



BERRIEN

RESA

Health & Sex Education Guide

Last Updated:
June 2023

This guide was created as a collaboration of the Health and Sex Education Advisory Board. The intent for this document is to house current, historical, and future plans surrounding the law, practices, data, implementation of health and sex education throughout the Berrien RESA Programs.

This guide will be updated every two years during the required program review.

Signature	Name	Building
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	Andrea Lemon	Lighthouse
	Jessica McTurkiff	Blossomland
	Anyson Mol	Lighthouse
	Emily Brumbaugh	Lighthouse
	Jessica Allard	Lighthouse
	Aaron S Rubley	Blossomland
	Jackie Van Dyke	BRSA BOARD
	Danielle Gibson	parent
	Dawn Van Dyle	parent
	Jacob	2x vol 7
	Nicki Rhew	Blossomland
	Craig A. Kuhn	Blossomland
	Melanie Bonenfant	Lighthouse
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Table of Contents

Philosophy, Rational and Overview:	5
Legal basis for sex education.....	5
Rationale for local district decision to offer sex education.....	5
Connections to other district priorities.....	5
Definition of sex education as well as goals and objectives for program.....	6
Berrien RESA student count (287 total students).....	6
Abstinence-based or abstinence-only approach for elementary, middle/junior, and high school.....	7
Health and Sex Education Advisory Board	9
Role of Sex Education Advisory Board.....	9
Members.....	9
Committee process, decision making.....	9
Meeting agendas and minutes.....	9
Needs Assessment	10
Parent survey.....	10
Student survey.....	10
State and Local data on teen pregnancy, HIV, STDs.....	10
Approved Curriculum	13
Supporting Documents.....	13
Michigan’s Grade Level Content Expectations (GLCEs) and Michigan Merit Curriculum Credit Guidelines for Health Education.....	13
Michigan Model for Health K-12 Scope and Sequence Chart	
Michigan outlines specific elements that should be addressed in each grade.....	13
Sample Logic Model for School-Based HIV/STD & Sex Education Programs.....	13
Public Hearings and School Board Action	14
Public Hearing.....	14
Berrien RESA Board meetings.....	14
Health and Sex Education Policy.....	14
Berrien RESA.....	14
Michigan Department of Education.....	14
Teacher Qualifications and Training	15
Identified teachers.....	15
Ongoing expectations for professional development for teachers.....	16
Guest speakers/agencies.....	16
Guidelines for guest speaker(s).....	16
Approved guest speakers/agencies.....	16
Forms/Documents	17
Parent Notification/Opt-out letter.....	17
Procedures for parent review and classroom observation.....	17
Student Assessment (Pre-/Post-tests).....	17
Sex Education Supervisor form.....	17
Legal obligations regarding sex education.....	17

Parental complaint process.....	17
Historical Archives.....	19
Sex Education Supervisors.....	19
Major changes in curricula and staffing over time for elementary, middle/junior, and high school programs.....	19
2022-2023 BERRIEN REGIONAL EDUCATION AGENCY BOARD APPROVED SEX EDUCATION CURRICULUM.....	19
2017-18 BERRIEN REGIONAL EDUCATION AGENCY ADDITIONAL SEX EDUCATION CURRICULUM.....	20
2013-14 BERRIEN REGIONAL EDUCATION AGENCY ADDITIONAL SEX EDUCATION CURRICULUM.....	21
2011-12 BERRIEN REGIONAL EDUCATION AGENCY BOARD APPROVED SEX EDUCATION CURRICULUM.....	22
Minutes of board actions for major programmatic changes.....	23
Results of district-wide survey.....	23
Next Steps.....	23
Appendix.....	24
A. Meeting agendas and minutes.....	25
B. Approved Curriculum.....	26
C. Michigan’s Grade Level Content Expectations & Michigan Merit Curriculum Credit Guidelines for Health Education.....	28
D. Michigan Model for Health K-6 Scope and Sequence.....	36
E. Sample Logic Model.....	37
F. Berrien RESA Public Hearing Notice.....	38
G. Berrien RESA Board Meetings.....	38
H. Berrien RESA Health and Sex Education Policy Advisory Board.....	38
Sex Education Advisory Board.....	38
Role of the Sex Education Advisory Board.....	38
I. Current Revised School Code (PA 451 of 1976) and State School Aid Act (PA 94 of 1979) Provisions Regarding the Teaching of HIV/AIDS, Sex Education, Health Education, and Physical Education in Michigan Schools.....	39
J. HIV and Sex Education Guidelines for Guest Speakers.....	46
K. Sample Letters from LEC and BLC.....	47
L. HIV Pre Post Test Assessments.....	47
M. Health and Sex Ed Assessments.....	48
N. Health and Sex Ed Supervisor Form.....	48
O. Legal Obligations.....	48
P. Public Complaints.....	48

Philosophy, Rational and Overview:

Legal basis for sex education

School districts are required to teach about dangerous communicable diseases, including, but not limited to, HIV/AIDS. (§380.1169) Instruction regarding dangerous communicable diseases, including, but not limited to, HIV/AIDS, must be offered at least once a year at every building level (elementary, middle/junior, senior high).

School districts can choose to teach sex education. If they do, they must do so in accordance with those sections of the Michigan Compiled Laws (MCL) related to sex education and reproductive health. (§380.1506, §380.1507, §380.1507a, §380.1507b, §388.1766, §388.1766a)

Rationale for local district decision to offer sex education

Blossomland Learning Center (BLC) is a center-based program for students with moderate to severe cognitive impairments and severe multiple impairments. Due to the cognitive levels of our students, it is necessary to include instruction related to functional living skills, including personal care and daily living. Our students require repetition and visual, auditory, and kinesthetic instruction.

Lighthouse Education Center (LEC) is a center based special education facility designed to provide programs and related services to meet the education requirements of students with severe emotional impairments and students with autism spectrum disorder. (Lighthouse Education Center, in addition to the educational services provided by core curriculum instructors, offers the services of a technology/computer teacher and a behavior consultant.) The center emphasizes positive reinforcement, personal responsibility, appropriate decision making skills and the development of socially acceptable behavior.

Connections to other district priorities

LEC:

K-8 uses GLCEs for Health; specifically in the areas of: Safety, Social & Emotional Health, Personal Health & Wellness, HIV Prevention, and Growth & Development.

High schools use the Michigan Merit Curriculum standards for Health; specifically in the areas of Safety, Social & Emotional Health, Personal Health & Wellness, HIV and other STIs Prevention, and Sexuality Education.

BLC:

The Health and Sex Education is part of our curriculum standards from the Extend Grade Level Content Expectations (EGLCEs), Performance Expectations 1,2,3,6,7, & 8.

These cover the following:

- Personal Care, Health & Fitness
- Social communication/Interpersonal Relationship Skills
- Respond Effectively to Unexpected Events & Potentially Harmful Situations.
- Managing Unstructured Time
- Proceed Appropriately toward the Fulfillment of Personal Desire

Definition of sex education as well as goals and objectives for program

Instruction related to reproductive health and family planning, human sexuality, emotional, physical, psychological, hygienic, economic, and social aspects of family life, venereal diseases, non-casual-contact communicable diseases such as AIDS, and abstinence from sex as a responsible method for restriction and prevention of non-casual-contact communicable diseases and as a positive life-style for unmarried young people (per board policy).

Berrien RESA student count (287 total students)

Blossomland Learning Center (172)				Lighthouse Education Center (51)			
MoCI	7 Students	Age 8-10	Boyle, Julie	EI	6 Students	Age 8-11	Chynoweth, Ashley
SCI	4 Students	Age 16-23	Burton, Amy	EI	6 Students	Age 15-17	Crowder, Ashley
SCI	7 Students	Age 14-20	Cramer, Sarah	EI	4 Students	Age 15-16	Ellett, Marissa
SCI	6 Students	Age 8-12	Cullitan, Madison	EI	6 Students	Age 14-17	Floyd, Lisa
MoCI	7 Students	Age 6-8	Eckerly, Laurie	EI	7 Students	Age 9-10	Hawkins, Jenna
MoCI	9 Students	Age 15-21	Ellison, Danielle	EI	5 Students	Age 11-12	Junk, Patricia
MoCI	6 Students	Age 17-20	Elsheikhi, Karen	EI	6 Students	Age 6-8	Lund, Brooke
SCI	6 Students	Age 7-13	Fisher, Amanda	EI	6 Students	Age 11-14	Lynch, Kellie
SCI	6 Students	Age 6-9	King, Shanda	EI	5 Students	Age 15-18	Park, Tyler
MoCI	10 Students	Age 18-25	Klee, Sarah	Autism Spectrum Disorder Programs (64)			
MoCI	8 Students	Age 10-13	Kluge, Sarah	ASD	5 Students	Age 6-10	Keim, Matt
MoCI	8 Students	Age 12-16	Langlois, Lindsey	ASD	5 Students	Age 15-20	Mol, Alyson
SXI	6 Students	Age 15-23	Matthews, Timothy	ASD	5 Students	Age 9-12	Stoll, Emily
MoCI	11 Students	Age 16-26	McAuliffe, Jessica	ASD	2 Students	Age 10-11	Wuszke, Elizabeth
MoCI	11 Students	Age 16-19	Moskalik, Jennifer	Blossomland-ASD	4 Students	Age 6-8	Herm, Katie
SXI	7 Students	Age 7-15	Necas, Rochelle	EI (ASD)	4 Students	Age 13-15	Ellsworth, Brenda
MoCI	8 Students	Age 3-6	Nolde, Alicia	BSP Sylvester-ASD	4 Student	Age 9-11	Walvort, Kerri
SXI	6 Students	Age 2-7	Nowlin, Shailah	Coloma Elem-ASD	4 Students	Age 7-8	Gano, Jennifer
MoCI	9 Students	Age 12-16	Peloquin, Jamie	Coloma Elem-ASD	3 Students	Age 7-8	Spivey, Cindle
SCI	7 Students	Age 20-26	Roth, Thomas	Niles Ballard-ASD	4 Students	Age 7-11	Harrigan, Donyelle

Niles-Mo Cl	7 Students	Age 19-23	Williams, DeLynn	Niles Howard-ASD	3 Students	Age 6	Strickland, Tasha
St. Joseph- MoCl	16 Students	Age 19-25	Lattak, Cheryl	Niles Southside-ASD	4 Students	Age 11-12	Putra, Kimberly
				SJ Upton MS-ASD	5 Students	Age 12-13	Allard, Jessica
				St. Joseph HS-ASD	3 Students	Age 15-16	Froehlich, Jessica
				VTL-ASD	5 Students	Age 19-25	McGrory, Aaron
					4 Students	Age 20-24	Williams, Ann

Abstinence-based or abstinence-only approach for elementary, middle/junior, and high school.

Instruction in HIV/AIDS and sex education must **stress that abstinence** from sex is a responsible and effective method of preventing unplanned or out-of-wedlock pregnancy, and that it is the only protection that is 100% effective against unplanned pregnancy, sexually transmitted disease, and sexually transmitted HIV infection and AIDS. (§380.1169, §380.1507, §380.1507b)

Instruction in HIV/AIDS must include the principal modes by which dangerous communicable diseases are spread and the **best methods for the restriction and prevention** of these diseases. (§380.1169)

Sex education material discussing sex must be **age-appropriate**, must **not be medically inaccurate**, and must do all of the following:

- A. Discuss the **benefits of abstaining** from sex until marriage and the benefits of ceasing sex if a pupil is sexually active.
- B. Include a discussion of the possible emotional, economic, and legal **consequences** of sex.
- C. Stress that unplanned pregnancy and sexually transmitted diseases are **serious possibilities of sexual intercourse** that are not fully preventable except by abstinence.
- D. Advise pupils of the **laws pertaining to their responsibility as parents** to children born in and out of wedlock.
- E. Ensure that pupils are **not taught in a way that condones the violation of laws** of this state pertaining to sexuality, including, but not limited to, those relating to sodomy, indecent exposure, gross indecency, and criminal sexual conduct in the first, second, third, and fourth degrees.
- F. **Teach pupils how to say "no"** to sexual advances and that is wrong to take advantage of, harass, or exploit another person sexually.
- G. Teach **refusal skills** and encourage pupils to resist pressure to engage in risky behavior.

