been left using all or part of a 14-year-old curriculum that not only fails to take the holistic approach to health that the revised curriculum does, but also was written well before important issues like cyberbullying and child and youth mental health were on most people's radar.

**“According to the World Health Organization (WHO), many of the leading causes of death, disease and disability can be prevented or significantly reduced through effective school health programs.”<sup>iii</sup>**

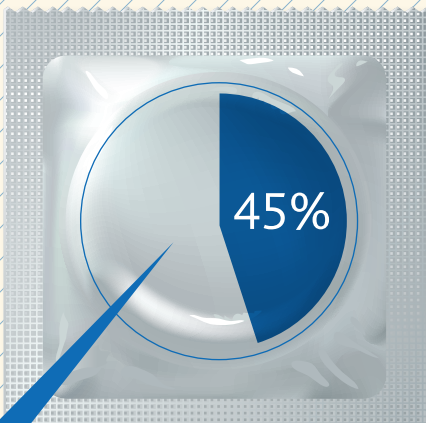
We know that scare tactics, negative messages and old-school teaching methods that focus on each health topic as a separate issue don't work. Kids need to learn about themselves as a whole and how the myriad of choices that they make each day impact their health and their community.

## Kids are using out-of-date strategies to deal with drug use.

Over 55% of Ontario grade 7-12 students surveyed reported drinking alcohol during a one-year period, while 22% reported binge drinking in the four weeks before they were surveyed. Meanwhile, 1 in 5 said they were offered, sold or given a drug at school in the last 12 months, and 16% reported a potential drug use problem.<sup>v</sup>

When it comes to drug and alcohol awareness, students need the facts and a holistic approach. They also need decision-making skills and a secure sense of self to help them make good choices and understand the impact of substance use. Through its Living Skills components, the revised elementary H&PE curriculum is helping students in grades 1-8 to do just this, but their secondary counterparts – at an age where they're much more likely to be experimenting with drugs and alcohol – have been left in the lurch. They're using 14-year-old information and approaches to deal with the social influences that contribute to the use and abuse of alcohol, tobacco and other drugs. And if the above statistics are any indication, this approach just isn't working!

ALMOST 1 IN 5 STUDENTS REPORTED THAT THEY WERE INTOXICATED AT SCHOOL AT LEAST ONCE IN A 12 MONTH PERIOD.<sup>iv</sup>



**FORTY-FIVE PERCENT (45%) OF STUDENTS FEEL THAT SEX EDUCATION CLASSES DO NOT ADEQUATELY ADDRESS THEIR CONCERNS.<sup>vi</sup>**

## Sexual health lessons are leaving students with questions.

Some parents fear having the "sex talk"... but perhaps what they should be afraid of is not discussing healthy sexuality with their children – especially when they can't currently rely on school health classes to cover all the bases. **Studies have shown that over 85% of Canadian parents agreed with the statement "Sexual health education should be provided in the schools."<sup>vii</sup>** A lack of information related to sexual health can have devastating consequences for youth – including teen pregnancy and sexually transmitted infections like chlamydia, gonorrhea and HIV/AIDS.

Far from promoting sexual activity, the withdrawn portion of the elementary curriculum took a well-balanced and up-to-date approach to giving youth the facts they needed in an age-appropriate way which is consistent with the Canadian Guidelines for Sexual Health Education. This information was intended to help them take care of their bodies and set their own boundaries. The research in this area is clear – **studies examining the impact of different types of sexual health promotion interventions found that these programs do not increase the frequency of sexual behaviour or the number of sexual partners, and in fact may result in delayed sexual activity.<sup>viii</sup>**

As it stands, while the 1998 curriculum contains valuable information, youth are being left to fill in some important gaps. For example, **students report that their sexual health education doesn't focus strongly enough on building skills related to different types of relationships for all students, personal experiences, positive sexual health and sexual emotions.<sup>ix</sup>**

## Schools lack the support they need to help students in distress.

Every student has the right to feel safe and included in an Ontario school... but, for many, that right has little bearing on reality. Three out of ten students report being bullied in the past year.<sup>xi</sup>

