

## EARLY ADOLESCENCE (8-10) HEALTH AND PHYSICAL EDUCATION SYLLABUS

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The Department of Education and Training Western Australia acknowledges the Curriculum Council's support in the development of this document and in providing permission to incorporate into the text of this document extracts and summaries from the *Curriculum Framework; Curriculum Framework Progress Maps – Health and Physical Education; Curriculum Framework Curriculum Guide – Health and Physical Education;* and the *Getting Started - Health and Physical Education, Curriculum Framework* support materials.

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### 1 Purpose of the Early Adolescence (8-10) Health and Physical Education Syllabus

#### **1.1 Introduction**

The Early Adolescence (8-10) Health and Physical Education Syllabus is part of a suite of complementary resources designed to support teachers to plan and deliver learning, teaching and assessment programs.

This syllabus contains information about:

- typical characteristics of students in the early adolescence phase of development and suggested approaches to learning, teaching and assessment
- content described in a scope and sequence statement relevant to the phase
- curriculum planning
- monitoring and assessing student progress.

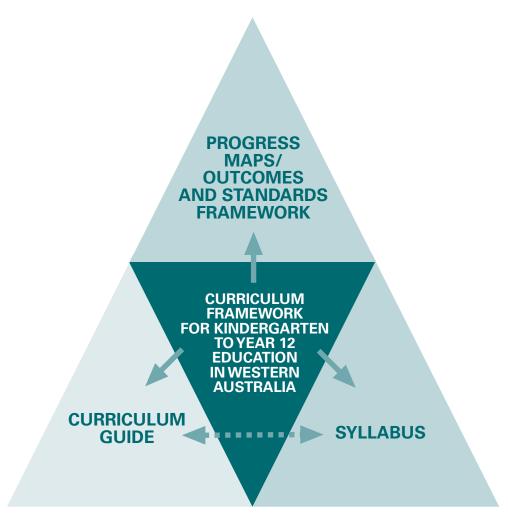
#### 1.2 Connection with other curriculum policy and support documents

This syllabus provides scope and sequence statements of content that link to the outcomes in the *Curriculum Framework*.

Health and Physical Education teachers can use this syllabus in conjunction with the *Curriculum Framework Curriculum Guide* – *Health and Physical Education.* By using the *Guide* in conjunction with this syllabus, Health and Physical Education teachers will have access to a range of content that they can use to meet the learning needs and interests of a range of students.

Teachers continue to use progress maps (*Curriculum Framework Progress Maps* – *Health and Physical Education/Outcomes and Standards Framework* – *Health and Physical Education*) to monitor students' progressive achievement of learning outcomes and may use other tools as appropriate to students' development, achievement and the context of the school. This syllabus provides advice on the year of schooling in which knowledge, skills and understandings would typically be introduced. Teachers' monitoring and assessment will inform their planning and assist with decisions about the specific knowledge, skills and understandings they teach their students. Health and Physical Education teachers will continue to exercise their professional judgement in making these decisions.

The following diagram illustrates the connections among the *Curriculum Framework*, *Curriculum Framework Progress Maps – Health and Physical Education*, *Curriculum Framework Curriculum Guide – Health and Physical Education* and this syllabus.



Connections among curriculum policy and support documents

#### 1.3 Inclusive planning

As they plan, Health and Physical Education teachers recognise and accommodate the different starting points, learning rates and previous experiences of individuals or groups of students.

To ensure the provision of a balanced curriculum for all students, teachers include the learning needs of individuals and groups as part of the process of classroom planning. Some groups or individuals, relatively few in number, may require a Documented Plan that provides a practical, explicit and succinct focus for learning. Most students will not require a long or detailed Plan.

Individuals and groups that could require a Documented Plan include:

- students for whom English is a second language or dialect
- students with disabilities
- students with learning difficulties
- gifted and talented students.

Documented Plans focus on learning and teaching adjustments in order to promote learning, participation or curriculum access, and may include:

- differences in the level of complexity of instructional materials or tasks
- alternative means of presentation or response to activities or assessments

- adapted content or expectations in class activities
- acceleration, which may be across the curriculum or single-subject acceleration
- flexible groupings within the class
- encouragement/explicit teaching of critical and creative thinking
- individual research
- enrichment and extension activities
- specialist support, such as visiting teachers or master classes
- teachers and parents planning together to ensure that learning outcomes and content reflect the learning needs of students.

### 2 Rationale for teaching Health and Physical Education in the early adolescence phase of development

#### 2.1 What is Health and Physical Education about?

Health and Physical Education provides opportunities for students to develop lifelong understandings of health issues and the skills needed for confident participation in sport and recreational activities. This enables students to make responsible decisions about health and physical activity and to promote their own and others' health and well-being.

# 2.2 Why teach Health and Physical Education?

Teaching Health and Physical Education provides students with opportunities to:

- enhance lifelong attitudes to health and fitness
- enjoy physical activity and develop relevant skills
- identify values and attitudes and their effects on themselves and others
- recognise health issues for themselves and others in the community and adopt appropriate change
- enhance personal development
- identify cultural differences and their impact

acquire foundation knowledge and skills essential for success within the Health and Physical Education learning area and for further study.

#### 2.3 How is the Health and Physical Education learning area structured?

The *Curriculum Framework Health and Physical Education Learning Area Statement* has five interrelated outcomes:

- Knowledge and Understandings
- Attitudes and Values
- Skills for Physical Activity
- Self-management Skills
- Interpersonal Skills.

Health and Physical Education teachers integrate content for all five outcomes to promote a holistic approach to learning about Health and Physical Education.

### 3 Health and Physical Education in the early adolescence phase of development

#### 3.1 Typical characteristics of students in the early adolescence phase of development

In this phase of development, students are experiencing adolescence and the accompanying emotional and physical changes. Early adolescent learners typically:

- learn to form, articulate and manage relationships
- develop greater independence in their lives
- question schooling and their engagement with it
- reflect on who they are, where they belong, what they value and where they are going
- develop their own voice, often challenging the voices of their parents/ caregivers, teachers and society
- aim for a stronger sense of belonging through interaction with their peers in wider adolescent cultures
- become aware that they can make changes for themselves and others.

#### 3.2 The early adolescent in Health and Physical Education

In the early adolescence phase of development, students shift from the concrete to the abstract. The breadth and depth of Health and Physical Education content to be taught increases, with a broadened focus on the development and application of understandings and skills.

In the early stages of adolescence, students understand that their actions affect their own health and safety, and the health and safety of others. They use basic self-management skills to meet basic health needs and interpersonal skills to contribute to group interactions and form positive relationships.

