

# **K-12 Comprehensive Sexuality Education Plan**

## **Molalla River School District Guidelines**

Molalla River School District,  
Molalla, OR 97038  
<http://www.molallariv.k12.or.us>

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# **K-12 Comprehensive Sexuality Education Plan**

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***We acknowledge the support of North Clackamas School District for their gracious gift of the core document upon which this Plan is based.***

# K-12 Comprehensive Sexuality Education Plan

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# EXECUTIVE SUMMARY

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Award-winning Molalla River Schools lead students toward graduation, empowering and inspiring them to strengthen the quality of life in our local and global communities. The decisions students make regarding their personal health will either support or hinder their ability to graduate prepared for the demands of college, career, and life.

Health education has long been a component of a well-rounded education in Molalla River. As each student shapes their own personal values and beliefs about healthy behaviors, the role of public schools in Oregon is to provide medically accurate and balanced information that is age-appropriate, and inclusive.

Each school district in Oregon, including Molalla River Schools, is responsible for developing a Comprehensive Sexual Education Plan (CSEP) as a part of the Kindergarten through 12th grade Health Instructional Program. **The CSEP is approved by each school district's local school board prior to implementation.**

The Molalla River School District Comprehensive Sexual Education Plan (CSEP) has been developed in accordance with a series of Oregon Senate Bills, Oregon Revised Statutes and Oregon Administrative Rules. This plan primarily encompasses:

- SB 856 (Sex Abuse Prevention Instruction),
- SB 790 (Domestic Violence Education),
- ORS 336.455 (Human Sexuality Education K-12),
- OAR 581-022-1140 (Equal Educational Opportunities),
- OAR 581-022-1440 (Human Sexuality Education),
- OAR 581-022-1210 (District Curriculum, instruction of infectious diseases, including HIV/AIDs and Hepatitis B/C).

There are many secondary state sources also reflected in this plan, including:

- ORS 339.351-364 (Harassment, Bullying, Cyber-bullying and Intimidation),
- OAR 581-022-0413 (Prevention Education in Drugs and Alcohol),
- OAR 581-022-1510 (Comprehensive Guidance and Counseling),
- SB 79 (CPR Instruction for grades 7-12).

Effective health teaching and learning provides opportunities for each student to make sense and deepen their understanding of health, so they can identify, practice and maintain health-enhancing behaviors. Content standards, adopted by the State Board of Education, include concepts, accessing information, self-management, analyzing influences, interpersonal communication, goal setting, decision making and advocacy.

The human sexuality instruction emphasizes abstinence, but not to the exclusion of a contraception skills-based education. The human sexuality information provided is comprehensive, complete, balanced, medically accurate, age-appropriate, not fear or shame-based, and inclusive as determined by the Oregon Department of Education.

Each grade level states specific content standards regarding human sexuality taken from grade level bands of standards from ODE (Grades K-2, 3-5, 6-8, 9-12). In Molalla River, we have separated the grade bands into standards per individual grade level. Each grade level includes an introduction summarizing essential information for teachers and parents, which includes the opportunity to view materials prior to instruction and next steps.

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# INTRODUCTION

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## INTRODUCTION

The Oregon Department of Education (ODE) conducted an instructional materials adoption in 2008. Following that, in 2009, the state legislature passed ORS 336.455, requiring school districts to provide human sexuality education courses in all public elementary and secondary schools as part of health education curriculum. MRSD elementary schools will begin using “The Great Body Shop” as recommended by ODE in the 2018/2019 school year. MRSD secondary schools will begin using McGraw-Hill Glencoe Teen Health and McGraw-Hill Glencoe Health as recommended.

In 2016, ODE revised and updated the health standards to align with child abuse reporting procedures. With the addition of new health legislation in 2013, OAR 581-022-1440, components to Human Sexuality Education were clarified to include the following:

- (1)(b) Program is “**balanced**,” which means instruction that provides information with the understanding of, and strength of the preponderance of evidence.
- (2) In addition, the HIV/AIDS and sexually transmitted infections and disease prevention education and the human sexuality education comprehensive plan **shall** provide adequate instruction at least annually, for all students grades 6-8 and at least twice during grades 9-12.
- (6)(c) The comprehensive plan of instruction shall include information that is complete, balanced and **medically accurate**.
- (6)(s) The comprehensive plan of instruction shall include information that is **culturally inclusive** which means using materials and instruction strategies that respond to culturally diverse individuals, families, and communities in a respectful and effective manner.
- (8) Further, sexuality education materials, instructional strategies, and activities **must not, in any way**, use shame or fear-based tactics.

In 2015, SB 79 on Cardiopulmonary Resuscitation (CPR) Instruction for grades 7-12, SB 790 on Domestic Violence Education for grades 7-12, and SB 856 on Sex Abuse Prevention Instruction for grades K-12 were added to include new components for compliance in school districts across the state of Oregon. SB 79 required that students in grades 7-12 receive instruction in CPR and the use of Automated External Defibrillators (AEDs) facilitated by training developed by the American Heart Association and the American Red Cross. Outside providers, teachers, and/or volunteers are allowed to conduct trainings. SB 790 requires boards to adopt policies that incorporate age-appropriate education about domestic violence into training programs for students in grades 7-12. ODE will provide districts with posters providing free hotline telephone numbers students may access, and the board will adopt policies requiring the posting of signs in clearly visible locations within schools. **SB 856 requires that boards must adopt a child sexual abuse prevention instructional program for grades K-12. That program must have a minimum of 4 instructional sessions (one session is understood as one class period) per school year, include age-appropriate curriculum, professional training components for administrators, teachers, and staff, and include a parental involvement component to inform parents about child sexual abuse topics.**

In 2015, the National Health Education Standards were revised from the 1995 standards. Some of the changes included the addition of one more standard (from 7 to 8 standards), revision of specific grade level bands, revisions of performance indicators, a new chapter on equity and access for all students, and a new chapter on student assessment. As a result, ODE adopted new state health standards in 2016. At any point that ODE adopts new standards, MRSD will modify instruction to adjust to the revisions. In addition, district and school communication to parents and guardians will be revised as needed to reflect current standards. The CSEP will be reviewed every two years to ensure that it complies with ODE updates.

In Late 2017, MRSD conducted a curriculum renewal process to replace outdated materials in order to comply with the national and state legislation. The Health and Wellness Team, made up of teachers, administrators and Board Members, representing elementary, middle, and high school levels, reviewed the health standards and updated the materials to match the current legislation. A community forum was held in February and March, 2018 in order to inform parents about the health standards and new curriculum. Parents were able to view the materials and provide feedback. Following the meeting, the feedback was used to inform the proposal.

The school board approved the purchase of the following materials: The Great Body Shop for elementary; and McGraw Hill for secondary schools.

Guiding the instructional work are the policies put forth as well as a vision for Comprehensive Sexuality Education programs. Below are two forms from the 2015-16 ODE Sexual Abuse Prevention Advisory Group, the Oregon Attorney General's Sexual Assault Task Force, and the Oregon Department of Human Services: Children, Adults, and Families Division. The first is specific to integrating Child Sexual Abuse Prevention (SB 856).



### Vision (SB 856):

A school community is one that is actively engaged in **preventing child sexual abuse through implementation of effective, culturally responsive, and trauma-informed prevention programming**. This is done best on a foundation of strong, safe, and connected relationships between students, families, and staff.



### Principles of Effective Prevention

**Prevention programming MUST be implemented on a foundation of safe, strong, and consistent relationships between school staff, students, and their families. Schools staff can be powerful resiliency builders for students, particularly for those students who have experienced trauma, including child sexual abuse.**

### Definitions

**Effective sexual abuse prevention** implements established best practices, which are consistent with those in healthy sexuality education. Child abuse prevention efforts are directed towards the root causes of child sexual abuse. Health promotion, as primary prevention, is the most effective and occurs prior to any concerns of abuse arising. It is comprehensive, includes varied teaching methods, is sufficiently dosed, theory driven, appropriately timed, and evaluated and delivered by well-trained staff.

