GUIDELINES

FOR HEALTH

EDUCATION













Guidelines for Health Education

Technical Sheet

Title

Health Education Benchmarks

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Abbreviations and Acronyms

PA – Physical Activity

ABD – Addictive Behaviours and Dependencies

DGE - Directorate-General of Education

DGS – Directorate-General of Health

WHO - World Health Organization

HEP – Health Education and Promotion

SICAD – General-Directorate for Intervention on Addictive Behaviours and Dependencies

PAS – Psychoactive Substances

INTRODUCTION

Health Education and Health Promotion (HEP) in the school environment is a continual process that seeks to develop skills among children and young people, enabling them to see themselves positively, build a way of life and be able to make personal, conscientious and responsible decisions. The school health promotion promotes environments that facilitate healthy choices and stimulate critical thinking for active participation as a citizen¹.

HEP has a crucial role in developing healthy, sustainable and happy citizens and societies. This process contributes to the goals and objectives defined by the World Health Organisation for Health and Well-Being in Europe – Health 2020² and for EU2020 Strategy³, regarding sustainable growth and inclusive education. The 9th Global Conference on Health Promotion (2016)*, promoted by the World Health Organization, reinforces the importance of health promotion and the need of a high level of health literacy** within a global context of a sustainable development.

In 2016, the 2030 Agenda for Sustainable Development – Transforming Our World – 2030 Agenda for Sustainable Development – approved by the United Nations General Assembly (UN, 2015)⁴ establishes 17 objectives, distributed across 169 goals. This Agenda recognises the need to build peace, prosperity, justice and inclusive societies that are based on the universal respect for human rights.

The HEP Guidelines responds to the Agenda's objectives by specifically promoting health literacy, preventing health behaviours that negatively affect the different health determinants. Therefore, it contributes to goal 4.7 which clarifies the importance of different aspects of education within a view of sustainable development: Guaranteeing that all individuals possess the knowledge and abilities necessary to promote sustainable development through, among others, education for sustainable development and sustainable lifestyles; human rights; gender equality; the promotion of a peaceful, non-violent culture; global citizenship; an appreciation for cultural diversity; and the contribution of culture to sustainable development.

The School, is an organisation focused on developing the personal, cognitive, social and emotional skills, is a priority space for children and young people to learn, individually and as a group, how to effectively manage their health and act on influential factors. A school that promotes health creates conditions for youth to participate in HEP Projects and encourages the collaboration of local partners, Health Sector and Local Government.

HEP, is one of the aspects for citizenship education and has a significant importance in the educational system, since it represents content that are present at all levels of education and learning, across different disciplines. As an interdisciplinary topic, it presupposes: (i) a spiralling interpretation throughout all the interconnected

I In Protocol signed between the Ministry of Education and the Ministry of Health, 2014.

² Health 2020: The European policy for health and well-being (consulted on 3 October 2016)

³ The Europe 2020 Strategy (consulted on 3 October 2016)

^{*} http://www.who.int/healthpromotion/conferences/9gchp/health-literacy/en/

^{**} Defined as "cognitive and social abilities that determine motivation and capacity of individuals to access, understand and use information in order to promote and maintain good health"

^{4 &}lt;a href="http://www.cite.gov.pt/pt/destaques/complementosDestqs/Agenda_Sustainable_Development.pdf">http://www.cite.gov.pt/pt/destaques/complementosDestqs/Agenda_Sustainable_Development.pdf (checked on 31 January 2017)

areas during the educational career; (ii) a perspective of conscious, creative and intentional intervention; (iii) a permanent negotiating attitude on ethical processes focused on learners; (iv) a holistic view, because skills must be developed across all curriculum areas. Additionally, the HEP may also rely on supplementary curriculum options in primary school, or on projects and activities defined by schools that contribute to the personal and social development of students, in a joint action with the educational project for their school.

The Guidelines for Health Education

These Guidelines are the result of a partnership between the Directorate-General of Education and the Directorate-General of Health, which established a Collaboration Protocol in February of 2014, and the SICAD – General-Directorate for Intervention on Addictive Behaviours and Dependencies. The intense technical and scientific cooperation between these three public organizations demonstrates the strategic value of the partnership as well as the high potential of the impact of these guidelines, which seeks to establish a common understanding and language on themes, objectives, and contents to cover in initiatives of health education and health promotion designed for children and young people, as well as in supporting materials, resources and communication platforms.

As is the case with other guidelines produced by the DGE within the scope of citizenship education, this document is designed to be a flexible education tool, to be adopted voluntarily, which can be used and adapted according to the options and realities of each educational context, from preschool to secondary education, in all its formats. In addition to schools, the guidelines may also be useful to other educational entities and agents, whether formal or informal, that seeks to develop health promoting projects and healthy lifestyles among children and young people, as well as among parents, guardians and caregivers. The participation of family and youth in every phase of the project is crucial.

Guidelines Organisation and Structure

The Health Education Guidelines (RES) is organised by educational levels and cycles – preschool, Ist, 2nd and 3rd cycles of Basic Education and Secondary Education. Designed as a cohesive whole, this Guidelines is based on a common structure at the different levels and cycles of education and learning, offering, for each one, a suggested specific approach for Health Education and Promotion.

Five overarching themes were identified:

- Mental Health and Violence Prevention,
- Food Education,
- Physical Activity,
- · Addictive Behaviours and Dependencies,
- Affections and Sexuality Education

For each of these themes, we defined subthemes and the corresponding objectives, which, in turn, are separated by education and learning level. These objectives include knowledge, skills, attitudes and behaviours necessary for their implementation.

The objectives, at each of the levels and cycles of education and learning, are considered appropriate to the development level and age group for their target children and young people and may be adapted for use in different specific school contexts. In light of the options defined in the school's health education project and the continual work being done with students, teachers may, in each context, choose which content to cover as well as the timing and methods to use. For the same objective, present in all or in several levels and cycles of education and learning, the descriptions grow in complexity, tailored to different age groups and skills already developed by students, taking into account that a subtheme may be the target of a more in-depth coverage at more advanced levels.

THEMES, SUBTHEMES AND OBJECTIVES BY EDUCATION AND LEARNING LEVEL

| | THEME/Subthemes/Objectives | | | | | 3™ Cycle of Basic Education | Secondary Education |
|-----|---------------------------------------|--|---|---|---|--------------------------------|------------------------|
| | MENTAL HEALTH and VIOLENCE PREVENTION | | | | | | |
| | Subthemes | Objectives | | | | | |
| 1. | Identity | Develop the awareness of being a unique person | Х | Х | X | Х | Х |
| 2. | Belonging | Adopt a sense of individual and social belonging | х | х | X | х | х |
| 3. | Communication | Communicate positively, effectively and assertively | х | х | х | х | х |
| | F | Develop emotional self-awareness | х | х | х | х | х |
| 4. | Emotions | Develop emotional literacy | х | х | х | х | х |
| 5. | Autonomy | Demonstrate autonomy through each stage of growth and development | | | | х | х |
| 6. | Interaction | Build positive relationships with others and with the environment | | х | х | х | х |
| _ | 7. Risk | Identify risk and risk behaviours | х | х | х | х | х |
| /. | | Effectively intervene in the preventions of individual, situational and environmental risks | | х | х | х | х |
| | Duncto oti o u | Know protective factors | х | х | х | х | х |
| 8. | Protection | Increase individual perception in light of protective processes | | х | х | х | х |
| | | Identify violence directed at others | х | х | х | х | х |
| 9. | Violence | Identify self-inflicted violence | х | х | х | х | х |
| | | Adopt a culture of respect and tolerance | х | х | Х | х | х |
| 10. | Choices, challenges and losses | Use the phases of the decision-making process: define objectives and manage emotions and associated values | | х | х | х | х |
| 11. | Values | Develop values of citizenship, solidarity, and respect for differences | х | х | Х | х | х |
| 12. | Resilience | Adopt resilient behaviours | х | х | х | х | х |

| THEME/Subthemes/Objectives | | | | | 3 rd Cycle of Basic Education | Secondary Education |
|--|--|---|---|---|---|------------------------|
| FOOD EDUCATION Subthemes Objectives | | | | | | |
| Subthemes | Objectives | | | | | |
| 1. Food and sociocultural | Understand how social, cultural and economic issues influence food consumption | х | Х | Х | х | х |
| influences | Identify the Mediterranean Diet as an example of the different sociocultural influences on food consumption | х | х | X | х | х |
| | Recognise nutrition as one of the main health determinants | | х | х | х | х |
| 2. Food, nutrition and health | Relate nutrition to the prevention and development of chronic main diseases (diabetes, cardiovascular disease and oncological illnesses) | х | х | х | х | х |
| | Recognise the Mediterranean Diet as a healthy food standard | х | Х | х | х | х |
| 3. Food and individual choices | Recognise that food choices are influenced by psychological and sensory determinants, both individually and in a group | х | х | х | х | х |
| | Critically analyse food risk behaviours | | Х | х | х | х |
| 4. The food cycle – from | Recognise the origin of foods | | | Х | х | х |
| producer to consumer | Identify factors that influence the food product before it reaches the consumer's table: farm production, industrial transformation and distribution | х | х | х | х | х |
| 5 5 | Recognise the impact that food standards have on the environment | | Х | х | х | х |
| 5. Environment and food | Recognise a citizen's role and food choices in environmental sustainability | | х | Х | х | х |
| 6. Purchase and preparation of Adopt appropriate behaviours in the purchase, storage, preparation and consumption of food | | х | х | Х | х | х |
| 7. Right to food and food security | | | х | х | х | х |
| 8. School nutrition | Recognise the school as a unique space to promote healthy nutrition and the adoption of balanced food behaviours | х | х | х | х | х |

| | THEME/Subthemes/Objectives | | | | | 3 rd Cycle of Basic Education | Secondary Education |
|----|--|--|---|---|---|---|------------------------|
| | PHYSICAL ACTIVITY | | | | | | |
| | Subthemes Objectives | | | | | | |
| 1. | 1. Sedentary behaviour Avoid long periods of sedentary behaviours. | | х | х | X | х | х |
| | Dhysical Activity and Spayta | Increase PA and sports activity. | х | х | х | х | х |
| 2. | Physical Activity and Sports | Understand how PA promotes the holistic development of the child and youths. | х | х | Х | х | х |

| | THEME/Subthemes/Objectives | Preschool Education | 1 st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|--|--|------------------------|--|--|--|------------------------|
| Д | | | | | | |
| Subthemes | Subthemes Objectives | | | | | |
| 1. Addictive behaviours and dependencies (ABD) | Identify and learn about fundamental concepts within the scope of ABD | х | х | х | х | х |
| | Recognise tobacco as an avoidable causal factor for sickness and premature death | х | Х | Х | Х | x |
| 2. Tobacco | Learn about the immediate and long-term effects of tobacco on individual, familiar, social and environmental health | х | х | х | х | х |
| | Identify factors that influence the perception of risk in relation to tobacco usage | | Х | х | х | х |
| | Develop personal strategies to deal with risk situations | х | Х | х | х | х |
| | Identify the problems linked to alcohol in relation to illness and premature death | х | Х | Х | Х | х |
| | Learn about the effects of alcohol on health, both immediate and long term | х | х | Х | х | х |
| 3. Alcohol | Identify factors that influence the perception of risk in relation to drinking alcoholic beverages | | х | Х | х | х |
| | Identify patterns of alcoholic beverage consumption, the respective consequences and associated risks | | | Х | х | х |
| | Adopt appropriate behaviours regarding alcoholic beverage consumption | | | Х | х | х |
| | Identify the characteristics and types of PAS | | Х | Х | х | Х |
| | Learn about and identify the immediate, short and long-term effects of PAS consumption on health | | Х | Х | х | х |
| 4. Other psychoactive | Identify factors that influence the perception of risk in relation to PAS consumption | | х | Х | х | х |
| substances (PAS) | Identify the different patterns of PAS consumption and the respective consequences and risks associated with its consumption | | | х | х | х |
| | Adopt appropriate behaviours regarding PAS consumption | | | Х | х | х |
| | Learn about the types and characteristics of non-substance addictions and dependencies | х | x | X | x | х |
| 5. Other non-substance | Know and identify the immediate, short and long-term effects of non-substance addictions and dependencies | | x | x | x | x |
| addictions | Identify risk and protective factors in relation to non-substance addictions and dependencies | | X | Х | X | x |
| | Adopt appropriate behaviours regarding non-substance addictions and dependencies | | | Х | х | x |

| THEME/Subthemes/Objectives | | | | | 3 rd Cycle of Basic Education | Secondary Education |
|--|---|---|---|---|---|------------------------|
| AFI | FECTIONS and SEXUALITY EDUCATION | | | | | |
| Subthemes Objectives | | | | | | |
| I. Identity and Gender | Develop the conscience of being a unique person regarding sexuality, identity, gender expression and sexual orientation | х | х | х | х | х |
| • | Develop a positive attitude regarding gender equality | Х | Х | х | Х | х |
| | Recognise the importance of affections in individual development | Х | х | Х | Х | Х |
| 2. Affective Relationships | Recognise the importance of interpersonal relationships | Х | Х | х | Х | х |
| | Value cooperative and mutual help relationships | Х | Х | х | Х | х |
| 3. Values | Develop values of respect, tolerance and sharing | Х | Х | х | Х | х |
| 4. Sexuality Development | Be able to accept and integrate the physical and emotional changes associated with sexuality throughout life | х | х | х | х | х |
| , . | Be responsible to yourself and to others | Х | Х | Х | Х | х |
| 5. Parenthood | Reflect for the development of a life project | Х | х | х | Х | х |
| 5. Farentinood | Adopt attitudes and healthy behaviours | | | Х | Х | Х |
| Recognise sexual and reproductive rights as components of human rights Recognise sexual and reproductive rights as components of human rights | | х | х | х | х | х |

MENTAL HEALTH AND VIOLENCE PREVENTION

In a world of globalisation sustained by complex chains of interactions, the Health phenomena of an individual and of populations cannot be understood outside the paradigm of the biopsychosocial model.