Students develop the capacity to appraise their own and others' health, use selfmanagement skills to manage risk and interpersonal skills to enhance personal and group relationships.

In the later stage of the early adolescence phase of development, students begin to use more sophisticated cognitive strategies. Students understand the consequences of their actions and the effects their actions have on their health and the health of others. They are able to plan for achievement of personal and group health and physical goals.

In the early adolescence phase of development, students move from being able to perform controlled movement skills and demonstrate basic game strategies to being able to perform specialised movement skills and apply them in controlled game situations.

Later in the early adolescence phase of development, students should be able to modify specialised skills and apply them to changing conditions and varying situations. They also learn to develop and implement strategies within established etiquette and rules to optimise performance in games, sports and other activities.

#### 3.3 Learning and teaching

The *Curriculum Framework* provides advice about approaches to learning and teaching that are based on research and professional knowledge about learning.

When using this syllabus to plan, Health and Physical Education teachers can make reference to the sections on learning and teaching in the *Curriculum Framework* overarching and learning area statements. This will assist with ensuring that pedagogical approaches are relevant to students' developmental stages as well as to learning within and across outcomes and learning areas. The following table outlines suggestions for incorporation of the *Curriculum Framework's* principles of effective learning and teaching in Health and Physical Education in the early adolescence phase.

#### Suggested approaches to learning and teaching

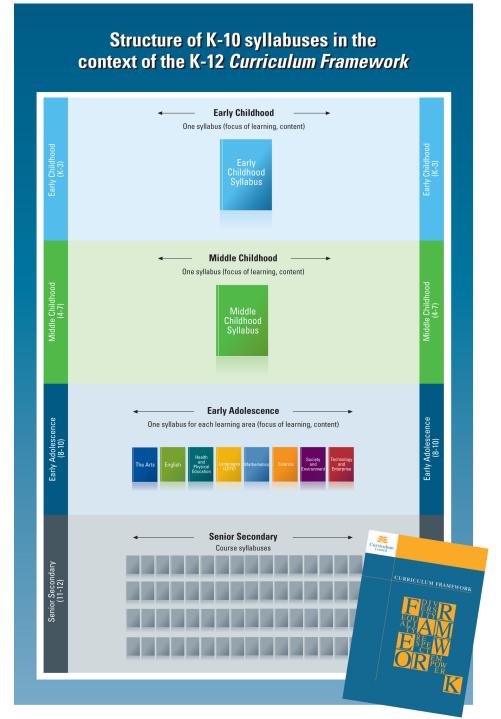
Principles of learning and teaching	Strategies years 8-10 Health and Physical Education teachers can use to implement the principles
<b>Opportunity to learn</b> Learning experiences should enable students to observe and practise the actual processes, products, skills and values which are expected of them.	<ul> <li>Model health practices and values and provide opportunities for students to practice them in realistic situations.</li> <li>Model and demonstrate physical activity skills and provide opportunities for students to practice them in realistic situations.</li> <li>Involve students in the planning and implementation of health, physical activity and sports programs.</li> </ul>
Connection and challenge Learning experiences should connect with students' existing knowledge, skills and values while extending and challenging their current ways of thinking and acting.	<ul> <li>Connect with and challenge student understanding of Health and Physical Education knowledge, values and skills.</li> <li>Connect Health and Physical Education being taught to students' learning in other curriculum areas.</li> <li>Encourage students to critically evaluate the opportunities and challenges associated with living in modern society.</li> <li>Encourage students to develop informed opinions.</li> </ul>
Action and reflection Learning experiences should be meaningful and encourage both action and reflection on the part of the learner.	<ul> <li>Provide opportunities for students to reflect on and monitor their performance and progress in Health and Physical Education.</li> <li>Make assessment criteria explicit and create opportunities for self-assessment.</li> <li>Provide opportunities for students to discuss and appraise the health and fitness levels of themselves and others.</li> </ul>
Motivation and purpose Learning experiences should be motivating and their purpose clear to the student.	<ul> <li>Illustrate the real-life applications and future uses of the Health and Physical Education skills and understandings students are learning.</li> <li>Connect learning in Health and Physical Education to students' lives and local environments.</li> <li>Provide students with purposeful and relevant activities that stimulate thought, inquiry and enjoyment.</li> <li>Connect learning in Health and Physical Education to further education and career pathways.</li> </ul>
Inclusivity and difference Learning experiences should respect and accommodate differences between learners.	<ul> <li>Design Health and Physical Education activities which cater for different learning styles, values, gender, abilities, interests, cultures and family backgrounds.</li> <li>Design Health and Physical Education activities which take into account students' differing physical, mental and emotional development.</li> </ul>

#### Suggested approaches to learning and teaching (continued)

Principles of learning and teaching	Strategies years 8-10 Health and Physical Education teachers can use to implement the principles	
Independence and collaboration Learning experiences should encourage students to learn both independently and from and with others.	<ul> <li>Design learning experiences which allow students some autonomy over how they learn and how they approach Health and Physical Education tasks.</li> <li>Design learning experiences which allow students to work collaboratively with other students on Health and Physical Education.</li> </ul>	
Supportive environment	<ul> <li>Build a classroom climate based on mutual respect and tolerance.</li> </ul>	
The school and classroom setting should be safe and	<ul> <li>Ensure students are provided with a safe environment and are adequately supervised at all times, especially in physical activities.</li> </ul>	
conducive to effective learning.	<ul> <li>Actively recognise achievement and progress in Health and Physical Education.</li> </ul>	
	<ul> <li>Treat mistakes as opportunities for learning, rather than signs of failure.</li> </ul>	
	<ul> <li>Promote school policies which support positive health values and the value of physical activity.</li> </ul>	

#### 3.4 The place of the Early Adolescence (8-10) Health and Physical Education Syllabus in the K-12 curriculum

This syllabus articulates content and approaches to learning, teaching and assessment that are a part of the kindergarten to year 12 approach embodied in the *Curriculum Framework*. The following diagram indicates the place of this syllabus in the overall K-12 curriculum for Western Australian schools.



The place of the Early Adolescence (8-10) Health and Physical Education Syllabus in the K-12 curriculum.

#### 3.5 Connection to Health and Physical Education learning in other phases of development

The Early Adolescence (8-10) Health and Physical Education Syllabus forms part of the continuum of Health and Physical Education learning from kindergarten to year 12. To ensure continuity, this syllabus builds on the focus of learning in the middle childhood phase. The understandings and skills developed in the early adolescence phase, provide the basis for achievement in the Curriculum Council's current and proposed senior secondary courses.