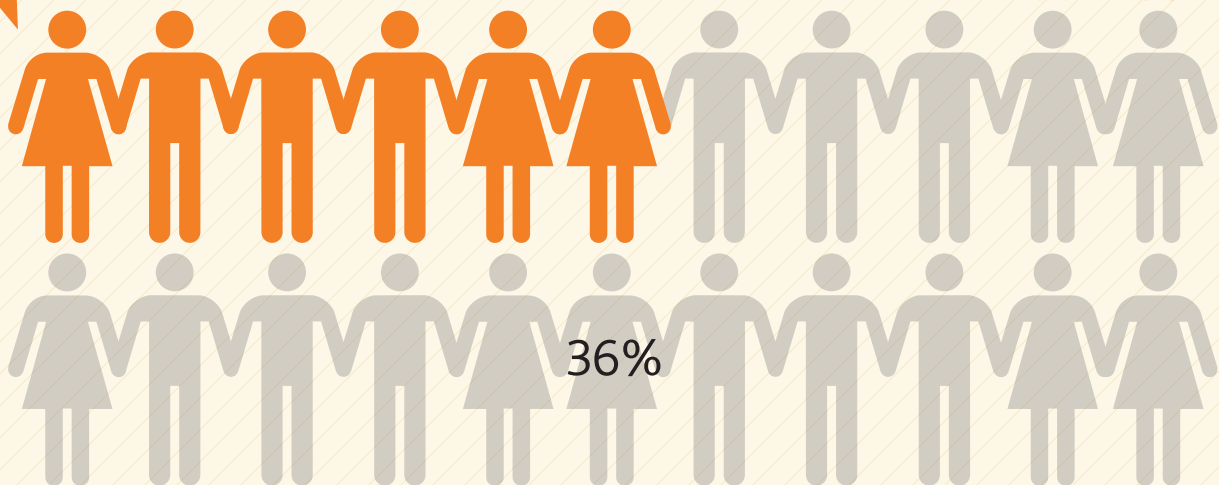
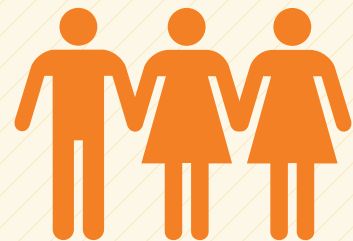
A key part of the elementary H&PE curriculum that addresses mental health and bullying is missing and the finalized secondary curriculum has yet to be released.

Some expectations related to mental health, specifically expectations related to stigma, stereotype and respect were removed from the interim elementary curriculum because they were included in the human development and sexual health topic area. The current secondary curriculum addresses mental health in only grades 11 and 12. Drafts of the revised secondary curriculum have an increased focus on mental health, with links to mental health being made to curriculum across all grades.

This means educators are struggling to work with a curriculum that was developed before 'cyberbullying' was even a recognized term, and without updated instructional approaches for teaching about bullying, mental health, social and emotional learning. The feelings of isolation and hopelessness some students face can eventually lead them to take drastic measures. And considering that **10% of students report having seriously thought about committing suicide in the past year,**<sup>xii</sup> this is yet another area in which the stakes are too high to tolerate any further delay.

Meanwhile, when asked to comment on the major issues in their schools, the most common response from principals was that they felt ill prepared to deal with the increasing number of mental health issues they were seeing.<sup>xiii</sup> Between 14% and 20% of children and youth have a mental health disorder that affects their daily lives, yet fewer than a quarter of these students receive treatment.<sup>xiv</sup> Whether this is due to a lack of knowledge or to the stigma that surrounds mental health issues, schools can and should play an important role in raising awareness and helping children to get the help they need – but to do this, they first need a curriculum that provides a foundation for learning.