- H. Teach that the pupil has the **power to control personal behavior**, and teach pupils to base their actions on reasoning, self-discipline, a sense of responsibility, self-control, and ethical considerations, such as respect for self and others.
- I. Provide instruction on **healthy dating relationships** and on how to set limits and recognize a dangerous environment.
- J. Provide information for pupils about how young parents can learn more about **adoption services** and about the provisions of the Safe Delivery of Newborns Law.
- K. Include information clearly informing pupils that **having sex or sexual contact with an individual under the age of 16 is a crime** punishable by imprisonment and that one of the other results of being convicted of this crime may be to be listed on the sex offender registry for 15 years, 25 years, or life. (§380.1507b)

Health and Sex Education Advisory Board

Role of Sex Education Advisory Board

- Establishing program goals and objectives for pupil knowledge and skills that are likely to reduce the rates of sex, pregnancy, and STDs.
- Reviewing and recommending materials and methods to the local school board, taking into consideration the district's needs, demographics, and trends including, but not limited to, teenage pregnancy rates, STD rates, and incidents of sexual violence and harassment.
- Evaluating, measuring, and reporting the attainment of program goals and objectives and making the resulting report available to parents in the district at least once every two years. (§380.1507)

Members

Name	Role	Building
Jackie Van Horn	School Board Member	Berrien RESA
Craig Kuhn	Supervisor	BLC
Michelle Wruble	Supervisor	ASD
Andi Lemon	Supervisor	LEC
Craig Blasko	Asst. Supervisor	ASD
Aaron Rubley	Asst. Supervisor	BLC
Niki Rhew	School Nurse	BLC
Jacob Bonenfant	Student	LEC
Jacob Vandyke	Student	BLC
Neela Gibson	Student	ASD
Dawn Vandyke	Parent	BLC
Danielle Gibson	Parent	ASD
Melanie Bonenfant	Parent	LEC
Emily Brumbaugh	Teacher	LEC
Jessica McAuliffe	Teacher	BLC
Jessica Allard	Teacher	ASD
Alyson Mol	Teacher	ASD

Committee process, decision making

Committee consists of members chosen by building supervisors and meet once every two years. The committee consists of students, parents, and staff across disabilities and grades. The decision making process is completed by majority vote.

Meeting agendas and minutes

- See Appendix A

Needs Assessment

Parent survey

Our current parent survey needs to include questions related to health & sex education. The survey will be revised and additional questions included for distribution Spring 2024.

Student survey

Our current student survey needs to include questions related to health & sex education. The survey will be revised and additional questions included for distribution Spring 2024.

State and Local data on teen pregnancy, HIV, STDs

Updated: September 2022



BERRIEN COUNTY HEALTH DEPARTMENT

better health. stronger communities.

Berrien County Health Statistics Brief

2020 American Community Survey Demographic Trends

	Berrien County	Largest Cities in Berrien		
		Benton Harbor	Niles	Saint Joseph
2021 Estimated Population	153,101	8,982	11,876	7,745
Population change (2010)	-1.6%	-9.3%	3.3%	-6.1%
Age and Sex 2020				
Persons under 18 years	21.6%	27.0%	21.7%	15.4%
Persons 65 + years	20.8%	12.0%	15.7%	21.3%
Female	50.7%	53.8%	52.4%	50.6%
Race 2020				
White alone	79.9%	12.8%	81.2%	85.6%
Black alone	14.4%	85.1%	12.1%	4.2%
Asian alone	2.1%	0.0%	0.3%	5.0%
Housing 2016-2020				
Households	63,136	4,427	4,743	4,084
Owner-occupied housing units	71.2%	36.3%	51.3%	61.9%
Median value of owner-occupied housing units	\$157,500	\$59,000	\$86,000	\$205,600
Avg persons per household (2016-2020)	2.38	2.19	2.31	1.94
Median gross rent	\$757	\$661	\$685	\$757
Median household income	\$52,500	\$21,947	\$38,415	\$60,379
Person in Poverty	15.1%	44.9%	23.2%	8.6%
Transportation 2020 (Workers 16 and older)				
No access to a vehicle	2.7%	13.3%	3.2%	3.5%
Education 2016-2020 by persons age > 25 years				
High school graduate or higher	90.5%	76.9%	89.2%	95.3%
Bachelor's degree or higher	27.6%	7.4%	12.9%	51.4%

2020 Poverty Estimates

Proportion of poverty level	Proportion of Berrien County residents	Proportion of Michigan residents
under 50%	7.33%	6.18%
under 125%	21.11%	17.80%
under 150%	25.94%	21.82%
under 185%	32.35%	27.94%

All estimates from the US Census Bureau are based on the proportion of people who have had their poverty status determined

Berrien County Natality

	2017	2018	2019	2020
# of Live Births	1,728	1,669	1,605	1,517
Low Birth Weight Rate*	71.2	83.9	83.5	83.7
Teen Pregnancy Rate**	30.5	34.2	37.1	33.4

Low Birth Weight rate—rates per 1,000 lived births

Teen Pregnancy rate— Births per 1,000 female age 15-19 years.

**Estimated pregnancies are the sum of live births, induced abortions and estimated miscarriages.

Berrien County Infant Mortality Rate per 1,000 live births

	2015-17	2016-18	2017-19	2018-20
Infant Death Rate	5.2±2.4	6.7±2.2	7.4±2.4	8.4±2.6
Black	7.4±4.8	13.3±6.5	15.5±6.9	17.1±7.4
White	4.4±2.2	4.9±2.3	4.5±2.3	5.3±2.5

Abortions (2020)

Woman's Age (years)	<20	20-24	25-29	30-39	40+
Number of Abortions	15	52	44	45	4

2020 Sexually Transmitted Disease rate per 100,000 population

	2017	2018	2019	2020
Chlamydia Rate	562.7	630.6	562.6	511.1
Berrien	562.7	630.6	562.6	511.1
Michigan	511.9	512.8	504.4	448.9
Gonorrhea Rate	184.8	248.5	197.5	265.3
Berrien	184.8	248.5	197.5	265.3
Michigan	154.7	169.3	182.9	234.4

See the [Communicable disease annual report](#) for more detailed STD reports

2020 Leading Causes of Death by Age Adjusted Mortality Rate per 100,000 population

	Berrien rate	Michigan rate	USA rate
All Causes of Death	856.6	913.8	869.7
1. Heart Disease	225.8	206.0	168.2
2. Cancer	141.4	158.8	144.1
3. Stroke	59.0	44.8	38.8
4. Chronic Lower Respiratory Diseases	44.6	42.4	36.4
5. Unintentional Injury	45.8	56.2	57.6

2020 Berrien County Leading Hospital Diagnoses Rate per 100,000 population

	Berrien No.	Berrien Rate	Michigan Rate
All Hospitalizations	17,425	918.5	1,076.1
Heart Disease	1,821	96.0	112.7
Septicemia	1,668	87.9	75.3
Neonates (<7 Days)	1,591	83.9	104.8
Maternal Deliveries	1,462	77.1	97.4
Covid-19	375	19.8	34.4

Source: Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services; Population Estimate (latest update 9/2021), National Center for Health Statistics, U.S. Census Populations With Bridged Race Categories

Berrien County Other/Miscellaneous data

	2017	2018	2019	2020
Suicides	23	26	21	21
Lyme Disease Cases	27	29	34	60
Homicides	8	6	5	8

Additional Berrien County Health Statistics:

- Syphilis: 20.2 per 100,000
- Live Births: 104,074 live births (55.1 per 1,000)
- Pregnancies: 82.4 per 1,000
- HIV cases 174.1 per 100,000

Approved Curriculum

Curriculum in each program is based on the students' level of understanding for Elementary, Jr. High, High School, and beyond.

- See Appendix B

Supporting Documents

Michigan's Grade Level Content Expectations (GLCEs) and Michigan Merit Curriculum Credit Guidelines for Health Education

- Shows the alignment between GLCEs & health and sex education
- See Appendix C

Michigan Model for Health K-12 Scope and Sequence Chart *Michigan outlines specific elements that should be addressed in each grade*

- See Appendix D

Sample Logic Model for School-Based HIV/STD & Sex Education Programs

- See Appendix E
- Results

While staff have monitored students with pre/post-tests, data has not been collected and analyzed to help reflect instructional needs. As a district, we will begin collecting this data and reporting out in the following format annually:

Grade	Pre-test	Post-test	Growth
18-26 (MoCI)	60%	64%	4%

Public Hearings and School Board Action

Public Hearing

See Appendix F

Berrien RESA Board meetings

See Appendix G

Health and Sex Education Policy

Berrien RESA

See Appendix H

Michigan Department of Education

See Appendix I

Teacher Qualifications and Training

Identified teachers

Teacher Name	Building	Grade Level	Training/Certification
Emily Brumbaugh	LEC	All ages/grades	K-12 PE (MB) 6-12 Health (MA) K-12 EI (SE) K-12 APE (SP) K-12 CAPE -National APENS Certification MDE HIV Certification
Jessica McAuliffe	BLC	All ages/grades	CI & EI Endorsement (2021) & Certification Training (2013)
Jessica Allard	ASD	All ages/grades	CI, ZA, ASD Certification
Alyson Mol	ASD	All ages/grades	EI/CI (2012) ASD (2018)
Niki Rhew	BLC/LEC	All ages/grades	Registered Nurse (2019)
Jamie Peloquin	BLC	All ages/grades	CI Endorsement (2018) & Certification Training (2011)
Cheryl Lattak	BLC	All ages/grades	Reproductive Health & HIV training: 2018 BA Science Elementary ELA K-8 Self Contained Special Education Endorsement CI Masters of Educational Technology
Delynn Williams	BLC	All ages/grades	Reproductive Health & HIV training: 2018 BS Special Education Special Education Endorsement CI Masters of Educational Leadership

Ongoing expectations for professional development for teachers

Recommendations to consider scheduling training that would provide the 6 hours of training needed for staff instructing health and sex education in the self-contained classrooms. Training updates are required every 5 years. Following are potential trainers to consider:

- Jennifer Bloomfield (Van Buren ISD)
- Trudy Camp (St Joseph ISD, START)
- Laurie Bechhofer, (517) 335-7252, bechhoferl@michigan.gov MDE HIV consultant

Guest speakers/agencies

Guidelines for guest speaker(s)

- See Appendix J

Approved guest speakers/agencies

Agency	Topic
Berrien County Health Department	STD prevention education and HIV prevention education
Berrien County Sheriff's Department	Legal implications and online safety
Women's Care Center, Niles, MI	

Forms/Documents

Parent Notification/Opt-out letter

See Appendix K

- K-1: Lighthouse Education Center - 4th-5th grades
- K-2: Lighthouse Education Center - 6th-8th grades
- K-3: Lighthouse Education Center – High School
- K-4: Blossomland Learning Center
- K-5: Blossomland Learning Center & Personal Health & Hygiene

Procedures for parent review and classroom observation

In accordance with Public Acts 165 and 166 of 2004 and the School Code of the State of Michigan, parents or legal guardians have the right to observe sexual health education, including HIV/AIDS instruction, in their child's classroom.