The, conceptualisation or intervention in the area of Health promotion and Well-Being is built on a comprehensive approach where intra- and interpersonal and contextual factors compete in identifying risk and protection factors, based on: an in-depth analysis of how the identified needs will develop, whether explicit or implicit; the singular characteristics of the special and temporal context; as well as any other resources that are potentially present.

Within this framework, almost all Education can be understood as Health Education, since the role of the School and of educators is to communicate knowledge and content at a conceptual and cognitive level, but it also involves experiential and interactive learning that shapes the experiences and learning.

The Portuguese proverb "Do was I say, but not like I do" highlights both the importance and incoherence of one's example. By that we want to emphasise the potential area of growth and of the relationship in which everything and everyone is interconnected and where there is a need to define the axes, vectors, priorities, strategies, criticisms, questions and creative solutions, making the task of the responsible adults more complex, demanding and challenging, but also more relevant and genuine.

For an effective pedagogy, we must then start from a quality environment, founded on positive relationships and effective communication.

Children and youth are citizens with full rights, to be considered as active agents in society. The right to Health and Education, being one of the most basic rights, implies a perspective of Well-Being within a broader scope, where biological, emotional and contextual aspects intersect in a significant way. There are then multiple reasons to currently invest in the development of effective and coordinated initiatives in the area of Mental Health, favouring early intervention, focused on preventive aspects and aimed at interdisciplinary dialogue.

In a time of change, crisis and adaptation are key words. In a person's entire life cycle, well-being emerges as a development, the balance of which is rooted in the relationship with the body, family, community and culture. The exponential development of technological means is a challenge of the contemporary world and for the future generations. Aside from the questions that arise in terms of access to knowledge and management of information, this is a reality that affects relationships of power and authority, influencing values, attitudes and behaviours, with clear implications in terms of health and education.

But, on the other hand, subjects like sleeping, food behaviour, addictions, academic success or productivity are topics that are intimately related with the underlying psychological dimension. Mental health literacy is, therefore, a priority and in this sense, identifying and understanding problems that commonly occur among children and young people is, in and of itself, a measure of promotion and prevention.

Mental Health then pertains to the entire population and applies not only to the areas of physical health, but also social reality and education. Being related to individuals as well as groups, it is strongly influenced by socioeconomic and cultural factors and has been considered as a basic principle for quality in a global approach of policies in Health promotion and Well-Being

In addition to its systemic aspects, Mental Health in Childhood and Adolescence should be considered as an adaptive component of development and behaviour, naturally contextualising its value in Communication and Relationships, more than being understood as a minor phenomenon and viewed as just an illness to avoid.

This stets the subject to a broader level, meaning that certain signs of discomfort may be temporary, surmountable and even developmental. They should always be seen in its communication value summoning us to listen, to intervene. That is why it is essential to equip the adults with both educational duties and skills, as well as leverage the School space as an ideal context for this learning and consolidation.

Subthemes:

- I. Identity
- 2. Belonging
- 3. Communication
- 4. Emotions
- 5. Autonomy
- 6. Interaction
- 7. Risk
- 8. Protection
- 9. Violence
- 10. Choices, challenges and losses
- 11. Values
- 12. Resilience

Subtheme I: Identity

In terms of identity, we lay the foundation for building the individual human being. Being unique people, with a gender, own mind, a history that transports legacies from a past and where there is hope for the future is the basic acquisition of awareness that places us in the social scenario.

Identity is the fingerprint of our being, living and becoming. Growing is the process of becoming more of who one is.

Objective: Develop the awareness of being a unique person

| Preschool Education | Ist Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | | | | |
|---|-------------------------------------|---|---|--|--|--|--|--|
| Identify the limits of the body and feelings. | | | | | | | | |
| Develop skills in affirming one? | s individuality. | | | Value and appreciate individuality throughout life. | | | | |
| Explore individual characteristics. | Accept individual characteristi | cs. | Discuss unique personal differences and those of others within a group. | Evaluate and appreciate differences between generations. | | | | |
| Identify one's own unique diffe | rences and those of others within a | group. | | | | | | |
| Become aware of gender ident | ity and social roles. | Discuss gender identity and so Critically analyse the causes an segregation. | Adopt attitudes and behaviours that respect gender equality. | | | | | |

Subtheme 2: Belonging

The feeling of belonging determines a bond and establishes a relative order where security, trust, empathy, identity cohesion and self-esteem are organised. It also makes us responsible for the bonds we create, providing a group awareness and an expanded view of humanity.

Objective: Adopt a sense of individual and social belonging

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | | | | |
|---|--|--|---|---|--|--|--|--|
| Identify belonging to a family, so | chool, and community. | Develop a sense of belonging a | to a group. | | | | | |
| Learn the value of differences, sharing and cooperation. | recognition value of amoretices, | | | | | | | |
| Accept and contribute to grou | p rules. | | Accept and contribute to group rules without undermining own individuality. | Evaluate group rules that value individuality. | | | | |
| Appreciate the importance of protecting and preserving the environment. | | Appreciate the importance of protecting and preserving the environment and human heritage. | Empower the protection and preservation of the environment and human heritage. | Act according to the values of protection and preservation of the environment and human heritage. Evaluate initiatives that protect and preserve the environment and human heritage. | | | | |

Subtheme 3: Communication

It is impossible to not communicate. All human action has some communication value that follows codes, is affected by various aspects and marked by intents, whether explicit or implicit. It is based on empathy, that is, on our ability to identify with another person and be aware of their sensitivities, their suffering, and the responsibility for their acts. Understanding the mechanisms of communication is crucial for understanding and being understood, organising meaning to existence and the interaction.

Objective: Communicate positively, effectively and assertively

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | | | |
|---|--|--|--|--|--|--|--|
| Explore verbal and non- verbal communication. | Identify communication styles: aggressive, assertive, manipulative and passive. | Analyse communication styles: aggressive, assertive, manipulative and passive. | Adopt an assertive communica | tion style. | | | |
| | Evaluate meta-communication. | | | | | | |
| | Identify incongruencies in community incommunity | nunication (24). | | Analyse incongruencies in communication. | | | |
| Develop negotiation and mediation. Express affections. Negotiate in conflict situations. Mediate conflict situations. Express affections through positive, effective and assertive communication. | | | | | | | |
| Be capable of saying yes and no, developing the capacity of argumentation. | | | | | | | |

Be capable of expressing one's needs and desires.

Subtheme 4: Emotions

Emotions refer to the non-rational aspect of our existence as persons. Basic emotions begin as preliminary and universal, taking on a growing complexity dependent on interactions and the ruling culture. While not being opposed to reason, we know how determinant the balance resulting from the quality of emotional experiences is in the creation of the being, with conflict being an underlying notion. Rather than speaking of "positive" or "negative" emotions, it is important to identify what one feels and to develop appropriate ways of expressing emotions. We speak of emotional intelligence, since the acknowledgement of what one feels lends authenticity and, when communicated and understood, promotes personal growth and opens the door for creativity and symbolization.

Objective: Develop emotional self-awareness

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | | | | |
|---|--|---|---|---|---------------------|--|--|--|--|
| • | Identify primary feelings and emotions (21). | | econdary feelings and emotions (20) of different emotions in terms of sui | | | | | | |
| • | Express emotions appropriately. | Express primary and secondary emotions appropriately. | Express emotions positively and Distinguish between the comple | and negatively with intentionality and intensity. Applexity of emotions and the concept of emotional conflict. | | | | | |

Objective: Develop emotional literacy

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|--|--|---|--|--|
| Express feelings constructively.Respect others' feelings. | | | | |
| Relate what one feels with situations experienced. | Relate what one feels with one's thoughts and actions. | Reflect on what one feels, thinks, and does. | Analyse the short and long-term consequences of attitudes. | Evaluate the short and long-term consequences of attitudes. Value the gradual self-awareness of what one experiences, names and responds. |

Subtheme 5:Autonomy

Autonomy assumes each person's journey from birth to adulthood. Each stage of development brings challenges that must be presented to children and young people, encouraging them to achieve them. Autonomy results both from the ability to connect and the capacity to separate, in which individuation corresponds to one's being interdependent on others. It is a synonym of personal accomplishment, constructed identity, a framework of values, being capable, making decisions, acting, solving problems, that contains trial and error as well as natural fear: Having a life project and establishing bridges with others in the sense of cooperation and help in attaining them.

Objective: Demonstrate autonomy through each stage of growth and development

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---|--|--|--|---------------------|
| | ctivities expected for stage of develop ources and limitations as well as those d arguing that decision. | | | |
| Recognise a need for others (group). Appreciate abilities. Know what individual contribution is made in constructing the collective contribution. | | | | |

Subtheme 6: Interaction

The relationship with others is fundamental: a dialoguing mirror of our doubts, a test of our skills, a source of the satisfaction and the frustration of our expectations, an engine of our choices. The degree of sensitivity, respect, understanding, tolerance, satisfaction in the responses we receive from those who are significant to us greatly affects our self-image and self-esteem. The younger one is, the more dependent one is on interactions with others. Immaturity is inversely proportionate to the evolving complexity, that is, we move from an absolute dependency to a relative interdependence throughout our life. This theme is intimately connected to autonomy.

Objective: Build positive relationships with others and with the surroundings

| Preschool Education | Ist Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | | | |
|--|--|---|---|--|--|--|--|
| | Know how to be in community, integrating social standards and rules. Appreciate and protect the environment. | | | | | | |
| Establish healthy relationships based on respect, cooperation and tolerance. | | | Prefer healthy relationships bas tolerance. | ed on respect, cooperation and | | | |
| | Differentiate between issues that are private and public in nature. | Respect issues that are private |). | Evaluate the respect for issues that are private and public in nature. | | | |
| Acknowledge authority and different social roles. | Identify authority and different social roles. | Respect hierarchies and different social roles. | Analyse the importance of his | erarchies and different social roles. | | | |
| Explore the concept of sharing. Know how to dialogue. Appreciate the creative and constructive side of humour. | Integrate the concepts of intime Identify the need for help and s Know how to handle praise and Distinguish between the construction humour. Value "laughing with" instead of | d criticisms. ructive and destructive sides of | Know how to praise and critici Recognise the positive side and | | | | |

Subtheme 7: Risk

Within the context of probabilities, risk is implicit in the human development process. It exists as a mediator of limits, boundaries and choices and intervenes in the affirmation of personal identity. Possible occurrence of something facilitated by individual characteristics, situational conditions, or environmental contexts. Be at risk of..., run the risk of..., live at risk of..., suggests the indication/gathering of influences that enhance the probability of an occurrence of physical, psychological, social or moral harm to children and young people. However, from another perspective, we can consider risk as a field for challenge, curiosity, secrets, threats, mystery, adventure, emotion, excitement and experiences.

During adolescence in particular, risk behaviours are associated with the inevitable need for self-affirmation and a young person's search for identity, the need to be accepted in a peer group, the inevitability of challenging, questioning and breaking rules, gradually withdrawing from the family unit.

Objective: Identify risk and risk behaviours (10)

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---|---------------------|--|--|---|--|
| | | Learn about individual, situational and environmental risks. Distinguish between risk and danger. | | Manage emergency / risk situations. | |
| Identify behaviours that put one's health at risk and in danger. Know how to ask for help. | | | | | |
| | | | Identify individual capacities for risk protection. Identify surrounding resources for risk protection. | Evaluate individual capacities for risk protection. Evaluate surrounding resources for risk protection. | |
| | | | | Identify that choices and decisions made on the spur of the moment make an impact and have short and mediumterm repercussions on health and the life project. | Critically reflect on the impact that choices and decisions have on health and the life project. |

Objective: Effectively intervene in the prevention of individual, situational and environmental risk

| Preschool Education | Ist Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|--|---|---|--|
| | Develop preventive behaviours (29) in light of identified risks. | Understand the existence of rules and limits to managing risks. | Identify individual needs, limitations and weaknesses and those of the educational community in effectively controlling and reducing identified risks. | Identify patterns of satisfaction/frustration. Apply self-control strategies. |

Subtheme 8: Protection

This is the domain of security and trust building, where there is comfort and well-being. Protect: synonym of welcome and nurture, shelter and support, the notion of providing shelter and allowing an exploration of the world and its risks. Throughout development, this concept presupposes the existence of clear rules and limits and is related to authority, out of which is built an internal feeling of security, trust and hope.

Protection emerges gradually through protective processes that are developed as individual, situational and/or ambient qualities or attributes, seeking to increase positive adaptive answers, influencing the decision-making process of children and young people when faced with risks. On a continuum of vulnerability/protection, it is important to implement protection processes that facilitate a positive view of self, health, security and quality of life, which inhibit, reduce and mitigate the probability of a certain condition becoming a risk or dangerous.

Objective: Learn about protective factors (22)

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---|--|--|--|---------------------|
| Identify key adults and authority Identify the different types of present types of present types. Acknowledge rules and limits. | | Identify the importance of the plurality of individual, family, ambient and social protective factors. | Reflect on the importance of deepening protective factors in | |

Objective: Increase individual awareness in light of protective processes

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---|--|--|--|---|---------------------|
| ŀ | Communicate well with oneself and with others. Establish positive relationships with others. | | | Know how to manage emotion | S. |
| | Identify belonging to a family, a school and a community. | | Develop a sense of belonging to a group, recognise the value of differences, sharing and cooperation. | Prefer positive relationships. Resist peer pressure. | |
| | Demonstrate a capacity of self-appreciation. Ask for help in situations of discrimination, prejudice or infringement of rights. | | | | |

Subtheme 9:Violence

A multifactorial phenomenon, it is essential that one resist the temptation to polarise it within a Cartesian logic between good and evil; there are complex factors that justify the occurrence and resistance of patterns of violent behaviour, and they should be the subject of study and reflection. Feelings of denial, fear, shame and guilt are generally associated with this phenomenon.

Violence may be active or passive, verbal or acted out, psychological or physical. There are violent relationships between individuals but also violent environments that affect other people indirectly. In violence there is always a power struggle, an asymmetry that is used as a source of abuse and the triumph of force over frailty.

