

Boulder Valley School District File: IGAE Adopted: June 13, 1991 Last Revised: August 13, 2019

HEALTH EDUCATION

The Board of Education believes that the goal of health education is to promote physical, intellectual, social, emotional and spiritual well-being, not just to prevent disease. A healthy school is one where all students receive consistent and culturally sensitive messages reinforcing their personal worth, supporting individual and family differences, and emphasizing personal responsibility for health choices. Given the potential consequences of risky health behaviors on overall wellness and academic achievement, a comprehensive health education program is a necessary element of the academic curriculum. Not only is it important for children to know basic health facts, but it is of equal importance for them to build self-esteem, develop skills for evaluating underlying values and beliefs related to health, and to make responsible decisions. It is through the acquisition of knowledge and the development of decision making skills that young people become more fully equipped to lead a healthier life.

As part of a comprehensive health education program, the Board of Education believes students must develop an understanding and respect for their own bodies as they mature and reflect upon their developing sexuality in terms of their own values and their valuing of others. To accomplish this goal, human sexuality shall be a part of the District's health education curriculum. The value system within which human sexuality may be effectively taught espouses the recognition of human dignity and the presence of different points of view based on religious and moral convictions and basic beliefs.

Boulder Valley School District's commitment to health education reflects a belief in the shared responsibility for children's health among the family, the school, and the community. The role of the school should be to provide relevant, medically and scientifically accurate information at all grade levels, promote awareness of one's personal beliefs and values, provide age-appropriate, experiential learning and nurture personal responsibility for one's health choices.

DEFINITIONS

"Comprehensive health education" means a planned, sequential health program of learning experiences in preschool, kindergarten, and grades one through twelve which shall include, but shall not be limited to, the following topics:

(a) Communicable diseases, including, but not limited to, acquired immunodeficiency syndrome (AIDS) and human immunodeficiency virus (HIV) related illness;

- (b) Community and environmental health
- (c) Consumer health;
- (d) Dental health;
- (e) Tobacco, alcohol, and other drug use;
- (f) Human growth and development;
- (g) Hereditary and developmental conditions;
- (h) Mental and emotional health;
- (i) Nutrition, personal health, and physical fitness;
- (j) Family life education;
- (k) Injury prevention, safety, motor vehicle safety, and emergency care;
- (I) High-risk behaviors and concerns; and
- (m) Age appropriate instruction on family roles and expectations, child development, and parenting.

"Comprehensive human sexuality education" means medically accurate information about all methods to prevent unintended pregnancy and sexually transmitted infections, including HIV, and the link between human papillomavirus and cancer, and other types of cancer involving the human reproductive systems, including prostate, testicular, ovarian, and uterine cancer. Methods must include information about the correct and consistent use of abstinence, contraception, condoms, other barrier methods, and other prevention measures.

Additional contents of comprehensive human sexuality education shall include:

- (I) Encouraging family communication about sexuality;
- (II) Focusing on the development of safe relationships, including the prevention of sexual violence in dating and teaching young people how to recognize and respond safely and effectively in situations where sexual or physical violence may be occurring or where there may be a risk for these behaviors to occur; and
- (III) Teaching young people how alcohol and drug use can affect responsible decision-making.

"Culturally sensitive" means the integration of knowledge about individuals and groups of people into specific standards, requirements, policies, practices, and attitudes. "Culturally sensitive" includes resources, references, and information that are meaningful to the experiences and needs of communities of color; immigrant communities; lesbian, gay, bisexual, and transgender communities; people who are intersex; people with physical or intellectual disabilities; people who have experienced sexual victimization; and others whose experiences have traditionally been left out of sexual health education, programs, and policies. Colorado law mandates culturally sensitive practices across curriculum areas in public schools. Discussion of gender identity, body image, and diverse family structures are not unique to comprehensive health education or human sexuality education.

"Instruction" means an oral, written, or digital lesson, lecture, or presentation given by school staff or nonschool staff. Instruction does not include student speech or brief responses to student questions that arise during classes that are not part of the comprehensive health education, including human sexuality education.

REQUIREMENTS

1. The curriculum and materials to be used in the District's health program shall be consistent with applicable law, State standards, and the District's approved curriculum. The basic curriculum and materials shall be available for inspection during school hours upon request by any member of the public. Periodically, the Superintendent or designee shall direct that a public forum be held to receive comments from the public concerning the curriculum and materials used in the health education program.

2. Parents/guardians of all students shall be notified in writing of the District's comprehensive health education program. The notice shall inform-parents/guardians of the ability to excuse their child from a specific portion or portions of the instruction, including on the grounds that it is contrary to the religious beliefs and teachings or closely held personal beliefs of the student or the student's parent or guardian. Students for whom parents/guardians have submitted a written excusal shall be excused, without penalty or additional assignment, from involvement in those portions of the health curriculum specified by the parents/guardians. All-excusal records shall be maintained in student files.

3. Community-based speakers may be used to enhance the health education curriculum by presenting timely and appropriate information on topics being covered in the learning materials. It shall be the responsibility of the health teacher to prepare the students for, and follow up on presentations by community-based speakers. Such speakers and content must be approved by District-level administration or committee as directed by the Superintendent. Speakers and other resources will be listed in the health teachers' resource guide which will be updated regularly.

ADDITIONAL REQUIREMENTS FOR HUMAN SEXUALITY EDUCATION

1. Because of the sensitive nature of the human sexuality education curriculum, in addition to established policies and regulations concerning the approval of new materials, all supplementary classroom instructional materials related to human sexuality shall be approved by School administration.

2. Instruction may be provided for every student, grades 4-12, in accordance with the District's curriculum scope and sequence.

3. Only District approved staff who have completed required training shall teach the human

sexuality curriculum.

4. Any spontaneous questions asked during human sexuality education may be answered specifically and briefly.

5. As mandated by state law, this Policy prohibits explicitly or implicitly teaching or endorsing religious ideology or sectarian tenets or doctrines, using shame-based or stigmatizing language or instructional tools, employing gender norms or gender stereotypes, or excluding the relational or sexual experiences of lesbian, gay, bisexual, or transgender individuals.

6. Schools shall notify parents/guardians of all students in writing at least two weeks prior to comprehensive human sexuality education instruction. The notice to parents/guardians shall include:

- a detailed, substantive outline of the topics and materials to be presented in that portion of the planned curriculum related to comprehensive human sexuality education; and,
- a form (IGAE-E) that parents may use to excuse their child from a specific portion or portions of the instruction, including on the grounds that it is contrary to the religious beliefs and teachings of closely held personal beliefs of the student or the student's parent or guardian.

Students for whom parents/guardians have submitted a written excusal shall be excused, without penalty or additional assignment, from that portion of the planned curriculum that includes comprehensive human sexuality education. All excusal records shall be maintained in student files.

LEGAL REF.:

C.R.S. § 22-1-128 (human sexuality education) C.R.S. §§ 22-25-101-110 (comprehensive health education programs) C.R.S. § 22-25-104 (6)(d)(district must provide two weeks notice with overview and form allowing parents to decline their student's participation) C.R.S. § 22-25-106 (4) (district must provide exemption procedure based on religious belief and teachings of the student or the student's parent or guardian)

CROSS REFS.:

IF, Curriculum Development and Revision -IGAG, Teaching About Alcohol, Tobacco and Drugs IJ, Instructional Materials Selection and Adoption IKF, Graduation Requirements

End of File: IGAE