



St. Martin de Porres School

Avondale Heights

HEALTH & PHYSICAL EDUCATION POLICY

RATIONALE

Health and Physical Education (PE) provides students with knowledge, skills and behaviours to enable them to achieve a degree of autonomy in developing and maintaining their physical, mental, social and emotional health. This domain focuses on the importance of a healthy lifestyle and physical activity in the lives of individuals and groups in our society.

Health and PE promotes the potential for lifelong participation in physical activity through the development of motor skills and movement competence, health-related physical fitness and sport education. Engaging in physical activity, games, sport and outdoor recreation contributes to a sense of community and social connectedness. These are vital components of improved wellbeing.

Students' involvement in physical activity can take many forms, ranging from individual, non-competitive activity through to competitive team games. Emphasis is placed on combining motor skills and tactical knowledge to improve individual and team performance. Students' progress from the development of basic motor skills to the performance of complex movement patterns that form part of team games. They learn how developing physical capacity in areas such as strength, flexibility and endurance is related to both fitness and physical performance.

Students' progress from learning simple rules and procedures to enable them to participate in movement and physical activity safely, to using equipment safely and confidently. Students undertake a variety of roles when participating in sports such as; umpire, coach, player and administrator and assume responsibility for the organisation of aspects of a sporting competition.

The Health component explores the developmental changes that occur throughout the human lifespan. It begins by identifying the health needs necessary to promote and maintain growth and development, followed by discussion of significant transitions across the lifespan including puberty, to gaining an understanding of human sexuality and factors that influence its expression. The exploration of human development also includes a focus on the establishment of personal identity, factors that shape identity and the validity of stereotypes.

Students develop an understanding of the right to be safe and explore the concepts of challenge, risk and safety. They identify the harms associated with particular situations and behaviours and how to take action to minimise these harms.

Through the provision of health knowledge, Health and PE develops an understanding of the importance of personal and community actions in promoting health and knowledge about the factors that promote and protect the physical, social, mental and emotional health of individuals, families and communities.

Health examines the role of food in meeting dietary needs and the factors that influence food choice. Students' progress from learning about the importance of eating a variety of foods to understanding the role of a healthy diet in the prevention of disease.

The Health and Physical Education domain provides students with the knowledge, skills and behaviours necessary for the pursuit of lifelong involvement in physical activity, health and wellbeing.

The Health and Physical Education domain uses an eleven level structure to both reflect the design of the Australian Curriculum and to provide a consistent structure across all the Victorian Curriculum areas.

Standards in the Health and Physical Education domain are organised in two dimensions.

- *Movement and physical activity* – from Level 1-10
- *Personal, Social and Community Health* – from Level 3- 10

GENERAL GOALS

Prep to Year 4 – Laying the foundations

Students in the early years of schooling experience steady growth; they generally have abundant energy and a sense of adventure. During most of this period there is little difference between boys and girls in height, weight, strength and speed.

Learning in Health and Physical Education lays the foundations for the development of fundamental or basic motor skills that will assist students to participate in physical activity and in a healthy and active lifestyle. Knowledge, skills and behaviours developed in this stage form the basis for future learning, and contribute to a student's physical, social, emotional and cognitive development and wellbeing.

During this stage, students begin to develop basic motor skills and movement patterns, including locomotor and manipulative skills, in a range of movement environments (indoor, outdoor and aquatic) as well as being participants in the Perceptual Motor Program (PMP). The development of basic motor skills is critical and lays the foundation for future participation in physical activity. Teachers aim to teach for skill mastery rather than just skill awareness. This requires direct teaching of the components of basic motor skills. While attempting to engage students in physical activity through participation in organised games, teachers are mindful that the focus of games at this stage is on specific skill development.

At the beginning of this stage, students develop basic motor skills such as running, hopping, jumping, skipping, catching, throwing, kicking, rolling, balancing, twisting and turning. Later they develop the capacity to link these skills into more complex and coordinated movement sequences. Towards the end of this stage of learning, students develop increasingly complex motor skills and begin to apply these to appropriately modified games and sport-specific settings. Students will also begin to use basic tactics in appropriately modified games and sport-specific situations, and apply their increasing knowledge of rules to keep games and activities safe.

Students use their newly developed skills while regularly participating in moderate to vigorous activities as part of an active and healthy life. They begin to form understandings about the links between physical activity and health. They also learn that they need energy to maintain their activity levels.

