

COMPREHENSIVE HEALTH EDUCATION FREQUENTLY ASKED QUESTIONS **(Includes update on sexual health education mandate for middle and high schools)**

What is comprehensive health education?

Health education is an important part of an overall school health program. In New York City, we require a sequence of health instruction from kindergarten through 12th grade. At a very young age children develop habits that will shape their health all their lives, so health education must include a wide range of topics with lessons that provide age-appropriate information.

New York City public schools are encouraged to use a health education curriculum geared to the needs of students at each grade level. The DOE provides ongoing professional development to ensure that teachers are aware of the most current medical and education research, the recommended curriculum and effective teaching strategies. In addition to factual knowledge, health instruction also includes teaching students how to make healthy life choices through personal decision-making.

To be healthy, safe, and fit, students receive lessons in:

- Self-Management
- Relationship Management
- Stress Management
- Communication
- Decision Making
- Planning and Goal Setting
- Advocacy

How does DOE determine what health instruction is appropriate for students?

The New York State Education Department sets the standards for teaching in all subjects. Their publication [*A Guidance Document for Teaching the New York State Standards in Health Education*](#), outlines the knowledge and skills that students are expected to demonstrate at the elementary, intermediate, and commencement (high school) levels.

Health education at all three levels includes age and developmentally appropriate education in the six Centers for Disease Control (CDC)-identified critical health behaviors:

- Alcohol and Drug Use
- Nutrition
- Physical Activity
- Sexual Risk Behaviors
- Tobacco Use
- Injury and Violence

What are the New York State Learning Standards?

The New York State Standards for Health, Physical Education and Family and Consumer Sciences include:

Standard 1: Personal Health and Fitness: *Students will have the necessary knowledge and skills to establish and maintain physical fitness, participate in physical activity, and maintain personal health.*

Standard 2: Safe and Healthy Environment: *Students will acquire the knowledge and ability necessary to create and maintain a safe and healthy environment.*

Standard 3: Resource Management: *Students will understand and be able to manage their personal and community resources.*

Details on each of these health standards for elementary, middle, and high schools are at <http://www.emsc.nysed.gov/ciai/pe/pub/hpefcle.pdf>.

What are the state requirements for instructional time?

- In **elementary school**, health education is usually taught by the regular classroom teacher. Lessons are taught throughout the year as part of overall instruction.
- **Middle school** students receive one (1) half-year course of health education. The DOE recommends that it be taught in 6th or 7th grade.
- For **high school** students, a half-unit (one semester) course of health education is required for high school graduation standards. The DOE recommends that it be taught in 9th or 10th grade.

What curriculum does the DOE recommend for elementary schools?

Elementary schools are encouraged to use *HealthTeacher.com*. First introduced throughout the city in the 2005-06 school year, this program meets both NYS and National Health Education Standards, and is consistent with the U.S. Centers for Disease Control and Prevention's Core Health Topics. The DOE has purchased access to the *HealthTeacher.com* website for all elementary schools. You can get an overview of this curriculum at <http://www.healthteacher.com>.

What comprehensive health education curriculum does the DOE recommend for middle and high schools, including sex education?

Since the 2007-08 school year, following a thorough review of 30 respected health education curricula by a group of educators, health experts, community members, parents and other stakeholders, the DOE has recommended Middle School HealthSmart for middle school and High School HealthSmart plus Reducing the Risk for high school. These curricula are aligned with NYS standards and include age-appropriate sexual health education lessons so schools can fulfill the NYC sex education mandate.

For more information about the DOE's recommended curricula, please click [here](#).

Both the *HealthSmart* and *Reducing the Risk* curricula emphasize that abstinence is the best and most effective way to avoid unintended pregnancy, STD and HIV. *Reducing the Risk* is a sex risk reduction curriculum that is research based and shown to be highly effective. Research indicates that *Reducing the Risk* 1) delayed the initiation of sexual intercourse, 2) increased the use of contraception among teens who did initiate sexual intercourse, and 3) increased parent-child communication about abstinence and contraception.

What is the new sexual health education mandate?

In August, 2011, Chancellor Walcott announced that beginning in the second semester of the 2011-2012 school year, middle and high schools will be required to include sexual health education as part of the comprehensive health education course already required by New York State Education

Department (NYSED). This is not a separate course, but involves the inclusion of sexual health education topics as part of the state-required comprehensive health education class.

