

Position Statement

Approved by the
CASE Board of Directors
January 24, 2018

Science and Health Education

California has recently made great efforts in developing high-quality standards for multiple content areas that prioritize student learning and require thoughtful implementation. Schools and Local Education Agencies (LEAs) face many competing demands and difficult decisions when allocating both financial and staff resources towards providing a high-quality, well-rounded, broad course of study for all students, TK-12.

The California Next Generation Science Standards (CA NGSS) are a set of standards designed to begin in kindergarten and continue through grade 12. These standards are foundational and build year to year. It is essential that all students begin to learn science in the earliest grades, receive a complete and comprehensive science education through grade 12, and demonstrate the understandings needed to meet the CA NGSS Performance Expectations.

CASE believes that all students should have access to equitable, high-quality instructional time to meet all of the CA NGSS Performance Expectations. CASE believes that all teachers of science should have access to equitable, high-quality professional learning, planning time, and resources to prepare for, teach, and locally assess the CA NGSS.

Regarding health education, many factors, including the Health Education Content Standards (2008), legislation in the form of AB 329 (2015), and the revision of the California Health Education Framework (2018) are having and will continue to have an impact on how and who delivers health education instruction to students. CASE has found in some schools and LEAs, the delivery of health education instruction has been assigned to the science faculty. California science teachers have expressed their concern that science education is being negatively impacted by placing demands on K-12 science teachers to implement health education, using instructional time necessary to complete a full year of science.

CASE believes both science and health are necessary parts of a complete TK-12 education in conjunction, not in competition, with all areas of study in California classrooms. Sufficient time for science education is a critical part of providing students with equitable opportunity to access all content areas.

CASE strongly believes that credentialed health teachers are the best qualified to teach the CA Health Education Content Standards. A review of the CA Health Education Content Standards makes evident the skills and large portions of content are less about the biology or chemistry of health and more about the recreational habits, social dynamics, human interactions, personal health behavior and decision-making skills not addressed in the CA NGSS. Beyond this skills-based approach, the subject matter of health education requires the specialization of a credentialed health education teacher because of minimal content overlap.



CASE believes that all students should have access to equitable, high-quality instructional time to meet all of the CA NGSS Performance Expectations. CASE believes that all teachers of science should have access to equitable, high-quality professional learning, planning time, and resources to prepare for, teach, and locally assess the CA NGSS.

CASE supports the local determination of LEAs and schools to develop balanced educational programs that do not supplant a comprehensive science program to provide high-quality health education. Collaboration and communication that includes a team of educators from various curricular areas at local districts and schools should be used in determining the most balanced educational program attainable. If science teachers are tasked with being responsible for some or all Health Education Content Standards, it is essential they are supported in teaching science first and then aligning or integrating only appropriate content overlap with the CA Health Education Content Standards to CA NGSS.