

May 24, 2023

**RESCIND BOARD REPORT 20-1216-PO1 AND  
ADOPT NEW SEXUAL HEALTH EDUCATION POLICY****THE CHIEF EXECUTIVE OFFICER RECOMMENDS:**

The Chicago Board of Education (“Board”) rescind Board Report 20-1216-PO1 and adopt a new Policy on Sexual Health Education. The policy was posted for public comment from March 17, 2023 to April 17, 2023.

**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 Personal Health & Safety and Sexual Health Education programming:

- is aligned with the National Sex Education Standards: Core Content and Skill; second edition;
- is medically accurate;
- is culturally, developmentally, linguistically, and age-appropriate;
- is trauma-informed and guided by anti-racist pedagogy;
- is inclusive of and sensitive to the needs of students based on their status as pregnant or parenting, living with STIs (including HIV), sexually active, asexual, or intersex or based on their gender, gender identity, gender expression, sexual orientation, sexual behavior, race, or disability;
- 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:** The Board is committed to supporting the Whole Child through policies and programs that holistically address the physical, mental, and social-emotional health and wellbeing of every student. This policy seeks to advance health equity for CPS students, by ensuring access to sexual health education and services. The Office of Student Health and Wellness (“OSHW”) is engaging in ongoing work to align to the Whole School, Whole Community, Whole Child (WSCC) model and operationalize the CPS Equity Framework through this policy within the locus of its control.

**POLICY TEXT:****I. Personal Health & Safety and Sexual Health Education**

**A. Program Components:** The Personal Health & Safety Education instructional program in grades Pre-Kindergarten through 5th grade, and the Comprehensive Sexual Health Education instructional program in 6th through 12<sup>th</sup> grade is a skills-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 trauma-informed, culturally, developmentally,

linguistically, and age-appropriate and builds on the knowledge and skills that were taught in the previous grades.

In grades Pre-K through 5th grade, students will receive Personal Health and Safety Education. 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-3, the comprehensive Personal Health & Safety Education instruction consists of lessons on the following five topic areas specified in the [\*National Sex Education Standards, second edition\*](#): *Consent and Healthy Relationships, Anatomy and Physiology, Gender Identity and Expression, Sexual Health, and Interpersonal Violence*. This foundational instruction is aligned with Illinois Social and Emotional Learning standards for this age range.

In grades 4-12, comprehensive instruction expands on the foundational lessons in grades K-3 by providing lessons on the following seven topics areas specified in the [\*National Sex 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 one 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 practices. Schools must use the CPS Sexual Health Education curriculum. Schools may also use other OSHW-approved materials and/or outside consultants as outlined in section IV.E. of this policy. 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.

1. **Personal Health & Safety and Sexual Health Education Instruction Must:** be medically accurate and developmentally appropriate. Sexual health education must be taught in the standard classroom environment with all students together, not separated by sex, gender, or ability. Instruction must be inclusive of varied student experiences (e.g. LGBTQ+ identities, racial and cultural differences, etc.) and must be taught in a way that demonstrates respect for and inclusion of all students, as outlined in the Purpose section of this policy.
2. **Personal Health & Safety and Sexual Health Education Must Not:** impose educators' personal opinions on students, assume that all students have the same beliefs, lived experiences, and

values related to sexual behavior, or stigmatize behaviors or health outcomes. Sexual health education must not include instructional strategies that involve fear tactics – or strategies that scare students into avoiding particular behaviors. Sexual risk avoidance (or abstinence-only) education curricular materials must not be used to teach sexual health education in CPS.

**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:** In alignment with Illinois law, parents/guardians must be notified and given the opportunity to opt-out their child(ren) from any class or course in Comprehensive Personal Health & Safety and Comprehensive Sexual Health Education before instruction begins. Schools must not require active parental consent.

1. **Parent/Guardian Notification Support:** Parents/guardians must receive three (3) notifications, at least one (1) in writing, prior to lesson implementation and be offered information on the Comprehensive Personal Health & Safety and Sexual Health Education lessons. The first parent/guardian notification letter must be sent out at least two (2) weeks prior to the start of sexual health education instruction. Parents/guardians are only required to provide a written statement if they do not want their child(ren) to participate in sexual health education lessons.
2. **Opt-Out:** No student whose parent/guardian provides a written objection must be required to participate in any of the CPS Sexual Health Education Curriculum lessons and must not be suspended or expelled for refusal to participate in any such lesson or program. Parents/guardians may choose to opt-out their child(ren) from the entire unit or one or more lessons within the unit. 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.

Illinois law only requires that parents/guardians be notified and given the option to opt-out of the Comprehensive Personal Health & Safety and Sexual Health Education Curriculum. Conversations and lessons related to health, safety, and identity topics that occur outside of the curriculum are not subject to parental notification and opt-out requirements. When possible, schools should inform parents/guardians of lessons and discussions related to these topics in the same way they would communicate about other classroom content.

**E. Mandatory Training for Instructors:** Any teacher who provides Personal Health & Safety or Sexual Health Education instruction and any other staff member who supports a teacher in providing such instruction must successfully complete the sexual health education instructor training with the Office of Student Health and Wellness and pass the post-exam prior to teaching lessons. Individuals who successfully complete this instructor training earn a

certification 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 learner populations must also have a minimum of one Special Education Teacher trained to deliver annual sexual health education.

**F. Use of Outside Community-Based Organizations or Consultants:** A school may use a CPS-approved community-based organization to provide instruction. An outside consultant/organization may teach lessons on some or all of the topics outlined in the CPS Scope & Sequence of Sexual Health Education. It is the responsibility of the school to ensure students receive annual instruction in all topics and lessons outlined in the scope and sequence to satisfy the comprehensive requirements of this policy. **All outside organizations must have an active CPS vendor number and their programs and curricula must be approved by the OSHW Materials Review Committee before implementation.**

## II. Sexual Health Services:

- A. Referrals:** Schools must designate a staff member, via a survey provided by OSHW, 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 must provide information on how and where to access these confidential reproductive and sexual health services.
- B. Condom Availability Program:** Schools that teach grades 5 and up must maintain a condom availability program. [The Condom Availability Toolkit](#) provides resources regarding communication with 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 infections, including HIV infection, and unintended pregnancy among CPS students.

**Condoms Access Requirements:** Condoms must be in at least one location that is accessible to students in grades 5-12. This location cannot be in an area that is locked, where frequent closed-door meetings are held, or in an area of the school students must ask permission or sign in or out to enter. Condoms may also be made available in additional locations.

- C. Menstrual Hygiene Management:** All schools that serve grades 3-12 must make menstrual hygiene products available, at no cost to students, in bathrooms of every school building.

- III. 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. Collaborate with departments including the Office of Teaching and Learning, the Office of Student Protections and Title IX, and Office of Early Childhood Education 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 Sex 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. Maintain processes, including a Materials Review Committee comprised of content experts from OSHW and other relevant stakeholders, to identify, approve, and share supplemental sexual health education resources with schools.
  - 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.
- IV. 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.

**Amends/Rescinds:** Rescinds 20-1216-PO1

**Cross References:** 08-0827-PO4; 06-0426-PO4; 96-0124-ED14; 86-0430-ED2; 79-195-7; 75-13-7; 67-810-3; 67-810-4

**Legal References:** 105 ILCS 110/3; 105 ILCS 5/27-9.1a-b; 105 ILCS 5/10-23.13; 410 ILCS 210/4; 23 IL Administrative Code 1.420(n); PA 102-522; PA 102-0412; PA 102-0340

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