**Trauma informed prevention** services are designed in a manner to acknowledge the roles violence and victimization play in the lives of many children and families. Trauma of any kind often causes lasting (and sometimes severe) changes in the survivor's basic sense of themselves, trust in others, participation in society, their culture, their health, and integrity of the child's body.

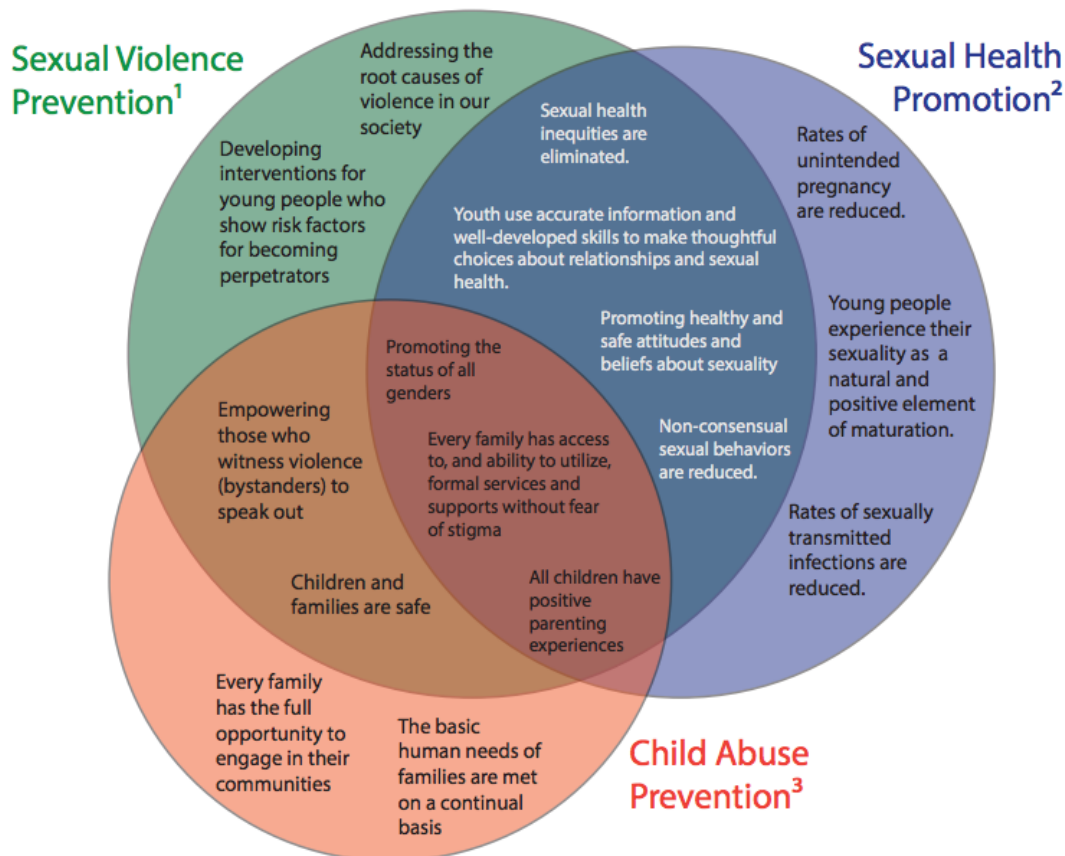
Trauma informed educators recognize the impact of past and current traumatic stress on community members including; children, caregivers, and school staff. They may act in collaboration with other school staff and community programs, using the best available science to facilitate and support the resiliency of the child, family, and community. Trauma informed practices and programming leads to changes in student and staff behavior and attitudes, as well as changes in school culture, practices, and policies.

**Culturally Responsive prevention programs** recognize that the diverse cultural characteristics of students, caregivers, and staff enhance the learning experience of all students. These programs empower students intellectually, socially, and emotionally by causing referents to impart knowledge and skills.



## Connecting Goals and Strategies of Violence Prevention Efforts for Youth in Oregon

In working to prevent different forms of violence and promote healthy attitudes, beliefs, and behaviors for all, much of our work overlaps and impacts the work being done in other sectors. When we start to look at the various goals and strategies of these sectors we can start to see overlaps and identify more clearly, places to collaborate and coordinate our efforts.



**Healthy Teen Relationships Act**  
(House Bill 4077)

Requires schools to incorporate age-appropriate education into new or existing training programs in grades 7-12 about teen dating violence and domestic violence, with a focus on promoting healthy relationships.

**Erin's Law: Child Sex Abuse Prevention**  
(Senate Bill 856)

Requires every school district board to adopt a developmentally appropriate and culturally sensitive child sexual abuse prevention instructional program for students K-12 with a minimum of four instructional sessions per year, as well as professional training for school personnel.

**Human Sexuality Education**  
(OAR Rule 581-022-1440)

Requires that each school teach comprehensive, age appropriate, medically accurate sexuality education. In addition to sex education topics, this law requires instruction of child abuse prevention, healthy relationships, and goal setting.

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1. Oregon, The Oregon Attorney General's Sexual Assault Task Force. (2006). Recommendations to Prevent Sexual Violence in Oregon: A Plan. <http://oregonsatf.org/wp-content/uploads/2012/01/svpplow.pdf>

2. United States, Oregon Department of Human Services, Children, Adults, and Families Division (2007). The Oregon Youth Sexual Health Plan. <http://www.oregon.gov/DHS/CHILDREN/MFMC/Documents/Oregon%20Youth%20Sexual%20Health%20Plan.pdf>

3. Oregon Elevating Prevention Initiative (Jan 4. 2016, Publication). (n.d.). doi:<http://ctfo.org/wp-content/uploads/2016/01/Elevating-Prevention-Report-FINAL.pdf>

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**MRSD IGAI POLICY:  
HUMAN SEXUALITY, HIV/AIDS,  
SEXUALLY TRANSMITTED INFECTIONS,  
HEALTH EDUCATION GUIDELINES**

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**Code: IGAI**  
**Adopted: 9/20/12**  
**Revised/Readopted: 8/28/14; 11/17/16**

## **Human Sexuality, HIV/AIDS, Sexually Transmitted Infections, Health Education\*\***

Based on content as mandated by Oregon Revised Statute (ORS) 336.455 and Oregon Administrative Rule (OAR) 581-022-1440, the district shall provide an age appropriate, comprehensive plan of instruction focusing on human sexuality, HIV/AIDS (Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome) and sexually transmitted infections and disease prevention in elementary and secondary schools as an integral part of health education and other subjects. Course material and instruction for all human sexuality education courses that discuss human sexuality shall enhance student's understanding of sexuality as a normal and healthy aspect of human development.

A part of the comprehensive plan of instruction shall provide age-appropriate child sexual abuse prevention instruction for students in kindergarten through grade 12. The district must provide a minimum of four instructional sessions annually; one instructional session is equal to one standard class period. In addition, the HIV/AIDS and sexually transmitted infections and disease prevention education in the human sexuality education comprehensive plan shall provide adequate instruction at least annually, for all students in grades 6 through 8 and at least twice during grades 9 through 12.

Parents, teachers, school administrators, local health departments, staff and other professionals from the medical community knowledgeable of the latest scientific information and effective education strategies, shall develop the plan of instruction and align it with the Oregon Health Education Standards and Benchmarks.

