

### **Standard 3C Artifact Reflection**

This artifact was written in PBH 640; Health Education Curriculum and Development. This artifact is a learning experience plan that was designed after learning of some violence and injury prevention needs that a school population needs. The focus of this learning experience was communication. The learning experience includes functional knowledge and communication skills/strategies that are aligned with the NYS and National Health Education Standards. In the intricate process of crafting a learning experience plan, I developed a detailed blueprint, outlining the sequence of activities, assessments, and instructional strategies for a specific unit. This paper serves as a roadmap for effective teaching, aligning with SOPHE TPS National Standard #3, with a specific focus on Component 3c. This crucial component underscores the planning of a health education curriculum scope and sequence, emphasizing alignment with National and/or state health education standards.

Including this artifact in my e-portfolio is not arbitrary but rather a deliberate choice, symbolizing its pivotal role in shaping a curriculum that adheres rigorously to established health education standards. This decision is underscored by the profound implications of SOPHE TPS National Standard #3, Component 3c. This particular component is the anchor in crafting a health education curriculum that goes beyond the conventional. It demands a meticulous alignment with not only the curriculum scope and sequence but also with the needs assessment data, health education standards, and principles of learning. This artifact serves as more than a just a plan; it's a meticulously orchestrated document that aligns every aspect of the learning experience with standard 3c of curriculum scope and sequence planning. By creating the learning experience in this matter, it ensures that the educational journey is not just engaging but rooted in a comprehensive, cohesive, and standards-aligned health education curriculum. This learning experience is meant to elevate the planning process from a routine task to a strategic initiative that incorporates the complexity of health education standards, principles of learning, and technological advancements, thereby ensuring a curriculum that is not only educational but transformative for the students it serves.

This assignment, for me, served as a exploration into the depths of instructional design and the intricacies of health education curriculum planning. Navigating through the nuances of this assignment, I learned that It's not just about constructing a curriculum scope and sequence; it's about weaving together a tapestry that accommodates student's differing strengths and needs. It's about leveraging 21st Century technology to support students' acquisition of functional health knowledge, health-related skills, and health beliefs. The backward design approach used in this assignment also highlighted for me the complex relationship between curriculum planning

and the broader educational context, emphasizing the need for a comprehensive and strategic approach to curriculum development. This assignment reaffirmed for me that effective curriculum planning goes beyond the surface level. It necessitates a deep understanding of the diverse strengths and needs of students, a commitment to staying abreast of technological advancements, and an unwavering dedication to the principles of learning. This assignment, within the context of SOPHE TPS National Standard #3, Component 3c, illuminated the importance of not only planning but planning with a purpose, a purpose rooted in the dynamic landscape of health education standards and the evolving needs of all students today.

This artifact is important to me because it echos my commitment to creating inclusive and effective health education curricula. As I worked my way through this assignment, the value of the knowledge gained in previous unit designs became evident. Every piece of information, from assessments to functional knowledge and standards, played a crucial role in shaping this learning experience. It emphasized the interconnectedness of educational elements and the importance of a cohesive foundation. What resonates deeply with me about this assignment is the recognition that the initial determination of assessments, functional knowledge, and standards, provided a sturdy scaffold. This foundation alleviated the concern about what I needed to cover, allowing me to focus on when, how, and where to address or assess these educational components. Lastly, this artifact is important to me because it allowed for me to see the power a comprehensive backward design approach can have, by gradually steering the learning experience, toward a well-defined destination.

Upon reflection, this artifact stands as an exemplar in meeting the demands of Component 3c. It dives deep into the intricate planning of a health education curriculum scope and sequence, ensuring alignment with national and/or state health education standards. Its strength lies in meticulous attention to detail, incorporating needs assessment data, health education standards, and principles of learning. However, one notable enhancement revolves around further streamlining the articulation of learning opportunities for students. While the backward design framework provided a solid foundation, refining the specificity of what students will do on each specific day could elevate the impact of the learning experience. By providing more detailed and targeted activities, the design could offer a richer and more engaging educational journey for students. The goal remains not just to meet standards but to provide a practical, user-friendly guide for educators on the frontline of health education planning.

In wrapping up, this artifact is more than just a lesson plan; it embodies my commitment to impactful health education. Crafted in response to violence and injury prevention needs, it spotlights communication as a focal point. Aligned with SOPHE TPS National Standard #3, Component 3c, it serves as a strategic roadmap, intricately planning a curriculum that goes beyond the norm. Choosing to include it in my e-portfolio was deliberate, signifying its role in

shaping a curriculum that's transformative, not routine. This assignment was a deep dive into instructional design and health education planning, highlighting the importance of weaving a curriculum that meets diverse student needs. The backward design approach emphasized the intricate relationship between planning and the broader educational context. It reinforced the need for a comprehensive approach, understanding student needs, embracing technology, and staying dedicated to learning principles. The artifact mirrors my commitment to creating inclusive health education. It values prior knowledge, showcasing the interconnectedness of educational elements. It's not just an exemplar; it's a guide for continuous improvement, aiming to offer a practical, user-friendly resource for educators navigating health education planning.