

1 Whereas, American teens need access to full, complete, and medically and
2 factually accurate information regarding sexuality, including contraception, STD/HIV
3 prevention, and abstinence; and

4 Whereas, although teen pregnancy rates are decreasing, there are still between
5 750,000 and 850,000 teen pregnancies in the United States each year; and

6 Whereas, there were over 18,000 teen pregnancies among 15- to 19- year-
7 olds in North Carolina in 2005; and

8 Whereas, North Carolina has the ninth highest teen pregnancy rate for 15- to
9 19- year-olds in the United States and the nation's highest birthrate among Hispanic
10 teens; and

11 Whereas, the cost of teen pregnancy in North Carolina, according to the
12 National Campaign to Prevent Teen Pregnancy, is \$312,000,000 a year; and

13 Whereas, between 75 and 90 percent of teen pregnancies among 15- to
14 19-year-olds are unintended; and

15 Whereas, studies estimate that 50 to 75 percent of the reduction in adolescent
16 pregnancy rates is attributable to improved contraceptive use; the remainder to
17 increased abstinence; and

18 Whereas, a study conducted by the North Carolina Department of Public
19 Instruction in October 2003 found that the vast majority of North Carolina parents
20 (more than 90.5%) thought sexuality education should be taught in the public schools;
21 and

22 Whereas, United States teens and young adults acquire an estimated
23 4,000,000 sexually transmitted infections each year; and

24 Whereas, by age 25, at least one of every 12 sexually active people will have
25 contracted a sexually transmitted disease; and

26 Whereas, more than two young people in the United States are infected with
27 HIV every hour of every day; and

28 Whereas, African-American and Hispanic youth have been disproportionately
29 affected by the HIV/AIDS epidemic; and

30 Whereas, although about 15 percent of the adolescent population (ages 13 to
31 19) in the United States is African-American, nearly 60 percent of AIDS cases through
32 2002 among 13- to 19-year-olds were among African-Americans; and

33 Whereas, Hispanics comprise nearly 16 percent of the adolescent population
34 (ages 13 to 19) in the United States and 22 percent of reported adolescent AIDS cases
35 through June 2002; and

36 Whereas, one in five women in North Carolina will be sexually assaulted in
37 her lifetime; Now, therefore,

38 The General Assembly of North Carolina enacts:

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

40 "(e1) School Health Education Program to Be Developed and Administered.

41 (1) A comprehensive school health education program shall be developed
42 and taught to ~~pupils~~ students of the public schools of this State from
43 kindergarten through ninth grade. This program includes
44 age-appropriate instruction in the following subject areas, regardless of

1 whether this instruction is described as, or incorporated into a
 2 description of, "family life education", "family health education",
 3 "health education", "family living", "health", "healthful living
 4 curriculum", or "self-esteem":

- 5 a. Mental and emotional health;
- 6 b. Drug and alcohol abuse prevention;
- 7 c. Nutrition;
- 8 d. Dental health;
- 9 e. Environmental health;
- 10 f. Family living;
- 11 g. Consumer health;
- 12 h. Disease control;
- 13 i. Growth and development;
- 14 j. First aid and emergency care, including the teaching of
 15 cardiopulmonary resuscitation (CPR) and the Heimlich
 16 maneuver by using hands-on training with mannequins so that
 17 students become proficient in order to pass a test approved by
 18 the American Heart Association, or American Red Cross;
- 19 k. Preventing unintended pregnancy and sexually transmitted
 20 diseases, including HIV/AIDS, and other communicable
 21 diseases;
- 22 l. ~~Abstinence until marriage education; and~~Abstinence-based
 23 comprehensive sexual health education;
- 24 m. ~~Bicycle safety;~~safety; and
- 25 n. Awareness of sexual abuse and assault and risk reduction.

26 (1a) As used in this subsection, "HIV/AIDS" means Human
 27 Immunodeficiency Virus/Acquired Immune Deficiency Syndrome.