**Parents shall be notified in advance of any human sexuality or AIDS/HIV instruction.** When practicable, any curriculum and/or materials will be made available for parent preview. **Any parent may request that his/her child be excused from that portion of the instructional program under the procedures set forth in ORS 336.035 (2).**

The Board shall approve the plan of instruction and require that it be reviewed and updated biennially in accordance with new scientific information and effective educational strategies.

The Molalla River K-12 Comprehensive Sexuality Education Plans of Instruction[1] shall include the following information that:

- Promotes abstinence for school age youth and mutually monogamous relationships with an uninfected partner for adults;
- Allays those fears concerning HIV that are scientifically groundless;
- Is balanced and medically accurate, providing information and examples of a healthy lifestyle practicing abstinence and a healthy lifestyle practicing safe contraception;
- Provides balanced, accurate information and skills-based instruction on risks and benefits of contraceptives, condoms and other disease reduction measures which reduce the risk of unintended pregnancy, exposure to HIV, hepatitis B/C and other sexually transmitted infections and diseases;
- Discusses responsible sexual behaviors and hygienic practices which may reduce or eliminate unintended pregnancy, exposure to HIV, hepatitis B/C and other sexually transmitted infections and diseases;
- Stresses the risks of behaviors such as the sharing of needles or syringes for injecting illegal drugs and controlled substances;
- Discusses the characteristics of the emotional, physical and psychological aspects of a healthy relationship;
- Discusses the benefits of delaying pregnancy beyond the adolescent years as a means to better ensure a healthy future for parents and their children. The student shall be provided with statistics based on the latest medical information regarding both the health benefits and the possible side effects of all forms of contraceptives including the success and failure rates for prevention of pregnancy, sexually transmitted infections and diseases;
- Stresses that HIV, sexually transmitted diseases (STDs), sexually transmitted infections (STIs) and hepatitis B/C can be possible hazards of sexual contact;
- Provides students with information about Oregon laws that address young people's rights and responsibilities relating to childbearing and parenting and prevention of the spread of STDs, STIs, including testing for STDs, STIs, HIV and pregnancy;
- Advises students of the legal consequences of having sexual relations with persons younger than 18 years of age to whom they are not married;
- Encourages family communication and involvement and helps students learn to make responsible, respectful and healthy decisions;
- Teaches that no form of sexual expression or behavior is acceptable when it physically or emotionally harms oneself or others and that it is wrong to take advantage of or exploit another person;
- Teaches that consent is an essential component of healthy sexual behavior. Course material shall promote positive attitudes and behaviors related to healthy relationships and sexuality, and encourage active student bystander behavior (ORS 581-022-1440 defines "Student bystander behavior" as behaviors in which students who witness or learn about a peer's harmful behaviors or attitudes intervene when it is safe to do so.);
- Teaches students how to identify and respond to attitudes and behaviors which contribute to sexual violence. Materials and information shall be presented in a manner sensitive to the fact that there are students who have experienced sexual abuse;

- Validates through course material and instruction the importance of honesty with oneself and others, respect for each person's dignity and well-being, and responsibility for one's actions;
- Uses inclusive materials and strategies that recognize different sexual orientations, gender identities and gender expression;
- Includes information about relevant community resources, how to access these resources, and the laws that protect the rights of minors to anonymously access these resources;
- Is culturally inclusive.
- The Molalla River K-12 Comprehensive Sexuality Education Plans of Instruction shall emphasize skill-based instruction that:
  - Assists students to develop and practice effective communication skills, development of self-esteem and ability to resist peer and partner pressure;
  - Provides students with the opportunity to personalize and learn about the peer, media, technology and community influences that both positively and negatively impact their attitudes and decisions related to healthy sexuality, relationships and sexual behaviors, including decisions to abstain from sexual intercourse;
  - Enhances students' ability to access valid health information and resources related to their sexual health;
  - Teaches how to develop and communicate sexual and reproductive boundaries, including declining unwanted sexual advances, or accepting the refusal of unwanted sexual advances, through the use of refusal and negotiation skills;
  - Is research based, evidence based or best practices; and
  - Aligns with the Oregon Health Education Content Standards and Benchmarks.
- All human sexuality education programs shall emphasize that abstinence from sexual intercourse, when practiced consistently and correctly, is the only method that is 100 percent effective against unintended pregnancy, HIV infection (when transmitted sexually), hepatitis B/C infection and other sexually transmitted infections and diseases. Abstinence is to be stressed, but not to the exclusion of contraceptives and condoms for preventing unintended pregnancy, HIV infection, sexually transmitted infections and diseases and hepatitis B/C. Such courses are to acknowledge the value of abstinence while not devaluing or ignoring or stigmatizing those students who have had or are having sexual relationships. Further, sexuality education materials, including instructional strategies, and activities must not, in any way use shame or fear based practices.

## END OF POLICY

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### Legal Reference(s):

[ORS 336.035](#)

[ORS 336.107](#)

[ORS 336.455](#) to -336.475

[ORS 339.370](#) to -339.400

[OAR 581-022-0705](#)

[OAR 581-022-1440](#)

[OAR 581-022-1910](#)

### Cross Reference(s): IGBHD - State-Required Program/Activity Exemptions

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<sup>[1]</sup>The Molalla River K-12 Comprehensive Sexuality Education Plan of Instruction will be published on the district's website.

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# **MRSD HEALTH COURSE DESCRIPTIONS AND INDIVIDUALIZED LEARNING EXPERIENCE SUBSTITUTION FORMS**

**(with content standard strands by grade level)**

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**KINDERGARTEN  
1ST GRADE  
2ND GRADE  
3RD GRADE  
4TH GRADE  
5TH GRADE  
6TH GRADE  
7TH/8TH GRADE  
HIGH SCHOOL HEALTH 1  
HIGH SCHOOL HEALTH 2**



## KINDERGARTEN COURSE DESCRIPTION

### INTRODUCTION

The Molalla River School District (MRSD) Comprehensive Sexuality Education Plan reflects the growing body of science-based research emphasizing the teaching of functional health knowledge that supports students in developing the essential health skills necessary to adopt, practice, and maintain a lifetime of good health and wellness.

Copies of the Comprehensive Sexuality Education standards, the curriculum for each grade level, textbooks, and other materials are available for public review and have gone through such a process before the approval from the school board for purchasing. Some of these materials are available at your child's school or online, so please check with your principal and/or child's health teacher first.

The standards that all students in grades K-5 will address from the Comprehensive Sexuality Education plan include: Prevention and Control of Disease, Promotion of Mental, Social and Emotional Health, Violence and Suicide Prevention, and Promotion of Sexual Health.

Teachers provide age-appropriate lessons on these topics using *The Great Body Shop* (*The Children's Health Market Publishing*)

In addition, all classrooms will also receive yearly instruction by licensed school counselors or child development specialists to address SB-856. These lessons, from [Second Steps: Child Protection Unit](#), support the following standards for grades K-3:

- Explain the difference between appropriate touch and inappropriate touch.
- Identify parents, and other trusted adults they can tell if they are feeling uncomfortable about being touched.
- Demonstrate how to clearly say no, how to leave an uncomfortable situation, and how to identify and talk with a trusted adult if someone is touching them in an uncomfortable way.
- Practice and use refusal skills if someone is touching you inappropriately.

For more information about curriculum standards and associated materials, please visit our district website at: <http://www.molallariv.k12.or.us>.

**Comprehensive Sexuality Education program materials will be made available to parents or guardians upon request. Annually, you will receive a letter outlining the program and topics to be discussed in the classroom.** Molalla River School District believes the program is important for your child. We look forward to working with parents and guardians to help provide this program to our children.

**If you have any questions, please contact your child's teacher or principal.**

## **KINDERGARTEN STANDARDS:**

### **Strand 5: Comprehensive Sexual Health (CSE)**

#### Standard 1: Core Concepts (CC)

HE.1.K.4 Name reproductive body parts, using proper anatomical terms, and stages in the basic growth processes of all people.