### Middle childhood phase of development

Learning in the middle childhood phase, links directly to the early adolescence phase through a continuation of topics that teach concepts, knowledge, skills and values in a developmental progression. In the middle childhood phase, students build upon prior learning and experiences to gain more detailed understandings of their personal health, growth and development, and the changes that occur from childhood, through puberty, to adulthood.

Students accomplish fundamental movement skills enabling them to develop confidence and competence in specific skills for more complex physical activity. This forms the foundation for progressively more difficult skills in changing conditions that students are required to perform in the early adolescence phase.

### Late adolescence phase of development

In the late adolescence phase, students review, reflect on, and critically analyse their own and others beliefs about health and societal issues. Learning enables students to demonstrate proficiency of understandings and skills required to achieve their personal best in school- and community-based sporting teams and outdoor pursuits.

In Health and Physical Education the current senior secondary courses are:

- Early Childhood Studies D656, E656
   Part A D670
   Part B D671
- Fitness D959, E959
- Health Studies D664, E664
   Part A D610
   Part B D611
- Independent Living D665, E665
   Part A D674
   Part B D675
- Marine and Maritime Studies
- Outdoor Education E608 Or Outdoor Education
- Physical Education Studies E600
   Or
   Physical Education Studies
   Sport, Specific Skills and Training E948
- Sport Sciences E947.

The proposed senior secondary Health and Physical Education courses are designed to facilitate students' achievement of specific Health and Physical Education learning outcomes. Courses currently in development by the Curriculum Council are:

Health Studies

### 4 Content

#### 4.1 Focus of learning

Health and Physical Education teachers and schools are integral to planning that provides a balanced curriculum to maximise students' achievement of the learning outcomes in the *Curriculum Framework*.

Using this syllabus, Health and Physical Education teachers and schools will be able to:

- connect with learning across the middle childhood phase of development and the senior secondary years of schooling
- continue to use the Curriculum
   Framework and the Curriculum
   Framework Curriculum Guide
   Health and Physical Education to
   plan balanced learning, teaching and
   assessment programs that meet the
   developmental learning needs of
   students in the context of each school.

## 4.2 Learning across the curriculum

Content has been embedded, where relevant, in the scope and sequence statement within this syllabus in accordance with agreed national and state priorities. The following cross-curriculum areas provide a basis for developing the knowledge, skills and understandings that will enable students to participate and prosper in society. Further advice about integration across learning areas is provided in Part 5 of this syllabus: Planning for learning in Health and Physical Education.

#### Literacy

Literacy is the ability to read and use written information and to write appropriately in a range of contexts. It also involves the integration of speaking, listening, viewing and critical thinking with reading and writing. It includes the cultural knowledge that enables a speaker, writer or reader to recognise and use language appropriate to different social situations.

The development of students' literacy skills and understandings is the responsibility of all teachers in all learning areas, and opportunities should be provided for students to develop literacy across the curriculum. The teaching of English, however, plays a particularly important role.

In the Health and Physical Education learning area students are required to practice

communication skills and appropriate learning and specific language to enhance understandings of health, physical activity and personal development.

#### Numeracy

Numeracy is the ability to effectively apply Mathematics in everyday, recreational, work and civic life. It is vital to the quality of participation in society.

In order to be numerate, students have the right to learn Mathematics and the language of Mathematics, to make sense of Mathematics, to be confident in their use of Mathematics, and to see how it can help them make sense of their world and the world of others.

Numeracy is a fundamental component of learning across all areas of the curriculum. The development and enhancement of students' numeracy skills and understandings is the responsibility of all teachers. The teaching of Mathematics, however, plays a particularly important role.

Students use numeracy skills in umpiring, measurement, navigation, timing, scoring, direction, relationships, patterns and rhythm. These numeracy skills are incorporated in games, strategies, tactics and outdoor education.

#### **Civics and Citizenship**

All students need opportunities to develop their understandings of, and commitment to,

Australia's democratic system of government, law and civic life.

Health and Physical Education teachers can achieve this by assisting students to develop the capacity to clarify and critically examine values and principles of Australian democracy and the ways in which it contributes to a fair and just society and a sustainable future. As well, Health and Physical Education teachers should assist students to develop the knowledge, skills and values that enable them to act as informed and responsible citizens.

Health and Physical Education address the significance of being a member of the community. Opportunities are provided for students to develop knowledge and skills to positively influence their own and others' personal health.

### Information and Communication Technologies (ICT)

Applying ICT as a tool for learning provides students with opportunities to become competent, discriminating, creative and productive users of ICT. Students' learning can be enhanced through integration of ICT across the curriculum, as they develop knowledge, skills and the capacity to select and use ICT to inquire, develop new understandings, create, and communicate with others.

Through learning with ICT, students have opportunities to understand the impact of ICT on society and to use ICT as a means of participating in society. Students should be encouraged to use ICT to locate information about Health and Physical Education. Specialised equipment is also used for leisure and recreational pursuits.

#### Values

People's values influence their behaviour and give meaning and purpose to their lives. While there is a range of value positions in society, there is also a core of shared values. These values are embedded in the learning outcomes in the *Curriculum Framework*. These shared values can be summarised as follows:

- a pursuit of knowledge and a commitment to achievement of potential
- self acceptance and respect of self
- respect and concern for others and their rights
- social and civic responsibility
- environmental responsibility.

Health and Physical Education promotes attitudes and values for a healthy active lifestyle. This includes providing students with opportunities to:

- accept personal responsibility for their health
- acknowledge the value of regular physical activity
- recognise and value support structures such as family, friends and school
- demonstrate a commitment to personal achievement.

#### **Physical activity**

Physical activity is movement of the body that expends energy. It includes high intensity activities such as sports and dance, as well as low intensity activities such as walking, climbing and exploring. Physical education is an essential part of quality physical activity opportunities. Physical activity can be incorporated into learning across the curriculum, providing students with opportunities to practise skills and increase fitness levels. Students are required to participate in at least two hours of physical activity per week.

#### 4.3 Organisation of content

Content in this syllabus is organised into:

- K-10 overview of contexts and topics
- integrated scope and sequence of contexts, topics and outcomes.

#### K-10 overview of contexts and topics

The kindergarten to year 10 overview of suggested contexts and topics in this syllabus provides opportunities for flexible planning and delivery. This overview is designed to support Health and Physical Education teachers to provide students with:

- an understanding of health issues
- skills needed for confident participation in sport and recreational activities
- skills needed to make responsible decisions about health and physical activity and to promote their own and others' health and well-being.