THIRTY-SIX PERCENT (36%) OF STUDENTS WOULD NOT KNOW WHERE TO GO FOR HELP IF THEY OR A FRIEND WAS EXPERIENCING MENTAL HEALTH PROBLEMS, SUCH AS STRESS, ANXIETY OR DEPRESSION.<sup>x</sup>



## Students need to learn about healthy eating in healthy schools.

Which kinds of fats are harmful and which are essential to our health? How many servings of whole grains should we eat? Are carbs good or bad? The recommendations related to healthy eating are constantly evolving, yet the healthy eating portion of the curriculum being used by secondary schools is based on the 1992 version of Canada's Food Guide! Expectations related to healthy eating are included only in Grade 10 in the current secondary H&PE curriculum. In the revised curriculum, an integrated approach to healthy living is taken, with a focus on developing health knowledge to make healthy choices and make connections for healthy living. Healthy eating is a topic in the revised secondary H&PE curriculum every year and not just in one grade.

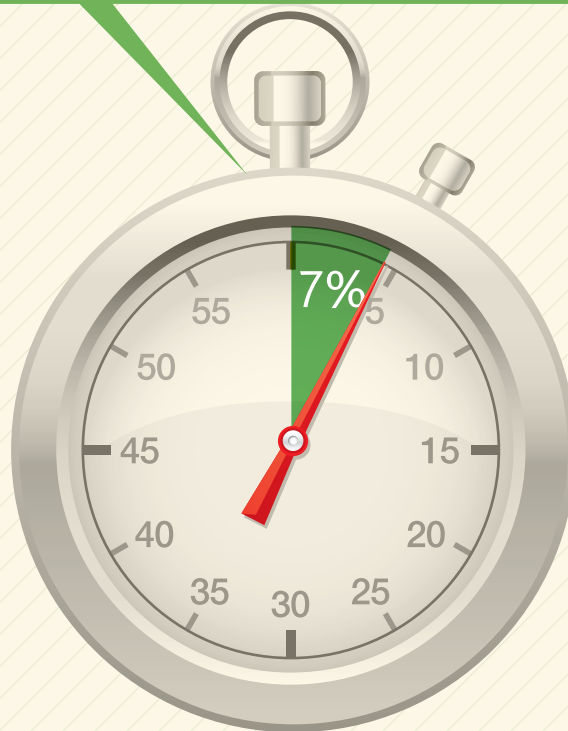
According to the Canadian Health Measures Survey (2007 to 2009) more than a quarter of Canada's kids are overweight or obese.<sup>xvi</sup> And while that figure may be shocking, it's hardly surprising considering the largely sedentary lifestyle the majority of our youth lead, and the poor information about diet they're often exposed to.

Schools, families and entire communities must not only take responsibility for giving kids the facts about healthy foods, but also for supporting them in making healthy choices. If we don't, not only will the long-term health and well-being of our children be at risk, but there will be dire economic and social consequences as the burden on our health care system increases over time.

LESS THAN HALF OF CHILDREN AND YOUTH ARE GETTING THE RECOMMENDED NUMBER OF SERVINGS OF FRUIT AND VEGETABLES DAILY.<sup>xv</sup>



CURRENTLY, ONLY 7% OF CHILDREN AND YOUTH ARE MEETING CANADA'S PHYSICAL ACTIVITY GUIDELINES OF 60 MINUTES PER DAY AND THESE LEVELS DECREASE AS CHILDREN MOVE FROM ELEMENTARY TO HIGH SCHOOL.<sup>xvii</sup>



## Kids seem to have forgotten that physical activity is fun!

For the sixth consecutive year, Active Healthy Kids Canada's Report Card has given our kids an 'F' for Physical Activity Levels.<sup>xviii</sup> According to the report, children and youth are spending an average of 7 hours and 48 minutes every day in sedentary behaviour in front of televisions, computers and other electronic devices – and this in spite of the fact that parks, outdoor spaces and after-school programs are generally available and accessible.<sup>xix</sup>

Through its focus on the development of physical literacy (i.e., the ability to move with competence and confidence in a wide variety of physical activities), the revised elementary curriculum is inspiring a lifelong love of physical activity in children, and it's past time that the secondary curriculum did the same.

# We've waited long enough!

Ontario teachers and students have waited patiently... but now it's time we let the Ministry of Education know: the complete revised H&PE curricula are long overdue. These revised documents will support educators and other leaders in providing students with the skills and understanding they need to make healthy choices now and in the future. With the health and well-being of our kids at stake, we need the elementary and secondary curricula finalized, released and implemented across the province!



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