

EXECUTIVE SUMMARY

Title: Healthy Youth Act Implementation

Type of Executive Summary:

- Consent
- Action
- Action on First Reading
- Discussion
- Information

Policy Implications:

- Constitution _____
- General Statute #HB 88
- SBE Policy #GCS-F-007
- SBE Policy Amendment
- SBE Policy (New)
- APA # _____
- APA Amendment
- APA (New)
- Other _____

Presenter(s): Ms. Angela H. Quick (Deputy Chief Academic Officer, Curriculum, Instruction, Technology and Accountability Services), Dr. Cindy Williamson (Director, Division of K-12 Curriculum, Instruction and Technology Division) and Dr. David Gardner (Section Chief, Healthy Schools).

Description:

In response to HB 88 Healthy Youth Act of 2009, the Curriculum, Instruction and Technology Division has developed a plan to support LEAs in the implementation of this bill and the revisions to the requirements for instruction for reproductive health and safety education.

Resources:

Current research, content area experts

Input Process:

Review of GCS-F-007 with the Curriculum, Instruction and Technology division, LEA Healthy Living Consultants, and medical practitioners

Stakeholders:

Students, parents, administrators, and teachers

Timeline For Action:

This item is presented for Discussion at the September State Board meeting and will return for Action at the State Board meeting in October.

Recommendations:

State Board of Education members are requested to review the implementation plan for instructional support to LEAs.

Audiovisual equipment requested for the presentation:

- Data Projector/Video (Videotape/DVD and/or Computer Data, Internet, Presentations-PowerPoint preferred)
Specify: _____
- Audio Requirements (computer or other, except for PA system which is provided)
Specify: _____
- Document Camera (for transparencies or paper documents – white paper preferred)

Motion By: _____

Seconded By: _____

Vote: Yes _____ No _____ Abstain _____
Approved _____ Disapproved _____ Postponed _____ Revised _____

*Person responsible for SBE agenda materials and SBE policy updates: Amy Betsill Bain, 919-807-3817

NORTH CAROLINA STATE BOARD OF EDUCATION
Policy Manual

Policy Identification

Priority: Globally Competitive Students

Category: Standard Course of Study

Policy ID Number: GCS-F-007

Policy Title: Policy delineating the NC Standard Course of Study for Healthful Living, Grades K-12

Current Policy Date: 09/12/2002 10/01/2009

Other Historical Information: Previous board dates: 04/17/1985, 06/04/1993, 05/02/1996, 12/07/2000, 09/12/2002

Statutory Reference: GS 115C-81; Senate Bill 1, 1985 General Assembly Session

Administrative Procedures Act (APA) Reference Number and Category:

Please refer to the insert **NC Standard Course of Study - Healthful Living Skills K-12 Curriculum**. This Manual is available for purchase from the NC Department of Public Instruction. For price and availability, please call the Publication Sales Section of the Communications and Information Services Division at 1-800-663-1250. Instructions for ordering will be given at that time.

Questions regarding the **NC Standard Course of Study - Healthful Living Skills K-12 Curriculum** should be directed to:

NC Department of Public Instruction
Division of Instructional Services
Arts Education and Healthful Living Section
6349 Mail Service Center
Raleigh, NC 27699-6349

(919) 807-3857 or (919) 807-3858.

The **NC Standard Course of Study - Healthful Living Skills K-12 Curriculum** is also available from the following link:

<http://www.ncpublicschools.org/curriculum/health/index.html>.

In response to the passage of the Healthy Youth Act, the Healthy Schools Section has developed a response plan to ensure that local school districts, schools and health educators are appropriately prepared to deliver reproductive health and safety education as mandated through this Act by the General Assembly. An essential element of this plan is the creation of a collaborative of key DPI and statewide partners and stakeholders that will advise and work in partnership with the Healthy Schools Section in preparation for the 2010 – 2011 school year effective date of the statute. A description of the Healthy Youth Act Collaborative and timeline for its work are provided below.