Current expression of violence within the school context, bullying refers to a persistent standard of aggression. Associated with the development of technological methods, cyberbullying emerges subtly, but it also brings devastating consequences, targeting the school community in a very particular way.

Violence is not always other-focused; sometimes the target is the self. There are several types of self-aggressive behaviour. Certain groups of young people cultivate values like suffering, pain, isolation, favouring the emergence of risk behaviours along these lines, for example, consuming alcohol or drugs, certain suicidal behaviours and self-aggressive actions such as self-mutilations.

Objective: Identify violence directed at others

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|----------------------------------|---|--|--|---------------------|
| Identify behaviours that harm of | Distinguish between isolated or persistent episodes. Identify types of violence: active or passive, verbal or acted out, psychological or physical Identify the phenomenon of bullying. Express aggressiveness assertiv Build a positive response in situ | | | |

Objective: Identify self-inflicted violence

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | |
|--|--|---|--|---------------------|--|
| Identify behaviours that harm oneself and how to avoid them. | | Describe emotionally suffering underlying self-aggressive behaviours. | | | |

Objective: Adopt a culture of respect and tolerance

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---|---|--|--|---|---|
| Explore negotiation and mediation. Recognise behaviours that | | Enable negotiation and mediation. | | | |
| | harm another person and how to avoid them. | | | Analyse and prevent bullying and cyberbullying behaviours. | Evaluate the reasons for bullying and cyberbullying behaviours. |
| | React appropriately to frustration. | Express assertive behaviour. | | | |
| | Understand the meaning of ask | ing for forgiveness. | Learn about the meaning of asking for forgiveness. | Avoid violence.Practice reparation of damages. | |

Subtheme 10: Choices, challenges and losses

Growth places our existence on a time-space continuum of options and consequences; at every step of this journey, we find ourselves faced with the challenge of the new, with the strangeness and fear that it evokes, but also with the drive to advance. Each gain implies a loss, in the sense that new and old, familiar and unknown, life and death are placed in constant reciprocity and alternation. This process is not always linear and requires cognitive and emotional adaptations by the individual and the group.

In this sense, we can say that development translates into a permanent process of grief, of stages that are resolved to give way to new accomplishments. The process of choosing presupposes the integration of these aspects, to which we add the responsibility for the results.

Objective: Use the phases of the decision-making process: define objectives and manage emotions and associated values

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|--|--|---|--|--|
| | Understanding that growth implies gains and losses. Identify the relative value of triumph and conquest and relate it to the value of the effort. | | | |
| | Empower decision-making and tolerance in light of the dilemma (positive/positive; positive/negative; negative/negative). | | | |
| Understand that death is the end of a cycle. | Understand that death is the end of a cycle and handle the associated fears, feelings, beliefs and values. | | | |
| | | Learn about the concept of grief and the process of emotional adaptation to loss. Understand the concept of grief and the process of emotional adaptation to loss. | | |
| | | Distinguish between sadness and a depressed state, despair and the wish to die. | | |
| | | | | Recognise the issue of suicide as a mental health problem. |

Subtheme II: Values

The observatory of the level of development of a civilisation, values frame the ethical principles of the human species in its sociomoral dimension. A higher degree of awareness of self and others, the values are a mark of identity and gain strength and depth as the personality is formed. Cutting across culture, assimilated from various sources in the experiential and educational contexts, the values will be integrated from the reflection that each person makes regarding the surrounding world. It is therefore an intimate process, lived as a personal experience, with foundations rooted in the social, spiritual, universal surroundings and which guide behaviour and interpersonal relationships.

Objective: Develop values of citizenship, solidarity and respect for differences

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|--|--|--|---|---------------------|
| Explore the concept of citizenship, respecting various | Identify primary and secondary | needs and prioritise them (Maslow | 's Pyramid of hierarchy) (28). | |
| differences: cultural, social and natural. | Learn about the concepts of citizenship, globalisation and their implications. | Discuss the concepts of citizenship, globalisation and their implications. | Adopt citizen behaviours. | |
| Develop respect for nature and ecological concerns. | | Learn about the evolution of ci- in its values. | Learn about the evolution of civilisation and identify the changes in its values. | |
| | Identify the diversity of beliefs and values in light of historical, geographical and cultural factors. Develop a respect for nature and ecological concerns. | | | |

- Respect people with special needs.
- Contribute to the integration of people with special needs.
- Empathise with others.
- Value universal volunteerism.

Subtheme 12: Resilience

Presented as a synonym of positive adaptation and an ability to maintain or recover mental health, it involves the individual characteristics of each person and the various circumstances of life events. It is also defended as the individual predisposition to resist negative consequences of risks and to develop adequately.

It calls on the personal capacity for a successful adaptation, positive functioning or skills in the face of experiencing adversity, involving multiple risks and internal and external threats or recovering after a prolonged traumatic experience.

Objective: Adopt resilient behaviours

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | |
|--|---|--|--|---|--|
| Identify interesting qualities and | Identify interesting qualities and positive experiences in oneself. | | | | |
| Explore the different options for resolving problems. Learn to make decisions. Know how to positively handle difficulties, obstacl adversities. Understand the consequences of one's actions. | | difficulties, obstacles or | Analyse the implications of each solution and the consequences of each decision. | Apply the ability to adapt to different situations. | |

FOOD EDUCATION

In Europe, the issues related to over and undernutrition are the main concerns of health systems. Today, excess weight, including obesity, is the biggest problem of public health among children. The prevalence of excess weight throughout Europe is high, particularly in the southern regions. Energy intake in children (4-9 years) is higher than the recommended values and that same trend is noticed in protein intake, particularly in Southern Europe, and in the intake of fat and sugar. Along with this excess in energy intake, the strong contribution of food products (food and drinks) that are poor in nutrients and high in energy, there is a level of daily physical activity that is below that which is recommended.

The combination of poor-quality food intake with low levels of physical activity contributes to a high prevalence of obesity and associated diseases. Associated with this reality is another that has grown over the past years: growing socioeconomic inequalities associated with obesity. In Portugal, as well as in other European countries, obesity seems to be growing among children from families with lower levels of education and lower economic power.

These situations led the WHO to emphasise in the Vienna Declaration on Nutrition and Noncommunicable Diseases in the Context of Health 2020 and the European Commission on EU Action Plan on Childhood Obesity 2014-2020 the role and the importance of environments health promotion and a change in nutritional behaviours. Consequently, the school appears once again as an essential place for the development of food competencies, both in terms of knowledge as well as attitudes and behaviours.

Some new situations are identified in these documents or may be planned from these guiding documents, as well as from the strategies defined by the Ministry of Education within the policy of regulating food options in school environments, the Directorate-General of Education, or the Ministry of Health, through the National Programme for the Promotion of Healthy Nutrition (PNPAS) of the Directorate-General of Health, specifically:

- The School seen as a place with an integrated strategy for promoting healthy nutrition, from the food options within the school facility to the curriculum content, extracurricular activities and the positioning of all the participants in the educational process.
- The school cafeteria as an exceptional location for promoting healthy and balanced food consumption that offers good quality nutritional foods and is also a place for socialising and consuming as a group, where flavour tied to local culture and the pleasure of being at the table must be valued as much as the nutritional component.
- The School as an suitable place for promoting the discussion on access to food as a basic condition of human rights and food as a human activity that influences health, but which is also influenced by various social and cultural determinants that may be integrated into the curriculum in a comprehensive way.
- The School as a space of connection with families, where many of the food choices are made throughout the day.
- The School as an appropriate place for discussing food as a cultural expression, a symbol of millennial Mediterranean culture, the fruit of a great interrelationship with other cultures and very adaptable to demographic, environmental and technological constraints, in constant evolution until now.

Subthemes:

- 1. Food and sociocultural influences
- 2. Food, nutrition and health
- 3. Food and individual choices
- 4. The food cycle from producer to consumer
- 5. Environment and food
- 6. Purchase and preparation of food
- 7. Right to food and food security
- 8. School nutrition

Subtheme I: Food and sociocultural influences

Food, undoubtedly influenced by social and cultural factors, has an equally important role in the characterisation and socio-cultural identity of the different population groups.

The Mediterranean Diet (17), recently registered as a United Nations Educational, Scientific and Cultural Organisation (UNESCO) cultural and intangible heritage of humanity, has characteristics that are not only nutritional, but unique socially and culturally as well. In this sense, recognising, valuing and promoting typical Portuguese food, included in that Diet rich in seasonal fruits and vegetables, locally produced, easy to prepare, delicious, respecting regional, social and cultural differences, always according to the principle of the right to food and equality of access to nutritional foods that promote health, essential for preserving our identity and our health.

Objective: Understand how social, cultural and economic issues influence food consumption

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | |
|---|---|--|---|---|--|
| Identify food items (foods and beverages) that one usually consumes. Identify the food items usually consumed with family and friends. | Identify food habits. Recognise that individual factors influence food habits. | Identify socio-culturally different individual or group food habits. List factors (environmental, economic, sociocultural) that influence food choices. | Relate individual food habits with the most common food standards from the society in which one lives. Discuss factors (environmental, economic, sociocultural) that influence food choices. | Evaluate individual food habits according to predominant food standards. Assess food choices in light of influencing factors (environmental, economic, sociocultural). | |
| Compare socio-culturally differ | ent individual or group food habits. | 5. | | Socioculcui ui). | |
| Research food habits from different regions of the country and world. | Identify food habits from different regions of the country. | Compare food habits from different regions of the country. | | Based on food habits, deduce an individual's region of the country. | |
| Apply good table and dining eti | Apply good table and dining etiquette rules. | | | | |
| Identify main meals (30) and snacks. Identify the characteristics of main meals and snacks. | | Plan main meals and prepare snacks. | Prepare main meals and snacks. | | |
| | | Distinguish between the character | teristics of main meals. | Evaluate the characteristics of main meals. | |

| Compare food habits of the current generation with those from the two previous generations (grandparents). | | Evaluate food habits from the current generation compared to those from the two previous generations (grandparents). | |
|--|---|--|--|
| Identify the meaning and value of meals (or of foods) associated with celebration events. | Learn about and respect the different food habits and choices. Identify the relationship between food consumption habits and socioeconomic status. | Evaluate food habits and choices. Adopt food choices according to an individual's economic status. | |

Objective: Identify the Mediterranean Diet as an example of the different sociocultural influences on food consumption

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---|---|--|--|---|-------------------------------|
| • | Identify some typical food items of the Mediterranean Diet. | | Identify the main characteristics, the main common points and main differences of the populations that follow the Mediterranean Diet. | Compare some characteristics of food habits among several groups in the Mediterranean with their religious beliefs. | Adopt the Mediterranean Diet. |
| | | Recognise non-food (cultural, heritage, environmental) characteristics associated with the Mediterranean Diet. Compare individual food habits with the Mediterranean Diet standard. | | Debate on food and non- food (cultural, heritage, environmental) diversity and identity of the Mediterranean Diet. | |
| | | | | Evaluate food habits in light of the Mediterranean Diet standard. | |

Subtheme 2: Food, nutrition and health

Food is one of the most impactful determinants of individual and group health. Since nutrition is not a voluntary act, the way we eat, what we consume is an individual choice that influences health. Excess foods may lead to obesity and other chronic illnesses (diabetes, for example). On the other hand, deficiencies and imbalances are also a source of various illnesses.

Healthy foods may, unequivocally, promote health and induce well-being .

Objective: Recognise food as one of the main health determinants

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 | Prd Cycle of Basic Education | Secondary Education | |
|---|--|--|---|---|---|---|--|
| • | , and the second | | List foods that should only be consumed on special occasions. | • | Propose healthy alternatives for special occasions. | Adopt healthy alternatives for special occasions. | |
| • | Relate the need to eat with healthy growth. | Recognise the importance of consuming healthy food items for healthy growth. | Distinguish food from nutrient. | t. | | Identify specific nutrient needs for each phase of life. | |
| • | Identify food items essential for health. | | | • | Compare functions fulfilled by nutrients in the organism. | | |
| | | Identify which foods make up the Mediterranean Food Wheel Recognise why certain foods do not make up the Mediterranean Food Wheel | Name the types of nutrients according to their function | Distinguish organic nutrients from inorganic nutrients. | | | |
| • | Understand that correct chewing is important. Give examples of food items that are harmful to teeth. | | | • | Distinguish the characteristics of good chewing. | Regularly adopt appropriate chewing | |
| • | Identify food items that are important to good health. | | | • | Choose healthy food items in eating habits. | | |

| Locate the water sector on the Mediterranean Food Wheel. | Relate a certain food to the corresponding sector on the Mediterranean Food Wheel. | Build a daily nutritional plan, according to the principles of the Mediterranean Food Wheel. |
|---|---|---|
| | Categorise foods according to their primary nutritional characteristics. Prefer food items depending on their nutritional value. In daily eating habits, opt for food items in accordance with individual nutritional needs. | |
| Describe that sectors of the Mediterranean Food Wheel have different areas. | Interpret why water has its own central sector on the Mediterranean Food Wheel. Explain why water has its own central sector on the Mediterranean Food Wheel. | |
| | Explain the principles of "complete nutrition", "balanced nutrition" and "varied nutrition", inherent to the Mediterranean Food Wheel. Differentiate the different nutrients according to their primary functions. Interpret the concept of portion in the Mediterranean Food Wheel. Evaluate the different nutrients according to their primary to the Mediterranean Food Wheel. Evaluate the different nutrients according to their main functions. Estimate servings of foods appropriate for different individual needs. | |
| | Debate why the sectors of the Mediterranean Food Wheel have different to the mediterranean food wheel have differe | erent areas. |
| Understand the importance of oral hygiene. | Recognise the importance of oral hygiene and the habit of brushing teeth after main meals. Apply, as a regular practice, the habit of brushing teeth after main meals. | eals. |
| Understand the importance of breakfast. | Adopt the practice of eating breakfast. Distinguish between a healthy and complete breakfast from one that is not complete. | |
| | Identify main food errors. Interpret supplied menus Interpret the food day Indicate food items according to health risks and/or benefits. List the main food errors. Organise the food day. Compare food items according to health risks and/or benefits. | Eliminate main food errors from diet. Critically plan menus. Plan a food diary Adopt food items according to health risks and/or benefits. |