See Appendix K (Parent notification/Opt out letter)

Student Assessment (Pre-/Post-tests)

See Appendix L

Sex Education Supervisor form

See Appendix M

Legal obligations regarding sex education

See Appendix N

Parental complaint process

If a parent or legal guardian of a pupil enrolled in a district or intermediate district (ISD) believes that the district or intermediate district has violated the following sections of Michigan law pertaining to HIV/AIDS instruction or sex education (§380.1169, §380.1506, §380.1507, §388.1766a), the person can file a complaint with the superintendent or chief administrator of the district or ISD in which the pupil is enrolled. The district has 30 days to investigate, provide a written report, and if violations are found, develop a plan for corrective action. The district has an additional 30 days to take corrective action. If the parent is not satisfied with the investigation or findings made by the superintendent, the parent can appeal the findings to the ISD in which

the district is located. The ISD has 30 days to investigate, provide a written report, and if violations are found, develop a plan for corrective action. The district has an additional 30 days to take corrective action. If the parent is not satisfied with the investigation or findings made by the ISD superintendent, the parent can appeal the findings to the MDE. The MDE has 90 days to investigate, provide a written report, and if violations are found, develop a plan for corrective action. The district has an additional 30 days to take corrective action. (§380.1766)

Per Board Policy:

Section 25. Compliance With Michigan Sex Education Statute; Prohibition Of Abortion Referral Or Assistance.

The District shall comply with the requirements of MCL §380.1507, dealing with instruction in sex education and related subjects. As required under MCL §388.1766, a school official, member of the Board of Education or a person employed by the District who refers a student for an abortion or assists a student in obtaining an abortion, and who is not the parent or legal guardian of the student, shall be subject to appropriate discipline.

Section 15. Parental Objections.

The Superintendent shall develop regulations that provide an opportunity for the presentation and fair consideration of parental objections to the School District's curriculum, the selection of textbooks and other instructional materials and media center materials.

See Appendix O

Historical Archives

Sex Education Supervisors

Name	Title	Years of Service
Niki Rhew	Registered Nurse, Berrien RESA	7
Joy Sill	Registered Nurse, Berrien RESA	2

Major changes in curricula and staffing over time for elementary, middle/junior, and high school programs

2022-2023 BERRIEN REGIONAL EDUCATION AGENCY BOARD APPROVED SEX EDUCATION CURRICULUM

BLOSSOMLAND LEARNING CENTER & LIGHTHOUSE EDUCATION CENTER

NAME OF PROGRAM	BLC	LIGHTHOUSE
Berrien County Sheriff Department Education Team	X	X
Berrien County Health Department --STD prevention education and HIV prevention education	X	X
Comprehensive Health Skills for Middle School G-W Publishing https://www.g-w.com/comprehensive-health-skills-ms-2023	X	X
Comprehensive Health Skills for High School G-W Publishing https://www.g-w.com/comprehensive-health-skills-ms-2023		X
CDC Website cdc.gov	X	X
Date Smart by James Stanfield	X	X
EPEC—Every Body is Good (c 2006) Lessons promoting positive body image	X	X
FLASH (Family Life and Sexual Health) program ---25 individual lessons ---Designed for MS & HS students with special needs ---Written by Jane Stangle, Med	X	X
HIV/AIDS Power point Presentation (Nurse designed)	X	X
Intercare Women's Clinic	X	X
Life Horizons Slides and Video Presentation **omit slides: 18-20 Human Reproduction & 59-121 Sexual/Reproductive Health**	X	X
Learn About Life - Attainment (omit handouts)	X	X
Michigan Model HIV/AIDS 4 th grade	X	X
Michigan Model HIV/AIDS 5 th grade	X	X

Michigan Model K-8: Lesson VI-3 Lesson VI-1: Living & non-living things Lesson VI-2: New Growth Beginnings Lesson V-2: Cells, Functions, & Varieties Lesson V-4: Blood Lesson V-4: Fighting Germs	X	X
Michigan Model 9-12; Healthy and Responsible Relationships: HIV, Other STIs, and Pregnancy Prevention	X	X
Michigan Model: Growing Up and Staying Healthy: Understanding HIV and Other STIs, the new (2010) middle school curriculum. Contains ten lessons	X	X
missingkids.org/netsmart2/home National Center for Missing and Exploited Children	X	X
One Love https://www.joinonelove.org/		X
People Smart by James Stanfield	X	X
Puberty education by Marsh Media --A Girl's Guide to Growing Up --A Boy's Guide to Growing Up --A Girl's guide to Puberty and Personal Safety --A Boy's Guide to Puberty and Personal Safety	X	X
Puberty: The Wonder Years 2010 edition	X	X
START - Sexual Health: An Adolescent Provider Toolkit (use pages 55-56)	X	X
START: Body Changes for Boys	X	X
Sexual Health and Adolescent Provider Toolkit	X	X
Social Story - Public and Private Places	X	X
Teachers Pay Teachers/TPT: Body Safety	X	X
Teachers Pay Teachers: Dating, Relationships & Becoming Sexually Active	X	X
The Boy's Guide to Growing Up: Choices & Challenges during Puberty by Terri Couwenhoven, M.S.	X	X
The Girl's Guide to Growing Up: Choices & Challenges during Puberty by Terri Couwenhoven, M.S.	X	X
The Autism Friendly Guide to Periods - Robyn Steward	X	X
Tool for the Assessment of Levels of Knowledge Sexuality and Consent (TALK-SC) Mackenzie Health (Sections 1-5 only)	X	X
Women's Care Center, Niles, MI	X	X

**2017-18 BERRIEN REGIONAL EDUCATION AGENCY ADDITIONAL SEX
EDUCATION CURRICULUM**

BLOSSOMLAND LEARNING CENTER & LIGHTHOUSE EDUCATION CENTER

NAME OF PROGRAM	BLC	LEC
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Teachers Pay Teachers: Dating, Relationships & Becoming Sexually Active	X	X
The Book of Life: Sexuality for Individuals with Intellectual Disabilities	X	X
HIV/AIDS Powerpoint Presentation (Nurse designed)		
Puberty FAQ by Jillian Powell	X	X
Women's Care Center, Niles, MI	X	X
Discovery Education MI_Model: Puberty: A Boy's Journey and A Girl's Journey	X	X
Preventing Aids & Other STD's Through Sexuality Education for Students with Intellectual Disabilities	X	X
People Smart by James Stanfield	X	X
Date Smart by James Stanfield	X	X
Sexuality and Relationship Education for Children and Adolescents with Autism Spectrum Disorders by Davida Hartman	X	X
Teaching Children with Down Syndrome about Their Bodies, Boundaries, and Sexuality: A Guide for Parents & Professionals by Terri Couwenhoven, M.S.	X	X
The Boy's Guide to Growing Up: Choices & Challenges during Puberty by Terri Couwenhoven, M.S.	X	X
The Girl's Guide to Growing Up: Choices & Challenges during Puberty by Terri Couwenhoven, M.S.	X	X
Sexuality Across the Lifespan for Children and Adolescents with Developmental Disabilities by Baxley & Zendell	X	X
Healthy Bodies: A Parent's Guide on Puberty for Boys with Disabilities by Vanderbilt Kennedy Center	X	X
Healthy Bodies: A Parent's Guide on Puberty for Girls with Disabilities by Vanderbilt Kennedy Center	X	X
Social Behavior and Self-Management: 5 Point Scales for Adolescents and Adults by Buron, Brown, Curtis, & King	X	X
Finding My Way Through Dating & Relationships	X	X
The Guide to Dating for Teenagers with Asperger Syndrome by Jeannie Uhlenkamp	X	X
The Planner Guide by Burke, Charron, and Steinkamp	X	X
Kelly Bear Teaches About Secret Touching	X	X
Tool for the Assessment of Levels of Knowledge Sexuality and Consent (TALK-SC) Mackenzie Health	X	X

2013-14 BERRIEN REGIONAL EDUCATION AGENCY ADDITIONAL SEX EDUCATION CURRICULUM

BLOSSOMLAND LEARNING CENTER & LIGHTHOUSE EDUCATION CENTER

NAME OF PROGRAM	BLC	LIGHTHOUSE
Movie—"Philadelphia"		X
Michigan Model HIV/AIDS 4 th grade	X	X
Michigan Model HIV/AIDS 5 th grade	X	X
CDC Website: Let's Stop HIV Together	X	X

Shared stories: Jamar, Kelly, Hydeia		
Frontline on PBS.org “End Game: Aids in Black America”		X
EPEC—Every Body is Good (c 2006) Lessons promoting positive body image		X
Puberty: The Wonder Years 2010 edition	X	X

2011-12 BERRIEN REGIONAL EDUCATION AGENCY BOARD APPROVED SEX EDUCATION CURRICULUM

BLOSSOMLAND LEARNING CENTER & LIGHTHOUSE EDUCATION CENTER

NAME OF PROGRAM	BLC	LIGHTHOUSE
Puberty education by Marsh Media ---A Girl’s Guide to Growing Up ---A Boy’s Guide to Growing Up ---A Girl’s guide to Puberty and Personal Safety ---A Boy’s Guide to Puberty and Personal Safety	X	X
Life Horizons Slides and Video Presentation	X	X
Berrien County Health Department ---STD prevention education and HIV prevention education	X	X
Planned Parenthood ---Sexuality Education Series ---Birth Control options/presentation	X	X
Life’s Greatest Miracle DVD	X	X
9 Month Miracle DVD	X	X
“Getting Past the Plumbing: Sexuality Education” by Su Nottingham	X	X
Michigan Model K-8: Lesson VI-3 Lesson VI-1: Living & non-living things Lesson VI-2: New Growth Beginnings Lesson V-2: Cells, Functions, & Varieties Lesson V-4: Blood Lesson V-4: Fighting Germs	X	X
Michigan Model 7-8: “HIV, AIDS and other STDs for Grades 7-8	X	X
HEALTHWORKS! Kid’s Museum program	X	X
“Taking Care of Myself” by Mary Wrobel ---Seven units of natural progression beginning with hygiene and health issues, progressing to touching personal safety and masturbation issues.	X	X
“Autism and PDD Intermediate Social Skills Lessons” by Pam Britton Reese and Nena C. Challenner. ---This curriculum is similar to “Taking Care of Myself” and also comes with a CD for producing the curriculum as well as worksheets and tracking forms	X	X
NAME OF PROGRAM	BLC	LIGHTHOUSE
FLASH (Family Life and Sexual Health) program ---25 individual lessons	X	X

---Designed for MS & HS students with special needs ---Written by Jane Stangle, Med		
Health textbook by Prentice Hall; 2010 edition		X
Health—Teaching Resources (complimentary resource guide)		X
Health—Reading and Note Taking Guide (complimentary teaching tools)		X
Health—Teens Talk video series of four DVDs with 8 units (companion to HEALTH textbook) ---Mental Health; Social Health; Nutrition; Physical Fitness; Substance Abuse; Human Development; Preventing Disease; Community Health and Safety		X
Michigan Model 9-12; Healthy and Responsible Relationships: HIV, Other STDs, and Pregnancy Prevention	X	X
Michigan Model: Growing Up and Staying Healthy: Understanding HIV and Other STDs, the new (2010) middle school curriculum. Contains ten lessons	X	X

Minutes of board actions for major programmatic changes

See Appendix P

Results of district-wide survey

Due to the severity of the disabilities, there is not one survey that would be appropriate for all of the students. Parent & student surveys will include questions related to health & sex education.

Next Steps

Committee will reconvene in two years to review/update the Berrien RESA Health and Sex Education Curriculum.

