
COMPREHENSIVE SEXUAL HEALTH EDUCATION POLICY

Sage Oak Charter Schools (“SOCS” or the “Charter School”) adopt this Comprehensive Sexual Health Education Policy to meet the legislative intent of the California Healthy Youth Act (“CHYA”) as follows:

1. to provide students with the knowledge and skills necessary to protect their sexual and reproductive health from human immunodeficiency virus (“HIV”) and other sexually transmitted infections and unintended pregnancy;
2. to provide students with the knowledge and skills they need to develop healthy attitudes concerning adolescent growth and development, body image, gender, sexual orientation, relationships, marriage, and family;
3. to promote understanding of sexuality as a normal part of human development;
4. to ensure students receive integrated, comprehensive, accurate, and unbiased sexual health and HIV prevention instruction and provide educators with clear tools and guidance to accomplish that end;
5. to provide students with the knowledge and skills necessary to have healthy, positive, and safe relationships and behaviors.

I. DEFINITIONS

1. **Age appropriate:** topics, messages, and teaching methods suitable to particular ages or age groups of children and adolescents, based on developing cognitive, emotional, and behavioral capacity typical for the age or age group.
2. **Comprehensive sexual health education:** education regarding human development and sexuality, including education on pregnancy, contraception, and sexually transmitted infections.
3. **English learner:** a student who is “limited English proficient” as that term is defined in the federal No Child Left Behind Act of 2001 (20 U.S.C. Sec. 7801(25)).
4. **HIV prevention education:** instruction on the nature of human immunodeficiency virus (“HIV”) and acquired immunodeficiency syndrome (“AIDS”), methods of transmission, strategies to reduce the risk of HIV infection, and social and public health issues related to HIV and AIDS.
5. **Instructors trained in the appropriate courses:** instructors with knowledge of the most recent medically accurate research on human sexuality, healthy relationships, pregnancy, and HIV and other sexually transmitted infections.
6. **Medically accurate:** verified or supported by research conducted in compliance with scientific methods and published in peer-reviewed journals, where appropriate, and recognized as accurate and objective by professional organizations and agencies with expertise in the relevant field.

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II. INSTRUCTION TO STUDENTS

The CHYA requires that comprehensive sexual health education and HIV prevention education be provided to all Charter School students in grades 7 to 12, inclusive, at least once in middle school or junior high school and once in high school.

In compliance with the CHYA, the Charter School will ensure that all students in grades 7 to 12, inclusive, are provided the following instruction:

1. Information on the nature of HIV, as well as other sexually transmitted infections, and their effects on the human body.
2. Information on the manner in which HIV and other sexually transmitted infections are and are not transmitted, including information on the relative risk of infection according to specific behaviors, including sexual activities and injection drug use.
3. Information that abstinence from sexual activity and injection drug use is the only certain way to prevent HIV and other sexually transmitted infections and abstinence from sexual intercourse is the only certain way to prevent unintended pregnancy. This instruction shall provide information about the value of delaying sexual activity while also providing medically accurate information on other methods of preventing HIV and other sexually transmitted infections and pregnancy.
4. Information about the effectiveness and safety of all federal Food and Drug Administration (“FDA”) approved methods that prevent or reduce the risk of contracting HIV and other sexually transmitted infections, including use of antiretroviral medication, consistent with the federal Centers for Disease Control and Prevention.
5. Information about the effectiveness and safety of reducing the risk of HIV transmission as a result of injection drug use by decreasing needle use and needle sharing.
6. Information about the treatment of HIV and other sexually transmitted infections, including how antiretroviral therapy can dramatically prolong the lives of many people living with HIV and reduce the likelihood of transmitting HIV to others.
7. Discussion about social views on HIV and AIDS, including addressing unfounded stereotypes and myths regarding HIV and AIDS and people living with HIV. This instruction shall emphasize that successfully treated HIV-positive individuals have a normal life expectancy, all people are at some risk of contracting HIV, and the only way to know if one is HIV-positive is to get tested.
8. Information about local resources, how to access local resources, and students’ legal rights to access local resources for sexual and reproductive health care such as testing and medical care for HIV and other sexually transmitted infections and pregnancy prevention and care, as well as local resources for assistance with sexual assault and intimate partner violence.
9. Information about the effectiveness and safety of all FDA-approved contraceptive methods in preventing pregnancy, including, but not limited to, emergency contraception.