Objective: Relate nutrition to the prevention and development of chronic main diseases (diabetes, cardiovascular disease and oncological illnesses)

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---|--|--|---|---|--|
| | Identify food items that are harIdentify food items that are ber | | List food items that, when con- | sumed in excess, are harmful to our | health. |
| Ī | | | | Propose healthy food options a | imong peers. |
| | | Identify some foods with nutritional characteristics that are health protective. | Identify on the Mediterranean Food Wheel the sector that has elements rich in protective factors. | List food items rich in protective | ve factors. |
| | | | Establish the relationship between food and obesity (27). | Relate healthy food with the prevention of the main illnesses of today (obesity, cardiovascular diseases and cancer), integrating them into a recent historical context. | Prefer healthy foods as a method of preventing the main illnesses of today (obesity, cardiovascular diseases and cancer), integrating them into a recent historical context. |
| | | | | Debate how the three types of food disturbances (anorexia nervosa (5), bulimia nervosa (8), binge eating (11)) can affect the balance of the human body. | Evaluate the consequences of the three types of food disturbances (anorexia nervosa, bulimia nervosa, binge eating) on the balance of the human body. |
| | Understand that some individu items, namely meat, fish, eggs of Identify the various types of foo | | Identify the nutrients that are typically lacking in some food practices. | Respect and accept differences in diet related with religious, philosophical and cultural options, among others. | Avaliar os riscos de carências nutricionais em dietas restritivas e ser capaz de propor soluções para os superar e/ou minimizar. |
| | , ,, | | Classify the various types of food patters and relate them to health. | Evaluate the various types of food patters and relate them to health. | |

| | Recognise that, when consumed, certain food items may cause food allergies (4). | Identify food items that may cause food allergies and/or intolerances (25). | | • | Compare risks and consequences of consuming food items that contain allergens. Discuss the risks associated with preparing and handling foods with risk associated to allergies and/or intolerances. | of for a property of the prope | Evaluate risks and consequences of consuming food items that contain allergens. Anticipate risks associated with preparing and handling foods with risk associated to allergies and/or intolerances. |
|---|--|--|---|-------|--|--|--|
| | Understand the importance of | drinking water. | Demonstrate the importance of drinking water. | • | Analyse the importance of drinking water. | • \ | Value water consumption. |
| | | | | • | Compare the increase in specific needs (thirst, hunger) with the type of intense physical activity. | n | Estimate the increased specific needs (thirst, hunger) with the type of intense physical activity. |
| 1 | Understand that thirst or hunger may occur after physical activity (running, for example). | Identify some specific physiological needs of one who does (or when one does) intense physical activity (thirst, hunger). Relate that after a more intense physical activity there is an increase of physiological needs. | Interpret the increase in specific physical activity. | ic ne | eeds (thirst, hunger) on who doe | es (or | when one does) intense |

Objective: Recognise the Mediterranean Diet as a healthy food standard

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|--|---|--|---|
| | eristics (high consumption of fruits of red meats and the use of olive Mediterranean Diet and relate | Give examples of balanced menus, based on the Mediterranean Food Wheel. | Classify the Mediterranean Diet as a promoter of health. | Value the food characteristics of the Mediterranean Diet and relate them to health protection. |

Subtheme 3: Food and individual choices

Since Food is influenced by sociocultural issues, it always depends, as a last resort, on the factor of individual choice. Taste, beliefs, psychological and morphophysiological factors influence individual choice, not just of food items themselves, but also of how they are prepared and consumed.

Awakening children and young people to this reality and warning them on how advertising and marketing may lead an individual to make less conscious choices is definitely one more challenge for the school.

Objective: Recognise that food choices are influenced by psychological and sensory determinants, both individually and in a group

| Preschool Education | Ist Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | |
|--|---|--|---|--|--|
| Identify food items that are par Have a positive attitude about r | rt of one's daily diet. new food items and new flavours. | Describe nutritional needs throughout life. Identify the capacity to make food choices according to one's tastes. | Debate nutritional needs throughout life. Prepare meals according to one's tastes. | Value differences in nutritional needs throughout life. Evaluate meals taking into consideration more than just food tastes. | |
| Identify flavours: salty, bland, sweet and sour in food items. | Identify food items through taste, appearance, texture and smell. | Distinguish taste, appearance, to those characteristics. | Distinguish taste, appearance, texture and smell in various food items an those characteristics. | | |
| Express pleasure or displeasure for salty, bland, sweet and sour. Indicate which food items one likes and doesn't like. | Justify reasons why one likes, or rejects, certain food items. | | Compare reasons why one likes, or rejects, certain food items. | Adopt food practices according to like/dislike of salty, bland, sweet and sour foods. Assess reasons why one likes, or rejects, certain food items. | |
| | | | | Estimate food options relating them to emotions. | |

Objective: Critically analyse food risk behaviours

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|---|---|---|--|
| | | Interpret information broadcast over media, that may influence food habits. Identify nutritional information on food labels. | Review information broadcast over media, in light of its influence on food habits. Interpret information on food labels. | Evaluate information broadcast over media, in light of its influence on food habits. Assess the information on food labels at the time of purchase. |
| | Locate food and nutritional information on food labels. | Locate nutritional information fat content. | regarding its sugar, salt and trans- | Value food items with less sugar, salt and trans-fat. |

Subtheme 4:The food cycle – from producer to consumer

Each food has a story, from when it is "born" until it is purchased, prepared and consumed. Recognising that story, knowing its origin, its source, the period or time of year when it should be "harvested", is essential for maximising its nutritional qualities as well as minimising the impact of our food choices on Nature. Many food items are transformed over the course of their life cycles. Understanding these processes and recognising those "changes" are essential in accepting and using (or not) each of these foods.

Objective: Recognise the origin of foods

| Preschool Education | Ist Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|--|--|---|---|--|
| Identify animal products. Identify vegetable products. Identify fresh and cooked food. | | | | |
| List foods that are safe to eat raw. | Identify processed and non-processed products. Identify foods that are safe to eat raw. Identify foods that can only be eaten after undergoing a culinary process. | Distinguish between fresh and processed foods. Recognise the type of preparation. Identify additives used in food items. Analyse the benefits and risks of new food items. Recognise the importance of science and technology in the development of food products and their preservation. Investigate the advantages and disadvantages to human health of using some additives Identify advantages / disadvantages of the culinary process on food items. | | Evaluate food according to the criteria of fresh versus processed. Choose foods, according to the type of preparation. Debate advantages / disadvantages of the culinary process on food items. Assess the advantages and disadvantages to human health from using some additives |
| Describe simple paths from production to consumption. | | Outline the path of foods from production to consumption. Investigate the intervention of science and technology in the development of food products and their preservation. | | Validate the intervention of science and technology in the development of food products and their preservation. |

Objective: Identify factors that influence the food product before it reaches the consumer's table: farm production, industrial transformation and distribution

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|--|--|---|---|--|
| Understand that agricultural production depends on climate conditions (sun, rain, etc.). | Understand that agricultural production depends on climate conditions (sun, rain, etc) and the type of soil. | | Outline climate and geophysical factors that affect agricultural production. | Propose solutions that seek to optimise agricultural production. |
| Identify factors that influence the | ne preservation of foods (e.g., light, t | emperature, humidity). | | |
| Identify different phases of tran flour – bread; milk – yogurt; oli | sformation of foods (ex: cereal – ve – olive oil). | Identify that biological and/or c production and/or food quality. Distinguish between different p (ex: cereal – flour – bread; milk | hases of transformation of foods | Choose biological and/or chemical agents to maximise production and/or food quality. |
| | | Identify the inclusion of certain components in transformed foods (ex: dairy products in lasagne). Identify factors that influence the preservation of foods (ex: light, temperature, humidity). Interpret the concept of food longevity (more or less perishable). | Evaluate the inclusion of certain components in transformed foods (ex: dairy products in lasagne). Investigate factors that influence the preservation of foods (ex: light, temperature, humidity). Compare food longevity (more or less perishable). | Sort the different phases of transformation of foods (ex: cereal – flour – bread; milk – butter; olive – olive oil; pork - ham). Evaluate the inclusion of certain components in transformed foods (ex: dairy products in lasagne). Evaluate factors that influence the preservation of foods (ex: light, temperature, humidity). Choose items taking their longevity into consideration. |

Subtheme 5: Environment and food

We eat what Nature gives us: inorganic substances (water) but, primarily, organic substances. Therefore, there is a clear bidirectional relationship between what we eat and what Nature gives us, as well as a strong influence of individual food choices on the ecosystem. Man has a strong impact on the environment as a result of food choices both through the intensive use of some resources or influencing biotic relationships, or strongly targeting a few specimens.

Objective: Recognise the impact that food standards have on the environment

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|--|--|--|---|
| | Understand that some foods, particularly some fruits and vegetables, have a specific season for harvest. Identify relationships between the supply and demand of food and its implications on the environment. Understand the implications of consuming foods out of season. Discuss the need to respect minimum dimensions (sizes) of some types of fish. Analyse the need to respect minimum dimensions (sizes) of some types of fish. | | Distinguish the harvest time for some foods, particularly some fruits and vegetables. Relate the supply and demand of food with its implications on the environment Interpret the implications (environmental and/or personal) of consuming foods out of season. | Evaluate the "intrinsic value" of a food, according to its harvest time (value seasonal foods). Choose foods with lower effects on the environment. Evaluate the implications of consuming foods out of season using harvesting or distribution methods that are aggressive to the environment. |
| | | | Opt for fish that follows the minimum dimensions (sizes) for some types of fish. | |
| | | Discuss deforestation caused by intensive agriculture. | Analyse deforestation caused by intensive agriculture. | Value agricultural methods that do not promote deforestation. |
| | | | Identify the types of production (agricultural and animal) with the most impact on water resources. | Value types of production (agricultural and animal) with less impact on water reserves. |

Objective: Recognise a citizen's role and food choices in environmental sustainability

| Preschool Education | Ist Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|--|---|--|--|
| | Understand the need to relate consumption of a certain food with its specific harvest time. | specific harvest time. specific harvest time. specific harvest time. specific harvest time. • Discuss the need to prioritise locally grown foods. simple environmental caused by food item packaging. • Discuss simple environmental impacts caused by food item packaging. | | Choose to consume certain foods depending on their specific harvest time. |
| | Define the need to prioritise locally grown foods. | | | Choose to consume certain foods depending on their proximity. |
| | Identify simple environmental impacts caused by food item packaging. | | | Choose to consume certain foods depending on the criteria of minimising impacts caused by food item packaging. |
| | | | | Choose and store food items in order to minimise waste. Estimate food consumption in order to minimise waste. |
| | | | | Value the Mediterranean Diet as a type of environmental protection, as it promotes healthy food habits that "respect" the environment. |

Subtheme 6: Purchase and preparation of food

Each one of the foods may be substantially altered by the consumer, from the time of purchase until the time of preparation. The way that a food item is stored may affect its quality.

The increase in information and literacy regarding the effects of preparing foods is essential in improving food habits. Knowing how to maximise nutritional characteristics of foods and learning to combine foods to make them more attractive, more flavourful and healthier is also a challenge.

Objective: Adopt appropriate behaviours in the purchase, storage, preparation and consumption of food

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|--|---|--|--|-------------------------------|
| | Know how to choose and make | e a food shopping list. | | |
| Know how to purchase food, according to food characteristics (frozen, fresh, packaged, etc.). Know how to purchase food, according to Cost/quality relationship; Food characteristics (frozen, fresh, packaged, etc.). Stop purchasing or consuming foods that have packaging and/or food preser Dents or bulges in packages; Ice crystals on frozen foods; Signs of vegetables and fruits being old. | | od preservation defects, specifically: | | |
| | Identify suitable food transportation conditions. | Discuss suitable food transportation conditions. | Properly transport foods. | |
| | Identify food storage conditions according to their preservation characteristics. | Discuss food storage conditions according to their preservation characteristics. | Store foods according to their | preservation characteristics. |
| List basic personal hygiene principles for before and after eating. | Identify basic personal hygiene principles for before and after eating. | | | |
| List basic food hygiene principles. | Identify basic food and utensil hygiene principles. | Value basic food, utensil, and space hygiene principles. | | |

| Identify types of food preparation. | Identify types of food preparation that best promote health. | Critically analyse types of food preparation that best promote health. Adopt types of food preparation that best promote health. |
|-------------------------------------|--|---|
| | Identify some of the main precautions in cooking so as to minimise nutritional losses and maximise the nutritional characteristics of each food. | Choose culinary processes in order to minimise nutritional losses and maximise the nutritional characteristics of each food. |

Subtheme 7: Right to food and food security

The Right to Food is a right acknowledged by the United Nations and is intimately related with the concept of Food Security by the World Health Organisation (WHO). For the Food and Agriculture Organization (FAO)/WHO, Food Security consists of "continuously guaranteeing, to all people, access to sufficient quantities of safe foods that ensure an appropriate diet; achieving and maintaining health and the nutritional well-being of all people; promoting a process of sustainable social and environmental development, which contributes to an improvement in nutrition and health, eliminating hunger-related epidemics and deaths".

However, Food Security (31) continues to be frequently confused with Food Hygiene, reducing it to mere issues of hygiene-sanitary conditions of foods, locations and the food handlers.