Appendix

- A. Meeting agendas and minutes
- B. Approved Curriculum
- C. Michigan's Grade Level Content Expectations & Michigan Merit Curriculum Credit Guidelines for Health Education
- D. Michigan Model for Health K-6 Scope and Sequence
- E. Sample Logic Model
- F. Berrien RESA Public Hearing Notice
- G. Berrien RESA Board meeting
- H. Berrien RESA Health and Sex Education Policy Advisory Board
- I. State of Michigan Health and Sex Education Policy
- J. Guidelines for guest speaker(s)
- K. Parent notification/opt-out letter(s)
- L. Student assessment(s)
- M. Sex Education Supervisor form
- N. A Summary of Legal Obligations and Best Practices
- O. Board policy complaint process
- P. Minutes of Board actions for major programmatic changes

A. Meeting agendas and minutes

- [April 11 Meeting](#)
- [April 11 Sign In](#)
- [April 24 Meeting](#)
- [April 24 Sign In](#)

B. Approved Curriculum

2022-2023 BERRIEN REGIONAL EDUCATION AGENCY BOARD APPROVED SEX EDUCATION CURRICULUM

NAME OF PROGRAM	BLC	LIGHTHOUSE
Berrien County Sheriff Department Education Team	X	X
Berrien County Health Department --STD prevention education and HIV prevention education	X	X
Comprehensive Health Skills for Middle School G-W Publishing		X
Comprehensive Health Skills for High School G-W Publishing		X
CDC Website cdc.gov	X	X
Date Smart by James Stanfield	X	X
EPEC—Every Body is Good (c 2006) Lessons promoting positive body image	X	X
FLASH (Family Life and Sexual Health) program ---25 individual lessons ---Designed for MS & HS students with special needs ---Written by Jane Stangle, Med	X	X
HIV/AIDS Power point Presentation (Nurse designed)	X	X
Intercare Women's Clinic	X	X
Life Horizons Slides and Video Presentation **omit slides: 18-20 Human Reproduction & 59-121 Sexual/Reproductive Health**	X	X
Learn About Life - Attainment (omit handouts)	X	X
Michigan Model HIV/AIDS 4 th grade	X	X
Michigan Model HIV/AIDS 5 th grade	X	X
Michigan Model K-8: Lesson VI-3 Lesson VI-1: Living & non-living things Lesson VI-2: New Growth Beginnings Lesson V-2: Cells, Functions, & Varieties Lesson V-4: Blood Lesson V-4: Fighting Germs	X	X
Michigan Model 9-12; Healthy and Responsible Relationships: HIV, Other STIs, and Pregnancy Prevention	X	X
Michigan Model: Growing Up and Staying Healthy: Understanding HIV and Other STIs, the middle school curriculum. Contains ten lessons	X	X
missingkids.org/netsmart2/home National Center for Missing and Exploited Children	X	X
One Love https://www.joinonelove.org/	X	X
People Smart by James Stanfield	X	X

Puberty education by Marsh Media --A Girl's Guide to Growing Up --A Boy's Guide to Growing Up --A Girl's guide to Puberty and Personal Safety --A Boy's Guide to Puberty and Personal Safety	X	X
Puberty: The Wonder Years 2010 edition	X	X
START - Sexual Health: An Adolescent Provider Toolkit (use pages 55-56)	X	X
START: Body Changes for Boys	X	X
Sexual Health and Adolescent Provider Toolkit	X	X
Social Story - Public and Private Places	X	X
Teachers Pay Teachers/TPT: Body Safety	X	X
Teachers Pay Teachers: Dating, Relationships & Becoming Sexually Active	X	X
The Boy's Guide to Growing Up: Choices & Challenges during Puberty by Terri Couwenhoven, M.S.	X	X
The Girl's Guide to Growing Up: Choices & Challenges during Puberty by Terri Couwenhoven, M.S.	X	X
The Autism Friendly Guide to Periods - Robyn Steward	X	X
Tool for the Assessment of Levels of Knowledge Sexuality and Consent (TALK-SC) Mackenzie Health (Sections 1-5 only)	X	X
Women's Care Center, Niles, MI	X	X

C. Michigan's Grade Level Content Expectations & Michigan Merit Curriculum Credit Guidelines for Health Education

**Grade Level Content Expectations (GLCEs) and Michigan Merit Curriculum
Credit Guidelines for Health Education**

Adopted by the State Board of Education, February 2007

Strands 6 and 7:

HIV Prevention (Grades 4-12)
Growth and
Development (Grades 4-5) Sexuality Education
(Grades 7-12)

Note: The following are excerpts of larger documents—the Health Education GLCEs for grades K-8 and the Health Education Michigan Merit Curriculum Credit Guidelines for grades 9-12. Both the GLCEs and the Credit Guidelines cover all seven major content strands within health education. The complete documents are available online at www.michigan.gov/healthed.

Grade 4

STRAND 6: HIV PREVENTION

(Note: Course content should be reviewed to determine whether it is consistent with the district's board policies and approved curriculum. State law requires that, before adopting any revisions to the approved HIV curriculum, the local school board shall hold public hearings on the revision. For the specific language of the law, see Section 380.1169 of the Michigan Compiled Laws at www.michiganlegislature.org.)

Standard 1: Core Concepts

- 6.1** Define HIV and AIDS.
- 6.2** Explain that it is safe to be a friend of someone who is living with HIV or AIDS.
- 6.3** Explain how HIV is and is not transmitted.

Standard 3: Health Behaviors

- 6.4** Describe how people can protect themselves from infection with serious blood-borne communicable diseases, including not touching blood and not touching used needles.

STRAND 7: GROWTH AND DEVELOPMENT

(Note: Growth and Development is RECOMMENDED, but not mandated, to be taught. Course content should be reviewed by the district's Sex Education Advisory Board to determine whether it is consistent with the district's board policies and approved curriculum.)

Standard 1: Core Concepts

- 7.1** Explain that puberty and development can vary considerably and still be normal.
- 7.2** Identify personal hygiene practices and health/safety issues during puberty (e.g., showering, deodorant, use of sanitary products, and athletic supporters).
- 7.3** Describe social changes during puberty (e.g., changes in friendships, crushes/attractions, and changing expectations of parents/adults).
- 7.4** Describe emotional changes during puberty (e.g., mood shifts).

- 7.5** Describe physical changes that occur during puberty (e.g., body hair, body odor, voice, body shape, strength, hormones, and menstruation).

Standard 2: Access Information

- 7.6** Identify potential resources (e.g., parents, teacher, and other trusted adults) that can provide accurate information about puberty.

Standard 3: Health Behaviors

- 7.7** Develop plans to maintain personal hygiene during puberty.

Grade 5

STRAND 6: HIV PREVENTION

(Note: Course content should be reviewed to determine whether it is consistent with the district's board policies and approved curriculum. State law requires that, before adopting any revisions to the approved HIV curriculum, the local school board shall hold public hearings on the revision. For the specific language of the law, see Section 380.1169 of the Michigan Compiled Laws at www.michiganlegislature.org.)

Standard 1: Core Concepts

- 6.1** Define HIV and AIDS.
6.2 Explain that it is safe to be a friend of someone who is living with HIV or AIDS.
6.3 Describe how HIV is and is not transmitted.

Standard 3: Health Behaviors

- 6.4** Describe ways people can protect themselves from infection with serious blood borne communicable diseases, including not touching blood, not touching used needles, and not having sex.

STRAND 7: GROWTH AND DEVELOPMENT

(Note: State law makes whether to offer sexuality education a local district decision. Course content must be reviewed by the district's Sex Education Advisory Board to determine whether it is consistent with the district's board policies and approved sexuality education curriculum. If the district chooses to offer sexuality education, certain content must be included in an age-appropriate fashion in the K-12 instructional program. This content is integrated into these content expectations. For the specific language of the law, see Sections 380.1507, 1507a, and 1507b of the Michigan Compiled Laws at www.michiganlegislature.org.)

Standard 1: Core Concepts

- 7.1** Explain that males and females develop at different rates, and there are wide variations within each sex.
7.2 Explain social changes during puberty (e.g., changes in friendships, crushes/attractions, and changing expectations of parents/adults).
7.3 Explain emotional changes during puberty (e.g., mood shifts).
7.4 Explain physical changes that occur during puberty (e.g., body hair, body odor, voice, body shape, strength, hormones, and menstruation).
7.5 Define and identify basic male and female reproductive anatomy using scientific names.
7.6 Define the functions of sperm and egg cells in human reproduction.
7.7 Describe how sperm cells are produced.
7.8 Describe the menstrual cycle and its potential for human reproduction.
7.9 Describe the functions of basic male and female reproductive anatomy.

Standard 2: Access Information

- 7.10** Describe criteria to determine whether resources provide accurate information about puberty; and apply these criteria to identify valid resources.

Standard 4: Influences

- 7.11** Explain how culture, media, and others influence what one thinks about oneself and relationships.

Grade 6

STRAND 6: HIV AND STIS PREVENTION

See the Health Education Content Expectations for Grade 5 and Grades 7-8 at www.michigan.gov/healthed<<http://www.michigan.gov/healthed>>.

STRAND 7: SEXUALITY EDUCATION

(Note: State law makes whether to offer sexuality education a local district decision. Course content must be reviewed by the district's Sex Education Advisory Board to determine whether it is consistent with the district's board policies and approved sexuality education curriculum. If the district chooses to offer sexuality education, certain content must be included in an age-appropriate fashion in the K-12 instructional program. This content is integrated into these content expectations. For the specific language of the law, see Sections 380.1507, 1507a, and 1507b of the Michigan Compiled Laws at www.michiganlegislature.org.)

Standard 1: Core Concepts

- 7.1** Describe the changes in friendships that one might experience as a result of puberty, and evaluate what it means to be a boyfriend or girlfriend.
- 7.2** Identify changes in physical maturation during puberty as it relates to the physical capacity for human reproduction.
- 7.3** Describe the basic process of human reproduction, using scientific names for reproductive anatomy.
- 7.4** Define abstinence from sex.
- 7.5** Analyze reasons for young people to remain abstinent, concluding that abstinence is the only 100% effective method of protection from HIV, other serious communicable disease, and pregnancy.

Standard 2: Access Information

- 7.6** Locate adult resources (e.g., parent, teacher, medical professional, counselor, other adult) who can provide accurate information about friendships, dating, puberty, and human reproduction.

Standard 3: Health Behaviors

- 7.7** Recognize situations or behaviors that may lead to engaging in sexually risky behaviors.
- 7.8** Set personal boundaries and limits related to physical intimacy and sexual behavior.

Standard 4: Influences

- 7.9** Evaluate a variety of external influences (e.g., media, parents, culture, peers, and society) and internal influences (e.g., values, curiosity, interests, desires, and fears) and their potential to impact relationships and behavior.

Standard 5: Goal Setting

- 7.10** Develop personal short- and long-term goals that support abstinence.

Standard 7: Social Skills

- 7.11** Demonstrate how to communicate one's level of readiness to be a boyfriend or girlfriend.
- 7.12** Identify ways to show respect for other's boundaries and limits related to physical intimacy and sexual behavior.
- 7.13** Demonstrate the ability to use verbal and non-verbal ways to refuse participation in sexual behavior.

Grades 7 - 8

STRAND 6: HIV AND STIS PREVENTION

(Note: Course content should be reviewed to determine whether it is consistent with the district's board policies and approved curriculum. State law requires that, before adopting any revisions to the approved HIV curriculum, the local school board shall hold public hearings on the revision. For the specific language of the law, see Section 380.1169 of the Michigan Compiled Laws at www.michiganlegislature.org.)

Standard 1: Core Concepts

- 6.1** Explain how HIV is and is not transmitted.
- 6.2** Distinguish between facts and myths regarding HIV infection and AIDS.

Standard 2: Access Information

- 6.3** Explain when it is important to get adult, medical, and/or counseling help.
- 6.4** Describe sources of accurate information and assistance in one's community.

Standard 3: Health Behaviors

- 6.5** Analyze behaviors and situations that may result in increased risk for HIV and other sexually transmitted infections (STIs).
- 6.6** Analyze situations where assertive communication and refusal skills can be used to avoid and escape risky situations.

