

# Sexual Health Education in Hawaii — Fact Sheet



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## 1. Background

Teen pregnancy and sexually transmitted infections (STIs) are serious public health issues. Hawaii's STI epidemic is most severe among young people, especially young women. For example, Hawaii has the 12th worst chlamydia rate and the 10th highest teen pregnancy rate in the nation, and only 54 percent of Hawaii's high school students reported using condoms during their last sexual intercourse — the lowest percentage of any state in the nation.

## 2. National Policies on Sexual Health Education

According to the National Conference on State Legislatures (NCSL), all states are somehow involved in sex education for public schoolchildren.

As of January 1, 2014:

- 22 states and the District of Columbia require public schools teach sex education (20 of which mandate sex education *and* HIV education).
- 33 states and the District of Columbia require students receive instruction about HIV/AIDS.
- 19 states require that if provided, sex education must be medically, factually or technically accurate. State definitions of "medically accurate" vary, from requiring that the department of health review curriculum for accuracy, to mandating that curriculum be based on information from "published authorities upon which medical professionals rely."

Many states define parents' rights concerning sexual education:

- 37 states and the District of Columbia require school districts to allow parental involvement in sexual education programs.
- Three states require parental consent before a child can receive instruction.
- 35 states and the District of Columbia allow parents to opt-out on behalf of their children.

The NCSL website tracks state laws, as well as 2014 Sex Education legislation.<sup>1</sup>

## 3. Relevant Hawaii Statutes, Policies, and Regulations

There are several Hawaii statutes, policies, and regulations that factor into the development and delivery of sexual health education curriculum.

<b>Hawaii Revised Statutes §321-11.1</b>	<b>Medically accurate sexuality health education.</b> (a) Sexuality health education programs funded by the State shall provide medically accurate and factual information that is age appropriate and includes education on abstinence, contraception, and methods of disease prevention to prevent unintended pregnancy and sexually transmitted disease, including human immunodeficiency virus.
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<sup>1</sup> <http://www.ncsl.org/research/health/state-policies-on-sex-education-in-schools.aspx>

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	<p>(b) For the purposes of this section:</p> <p>"Age appropriate" means suitable to a particular age or age group based on developing cognitive, emotional, and behavioral capacity typical for that age or age group.</p> <p>"Factual information" means medical, psychiatric, psychological, empirical, or statistical information that is verified or supported by research conducted by recognized medical, psychiatric, psychological, and public health professionals or organizations.</p> <p>"Medically accurate" means verified or supported by research conducted in compliance with accepted scientific methods and recognized as accurate and objective by professional organizations and agencies with expertise in the relevant field, such as the federal Centers for Disease Control and Prevention (CDC), the American Public Health Association, the American Academy of Pediatrics, and the American College of Obstetricians and Gynecologists.</p> <p>"Sexuality health education" means education in any medium regarding human development and sexuality, including education on pregnancy, family planning, and sexually transmitted diseases. [L Sp 2009, c 27, §2]</p>
<p><b>Board Policy 2101 – Curriculum Delivery</b> Approved: 11/03/05</p>	<p>The Board of Education recognizes that a strong, challenging curriculum is key to student success and achievement. Therefore, all elementary (grades K-5) and secondary schools (middle/intermediate and high) shall design a program of studies—or curriculum—that enables all students to attain, to the highest degree possible, the Hawaii Content and Performance Standards (HCPS). The curriculum shall include:</p> <ul style="list-style-type: none"> <li>• Units of study or lessons, delineating content or topics to be taught;</li> <li>• Relevant instructional activities and materials to be used, aligned with the HCPS;</li> <li>• Specific learner outcomes or expectations that result in student attainment of grade level benchmarks;</li> <li>• A timeframe in which outcomes are expected to be achieved; and</li> <li>• Assessment tools and methods, including collection and analysis of student work, to measure student attainment of outcomes and benchmarks.</li> </ul> <p>With continued emphasis on improving student achievement, the articulation and coordination of curriculum and curricular services between and among grade levels and subject areas shall be addressed at every school. Articulation of services between schools within a complex shall also be addressed.</p> <p>The curriculum or program of studies shall include academic courses, subjects, and/or units, as well as planned, systematic co-curricular activities and student academic support services, such as assessment, counseling, and guidance to facilitate student attainment of standards.</p> <p>The Department of Education shall adopt regulations to assist schools in the implementation of this policy.</p>