Why is sexual health education an important component of health education?

In August, 2011, Chancellor Walcott announced that beginning in the second semester of the 2011-2012 school year, middle and high schools will be required to include sexual health education as part of the comprehensive health education course already required by New York State Education Department (NYSED). This is not a separate course, but involves the inclusion of sexual health education topics as part of the state-required comprehensive health education class.

In addition to factual knowledge, health instruction also includes teaching students how to make healthy life choices through values exploration, goal setting, and communication with family. Lessons in self-management, relationship management, stress management, communication, decision making, and advocacy skills address critical components of health and sex education.

Why is a sex education mandate necessary?

The DOE has always strongly encouraged schools to incorporate age-appropriate sexual health education into comprehensive health education courses. While some schools already include sex education in health education, some do not. The sex education mandate will help ensure that schools are including this important component in the already required middle and high school health education courses and that we are providing our students with accurate information and communication skills to help them make decisions that can keep them healthy and safe.

Who teaches health classes?

In elementary schools, health education is generally taught by the classroom teacher as part of the full range of academic subjects. In middle and high schools, there is a health education teacher's license. Principals have the option to hire teachers with the health education license or assign classes to teachers otherwise qualified to teach these classes.

Will all students still be receiving the HIV/AIDS lessons?

Yes. New York State mandates HIV/AIDS lessons in grades K—12. These age and developmentally appropriate lessons use a curriculum developed by the DOE. The lessons focus on the nature of HIV/AIDS, methods of transmission and methods of prevention. You can review the HIV/AIDS curriculum and related materials at

<http://schools.nyc.gov/Academics/FitnessandHealth/StandardsCurriculum/HIVAIDSoverview.htm>

How does the DOE support and train teachers in health education?

The Office of School Wellness Programs (OSWP) provides free trainings on the recommended curricula and provides free curriculum/materials to teachers and administrators who attend. Educators can register for trainings on ProTraxx. OSWP staff also provide direct technical assistance to schools to address areas of particular interest or concern.

What role do parents and guardians play in understanding and supporting health instruction?

As in all areas, parents/guardians are children's first and most influential teachers. Parents/guardians and schools share a common goal: we want students of all ages to be healthy in all aspects of their lives. When it comes to talking with students about sex, our shared goal is to delay sexual activity in school-age youth. We also want students to know what it means to be in a healthy relationship, how to recognize unhealthy relationships, and how to stay safe if they do become sexually active. Comprehensive health education can teach skills and provide the latest medically correct

information. Parents/guardians should talk to their children about what they are learning in health class; make sure your child knows what you believe are the best ways to lead a healthy life. These conversations will place the information student are receiving in health class in the context of family values. We encourage parents/guardians to discuss any questions they have about health education with their child's principal and teachers.

Do parents and guardians have the opportunity to have their children opt-out of any specific classes?

Yes. Parents/guardians have the right to keep their child out of lessons having to do with HIV/STD prevention and birth control, not including abstinence. They cannot opt their child out of lessons pertaining to abstinence as a means of preventing sexually transmitted diseases and pregnancy or any other lessons. Parents or guardians who wish to make such a request must write a letter to the principal stating that the child should not be in the classroom during lessons about birth control and methods of prevention; and that they will provide instructions on prevention to the child in their home.

Does the middle and high school sex education mandate affect the DOE's condom demonstration policy?

No. The DOE's condom demonstration policy has not changed. Condom demonstrations are not permitted in the classroom. As part of the mandated New York City DOE HIV/AIDS Prevention Program, NYC Public High Schools are required to have a Health Resource Room (HRR) where free condoms, health information, and health referrals are available to students. Condom demonstrations can only take place in the high school Health Resource Rooms.

Does the sexual health education mandate affect the DOE's high school Condom Availability Program (CAP) policy?

No. High school students can ask Health Resource Room personnel for free condoms and for demonstrations on how to use condoms correctly (<http://schools.nyc.gov/Offices/Health/OtherHealthForms/HealthResource.htm>). Parents/guardians who do not want their children to receive condoms in high school should complete the Condom Availability Program opt-out letter.

What can parents/guardians do if their child is not receiving comprehensive health education?

Elementary School: If your child is not receiving health education, speak with the teacher about his/her plans to teach health education. If the teacher does not teach health education, bring your concerns to your child's principal, a parent coordinator, or a PTA meeting.