STRAND 7: SEXUALITY EDUCATION

(Note: State law makes whether to offer sexuality education a local district decision. Course content must be reviewed by the district's Sex Education Advisory Board to determine whether it is consistent with the district's board policies and approved sexuality education curriculum. If the district chooses to offer sexuality education, certain content must be included in an age-appropriate fashion in the K-12 instructional program. This content is integrated into these content expectations. For the specific language of the law, see Sections 380.1507, 1507a, and 1507b of the Michigan Compiled Laws at www.michiganlegislature.org.)

Standard 1: Core Concepts

- 7.1** Summarize the benefits of staying within behavioral limits and remaining abstinent.
- 7.2** Compare characteristics of healthy and unhealthy relationships, and describe ways to express caring for a boyfriend or girlfriend while staying abstinent.

Standard 3: Health Behaviors

- 7.3** Set personal boundaries and limits related to physical intimacy and sexual behavior.
- 7.4** Demonstrate skills to avoid and escape risky situations.

Standard 4: Influences

- 7.5** Examine viewpoints of parents and other trusted adults regarding teen relationships, abstinence, and sexual decisions.
- 7.6** Evaluate the impact of alcohol and other drug use on decisions regarding sexual behavior.

Standard 5: Goal Setting

- 7.7** Create a plan to stay within behavioral limits which protect one from HIV and STIs.

Standard 7: Social Skills

- 7.8** Demonstrate the ability to communicate one's behavioral limits and to show respect for the limits of others related to physical intimacy and sexual behavior.

- 7.9** Demonstrate the ability to use verbal and non-verbal ways to refuse participation in sexual behavior.

Standard 8: Advocacy

- 7.10** Demonstrate the ability to be positive peer role models in the school and community.

Grades 9 - 12

STRAND 6: HIV AND OTHER STIs PREVENTION

Note: Course content should be reviewed to determine whether it is consistent with the district's board policies and approved curriculum. State law requires that, before adopting any revisions to the approved HIV curriculum, the local school board shall hold public hearings on the revision. For the specific language of the law, see Section 380.1169 of the Michigan Compiled Laws at www.michiganlegislature.org.

Standard 1: Core Concepts

- 6.1** Analyze the rates of sexually transmitted infections (STIs) among teens.
- 6.2** Summarize the symptoms, modes of transmission, consequences, and methods to prevent HIV and other STIs, and conclude that abstinence is the most effective way to avoid HIV or other STIs.
- 6.3** Summarize the criteria for who should be tested and the advantages of early diagnosis and treatment of HIV and other STIs.

Standard 2: Access Information

- 6.4** Identify services and trustworthy adults that provide health information and testing regarding HIV and other STIs, analyze the validity of such resources, and describe how to access valid services.

Standard 3: Health Behaviors

- 6.5** Analyze common behaviors and situations to eliminate or reduce risks related to HIV and other STIs.
- 6.6** Evaluate one's personal perception of risk for HIV and other STIs.

Standard 7: Social Skills

- 6.7** Demonstrate communication, negotiation, and refusal skills to protect oneself from situations that could transmit HIV or other STIs.

RECOMMENDED

Standard 7: Social Skills

- 6.8** Demonstrate acceptance for individuals living with HIV.

STRAND 7: SEXUALITY EDUCATION

Note: State law makes whether to offer sexuality education a local district decision. Course content must be reviewed by the district's Sex Education Advisory Board to determine whether it is consistent with the district's board policies and approved sexuality education curriculum. If the district chooses to offer sexuality education, certain content must be included in an age-appropriate fashion in the K-12 instructional program. This content

is integrated into these guidelines. For the specific language of the law, see Sections 380.1507, 380.1507a, and 380.1507b of the Michigan Compiled Laws at www.michiganlegislature.org.

Standard 1: Core Concepts

- 7.1** Summarize and explain laws related to the sexual behavior of young people.
- 7.2** Compare and contrast the pros and cons of methods used for pregnancy and disease prevention, including abstinence and use of contraception.
- 7.3** Describe routine medical screening and examinations for maintaining reproductive health, and medical tests for pregnancy, HIV, and other STIs: who should be tested, the procedures used, and the importance of early detection and care.

Standard 2: Access Information

- 7.4** Identify resources that provide information, counseling, and testing related to relationships, sexual violence, pregnancy, and contraception, including options for teens who are unable to care for a baby; analyze the validity of these resources; and describe how to access valid resources.

Standard 3: Health Behaviors

- 7.5** Apply strategies, including refusal and assertiveness skills to avoid, manage, and escape situations that are high risk for pregnancy, HIV, and other STIs.

Standard 4: Influences

- 7.6** Explain how stereotypes, norms, peer influence, alcohol and other drug use, media, and personal responsibility can impact sexual decision making and the consequences of such decisions.
- 7.7** Evaluate the physical, social, emotional, legal, and economic impacts of teen pregnancy, teen parenting, HIV infection, or other STIs on personal lifestyle, goal achievement, friends, and family members.

Standard 5: Goal Setting

- 7.8** Develop personal goals and a specific plan for using the best contraceptive or disease-prevention method, including abstinence, for individual circumstances.

Standard 6: Decision Making

- 7.9** Apply decision-making skills to avoid situations that are high risk for pregnancy, HIV, and other STIs.

Standard 7: Social Skills

- 7.10** Demonstrate the ability to establish positive relationships, communicate caring and love without sexual intercourse, and communicate personal, sexual limits and values to a girlfriend or boyfriend.

Critical Health Content Areas

The Centers for Disease Control and Prevention (CDC) has identified the risk behavior areas that have the greatest effect on the short-term and long-term health of young people. Patterns of unhealthy eating, physical inactivity, and tobacco use are often established in childhood and adolescence, and are by far the leading causes of death among adults. Injury and violence, including suicide and alcohol-related traffic crashes, are the leading causes of death among youth. Each year approximately three million cases of sexually transmitted infections (STIs) occur among teenagers, and one in four Michigan high school students report having consumed five or more drinks in a row during the previous month. The CDC recommends that the following critical behavioral areas be emphasized in an effective health education program for high school: healthy eating, physical activity, tobacco prevention, alcohol and other drug prevention, injury and violence prevention, and the prevention of sexual behaviors leading to HIV, STIs, and pregnancy.

State Board of Education Policies

In its Policy on Comprehensive School Health Education (2004), the State Board of Education addresses these risks by recommending that Michigan schools do the following:

- Provide at least 50 hours of health at each grade, Pre-kindergarten through Grade 12, to give students adequate time to learn and practice health habits and skills for a lifetime.
- Focus on helping young people develop and practice personal and social skills, such as communication and decision making, in order to deal effectively with health-risk situations.
- Address social and media influences on student behaviors and help students identify healthy alternatives to specific high-risk behaviors.
- Emphasize critical knowledge and skills that students need in order to obtain, understand, and use basic health information and services in ways that enhance healthy living.
- Focus on behaviors that have the greatest effect on health, especially those related to nutrition; physical activity; violence and injury; alcohol and other drug use; tobacco use; and sexual behaviors that lead to HIV, STIs, or unintended pregnancy, as developmentally appropriate.
- Build functional knowledge and skills, from year to year, that are developmentally appropriate.
- Include accurate and up-to-date information, and be appropriate to students' developmental levels, personal behaviors, and cultural backgrounds.

The Policy to Promote Health and Prevent Disease and Pregnancy (2003), adopted by the State Board of Education, acknowledges that effective sexuality programs are best implemented in the context of Comprehensive School Health Education. Therefore, the above recommendations also apply to sexuality education. In addition, the Policy to Promote Health and Prevent Disease and Pregnancy recommends that sexuality education programs:

- Are consistent with school and community standards and support positive parent/child communication and guidance.
- Include medically accurate and current information.
- Stress abstinence from risky sexual behavior as the only certain way to avoid HIV, other STIs, and pregnancy; instruction also needs to address methods to reduce risks for HIV, other STIs, and unintended pregnancy.
- Be planned to meet the prevention needs of all students, with due attention to those who might be at greater risk for HIV, other STIs, and pregnancy.
- Are initiated early, before students reach the age when they may adopt risky behaviors, and be reinforced throughout middle and high school.
- Center on a positive, healthy definition of sexual health rather than one that focuses only on avoiding negative outcomes.

To access the complete Policy on Comprehensive School Health Education (2004) and Policy to Promote Health and Prevent Disease and Pregnancy (2003), go to the [Michigan Department of Education \(MDE\) website](#), click “State Board of Education”, click “Policies”, and click the year the policy was passed.

The Grade Level Content Expectations and Credit Guidelines for Health Education are intended to help schools address these recommendations. Critical health content areas are organized in the Guidelines by strand, as follows:

Strand 1: Nutrition and Physical Activity Strand 2: Alcohol, Tobacco, and Other Drugs Strand 3: Safety

Strand 4: Social and Emotional Health Strand 5: Personal Health and Wellness Strand 6: HIV Prevention

Strand 7: Sexuality Education

Content Standards

Through health education, students learn to obtain, interpret, and apply health information and services in ways that protect and promote personal, family, and community health. All students will show competence in the following eight health education content standards:

Standard 1: Core Concepts

Apply health promotion and disease prevention concepts and principles to personal, family, and community health issues.

Standard 2: Access Information

Access valid health information and appropriate health promoting products and services.

Standard 3: Health Behaviors

Practice health enhancing behaviors and reduce health risks.

Standard 4: Influences

Analyze the influence of cultural beliefs, media, and technology on health.

Standard 5: Goal Setting

Use goal setting skills to enhance health.

Standard 6: Decision Making

Use decision-making skills to enhance health.

Standard 7: Social Skills

Demonstrate effective interpersonal communication and other social skills which enhance health.

Standard 8: Advocacy

Demonstrate advocacy skills for enhanced personal, family, and community health.

Please note that, while all the Content Standards are addressed in the Credit Guidelines for Health Education as a whole, not all standards will be addressed in each strand.