Objective: Recognise the Right to Food (18) as a human right acknowledged by the United Nations

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 | Brd Cycle of Basic Education | Secondary Education |
|---|--|--|--|------------------------------|---|
| Understand that all individuals should have access to adequate food, in quantity and quality. | Recognise that all individuals should have access to adequate food, in quantity and quality, meeting their needs. | Discuss that all individuals should have access to adequate food, in quantity and quality, meeting their needs at every stage of their life cycle. | • | | s to have access to adequate food, g their needs at every stage of their |
| | Human Rights. Recognise that all people, families, vulnerable and underprivileged groups who cannot meet their own needs should receive special attention when it comes to the Right to food. Human Rights. Value the suppounderprivileged who should receive special who should receive to food. | | Discuss that the right to food cannot imply the loss of other Human Rights. | | |
| | | | underprivileged groups who cannot meet their own needs who should receive special attention when it comes to the | | nnot meet their own needs and |
| | | | Value the right of all to have the correct information regarding food. | | |

Subtheme 8: School nutrition

The school is one of the primary nutritional contexts for students. The number of hours that each student is at school is considerable and, in therefore, all students eat (or should eat) a significant number of meals in the school environment.

Based on this reality and guided by the principle that nutrition has an enormous impact on health (not only in preventing illness but, especially, in promoting health), several guidelines are put into place for food options in schools.

Objective: Recognise the school as a unique space to promote healthy nutrition and the adoption of balanced food behaviours

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|--|---------------------|--|---|--|--|
| Express a positive attitude about school meals. Recognise the need to follow the rules when using the school cafeteria. | | | Regularly use the school cafeteria over other options. | | |
| | | | Discuss the need to define guidelines on food options in schools. Recognise the importance of the "lunch" meal, offered by the school. | Value lunches in the school cafe Critically analyse the food option | eteria. ons at school (cafeteria and buffet). |

PHYSICAL ACTIVITY

The World Health Organization identified the eight risk factors that most challenge health, among which physical inactivity is one of them. Some of these conditions may be prevented and helped by a decrease in inactivity and an increase in physical activity.

Independently the energy expenditure associated with physical activity (PA), inactivity is an important risk factor for coronary heart disease, hypertension, obesity, dyslipidaemia, type 2 diabetes, some kinds of cancer, osteoporosis, arthritis, anxiety and depression, being directly related to life expectancy and to the quality of life and well-being. Although many of the clinical implications occur in adulthood, the incubation and development of the risk begin during childhood. The influence on the behaviours of children and youth, aiming to increase PA and athletics, physical fitness, and the struggle against inactivity, is a priority with benefits for the health and academic development of youth.

It is universally accepted that the exercise of regular PA contributes to the improvement in positive health, that is, biopsychosocial and for lifelong well-being. The school years emerge as a unique opportunity to intervene by means of enjoyable PA experiences, fundamental to the prevention of inactivity, since it is during this period that a large part of the unhealthy habits take root, which leads to an increase in morbidity.

By dedicating part of the non-academic school term and/or the period outside of school to PA and the practice of sports can contribute to educational success. Adolescents who spend more time exercising and less time on behaviours such as watching television or playing computer and console games experience functional adaptations that are associated with an improvement in cognitive development and educational success. Benefits in learning may occur by an improvement in basic cognitive functions such as focus and memory, which are enhanced by engagement in PA and/or decrease in periods of inactivity with an impact on physical fitness. The development of PA and sports within the school setting is essential.

In Portugal, children and youth spend roughly 545 minutes a day in sedentary activities, which corresponds to 65% of the recorded time. As children grow older, the figures for sedentary behaviours tend to increase until adulthood, with adolescents (16-17 years) standing out with the highest values.

PA and sports play a prominent role in the growth and development of children and youth. Adolescents who regularly engage in PA and/or sports, in addition to seeing improvements in their physical fitness, discover several benefits in a wide range of components, including psychological, cognitive, biological and social benefits.

In this sense, Physical Activity and Sports literacy is fundamental to the development of sustainable health in children and adolescents and the community.

Subthemes:

- 1: Sedentary behaviour
- 2: Physical activity and sports

Subtheme I: Sedentary behaviour

Sedentary behaviour is the term that characterises activities that are carried out in a reclined or seated position and which do not raise the energy expenditure above resting levels. In analysing the physiological implications of these behaviours on health, it is possible to highlight the decrease and/or cessation of muscular contractility as a trigger in the process of reducing the use of glucose by the muscles, of insulin increase, and the promotion of the production of lipids/fats that will be mostly stored in the adipose tissue of the central area of the body, which in turn produces inflammatory molecules that are precursors to chronic non-communicable diseases. The long-term effect of exposure to sedentary behaviours and physical inactivity throughout life promotes the potentiation of the harmful effects of such behaviours in old age and premature mortality.

The intervention strategies to limit sedentary behaviours are not like those adopted to increase physical and sport activity. As such, it is imperative to train and educate students to reduce the amount of time spent on sedentary behaviours and encourage its frequent disruption to avoid periods of seated time longer than 60 minutes.

Objective: Avoid long periods of sedentary behaviours

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | |
|---|---------------------|--|--|--|---------------------|--|
| Recognise motor activities that promote a healthy lifestyle and sedentary behaviours that are harmful to one's health. Discover the importance of PA. Freely explore indoor and outdoor spaces, developing the different possibilities of the body movements. | | Learn about the benefits of the disruption of sedentary behaviours. Connect the benefits of the disruption of sedentary behaviours with the changes in the body fat profiles and with health in general. Identify alternatives to sedentary behaviours in day-to-day life (school, home and leisure areas). Develop strategies for disrupting sedentary behaviours in day-to-day life (in different areas of school, in leisure areas and at home). | | | | |
| | | | Recognise the importance of soIdentify appropriate solutions fo | oft transportation (36) to school and or soft transportation for each. | d to leisure areas. | |

Subtheme 2: Physical Activity and Sports

Regular PA and sports promote healthy growth and development. The access to regular quality sports activity contributes to the development of these benefits, as well as to academic success and the development of healthy lifestyles, values and principles associated with an active citizenship. Informal spontaneous PA also has similar effects, although to a lower degree. Based on this rationale, the inclusion of students in sports activities both in and out of school should be fostered, while also creating conditions so that recess and other leisure areas can also serve as means to increase PA.

The different intensities of PA involve adjustments in aerobic fitness, body composition, strength and flexibility with selective effects on biological, psychological, cognitive and social dimensions. The ripple effect of these benefits is a healthier development.

Objective: Increase PA and sports activity

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---|---|--|---|--|---|
| | Recognise behaviours present in a healthy lifestyle. | Compare behaviours that promote a healthy lifestyle to behaviours that are harmful to health. | Connect PA and sports activity to a healthy lifestyle. | Connect the adoption of PA and sports activity during childhood and adolescence to acquire a healthy lifestyle in adulthood. | Integrate PA and sports activity habits as a means of leveraging a healthy lifestyle in adulthood. |
| | Recognise the role of PA and sp | ports in the promotion of health. | | | |
| | Understand the rights of children to have playful recreation activities as a way to improve their quality of life. | | Recognise the rights of children and adolescents to have playful recreation activities as a way to improve their quality of life. | | |
| | Recognise different forms of physical and sport activities. Explore and develop the different motor skills through movements such as climbing, running, jumping, sliding, spinning, etc. | | Identify the importance of PA and sports in the various dimensions of well-being (physical, psychological and social). | Evaluate the effects of different recreational activities on well-being. | Adopt PA and sports activities with the intention of influencing the levels of well- being. |
| Ī | Recognise the need to eat before and after PA and sports. Compare the intensity of PA to the corresponding energy expenditure. | | Integrate PA and sports as stabilising factors in the energy balance. | | |
| | Respond to and appreciate the for personal development, acque complying with rules and comm | | Value sport training as an opportules and commitments. | ortunity for resilience, acquisition of | work habits and complying with |

Objective: Understand how PA promotes the holistic development of the child and adolescent

| | Preschool Education | 1 st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---|---|--|--|---|---|
| • | Identify the forms of PA they like best. | Compare their favourite forms of PA to the preferences of their peers. | Recognise individual experiences, both positive and negative, associated with sports activity. | Develop their own plan for spo | rt activity. |
| • | Identify the reasons why they I | ike a certain form of PA. | Identify future expectations in relation to a specific form of PA. | Evaluate whether the PA they engage in is in line with their skills, expectations and motivations. | Plan for the future (adulthood) maintenance of PA. |
| • | Compare their favourites in terms of PA with the preferences of parents or other people significant to children and/or adolescents. | | Identify the main expectations of parents or other relatives, in relation to the child's PA. | Compare the expectations of parents or other significant people regarding the students' PA to their own expectations. | |
| | | | Identify those individual goals in the second | in conflict with PA. | Establish a plan that reconciles the conflicting goals with the goals related to the adherence and maintenance of PA habits. |
| • | Recognise that play activities the those that do not. | nat involve PA are healthier than | Recognise that play activities that involve PA are healthier. | Understand how the sociocultural factors can influence the choice of types of play-recreation activities. | Connect sedentarism to current lifestyles in society. |
| • | React and express pleasure in play activities that involve interactions with others (socialisation). | Recognise and identify advanta lifestyle in comparison to a sed | | | negative effects of a sedentary ng. |
| • | Explore recreational activities performed outdoors. | Distinguish outdoor play activities from other recreational activities. | Recognise forms of PA that can environmental or physical factor | | Develop plans for PA that overcome environmental and physical limitations. |

- Have a positive attitude to new PA challenges.
- Understand the importance of physical fitness in the physical, cognitive and psychological development.
- Learn about the baseline values for health in the three components of physical fitness and take care to achieve them (see FITescola® platform).
- Practice a choice of sport dependant on personal preferences.
- Develop plans for improving physical fitness related to health and physical performance (use *FITescola*® platform).
- Increase Physical and Sports Activity literacy.

ADDICTIVE BEHAVIOURS and DEPENDENCIES

Prevention or preventive intervention aims to provide individuals and/or groups with the specific knowledge and skills necessary for coping with the risk associated with the use of Psychoactive Substances and other Addictive Behaviours and Dependencies (ABD). It also acts upon the environment, reducing the presence of factors that influence the attitudes and behaviours of subjects. The factors that increase the use of psychoactive substances and other ABD are referred to as risk factors, while those associated with the decrease of that drive are called protective factors. These factors, biological, psychological and social in nature, are internal or external to individuals and cross the various areas of their life. In the interaction/influence between these factors, family, school and social bonds, the influence of peers, vulnerability and resilience take on particular importance in the development or not of ABD in children and adolescents.

As a dimension of scientific knowledge, prevention gained a major boost in western nations in the last two decades that has translated to an increase in the quality of conceptualisation and efficacy of the developed interventions. Preventive strategies are intended for the general population, subgroups and individuals and apply to the areas of the individual, family, school and community.

Within the scope of education, preventive intervention advocates an approach to children and adolescents focused on behaviour modification, personal and social practices and on establishing a positive school environment in which the child and/or adolescent feels involved, safe and supported, serving as a facilitator for learning and promoter for their overall development. To this end, schools play a privileged and indispensable preventive role.

Considering the current quality criteria for preventive intervention within the educational context, this intervention gains efficacy when developed by the school community through the involvement of its various members, in a global approach that seeks the implementation of solutions integrated with the resources of the local community. Intervention can assume a specific or non-specific character, either through an approach focused solely on the factors and problems arising from the ABD or through a broader integrated approach that responds to the common aspects of the risk behaviours and other expressions of distress in children and adolescents, such as eating disorders, the development of violent behaviours or bullying, risky sexual behaviours, cases of maladaptation, isolation and depression and academic failure and dropping-out, among others.

Preventive intervention should act upon the different aspects of school dynamics, taking into account the needs and the specificities of each context, according to sociodemographic variables and the level of education and learning, and it is crucial to prioritise interventions of a continuous nature, focused on the following key dimensions: school climate and positive relationships.

The National Plan for the Reduction of Addictive Behaviours and Dependencies 2013-2020 advocates an intervention based on the different stages of the life cycle of an individual, by means of interventions focused on the environments in which the individuals move, with the school environment representing one of the most important. Thus, the defining of intervention priorities, as well as the planning of the responses to be implemented in this context, should be based on diagnostics that identify the needs and levels of existing risk in terms of global health and in particular the risks associated with ABD. It will also be essential, in relation to setting priorities and options for the interventions in this context, to take into account the current national plans for health promotion, namely the National Programme for School Health, among others.

Similarly, the National Programme for the Prevention of Smoking and Tobacco Control stresses tobacco use as a personal problem, but also as a social problem, which should be tackled soon within the younger age group, with schools being a privileged place for preventing the start of tobacco use and for gaining awareness of the harmful effects of tobacco smoke.

It should be noted that it is vital to increase the coverage and the quality of preventive interventions in the school environment, which presupposes the reinforcement of the technicalscientific and methodological components, accessibility and the improvement of the design of interventions and the choice of prevention programs, preferably those evidence based.

Subthemes:

- 1. Addictive behaviours and dependencies (ABD)
- 2. Tobacco
- 3. Alcohol
- 4. Other psychoactive substances (PAS)
- 5. Other non-substance addictions

Subtheme I:Addictive behaviours and dependencies (ABD)

Understood as «addiction processes», these are behaviours with impulsive-compulsive characteristics related to different activities or conduct. The most common among adolescents is the use of psychoactive substances (PAS), namely alcohol, tobacco and cannabis, gaming and the internet. The phenomenon of addictive behaviours and dependencies is complex and multidimensional, including genetic, neurobiological, psychological and environmental factors, cutting across society.