28 (2) The State Board of Education shall supervise the development and
 29 operation of a statewide comprehensive school health education
 30 program including curriculum development, in-service training
 31 provision and promotion of collegiate training, learning material
 32 review, and assessment and evaluation of local programs in the same
 33 manner as for other programs. The State Board of Education shall
 34 adopt objectives for the instruction of the subject areas listed in
 35 subdivision (1) of this subsection that are appropriate for each grade
 36 level. In addition, the State Board shall approve textbooks and other
 37 materials incorporating these objectives that local school
 38 administrative units may purchase with State funds. The State Board of
 39 Education, through the Department of Public Instruction, shall, on a
 40 regular basis, review materials related to these objectives, and
 41 distribute these reviews to local school administrative units for their
 42 information.

43 (2a) Local school administrative units shall provide comprehensive sexual
 44 health education, consisting of age-appropriate instruction, in grades

1 seven to 12 inclusive, using instructors trained in the appropriate
2 courses. Students shall receive instruction in grades seven and eight
3 and in one additional year.

4 (2b) The unit's comprehensive sexual health education shall satisfy all of
5 the following criteria:

6 a. Instruction and materials shall be age appropriate.

7 b. All information presented shall be factually and medically
8 accurate and objective.

9 c. Instruction and materials shall be appropriate for use with
10 students of all races, genders, sexual orientations, ethnic and
11 cultural backgrounds, and with students with disabilities.

12 d. Instruction and materials shall encourage a pupil to
13 communicate with his or her parents or guardians about human
14 sexuality.

15 e. Instruction and materials shall teach respect for marriage and
16 committed relationships.

17 f. Commencing in grade seven, instruction and materials shall
18 teach that abstinence from sexual intercourse is the only certain
19 way to prevent unintended pregnancy, teach that abstinence
20 from sexual activity is the only certain way to prevent the
21 sexual transmission of diseases, and provide information about
22 the value of abstinence.

23 g. Commencing in grade seven, instruction and materials shall
24 provide information about sexually transmitted diseases. This
25 instruction shall include how sexually transmitted diseases are
26 and are not transmitted, the effectiveness and safety of all
27 federal Food and Drug Administration (FDA) approved
28 methods of reducing the risk of contracting sexually transmitted
29 diseases, and information on local resources for testing and
30 medical care for sexually transmitted diseases.

31 h. Commencing in grade seven, instruction and materials shall
32 provide information about the effectiveness and safety of all
33 FDA-approved contraceptive methods in preventing pregnancy,
34 including, but not limited to, emergency contraception.

35 i. Commencing in grade seven, instruction and materials shall
36 provide students with skills for making and implementing
37 responsible decisions about sexuality.

38 j. Commencing in grade seven, instruction and materials shall
39 provide students with information on the law on surrendering
40 physical custody of a minor child 72 hours or younger, pursuant
41 to G.S. 15A-540.

42 (2c) A school unit that elects to offer comprehensive sexual health
43 education pursuant to subdivision (2a) of this subsection earlier than
44 grade seven may provide age appropriate and medically accurate

1 information on any of the general topics contained in sub-subdivisions
2 f. through j. of subdivision (2b) of this subsection.

3 (2d) The school unit shall offer comprehensive sexual health education
4 pursuant to subdivision (2a) of this subsection and shall comply with
5 the following:

6 a. Instruction and materials shall not reflect or promote bias
7 against any person on the basis of sex, ethnic group
8 identification, race, national origin, religion, color, sexual
9 orientation, gender identity, or mental or physical disability.

10 b. A school unit shall ensure that all students in grades seven to
11 12, inclusive, receive HIV/AIDS prevention education from an
12 instructor trained in the appropriate courses. Each student shall
13 receive this instruction at least once in junior high or middle
14 school and at least once in high school.

15 c. HIV/AIDS prevention education shall satisfy all of the criteria
16 set forth in sub-subdivisions a. through e. of subdivision (2b) of
17 this subsection and sub-subdivisions a. and b. of subdivision
18 (2d) of this subsection, shall accurately reflect the latest
19 information and recommendations from the United States
20 Surgeon General, the federal Centers for Disease Control and
21 Prevention, and the National Academy of Sciences, and shall
22 include the following:

23 1. Information on the nature of HIV/AIDS and its effects
24 on the human body.