D. Michigan Model for Health K-6 Scope and Sequence

	Kindergarten	Grade One	Grade Two	Grade Three	Grade Four	Grade Five	Grade Six	
Social and Emotional Health	<ul style="list-style-type: none"> - Showing respect and caring - Making and keeping friends - Identifying and describing feelings - Managing strong feelings - Recognizing and expressing feelings - Giving and receiving compliments and appreciation - Being responsible at home and school - Identifying people who can help 	<ul style="list-style-type: none"> - Skills for predicting potential feelings of others - Skills for finding out how others feel - Showing courtesy to others - Demonstrating giving and receiving compliments or appreciation - Welcoming family members and friends help each other - Listening skills for friendships - Decision-making and problem-solving skills 	<ul style="list-style-type: none"> - Identifying and expressing feelings - Handling mixed feelings - Expressing feelings respectfully - Listening with respect - Everyone deserves respect - Showing respect - Making strong feelings - Making good decisions: WIN - Practicing WIN 	<ul style="list-style-type: none"> - Positive role models and friends - Making and keeping friends - Everyone has special talents - Respecting differences - Helping others by protecting them from bullies - Helping others and getting help - Expressing thanks and appreciation - Expressing annoyance respectfully 	<ul style="list-style-type: none"> - Managing strong feelings, including - messages - Effects of teasing and bullying & what to do to protect self and others - Positive self-talk - Effects of teasing and bullying and what to do to protect self and others - Listening skills - Identifying situations that could lead to trouble - Decision-making and problem-solving skills - Importance of telling adults if self or others are in dangerous situations - Non-violent conflict resolution skills - Goal setting - Advocate for a healthy school environment 	<ul style="list-style-type: none"> - Identifying feelings of different intensities in self and others - Managing strong feelings, including - messages & positive self-talk - Effects of teasing and bullying & what to do to protect self and others - Assertive communication - Listening skills - Identifying situations that could lead to trouble - Decision-making and problem-solving skills - Importance of telling adults if self or others are in dangerous situations - Non-violent conflict resolution skills - Goal setting - Advocate for a healthy school environment 	<ul style="list-style-type: none"> - Positive and negative risks of friendships - Listening skills - Appreciation - Assertive communication, including - messages - Managing strong feelings - Angry feelings versus angry behavior - Criteria for getting help - Decision-making and problem-solving skills - Criteria for evaluating solutions - Non-violent conflict resolution skills - Stress management - Prevention of foot/eye illness - Benefits of healthy eating and physical activity - Dietary guidelines applied to individuals - Body image and healthy weight - Influences on eating, activity and sleep - Use of Dietary Guidelines to make a personal plan - Supporting others to eat healthy and be active 	
Nutrition and Physical Activity	<ul style="list-style-type: none"> - Variety in foods and snacks for good health - Drinking water for good health - Categorize foods and snacks into the five food groups - Importance of physical activity for good health - Examples of ways to be physically active 	<ul style="list-style-type: none"> - Importance of eating a variety of foods from all five food groups - Benefits of eating healthy snacks - Benefits of drinking water - Benefits of physical activity - How sleep, rest, and physical activity maintain health 	<ul style="list-style-type: none"> - Food groups - Combining foods and foods to limit - Benefits of physical activity - Three types of physical activity - Developing a plan to be physically active - Advocate for healthy eating and daily activity 	<ul style="list-style-type: none"> - Mega-Numbers, 5 and 60 - Food advertising and impact on eating - "Fill Your Plate" visual - Daily recommended amounts of physical activity and sleep - Personal assessment and goal setting to get adequate sleep, rest, and physical activity 	<ul style="list-style-type: none"> - Food groups and their benefits - Daily amounts to eat from each food group - Water as a preferred beverage - Use of Dietary Guidelines when choosing foods - "Fill Your Plate" visual - Analyze a favorite meal - Evaluate a peer's meal and make recommendations for improvement 	<ul style="list-style-type: none"> - Six nutrients and their benefits - Using food labels to determine information about a food - Water as a preferred beverage - Use of Dietary Guidelines when choosing foods - "Fill Your Plate" visual - Analyze a favorite meal - Evaluate a peer's meal and make recommendations for improvement 	<ul style="list-style-type: none"> - Prevention of foot/eye illness - Benefits of healthy eating and physical activity - Dietary guidelines applied to individuals - Body image and healthy weight - Influences on eating, activity and sleep - Use of Dietary Guidelines to make a personal plan - Supporting others to eat healthy and be active 	
Safety	<ul style="list-style-type: none"> - Dangerous and destructive situations that need adult help - Pedestrian safety - Rule for dangerous objects and weapons - How and when to call 911 - Avoiding inappropriate touch - Trusted adults who can help 	<ul style="list-style-type: none"> - Wheelchair recreation hazards, safety, and safety gear - Fire and how to prevent - Situations that are dangerous, destructive, and distracting and need adult help - Escaping dangerous situations - Define emergency and how to make emergency phone call - Avoiding inappropriate touch - Trusted adults who can help 	<ul style="list-style-type: none"> - Wheelchair recreation safety: bicycles, skateboards, skates - Water safety - Internet safety - Personal safety - Practicing personal safety skills 	<ul style="list-style-type: none"> - Three keys to passenger safety: safety belts, booster seats, back seats - Safe seat - Safety belt smarts - Identifying and responding to unsafe situations - Street smarts: internet, personal, safety, weapons 	<ul style="list-style-type: none"> - Fire and burn hazards and how to prevent - Home fire escape plan - Home safety hazards and how to prevent injuries - How to make emergency phone call - Safety strategies when in public places, including when alone in public places - Child sexual abuse and abduction prevention - Child sexual abuse and abduction prevention 	<ul style="list-style-type: none"> - Safety hazards around water and ice and how to prevent injuries - Sun safety - Home alone safety strategies - Safety strategies when in public places, including when alone in public places - Child sexual abuse and abduction prevention - Child sexual abuse and abduction prevention 	<ul style="list-style-type: none"> - Seatbelt safety and impact of car passenger behavior when weapons are present - School procedures for school crisis situations - Strategies to stay when using the Internet - How to get adult help - Online safety practice safe behaviors - Child sexual abuse and abduction prevention 	<ul style="list-style-type: none"> - Seatbelt safety and impact of car passenger behavior when weapons are present - School procedures for school crisis situations - Strategies to stay when using the Internet - How to get adult help - Online safety practice safe behaviors - Child sexual abuse and abduction prevention
Alcohol, Tobacco, and Other Drugs	<ul style="list-style-type: none"> - How to safely use over-the-counter and prescription medicines - Household products that can be dangerous - Rules for avoiding poisons - Trustworthy sources of information 	<ul style="list-style-type: none"> - How to safely use over-the-counter and prescription medicines - Medicines and poisons - Household products that can be dangerous - Rules for avoiding poisons - Trustworthy sources of information - Harmful chemicals in tobacco products - Dangers of secondhand smoke and ways to avoid or reduce exposure 	<ul style="list-style-type: none"> - Caffeine - Staying away from nicotine and alcohol - Saying "no" to secondhand smoke 	<ul style="list-style-type: none"> - Medicines and poisons - Negative effects of tobacco use - Alcohol and alcoholism - Positive influences - Refusal skills 	<ul style="list-style-type: none"> - Dangers of secondhand smoke and ways to avoid or reduce exposure - Reasons individuals choose to drink or not to drink - Decisions about alcohol and other drug use impact family and friends - Family and friends influence alcohol and other drug use decisions - Influence of advertising - Refusal skills 	<ul style="list-style-type: none"> - Dangers of inhaling use and how to avoid exposure - Influence of family and peers on drug use - Rules for safety around dangerous or unknown products - Effects of smoking tobacco, secondhand smoke, & use of spit tobacco - Advocate for someone to avoid tobacco use or quit using - Analyze tobacco advertisements - Refusal skills - Effects of alcohol, especially on driving a vehicle - Impact of alcohol and tobacco use on friends and family - Ways to avoid riding with a driver who has been drinking and what to do if it can't be avoided 	<ul style="list-style-type: none"> - Possible reasons people use or don't use drugs - Negative health effects of drug use - Analysis of drug use data - Persuasion skills for encouraging others to stay drug free - Influence of family, society and peers on drug use - Impact of drug use on goals - School rules and laws related to tobacco - Refusal skills - Valid resources for drug problems - Ways to avoid riding with a driver who has been drinking and what to do if it can't be avoided - Benefits of remaining drug free and making a drug-free commitment 	<ul style="list-style-type: none"> - Possible reasons people use or don't use drugs - Negative health effects of drug use - Analysis of drug use data - Persuasion skills for encouraging others to stay drug free - Influence of family, society and peers on drug use - Impact of drug use on goals - School rules and laws related to tobacco - Refusal skills - Valid resources for drug problems - Ways to avoid riding with a driver who has been drinking and what to do if it can't be avoided - Benefits of remaining drug free and making a drug-free commitment
Personal Health and Wellness	<ul style="list-style-type: none"> - Hand washing GERMS - Taking care of teeth - Encouraging peers to make positive choices for personal health 	<ul style="list-style-type: none"> - Skills for stopping the spread of germs: covering sneezes and washing hands - Taking care of teeth 	<ul style="list-style-type: none"> - For more information about the Michigan Model for Health, contact your local Health Coordinator or visit www.emc.cmich.edu/mm 	<ul style="list-style-type: none"> - Basic hygiene: Care of the Body - Hand washing GERMS - Planning for good hygiene 	<ul style="list-style-type: none"> - Importance of and rationale for keeping the body clean - Hygiene concerns and solutions - Influence of media, including advertisements on products purchased and on body image - Analyze advertisements for information 	<ul style="list-style-type: none"> - Importance of and rationale for keeping the body clean - Hygiene concerns and solutions - Influence of media, including advertisements on products purchased and on body image - Analyze advertisements for information 	<ul style="list-style-type: none"> - Importance of and rationale for keeping the body clean - Hygiene concerns and solutions - Influence of media, including advertisements on products purchased and on body image - Analyze advertisements for information 	<ul style="list-style-type: none"> - Skills for reducing the spread of germs
HIV	<p style="text-align: center;">Michigan Model for Health® K-6 Scope & Sequence Chart</p>							
	<div style="text-align: right;">  </div>							

E. Sample Logic Model



Sample Logic Model for School-Based HIV/STD and Sex Education Programs

Last Revised August 2012

Goal: To equip students with the knowledge and skills to develop healthy relationships and to avoid sexual behaviors that put them at risk for HIV, STDs, and unintended pregnancy.

Philosophy/Assumptions	Resources	Activities	Objectives (Student knowledge and skills)	Long-Term Outcomes
<p>Parents are the primary sex educators for our youth.</p> <p>Schools have a duty, in concert with families and communities, to implement effective sexuality education programs that will help students make responsible decisions during their school years and into their adult lives.</p> <p>Education programs should address the needs of all students, including those at greatest risk for HIV/STD and unintended pregnancy.</p> <p>District curriculum should be age, developmentally, linguistically, and culturally appropriate.</p> <p>Abstinence from intimate sexual contact should be stressed as the only certain way to avoid HIV, other STDs, and pregnancy.</p> <p>Programs are most effective when they are initiated before students reach the age when they may adopt risky behaviors, and are reinforced throughout middle and high school.</p> <p>Sexuality instruction is best provided by well-trained and supported school staff members. Outside speakers can enhance, but should not replace, instruction.</p>	<p>Data on educational outcomes gathered by the school district (e.g., School Infrastructure Database; Single Record Student Database); health risk behaviors (e.g., Michigan Profile for Healthy Youth (MIPHY), Youth Risk Behavior Survey (YRBS); Alcohol, Tobacco, and Other Drug surveys), and youth data collected by community agencies (e.g., health department, juvenile justice system, Uniform Crime Reports).</p> <p>Parent input and support: provided through surveys, focus groups, committees, parent volunteers, parent organizations, etc.</p> <p><i>Michigan Model for Health</i> curricula developed by the Michigan Departments of Education and Community Health and aligned with research and best practice.</p> <p>Regional and local health coordinators who provide resources, training, and technical assistance to school staff.</p> <p>HIV/STD and sex education taught within a broader comprehensive health education curriculum and supported by the district, its board, and the community.</p> <p>Trained and supported school staff including not only teachers, but also school nurses, school counselors, and other specialists.</p> <p>Community agencies that support and enhance classroom instruction through education, support groups, health services, and other ancillary programs.</p>	<p>The district sex education advisory board meets periodically to review and recommend curricula for adoption and implementation that align with student needs, community norms, the law, and research and best practice.</p> <p>The advisory committee composition is periodically reviewed to ensure that members are consistent with state law and are representative of the broader community.</p> <p>A comprehensive, medically accurate and developmentally appropriate HIV/STD and sex education curriculum is implemented at successive grade levels in the district and is regularly evaluated and updated. Enhancements to the curriculum are provided by community agencies.</p> <p>Educators are trained and updated regularly by state and regional health coordinators to learn the latest information and strategies for skills-based, student-centered instruction and authentic assessment.</p> <p>Parents are notified in advance of the content of the instruction, their right to review materials, observe instruction, and excuse their child without penalty.</p> <p>Parent programs and activities are implemented to build support and collaboration with schools for effective sex education.</p>	<p>At the end of the K-12 HIV/STD and sex education program of instruction, students will be able to:</p> <ul style="list-style-type: none"> Analyze characteristics of healthy and unhealthy relationships. Evaluate positive and negative influences on sexual decisions. Evaluate the possible emotional, physical, and legal consequences of early sexual activity. Advocate for abstinence as the only 100% effective way to avoid pregnancy, HIV, and STDs. Accurately assess their risks for HIV, other STDs, and pregnancy. Demonstrate effective skills for avoiding or escaping risky sexual situations. Demonstrate effective skills to access and correctly use condoms and other risk reduction methods. Communicate with parents and other trusted adults regarding reproductive health, relationships and sexual decisions. Seek additional information, support, and services as needed. 	<p>Students will seek out healthy relationships.</p> <p>Students will delay sexual activity or return to abstinence.</p> <p>Those students who are sexually active will use condoms consistently and correctly.</p> <p>Students will avoid HIV and other sexually transmitted disease infections.</p> <p>Students will avoid unintended pregnancy.</p> <p>Students will seek family support, accurate information, and regular health care to maintain their reproductive health.</p>

F. Berrien RESA Public Hearing Notice

[April 2023 Superintendent Letter to Board](#)

[April 2023 Superintendent Approval for Public Hearing](#)

G. Berrien RESA Board Meetings

[May 2023 Board Meeting Agenda](#)

[June 2023 Board Meeting Agenda](#)

[June 2023 Board Minutes and Approval](#)

H. Berrien RESA Health and Sex Education Policy Advisory Board

Sex Education Advisory Board

The Board of Education shall not offer instruction in sex education, including family planning and human sexuality, prior to appointment and meeting of the Advisory Board.