Objective: Identify and learn about fundamental concepts within the scope of ABD

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|--|--|--|--|
| | | Identify factors that influence addictive behaviours and dependencies(16). | Analyse and categorise dimensions and factors that influence addictive behaviours and dependencies: Psychological; Individual; Familial; Cultural. | Evaluate dimensions and factors that influence addictive behaviours and dependencies: Psychological; Individual; Familial; Cultural. |
| | | Identify and determine the sig concepts in addictive behavious. AddictiveBehaviours; Dependency; Tolerance; Abstinence from use(1); Drug addiction (35); Alcoholism(3); Smoking(32); Psychoactive substance(33); Non-substanceaddictions. | | Debate the significance offundamental concepts in addictive behaviours and dependencies: - Addictivebehaviours; - Dependency; - Tolerance; - Abstinence; - Drugaddiction; - Alcoholism; - Smoking; - Psychoactivesubstance; - Non-substanceaddictions. |

| | | Identify concepts related to the risk of use: Risk; Perception of risk; Risk behaviours (10): Motivation for risk taking Learn about areas of intervent about a second ab | Analyse concepts relatedto the risk ofuse: Risk; Perception ofrisk; Riskbehaviours; Motivation for risktaking tion within the scope of addictive before a deficitive before a de | Integrate concepts related to the risk of use: Risk; Perception ofrisk: Riskbehaviours; Motivation for risk taking | |
|---|--|--|--|--|--|
| | | Identify components of self-kr group and social integration (e group work dynamics, etc.). | | Analyse components of self-knowledge associated with good group and social integration (empathy, trust,cooperation,group work dynamics, etc.). | |
| Identify individual and collective behaviours that contribute to the quality of life, understanding that choices have healthconsequences. | | | | | |
| | | Identify behaviours and factors at the family level that can encourage appropriate decision-making bychildren and adolescents in the face of addictive behaviours and dependencies. | | | |

Subtheme 2:Tobacco

Tobacco is the second substance most used by adolescents, associated with the use of alcohol, cannabis or other psychoactive substances. Experimentation takes place during the early years, due to a combination of several factors, of which social influences, in particular from peers and friends, carries special importance. Given that nicotine is highly addictive, many adolescents who experiment will end up becoming addicted, turning to daily tobacco use, potentially placing their health and that of those around them at risk. Smoking decreases life expectancy by more than a decade and strips away years of healthy life.

Objective: Recognise tobacco as an avoidable causal factor for sickness and premature death.

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------------------------|---------------------|---|---|--|---|
| Know the consequences of tobacco use. | | Identify the percentage of illnesses and deaths associated with the use of tobacco in the total number of deaths in Portugal, the rest of Europe and the world. | | | |
| | | Identify the decrease in life expectancy of smokers caused by smoking. Identify smoking as an addiction caused by nicotine. | Infer the decrease in life expectancy of smokers caused by smoking. Identify smoking as an addiction caused by nicotine. | | |
| | | | | | onents of the chemical composition genic, toxic and mutagen effects. |
| | | | | | Recognise that the main components of the chemical composition of tobacco smoke have carcinogenic, toxic and mutagen effects. |

Objective: Learn about the immediate and long-term effects of tobacco on personal, family, social and environmental health.

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---|---|---|---|---|---------------------------------|
| • | Understand that the use of tob | acco is a health hazard. | Analyse the consequences of to disease, respiratory diseases, or | obacco of use in terms of the develo ther diseases. | pment of cancer, cardiovascular |
| | | Learn about the risks of use du | ring pregnancy to both mother and | baby. | |
| | | Understand the risks of tobacco use during adolescence. Understand the effect of tobacco use on physical activity and sport performance. | Discuss the consequences of tobacco use during adolescence. Discuss the effects of tobacco use on physical activity and sport performance. | | |
| | | | Identify nicotine as a toxic substance. | Identify nicotine as a toxic substhrough ingestion or absorption Characterise the addictive behaden Discuss the neurobiological effective | viour and tobacco dependency. |
| • | Know the benefits of quitting smoking. Identify the consequences of exposure to environmental tobacco smoke. | | | | |
| • | Identify the benefits of tobacco smoke-free environments. Evaluate the benefits of tobacco smoke-free environments. | | | o smoke-free environments. | |

Objective: Identify factors that influence the perception of risk in relation to tobacco usage.

| Preschool Education | Ist Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | |
|---------------------|--|---|--|--|--|
| | Identify individual protective factors in smoking initiation (knowledge concerning the risks, appropriate risk perception, self-esteem, assertiveness, problem-solving abilities, autonomy). Identify the family factors that protect from use initiation (smoke-free home, parental and older sibling example). Identify the cultural and social factors that induce or inhibit the use of tobacco (media, marketing, social networks). | | | | |
| | | Analyse facts, myths and beliefs associated with tobacco. Analyse sources of valid information regarding smoking and health. | | | |
| | | | Recognise social factors that pr tobacco smoke (tobacco legisla | rotect from use and exposure to tion). | |

Objective: Develop personal strategies to deal with risk situations.

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | |
|--|--|---|--|---------------------|--|
| • Encourage family members to not smoke. | | Identify refusal skills, when pressured to use tobacco (know how to say no whether or not to use, how to change the subject, how to be able to get out of a situation or ask for help). | | | |
| | , | Encourage friends and family members to not smoke. Develop mind sets and attitudes favourable to the adoption of a health-promoting and tobacco free lifestyle. | | | |

Subtheme 3: Alcohol

Alcohol, taken in alcoholic beverages, is the psychoactive substance most consumed by adolescents in Portugal. Alone or associated with the use of other psychoactive substances (tobacco, cannabis, cocaine or others) it is frequently found in leisure spaces and recreational settings frequented by adolescents.

Objective: Identify the problems linked to alcohol in relation to illness and premature death

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---|---|--|--|--|--|
| • | Know the consequences of risk consumption (13), harmful (15) and excessive, of alcoholic beverages. | | Identify the percentage of illnesses and deaths associated with the consumption of alcoholic beverage in Portugal, the rest of Europe and the world. | | |
| | | Identify the decrease in life expectancy of people caused by harmful and/or heavy drinking of alcoholic beverages. | Analyse the decrease in life expectancy of people caused by harmful and/or heavy drinking of alcoholic beverages. | | Evaluate the decrease in life expectancy of people caused by harmful and/or heavy drinking of alcoholic beverages. |
| • | Connect accidents (road, work | ,) with heavy drinking of alcoholi | c beverages. | Evaluate the impact that accide heavy drinking of alcoholic bev society. | ents (road, work,) caused by erages have on the family and on |

Objective: Identify factors that influence the perception of risk in relation to drinking alcoholic beverages

| Preschool Education | Ist Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|--|---|--|--|
| | Identify individual enabling factors of alcoholic beverage consumption, namely the normalisation of drinking, beliefs, expectations and setting. Identify the cultural and social factors that induce or inhibit alcoholic beverage consumption (media, marketing, social media). | | Evaluate individual enabling factors of alcoholic beverage consumption, namely the normalisation of drinking, beliefs, expectations and setting. | |
| | | | Identify the cultural and social determinats that induce or inhibit alcoholic beverage consumption (media, marketing, social networks.) | Critically analyse the cultural and social determinants that induce or inhibit alcoholic beverage consumption (media, marketing, social networks). |
| | | Analyse facts, myths and beliefs | s associated with alcohol. | |
| | | Identify strategies that promote alcoholic beverage consumption in some settings (happy hours, price reductions). | Analyse strategies that promote alcoholic beverage consumption in some settings (happy hours, price reductions). | Evaluate strategies that promote alcoholic beverage consumption in some settings (happy hours, price reductions). |
| | | Learn about the legal framework of alcoholic beverage consumption. | Analyse the legal framework of alcoholic beverage consumption. | Evaluate the legal framework of alcoholic beverage consumption. |

Objective: Learn about the effects of alcohol on health, both immediate and long term

| Preschool Education | Ist Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | |
|----------------------------------|---|--|--|---|--|
| Know the effects of drinking all | Know the effects of drinking alcoholic beverages. | | | nolic beverages, namely those that cilled (6) and that are alcoholised. | |
| | | Know the correlation between and the amount of pure alcoho | n the alcoholic strength on drinks ol present in the same. | Apply the knowledge of the correlation between the alcoholic strength on drinks and the amount of pure alcohol to the concrete reality of consumption. | |
| | | | | the effect of alcohol on the system cal, behavioural, environmental). | |
| | | Identify the immediate and sho | ort-term effects of drinking alcoholic | beverages. | |
| | Learn about the risks of drinking during pregnancy for both the mother and for the embryo/foetus. | | Evaluate the risks of drinking during pregnancy for both the mother and for the embryo/foetus. | | |
| | Identify the consequences of alcohol consumption during childhood. | Identify the consequences of alcohol consumption during adolescence on the maturation process of the central nervous system and liver. | Analyse the consequences of alcohol consumption during adolescence on the maturation process of the central nervous system, liver and other organs. | Evaluate the consequences of alcohol consumption during adolescence on the maturation process of the central nervous system, liver and other organs. | |
| | | Identify the principal consequences of prolonged alcoholic beverage drinking on a physical, psychological, familial, social and school/ work performance level. | Analyse the principal consequences of prolonged alcoholic beverage consumption on a physical, psychological, familial, social and school/work performance level. | Evaluate the principal consequences of prolonged alcoholic beverage consumption on a physical, psychological, familial, social and school/work performance level. | |
| | | | Understand what an alcohol- induced coma is and its associated risks. | Evaluate what an alcohol- induced coma is and its associated risks. | |
| | | Identify what alcoholism is. | | Identify that alcoholism as a disease has different treatment phases. | |

Objective: Identify patterns of alcoholic beverage consumption, the respective consequences and associated risks

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|--|---|---|--|
| | | Identify patterns of alcoholic be respective consequences. For edrinking (12) | everage consumption and the example: binge drinking (14), heavy | Analyse the different patterns of alcoholic beverage consumption and the respective consequences. For example: binge drinking, heavy drinking |
| | | consumption (driving under the behaviours, violence). | | Analyse the risk behaviours associated with alcoholic beverage consumption (driving under the influence of alcohol, risky sexual behaviours, violence). Analyse the risks associated with the simultaneous consumption of alcohol and other substances: legal (medications, tobacco, energy drinks) and illegal (cannabis, among others). |

Objective: Adopt appropriate behaviours regarding alcoholic beverage consumption

| Preschool Education | Ist Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|------------------------------|--|--|-------------------------------|
| | | Identify measures at the school and community level that can promote appropriate decisions from children and adolescents regarding alcoholic beverages. | regarding alcoholic beverage. • Abstain from alcoholic beverage | from children and adolescents |
| | | Identify sources of valid and sound information regarding alcoholic beverages and their consumption. | beverages and their consumption. | |

Subtheme 4: Other psychoactive substances – PAS

A psychoactive substance (PAS) is any substance, natural or synthetic, which, when consumed, alters the performance of the central nervous system, categorised according to its effects, into three types: depressants, stimulants and psychedelic. Their consumption, cultivation or production can be legal or illegal, that regulation coming under a set of international conventions and national legislation.

Objective: Identify the characteristics and types of PAS

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|--|--|--|---------------------|
| | Know the effects of the consumption of some PAS. | Identify that the use of PAS affects vital processes and social relationships. | Identify the characteristics of PAS according to the effects triggered on the central nervous system (stimulants, depre and disruptive). | |

Objective: Learn about and identify the immediate, short and long-term effects of PAS consumption on health

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|---|---|---|---|
| | | Identify the factors that condition the effect of PAS on the organism (physical/biological, psychological, environmental). Identify the effects of PAS on the organism. Analyse the effects of PAS on the organism. | | Evaluate the factors that condition the effect of PAS on the organism (physical/biological, psychological, environmental). |
| | Identify the effects of PAS on to | | | Evaluate the effects of PAS on the organism. |
| | Identify the risks of PAS consumption during pregnancy, both for the mother and for the embryo/ foetus. | | Analyse the risks of PAS consumption during pregnancy, both for the mother and for the embryo/foetus. | |
| | | Identify the impact of PAS consumption during adolescence on the maturation processes of the central nervous system. Identify the principal consequences of prolonged PAS consumption, on a physical, psychological, familial, social and school/work performance level. | | Analyse the impact of PAS consumption during adolescence on the maturation processes of the central nervous system. |
| | | | | Evaluate the principal consequences of prolonged PAS consumption, on a physical, psychological, familial, social and school/work performance level. |
| | | Identify what PAS dependency | is. | |

Objective: Identify factors that influence the perception of risk in relation to PAS consumption

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|---|---|---|--|
| | Identify individual enabling factors of PAS consumption, namely the normalisation | Identify individual enabling factors beliefs, expectations and setting | trivialisation of consumption, | |
| | of consumption behaviour according to surrounding references - parents, media coverage. | Identify the cultural and social consumption (media, marketing) | factors that induce or inhibit PAS g, social networks). | Analyse the cultural and social factors that induce or inhibit PAS consumption (media, marketing, social networks). |
| | | the normalisation of consumption behaviour according to surrounding references - parents, media coverage. factors of PA namely the no of consumpti according to | | |
| | | | | Analyse individual enabling factors of PAS consumption, namely the normalisation of consumption behaviour according to surrounding references - parents, media coverage. |
| | | Learn about the legal framewo | rk of PAS consumption. | Evaluate the legal framework of PAS consumption. |

Objective: Identify the different patterns of PAS consumption and the respective consequences and risks associated with its consumption

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|--|---|--|---|
| | | Identify the different patterns of PAS consumption and the respective consequences. | Analyse the different patterns of PAS consumption and the respective consequences. | Evaluate the different patterns of PAS consumption and the respective consequences. |
| | | | | Analyse the risk behaviours associated with PAS consumption (driving under the influence of PAS, risky sexual behaviours, violence). Analyse the risks associated with the simultaneous consumption of PAS and other substances: legal (alcohol, medications, tobacco, energy drinks) and illegal. |

Objective: Adopt appropriate behaviours regarding PAS consumption

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|--|--|--|--|
| | | Identify measures at the school and community level that can promote appropriate decisions from children and adolescents regarding PAS consumption. | promote appropriate decisions regarding PAS consumption. • Abstain from PAS consumptior | ol and community level that can from children and adolescents n. e refusal behaviours regarding PAS |
| | | Identify sources of valid and sound information regarding PAS and their consumption. | Analyse sources of valid and so their consumption. | und information regarding PAS and |

Subtheme 5: Other Non-Substance Addictions

An addiction (2) that is non-substance related is any repetitive behaviour that produces pleasure and stress relief, especially in its first stages, and which leads to a loss of control over the same, severely disrupting daily life on the family, work or social level, which can intensify over time and lead to a dependency.

Objective: Learn about the types and characteristics of non-substance addictions and dependencies.