The K-10 overview consists of eleven broad context areas. The overview identifies topics grouped under the following contexts:

- Lifestyle Skills
- Wellness
- Growth and Development and Sexual Health
- Lifestyle Choices
- Drug Education
- Safety
- Fundamental Movement
- Strategies and Tactics
- Playing the Game
- Health Related Fitness and Recreation
- Outdoor Education.

Lifestyle skills can be taught independently or in an integrated Health and Physical Education program. A balanced Health and Physical Education program would incorporate topics from each of the contexts. It is not intended that every topic should be covered as a stand alone topic. Topics from different contexts can be taught concurrently eg Relationships can be taught during the drug education context and/or during the sexual health context or any of the contexts.

It is recommended that the content that students are taught as part of their learning in Health and Physical Education should come from a range of different contexts and topics thus allowing students opportunities to demonstrate their achievement of outcomes in an integrated way. The following graphic identifies the key features of the K-10 overview of contexts and topics for Health and Physical Education.

K-10 overview: Health and Physical Education – Suggested contexts and topics Jiestyle Skills: Communication Decision making Goal setting Leadership Resilience Risk management Assertiveness Self-control Self-understanding Social skills Stress management Jiestijs and betupitat astand alome topics or an be integrated throughout the Health and Physical Education program.											
ontext	K/P	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Wellness	a similarise and offerences of differences of differences of a postance	cooperation school and community Resilience motional control safe happy schools schols schools schools schools schools schools schols	personal identity building self- eateen and self- company attractions and self- developing attractions and attraction developing developing developing astractions and developing developin	attributes of self and others feelings about self being responsible being responsible accepting relationships accepting appropriate behaviour within behaviour	celebration of differences different relationships <b>Pesilience</b> self-estem and self-care optimistically strategies to cope minimise conflict managing conflict situations being assertive different companies of the problem how to respond to risky situations	bihaviours     optimistic thinking     optimistin thinking     optimistin thinking     optimistin	Administrating setting and self-concept of developing and positive self-concept concept of the self-concept of the self-c	<ul> <li>Self- understanding         developing and         maintaining         maintain         maintain         maintain         maintaining         maintaining         maintain         maintaintain         maintaintain         maintaintain         maintaintain         maintaintain         maintaintain         maintaintain         maintaintain         maintaintaintaintaintaintaintaintaintaint</li></ul>	<ul> <li>Self- understanding developing/ maintaining self- action of the self- recognition of roles recognition of roles recognition of roles recognition of roles responsibilities well-being - balancing thenal/ physical/mentail mental health</li> <li>Types and nature of relationships factors influencing relationships factors influencing relationships factors influencing relationships relationsh</li></ul>	self-esteem and self-concept mental health issues Developing respectful relationships	<ul> <li>Self. understanding secio-cultural sec</li></ul>

Key features of K-10 overview of contexts and topics for Health and Physical Education

#### Integrated scope and sequence statement

The integrated scope and sequence statement is structured to reflect teachers' integrated planning for learning in Health and Physical Education. It is organised as follows:

Contexts

Within each context are a series of recommended topics that apply to that context. If necessary topics can be adjusted to meet the specific needs of the student or the school.

#### Outcomes

The content component from the relevant outcomes that could be taught within the context and topics.

#### Content

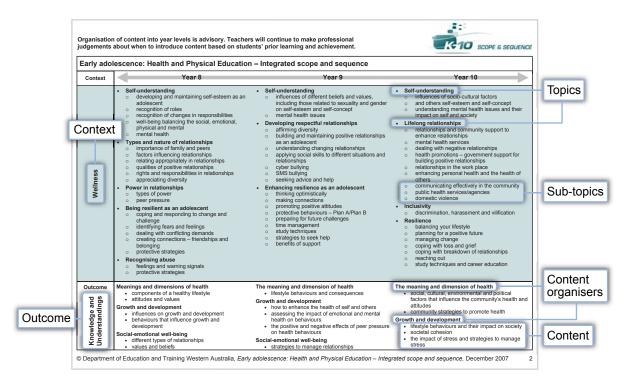
The content in the integrated scope and sequence statement is expressed at specific year levels to provide teachers with advice on starting points for the development of learning, teaching and assessment programs.

Teachers will use their knowledge of students' progressive achievement to make their own decisions about when it is appropriate to introduce content to individuals and groups of students.

The integrated scope and sequence statement combines the Knowledge and Understandings, Attitudes and Values, Skills for Physical Activity, Self-management Skills and Interpersonal Skills outcomes.

The integrated scope and sequence statement demonstrates how content can be taught to enable students to demonstrate achievement of the learning outcomes. It also enables teachers to map outcomes to contexts and topics thus ensuring students have opportunities to demonstrate achievement of learning outcomes across the Health and Physical Education learning area.

The following graphic identifies the key features of the scope and sequence statement for Health and Physical Education.



Key features of the scope and sequence statement for Health and Physical Education

### 5 Planning for learning in Health and Physical Education

School planning is an integral part of the improvement process. It typically involves four stages:

- · identification of needs through collection and analysis of student achievement information
- planning for improvement
- implementation
- review.

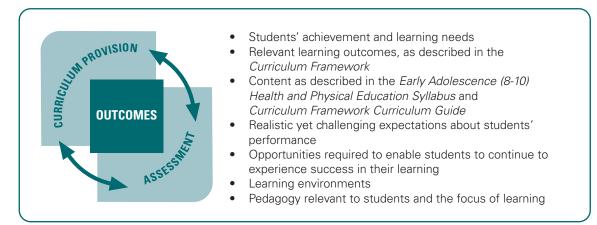
#### 5.1 Breadth and balance in curriculum planning

This syllabus identifies content relevant to learning in Health and Physical Education across the early adolescence phase of development.

When planning with this syllabus, school leaders and Health and Physical Education teachers will continue to exercise professional judgements about the full range of learning, teaching and assessment programs that will meet the learning needs of their students. These judgements are made in the context of the overall school plan, which takes into account relevant legislative and policy requirements, and community expectations.

School leaders and Health and Physical Education teachers may use this syllabus in conjunction with the *Curriculum Framework Curriculum Guide – Health and Physical Education* to plan for a rich and varied curriculum that takes into account the learning needs and interests of students.

#### 5.2 Whole-school planning



The elements of whole-school curriculum planning are encapsulated in the following diagram.

Elements of whole-school curriculum planning

### Students' achievement and learning needs

Examination of student achievement information enables school leaders and Health and Physical Education teachers to make judgements about whether students are making sufficient progress with their learning in relation to relevant standards. Sources of information include:

- teachers' records of student assessment
- teacher moderation of student work
- standardised test data.