HE.1.K.6 Identify ways to prevent communicable and non-communicable disease and understand the difference (including HIV/AIDS, and Hepatitis B and C).

HE.1.K.7 Recognize that there are many ways to express gender

HE.1.K.10 Recognize everyone has the right to say who touches their body, when and how. HE.1.K.11 Recognize that it is never ok to touch someone, or make someone touch you if they don't want to.

HE.1.K.12 List a variety of ways people express affection within various types of relationships. HE.1.K.13 Define bullying and teasing and why bullying and teasing are inappropriate behaviors.

HE.1.K.15 Define consent as it relates to personal boundaries.

#### Standard 3: Accessing Information (AI)

HE.3.K.2 Identify sources of support, such as parents or other trusted adults, to seek information about sexual and reproductive health, including pregnancy and birth.

HE.3.K.3 Identify sources of support, such as parents or other trusted adults, including school staff, they can tell if they are experiencing sexual abuse.

HE.3.K.4 Identify sources of support if someone is touching them in a way that makes them feel uncomfortable.

#### Standard 4: Interpersonal Communication (IC)

HE.4.K.7 Practice asking for help and support, if they or someone they know is being hurt or feels unsafe.

#### Standard 7: Self-Management (SM)

HE.7.K.3 Recognize how to clearly say no, and or leave an uncomfortable situation.

**Molalla River School District  
Comprehensive Sexuality Education  
Kindergarten Parent/Guardian Individualized Learning Experience Substitution Form**

**If your child will participate in this health instruction, you do NOT need to return this form.** If you do NOT want your child to receive instruction in any of these standards, please fill out the form below and return it to your child's teacher. Your child will be given an individualized assignment in place of the instruction. This assignment is expected to be similar in nature, length and depth of the substituted standards.

It is important to understand that in a student-centered approach to education that utilizes student dialogue, there may be times when your child is in class where a discussion or review may include content from a substituted section. As these types of discussions sometimes occur spontaneously, please understand that we cannot ensure students will not surface this content in class. If, as the parent/guardian you exercise your right to substitute your child's learning experience, it is imperative that you have conversations with your child about this content.

**If you are returning this form to exercise your right to substitute your child's experience from classroom instruction to an individualized experience, please sign below. The teacher and/or principal will contact you to discuss a plan to best meet the needs of your child during instruction.**

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**IF YOU WISH TO SUBSTITUTE YOUR CHILD'S LEARNING EXPERIENCE FROM ANY ASPECT OF THE HEALTH CURRICULUM, PLEASE RETURN THIS FORM TO THE TEACHER SO THEY CAN FOLLOW UP WITH YOU.**

**SCHOOL \_\_\_\_\_ DATE \_\_\_\_\_**

**STUDENT NAME \_\_\_\_\_ TEACHER NAME \_\_\_\_\_**

**PARENT/GUARDIAN NAME \_\_\_\_\_**

**PHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_**

**PARENT/GUARDIAN SIGNATURE \_\_\_\_\_**

## GRADE 1 COURSE DESCRIPTION

### INTRODUCTION

The Molalla River School District (MRSD) Comprehensive Sexuality Education Plan reflects the growing body of science-based research emphasizing the teaching of functional health knowledge that supports students in developing the essential health skills necessary to adopt, practice, and maintain a lifetime of good health and wellness.

Copies of the Comprehensive Sexuality Education standards, the curriculum for each grade level, textbooks, and other materials are available for public review and have gone through such a process before the approval from the school board for purchasing. Some of these materials are available at your child's school or online, so please check with your principal and/or child's health teacher first.

The standards that all students in grades K-5 will address from the Comprehensive Sexuality Education plan include: Prevention and Control of Disease, Promotion of Mental, Social and Emotional Health, Violence and Suicide Prevention, and Promotion of Sexual Health.

Teachers provide age-appropriate lessons on these topics using *The Great Body Shop* (*The Children's Health Market Publishing*)

In addition, all classrooms will also receive yearly instruction by licensed school counselors or child development specialists to address SB-856. These lessons, from [Second Steps: Child Protection Unit](#), support the following standards for grades K-3:

- Explain the difference between appropriate touch and inappropriate touch.
- Identify parents, and other trusted adults they can tell if they are feeling uncomfortable about being touched.
- Demonstrate how to clearly say no, how to leave an uncomfortable situation, and how to identify and talk with a trusted adult if someone is touching them in an uncomfortable way.
- Practice and use refusal skills if someone is touching you inappropriately.

For more information about curriculum standards and associated materials, please visit our district website at <http://www.molallariv.k12.or.us/Page/380>.

**Comprehensive Sexuality Education program materials will be made available to parents or guardians upon request. Annually, you will receive a letter outlining the program and topics to be discussed in the classroom.** Molalla River School District believes the program is important for your child. We look forward to working with parents and guardians to help provide this program to our children.

**If you have any questions, please contact your child's teacher or principal.**

## **GRADE 1 STANDARDS:**

### **Strand 5: Comprehensive Sexual Health (CSE)**

#### **Standard 1 : Core Concepts (CC)**

HE.1.1.4 Name reproductive body parts, using proper anatomical terms, and stages in the basic growth processes of all people.

HE.1.1.6 Explain that it is important to stay away from potentially unsafe body fluids and objects. HE.1.1.7 Explain that there are many ways to express gender.

HE.1.1.10 Explain that everyone has the right to say who touches their body, when and how. HE.1.1.11 Explain that it is never ok to touch someone, or make someone touch you if they don't want to.

HE.1.1.12 Identify a variety of ways people express affection within various types of relationships.

HE.1.1.13 Describe bullying and teasing and why bullying and teasing are inappropriate behaviors.

HE.1.1.15 Describe consent as it relates to personal boundaries.

#### **Standard 3 : Accessing Information (AI)**

HE.3.1.2 List sources of support, such as parents or other trusted adults, to seek information about sexual and reproductive health, including pregnancy and birth.

HE.3.1.3 Identify sources of support, such as parents or other trusted adults, including school staff, they can tell if they are experiencing sexual abuse including if someone is touching them in a way that makes them feel uncomfortable.

#### **Standard 4 : Interpersonal Communication (IC)**

HE.4.1.7 Practice asking for help and support, if they or someone they know is being hurt or feels unsafe.

#### **Standard 7 : Self-Management (SM)**

HE.7.1.3 Describe how to clearly say no and how to leave an uncomfortable situation.

**Molalla River School District  
Comprehensive Sexuality Education  
GRADE 1 Parent/Guardian Individualized Learning Experience Substitution Form**

**If your child will participate in this health instruction, you do NOT need to return this form.** If you do NOT want your child to receive instruction in any of these standards, please fill out the form below and return it to your child's teacher. Your child will be given an individualized assignment in place of the instruction. This assignment is expected to be similar in nature, length and depth of the substituted standards.

It is important to understand that in a student-centered approach to education that utilizes student dialogue, there may be times when your child is in class where a discussion or review may include content from a substituted section. As these types of discussions sometimes occur spontaneously, please understand that we cannot ensure students will not surface this content in class. If, as the parent/guardian you exercise your right to substitute your child's learning experience, it is imperative that you have conversations with your child about this content.