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|--|--|--|--|--|
| Identify the most common types of non-substance addictions and dependencies (video games). | Identify the most common types of non-substance addictions and dependencies (video games, internet, smart phones). | | | Analyse the most common types of non-substance addictions and dependencies (gaming, internet, smart phones). |
| | | | | cations of the most common types d dependencies (gaming, internet, |

Objective: Know and identify the immediate, short and long-term effects of non-substance addictions and dependencies

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | 9 | Secondary Education |
|---------------------|--|--|--|----------------------|--|
| | | Identify the immediate and long common non-substance addict internet, smart phones). | g-term effects of the most ions and dependencies (gaming, | lo co ac (g | Analyse the immediate and ong-term effects of the most ommon non-substance ddictions and dependencies gaming, internet, smart whones) |
| | | nces of the most common non-subs ilial, social and school/work perform | | co ac at fa | Analyse the principal onsequences of the most ommon non-substance ddictions and dependencies t a physical, psychological, amilial, social and school/work performance level. |

Objective: Identify risk (23) and protective (22) factors in relation to non-substance addictions and dependencies

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|--|---|---|---|
| | Identify the cultural and social factors that induce or inhibit risk behaviours. | Identify individual factors that i addictions and dependencies. | induce or inhibit non-substance | Analyse individual factors that induce or inhibit non- substance addictions and dependencies. |
| | | Identify the cultural and social risk behaviours (media, market | determinants that induce or inhibit ing, social networks). | Analyse the cultural and social determinants that induce or inhibit risk behaviours (media, marketing, social networks). |
| | | Identify risks associated with the use/consumption of products, goods and activities that can trigger addictive behaviours. | Analyse risks associated with t goods and activities that can tr | he use/consumption of products, igger addictive behaviours. |
| | | Identify factors that promote the low perception of risk of the use, consumption of products, goods and activities that can trigger addictive behaviours. | | the low perception of risk of the goods and activities that can trigger |

Objective: Adopt appropriate behaviours regarding non-substance addictions and dependencies

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|--|---|---|---|
| | | Identify conditions and measures at the school and community level that can foster appropriate decisions regarding non-substance addictions and dependencies. | | Evaluate conditions and measures at the school and community level that can foster appropriate decisions regarding non-substance addictions and dependencies. Value and foster responsible behaviours regarding non-substance addictions and dependencies. |
| | | Identify sources of valid and so substance addictions and deper | und information regarding non- ndencies. | Analyse sources of valid and sound information regarding non-substance addictions and dependencies. |
| | | Identify that well-being benefits | from balanced and preventive beha | viours. |

AFFECTIONS and SEXUALITY EDUCATION

The World Health Organisation defines sexuality as "an energy that motivates us to find love, touch, tenderness and intimacy; it intertwines with the way we feel, move, touch and are touched; it is to be sensual and at the same time be sexual. Sexuality influences thoughts, feelings, actions and interactions, and for this reason, also influences our physical and mental health". Sexuality is present in our day-to-day life, and consequently, its approach cannot be confined to a "subject". Because school is a place populated by children and adolescents whose ages are the crossroads for the phenomena of corporal and mental transformation linked to natural growth, it is there that some of the first and most impressive feelings and emotions are experienced, stemming from sexual development. Sexuality is experienced by children and adolescents in various forms, according to family and school experience, and the socioeconomic framework.

In the various environments that school provides, students experiment with their sexuality, whether in their play, their studies or their dating relationships, but also in their relationship with school teaching staff and workers. It is present in conversations, games, and squabbling but also in their scientific knowledge. In order for sexuality education to have the desired results, it must address school as a whole, pervade all its environments, involve all of its members, and take advantage of every moment so that, through structured emotional events, it can build models that uphold sexual values and rights, on which youth can develop their own identity and respect for others.

Sexuality supports affections, which are manifested in the form of emotions, feelings and passions, always accompanied by the impression of pain or pleasure, satisfaction or dissatisfaction, delight or distaste, happiness or sadness. There is an affective life that continuously makes us accept or reject an event, a setting, a person or even a space. Caring for affections at school takes on a significant importance since a better or worse learning process depends on the affective connections, positive or negative, interpersonal relationships that are more or less satisfying and as a result, attitudes and behaviours that are more or less positive. Developing affections at school will be an important leverage for the educational success of its students.

Subthemes:

- Identity and Gender
- 2. Affective Relationships
- **Values** 3.
- Sexuality Development
- Parenthood
- Sexual and Reproductive Rights

Subtheme I: Identity and Gender

In terms of identity, we lay the foundation for building the individual human being. Being unique people, with a gender, own mind, a history that transports legacies from a past and where there is hope for the future is the basic acquisition of awareness that places us in the social scenario.

Identity is the fingerprint of our being, living and becoming. Growing is the process of becoming more of who one is.

Gender roles are the social constructs, content of which changes over time and is dependent on culture, ethnic background, religion, education and the geographic, economic and political setting in which we live. However, behaviour models are merely guidelines for our own gender identity and do not determine, nor should they limit, the way in which we express it.

Thus, gender describes a collection of qualities and behaviours that societies expect from individuals and which contribute to the formation of the respective social identity, an identity that differs from one culture to another and at different periods in history.

Gender identity is an internal and individual gender experience felt profoundly by each person, which may or may not correspond to social expectations.

Objective: Develop the conscience of being a unique person regarding sexuality, identity, gender expression and sexual orientation

| Preschool Education | Ist Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|------------------------------|---|--|--|---------------------|
| Become aware of gender expre | ession and identity diversity. | | | |
| | Understand and respect diversity in sexuality (32) and in sexual orientation. | | Respect and accept diversity in sexuality and in sexual orientation. | |

Objective: Develop a positive attitude regarding gender equality

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | |
|---|---|--|---|--|--|
| Deconstruct the different social-cultural roles regarding sex | Critically analyse the different social-cultural roles regarding sex. | | | | |
| | Critically analyse the roles/behaviours associated with girls and with boys as to dating, to sexual relations and to the prevention of unwanted consequences of the same. | | | | |
| | Identify gender-based violence. | | | | |
| Discuss the significance of promoting equal rights and opportunities between men and women. | | | Evaluate the significance of promoting equal rights and opportunities between men and women | Take action to promote equal rights and opportunities between men and women. | |

Subtheme 2: Affective Relationships

Affective relationships refer to the individual capacity to experience the collection of affective phenomena (emotions, passions, feelings). Relationships and ties created by affectivity are not based solely on feelings, but also on attitudes. As such, every type of relationship is associated with the capacity for interaction and the skill/expertise in knowing how to accept people as they are.

Objective: Recognise the importance of affections in individual development

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | |
|---|--|---|--|---------------------|--|
| Identify own emotions. Know how to communicate own emotions. Identify the emotions of others. Respect the emotions of others. Understand that emotions are expressed in different ways. | | | | | |
| Know how to distinguish different affective expressions. | Understand that affective relationships are influenced by psychological, sociocultural and environmental determinants. | Understand in a critical manner that affective and sexual relationships are influenced by psychological, socio-cultural and environmental determinants. | | | |

Objective: Recognise the importance of interpersonal relationships

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | |
|---|--|--|--|---------------------|--|
| Identify the importance of affective relationships in different life settings (family, school, friends, society). | | | | | |
| • Act assertively in various social | interactions. | | | | |

^{*} Some objectives are common to the Mental Health subtheme

Objective: Value cooperative and mutual help relationships

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|--|--|--|--|--|
| Recognise the importance of actively collaborating in day-to-day activities. Participate in the creation and implementation of day-to-day activities. | | | | Organise and implement da to-day activities. |
| Develop communication, conflict management and work group/team skills. | Develop communication, self-co | ontrol, assertiveness, conflict manage | ment and work group/team skills. | Develop and coordinate communication, self-control assertiveness, conflict management and work grouteam skills. |

Subtheme 3: Values

In school, the refocusing of learning about the values of respect, tolerance and sharing takes on a central role in the fostering of affections and sexual health. For these values, to educate is to incorporate personal, social, moral and ethical dimensions that will govern the exercise of responsible freedom, full citizenship and sustainable health. In the area of fostering affections and sexuality, school and curriculum should be organised to help each student clarify and consolidate their values.

The respect for one's self and others, justice, equality and truth are universal moral values based on the Universal Declaration of Human Rights, which promote multicultural tolerance and acceptance.

In school, the empowerment of children and adolescents' fosters/guarantees the acceptance of differences and the equality of rights and opportunities.

Objective: Develop values of respect, tolerance and sharing

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---|---|--|---|---------------------|
| Express respect for self, for others and for the surroundings. | | | | |
| Identify individual and socio-cultural differences. Respect individual and socio-cultural differences. | | Express respect for individual and socio-cultural differences. | | |
| Develop attitudes of cooperation and mutual help. | Recognise the importance of adopting cooperative, mutual and tolerance behaviours towards others. | | Demonstrate responsibility in affective and sexual relationships. | |

Subtheme 4: Development of Sexuality

The World Health Organisation (2001) defines sexuality as an energy that motivates us to find love, touch, tenderness and intimacy; it intertwines with the way we feel, move, touch and are touched; it is to be sensual and at the same time be sexual. Sexuality influences thoughts, feelings, actions and interactions, and for this reason, also influences our physical and mental health.

It is an important, healthy and natural part of who we are and who we will be at all stages of our life. Talking about sexuality goes beyond broaching sexual feelings or sexual relations. Sexuality includes feelings, thoughts and behaviours on what it means to "be a woman" and "be a man", to be attractive, to be in love, what intimacy means, and on sexual activity.

Sexuality is a dimension of personal identity and human relationship that evolves naturally within the context of our overall development and expresses itself in different ways in the various stages of the life cycle.

Objective: Be able to accept and integrate the physical and emotional changes associated with sexuality throughout life

| | Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | |
|---|---|--|--|---|---|--|
| • | Learn that there are physical and emotional changes throughout life | Identify the physical and emotional changes throughout life. | | Analyse the physical and emotional changes throughout life. | Value the physical and emotional changes throughout life. | |
| • | Identify the existence of a sexual body. | Identify the existence of a sexual body and the various forms of identifying with it. Value the diversity of bodies. Critically assess the messages propagated by social media and aesthetic standards | | | | |
| | Identify and deconstruct the existing myths on sexuality. | | | | | |

- Develop a positive body image and respect for others.
- Recognise the existence of social norms regarding privacy and intimacy.

Objective: Be responsible to yourself and to others

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|--|---|--|--|--|
| | Identify sexuality as a positive c | omponent of personal development | and interpersonal relationships. | Value sexuality as a positive component of personal development and interpersonal relationships Respect the different individual options regarding sexuality. |
| Develop a positive attitude in relationships | Develop a positive attitude in relation to pleasure and to sexuality. Identify and discuss decision-ma of affective relationships and sexuality. Demonstrate a positive attitude sexuality. | | | |
| | Identify sexually transmitted dis- | seases and the primary and seconda | ry forms of protection. | |
| | Identify the different contraceptive methods. | Distinguish how the different co | ontraceptive methods work and the | ir suitability to different needs. |
| | Identify the importance of corr | ect use of condoms (male and femal | le) in the prevention of STDs and ur | nwanted pregnancy. |
| | Incorporate the use of condoms in sexual relations. Know how to negotiate healthy and safe sexual relations. Be familiar with and know how to access sexual health services and community. | | | |
| | | | | |
| | | | | d resources available in the |

Subtheme 5: Parenthood

A timely, conscientious and reflective preparation for parenthood should be part of the life project of individuals but also of couples.

School can contribute to the awareness of parental responsibility and should provide the appropriate means and information so that each student realises the implications of, in the future, having and/or caring for a child.

A person's decision to have a child should be planned in advance. It involves life changes and may involve changes in daily habits.

The ability to take on a "critical" attitude relative to the different perspectives that society has regarding pregnancy and parenthood becomes especially important.

Objective: Reflect for the development of a life project

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|--|--|--|--|---|
| Identify the diversity of family cRespect the diversity of family c | | | | |
| | | | | Envision family planning, taking into account the various dimensions: personal, familial, social and professional. |

Objective: Adopt attitudes and healthy behaviours

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education |
|---------------------|--|--|--|--|
| | | | | Analyse the cultural norms relating to pregnancy and parenthood. |
| | | | Identify options regarding pregr | nancy and parenthood. |
| | | | Identify the implications of early pregnancy and its consequences throughout life. | Recognise and evaluate the implications of early pregnancy and its consequences throughout life. |
| | | Identify behaviours with consequences on fertility. Identify behaviours with consequences on the development of the embryo/foetus | | embryo/foetus. |
| | | Understand that the behaviours emotional health and well-being | onsequences on the physical and | |

Subtheme 6: Sexual and Reproductive Rights

Sexual and reproductive rights are components of human rights related to sexuality and reproduction, which include the rights to liberty, privacy, health, freedom of thought and expression, education and information, integrity and dignity of all people.

More specifically, they include the rights of all people, without duress, discrimination and violence, to: secure the best sexual and reproductive healthcare; search, receive and transmit information in relation to sexuality; sexual education; respect for bodily integrity; the choice of partner; decide whether or not to be sexually active; have consensual sexual relations; decide whether or not and when to have children; and to pursue a satisfying and safe sexual life.

Just like all human rights, they are universal, inalienable, indivisible, interrelated and interdependent and impose obligations.

The responsible exercise of sexual and reproductive rights requires that all people respect the rights of others.

