

December 16, 2020

**RESCIND BOARD REPORT 13-0227-PO1 SEXUAL HEALTH EDUCATION POLICY
AND ADOPT A NEW SEXUAL HEALTH EDUCATION POLICY**

THE CHIEF EXECUTIVE OFFICER RECOMMENDS:

The Chicago Board of Education ("Board") rescind Board Report 13-0227-PO1 and adopt a New Sexual Health Education Policy. The policy was posted for public comment from October 9, 2020 to November 9, 2020.

PURPOSE: The purpose of this policy is to create a comprehensive approach to sexual health education that is applied consistently throughout the District. This Policy reflects the Board's commitment to ensure that the District's comprehensive family life and sexual health education programming:

- is aligned with the National Sexuality Education Standards: Core Content and Skill; second edition;
- is medically accurate;
- is culturally, developmentally, linguistically, and age appropriate;
- provides strategies to support all students that are inclusive of gender identity, gender expression, sexual orientation, sexual behavior, race, and disability;
- is guided by anti-racist pedagogy;
- provides a focus on health promotion and risk reduction within the context of the world in which students live;
- is consistent with State laws enacted to address the need for students to receive comprehensive health education.

EQUITY STATEMENT: This policy seeks to mitigate the effects of numerous inequities experienced by CPS students, such as access to sexual health education and services. However, the Board recognizes that this policy does not address the root cause of said inequities which may disproportionately impact our greatest needs groups. The Office of Student Health and Wellness ("OSHW") is engaging in ongoing work to operationalize the CPS Equity Framework through this policy within the locus of our control.

POLICY TEXT:

I. Sexual Health Education

A. Program Components: The comprehensive sexual health education instructional program in grades Pre-Kindergarten through 12th grade is a skill-based curriculum that provides a foundation of knowledge and skills related to Consent and Healthy Relationships, Anatomy and Physiology, Puberty and Adolescent Sexual Development, Gender Identity and Expression, Sexual Orientation and Identity, Sexual Health, and Interpersonal Violence. At each grade level, the instructional program teaches medically-accurate information that is culturally, developmentally, linguistically, and age appropriate and builds on the knowledge and skills that were taught in the previous grades.

In Pre-K, instruction highlights the components of Erin's law, which includes age-appropriate techniques to recognize child sexual abuse and how to tell a trusted adult.

In grades K-2 the foundational comprehensive sexual health education instruction consists of lessons on the following four topic areas specified in the *National Sexuality Education Standards, second edition: consent and healthy relationships, anatomy and physiology, gender identity and expression, sexual health, and interpersonal violence*. This foundational instruction is often referred to as Family Life Education and is aligned with social and emotional learning standards for this age range.

In grades 3-12, comprehensive instruction expands on the foundational lessons in grades K-2 by providing lessons on the following five topic areas specified in the *National Sexuality Education Standards, second edition: Consent and Healthy Relationships, Anatomy and Physiology, Puberty and Adolescent Sexual Development, Gender Identity and Expression, Sexual Orientation and Identity, Sexual Health, and Interpersonal Violence*. The comprehensive curriculum emphasizes abstinence as a component of healthy sexual decision-making and the only protection that is 100% effective against unintended pregnancy, sexually transmitted infections and HIV when transmitted sexually;

- B. Annual Instruction:** Schools must annually provide developmentally-appropriate and medically-accurate sexual health education at each grade level as part of its instructional program. Lessons should be integrated into common core subjects in accordance with best practice. Schools must select and use the CPS Sexual Health Education curriculum or other approved materials/consultants. All lessons outlined in CPS curriculum must be provided to students in grades Pre-K-12 every school year addressing all topic areas outlined in Section A of this Policy. Students must be taught in the standard classroom environment and must not be separated by gender or ability.
- C. Diverse Learners:** Students who are designated as Diverse Learners must be provided medically accurate, developmentally-appropriate sexual health education. Instruction shall be individualized as it relates to each student's disability and their IEP specifically in the areas of method of Communication, Modifications and Accommodations.
- D. Parent/Guardian**
 - 1. Parent/Guardian Support:** Parents/guardians are the primary sexual health educators for their child(ren). Parents/guardians must receive three (3) notifications, at least one (1) in writing, prior to lesson implementation and are offered information on the comprehensive sexual health education district-approved lessons and resources including but not limited to scope and sequence.
 - 2. Opt-Out:** No student whose parent/guardian provides a written objection must be required to participate in any sexual health education lesson and must not be suspended or expelled for refusal to participate in any such lesson or program. Any student whose parent/guardian does not provide a written objection to participation in a sexual health education lesson or program must be required to participate.
- E. Mandatory Training for Instructors:** Any teacher who provides sexual health education instruction and any other staff member who supports a teacher in providing such instruction must successfully complete the District's Comprehensive Sexual Health Education Instructor training and pass the post exam prior to teaching lessons. Individuals who successfully complete this instructor training must receive a certificate valid for a four-year period. To ensure all students at every grade level receive comprehensive sexual health

instruction, each principal must annually designate a minimum of two instructors to deliver instruction at their school and ensure these instructors successfully complete the required training. Schools with diverse learning populations shall have a minimum of one Special Education instructor trained to deliver annual sexual education.