#### Learning outcomes and content

Examination of student achievement information and judgements made about students' progress inform analysis of existing curriculum provision, which includes consideration of relevant learning outcomes and content. This enables school leaders and Health and Physical Education teachers to make informed decisions about the adequacy of current curriculum provision and whether modifications are required. It may result in curriculum modifications to ensure that students have adequate opportunities to make progress in their learning.

#### Expectations of students' performance

Consideration of outcomes and content also incorporates setting realistic, yet challenging, targets for student performance. Target setting ensures that decisions lead to school leaders and Health and Physical Education teachers developing and implementing challenging and developmentally appropriate learning, teaching and assessment programs for students.

#### **Continued success in learning**

The focus of whole-school curriculum planning is the continued learning success of all students in the school. While the majority of students will continue to achieve within an expected range, some students will require learning and teaching adjustments to support their learning. Whole-school curriculum planning assists school leaders and Health and Physical Education teachers to identify individuals and groups of students who require Documented Plans.

#### Learning environments

The environment of a school and its classrooms needs to be inclusive, supportive and promote learning. Issues that school leaders and Health and Physical Education teachers could review as part of whole-school curriculum planning include:

- working relationships among
  - teachers
  - students
  - teachers and students
  - teachers, students and their parents/caregivers
  - the school and the community
- management of student behaviour
- level of inclusion in relation to language background, gender, culture, socioeconomic status, abilities or disabilities, and individual differences

- existence of adequate and fair access to, and use of, appropriate and varied resources (space, equipment, materials and technology)
- ways in which students are grouped and arranged in the school and classrooms
- ways in which time is allocated for curriculum provision
- learning opportunities outside the school
- opportunities for students to negotiate the curriculum, if appropriate.

#### Pedagogy

Whole-school curriculum planning includes school leaders and Health and Physical Education teachers reviewing and selecting a range of approaches to learning, teaching and assessment. Pedagogical approaches selected by teachers should be informed by the principles of learning and teaching in the *Curriculum Framework*.

#### **Time allocation**

To achieve a balanced curriculum, schools should provide the appropriate resources, including time, to ensure progress towards achievement of all learning outcomes identified in this syllabus.

When making decisions about the allocation of teaching time the following should be considered:

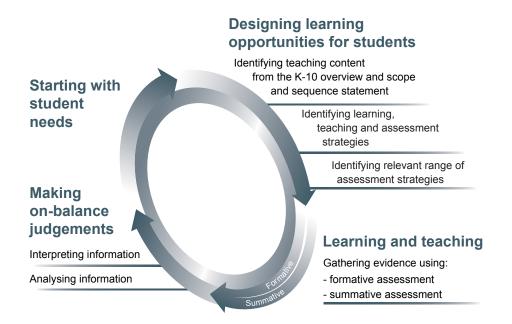
• while the eight learning areas in the *Curriculum Framework* are all held in equal esteem, equal time does not need to be allocated to each

- decisions about teaching time should be influenced by student achievement data, indicating students' learning needs in the context of the school
- school system/sector priorities and curriculum policies
- provision of pathways to senior schooling that are appropriate to students' achievement and aspirations
- students from years 1-10 should participate in at least two hours of physical activity per week.
- expectation of the teaching of content described in the National Consistency in Curriculum Outcomes Statements of Learning in Civics and Citizenship, English, ICT, Mathematics and Science.

#### 5.3 Planning using the Early Adolescence (8-10) Health and Physical Education Syllabus

Classroom planning caters for both groups and individual students and is guided by the directions set in whole-school and learning area curriculum planning.

The key elements of planning for learning are outlined in the diagram below. Planning begins with an assessment of students' learning needs so that teachers can design developmentally appropriate programs. Relevant content can then be selected from the K-10 overview and scope and sequence statement in this syllabus. Teachers select approaches to learning, teaching and assessment that are relevant to their students and the contexts of their schools.



Key elements of planning for learning

Considerations for planning across the phase include:

- incorporating the focus of learning and strategies the school has committed to in the whole-school curriculum plan
- use of K-10 overview and scope and sequence statement as a basis for auditing, validating and augmenting existing programs as required
- collaborative planning and decision making about contexts for learning and teaching in Health and Physical Education to ensure minimal repetition
- consideration of available resources
- continuation of year level planning with a focus on adapting programs, if required, to meet the needs of groups and individuals.

When using this syllabus for planning learning, teaching and assessment programs in Health and Physical Education, teachers can:

- identify Curriculum Framework learning outcomes that will be highlighted in the unit of work/program
- reflect the principles of learning, teaching and assessment in the *Curriculum Framework*
- use the K-10 overview and/or scope and sequence statement to select relevant content
- identify appropriate targets for particular groups and individuals that connect to whole-school targets
- identify what students will need to do to demonstrate their learning
- identify review points for monitoring and assessing student progress
- gather information about students' learning using a range of assessment strategies and provide ongoing feedback that is meaningful to students
- make ongoing use of information about student progress to reflect on and modify learning and teaching opportunities.

#### 5.4 Integrating learning

The *Curriculum Framework* identifies effective learning as that which enables students to make connections between ideas, people and things, and to relate local, national and global events and phenomena. Making connections across learning areas helps students to appreciate the interconnected nature of human learning and knowledge. Students are more likely to achieve desired learning outcomes when they see connections between their various learning experiences and can build on their experiences across learning areas.

#### **Planning for integration**

An integrated approach to curriculum planning links content across learning areas in purposeful ways. Integrating learning enables Health and Physical Education teachers to plan learning, teaching and assessment programs that focus on:

- making the purpose and relevance of learning explicit
- supporting complementary learning and consistent application of knowledge, understandings and skills across learning areas
- enhancing learning by providing opportunities for students to make authentic connections within and across learning areas, their school, their home and the wider context of the world
- the efficient use of learning and teaching time.

When supporting integration of learning, Health and Physical Education teachers:

- identify connected ideas across learning areas and relevant contexts for learning as a basis for learning, teaching and assessment programs
- teach relevant skills and knowledge, and then provide opportunities for practice, in a range of contexts.

When planning and delivering integrated programs, it is important to also maintain a balanced focus on the content and learning outcomes related to specific learning areas. This ensures that students have appropriate opportunities for rigorous and specialised learning as well as opportunities to integrate their learning.

#### Links with other learning areas

When making links across the curriculum, it is important for teachers to ensure that:

- students are involved in identifying and planning the links
- knowledge and skills are developed in a consistent way.