**If you are returning this form to exercise your right to substitute your child's experience from classroom instruction to an individualized experience, please sign below. The teacher and/or principal will contact you to discuss a plan to best meet the needs of your child during instruction.**

-----

**IF YOU WISH TO SUBSTITUTE YOUR CHILD'S LEARNING EXPERIENCE FROM ANY ASPECT OF THE HEALTH CURRICULUM, PLEASE RETURN THIS FORM TO THE TEACHER SO THEY CAN FOLLOW UP WITH YOU.**

**SCHOOL \_\_\_\_\_ DATE \_\_\_\_\_**

**STUDENT NAME \_\_\_\_\_ TEACHER NAME \_\_\_\_\_**

**PARENT/GUARDIAN NAME: \_\_\_\_\_**

**PHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_**

**PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_**

## GRADE 2 COURSE DESCRIPTION

### INTRODUCTION

The Molalla River School District (MRSD) Comprehensive Sexuality Education Plan reflects the growing body of science-based research emphasizing the teaching of functional health knowledge that supports students in developing the essential health skills necessary to adopt, practice, and maintain a lifetime of good health and wellness.

Copies of the Comprehensive Sexuality Education standards, the curriculum for each grade level, textbooks, and other materials are available for public review and have gone through such a process before the approval from the school board for purchasing. Some of these materials are available at your child's school or online, so please check with your principal and/or child's health teacher first.

The standards that all students in grades K-5 will address from the Comprehensive Sexuality Education plan include: Prevention and Control of Disease, Promotion of Mental, Social and Emotional Health, Violence and Suicide Prevention, and Promotion of Sexual Health.

Teachers provide age-appropriate lessons on these topics using *The Great Body Shop* (*The Children's Health Market Publishing*)

In addition, all classrooms will also receive yearly instruction by licensed school counselors or child development specialists to address SB-856. These lessons, from [Second Steps: Child Protection Unit](#), support the following standards for grades K-3:

- Explain the difference between appropriate touch and inappropriate touch.
- Identify parents, and other trusted adults they can tell if they are feeling uncomfortable about being touched.
- Demonstrate how to clearly say no, how to leave an uncomfortable situation, and how to identify and talk with a trusted adult if someone is touching them in an uncomfortable way.
- Practice and use refusal skills if someone is touching you inappropriately.

For more information about curriculum standards and associated materials, please visit our district website at: <http://www.molallariv.k12.or.us>.

**Comprehensive Sexuality Education program materials will be made available to parents or guardians upon request. Annually, you will receive a letter outlining the program and topics to be discussed in the classroom.** Molalla River School District believes the program is important for your child. We look forward to working with parents and guardians to help provide this program to our children.

**If you have any questions, please contact your child's teacher or principal.**

## **GRADE 2 STANDARDS:**

### **Strand 5: Comprehensive Sexual Health (CSE)**

#### **Standard 1 : Core Concepts (CC)**

HE.1.1.4 Identify reproductive body parts, using proper anatomical terms and stages in the basic growth processes of all people.

HE.1.2.6 Explain why it is important to stay away from potentially unsafe body fluids and objects. HE.1.2.7 Recognize differences and similarities of how individuals identify regarding gender.

HE.1.2.10 Explain that everyone has the right to say who touches their body, when and how. HE.1.2.11 Explain that it is never ok to touch someone, or make someone touch you if they don't want to.

HE.1.2.12 Describe a variety of ways people express affection within various types of relationships.

HE.1.2.13 Explain bullying and teasing and why bullying and teasing are inappropriate behaviors.

HE.1.2.16 Practice consent as it relates to personal boundaries.

#### **Standard 3 : Accessing Information (AI)**

HE.3.2.2 Describe the qualities of reliable sources of support, such as parents or other trusted adults, when seeking information about sexual and reproductive health, including pregnancy and birth.

HE.3.2.3 Describe sources of support, such as parents or other trusted adults, including school staff, they can tell if they are experiencing sexual abuse.

HE.3.2.4 List sources of support if someone is touching them in a way that makes them feel uncomfortable.

#### **Standard 4 : Interpersonal Communication (IC)**

HE.4.2.7 Practice asking for help and support, if they or someone they know is being hurt or feels unsafe.

#### **Standard 7 : Self-Management (SM)**

HE.7.2.3 Demonstrate how to clearly say “no” and/or how to leave an unsafe/uncomfortable situation.



**Molalla River School District  
Comprehensive Sexuality Education  
GRADE 2 Parent/Guardian Individualized Learning Experience Substitution Form**

**If your child will participate in this health instruction, you do NOT need to return this form.** If you do NOT want your child to receive instruction in any of these standards, please fill out the form below and return it to your child's teacher. Your child will be given an individualized assignment in place of the instruction. This assignment is expected to be similar in nature, length and depth of the substituted standards.

It is important to understand that in a student-centered approach to education that utilizes student dialogue, there may be times when your child is in class where a discussion or review may include content from a substituted section. As these types of discussions sometimes occur spontaneously, please understand that we cannot ensure students will not surface this content in class. If, as the parent/guardian you exercise your right to substitute your child's learning experience, it is imperative that you have conversations with your child about this content.

**If you are returning this form to exercise your right to substitute your child's experience from classroom instruction to an individualized experience, please sign below. The teacher and/or principal will contact you to discuss a plan to best meet the needs of your child during instruction.**

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**IF YOU WISH TO SUBSTITUTE YOUR CHILD'S LEARNING EXPERIENCE FROM ANY ASPECT OF THE HEALTH CURRICULUM, PLEASE RETURN THIS FORM TO THE TEACHER SO THEY CAN FOLLOW UP WITH YOU.**

**SCHOOL \_\_\_\_\_ DATE \_\_\_\_\_**

**STUDENT NAME \_\_\_\_\_ TEACHER NAME \_\_\_\_\_**

**PARENT/GUARDIAN NAME (printed) \_\_\_\_\_**

**PHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_**

**PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_**

## GRADE 3 COURSE DESCRIPTION

### INTRODUCTION

The Molalla River School District (MRSD) Comprehensive Sexuality Education Plan reflects the growing body of science-based research emphasizing the teaching of functional health knowledge that supports students in developing the essential health skills necessary to adopt, practice, and maintain a lifetime of good health and wellness.

Copies of the Comprehensive Sexuality Education standards, the curriculum for each grade level, textbooks, and other materials are available for public review and have gone through such a process before the approval from the school board for purchasing. Some of these materials are available at your child's school or online, so please check with your principal and/or child's health teacher first.

The standards that all students in grades K-5 will address from the Comprehensive Sexuality Education plan include: Prevention and Control of Disease, Promotion of Mental, Social and Emotional Health, Violence and Suicide Prevention, and Promotion of Sexual Health.

Teachers provide age-appropriate lessons on these topics using *The Great Body Shop* (*The Children's Health Market Publishing*)

In addition, all classrooms will also receive yearly instruction by licensed school counselors or child development specialists to address SB-856. These lessons, from [Second Steps: Child Protection Unit](#), support the following standards for grades K-3:

- Explain the difference between appropriate touch and inappropriate touch.
- Identify parents, and other trusted adults they can tell if they are feeling uncomfortable about being touched.
- Demonstrate how to clearly say no, how to leave an uncomfortable situation, and how to identify and talk with a trusted adult if someone is touching them in an uncomfortable way.
- Practice and use refusal skills if someone is touching you inappropriately.

For more information about curriculum standards and associated materials, please visit our district website at <http://www.molallariv.k12.or.us/Page/380>.

**Comprehensive Sexuality Education program materials will be made available to parents or guardians upon request. Annually, you will receive a letter outlining the program and topics to be discussed in the classroom.** Molalla River School District believes the program is important for your child. We look forward to working with parents and guardians to help provide this program to our children.

**If you have any questions, please contact your child's teacher or principal.**

## **GRADE 3 STANDARDS:**

### **Strand 5: Comprehensive Sexual Health (CSE)**

#### **Standard 1 : Core Concepts (CC)**

HE.1.3.6 Identify human reproductive systems including reproductive anatomy and function. HE.1.3.7 Explain why it is important to stay away from potentially unsafe body fluids and objects.

