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Q2: Title of your recommendation

Statewide Sexuality Education Mandate

Q3: Please provide a description of your proposed recommendation

New York State Education Department regulations currently do not require sexuality education in schools. Sexual health, including learning the knowledge and skills to be healthy and safe, is critical for our youth. HIV/AIDS and STD prevention is very important, but without sexual health education, it is not adequate. Nearly 50% of our students are sexually active in HS, with 75% becoming sexually active over the next 5 years (19-24). It is so important for students to sequentially and age-appropriately learn medically accurate knowledge and skills about developing healthy relationships and avoiding unhealthy relationships, keeping oneself sexually healthy (physically, emotionally and socially as they grow and develop), understanding gender identity and roles and respect and dignity for all, personal safety for self, school and the community, and prevention of STD's and HIV and unintended pregnancy. All of these areas support effective HIV prevention and the growth and healthy development of our youth. To attain this we need state requirements for K-12 sexuality education in schools including district policies, practices, curriculum, teacher professional development and ongoing implementation, monitoring and assessment. The National Sexuality Education Standards offer quality information and guidance on best practices in this area. Schools also need to engage parents, community and students in ongoing local advisory councils to guide, learn and inform their efforts. Although HIV/AIDS advisory councils are mandated in schools, few are currently active. The state needs to monitor and actively support these being in place. Enhancing and rebuilding these councils with a broader comprehensive health or sexual health/HIV prevention emphasis will provide the needed support to enhance and sustain these efforts. The NYSED Guidance Document for Achieving the NYS Standards in Health Education offers quality, best practices, but is only recommended, not mandated. It also needs updating in the next few years. In addition, NYSED should always apply for CDC funds for health, AIDS prevention and Exemplary Sexual Health Education. This did not occur in the last funding opportunity, other than surveillance funds. NYCDOE did apply and is actively supporting their city-wide Sex Education mandate. We need a quality, strong state policy and related school policies, best practices, curricula, teacher professional development, community and family involvement, monitoring and sustainability plans. A stronger Health education mandate and time requirement for health education at all levels (based on research), would also make a huge difference in the knowledge, skills, healthy behaviors and achievement of our students and young adults.

Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply)	Other (please specify) Enhancing Health and Preventing HIV/AIDS in youth, adolescents and young adults
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Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply)	Prevention Committee: Develop recommendations for ensuring the effective implementation of biomedical advances in the prevention of HIV, (such as the use of Truvada as pre-exposure prophylaxis (PrEP)); for ensuring access for those most in need to keep them negative; and for expansion of syringe exchange, expanded partner services, and streamlined HIV testing by further implementing the universal offer of HIV testing in primary care, among others. The Committee will focus on continuing innovative and comprehensive prevention and harm reduction services targeted at key high risk populations, as well as grant- funded services that engage in both secondary and primary prevention.
Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?	New policy, Other (please specify) Either a new policy or expanding the current 135.3 regulations to include sexuality education, strengthen HIV prevention and expand health education to match current research on time requirements and related best practice policies and practices.
Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?	Other (please specify) Changes to commissioners regulations
Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?	Other (please specify) It depends on the plan. It could be within a year or take longer.

Q9: What are the perceived benefits of implementing this recommendation?

The NYSED will take a stronger role in academic achievement, comprehensive health education, sexuality education and HIV/AIDS prevention education and supportive learning environments. More schools will be supported in offering quality comprehensive health, sexuality and HIV/AIDS education. Enhanced education, knowledge and skills for all students, including high risk youth, impacting healthier and safer sexual behaviors, healthier relationships, reduced HIV, STD rates and unintended pregnancies. Enhanced graduation rates. Enhanced sexual health policies in schools with medically accurate, age-appropriate knowledge and skills. The only way we can truly End the Epidemic is with a strong comprehensive education component, as well as the other important supports.

Q10: Are there any concerns with implementing this recommendation that should be considered?

It is time for NYS to move forward supporting medically accurate, comprehensive health, sexuality and HIV/Prevention education in our schools.

Ending the Epidemic Task Force Recommendation Form

Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?

Unsure. Often these mandates are "unfunded". If funded, it would give it strength, but even if "unfunded" it gives school guidance and support for implementing a comprehensive sexual health and prevention education program.

Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?

Unsure, but there are many related figures that have been compiled by national groups and other states.

Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?

Parents, families, students, schools, young adults, healthcare, communities.

Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?

Requiring school policies that would be monitored by NYSED, strongly suggesting quality curricula aligning with best practices, YRBS, School Health Profiles study.

Q15: This recommendation was submitted by one of Advocate the following