Examples of opportunities for Health and Physical Education teachers to make links to other learning areas are outlined on the following diagram.

#### Opportunities to integrate cross-curriculum areas

#### The Arts

The Health and Physical Education learning area draws on some of the understandings, elements, processes and skills students develop in The Arts. The links between the Health and Physical Education and The Arts learning areas are evident when students are taught to:

- use rhythmically coordinated movement patterns, established in rhythmic gymnastics, callisthenics and aerobics, applied to other physical skills
- use music to create different movement responses
- use elements of visual arts to promote health-enhancing behaviours.

#### English

The Health and Physical Education learning area utilises many aspects from the English learning area. Aspects from the English learning area are utilised in both written and oral forms and also involve the use of body language and body cues. The links between the Health and Physical Education and English learning areas are evident when students are taught to:

- · use appropriate language in a variety of situations
- use language to assist the development of their self esteem and confidence
- communicate values, attitudes and beliefs that impact on decisions about healthy lifestyles.

#### Languages (LOTE)

The links between the Health and Physical Education and Languages (LOTE) learning areas are evident when students are taught to:

- develop an understanding of cultural input towards attitudes, beliefs and values on health and safety concepts in target language communities
- explore target cultures associated with games, sport, food or leisure activities that contribute to the Australian way of life
- make statistical comparisons of health issues in target language cultures.



#### **Technology and Enterprise**

The Health and Physical Education learning area utilises the skills and understandings students develop in the Technology and Enterprise learning area. The links between the Health and Physical Education and Technology and Enterprise learning areas are evident when students are taught to:

- access, select and use materials which enhance and promote health at home, school, the community and the workplace
- apply operational, manipulative and organisational skills when selecting and using technology
- apply personal health and safety concepts to ensure personal well-being
- demonstrate collaborative behaviours to ensure a cooperative learning environment
- conduct individual research
- undertake task prioritisation, time management and goal setting.

#### Science

The Health and Physical Education learning area has strong links with the Science learning area. The knowledge and understanding of the physical, biological and natural worlds are complementary to both learning areas. Investigation and scientific processes are utilised in the Health and Physical Education learning area. The links between the Health and Physical Education and Science learning areas are evident when students are taught to:

- investigate the physical, mental, emotional and environmental variables that affect their state of well-being
- form reasoned judgements about issues such as recycling, advertising and the use of drugs to enhance performance
- apply Science in their daily lives in regard to health and hygiene in the home, school and community.

#### Mathematics

Numeracy skills from the Mathematics learning area can be incorporated in both a practical and theoretical way into the Health and Physical Education learning area. These skills can be used as part of time management of physical activities, game analysis, planning or statistical interpretation of data. The links between the Health and Physical Education and Mathematics learning areas are evident when students are taught to:

- score
- understand dimensions of fields
- measure time of play
- use spatial awareness
- calculate averages
- use graphs to make observations
- use navigation skills
- use common measuring equipment
- · collect data, such as pulse rates.

#### **Society and Environment**

The Health and Physical Education learning area utilises many aspects from the Society and Environment learning area. The links between the Health and Physical Education and Society and Environment learning areas are evident when students are taught to:

- investigate the way people interact with each other and their environments
- examine consequences of cultural and environmental changes
- make informed decisions about food, clothing, shelter, safety and social relationships
- examine social, political, environmental and cultural factors and their effect on the health of themselves and the community
- · promote active citizenship.

### 6 Assessment

Assessment is an integral part of learning and teaching and informs curriculum planning.

The purpose of assessment is to:

- monitor students' progress to inform teacher planning and student learning
- gather and interpret evidence that enables Health and Physical Education teachers to make informed decisions on students' achievement and progress as a basis for reporting.

Assessment relies on the professional judgement of the teacher. It is based on valid, comprehensive and reliable information about student achievement that has been collected over time. Assessment tasks must be fair, challenging and educative.

Health and Physical Education teachers are expected to provide feedback to students on learning tasks, so that students know what to do to improve and teachers know what next to plan for in their teaching.

The scope and sequence statement in this syllabus has been developed with reference to information on students' progressive achievement of learning outcomes as detailed in the Curriculum Framework Progress Maps – Health and Physical Education/Outcomes and Standards Framework – Health and Physical Education.

In planning and delivering learning, teaching and assessment programs using the scope and sequence statement, Health and Physical Education teachers can support students to work towards or beyond what is described in relevant standards. Students with particular needs may, however, require individual or group Documented Plans to support their learning.

Schools should have an assessment policy based on the principles of assessment in the *Curriculum Framework* and communicate this to students and the school community.

#### 6.1 The process of assessment

Assessment involves:

- providing students with opportunities to apply and demonstrate what they know, understand and can do
- gathering and recording the evidence of students' demonstrations of their learning

- using evidence to make on-balance judgements about students' achievement
- giving students advice about how to improve and continue their learning
- providing students with opportunities to be involved in reviewing assessment information and setting learning goals
- providing students with the skills necessary to successfully complete the assessment type.

#### 6.2 Principles of assessment

Assessment should:

- be based on the belief that all students can improve in their learning
- be developed with reference to the principles of learning, teaching and assessment in the Curriculum Framework
- be referenced to common standards as described in the Curriculum Framework Progress Maps – Health and Physical Education/Outcomes and Standards Framework – Health and Physical Education
- provide feedback to students about the progress of their learning, the quality of their work and the direction they need to take in future learning
- enhance students' resilience and motivation

- recognise and value the diverse backgrounds and experiences of students
- involve observing students during learning activities
- enable collaboration with colleagues, in and across schools, to evaluate evidence so that judgements about student achievement are valid, reliable and comparable
- result in adjustments to teaching to take into account the information that assessment provides
- allow for input from students and parents/caregivers.

Health and Physical Education teachers will use their professional judgement to inform decisions about when to assess, whether the assessment evidence should be collected formally or informally, and which evidence provides the most valuable and reliable information about student learning.

# 6.3 Assessment in Health and Physical Education

Health and Physical Education teachers use a range of assessment strategies to enable information to be gathered about the knowledge, understanding and skills that students acquire.

Assessment should reflect current knowledge of the typical characteristics of students in

the early adolescence phase of development. This will enable Health and Physical Education teachers to consider how students in this phase of development, behave, think, interact and learn when planning, developing and implementing assessment tasks.

Formative assessment usually focuses on particular aspects of learning to enable Health and Physical Education teachers to modify learning and teaching programs and provide students with specific information to guide improvement. Incidental and detailed feedback can help to identify gaps in learning and allow Health and Physical Education teachers and students to monitor progress. Health and Physical Education teachers can gather information about student progress through observation of students' engagement with tasks, discussions and class work.