HE.1.3.8 Identify practices that prevent the spread of communicable diseases (including HIV/AIDS, and Hepatitis B and C).

HE.1.3.9 Recognize how puberty prepares human bodies for the potential to reproduce. HE.1.3.10 Define sexual orientation.

HE.1.3.14 Explain that everyone has the right to say who touches their body, when and how. HE.1.3.15 Explain that it is never ok to touch someone, or make someone touch you if they don't want to.

HE.1.3.16 Describe a variety of ways people express affection within various types of relationships.

HE.1.3.17 Explain why bullying and teasing are inappropriate behaviors.

HE.1.3.19 Define consent as it relates to personal boundaries.

#### **Standard 3 : Accessing Information (AI)**

HE.3.3.3 Recognize sources of support, such as parents or other trusted adults, to seek information about sexual and reproductive health, including pregnancy and birth.

HE.3.3.4 Recognize sources of medically-accurate information about human sexual and reproductive anatomy, puberty and personal hygiene.

HE.3.3.5 Recognize people at home, school or in the community who can provide medically accurate information and/or support about healthy sexuality, including sexual orientation and gender identity.

HE.3.3.7 Recognize sources of support, such as parents or other trusted adults, including school staff; they can tell if they are experiencing sexual abuse.

HE.3.3.9 Recognize sources of support such as parents or other trusted adults they can tell if they are feeling uncomfortable about being touched.

#### **Standard 4 : Interpersonal Communication (IC)**

HE.4.3.8 Identify ways to ask for help and support, if they or someone they know is being hurt or feels unsafe.

#### **Standard 7 : Self-Management (SM)**

HE.7.3.4 List ways to treat yourself and others with dignity and respect, with regard to race, ability, other identities, gender, gender identity, and sexual orientation.

**Molalla River School District  
Comprehensive Sexuality Education  
GRADE 3 Parent/Guardian Individualized Learning Experience Substitution Form**

**If your child will participate in this health instruction, you do NOT need to return this form.** If you do NOT want your child to receive instruction in any of these standards, please fill out the form below and return it to your child's teacher. Your child will be given an individualized assignment in place of the instruction. This assignment is expected to be similar in nature, length and depth of the substituted standards.

It is important to understand that in a student-centered approach to education that utilizes student dialogue, there may be times when your child is in class where a discussion or review may include content from a substituted section. As these types of discussions sometimes occur spontaneously, please understand that we cannot ensure students will not surface this content in class. If, as the parent/guardian you exercise your right to substitute your child's learning experience, it is imperative that you have conversations with your child about this content.

**If you are returning this form to exercise your right to substitute your child's experience from classroom instruction to an individualized experience, please sign below. The teacher and/or principal will contact you to discuss a plan to best meet the needs of your child during instruction.**

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**IF YOU WISH TO SUBSTITUTE YOUR CHILD'S LEARNING EXPERIENCE FROM ANY ASPECT OF THE HEALTH CURRICULUM, PLEASE RETURN THIS FORM TO THE TEACHER SO THEY CAN FOLLOW UP WITH YOU.**

**SCHOOL \_\_\_\_\_ DATE \_\_\_\_\_**

**STUDENT NAME \_\_\_\_\_ TEACHER NAME \_\_\_\_\_**

**PARENT/GUARDIAN NAME (printed) \_\_\_\_\_**

**PHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_**

**PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_**

## GRADE 4 COURSE DESCRIPTION

### INTRODUCTION

The Molalla River School District (MRSD) Comprehensive Sexuality Education Plan reflects the growing body of science-based research emphasizing the teaching of functional health knowledge that supports students in developing the essential health skills necessary to adopt, practice, and maintain a lifetime of good health and wellness.

Copies of the Comprehensive Sexuality Education standards, the curriculum for each grade level, textbooks, and other materials are available for public review and have gone through such a process before the approval from the school board for purchasing. Some of these materials are available at your child's school or online, so please check with your principal and/or child's health teacher first.

The standards that all students in grades K-5 will address from the Comprehensive Sexuality Education plan include: Prevention and Control of Disease, Promotion of Mental, Social and Emotional Health, Violence and Suicide Prevention, and Promotion of Sexual Health.

Teachers provide age-appropriate lessons on these topics using *The Great Body Shop* (*The Children's Health Market Publishing*)

In addition, classrooms will receive yearly instruction by licensed school counselors or child development specialists to address SB-856. These lessons, from Second Steps, support the following standards for grades 4-5:

- Recognize sexual harassment and sexual abuse.
- Identify trusted adult(s) to report sexual harassment or sexual abuse.
- Demonstrate how to clearly say no, how to leave an uncomfortable situation, and how to report situation to trusted adult.
- Practice and use refusal skills.

For more information about curriculum standards and associated materials, please visit our district website at <http://www.molallariv.k12.or.us/Page/380>.

**Comprehensive Sexuality Education program materials will be made available to parents or guardians upon request. Annually, you will receive a letter outlining the program and topics to be discussed in the classroom.** Molalla River School District believes the program is important for your child. We look forward to working with parents and guardians to help provide this program to our children.

**If you have any questions, please contact your child's teacher or principal.**

## **GRADE 4 STANDARDS:**

### **Standard 1 : Core Concepts (CC)**

HE.1.4.6 Identify human reproductive systems including reproductive anatomy and function. HE.1.4.7 Recognize that abstinence is the most effective method of protection from STD/HIV and pregnancy.

HE.1.4.8 Recognize that HIV and STDs can be spread through sexual contact with someone who has HIV/STD.

HE.1.4.9 Define sexual orientation.

HE.1.4.13 Explain that everyone has the right to say who touches their body, when and how. HE.1.4.14 Describe why it is never ok to touch someone, or make someone touch you if they don't want to.

HE.1.4.15 Describe a variety of ways people express affection within various types of relationships.

HE.1.4.16 Define why bullying and teasing are inappropriate behaviors.

HE.1.4.18 Discuss consent as it relates to personal boundaries.

### **Standard 3 : Accessing Information (AI)**

HE.3.4.4 Describe sources of medically-accurate information about human sexual and reproductive anatomy.

HE.3.4.5 Identify people at home, school or in the community who can provide medically accurate information and/or support about puberty and health care practices during puberty. HE.3.4.6 Identify people at home, school or in the community who can provide medically accurate information and/or support about healthy sexuality, including sexual orientation and gender identity.

HE.3.4.8 Identify sources of support, such as parents or other trusted adults, including school staff, they can tell if they are experiencing sexual abuse.

HE.3.4.10 Identify sources of support such as parents or other trusted adults they can tell if they are being sexually harassed or abused.

### **Standard 4 : Interpersonal Communication (IC)**

HE.4.4.8 Describe how to ask for help and support, if they or someone they know is being hurt or feels unsafe.

### **Standard 7 : Self-Management (SM)**

HE.7.4.4 List ways to manage the physical and emotional changes associated with puberty, including personal health care practices.

**Molalla River School District  
Comprehensive Sexuality Education  
GRADE 4 Parent/Guardian Individualized Learning Experience Substitution Form**

**If your child will participate in this health instruction, you do NOT need to return this form.** If you do NOT want your child to receive instruction in any of these standards, please fill out the form below and return it to your child's teacher. Your child will be given an individualized assignment in place of the instruction. This assignment is expected to be similar in nature, length and depth of the substituted standards.

It is important to understand that in a student-centered approach to education that utilizes student dialogue, there may be times when your child is in class where a discussion or review may include content from a substituted section. As these types of discussions sometimes occur spontaneously, please understand that we cannot ensure students will not surface this content in class. If, as the parent/guardian you exercise your right to substitute your child's learning experience, it is imperative that you have conversations with your child about this content.