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Instruction on pregnancy shall include an objective discussion of all legally available pregnancy outcomes, including, but not limited to, all of the following:

- a. Parenting, adoption, and abortion.
 - b. Information on the law on surrendering physical custody of a minor child 72 hours of age or younger., pursuant to Section 1255.7 of the Health and Safety Code and Section 271.5 of the Penal Code.
 - c. The importance of prenatal care.
10. Information about sexual harassment, sexual assault, sexual abuse, and human trafficking. Information on human trafficking shall include both of the following:
- a. Information on the prevalence, nature, and strategies to reduce the risk of human trafficking, techniques to set healthy boundaries, and how to safely seek assistance.
 - b. Information on how social media and mobile device applications are used for human trafficking.
11. Information about adolescent relationship abuse and intimate partner violence, including the early warning signs thereof.
12. Information regarding the potential risks and consequences of creating and sharing sexually suggestive or sexually explicit materials through cellular telephones, social networking websites, computer networks, or other digital media.
13. Information on affirmative consent, defined as affirmative, conscious, and voluntary agreement to engage in sexual activity, including strategies for recognizing and establishing healthy boundaries and respecting others.

Further, the Charter School shall ensure that all instruction satisfies the following criteria:

1. Instruction and materials shall be age appropriate.
2. All factual information presented shall be medically accurate and objective.
3. All instruction and materials shall align with and support the purposes of Education Code Section 51930(b)(1)-(5) as stated in this Policy and shall:
 - a. Be appropriate for use with students of all races, genders, sexual orientations, and ethnic and cultural backgrounds, students with disabilities, and English learners.
 - b. Be made available on an equal basis to a student who is an English learner, consistent with the existing curriculum and alternative options for an English learner student as otherwise provided pursuant to applicable law.
 - c. Be accessible to students with disabilities, including, but not limited to, the provision of a modified curriculum, materials and instruction in alternative formats, and auxiliary aids.
 - d. Not reflect or promote bias against any person on the basis of any category protected by Education Code Section 220.
 - e. Affirmatively recognize that people have different sexual orientations and, when discussing or providing examples of relationships and couples, shall be inclusive of same-sex relationships

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- f. Teach students about gender, gender expression, gender identity, and explore the harm of negative gender stereotypes.
- g. Encourage a student to communicate with their parents/guardians and other trusted adults about human sexuality and provide the knowledge and skills necessary to do so.
- h. Teach the value of and prepare students to have and maintain committed relationships such as marriage.
- i. Provide students with knowledge and skills they need to form healthy relationships that are based on mutual respect and affection, and are free from violence, coercion, and intimidation.
- j. Provide students with knowledge and skills for making and implementing healthy decisions about sexuality, including negotiation and refusal skills to assist students in overcoming peer pressure and using effective decision making skills to avoid high-risk activities.
- k. Not teach or promote religious doctrine.

III. IN-SERVICE TRAINING

1. The Charter School shall cooperatively plan and conduct in-service training for all the Charter School personnel that provide HIV prevention education, through regional planning, joint powers agreements, or contract services.
2. In developing and providing in-service training, the Charter School shall cooperate and collaborate with the teachers of the Charter School who provide HIV prevention education and with the department.
3. In-service training shall be conducted periodically to enable the Charter School personnel to learn new developments in the scientific understanding of HIV. In-service training shall be voluntary for the Charter School personnel who have demonstrated expertise or received in-service training from the department or federal Centers for Disease Control and Prevention.
4. The Charter School may expand HIV in-service training to cover the topic of comprehensive sexual health education in order for the Charter School personnel who provide comprehensive sexual health education to learn new developments in the scientific understanding of sexual health.

IV. GUEST SPEAKERS

1. The Charter School may contract with outside consultants or guest speakers, including those who have developed multilingual curricula or curricula accessible to persons with disabilities, to deliver comprehensive sexual health education and HIV prevention education or to provide training for the Charter School personnel.

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2. All outside consultants and guest speakers shall have expertise in comprehensive sexual health education and HIV prevention education and have knowledge of the most recent medically accurate research on the relevant topic or topics covered in their instruction.