Through participation in physical activity, students develop their movement vocabulary, including motor terms and ways of describing the physical responses of their bodies to movement and feelings associated with participation in physical activity.

Students in the early years of schooling tend to understand the world by linking new concepts to their own experiences. Their initial exploration of the meaning of health is through their own experiences at home and at school, which provide concrete examples of relationships, food, physical activity, safety, care, illness and changes associated with the transition from home to school.

As students grow and develop, they become more aware of the broader world – of others' views and perspectives, how people differ, and the physical and social environments in which they live, learn and play. They become more skilled at observing what makes familiar environments safe or unsafe and healthy or unhealthy. Their increasing capacity to question allows them to consider how they would respond to different scenarios where their health or safety could be threatened.

Students' increasing attention span, recognition of aspects of the world outside themselves and continuing intellectual curiosity makes them more reflective and able to set their experiences within the broader family and community context. For example, they learn about influences on their choices and actions related to health and physical activity, how they promote feelings of self-worth in others, and the characteristics and needs of people at different stages of the human lifespan.

Years 5 to 8 – Building breadth and depth

During this stage of learning, students begin to develop more complex thinking skills and can apply more abstract thinking strategies to their learning.

Students in these years of schooling are experiencing rapid personal change, including physical growth, emotional and social development, and sexual development associated with puberty. The different rates at which individuals develop is also a major issue.

The development associated with puberty affects students' involvement in physical activity. Their increasing strength, coordination and control allows them to develop and refine locomotor and manipulative skills through practise and rehearsal, so that they can participate effectively in games, activities and sports. At this stage, students refine basic and complex motor skills and apply them to increasingly complex games, activities and sport-specific situations. Students participate in outdoor adventure activities in natural environments, which develop skills, knowledge and behaviours to enhance and promote safety. They use skills such as strategic thinking to solve real-life problems to improve game performance.

Students learn skills such as monitoring intensity during exercise, which help them maintain health-enhancing levels of physical activity. They participate regularly in moderate to vigorous physical activity and explore factors that influence participation.

Their social development helps facilitate cooperation, communication, planning and team development in sports and games, and they consider how these factors can influence participation and performance. They favour working with their peers during learning activities to improve performance, and develop skills in providing constructive feedback to a partner based on performance criteria. They also monitor and analyse their own performance.

Students at this stage acquire descriptive and analytical skills for discussing roles and rules in competitive sports. They undertake a variety of roles in team games, including player, coach, umpire and administrator. They reflect on their experiences and develop an awareness of the responsibilities that accompany leadership roles.

Students at this stage are experiencing significant physical, social and emotional changes associated with puberty. The changes associated with puberty usually occur between the ages of 10 and 14 years. For a few, puberty may begin as early as 8 or 9 years of age, and for others it may be much later. The *Health knowledge and promotion* dimension takes into consideration the intense developmental changes that students may experience at this stage. As students increasingly differentiate themselves from their peers, they reflect on the commonly asked question, 'Am I normal?'

Students' increasing recognition of belonging to a peer group parallels their developing sense of self. They explore how they define their own identity and that of others, including looking at beliefs and generalisations associated with characteristics such as gender, race and religion. They discuss the validity of such classifications. At this stage, they use problem-solving strategies relevant to the health interests and needs of young people, such as issues associated with sexual health and drug use. They discuss and evaluate strategies to minimise harm and protect their own and others' health.

They increasingly identify with groups and communities outside the family, which provides a context for studying the range of peers and social influences on their health-related behaviours, learning about establishing and maintaining relationships and considering views of what is right/wrong, good/bad, acceptable/unacceptable. They begin to see themselves as members of larger communities and to consider factors that affect their own and others' ability to access and use health information, products and services within their local area.

Students regularly engage with new subject matter; for example, discovering the range of influences on food and the importance of nutritional requirements for growth and activity at different stages of life.

IMPLEMENTATION

Please see the St. Martin de Porres' scope and sequence charts for Physical Education.

Health is developed as a unit of Inquiry at each year level. The dimensions are developed into learning intentions with the essential content of each domain covered over a two year period.

ASSESSMENT & REPORTING

Students and Staff are involved in identifying essential and preferred learning intentions for each unit of Health and Physical Education, from which success criteria for each is articulated, as a basis for assessment in each area.

The identified learning intentions are placed in the Termly report and parents are informed as to whether their child's work and progress has been judged as 'Below', 'At' or 'Above' the Standard expected at a particular time of year.

EVALUATION

Policy review on an annual basis – reviewed 2017, 2018.