**If you are returning this form to exercise your right to substitute your child's experience from classroom instruction to an individualized experience, please sign below. The teacher and/or principal will contact you to discuss a plan to best meet the needs of your child during instruction.**

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**IF YOU WISH TO SUBSTITUTE YOUR CHILD'S LEARNING EXPERIENCE FROM ANY ASPECT OF THE HEALTH CURRICULUM, PLEASE RETURN THIS FORM TO THE TEACHER SO THEY CAN FOLLOW UP WITH YOU.**

**SCHOOL** \_\_\_\_\_ **DATE** \_\_\_\_\_

**STUDENT NAME** \_\_\_\_\_ **TEACHER NAME** \_\_\_\_\_

**PARENT/GUARDIAN NAME (printed)** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_ **EMAIL ADDRESS** \_\_\_\_\_

**PARENT/GUARDIAN SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

## GRADE 5 COURSE DESCRIPTION

### INTRODUCTION

The Molalla River School District (MRSD) Comprehensive Sexuality Education Plan reflects the growing body of science-based research emphasizing the teaching of functional health knowledge that supports students in developing the essential health skills necessary to adopt, practice, and maintain a lifetime of good health and wellness.

Copies of the Comprehensive Sexuality Education standards, the curriculum for each grade level, textbooks, and other materials are available for public review and have gone through such a process before the approval from the school board for purchasing. Some of these materials are available at your child's school or online, so please check with your principal and/or child's health teacher first.

The standards that all students in grades K-5 will address from the Comprehensive Sexuality Education plan include: Prevention and Control of Disease, Promotion of Mental, Social and Emotional Health, Violence and Suicide Prevention, and Promotion of Sexual Health.

Teachers provide age-appropriate lessons on these topics using *The Great Body Shop* (*The Children's Health Market Publishing*)

In addition, classrooms will receive yearly instruction by licensed school counselors or child development specialists to address SB-856. These lessons, from Second Steps, support the following standards for grades 4-5:

- Recognize sexual harassment and sexual abuse.
- Identify trusted adult(s) to report sexual harassment or sexual abuse.
- Demonstrate how to clearly say no, how to leave an uncomfortable situation, and how to report situation to trusted adult.
- Practice and use refusal skills.

For more information about curriculum standards and associated materials, please visit our district website at <http://www.molallariv.k12.or.us/Page/380>.

**Comprehensive Sexuality Education program materials will be made available to parents or guardians upon request. Annually, you will receive a letter outlining the program and topics to be discussed in the classroom.** Molalla River School District believes the program is important for your child. We look forward to working with parents and guardians to help provide this program to our children.

**If you have any questions, please contact your child's teacher or principal.**



## **GRADE 5 STANDARDS:**

### **Strand 5: Comprehensive Sexual Health (CSE)**

#### **Standard 1 : Core Concepts (CC)**

HE.1.5.6 Discuss human reproductive systems including reproductive anatomy and function. HE.1.5.7 Discuss how abstinence is the most effective method of protection from STD/HIV and pregnancy.

HE.1.5.8 Discuss that HIV and STDs can be spread through sexual contact with someone who has HIV/STD.

HE.1.5.9 Identify health care practices related to physical changes during puberty.

HE.1.5.10 Explain differences and similarities of how individuals identify regarding gender or sexual orientation.

HE.1.5.11 Identify the physical, social and emotional changes that occur during puberty and adolescence.

HE.1.5.15 Explain that everyone has the right to say who touches their body, when and how. HE.1.5.16 Discuss why it is never ok to touch someone, or make someone touch you if they don't want to.

HE.1.5.17 Analyze a variety of ways people express affection within various types of relationships.

HE.1.5.18 Analyze why bullying and teasing are inappropriate behaviors.

#### **Standard 3 : Accessing Information (AI)**

HE.3.5.3 Discuss the sources of support, such as parents or other trusted adults, to seek information about sexual and reproductive health, including pregnancy and birth.

HE.3.5.4 Demonstrate how to access sources of medically-accurate information about human sexual and reproductive anatomy.

HE.3.5.5 Demonstrate how to access resources, including people at home, school or in the community who can provide medically accurate information and/or support about puberty and health care practices during puberty.

HE.3.5.6 Discuss the qualities of people at home, school or in communities who can provide medically accurate information and/or support about healthy sexuality, including sexual orientation and gender identity.

HE.3.5.8 Discuss the sources of support, such as parents or other trusted adults, including school staff, they can tell if they are experiencing sexual abuse.

HE.3.5.10 Discuss sources of support such as parents or other trusted adults they can tell if they are being sexually harassed or abused.

#### **Standard 4 : Interpersonal Communication (IC)**

HE.4.5.8 Demonstrate asking for help and support, if they or someone they know is being hurt or feels unsafe.

#### **Standard 6 : Goal Setting (GS)**

HE.6.5.3 Define sexual violence including but not limited to interpersonal violence (physical, verbal, emotional and sexual violence).

#### **Standard 7 : Self-Management (SM)**

HE.7.5.4 Demonstrate ways to treat yourself and others with dignity and respect, with regard to gender, gender identity, and sexual orientation.

HE.7.5.5 Explain ways to manage the physical and emotional changes associated with puberty, including personal health care practices.

**Molalla River School District  
Comprehensive Sexuality Education  
GRADE 5 Parent/Guardian Individualized Learning Experience Substitution Form**

**If your child will participate in this health instruction, you do NOT need to return this form.** If you do NOT want your child to receive instruction in any of these standards, please fill out the form below and return to your child's teacher. Your child will be given an individualized assignment in place of the instruction. This assignment is to be similar in nature, length and depth of the substituted standards.

It is important to understand that in a student-centered approach to education that utilizes student dialogue, there may be times when your child is in class where a discussion or review may include content from a substituted section. As these types of discussions sometimes occur spontaneously, please understand that we cannot ensure students will not surface this content in class. If, as the parent/guardian you exercise your right to substitute your child's learning experience, it is imperative that you have conversations with your child about this content.

**If you are returning this form to exercise your right to substitute your child's experience from classroom instruction to an individualized experience, please sign below. The teacher and/or principal will contact you to discuss a plan to best meet the needs of your child during instruction.**

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**IF YOU WISH TO SUBSTITUTE YOUR CHILD'S LEARNING EXPERIENCE FROM ANY ASPECT OF THE HEALTH CURRICULUM, PLEASE RETURN THIS FORM TO THE TEACHER SO THEY CAN FOLLOW UP WITH YOU.**

SCHOOL \_\_\_\_\_ DATE \_\_\_\_\_

STUDENT NAME \_\_\_\_\_ TEACHER NAME \_\_\_\_\_

PARENT/GUARDIAN NAME (printed) \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

## GRADE 6 COURSE DESCRIPTION

### INTRODUCTION

In accordance with the requirements of the State of Oregon, the Molalla River School District School Board has adopted a Comprehensive Sexuality Education Program.

Copies of the Comprehensive Sexuality Education standards, the curriculum for each grade level, textbooks, and other materials are available for public review and have gone through such a process before the approval from the school board for purchasing. Some of these materials are available at your child's school, so please check with your principal and/or child's health teacher first.

Comprehensive Sexuality Education program materials will be made available to parents or guardians upon request. Annually, you will receive a letter outlining the program and topics to be discussed in the classroom.

Although Comprehensive Sexuality Education Programs are designed to assist and support parents and guardians as they educate their children, some parents/guardians may choose to have their children participate in an individualized learning experience as an alternative to instruction of certain standards. Please carefully consider the educational opportunities your child may be missing before substituting an individualized learning experience for your child.

If you exercise your option to substitute your child's learning experience for any part of the Comprehensive Sexuality Education program, your child will spend that time outside the classroom in a designated area to be determined by the school's administrator (e.g. the library, the Den). Your child will not be penalized if you exercise this option. Your child will be expected to work independently during that time with minimum adult supervision.