Healthy Youth Act Collaborative (HYAC)

Background

In 2007, 69.1% of high school seniors reported having had sexual intercourse and 46.8% of those did not use a condom at last sexual intercourse (North Carolina Youth Risk Behavior Survey (NC YRBS, 2007). North Carolina's 2005 pregnancy rate for females ages 15-19 was 48.5 per 1,000 (NC State Center for Health Statistics, 2007). North Carolina ranks ninth nationally for rates of teen pregnancy. Approximately 67% of STDs reported in North Carolina occur in people ages 15-24 (Healthy Carolinians, 2009), and most HIV/AIDS related deaths occur in young and middle aged adults (NC Department of Health and Human Services, 2002). There are multiple adolescent sexual risk behaviors that influence pregnancy and STD rates. Public school comprehensive health education instruction addresses essential skills and learning strategies that help students make healthy choices and decisions.

Currently, the General Statute 115C-81(e1) requires public schools to offer an Abstinence Until Marriage (AUM) education as part of a comprehensive school health education program. This requires that Healthful Living courses teach abstinence until marriage as the only certain means of avoiding out-of-wedlock pregnancy, STDs and other associated health and emotional problems. These courses emphasize that a mutually faithful monogamous heterosexual relationship in the context of marriage is the best lifelong means of avoiding diseases transmitted by sexual contact, including Acquired Immune Deficiency Syndrome (AIDS).

In June 2009, after weeks of deliberation and the approval of the NC General Assembly, Governor Perdue signed the Healthy Youth Act into law. The revision of General Statute 115C-81(e1) requires all school systems to offer a reproductive health and safety education program to students in grades seven, eight, and nine that utilizes age-appropriate and scientifically-based materials. This instruction will include information about the prevention and transmission of sexually transmitted diseases (STDs), the effectiveness and safety of contraceptives for pregnancy and STD prevention, the effects of contracting the Human Papilloma Virus, and teaches the awareness and risk reduction of sexual assault and abuse. The program, however, would remain part of a larger reproductive health education curriculum and would retain the abstinence-until-marriage focus that is currently offered by North Carolina schools. This new requirement will be applied at the beginning of the 2010-2011 school year.

The Department of Public Instruction (DPI) and the State Board of Education are responsible for the development of HIV/AIDS, STDs and teen pregnancy prevention learning objectives that incorporate the requirements of the state statute into the *North Carolina Healthful Living Standard Course of Study* (SCOS). Programs and instruction implemented under these objectives should present techniques and strategies to deal with peer pressure, offer positive reinforcement and teach reasons, skills and strategies for becoming or remaining abstinent from sexual activity.

Mission

This collaborative will serve as a resource for the NC Healthy School Section in an effort to support effective and quality reproductive health and safety education through comprehensive health education instruction in the public schools of North Carolina.

Objectives

- *To work with stakeholders in the development and implementation of a statewide and local level communication plan that will inform administrators, teachers, parents/legal guardians and community members of the revised reproductive health and safety curriculum.*
- *To support the NC Healthy Schools Section in providing technical assistance to support each LEA's implementation of health and reproductive safety education.*
- *To support the NC Healthy Schools Section through identification of information and materials that are age-appropriate, scientifically-based and medically accurate for the instruction of reproductive health and safety education.*
- *To identify and support professional development opportunities for those responsible for the delivery of reproductive health and safety education.*
- *To identify local resources that promote parent and community support, including material review and consent form processes.*

Composition:

The HYAC will consist of no more than twenty-five (25) representatives from various state/local level governmental agencies and programs in North Carolina. These members will provide feedback to the NC Healthy Schools Section related to the aforementioned objectives. As appropriate, the HYAC members will work in specific areas on subcommittees. Members will include representation from classroom health educators, LEA Healthful Living Coordinators, public health educators, principals/school administrators, school nurses, PTA, local school board members and college/university curriculum specialists.

Subcommittees:

Subcommittees will be formed to meet the objectives of the HYAC with at least one NC Healthy Schools Staff member serving as lead facilitator. Subcommittees are listed below.

- Scientifically-Based Materials and Information
 - Identification and review of resources
- Professional Development and Technical Assistance (PDTA) - Educational Settings
 - Teachers/School staff, use of scientifically-based materials and information, SCOS alignment, accountability, etc.
- Professional Development and Technical Assistance (PDTA) – Community-Based
 - SCS alignment, use of scientifically based materials and information, family/community education and support, etc.

Guidelines for HYAC

- Communication and Dissemination Plan
- Logistics
 - Parental consent guidelines and materials review process, etc.