Objective: Recognise sexual and reproductive rights as components of human rights.

| Preschool Education | I st Cycle of Basic Education | 2 nd Cycle of Basic Education | 3 rd Cycle of Basic Education | Secondary Education | | |
|---|--|---|--|--|--|--|
| Identify the rights of families and children established in legislation and enjoy those rights. Be able to say yes and no and express needs and desires in an appropriate manner. Ask for help in situations of discrimination, prejudice or violation of rights. | | | | | | |
| | | Learn about the rights to information, protection and bodily integrity. Identify the situations of violation of sexual rights, namely domestic violence, harassment, sexual abuse and female genital mutilation. | | | | |
| | | | | | | |
| | | Be able to denounce situations | of violence and violation of rights. | | | |
| | | conscious and responsib | | Identify the right to free, conscious and responsible maternity and paternity. | | |
| | | | Learn about the status of sexual Portugal and the world. Learn about the services and reproductive health, available in | esources, in terms of sexual and | | |

GLOSSARY

(I) Abstinence from use

Corresponds to the abstinence from legal and illegal psychoactive substance (PAS) use. Abstinence from PAS may lead to the development of a syndrome specific to the substance, due to the cessation (or decrease) of its prolonged and "massive" use. The substance-specific syndrome causes suffering or clinically significant deficit in functioning at a social or occupational level or in other important areas of life of the individual.

(2) Addiction

Chronic primary disease of the brain that involves the neuronal circuits for reward, motivation, memory and other related circuits. The dysfunction in these circuits causes characteristic biological, psychological, social and psychic manifestations, specifically, the inability to achieve consistent abstinence, a deficiency of impulse control, cravings, decrease in the quality of critical judgement with diminished recognition of negative consequences for behaviours (health, personal, family, legal and other problems) and dysfunctional emotional response. Just like other chronic diseases, namely diabetes and cardiovascular disease, it evolves through cycles of relapse and remission. It covers a spectrum of behaviours, with an increase in the possibility of risk exposure and dependency which may, or may not, be related to substances.

According to the World Health Organisation, addiction to psychoactive substances (legal or illegal) means the repeated use of one or several psychoactive substances, where the user/addict becomes periodically or continually intoxicated, exhibits the compulsion to use the preferred substance(s), has great difficulty in voluntarily interrupting or changing the use of the substance(s) and demonstrates a determination to obtain the substance(s) by any means.

(3) Alcoholism

Term that varies in meaning, generally used in everyday language to refer to the chronic and continuous consumption or the regular consumption of alcohol that is characterised by the deterioration of control over the drinking of alcohol, with frequent episodes of intoxication and obsession with its use, despite the adverse consequences for the individual.

(4) Food allergy

A food allergy is a health-adverse reaction resulting from a specific and repeatable response of the immune system when exposed to a given fraction of the food. That food is recognised as an aggressor of the organism, the food responsible for the reaction being a protein called an allergen. The most common food allergies are cow's milk, eggs, peanuts and fatty and oleaginous fruits (known as "nuts" or "tree nuts", such as walnuts, hazelnuts, almonds, among others), fish, shellfish, wheat and soy, these foods being responsible for 90% of reactions. There are other allergens that are less prevalent, but which are required to be listed on labels, such as celery, mustard or lupins.

(5) Anorexia nervosa

Eating disorder listed in the Diagnostic and Statistical Manual of Mental Disorders, characterised by a restricted energy intake in relation to needs, leading to a significantly low body weight. In this eating disorder there is also an intense fear of gaining weight and a distorted body image.

(6) Distilled beverages

Beverages that result from distillation (by means of a still) of the alcohol produced during fermentation. Through an evaporation process (followed by a cold condensation) of the fermented beverages, beverages with a higher alcohol content can be obtained.

(7) Fermented beverages

Beverages that are obtained through alcoholic fermentation of sweetened juices through the action of yeast cultures.

(8) Bulimia nervosa

Eating disorder listed in the Diagnostic and Statistical Manual of Mental Disorders, characterised by recurring episodes of binge eating accompanied by inappropriate compensatory behaviours in order to avoid weight gain.

(9) Addictive Behaviours and Dependencies (ABD)

Behaviours with impulsive/compulsive characteristics related to different activities or conducts (ex. psychoactive substance use, gambling, among others) involving a potential for pleasure through intense activation of the brain structures that incorporate the reward system. The continuity and persistence of these patterns of behaviour, coexisting with other factors of a neurobiological, psychological, genetic and environmental nature, may evolve into the addiction cycle. A situation of dependency can arise in the presence of a delimited set of criteria, among which are the strong desire or compulsion to develop the addictive behaviour, a withdrawal syndrome, evidence of tolerance, difficulty in controlling addictive behaviour, gradual neglect of alternate pleasures in exchange for the addictive behaviour, among others.

(10) Risk behaviour

A type of behaviour that, by attitude or reaction, exposes a person to a greater probability of suffering physical or psychological harm, or of inflicting it on third parties.

(II) Binge eating

Behaviour characterised by a large ingestion of food in a limited time (period of 2 hours), accompanied by a loss of control over what and how much is ingested.

(12) Heavy drinking

Corresponds to a pattern of consumption greater than the one defined by the World Health Organisation for risk consumption (13).

(13) Risk consumption of alcohol

Corresponds to a level or pattern of drinking, occasional or on-going, that increases the probability of the occurrence of harmful consequences to the drinker, namely diseases, accidents, mental or behavioural disorders if the behaviour persists. World Health Organisation proposes a working definition of risk consumption of alcohol, describing it among women as a regular average daily consumption of alcohol of 20 g to 40 g of alcohol, and in men, as a regular average daily consumption of 40 g to 60 g of alcohol.

(14) Binge drinking

Defined as the ingestion of at least 60 g of alcohol (6 standard drinks*) for a man, and at least 40 g of alcohol (4 standard drinks) for a woman, within a two-hour interval, at a single event. It is characterised by an acute intoxication, which can be particularly detrimental in the presence of certain types of health problems. It is considered risk consumption.

*In Portugal, a standard drink unit corresponds to 10 grams of pure alcohol. In men between 18 and 64 years of age, the maximum recommended daily amount is two standard drinks, or 20g of pure alcohol. After the age of 65, the maximum recommended daily amount decreases to one standard drink, or 10 g of pure alcohol. In women, the maximum recommended daily amount is one standard drink, or 10 g of pure alcohol, at any age.

(15) Harmful drinking

Corresponds to a pattern of consumption that causes harm both to the physical health and to the mental health of an individual, accompanied or not by adverse social consequences, but does not meet the criteria for dependency. The objective damages present may be aggravated by continued consumption.

Any consumption of alcohol by minors is considered harmful.

(16) Dependency

A definitive diagnosis of dependency should only be made if three or more of the following criteria have been experienced or manifested at some point within the previous year:

- Strong desire or compulsion to consume the substance;
- Difficulty in controlling the substance consumption behaviour, in terms of starting, ending and levels of consumption;
- State of physiological abstinence, when the substance use was stopped or reduced, evidenced by: withdrawal syndrome for the substance or the use of the same substance (or one closely related) with the intent to ease or avoid withdrawal symptoms;
- Evidence of tolerance, so that increasing doses of the psychoactive substance are required to reach effects originally produced by lower doses;
- Progressive neglect of alternative pleasures in favour of psychoactive substance use: increase in amount of time necessary to recover from its effects;
- Persistence in substance use despite clear evidence of obviously harmful consequences.

(17) Mediterranean diet

The Mediterranean diet is essentially characterised by the predominance of vegetable products, among these are fruits, produce, grains, oleaginous fruits and legumes, and by the consumption of olive oil as the main source of fat. Dairy products are present in this food pattern in moderate amounts, as are fish, white meat (chicken, turkey and rabbit) and eggs. In this nutrition model, the consumption of red meats (beef, pork, goat, lamb) and cold meats, as well as sugar and sweetened products, occurs infrequently and in low quantities. The Mediterranean food standard, in being characterised by the consumption of local, fresh and seasonal products, can play an important role in the preservation of the environment and of biodiversity and the fight against climate change.

(18) Right to food

It is a human right present in Article 25 of the Universal Declaration of Human Rights. The right to food corresponds to the physical and economic access to foods for all people.

(19) Dissuasion

Defines a set of interventions developed in order to decrease the use of illegal psychoactive substances and bring users closer to health systems. It presupposes a risk assessment of the situation in which the users find themselves, and when it is warranted, the referral to specialised support structures, fostering and facilitating the process of adherence to treatment.

(20) Complex/secondary emotions

Emotions of a more complex nature, they are acquired throughout development, the result of social-culture factors, and develop according to the relational and cultural context to which the individual belongs. Examples include envy, guilt, compassion, pride, friendliness, shame, outrage, contempt.

(21) Primary emotions

These are considered innate (not learned), or in other words, they are common to all people, regardless of socio-cultural factors. Primary emotions are joy, sorrow, fear, disgust/aversion, anger and surprise.

(22) Protective factor

Characteristic internal and/or external to the individual, the presence of which reinforces the probability or the predisposition that a certain positive phenomenon will occur in the sense of the adjusted development of individuals. Protective factors are personal, social and familial and make it possible to predict the development of behaviour, placing the individual in a position of reduced vulnerability.

(23) Risk factor

Characteristic internal and/or external to the individual, the presence of which increases the probability or the predisposition that a certain negative phenomenon will occur. Risk factors are personal, social and familial and make it possible to predict the development of behaviour, placing the individual in a position of vulnerability.

(24) Incongruency in communication

Dissonance in communication, that is, expressing the opposite of what we feel or think.

(25) Food intolerance

A food intolerance is characterised by an adverse reaction, reproducible, which occurs after exposure to a given fraction of food, but which, unlike food allergies, does not involve the immune system. One example of food intolerance is intolerance to lactose, in which the body is unable to digest lactose, a sugar found in milk.

(26) Meta-communication

Meta-communication is understood as the "communication about communication", in the sense of understanding the meaning(s) that a particular communication has in an interaction. Watzlawic, p. et al (2013). The Pragmatics of Human Communication, a Study of the Patterns, Pathologies and Paradoxes of the Interplay. 22nd ed. S. Paulo: Cultrix.

(27) Obesity

Obesity and pre-obesity are defined as conditions in which there is an abnormal and /or excessive accumulation of body fat, which can result in a deterioration in the state of health of individuals. For the classification of an individual as normal weight, pre-obese or obese, reference is made to the body mass index (BMI). The BMI is found by dividing the weight by the squared height BMI=weight/height2).

A BMI value between 20 and 24.9 kg/m2 signals a normal weight.

The BMI has some limitations, since even though it is considered the best single marker for excess body fat at a populational level, it does not take into account the gender, age nor body composition of individuals.

(28) Maslow's Pyramid

Maslow's Pyramid, also known as the Hierarchy of Needs is a concept created by the North American psychologist Abraham H. Maslow (1943), which determines the conditions necessary for each human to have his needs met at a personal and professional level, establishing a hierarchisation of those needs throughout life, in line with an increasing degree of complexity.

Physiological needs: the base of the pyramid where the basic needs of any human being are, such as hunger, thirst, breathing, excretion, shelter and sex, for example.

Security needs: it is the second level of the hierarchy, where the elements that make people feel safe are found, from safety at home to work and health safety.

Social needs: it is the third level of the pyramid. This group includes the needs to feel being a part of a social group: have friends, start a family, exchanging and sharing affections.

Status or esteem needs: this is the fourth level, which groups two main needs: that of recognising one's own abilities and that of being recognised by other people, among other characteristics that involve power and pride, for example.

Self-realisation needs: this is the top of the pyramid, when individuals are able to take advantage of all of their own potential, with autonomy and self-control over their own actions; in other words, the ability to do that which one enjoys and is equipped for and which provides fulfilment.

http://www.portal-administracao.com/2014/09/maslow-e-hierarquia-das-necessidades.html

(29) Prevention

Prevention, within the scope of the health sector, is framed within the model that foresees a continuum in the care and approach to individuals. It focuses on changes to behaviour and personal and social practices in the sense of promoting individual and collective health. Prevention or preventive intervention seeks to provide individuals and/or specific groups with the knowledge and skills necessary to deal with the risk. It also acts on environments, decreasing the presence of the factors that enable the above-mentioned behaviours or fostering the development of protective factors. Preventive strategies target the general population, subgroups and individuals; they apply to the domains of the individual, family, school and community. The preventive approach is classified into four levels of intervention: Universal, Selective, Indicated and Environmental.

(30) Main meals

Breakfast, lunch and dinner are considered main meals since they are the meals where there is a larger caloric and nutrient intake.

(31) Food security/food safety

The concept of food security in Portuguese is used to refer to the term *food security* as well as to refer to the term *food safety*. The Food and Agriculture Organization (FAO) defines *food security* as "a situation that exists when all people, at any given moment, have physical, social and economic access to sufficient, safe, secure and nutritionally appropriate food that allows them to satisfy their nutritional needs and food preferences for an active and healthy life". Meanwhile, the term *food safety* refers solely to issues related to the hygienic condition of food. For the purposes of terminology, we can refer to this last concept as safety of foods.

(32) Sexuality

Sexuality is a central aspect of the human being throughout life and encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction.

Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles/duties and relationships.

While sexuality may include all these dimensions, not all are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, ethical, legal, historical, religious and spiritual factors.

(33) Psychoactive substances (PAS)

Every substance, natural or synthetic, that alters the functioning of the Central Nervous System (CNS), depressing it, stimulating it or creating psychotic breakdowns. Psychoactive substances, when absorbed by the CNS, affect the mental processes, e.g., cognition and/or emotion. This term and its equivalent, psychotic drug constitute the description for every class of legal substances (such as alcohol and tobacco) and illegal substances. The term "psychoactive" does not necessarily imply the development of dependency.

(34) Smoking

Term with varying meaning, generally used in everyday language to describe the daily, continued use of cigarettes or other tobacco products, which is characterised by the persistent desire to smoke, despite adverse consequences to the individual, by withdrawal symptoms any time there is a decrease or interruption in consumption and by unsuccessful efforts in regard to quitting.

(35) Drug addiction

Term with varying meaning, generally used in everyday language to describe the chronic and continued or regular use of illegal psychoactive substances, usually called "drugs", which is characterised by the decline in control of their use, with frequent episodes of intoxication and obsession with their consumption, despite the adverse consequences to the individual.

(36) Soft transport

Means of travel and transport at low speeds, occupying little space and with little impact on public roads and without gas emissions to the atmosphere, such as simply walking or mobility by means of bicycle, skates, skateboard, scooters or any similar means, regarded as an economic, social and environmental asset, and a real alternative to the automobile.

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