Summative assessment usually focuses on determining the extent to which students have achieved Health and Physical Education learning outcomes.

Summative judgements are informed by student achievement over time and across a range of contexts.

# Types of assessment suitable for early adolescence (8-10) Health and Physical Education

Types of assessment	Methods of gathering information
Performance/Production Performance	<ul> <li>performance, which can be specific to activity, skills/strategies, expedition/excursion/game play</li> </ul>
Performance related assessment	field work
tasks enable students to perform physical skills/tactics	• games
and strategies and demonstrate	• skill drills
conceptual understandings, interpersonal skills and self-	peer tutoring
management skills in the physical sense.	role plays
	<ul> <li>videotapes and other ICT</li> </ul>
Production	group performances
Production related assessment tasks enable students to create	competitions
practical and/or theoretical health and physical education works	ranking activities
using a range of skills, processes,	debates
techniques and technologies.	performance on planning
	reflection
	explore performance possibilities
	creation of movement sequences
	<ul> <li>control and manage the process</li> </ul>
	designing action plans
	demonstration of safety, personal skills
	cooperative and collaborative working with others
	performing leadership roles
	<ul> <li>demonstrating understanding of the environment</li> </ul>
	<ul> <li>demonstrating relationship with nature and environment</li> </ul>
	<ul> <li>demonstrating understanding of environmental management</li> </ul>

# Types of assessment suitable for early adolescence (8-10) Health and Physical Education (continued)

Types of assessment	Methods of gathering information
Investigation Students research works in which they plan, conduct and communicate an investigation.	<ul> <li>planning</li> <li>conducting</li> <li>communicating</li> <li>journals and learning logs</li> <li>comparing and contrasting</li> <li>researching</li> <li>research notes</li> <li>investigating</li> <li>defining</li> <li>timelines</li> <li>digital presentations</li> <li>exploring issues</li> <li>reflecting on actions, beliefs, attitudes and values</li> <li>extended research and presentation in written, oral, visual or multimedia forms, using appropriate conventions</li> </ul>
Response Students apply their knowledge and skills in analysing and responding to a series of stimuli or prompts.	<ul> <li>analyse performance</li> <li>respond to stimuli or prompts situational response performance</li> <li>evaluate performance</li> <li>application of skills and processes</li> <li>response analysis information collection</li> <li>video tagging of response plays in the physical environment (eg moving into space)</li> <li>performance of set plays</li> <li>attitude surveys</li> <li>concept maps</li> <li>demonstrations of skills in simulated and real contexts</li> <li>dialogue and listening</li> <li>individual discussions with students</li> <li>journals and learning logs</li> <li>open-ended questioning</li> </ul>

# Types of assessment suitable for early adolescence (8-10) Health and Physical Education (continued)

Types of assessment	Methods of gathering information
Response (continued)	<ul> <li>open-ended tasks</li> <li>oral presentations</li> <li>projects/assignments/reports</li> <li>reflective student assessment</li> <li>role plays</li> <li>self and peer assessment</li> <li>sketches and drawings</li> <li>structured whole or small group discussions</li> <li>student portfolios</li> <li>tests</li> <li>work in progress</li> <li>work samples</li> <li>written material (eg maps, diagrams, summary sketches)</li> <li>models</li> <li>practical skills tests</li> <li>construction of interpretive questions</li> <li>responses based on the interpretation of primary/ secondary sources including a variety of question types</li> </ul>

# 6.4 Recording assessment information

When recording assessment information, Health and Physical Education teachers should select methods that:

- are time efficient
- are effective in informing student
   learning
- enable assessment over a period of time
- accommodate a range of assessment types
- can be linked effectively to standards that inform reporting.

Methods of recording assessment information include:

- anecdotal records
- annotated work samples
- audio and visual (including photographic and video) recordings
- checklists
- Documented Plans (Individual Education Plans and Group Plans)
- marking keys
- observation notes
- portfolios
- reflection sheets, diaries or scrapbooks
- records of test results
- rubrics

- sample assessment items
- student/teacher journals.

Teachers can use the *Curriculum Framework Progress Maps* – *Health and Physical Education/Outcomes and Standards Framework* – *Health and Physical Education* to inform the recording of assessment information.

# 6.5 Making judgements and reporting

Teacher judgements are fundamental to assessment and reporting processes.

Health and Physical Education teachers assess using ways with which they feel comfortable to monitor students' progress and determine summative grades for reporting.

Health and Physical Education teachers do not have to level or grade every piece of student work.

Judgements about student achievement are based on knowledge of the students and their work, accumulated over time and in a range of situations. The frequency, consistency and degree of independence shown by students in demonstrating achievement provide a basis on which Health and Physical Education teachers can make on-balance judgements about assessment of learning outcomes. Valid and reliable on-balance judgements can be supported by moderation processes within and between schools. Moderation processes should take into account individual staff differences and readiness.

Health and Physical Education teachers also refer to information from standardised tests to inform their judgements about students' achievement.

Teacher judgements inform summative grades for reporting. Reporting is a process, both formal and informal, for providing information about the progress of student achievement. It provides a vital part of developing and maintaining the partnership between school and home.

When reporting, care needs to be taken to give students and parents/caregivers information that:

- is free of jargon and complex technical language
- focuses on strengths and what the student has achieved in the learning period
- reports student achievement in relation to relevant standards
- is reliable and valid within and across schools
- is comprehensible to them (this may require use of interpreters and/or translations).

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# *Early Adolescence (8-10) Health and Physical Education Syllabus* Summary

The *Early Adolescence Health and Physical Education (8-10) Syllabus* is designed to support teachers with planning and delivering learning, teaching and assessment programs in the context of the *Curriculum Framework*. The syllabus details content at each year of schooling across the early adolescence phase of development. When using these advisory materials, teachers will continue to make professional judgements about when to introduce content based on students' prior learning and achievement.

#### 1 Purpose

This syllabus provides teachers with advice about content, planning, teaching and assessment in Health and Physical Education in years 8-10.

#### Connections with other curriculum policy and support documents

This syllabus is consistent with, and can be used in conjunction with, the following policy and support documents:

- Health and Physical Education Learning Area Statement in the Curriculum Framework for Kindergarten to Year 12 Education in Western Australia produced by the Curriculum Council of Western Australia. The Curriculum Framework establishes the learning outcomes expected of all Western Australian students from kindergarten to year 12.
- The Curriculum Council's Curriculum Framework Progress Maps Health and Physical Education. These describe progressive student achievement in Health and Physical Education from kindergarten to year 12 and are a guide for monitoring and planning for student achievement.
- The Department of Education and Training's Outcomes and Standards Framework
   Health and Physical Education. This is similar to the Health and Physical Education
   Progress Maps but also includes Achievement Targets for years 3, 5, 7 and 9 in WA public schools.

