



A Lifespan Approach to Health Education: An Evaluation Instrument for Instructional Materials

This evaluation instrument provides a means for assessing the degree to which textbooks and instructional materials in health education contain accurate and necessary information about aging across the lifespan. It allows educators to select materials that will best enhance students' knowledge and skills to live long lives with an increasingly older population.

Part I: Content on Aging for Health Education

Directions: Indicate the degree to which the material under review addresses each concept.

None 1	2	Some 3	4	A Lot 5	
					1. People are living longer lives and the population of older people is growing.
					2. Potential human lifespan has not changed but modern advances in nutrition, sanitation and immunization have increased life expectancy within the biological limits of the lifespan
					3. Women outlive men and their percentage of the older population increases with age.
					4. Family structure and dynamics are changing with more generations and fewer people in each generation.
					5. The older population in the United States, like the general population, is becoming more ethnically diverse.
					6. Continued gains in life expectancy are not guaranteed but depend on health choices made by individuals and society.
					7. Aging is a gradual and complex life-long process, not simply an end-of-life stage preceding death.
					8. While there is a general pattern of human aging, the timing and degree of physical change varies considerably from person to person.
					9. People tend to carry into later life personality traits and cohort characteristics developed early in life.
					10. Quality of health and length of life depends more on personal health habits, lifestyle and environmental factors than on genetic inheritance.
					11. Chronic health problems associated with later life are heavily influenced by health practices early in life.
					12. Although gradual physical decline occurs over a lifetime, it is normal for older adults to enjoy good health and lead active lives.

None 1	2	Some 3	4	A Lot 5	
					14. Sexuality is a characteristic of people at all ages.
					15. People of all ages are capable of learning and adapting to change.
					16. Severe memory loss and mental confusion are not normal consequences of aging.
					17. Psychological well-being is interconnected with physical and social health.
					18. Ageism, rooted in cultural myths and misinformation, is harmful to health.
					19. Public policies related to aging affect the well-being of older and younger generations.
					20. An aging population confronts society with difficult ethical choices in matters of medical treatment and health care.
					21. The growth of the older population is creating new health career opportunities that require knowledge about aging.

Part II: Useful Vocabulary

Directions: The following are useful non-technical terms that might help persons make health-related decisions today. Circle all the words used in the material under review. Add any additional useful terms found in the spaces below the list.

ageism
aging
caregiving
cohort
elder/elderly
generation
geriatrics
gerontology

intergenerational
life cycle
life expectancy
lifespan
living will
longevity
longterm care
Medicare

Medicaid
menopause
middle age/mid-life
multigenerational
families
nursing home
pension
retirement
widow/widower

Part III: Manner of Presentation

Directions: Consider the organization of content and the use of language, photographs and illustrations. Assess how information about aging is presented in the material under review.

Poor 1	2	Good 3	4	Great 5	
					1. Health topics and information about families and communities are presented as they affect people across generations and across the lifespan.
					2. The relationship between health practices during youth and health status throughout life is emphasized.
					3. Information and photographs related to the life-long process of aging are distributed appropriately throughout the material, not confined mainly to one section.
					4. The emphasis of content about aging and older adults in text and illustrations is more on wellness than on illness.
					5. Diversity among older adults is reflected in illustrations and text (i.e., not using such inappropriate terms as "the aged" or "the elderly" ; or depicting older people as interaction only with caregivers or other older people).
					6. The overall language and visual portrayal of older people are not patronizing and avoid negative or positive stereotypes.
					7. Material is accurate, up-to-date and current in terms of information, topics and issues presented.

Part IV: Additional Comments

Relevancy of Aging-Related Content to Health Education

Aging-related knowledge and skills are appropriate for traditional health education content areas (i.e., community health, family life, nutrition, personal health). A lifespan perspective to health education can be integrated into the six adolescent risk behaviors identified by the U.S. Centers for Disease Control and Prevention (tobacco use, dietary patterns sedentary lifestyle, sexual behaviors, alcohol and drug use, injury).

Below are standards adopted by the 1997 Joint Committee on National Health Education Standards. Following the standards is a table that suggests examples of which standards content on aging could be integrated.

National Health Education Standards

1. Students will comprehend concepts related to health promotion and disease.
2. Students will demonstrate the ability to access valid health information and health-promoting products and services.
3. Students will demonstrate the ability to practice health-enhancing behaviors and reduce health risks.
4. Students will analyse the influence of culture, media, technology and other factors on health.
5. Students will demonstrate the ability to use interpersonal communication skills to enhance health.
6. Students will demonstrate the ability to use goal-setting and decision-making skills to enhance health.
7. Students will demonstrate the ability to advocate for personal, family, community health.

National Health Education Standards	Content on Aging for Health Education
4,7	1. People are living longer lives and the population of older people is growing.
1,2,4	2. Potential human lifespan has not changed but modern advances in nutrition, sanitation and immunization have increased life expectancy within the biological limits of the lifespan
2,3,7	3. Women outlive men and their percentage of the older population increases with age.
5,7	4. Family structure and dynamics are changing with more generations and fewer people in each generation.
2,4	5. The older population in the United States, like the general population, is becoming more ethnically diverse.
1,6,7	6. Continued gains in life expectancy are not guaranteed but depend on health choices made by individuals and society.
1,3,6,7	7. Aging is a gradual and complex life-long process, not simply an end-of-life stage preceding death.
1,2,3,4	8. While there is a general pattern of human aging, the timing and degree of physical change varies considerably from person to person.
1,3,4	9. People tend to carry into later life personality traits and cohort characteristics developed early in life.

National Health Education Standards	Content on Aging for Health Education
1,2,3,5	11. Chronic health problems associated with later life are heavily influenced by health practices early in life.
1,4,7	12. Although gradual physical decline occurs over a lifetime, it is normal for older adults to enjoy good health and lead active lives.
1,4,7	13. Disabilities, sensory losses and chronic diseases are not inevitable aging conditions and, like death, may occur at any age.
1,4,7	14. Sexuality is a characteristic of people at all ages.
4,5,7	15. People of all ages are capable of learning and adapting to change.
1,2,3,4,5	16. Severe memory loss and mental confusion are not normal consequences of aging.
5,6,7	17. Psychological well-being is interconnected with physical and social health.
4,5	18. Ageism, rooted in cultural myths and misinformation, is harmful to health.
2,4,7	19. Public policies related to aging affect the well-being of older and younger generations.
1,2,4,7	20. An aging population confronts society with difficult ethical choices in matters of medical treatment and health care.
1,2,6,7	21. The growth of the older population is creating new health career opportunities that require knowledge about aging.

*Developed by F. Pratt & D Couper, National Academy for Teaching and Learning about Aging (NATLA), March 2000.

For detailed information, see D. Couper & F. Pratt, *Learning for Longer Life: A Guide for Developers of K-12 Curriculum and Instructional Materials*, NATLA, University of North Texas, 1999.