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<p><b>Board Policy 2110: Abstinence-Based Education</b> Approved: 9/95</p>	<p>In order to help students make decisions that promote healthy behaviors, the Department of Education shall instruct students that abstention from sexual intercourse is the surest and most responsible way to prevent unintended pregnancies, sexually transmitted diseases such as HIV/AIDS, and consequent emotional distress. The abstinence-based education program shall:</p> <ul style="list-style-type: none"> <li>a. support abstention from sexual intercourse and provide skill development to continue abstention;</li> <li>b. help youth who have had sexual intercourse to abstain from further sexual intercourse until an appropriate time; and</li> <li>c. provide youth with information on and skill development in the use of protective devices and methods for the purpose of preventing sexually transmitted diseases and pregnancy.</li> </ul>
<p><b>Board Policy 2245 - Prophylactics in the public schools</b> Approved: 11/94</p>	<p>The Board of Education is committed to the health education of our students which may include, within its study of human reproduction, a discussion of birth control devices but the distribution of condoms and other prophylactic devices to students shall be prohibited in the classroom, on the school campus or at any school-related activities.</p>
<p><b>Board Policy 2210 – Controversial Issues</b> Former Code No.6126; Former Policy Approved: 1947; Amended: 7/60, 10/70, 3/88 (renumbered)</p>	<p>Student discussion of issues which generate opposing points of view shall be considered a normal part of the learning process in every area of the school program. The depth of the discussion shall be determined by the maturity of the students.</p> <p>Teachers shall refer students to resources reflecting all points of view. Discussions, including contributions made by the teacher or resource person, shall be maintained on an objective, factual basis. Stress shall be placed on learning how to make judgments based on facts.</p>
<p><b>DOE Regulation #2210.1</b></p>	<p><b>DOE Regulation #2210.1</b> requires instructional staff or administration to notify parents or legal guardians of controversial issues that will be discussed in the classroom or through other school activities. This notification may be done through a general letter about the lesson or activity. Parents or legal guardians may also, on their own volition, write a letter to the school administrators or a teacher to have their child excluded from a specific lesson or activity. If such a letter is received, the student must be provided with an alternative learning activity. The parents or legal guardians have an obligation to notify the school administrator or teacher prior to the lesson or activity.</p> <p>Sexual Health Education, however, specifically requires an opt-in for parents. This policy was initiated with the 2014-15 school year based upon the work of a diverse Stakeholder Review Panel and public feedback.</p>

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## 4. Educational Standards and Curriculum

- Standards:**

Hawaii’s standards-based education is guided by the state standards in nine content areas: Career and Technical Education, Fine Arts, Health, Language Arts, Math, Physical Education, Science, Social Studies, and World Languages.

Issues related to reproduction, sex, and sexual health are addressed in several standards (summarized below), which can be found on the Hawaii Standards Toolkit site at [www.standardstoolkit.k12.hi.us](http://www.standardstoolkit.k12.hi.us).

Content Area	Grade / Course	Strand	Topic	Code	Standard	Benchmark
Health	9-12	n/a	Promoting Safety and Preventing Violence and Unintentional Injury	HE.9-12.1.2	Standard 1: CORE CONCEPTS: Understand concepts related to health promotion and disease prevention	Know how to use appropriate strategies to avoid, reduce, and report threatening situations
Health	9-12	n/a	Personal Health and Wellness	HE.9-12.3.3	Standard 3: SELF: MANAGEMENT: Practice health: enhancing behaviors and reduce health risks	Evaluate personal behaviors within the risk areas (e.g., tobacco use, alcohol and drug use, nutrition, fitness, personal safety, sexual activity)
Social Studies	American Problems	American Problems	Public Education	SS.AP .3.2	Standard 3: Understand issues and politics of the “culture wars”	Explain controversies over public education (e.g., science and religion, sex education)
Social Studies	American Problems	American Problems	Legal Controversies	SS.AP .3.3	Standard 3: Understand issues and politics of the “culture wars”	Compare positions on legal issues (e.g., gun control, same sex marriage, capital punishment)