The Board shall appoint and shall determine terms of service for the Sex Education Advisory Board, the number of members to serve on the advisory board, and a membership selection process that reasonably reflects the District population, and shall appoint two (2) co-chairs for the Advisory Board, at least one (1) of whom is a parent of a child attending a school in the District.

At least one-half (1/2) of the members of the Sex Education Advisory Board shall be parents who have a child attending a school operated by the District, and a majority of these parent members shall be individuals who are not employed by the District. The Advisory Board shall include students of the District, educators, local clergy, and community health professionals.

Written or electronic notice of a Sex Education Advisory Board meeting shall be sent to each member at least two (2) weeks before the date of the meeting.

Role of the Sex Education Advisory Board

The Advisory Board shall do all of the following:

- A. Establish program goals and objectives for student knowledge and skills that are likely to reduce the rates of sex, pregnancy, and sexually transmitted diseases.
- B. Review the materials and methods of instruction used and make recommendations to the Board of the School District for implementation. The Advisory Board shall take into consideration the school district's needs, demographics, and trends, including, but not limited to, teenage pregnancy rates, sexually transmitted disease rates, and incidents of student sexual violence and harassment.
- C. At least once every two (2) years, evaluate, measure, and report the attainment of program goals and objectives established by Sex Education Advisory Board (SEAB). The Board of a School District shall make the resulting report available to parents in the School District.

- D. Before adopting any revisions in the materials or methods used in instruction including, but not limited to, revisions to provide for the teaching of abstinence from sex as a method of preventing unplanned or out-of-wedlock pregnancy and sexually transmitted disease, public hearings must be held. At least two (2) public hearings on the proposed revisions must be held. The hearings shall be held at least one (1) week apart and public notice of the hearings shall be given in the manner required under the Open Meetings Act.

[Berrien RESA Board of Education Policies](#)

I. Current Revised School Code (PA 451 of 1976) and State School Aid Act (PA 94 of 1979) Provisions Regarding the Teaching of HIV/AIDS, Sex Education, Health Education, and Physical Education in Michigan Schools

380.1169 Dangerous communicable diseases; human immunodeficiency virus infection and acquired immunodeficiency virus infection; teacher training; teaching materials; curricula; teaching of abstinence from sex.

Sec. 1169. (1) The principal modes by which dangerous communicable diseases, including, but not limited to, human immunodeficiency virus infection and acquired immunodeficiency syndrome, are spread and the best methods for the restriction and prevention of these diseases shall be taught in every public school in this state. Subject to subsection (3) and section 1507b, the teaching under this section shall stress that abstinence from sex is a responsible and effective method for restriction and prevention of these diseases and is a positive lifestyle for unmarried young people.

(2) Except for licensed health care professionals who have received training on human immunodeficiency virus infection and acquired immunodeficiency syndrome, each person who teaches K to 12 pupils about human immunodeficiency virus infection and acquired immunodeficiency syndrome pursuant to subsection (1) shall have training in human immunodeficiency virus infection and acquired immunodeficiency syndrome education for young people. The superintendent of public instruction, in cooperation with the department of public health, shall train trainers to provide the teacher training required by this subsection and shall provide for the development and distribution to school districts of medically accurate material on the teaching of human immunodeficiency virus infection and acquired immunodeficiency syndrome to young people.

(3) The choice of curricula to be used for human immunodeficiency virus infection and acquired immunodeficiency syndrome education required to be taught under subsection (1) shall be approved by the appropriate school board and implemented in the school setting not later than October 1, 1990. Before adopting any revisions to the curriculum implemented under this section, including, but not limited to, revisions to provide for the teaching of abstinence from sex as a responsible method for restriction and prevention of disease, a school board shall hold at least 2 public hearings on the proposed revisions. The hearings shall be held at least 1 week apart and public notice of the hearings shall be given in the manner required under section 1201 for board meetings. A public hearing held pursuant to this section may be held in conjunction with a public hearing held pursuant to section 1507.

380.1170 Physiology and hygiene; instruction; development of comprehensive health education programs; conflict with religious beliefs.

Sec. 1170. (1) Instruction shall be given in physiology and hygiene, with special reference to substance abuse, including the abusive use of tobacco, alcohol, and drugs, and their effect upon the human system.

(2) Comprehensive health education programs shall be developed as prescribed by Act No. 226 of the Public Acts of 1969, being sections 388.381 to 388.385 of the Michigan Compiled Laws.

(3) A child upon the written statement of parent or guardian that instruction in the characteristics or symptoms of disease is in conflict with his or her sincerely held religious beliefs shall be excused from attending classes where such instruction is being given and no penalties as to credit or graduation shall result therefrom.

This compilation of laws has been updated to reflect Public Acts 165 and 166, effective June 24, 2004. Page 1 of 6 Questions can be directed to the Michigan Department of Education, Coordinated School Health and Safety Programs Unit, at 517-241-4284 or visit www.michigan.gov/mde.

380.1502 Health and physical education; establishment; course in physical education required; extracurricular athletics as meeting requirement.

Sec. 1502. (1) Health and physical education for pupils of both sexes shall be established and provided in all public schools of this state. Subject to subsection (2), each pupil attending public school in this state who is physically fit and capable of doing so shall take the course in physical education.

(2) A school district may credit a pupil's participation in extracurricular athletics or other extracurricular activities involving physical activity as meeting the physical education requirement for the pupil under subsection (1).

380.1506 Program of instruction in reproductive health; supervision; request to excuse pupil from attendance; "reproductive health" defined.

Sec. 1506. (1) A program of instruction in reproductive health shall be supervised by a registered physician, a registered nurse, or other person certified by the state board as qualified. Upon the written request of a pupil or the pupil's parent or guardian, a pupil shall be excused, without penalty or loss of academic credit, from attending classes in which the subject of reproductive health is under discussion.

(2) As used in subsection (1) and sections 1507 and 1508, "reproductive health" means that state of an individual's well-being which involves the reproductive system and its physiological, psychological, and endocrinological functions.

380.1507 Instruction in sex education; instructors, facilities, and equipment; stressing abstinence from sex; elective class; notice to parent or guardian; request to excuse pupil from attendance; qualifications of teacher; sex education advisory board; public hearing; distribution of family planning drug or device prohibited; "family planning," "class," and "course" defined.

Sec 1507. (1) The board of a school district may engage qualified instructors and provide facilities and equipment for instruction in sex education, including family planning, human sexuality, and the emotional, physical, psychological, hygienic, economic, and social aspects of family life. Instruction may also include the subjects of reproductive health and the recognition, prevention, and treatment of sexually transmitted disease. Subject to subsection (7) and section 1507b, the instruction described in this subsection shall stress that

abstinence from sex is a responsible and effective method of preventing unplanned or out-of-wedlock pregnancy and sexually transmitted disease and is a positive lifestyle for unmarried young people.

(2) The class described in subsection (1) shall be elective and not a requirement for graduation.

(3) A pupil shall not be enrolled in a class in which the subjects of family planning or reproductive health are discussed unless the pupil's parent or guardian is notified in advance of the course and the content of the course, is given a prior opportunity to review the materials to be used in the course and is notified in advance of his or her right to have the pupil excused from the class. The state board shall determine the form and content of the notice required in this subsection.

(4) Upon the written request of a pupil or the pupil's parent or legal guardian, a pupil shall be excused, without penalty or loss of academic credit, from attending a class described in subsection (1).

This compilation of laws has been updated to reflect Public Acts 165 and 166, effective June 24, 2004. Page 2 of 6 Questions can be directed to the Michigan Department of Education, Coordinated School Health and Safety Programs Unit, at 517-241-4284 or visit www.michigan.gov/mde.

(5) A school district that provides a class as permitted by subsection (1) shall offer the instruction by teachers qualified to teach health education. A school district shall not offer this instruction unless a sex education advisory board is established by the board of the school district. The board of a school district shall determine terms of service for the sex education advisory board, the number of members to serve on the advisory board, and a membership selection process that reasonably reflects the school district population, and shall appoint 2 co-chairs for the advisory board, at least 1 of whom is a parent of a child attending a school operated by the school district. At least 1/2 of the members of the sex education advisory board shall be parents who have a child attending a school operated by the school district, and a majority of these parent members shall be individuals who are not employed by a school district. The board of a school district shall include pupils of the school district, educators, local clergy, and community health professionals on the sex education advisory board. Written or electronic notice of a sex education advisory board meeting shall be sent to each member at least 2 weeks before the date of the meeting. The advisory board shall do all of the following:

(a) Establish program goals and objectives for pupil knowledge and skills that are likely to reduce the rates of sex, pregnancy, and sexually transmitted diseases. This subdivision does not prohibit a school district from establishing additional program goals and objectives that are not contrary to this section, section 1169, or section 1507b.

(b) Review the materials and methods of instruction used and make recommendations to the board of the school district for implementation. The advisory board shall take into consideration the school district's needs, demographics, and trends, including, but not limited to, teenage pregnancy rates, sexually transmitted disease rates, and incidents of student sexual violence and harassment.

(c) At least once every 2 years, evaluate, measure, and report the attainment of program goals and objectives established under subdivision (a). The board of a school district shall make the resulting report available to parents in the school district.

(6) Before adopting any revisions in the materials or methods used in instruction under this section, including, but not limited to, revisions to provide for the teaching of abstinence from sex as a method of preventing

unplanned or out-of-wedlock pregnancy and sexually transmitted disease, the board of a school district shall hold at least 2 public hearings on the proposed revisions. The hearings shall be held at least 1 week apart and public notice of the hearings shall be given in the manner required under section 1201 for board meetings. A public hearing held pursuant to this section may be held in conjunction with a public hearing held pursuant to section 1169.

(7) A person shall not dispense or otherwise distribute in a public school or on public school property a family planning drug or device.

(8) As used in this section, "family planning" means the use of a range of methods of fertility regulation to help individuals or couples avoid unplanned pregnancies; bring about wanted births; regulate the intervals between pregnancies; and plan the time at which births occur in relation to the age of parents. It may include the study of fetology. It may include marital and genetic information. Clinical abortion shall not be considered a method of family planning, nor shall abortion be taught as a method of reproductive health.

(9) As used in this section and sections 1506 and 1507a:

(a) "Class" means an instructional period of limited duration within a course of instruction and includes an assembly or small group presentation.

(b) "Course" means a series of classes linked by a common subject matter.

This compilation of laws has been updated to reflect Public Acts 165 and 166, effective June 24, 2004. Page 3 of 6 Questions can be directed to the Michigan Department of Education, Coordinated School Health and Safety Programs Unit, at 517-241-4284 or visit www.michigan.gov/mde

380.1507a Notice of excuse from class; enrollment.