The following represent NCDPI and the NC Healthy Schools Section: David Gardner (Section Chief), Rebecca Reeve (DPH Senior Advisor), Johanna Chase (Health Education Consultant), Nakisha Floyd (PANT Consultant), Paula Hudson Collins (SBE Healthy Responsible Students/ Senior Policy Advisor) and Tanya Bass (HIV Policy/Program Consultant).

Resources Available:

There are minimal funds currently available to support the activities of this workgroup. These funds may be used to provide need-based travel and subsistence reimbursement.

Draft Timeline and Process to meet the objectives above:

By the end of August 2009, a minimum of 20 state, local and community agency representatives will be identified to serve on the HYAC.

By the end of September 2009, an online conference call will have been completed to provide an introduction to the HYAC and provide guidelines for working on the HYAC subcommittees.

By the end of September 2009, a face-to-face meeting will be convened in Raleigh to assign specific activities to subcommittees, set guidelines for the initial phase of work, discuss the areas of focus for the subcommittees, establishment of timeline and provide additional opportunities for dialogue for the HYAC.

By the end of October 2009, a timeline will have been established and implemented to ensure the completion of all immediate tasks of the HYAC, including drafts of LEA and school site implementation guidelines, Train the Trainer professional development guidelines and guidance to statewide partners who will also deliver professional development.

By the end of November 2009, all subcommittees will have completed a minimum of two online or face-to-face meetings, identified and completed initial phase tasks and provided a written report to the HYAC. We will connect and communicate with healthful living coordinators, superintendents and principals via appropriate listservs to share, plan and schedule for professional development opportunities available in early winter and spring of 2010.

By the end of December 2009, the initial phase and work of the HYAC will have been completed.

Beginning in January 2010, technical assistance documents will be identified and refined and a framework for professional development will be established and communicated to districts and statewide partners. Specific professional development training schedules will be published and communicated.

By the end of February 2010, technical assistance supporting documents will be shared via listservs.

From January through the summer of 2010, professional development and technical assistance will be provided through the Healthy Schools Section and by statewide partners.

**GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2009**

**SESSION LAW 2009-213
HOUSE BILL 88**

AN ACT TO DIRECT LOCAL SCHOOL ADMINISTRATIVE UNITS TO PROVIDE REPRODUCTIVE HEALTH AND SAFETY EDUCATION IN GRADES SEVEN THROUGH NINE.

The General Assembly of North Carolina enacts:

SECTION 1. This act shall be known as the "Healthy Youth Act of 2009."

SECTION 2. G.S. 115C-81(e1)(1)l. reads as rewritten:

"l. ~~Abstinence until marriage education; Reproductive health and safety education; and~~".

SECTION 3. G.S. 115C-81(e1)(3) is repealed.

SECTION 4. G.S. 115C-81(e1)(4) reads as rewritten:

"(4) ~~The State Board of Education shall evaluate abstinence until marriage curricula and their learning materials and shall develop and maintain a recommended list of one or more approved abstinence until marriage curricula. The State Board may develop an abstinence until marriage program to include on the recommended list. The State Board of Education shall not select or develop a program for inclusion on the recommended list that does not include the positive benefits of abstinence until marriage and the risks of premarital sexual activity as the primary focus. The State Board shall include on the recommended list only programs that include, in appropriate grades and classes, instruction that: Each local school administrative unit shall provide a reproductive health and safety education program commencing in the seventh grade that includes the following instruction:~~

- a. ~~Teaches that abstinence from sexual activity outside of marriage is the expected standard for all school-age children;children.~~
- b. ~~Presents techniques and strategies to deal with peer pressure and offering positive reinforcement;reinforcement.~~
- c. ~~Presents reasons, skills, and strategies for remaining or becoming abstinent from sexual activity;activity.~~
- d. ~~Teaches that abstinence from sexual activity is the only certain means of avoiding out-of-wedlock pregnancy, sexually transmitted diseases when transmitted through sexual contact, including HIV/AIDS, and other associated health and emotional problems;problems.~~
- e. ~~Teaches that a mutually faithful monogamous heterosexual relationship in the context of marriage is the best lifelong means of avoiding sexually transmitted diseases, including HIV/AIDS;HIV/AIDS.~~
- f. ~~Teaches the positive benefits of abstinence until marriage and the risks of premarital sexual activity;activity.~~
- g. ~~Provides opportunities that allow for interaction between the parent or legal guardian and the student; and student.~~
- h. ~~Provides factually accurate biological or pathological information that is related to the human reproductive system.~~

Materials used in this instruction shall be age appropriate for use with students. Information conveyed during the instruction shall be objective and based upon scientific research that is peer reviewed and accepted by



professionals and credentialed experts in the field of sexual health education."