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Science	7	Life and Environmental Sciences	Heredity	SC.7.5.1	Standard 5: Life and Environmental Sciences: DIVERSITY, GENETICS, AND EVOLUTION: Understand genetics and biological evolution and their impact on the unity and diversity of organisms	Differentiate between sexual and asexual reproduction
Health	6-8	n/a	Sexual Health and Responsibility	HE.6-8.1.7	Standard 1: CORE CONCEPTS: Understand concepts related to health promotion and disease prevention	Describe short- and long-term effects and consequences of sexual activity
Health	6-8	n/a	Personal Health and Wellness	HE.6-8.1.8	Standard 1: CORE CONCEPTS: Understand concepts related to health promotion and disease prevention	Describe the body system functions, how they interact with each other, and how they are impacted by health behaviors
Health	6-8	n/a	Personal Health and Wellness	HE.6-8.3.2	Standard 3: SELF: MANAGEMENT: Practice health: enhancing behaviors and reduce health risks	Explain the importance of assuming responsibility for personal health behaviors

- Curriculum review and selection processes:**

Typically, curricula are reviewed for one of the following reasons: a school expresses interest in using a curriculum, or a change in content or performance standards triggers a review of related curricula. An internal panel of reviewers is convened to review the materials and provide recommendations for decision by Department leadership.

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To review health education curriculum, the Department uses the Health Education Curriculum Analysis Tool (HECAT), a national tool developed to help school districts, schools, and others conduct a clear, complete, and consistent analysis of health education curricula based on the [National Health Education Standards](#) and the CDC's [Characteristics of an Effective Health Education Curriculum](#).

The table on Pages 7-9 lists all state-approved sexual health education curriculum, each of which has been reviewed using the HECAT.

- **Data collection on use of curricula:**

The Department has not historically collected school-level data on the implementation of specific curricula. The Department has recently surveyed schools regarding English language arts and Mathematics curricula as part of efforts to review curricula aligned to the new Hawaii Common Core Standards.

- **Parent opt-in:**

No student is required to participate in sexual health education. In June 2014, the DOE strengthened the role of parents in this decision by changing its policy from an opt-out to an opt-in. Beginning in the 2014-15 school year, all parents must sign an opt-in form permitting their children to participate in sexual health education.

Information about the parent opt-out for controversial issues and Sexual Health opt-in is available online: <http://www.hawaiipublicschools.org/ConnectWithUs/FAQ/Pages/Parent-opt-out-for-child.aspx>

## 5. Abstinence-based vs. Abstinence-only Education

- Abstinence-only education: Depending on the policies/regulations of the school district, and the standards and curriculum, abstinence-only education teaches children to abstain from sexual contact until marriage and/or until the age of consent and/or adulthood. While it may contain information about pregnancy and/or STIs, it typically does not include information about prevention methods.
- Abstinence-based education: Instruction is based upon the foundation that abstention from sexual intercourse is the surest and most responsible way to prevent unintended pregnancies, sexually transmitted diseases such as HIV/AIDS, and consequent emotional distress. From this foundation, teachers and curricular materials:
  - a. support abstention from sexual intercourse and provide skill development to continue abstention;
  - b. help youth who have had sexual intercourse to abstain from further sexual intercourse until an appropriate time; and
  - c. provide youth with information on and skill development in the use of protective devices and methods for the purpose of preventing sexually transmitted diseases and pregnancy.