- F. Use of Outside Materials and/or Consultants :** A school may use an approved outside curriculum or consultant to provide sexual health education programming for lessons reflected in the CPS curriculum. Consultants must be approved through the OSHW. If an outside consultant is unable to provide a course or program that includes all comprehensive components as described in Section A herein, the school must ensure that students receive supplemental instruction to satisfy the comprehensive requirements of this Policy. All outside curriculum must be approved by the OSHW Materials Review Committee before implementing.

II. Safe and Supportive Environments: In order to ensure schools are providing safe and supportive environments for all students, the following policies and guidelines must be followed:

- A. Anti-Bullying:** As stated in CPS' Anti-Bullying Policy, Section 705A, Board Report 20-0722-PO2 schools must foster a respectful and open learning environment and take steps to support appropriate classroom behaviors and pre-empt behaviors that may disrupt sexual health education lessons. Schools must promote and affirm the diversity within the student population by ensuring an inclusive learning environment that supports students' individual identities.
- B. Non-Discrimination, Harassment, Sexual Harassment, Sexual Misconduct And Retaliation:** As stated in CPS' Comprehensive Non-Discrimination, Harassment, Sexual Harassment, Sexual Misconduct And Retaliation Policy Section 102.8A, Board Report 20-0722-PO1: schools must provide a safe and secure working and learning environment free from Discrimination, Harassment, Sexual Harassment, Sexual Misconduct and/or Retaliation in any program or activity it conducts. Instructors must be mindful that racial discrimination and microaggressions are prohibited as outlined in this policy. Sexual harassment or misconduct will not be condoned and must be reported and handled immediately by appropriate parties, such as the Office of Student Protections, Title IX, Equal Opportunity and Compliance.
- C. Support for Lesbian Gay Bisexual Transgender and Questioning Plus (LGBTQ+) students:** All staff must complete annual Safe and Supportive Environments for LGBTQ+ Students training provided by the Office of Student Health and Wellness. All staff must adhere to the protections stipulated in the CPS *Guidelines Regarding the Support of Transgender and Gender Nonconforming Students*.

III. Sexual Health Services:

- A. Referrals:** Schools must designate a staff member to provide sexual health service resources to students in alignment with local, state, and federal standards. Under Illinois Consent by Minors to Health Care Services Act these resources include, but are not limited to, youth rights to access confidential health services such as obtaining contraceptives, abortion, prenatal care, adoption, transgender health services, trauma-informed mental

healthcare, information on HIV and STI screening and treatment. Schools shall provide information on how and where to access these confidential reproductive and sexual health services.

B. Condom Availability Program: Schools that teach grade 5th and up must maintain a condom availability program. CPS provides guidance regarding the notification to parents and access to condoms by approved school representatives. Condoms are provided at no cost by the Chicago Department of Public Health in an ongoing effort to mitigate the spread of sexually transmitted diseases, including HIV infection, and unintended pregnancy among CPS students.

C. Menstrual Hygiene Management: All schools shall make menstrual hygiene products available, at no cost to students, in at least one bathroom in the school building.

IV. Support and Oversight: The Office of Student Health and Wellness must oversee Policy implementation and compliance and must:

A. Provide schools with technical assistance and support to ensure comprehensive sexual health education programming is provided to students in accordance with this Policy;

B. Offer school support services through various departments including the Office of Student Health and Wellness and the Office of Teaching and Learning to ensure full implementation of this Policy;

C. Oversee sexual health education curriculum development and materials review for alignment with research-based characteristics of effective sexual health education, the *National Sexuality Education Standards, Second Edition* and the purpose and objectives of this Policy;

D. Ensure schools provide comprehensive sexual health education lessons at every grade level in accordance with this Policy by requiring schools to report compliance on annual Healthy CPS Survey;


E. Establish a process for identifying and distributing resources made available by qualified agencies and community organizations for the purpose of collaborating with schools to enhance implementation of this policy, including but not limited to a Materials Review Committee comprised of content experts from OSHW and other relevant stakeholders, to vet curricula and programs related to Sexual Health Education;

F. Establish a process for assessing the equity impact of this policy, including how the policy is implemented in relation to who is most impacted by inequity to determine targeted universalist supports for schools.

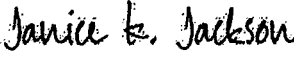
V. Guidelines: The Chief Health Officer or designee in collaboration with the Chief Teaching and Learning Officer, Chief Office of Diverse Learners Supports and Services Officer or designee must develop and implement guidelines, procedures and toolkits for the effective implementation of this Policy.

LEGAL REFERENCES: 105 ILCS 110/3; 105 ILCS 5/27-9.1; 105 ILCS 5/27-9.2; 105 ILCS 5/10-20.60; 105 ILCS 5/10-23.13; 410 ILCS 210/4; 23 IL Administrative Code 1.420(n).


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