SECTION 5. G.S. 115C-81(e1) is amended by adding a new subdivision to read:

"(4a) Each local school administrative unit shall also include as part of the instruction required under subdivision (4) of this subsection the following instruction:

- a. Teaches about sexually transmitted diseases. Instruction shall include how sexually transmitted diseases are and are not transmitted, the effectiveness and safety of all federal Food and Drug Administration (FDA)-approved methods of reducing the risk of contracting sexually transmitted diseases, and information on local resources for testing and medical care for sexually transmitted diseases. Instruction shall include the rates of infection among pre-teen and teens of each known sexually transmitted disease and the effects of contracting each sexually transmitted disease. In particular, the instruction shall include information about the effects of contracting the Human Papilloma Virus, including sterility and cervical cancer.
- b. Teaches about the effectiveness and safety of all FDA-approved contraceptive methods in preventing pregnancy.
- c. Teaches awareness of sexual assault, sexual abuse, and risk reduction. The instruction and materials shall:
 1. Focus on healthy relationships.
 2. Teach students what constitutes sexual assault and sexual abuse, the causes of those behaviors, and risk reduction.
 3. Inform students about resources and reporting procedures if they experience sexual assault or sexual abuse.
 4. Examine common misconceptions and stereotypes about sexual assault and sexual abuse.

Materials used in this instruction shall be age appropriate for use with students. Information conveyed during the instruction shall be objective and based upon scientific research that is peer reviewed and accepted by professionals and credentialed experts in the field of sexual health education. Each local board of education shall adopt a policy and provide a mechanism to allow a parent or a guardian to withdraw his or her child from instruction required under this subdivision."

SECTION 6. G.S. 115C-81(e1)(5) reads as rewritten:

"(5) The State Board of Education shall make available to all local school administrative units for review by the parents and legal guardians of students enrolled at that unit any State-developed objectives for instruction, any approved textbooks, the list of reviewed materials, and any other State-developed or approved materials that pertain to or are intended to impart information or promote discussion or understanding in regard to the prevention of sexually transmitted diseases, including HIV/AIDS, to the avoidance of out-of-wedlock pregnancy, or to the ~~abstinence until marriage curriculum~~ reproductive health and safety education curriculum. The review period shall extend for at least 60 days before use."

SECTION 7. G.S. 115C-81(e1)(6) is repealed.

SECTION 8. G.S. 115C-81(e1)(7) reads as rewritten:

"(7) Each school year, before students may participate in any portion of (i) a program that pertains to or is intended to impart information or promote discussion or understanding in regard to the prevention of sexually transmitted diseases, including HIV/AIDS, or to the avoidance of out-of-wedlock pregnancy, ~~(ii) an abstinence until marriage program, or (iii) a comprehensive sex or~~ (ii) a reproductive health and safety education program, whether developed by the State or by the local board of education, the parents and legal guardians of those students shall be given an opportunity to review the objectives and materials. Local boards of education shall adopt policies to provide opportunities either for parents and

legal guardians to consent or for parents and legal guardians to withhold their consent to the students' participation in any or all of these programs."

SECTION 9. G.S. 115C-81(e1) is amended by adding a new subdivision to read:

"(11) Each local school administrative unit shall provide a comprehensive school health education program that meets all the requirements of this subsection and all the objectives established by the State Board. Each local board of education may expand on the subject areas to be included in the program and on the instructional objectives to be met."

SECTION 10. This act is effective when it becomes law and applies beginning with the 2010-2011 school year.

In the General Assembly read three times and ratified this the 25th day of June, 2009.

s/ Walter H. Dalton
President of the Senate

s/ Joe Hackney
Speaker of the House of Representatives

s/ Beverly E. Perdue
Governor

Approved 5:28 p.m. this 30th day of June, 2009