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Curriculum	About
<p><i>Draw the Line, Respect the Line</i></p> <p><a href="http://www.etr.org">www.etr.org</a></p> <p>Grades: 6 - 8</p>	<p><i>Draw the Line/Respect the Line</i> is a three-year, school-based sex education program for sixth, seventh, and eighth grade students. It was evaluated in three school districts in urban Northern California between 1997 and 1999. This program was primarily designed to help young adolescents postpone having sex. Increasing condom use was a secondary goal. The program uses a 19-session curriculum that teaches youth how to establish and maintain limits regarding sexual behavior.</p> <p>Three curriculum guides are available for purchase – one each for grades six, seven, and eight. The program was designed to be taught over multiple years (grades six, seven and eight). Some schools may face challenges running it through multiple grades due to other time demands.</p>
<p><i>Family Life and Sexual Health (F.L.A.S.H.)</i></p> <p>Grades: 5 – 12</p> <p><a href="http://www.kingcounty.gov/healthservices/health/personal/family/educators/FLASH.aspx">www.kingcounty.gov/healthservices/health/personal/family/educators/FLASH.aspx</a></p>	<p>This curriculum was developed by the Seattle and King County Department, State of Washington. The <i>F.L.A.S.H.</i> curriculum is unique in several ways:</p> <ul style="list-style-type: none"> <li>• Addresses such issues as physical development, promotion of sexual health, prevention of disease, affection, interpersonal relationships, body image, and gender roles.</li> <li>• Spans the school-age years (grades 5<sup>th</sup>-12<sup>th</sup> and secondary special education).</li> <li>• Embraces an abstinence-based approach, as well as information related to the prevention of pregnancy, HIV and other sexually transmitted diseases.</li> <li>• Rests on a foundation of positive and healthy sexuality across the life span.</li> <li>• Focuses on the needs of public schools and diverse communities.</li> <li>• Ensures discussion about the wide spectrum of beliefs on sensitive issues.</li> <li>• Values family involvement.</li> </ul> <p>The <i>F.L.A.S.H.</i> curriculum, like most of the sexual health curricula that have been proven effective, is grounded in Social Learning Theory. It is designed to encourage people to make healthy choices: abstain longer, use protection if they do have sex, seek health care when they need it, communicate effectively with their families and with their partners and health care providers, seek help for sexual abuse, treat others with respect (not harass or exploit them), and stand up to harassment and exploitation.</p>
<p><i>HealthTeacher.com</i></p> <p>Grades: K - 12</p> <p><a href="http://www.healthteacher.com">www.healthteacher.com</a></p>	<p>HealthTeacher.com is developed by HealthTeacher, Inc. <i>HealthTeacher</i> is an online resource of health education tools including lessons, interactive presentations and additional resources to integrate health into any grade K-12 classroom. <i>HealthTeacher</i>, Inc. provides students in grades K-12 with the knowledge and skills needed to overcome two serious threats to good health: a lack of physical activity and a void of health literacy. <i>HealthTeacher</i>, Inc.'s research-based games, apps, and educational resources are designed to engage students and to provide data to measure and quantify their impact. <i>HealthTeacher</i>, Inc.'s K-5 products also work in tandem with two important sets of education standards: the National Health Education Standards (NHES) and the Common Core State Standards, which have been adopted by 45 states.</p>