25 2. Information on the manner in which HIV is and is not
26 transmitted, including information on activities that
27 present the highest risk of HIV infection.

28 3. Discussion of methods to reduce the risk of HIV
29 infection. This instruction shall emphasize that sexual
30 abstinence, monogamy, the avoidance of multiple sexual
31 partners, and abstinence from intravenous drug use are
32 the most effective means for HIV/AIDS prevention, but
33 shall also include statistics based upon the latest medical
34 information citing the success and failure rates of
35 condoms and other contraceptives in preventing sexually
36 transmitted HIV infection.

37 4. Discussion of the public health issues associated with
38 HIV/AIDS.

39 5. Information on local resources for HIV testing and
40 medical care.

41 6. Development of refusal skills to assist students in
42 overcoming peer pressure and using effective
43 decision-making skills to avoid high-risk activities.

7. Discussion about societal views, including stereotypes and common misconceptions regarding persons with HIV/AIDS.

- (3) ~~The State Board of Education shall develop objectives for instruction in the prevention of sexually transmitted diseases, including HIV/AIDS, that include emphasis on the importance of parental involvement, abstinence from sex until marriage, and avoiding intravenous drug use. Any program developed under this subdivision shall present techniques and strategies to deal with peer pressure and to offer positive reinforcement and shall teach reasons, skills, and strategies for remaining or becoming abstinent from sexual activity; for appropriate grade levels and classes, shall teach that abstinence from sexual activity until marriage is the only certain means of avoiding out of wedlock pregnancy, sexually transmitted diseases when transmitted through sexual contact, and other associated health and emotional problems, and that a mutually faithful monogamous heterosexual relationship in the context of marriage is the best lifelong means of avoiding diseases transmitted by sexual contact, including HIV/AIDS, shall teach how alcohol and drug use lower inhibitions, which may lead to risky sexual behavior, and shall teach the positive benefits of abstinence until marriage and the risks of premarital sexual activity.~~
- (4) ~~The State Board of Education shall evaluate abstinence until marriage curricula and their learning materials and shall develop and maintain a recommended list of one or more approved abstinence until marriage curricula. The State Board may develop an abstinence until marriage program to include on the recommended list. The State Board of Education shall not select or develop a program for inclusion on the recommended list that does not include the positive benefits of abstinence until marriage and the risks of premarital sexual activity as the primary focus. The State Board shall include on the recommended list only programs that include, in appropriate grades and classes, instruction that:~~
- ~~a. Teaches that abstinence from sexual activity outside of marriage is the expected standard for all school age children;~~
 - ~~b. Presents techniques and strategies to deal with peer pressure and offering positive reinforcement;~~
 - ~~c. Presents reasons, skills, and strategies for remaining or becoming abstinent from sexual activity;~~
 - ~~d. Teaches that abstinence from sexual activity is the only certain means of avoiding out of wedlock pregnancy, sexually transmitted diseases when transmitted through sexual contact, including HIV/AIDS, and other associated health and emotional problems;~~