Sec. 1507a. If a parent or legal guardian of a pupil files with the public school in which the pupil is enrolled a continuing written notice that the pupil is to be excused from a class described in section 1507, the pupil shall not be enrolled in a class described in section 1507 unless the parent or legal guardian submits a written authorization for that enrollment.

380.1507b Sex education and instruction; curriculum requirements.

Sec. 1507b. (1) Instruction under section 1507 in sex education and instruction under section 1169 on human immunodeficiency virus infection and acquired immunodeficiency syndrome shall emphasize that abstinence from sex is a positive lifestyle for unmarried young people because abstinence is the only protection that is 100% effective against unplanned pregnancy, sexually transmitted disease, and sexually transmitted human immunodeficiency virus infection and acquired immunodeficiency syndrome.

(2) Material and instruction in the sex education curriculum under section 1507 that discusses sex shall be age-appropriate, shall not be medically inaccurate, and shall do at least all of the following:

(a) Discuss the benefits of abstaining from sex until marriage and the benefits of ceasing sex if a pupil is sexually active.

- (b) Include a discussion of the possible emotional, economic, and legal consequences of sex.
- (c) Stress that unplanned pregnancy and sexually transmitted diseases are serious possibilities of sex that are not fully preventable except by abstinence.
- (d) Advise pupils of the laws pertaining to their responsibility as parents to children born in and out of wedlock.
- (e) Ensure that pupils are not taught in a way that condones the violation of the laws of this state pertaining to sexual activity, including, but not limited to, sections 158, 335a, 338, 338a, 338b, and 520b to 520e of the Michigan penal code, 1931 PA 328, MCL 750.158, 750.335a, 750.338, 750.338a, 750.338b, and 750.520b to 750.520e.
- (f) Teach pupils how to say "no" to sexual advances and that it is wrong to take advantage of, harass, or exploit another person sexually.
- (g) Teach refusal skills and encourage pupils to resist pressure to engage in risky behavior.
- (h) Teach that the pupil has the power to control personal behavior. Pupils shall be taught to base their actions on reasoning, self-discipline, a sense of responsibility, self-control, and ethical considerations such as respect for self and others.
- (i) Provide instruction on healthy dating relationships and on how to set limits and recognize a dangerous environment.
- (j) Provide information for pupils about how young parents can learn more about adoption services and about the provisions of the safe delivery of newborns law, chapter XII of the probate code of 1939, 1939 PA 288, MCL 712.1 to 712.20.
- (k) Include information clearly informing pupils that having sex or sexual contact with an individual under the age of 16 is a crime punishable by imprisonment and that 1 of the other results of being convicted of this crime is to be listed on the sex offender registry on the internet for up to 25 years.

This compilation of laws has been updated to reflect Public Acts 165 and 166, effective June 24, 2004. Page 4 of 6 Questions can be directed to the Michigan Department of Education, Coordinated School Health and Safety Programs Unit, at 517-241-4284 or visit www.michigan.gov/mde.

(3) This section does not prohibit a public school from offering sex education with behavioral risk reduction strategies, as defined by law, that are not 100% effective against unplanned pregnancy, sexually transmitted disease, and sexually transmitted human immunodeficiency virus infection and acquired immunodeficiency syndrome.

388.1766 Dispensing or distributing family planning or drug or device, dispensing prescriptions for family planning drug, or making referrals for abortion; forfeiture.

Sec. 166. A district in which a school official, member of a board, or other person dispenses or otherwise distributes a family planning drug or device in a public school in violation of section 1507 of the revised school

code, being section 380.1507 of the Michigan Compiled Laws, dispenses prescriptions for any family planning drug, or makes referrals for abortions shall forfeit 5% of its total state aid appropriation.
388.1766a Instruction in reproductive health or other sex education; complaint process.
Sec. 166a.

(1) In order to avoid forfeiture of state aid under subsection (2), the board of a district or intermediate district providing reproductive health or other sex education instruction under section 1169, 1506, or 1507 of the revised school code, MCL 380.1169, 380.1506, and 380.1507, or under any other provision of law, shall ensure that all of the following are met:

(a) That the district or intermediate district does not provide any of the instruction to a pupil who is less than 18 years of age unless the district or intermediate district notifies the pupil's parent or legal guardian in advance of the instruction and the content of the instruction, gives the pupil's parent or legal guardian a prior opportunity to review the materials to be used in the instruction, allows the pupil's parent or legal guardian to observe the instruction, and notifies the pupil's parent or legal guardian in advance of his or her rights to observe the instruction and to have the pupil excused from the instruction.

(b) That, upon the written request of a pupil's parent or legal guardian or of a pupil if the pupil is at least age 18, the pupil shall be excused, without penalty or loss of academic credit, from attending class sessions in which the instruction is provided.

(c) That the sex education instruction includes age-appropriate information clearly informing pupils at 1 or more age-appropriate grade levels that having sex or sexual contact with an individual under the age of 16 is a crime punishable by imprisonment, and that 1 of the other results of being convicted of this crime is to be listed on the sex offender registry on the internet for up to 25 years.

(2) If a parent or legal guardian of a pupil enrolled in a district or intermediate district believes that the district or intermediate district has violated this section or section 1169, 1506, or 1507 of the revised school code, MCL 380.1169, 380.1506, and 380.1507, he or she may file a complaint with the superintendent or chief administrator of the district or intermediate district in which the pupil is enrolled. Upon receipt of the complaint, the superintendent or chief administrator of the district or intermediate district shall investigate the complaint and, within 30 days after the date of the complaint, provide a written report of his or her findings to the parent or legal guardian who filed the complaint and to the superintendent of public instruction. If the investigation reveals that 1 or more violations have occurred, the written report shall contain a description of each violation and of corrective action the district or intermediate district will take to correct the situation to ensure that there is no further violation. The district or intermediate district shall take the corrective action described in the written report within 30 days after the date of the written report.

This compilation of laws has been updated to reflect Public Acts 165 and 166, effective June 24, 2004. Page 5 of 6 Questions can be directed to the Michigan Department of Education, Coordinated School Health and Safety Programs Unit, at 517-241-4284 or visit www.michigan.gov/mde.

(3) If a parent who has filed a complaint with a district under subsection (2) believes that the district is still not in compliance with law based on the findings made by the superintendent or chief administrator of the district, the parent may appeal the findings to the intermediate district in which the district is located. If there is an appeal to an intermediate district under this subsection, the intermediate superintendent of the intermediate district shall investigate the complaint and, within 30 days after the date of the appeal, provide a written report of his or her

findings to the parent or legal guardian who filed the appeal and to the superintendent of public instruction. If the investigation by the intermediate superintendent reveals that 1 or more violations have occurred, the intermediate superintendent in consultation with the local district shall develop a plan for corrective action for the district to take to correct the situation to ensure that there is no further violation, and shall include this plan for corrective action with the written report provided to the parent or legal guardian and the superintendent of public instruction. The district shall take the corrective action described in the plan within 30 days after the date of the written report.

(4) If a parent who has filed a complaint with an intermediate district under subsection (2) or a parent who has filed an appeal with an intermediate district under subsection (3) believes that the district or intermediate district is still not in compliance with law based on the findings made by the intermediate superintendent of the intermediate district, the parent may appeal the findings to the department. If there is an appeal to the department under this subsection, the department shall investigate the complaint and, within 90 days after the date of the appeal, provide a written report of its findings to the parent or legal guardian who filed the appeal, to the superintendent of public instruction, and to the district and intermediate district. If the department finds 1 or more violations as a result of its investigation, then all of the following apply:

(a) The department shall develop a plan for corrective action for the district or intermediate district to take to correct the situation to ensure that there is no further violation, and shall include this plan for corrective action with the written report provided to the parent or legal guardian, the superintendent of public instruction, and the district or intermediate district. The district or intermediate district shall take the corrective action described in the plan within 30 days after the date of the written report.

(b) In addition to withholding the percentage of state school aid forfeited by the district or intermediate district under subsection (5), the department may assess a fee to the district or intermediate district that committed the violation in an amount not to exceed the actual cost to the department of conducting the investigation and making the reports required under this subsection.

(5) If an investigation conducted by the department under subsection (4) reveals that a district or intermediate district has committed 1 or more violations of this section or section 1169, 1506, or 1507 of the revised school code, MCL 380.1169, 380.1506, and 380.1507, the district or intermediate district shall forfeit an amount equal to 1% of its total state school aid allocation under this act.

(6) The department, with the approval of the superintendent of public instruction, shall establish a reasonable process for a complainant to appeal to the department under subsection (4). The process shall not place an undue burden on the complainant, the district or intermediate district, or the department.

(7) The department shall track the number of complaints and appeals it receives under this section for the 2004-2005 school year and, not later than the end of that school year, shall submit a report to the standing committees and appropriations subcommittees of the legislature having jurisdiction over education legislation and state school aid that details the number and nature of those complaints and appeals and the cost to the department of handling them.

This compilation of laws has been updated to reflect Public Acts 165 and 166, effective June 24, 2004. Page 6 of 6 Questions can be directed to the Michigan Department of Education, Coordinated School Health and Safety Programs Unit, at 517-241-4284 or visit www.michigan.gov/mde.

J. HIV and Sex Education

Guidelines for Guest Speakers

1. Background Information for Speakers
 - Be familiar with state laws governing both HIV/STD education and sex education in Michigan public schools.
 - Know that most decisions about the content of programs are made at the district level. This means that teachers need to follow the district's approved program.
 - Understand that school districts need to go through a multi-step approval process when changing the content or methods of their HIV/STD and/or sex education programs.
 - Provide schools in advance with as much information as possible regarding content, methods, and educational materials that will be included in a presentation.
 - Understand that the scope of the presentation needs to stay within the outlined curriculum objectives for the grade level(s) being addressed. When in doubt, speakers should err on the side of caution.
 - Be sure a trained teacher stays in the room during a guest presentation.
2. Questions to Ask in Advance to Stay within School Policy
 - What topics are covered at each of the grade levels?
 - Are there certain topics that cannot be discussed at all?
 - Are there topics that can only be discussed in a limited fashion?
 - Are there topics that can be discussed only if students ask questions?
3. Questions to Ask in Advance to Maximize Effectiveness of the Presentation
 - How does this presentation fit into the larger HIV/STD prevention program? Where does it fall? What has already been covered? What is still going to be covered?
 - What does the school/teacher see as the major goal of this presentation?
 - Building empathy?
 - Increasing students' sense of vulnerability?
 - Conveying information? About what topics/issues?

Questions? Call Laurie Bechhofer, HIV/STD Education Consultant, Michigan Department of Education, BechhoferL@Michigan.Gov or 517-335-7252.

K. Sample Letters from LEC and BLC

[Grade 4 Lighthouse](#)

[Grade 5 Lighthouse](#)

[Grades 6-8 Lighthouse](#)

[Grades 9-12 Lighthouse](#)

[All Grades Blossomland](#)

L. HIV Pre Post Test Assessments

[Grade 4 Pre Post Answer Key](#)

[Grade 4 Pre Post Assessment](#)

[Grade 5 Pre Post Assessment](#)

[Grade 5 Pre Post Answer Key](#)

[Grades 7-8 Pre Post Answer Key](#)

M. Health and Sex Ed Assessments

[Blossomland Pre and Post Assessments](#)

[FLASH \(Family Life and Sexual Health\) Assessment](#)

[Blossomland version of FLASH -Elementary](#)

[Blossomland version of FLASH - Secondary Female](#)

[Blossomland version of FLASH -Secondary Male](#)

[Blossomland Test Sorts](#)

N. Health and Sex Ed Supervisor Form

[Health and Sex Ed Supervisor Form](#)

O. Legal Obligations

[A Summary of Legal Obligations](#)

P. Public Complaints

[Berrien RESA Board of Education Policies](#)