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Q1: OPTIONAL: This recommendation was submitted by (please provide your first and last name, affiliation, and email address)		
First Name	Pamela	
Last Name	Boulerice	
Affiliation	Health Teacher	
Email Address	pamela20@primelink1.net	
Q2: Title of your recommendation	State Policy requiring grade K-12 comprehensive sexuality education in all NYS school as part of a comprehensive Health Education Program.	

Q3: Please provide a description of your proposed recommendation

Program is sequential, age and developmentally appropriate, unbiased, medically accurate, researched based and is aligned with NYS Education Health Education Standards, Guidance Document and the National Sexuality Education Standards.

Program includes functional knowledge and health skills base in anatomy and physiology, puberty and child and adolescent development, pregnancy and reproduction, STD's, healthy relationships and personal safety. There must be quality professional development for elementary educators and health educators Program instructed by a Certified Health Educator.

Q4: For which goal outlined in the Governor's plan	Other (please specify)
to end the epidemic in New York State does this	Education, preventative, reduction of individuals
recommendation apply? (Select all that apply)	infected.

Data Committee: Develop recommendations for metrics and identify data sources to assess the comprehensive statewide HIV strategy. The Committee will determine metrics that will measure effective community engagement/ ownership, political leadership, and supportive	1
services. It will also determine metrics that will measure quality of care, impact of interventions and outcomes across all populations, particular identified sub populations such as transgender men and women, women of color, men who have sex with men and youth. In addition, the Committee will evaluate to determine optimal strategies for using data to identify infected persons who have not achieved viral suppression and address their support service, behavioral health, and adherence needs.	
Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program? Other (please specify) Supportive of existing state mandates and improvement	
Q7: Would implementation of this recommendation Permitted under current laws or would a statutory change be required?	
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)?	

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

Reduction of individuals infected. Peer education. Community Awareness. Reductions in medical cost. Reduction in cost to our society as well as mental stress.

Ending the Epidemic Task Force Recommendation Form

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

Support from Administration and School Board.

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

Cost of training . . . and staff.

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

Respondent skipped this question

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

Every person in our state from community members to insurance companies to mental health and stress management non-profit community agencies.

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

I believe the Health Department has a running survey of the number of HIV/AIDS infected individuals by county.

Q15: This recommendation was submitted by one of Member of the public the following