- 1 e. ~~Teaches that a mutually faithful monogamous heterosexual~~
2 ~~relationship in the context of marriage is the best lifelong means~~
3 ~~of avoiding sexually transmitted diseases, including HIV/AIDS;~~
4 f. ~~Teaches the positive benefits of abstinence until marriage and~~
5 ~~the risks of premarital sexual activity;~~
6 g. ~~Provides opportunities that allow for interaction between the~~
7 ~~parent or legal guardian and the student; and~~
8 h. ~~Provides factually accurate biological or pathological~~
9 ~~information that is related to the human reproductive system.~~
- 10 (5) The State Board of Education shall make available to all local school
11 administrative units for review by the parents and legal guardians of
12 students enrolled at that unit any State-developed objectives for
13 instruction, any approved textbooks, the list of reviewed materials, and
14 any other State-developed or approved materials that pertain to or are
15 intended to impart information or promote discussion or understanding
16 in regard to the prevention of sexually transmitted diseases, including
17 HIV/AIDS, to the avoidance of out-of-wedlock pregnancy, or to the
18 abstinence until marriage curriculum. The review period shall extend
19 for at least 60 days before use.
- 20 (6) Each local school administrative unit shall provide a comprehensive
21 school health education program that meets all the requirements of this
22 subsection and all the objectives established by the State Board. Each
23 local board of education may expand on the subject areas to be
24 included in the program and on the instructional objectives to be met.
25 ~~This expanded program may include a comprehensive sex education~~
26 ~~program for that local school administrative unit only if all of the~~
27 ~~following requirements are satisfied:~~
- 28 a. ~~Before a comprehensive sex education program is adopted, the~~
29 ~~local board of education shall conduct a public hearing, after~~
30 ~~adequately notifying the public of the hearing.~~
- 31 b. ~~For at least 30 days before this public hearing and during this~~
32 ~~public hearing, the objectives for this proposed program and all~~
33 ~~instructional materials shall be made available for review.~~
- 34 e. ~~For at least 30 days after the public hearing, the objectives for~~
35 ~~the program and all instructional materials shall remain~~
36 ~~available for review by parents and legal guardians of students~~
37 ~~in that local school administrative unit.~~
- 38 (7) Each school year, before students may participate in any portion of (i)
39 a program that pertains to or is intended to impart information or
40 promote discussion or understanding in regard to the prevention of
41 sexually transmitted diseases, including HIV/AIDS, or to the
42 avoidance of out-of-wedlock pregnancy, (ii) an abstinence until
43 marriage program, abstinence-based comprehensive sexual health
44 education, or (iii) a comprehensive sex education program, whether

1 developed by the State or by the local board of education, the parents
2 and legal guardians of those students shall be given an opportunity to
3 review the objectives and materials. Local boards of education shall
4 adopt policies to provide opportunities either ~~for parents and legal~~
5 ~~guardians to consent or~~ for parents and legal guardians to withhold
6 their consent to the students' participation in any or all of these
7 programs.

8 (8) Students may receive information about where to obtain contraceptives
9 and abortion referral services only in accordance with a local board's
10 policy regarding parental consent. Any instruction concerning the use
11 of contraceptives or prophylactics shall provide accurate statistical
12 information on their effectiveness and failure rates for preventing
13 pregnancy and sexually transmitted diseases, including HIV/AIDS, ~~in~~
14 ~~actual use among adolescent populations~~ and shall explain clearly the
15 difference between risk reduction and risk elimination through
16 abstinence. The Department of Health and Human Services shall
17 provide the most current available information at the beginning of each
18 school year.

19 (9) Contraceptives, including condoms and other devices, shall not be
20 made available or distributed on school property.

21 (10) School health coordinators may be employed to assist in the
22 instruction of any portion of the comprehensive school health
23 education program. Where feasible, a school health coordinator should
24 serve more than one local school administrative unit. Each person
25 initially employed as a State-funded school health coordinator after
26 June 30, 1987, shall have a degree in health education.

27 (11) The State Board of Education shall develop objectives for instruction
28 in the awareness of sexual assault and abuse. As used in this
29 subdivision, "sexual assault" means any unwanted sexual contact. The
30 curriculum, textbooks, and materials for the program shall:

31 a. Inform students about relevant school policies, complaint
32 procedures, and existing laws;

33 b. Examine the concept of consent, including the forms coercion
34 can take, sexual harassment, and typical strategies people might
35 use to pressure someone into unwanted touching and sexual
36 activity;

37 c. Examine common misconceptions and stereotypes about sexual
38 assault and promote victim empathy;

39 d. Explore the contribution that alcohol and drugs may play in
40 sexual assault;

41 e. Focus on healthy relationships as well as understanding what
42 sexual assault, sexual harassment, and unwanted touching are
43 and their causes; and

- 1 f. Provide information on national and local resources to help
2 those victimized by sexual assault.
3 (12) Enforcement. – If the school unit knows or should have known that
4 school personnel or outside consultants are not in compliance with this
5 subsection, the board shall:
6 a. Terminate the contract of the outside consultant;
7 b. Prohibit noncompliant school personnel from program
8 instruction; or
9 c. Take other appropriate action necessary to ensure compliance
10 with this subsection."

11 **SECTION 2.** This act becomes effective July 1, 2007, and applies beginning
12 with the 2007-2008 school year.