The board is committed to a sound, comprehensive health education program that provides students with accurate information and encourages them to be responsible for their own health and behavior. The board recognizes the primary role of parents in providing for the health and well-being of their children and seeks to involve parents in the schools as provided in this policy. The health education program provided by the school district will meet the requirements of state law and the objectives established by the State Board of Education. The board may, in its discretion, expand on the subject areas to be included in the program and on the instructional objectives to be met.

## A. COMPREHENSIVE HEALTH EDUCATION PROGRAM

A comprehensive health education program must be taught to students from kindergarten through ninth grade. As required by law, the health education program must include age-appropriate instruction on bicycle safety, nutrition, dental health, environmental health, family living, consumer health, disease control, growth and development, first aid and emergency care, mental and emotional health, drug and alcohol abuse prevention, prevention of sexually transmitted diseases (STDs), including HIV/AIDS and other communicable diseases, and reproductive health and safety education.

Instruction on gender identity, sexual activity, or sexuality will not be included in the health education program in kindergarten through sixth grade (see also policy 1310/4002, Parental Involvement).

As required by law and beginning in sixth grade, reproductive health and safety education will include:

- a. Emphasizes abstinence from sexual activity before marriage.
- b. Provides reasons and strategies for remaining or returning to abstinence from sexual activity.
- c. Focuses on the benefits of abstinence from sexual activity until marriage and informs students of the risks of premarital sexual activity.
- d. Instructs students in strategies for dealing with peer pressure.
- e. Stresses that abstinence is the only sure way to avoid pregnancy; sexually transmitted diseases (STDs), including HIV/AIDS, that could be transmitted through sexual contact, and other resulting health and emotional problems.
- f. Instruct students that a mutually committed monogamous heterosexual relationship in the context of marriage is the best way to avoid sexually transmitted diseases, such as HIV/AIDS.
- g. Provides accurate information regarding the human reproductive system.

- h. The effectiveness of contraceptive methods in preventing pregnancy.
- i. preventable risks for pre-term birth in subsequent pregnancies.
- j. awareness of sexual assault and sexual abuse.
- k. Includes opportunities for interaction between the parent/guardian and the student.
- 1. Sex trafficking prevention and awareness.

## B. PARENTAL OPPORTUNITIES TO REVIEW MATERIALS AND WITHHOLD CONSENT FOR STUDENT PARTICIPATION

Each year before students participate in reproductive health and safety education STDs, including HIV/AIDS, or the avoidance of out-of-wedlock pregnancy, the principal or designee shall notify parents of the opportunity to review the materials and objectives that will be used in instruction. A copy of all objectives and materials will be available for review in the media center of each school where these subjects will be taught at least 60 days before use.

The principal or designee shall also notify parents of the right to withhold or withdraw consent for their child's participation in all reproductive health and safety education instruction or in specific topics such as STDs, the effectiveness and safety of contraceptive methods, and awareness of sexual assault and sexual abuse. Parents may also withhold consent to student participation in other separate instruction on the prevention of STDs, including HIV/AIDS, or the avoidance of out-of-wedlock pregnancy. Any parent wishing to withhold consent must do so in writing to the principal.

The school district and each school should continually evaluate and improve the effectiveness of the health education programs. This process should involve obtaining input from the school community, which could include teachers, guidance counselors, school administrators, health clinic professionals, parents, students and professionals from the public health community.

## C. STANDARDS FOR INSTRUCTION

The health education programs should be taught by persons who have received sufficient training to teach these programs effectively. Staff development opportunities should be provided, as necessary, to ensure sufficient training.

For reproductive health and safety education, instructors shall follow the instructional objectives and only use the age-appropriate materials that have been made available to

parents for review in accordance with this policy. Information conveyed during instruction will be objective and based upon scientific research that is peer reviewed and accepted by professional and credentialed experts in the field of sexual health education.

A determination of what is an appropriate education for a student with disabilities must be made in accordance with the student's individualized education plan, following all procedures as provided in the North Carolina *Policies Governing Services for Children with Disabilities*.

## D. SAFE SURRENDER LAW INFORMATION FOR GRADES NINE THROUGH TWELVE

Students in grades nine through twelve will receive information annually on the manner in which a parent may lawfully abandon a newborn baby with a responsible person, in accordance with North Carolina G.S. 7B-500.

Legal References: G.S. 115C art. 9; 115C-36, -76.25(a)(1), -76.35(b)(5), -76.40, -76.55, -81.25, -81.30; *Policies Governing Services for Children with Disabilities;* State Board of Education Policy EXCP-000; State Board of Education Policy SCOS-007

Cross References: Parental Involvement (policy 1310/4002)

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