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<p><i>Making a Difference (MAD)</i></p> <p><a href="http://selectmedia.org/programs/difference.html">http://selectmedia.org/programs/difference.html</a></p>	<p><i>Making a Difference</i> was developed by Ph.D.s Loretta and John Jermott, III and Konstance McCaffree and is distributed by Select Media.</p> <p><i>"Making A Difference!"</i> An Abstinence Approach to Prevention of STDs, HIV and Teen Pregnancy is an eight-module curriculum that provides young adolescents with the knowledge, confidence, and skills necessary to reduce their risk of sexually transmitted diseases (STDs), HIV, and pregnancy by abstaining from sex. It is based on cognitive behavioral theories, focus groups, and the researchers' extensive experience working with youth. <i>"Making A Difference!"</i> is an adaptation and extension of the original <i>"Be Proud! Be Responsible!"</i> curriculum in that it integrates STD, HIV and pregnancy prevention.</p> <p>The goal of <i>"Making A Difference!"</i> is to empower young adolescents to change their behavior in ways that will reduce their risk of pregnancy and HIV or other STD infection. Specifically, this curriculum emphasizes that young adolescents should postpone sexual activity and that practicing abstinence is the only way to eliminate the risk for pregnancy and STDs, including HIV.</p>
<p><i>Pono Choices: A Culturally Responsive Teen Pregnancy and STI Prevention Program</i></p> <p>Grades: 6 – 8</p> <p><a href="http://www.cds.hawaii.edu/ponochoices">http://www.cds.hawaii.edu/ponochoices</a></p>	<p>The Pono Choices curriculum is funded through a federal Office of Adolescent Health grant awarded to the University of Hawaii (UH) at Manoa Center on Disability Studies. The overarching goal of Pono Choices will be to reduce the number of teenage pregnancies and incidences of sexually transmitted infections (STIs); increase positive bonding in the school and community; increase sense of self-identity and self-efficacy; and improve expectations for the future. The project was designed to develop, implement, and study the impact of a first-of-its-kind teen pregnancy and STI prevention curriculum developed exclusively for youth in Hawaii.</p> <p>The curriculum was developed through a collaborative workgroup process and reviewed by the federal Office of Adolescent Health for medical accuracy. UH applied to the Department for approval to pilot the curriculum in Hawaii schools to inform the study. Following review of the curriculum, the Department approved participation in the study as part of a randomized controlled trial. The study runs from 2012-2015 with teachers that were trained by the developers to implement the curriculum with fidelity. External evaluator Berkeley Policy Associates (BPA) is conducting the study's impact analysis examining the impact of the Pono Choices program on initiating sexual activity and avoiding unprotected sexual intercourse.</p> <p>It is a scripted 10 module, 9.5 hour curriculum that provides middle school youth with the knowledge and skills necessary to reduce their risk of unintended pregnancy and STIs by providing medically accurate information within a Native Hawaiian place-based framework. Topics include: Effective communication skills, Refusing unwanted sexual pressure, Information on how STIs are transmitted, and Recognizing healthy and unhealthy relationships.</p>

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<p><i>Positive Prevention</i></p> <p>Grades 6- 8 (level A) Grades 9-12 (level B) Grades 7-12 (special populations) <a href="http://www.positiveprevention.com">http://www.positiveprevention.com</a></p>	<p>This curriculum is the district-adopted and required STD/HIV Curriculum to meet the requirements of the California (CA) education code on HIV prevention-education. It is a required district adopted curriculum for the Los Angeles Unified School District. It is research and evidence based. A health teacher must go through a one-day skill-based training (eight hours) to receive and teach the curriculum with fidelity. This curriculum must be used with a sexual health supplement to meet the CA Education Code.</p> <p>Lesson Topics: Exploring Friendships and Other Relationships; Preventing Unplanned Pregnancies; Making Informed Decisions: Understanding the California Safe Surrender Law; Preventing Sexually Transmitted Diseases/Family Planning and Contraception; and Setting Goals.</p>
<p><i>Reducing the Risk (RTR)</i></p> <p>Grades 9 - 12 <a href="http://advocatesforyouth.org/publications">http://advocatesforyouth.org/publications</a></p>	<p>Advocates for Youth developed the Reducing the Risk curriculum. Reducing the Risk is a sex education curriculum for grades 9th-12th. It focuses on the overall behavioral goal of encouraging youth to avoid unprotected sex by practicing abstinence or using contraception. Through experiential activities, participants learn to recognize and resist peer pressure, make decisions, and negotiate safer sex behaviors. The curriculum is based on social learning theory, social inoculation (social influence) theory, and cognitive behavioral theory. Reducing the Risk also encourages students to talk to their parents about abstinence and birth control.</p>