

HIV/AIDS Prevention Education

Purpose

This policy sets forth the requirement for student health education as specified in RCW 28A.230.070.

Scope

This policy applies to the Board of Directors, Superintendent, administrators, teachers, parents and guardians, students and interested community members and health care agencies.

Policy

1. The life-threatening dangers of human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS) and its prevention will be taught in the district. HIV/AIDS prevention education will be limited to the discussion of the life-threatening dangers of the disease, its transmission and prevention. Students will receive such education at least once each school year beginning no later than the fifth grade.
2. The HIV/AIDS prevention education program will be developed in consultation with teachers, administrators, parents, and other community members including, but not limited to, persons from medical, public health, and mental health organizations and agencies.
 - 2.1. The curricula and materials used in the HIV/AIDS education program may be the model curricula and resources available through OSPI or, if developed by the school district, will be approved for medical accuracy by the State Department of Health, HIV/AIDS Prevention and Education Services (Office on AIDS).
 - 2.2. District-developed curricula will be submitted to HIV/AIDS Prevention and Education Services accompanied by an affidavit of medical accuracy stating that the material in the district-developed curricula has been compared to the model curricula for medical accuracy and that in the opinion of the district the district-developed materials are medically accurate. Upon submission of the affidavit and curricula, the district may use these materials until the approval procedure to be conducted by HIV/AIDS Prevention and Education Services has been completed.
3. At least one month before teaching HIV/AIDS prevention education in any classroom, the district will conduct at least one presentation concerning the curricula and materials that will be used for such education. The presentation will be held during weekend and evening hours for the benefit of parents and guardians of students.
 - 3.1. The parents and guardians will be notified of the presentation and that the curricula and materials are available for inspection.
 - 3.2. No student may be required to participate in HIV/AIDS prevention education if the student's parent or guardian, having attended one of the district presentations, objects in writing to participation.

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4. The curriculum for HIV/AIDS prevention education will be designed to teach students which behaviors place a person dangerously at risk of infection from the human immunodeficiency virus (HIV) and methods to avoid such risk including, at least:
 - (a) The dangers of drug abuse, especially the use of hypodermic needles.
 - (b) The dangers of sexual intercourse, with or without condoms.
 5. The program of HIV/AIDS prevention education will stress the life-threatening dangers of contracting HIV/AIDS and will stress that abstinence from sexual activity is the only certain means for preventing the transmission of HIV through sexual contact. The instruction will also stress that condoms and other artificial means of birth control are not a certain means of preventing the transmission of HIV, and reliance on condoms puts an individual at risk for exposure to the disease.

Related Procedures

N/A

Policy Cross References

3414-Infectious Diseases

Policy Legal References

RCW 28A.230.070 – AIDS Education in public schools — Limitations — Program adoption — Model curricula — Student's exclusion from participation

RCW 28A.300.475 – Medically accurate sexual health education — Curricula — Participation excused — Parental review

RCW 70.24.250 – Office on AIDS — Repository and clearinghouse for AIDS education and training material — University of Washington duties

Management Resources

Policy News, December 2008 – HIV/AIDS Prevention Education

Policy History

Action:	Date:
Approved by the Board	July 22, 2015
Revised	
Revised	
Revised	