

Policy Code: 3540 Comprehensive Health Education Program

The Chapel Hill-Carrboro City Schools (CHCCS) Board is committed to a comprehensive school health education program aimed at ensuring that all students are fit, healthy, and ready to learn. A sound comprehensive health education program will be taught to students from kindergarten through twelfth grade and will provide students with accurate information that encourages personal responsibility for their own health and behavior. The Board recognizes the primary role of parents/guardians in providing for the health and well-being of their children and seeks to involve parents/guardians in the schools as provided in this policy. The comprehensive health education program provided by CHCCS staff will meet all requirements of state law and the objectives established by the State Board of Education.

I. Essential Health Education Instruction

A. REPRODUCTIVE HEALTH AND SAFETY EDUCATION

A variety of topics dealing with family life, human growth and development, and human sexuality have become a part of the instructional program of public schools. Included among these areas are relationships (family, parent/child, sibling, parent-parent, and peer) and also ways to cope with the physical, social and emotional changes which occur during adolescence, sexual reproduction, and the general area of contraception and family planning.

The Board recognizes its responsibility to provide reproductive health and safety education to students as an integral part of the CHCCS comprehensive health education program. As required by law, reproductive health and safety education will include instruction regarding:

- a. abstinence from sexual activity as the expected standard for all school-age children
- b. techniques and strategies for remaining or becoming abstinent from sexual activity
- c. reasons, skills, and strategies for remaining or becoming abstinent from sexual activity
- d. abstinence from sexual activity as 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
- e. a mutually faithful monogamous relationship as the best lifelong means of avoiding sexually transmitted diseases, including HIV/AIDS.
- f. the positive benefits of abstinence until marriage and the risks of premarital activity
- g. opportunities that allow for communication between the parent or legal guardian and the student
- h. factually accurate biological or pathological information that is related to the human reproductive system
- i. sexually transmitted diseases, including how sexually transmitted diseases are and are not transmitted, the effectiveness and safety of all 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 rates of infection among pre-teens and teens of each known sexually-transmitted disease and the effects of contracting each sexually-transmitted disease, including information about the effects of contracting Human Papilloma Virus, including sterility and cancer.

j. effectiveness and safety of all FDA-approved contraceptive methods in preventing pregnancy

k. preventable risks for preterm birth in subsequent pregnancies

l. awareness of sexual assault, sexual abuse, and risk reduction, with instruction and materials focusing on:

i. healthy relationships

ii. what constitutes sexual assault and sexual abuse, the causes of those behaviors, and risk reduction

iii. resources and reporting procedures if they experience sexual assault or sexual abuse

iv. misconceptions and stereotypes about sexual assault and sexual abuse

m. sex trafficking awareness

All reproductive health and safety education must comply with this policy. Teachers are to use only those materials approved by the district and available for parental review.

The Board recognizes its responsibility to consider the varying ethical, moral and religious beliefs of students and their families. For students in grades seven through nine, the Board instructs school staff to make available for review by parents/guardians a copy of all program objectives for instruction, approved textbooks, and lists of instructional materials that pertain to, or are intended to impart, the following:

- information that will promote discussion or understanding of the prevention of sexually transmitted diseases, including HIV/AIDS
- the avoidance of out-of-wedlock pregnancy
- curricula for reproductive health and safety education.

The review period shall extend for at least sixty (60) days before use.

Parents/guardians of all students will receive advance notice of the instructional unit that will include an opportunity to withhold consent to their students' participation in any or the entire unit. Any parent/guardian wishing to withhold consent must do so in writing to the principal.

B. SUBSTANCE ABUSE PREVENTION EDUCATION

The Board of Education is committed to developing and implementing effective programs aimed at preventing and intervening in substance abuse. The Board directs the superintendent to ensure that a substance abuse prevention education program is provided that:

- is part of the comprehensive health education curriculum
- is research-based and evaluated
- reaches students in grades K through 12
- includes multiple years of well organized, sequential instruction
- uses age appropriate, interactive teaching methods
- fosters pro-social bonding to school and community
- teaches social competence and drug resistance skills
- promotes positive peer influences
- promotes anti-drug social norms
- emphasizes skills training teaching methods
- is evaluated on the state curriculum review schedule

The instructional units on substance abuse education shall also include impartial notification of secondary students and their parents/guardians on the CHCCS substance abuse policy and consequences of policy violation.

The Board believes that the school and other community agencies must share in the development and implementation of programs to prevent and interrupt the use of controlled or illegal substances. The Coordinated School Health Advisory Council will actively seek community input on health education issues and will make regular reports to the school staff.

C. VIOLENCE PREVENTION EDUCATION

The Board requires the instruction of violence prevention education for all students in grades K-8 and in high school health education. Violence prevention education includes empathy and social skills development, anger management, conflict resolution, prevention of bullying (including bullying with the use of technology), and sexual violence. Students will also be instructed in communication strategies for circumstances when they feel bullied or threatened.

D. NUTRITION AND FITNESS EDUCATION

In accordance with district Policy 6140 Student Wellness, the Board recognizes its responsibility in promoting healthy eating habits and fitness in students. The Board further recognizes the importance of nutrition education and physical education in the curriculum and the importance of providing healthy and nutritious meals and snacks to students during the school day. Classroom teachers in grades K-5 and Health Education teachers in grades 6-8 and high school will provide nutrition education as part of a sequential comprehensive standards-based program designed to provide students with the knowledge and skills necessary to promote and protect their health.

II. Standards for Instruction

The Board recognizes its responsibility to ensure that teachers hired to teach health education are properly trained and certified and that they have opportunities to participate in staff development on a regular basis. Healthful Living teachers are expected to follow the CHCCS Healthful Living Standard Course of Study and program objectives .

The Board of Education instructs the superintendent to ensure that a comprehensive health education program is provided that will be:

- conducted as an integral part of the education program for which the teachers are accountable
- age appropriate, sequential and organized with an emphasis on health skills
- aimed at teaching students to responsibly manage their behavior
- subject to assessment and revision on a regular basis

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*.

III. Program Review and Student Support

The school district and each school should continually evaluate and improve the effectiveness of the comprehensive health education programs. This process should involve obtaining input from the district Coordinated School Health Advisory Council and others in the school community which could include teachers, counselors, school administrators, health clinic professionals, parents/guardians, students, and professionals from the public health community.

The Board also recognizes that support personnel, including school nurses, counselors, and family specialists contribute to the health and well-being of students by providing support, counseling, and information related to health including, but not limited to: mental health, pregnancy prevention, abstinence, substance abuse, emotional stress, and relationships.

Legal References: [G.S. 115C art. 9; 115C-36, -81\(e1\)](#); *Policies Governing Services for Children with Disabilities*, State Board of Education Policy [EXCP-000](#); State Board of Education Policy [SCOS-007](#)

Cross References: Discrimination, Harassment and Bullying (policy 1710), Wellness (policy 3541), Student Substance Abuse (policy 4325)

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Chapel Hill-Carrboro Schools