V. PARENTAL CONSENT

The Charter School encourages students to communicate with their parents/guardians about human sexuality and HIV and to respect the rights of parents/guardians to supervise their student's education on these subjects. The Charter School intends to create a streamlined process to make it easier for parents/guardians to review materials and evaluation tools related to comprehensive sexual health education and HIV prevention education, and, if they wish, to excuse their student from participation in all or part of that instruction or evaluation. The Charter School recognizes that while parents/guardians overwhelmingly support medically accurate, comprehensive sex education, parents/guardians have the ultimate responsibility for imparting values regarding human sexuality to their student.

A parent/guardian of a student has the right to excuse their student from all or part of comprehensive sexual health education, HIV prevention education, and assessments related to that education through a passive consent ("opt-out") process. The Charter School shall not require active parental/guardian consent ("opt-in") for comprehensive sexual health education and HIV prevention education.

Notwithstanding Education Code Section 51513, anonymous, voluntary, and confidential research and evaluation tools to measure students' health behaviors and risks, including tests, questionnaires, and surveys containing age-appropriate questions about the student's attitudes concerning or practices relating to sex, may be administered to any student in grades 7 to 12, inclusive. A parent/guardian has the right to excuse their student from the test, questionnaire, or survey through a passive consent ("opt-out") process. The Charter School shall not require active parental/guardian consent ("opt-in") for these tests, questionnaires, or surveys in grades 7 to 12, inclusive. Parents/guardians shall be notified in writing that this test, questionnaire, or survey is to be administered, given the opportunity to review the test, questionnaire, or survey if they wish, notified of their right to excuse their student from the test, questionnaire, or survey, and informed that in order to excuse their student they must state their request in writing to the Charter School.

VI. ANNUAL NOTICE

At the beginning of each school year, or, for a student who enrolls in a school after the beginning of the school year, at the time of that student's enrollment, the Charter School shall notify the parent/guardian of each student about instruction in comprehensive sexual health education and HIV prevention education and research on student health behaviors and risks planned for the coming year. Parents/guardians shall be notified of their right to inspect all instructional materials prior to the start of instruction. The notice shall do all of the following:

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1. Advise the parent/guardian that written and audiovisual educational materials used in comprehensive sexual health education and HIV prevention education are available for inspection.
2. Advise the parent/guardian whether the comprehensive sexual health education or HIV prevention education will be taught by the Charter School personnel or by outside consultants. The Charter School may provide comprehensive sexual health education or HIV prevention education, to be taught by outside consultants, and may hold an assembly to deliver comprehensive sexual health education or HIV prevention education by guest speakers, but if it elects to provide comprehensive sexual health education or HIV prevention education in either of these manners, the notice shall include the date of the instruction, the name of the organization or affiliation of each guest speaker, and information stating the right of the parent/guardian to request a copy of this Policy. If arrangements for this instruction are made after the beginning of the school year, notice shall be made by mail or another commonly used method of notification, no fewer than fourteen (14) days before the instruction is delivered.
3. Include information explaining the parent's/guardian's right to request a copy of this Policy and/or Education Code sections 51930-51939.
4. Advise the parent/guardian that the parent/guardian has the right to excuse their student from comprehensive sexual health education and HIV prevention education and that in order to excuse their student they must state their request in writing to the Charter School.

VII. FOR PUPILS WHO OPT-OUT

A student may not attend any class in comprehensive sexual health education or HIV prevention education, or participate in any anonymous, voluntary, and confidential test, questionnaire, or survey on student health behaviors and risks, if the Charter School has received a written request from the student's parent/guardian excusing the student from participation.

A student may not be subject to disciplinary action, academic penalty, or other sanction if the student's parent/guardian declines to permit the student to receive comprehensive sexual health education or HIV prevention education or to participate in anonymous, voluntary, and confidential tests, questionnaires, or surveys on student health behaviors and risks.

While comprehensive sexual health education, HIV prevention education, or anonymous, voluntary, and confidential test, questionnaire, or survey on student health behaviors and risks is being administered, an alternative educational activity shall be made available to students whose parents/guardians have requested that they not receive the instruction or participate in the test, questionnaire, or survey.