 The Curriculum Council's Curriculum Framework Curriculum Guide - Health and Physical Education. This describes, in phases of development, content to support students' progress in Health and Physical Education from kindergarten to year 12.

As part of a K-12 approach to Health and Physical Education, this syllabus also:

- builds on the Middle Childhood (4-7) Syllabus
- prepares students for the more specialised Health and Physical Education courses in years 11 and 12.

#### 2 Rationale

#### Key features of Health and Physical Education

Health and Physical Education develops students' abilities to:

- make informed and responsible decisions about the health and physical well-being of themselves and others
- enjoy physical activity and develop relevant skills.

#### Organisation of the Health and Physical Education learning area

Five interrelated outcomes are identified in the *Curriculum Framework Health and Physical* Education Learning Area Statement:

- Knowledge and Understandings
- Attitudes and Values
- Skills for Physical Activity
- Self-management Skills
- Interpersonal Skills.

The scope and sequence statement in this syllabus integrates learning across all of the five outcomes.

#### 3 Phase of Development

#### **Teaching Health and Physical Education in years 8-10**

The Curriculum Framework identifies seven principles of effective learning and teaching:

- opportunity to learn
- connection and challenge
- action and reflection
- motivation and purpose
- inclusivity and difference
- independence and collaboration
- supportive environment.

The following table outlines suggestions on how the principles of effective learning and teaching can be incorporated into the teaching of Health and Physical Education in years 8-10 in ways which take account of students' current stages of development.

#### Suggested approaches to learning and teaching

Principles of learning and teaching	Strategies years 8-10 Health and Physical Education teachers can use to implement the principles
<b>Opportunity to learn</b> Learning experiences should enable students to observe and practise the actual processes, products, skills and values which are expected of them.	<ul> <li>Model health practices and values and provide opportunities for students to practice them in realistic situations.</li> <li>Model and demonstrate physical activity skills and provide opportunities for students to practice them in realistic situations.</li> <li>Involve students in the planning and implementation of health, physical activity and sports programs.</li> </ul>
Connection and challenge Learning experiences should connect with students' existing knowledge, skills and values while extending and challenging their current ways of thinking and acting.	<ul> <li>Connect with and challenge student understanding of Health and Physical Education knowledge, values and skills.</li> <li>Connect Health and Physical Education being taught to students' learning in other curriculum areas.</li> <li>Encourage students to critically evaluate the opportunities and challenges associated with living in modern society.</li> <li>Encourage students to develop informed opinions.</li> </ul>
Action and reflection Learning experiences should be meaningful and encourage both action and reflection on the part of the learner.	<ul> <li>Provide opportunities for students to reflect on and monitor their performance and progress in Health and Physical Education.</li> <li>Make assessment criteria explicit and create opportunities for self-assessment.</li> <li>Provide opportunities for students to discuss and appraise the health and fitness levels of themselves and others.</li> </ul>
Motivation and purpose Learning experiences should be motivating and their purpose clear to the student.	<ul> <li>Illustrate the real-life applications and future uses of the Health and Physical Education skills and understandings students are learning.</li> <li>Connect learning in Health and Physical Education to students' lives and local environments.</li> <li>Provide students with purposeful and relevant activities that stimulate thought, inquiry and enjoyment.</li> <li>Connect learning in Health and Physical Education to further education and career pathways.</li> </ul>
Inclusivity and difference Learning experiences should respect and accommodate differences between learners.	<ul> <li>Design Health and Physical Education activities which cater for different learning styles, values, gender, abilities, interests, cultures and family backgrounds.</li> <li>Design Health and Physical Education activities which take into account students' differing physical, mental and emotional development.</li> </ul>

#### Suggested approaches to learning and teaching (continued)

Principles of learning and teaching	Strategies years 8-10 Health and Physical Education teachers can use to implement the principles
Independence and collaboration Learning experiences should encourage students to learn both independently and from and with others.	<ul> <li>Design learning experiences which allow students some autonomy over how they learn and how they approach Health and Physical Education tasks.</li> <li>Design learning experiences which allow students to work collaboratively with other students on Health and Physical Education.</li> </ul>
Supportive environment The school and classroom setting should be safe and conducive to effective learning.	<ul> <li>Build a classroom climate based on mutual respect and tolerance.</li> <li>Ensure students are provided with a safe environment and are adequately supervised at all times, especially in physical activities.</li> <li>Actively recognise achievement and progress in Health and Physical Education.</li> <li>Treat mistakes as opportunities for learning, rather than signs of failure.</li> <li>Promote school policies which support positive health values and the value of physical activity.</li> </ul>
Inclusivity and difference Learning experiences should respect and accommodate differences between learners.	<ul> <li>Design Health and Physical Education activities which cater for different learning styles, values, gender, abilities, interests, cultures and family backgrounds.</li> <li>Design Health and Physical Education activities which take into account students' differing physical, mental and emotional development.</li> </ul>

#### 4 Content

Content in this syllabus is organised into:

- an integrated K-10 overview
- an integrated scope and sequence statement expressed in year levels to provide advice on starting points for learning, teaching and assessment programs.

#### 5 Planning

When using the content in this syllabus to plan for learning in Health and Physical Education, teachers need to take into account the following:

- relevant policies and curriculum priorities
- students' achievement and learning needs
- opportunities to integrate learning
- the *Curriculum Framework's* principles of learning, teaching and assessment.

#### 6 Assessment

The purpose of assessment in Health and Physical Education is to monitor students' progress to:

- provide feedback
- inform planning, teaching and reporting.

When assessing, Health and Physical Education teachers need to take into account the *Curriculum Framework's* principles of assessment and keep in mind the following:

- assessment relies on teachers' professional judgements
- assessment should be referenced to common standards as described in the Curriculum Framework Progress Maps – Health and Physical Education/Outcomes and Standards Framework – Health and Physical Education
- Health and Physical Education teachers do not have to formally level or grade every piece of student work
- Health and Physical Education Departments should have an assessment policy which is communicated to students and other members of the school community

- assessment can be undertaken in a variety of ways including via collection and marking of student work, observation, checklists, portfolios, recordings and anecdotal records
- Health and Physical Education teachers can select from a range of published or teacher developed resources to record assessment information.