Please read the standards carefully. Molalla River School District believes the program is important for your child. We look forward to working with parents and guardians to help provide this program to our children.

**If you have any questions, please contact your child's teacher.**

## **GRADE 6 STANDARDS**

### **Strand 5: Comprehensive Sexual Health (CSE)**

#### **Standard 1 : Core Concepts (CC)**

HE.1.6.16 Identify the human sexual and reproductive systems including body parts and their functions.

HE.1.6.18 Define sexual abstinence as it relates to pregnancy prevention.

HE.1.6.20 Describe health care practices related to physical changes during puberty.

HE.1.6.22 Describe the physical, social, cognitive and emotional changes of adolescence.

HE.1.6.25 Define sexual intercourse and its relationship to human reproduction.

HE.1.6.27 Identify everyone has the right to say who touches their body and how.

HE.1.6.32 Discuss how to build and maintain healthy family, peer, and dating relationships.

HE.1.6.40 Identify the potential impacts of power differences such as age, status or position within relationships, including friendships.

HE.1.6.41 Identify consent as a freely given yes.

#### **Standard 2 : Analyzing Influences (INF)**

HE.2.6.18 Examine how school and public health policies can influence health promotion and disease prevention.

HE.2.6.21 Explain how family and friends can influence one's beliefs about what constitutes a healthy intimate relationship.

#### **Standard 3 : Accessing Information (AI)**

HE.3.6.6 Identify valid and reliable school and community resources for those who may be impacted by addiction, mental/emotional health issues, suicide, and/or other health related issues.

HE.3.6.7 Identify sources of medically-accurate information about human sexual and reproductive anatomy.

HE.3.6.8 Identify resources, including people at home, school or in the community who can provide medically accurate information and/or support about puberty and health care practices during puberty.

HE.3.6.11 Identify sources of support, such as parents or other trusted adults, including school staff they can tell if they are experiencing sexual abuse.

#### **Standard 4 : Interpersonal Communication (IC)**

HE.4.6.7 Explain effective ways to communicate personal boundaries and show respect for the boundaries of others.

#### **Standard 5 : Decision Making (DM)**

HE.4.6.10 Explain effective communication skills to ensure affirmative consent in all sexual relationships.

#### **Standard 6 : Goal Setting (GS)**

HE.6.6.10 Identify a personal goal to treat your partners with dignity and respect.

HE.6.6.11 Identify a personal goal to be treated with dignity and respect.

Standard 7 : Self-Management (SM)

HE.7.6.12 Describe ways to manage the physical and emotional changes associated with puberty, including personal health care practices.

HE.7.6.14 List criteria for evaluating the health of a relationship.

HE 7.6.15 List ways to treat your friends, family and partner with dignity and respect.

Standard 8 : Advocacy (ADV)

HE.8.6.9 Investigate school policies and programs that promote healthy relationships and a safe and inclusive environment for all.

**Molalla River District  
Comprehensive Sexuality Education  
GRADE 6 Parent/Guardian Individualized Learning Experience Substitution Form**

**If your child will participate in this health instruction, you do NOT need to return this form.** If you do NOT want your child to receive instruction in any of these standards, please fill out the form below and return it to your child's teacher. Your child will be given an individualized assignment in place of the instruction. This assignment is expected to be similar in nature, length and depth of the substituted standards.

It is important to understand that in a student-centered approach to education that utilizes student dialogue, there may be times when your child is in class where a discussion or review may include content from a substituted section. As these types of discussions sometimes occur spontaneously, please understand that we cannot ensure students will not surface this content in class. If, as the parent/guardian you exercise your right to substitute your child's learning experience, it is imperative that you have conversations with your child about this content.

**If you are returning this form to exercise your right to substitute your child's experience from classroom instruction to an individualized experience, please sign below. The teacher and/or principal will contact you to discuss a plan to best meet the needs of your child during instruction.**

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**IF YOU WISH TO SUBSTITUTE YOUR CHILD'S LEARNING EXPERIENCE FROM ANY ASPECT OF THE HEALTH CURRICULUM, PLEASE RETURN THIS FORM TO THE TEACHER SO THEY CAN FOLLOW UP WITH YOU.**

**SCHOOL** \_\_\_\_\_ **DATE** \_\_\_\_\_

**STUDENT NAME** \_\_\_\_\_ **TEACHER NAME** \_\_\_\_\_

**PARENT/GUARDIAN NAME (printed)** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_ **EMAIL ADDRESS** \_\_\_\_\_

**PARENT/GUARDIAN SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

## **GRADE 7/8 COURSE DESCRIPTION**

### **INTRODUCTION**

In accordance with the requirements of the State of Oregon, the Molalla River School District School Board has adopted a Comprehensive Sexuality Education Program. Topics covered in Comprehensive Sexuality Education are based on the strands with standards related to prevention of control of disease, promotion of mental, social, and emotional health, promotion of sexual health, and violence and suicide prevention.

Copies of the Comprehensive Sexuality Education standards, the curriculum for each grade level, textbooks, and other materials are available for public review and have gone through such a process before the approval from the school board for purchasing. Some of these materials are available at your child's school, so please check with your principal and/or child's health teacher first.

Comprehensive Sexuality Education program materials will be made available to parents or guardians upon request. Annually, you will receive a letter outlining the program and topics to be discussed in the classroom.

Although Comprehensive Sexuality Education Programs are designed to assist and support parents and guardians as they educate their children, some parents/guardians may choose to have their children participate in an individualized learning experience as an alternative to instruction of certain standards. Please carefully consider the educational opportunities your child may be missing before substituting an individualized learning experience for your child.

If you exercise your option to substitute your child's learning experience for any part of the Comprehensive Sexuality Education program, your child will spend that time outside the classroom in a designated area to be determined by the school's administrator (e.g. the media center). Your child will not be penalized if you exercise this option. Your child will be expected to work independently during that time with minimum adult supervision.

Please read the standards carefully. Molalla River School District believes the program is important for your child. We look forward to working with parents and guardians to help provide this program to our children.

**If you have any questions, please contact your child's teacher.**

## **GRADE 7/8 STANDARDS:**

### **Strand 5: Comprehensive Sexual Health (CSE)**

#### **Standard 1 : Core Concepts (CC)**

- HE.1.8.17 Explain the human sexual and reproductive systems including body parts and their functions.
- HE.1.8.19 Explain how sexual abstinence relates to pregnancy prevention.
- HE.1.8.20 Explain how HIV and STDs can be spread through sexual contact with someone who has HIV/STD.
- HE.1.8.21 Explain the health care practices related to physical changes during puberty.
- HE.1.8.22 Explain the differences biological sex, sexual orientation, and gender identity and expression.
- HE.1.8.23 Explain the physical, social, cognitive and emotional changes of adolescence.
- HE.1.8.26 Explain sexual intercourse and its relationship to human reproduction.
- HE.1.8.28 Explain why everyone has the right to say who touches their body and how.
- HE.1.8.29 Discuss the range of ways people express affection within various types of relationships.
- HE.1.8.30 Assess how forms of bullying, cyberbullying, harassment, discrimination, and violence can affect health and safety.
- HE.1.8.32 Discuss situations and behaviors that constitute bullying, sexual harassment, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence.
- HE.1.8.33 Compare and contrast the differences between physical, verbal, relational, sexual, and dating violence.
- HE.1.8.34 Discuss how to build and maintain healthy family, peer, and dating relationships.
- HE.1.8.36 Explain various methods of contraception, including abstinence, condoms, and emergency contraception.
- HE.1.8.37 Explain that sexuality includes a multitude of sexual expressions and behaviors that are a normal part of being human.
- HE.1.8.38 Explain the health benefits, risks and effectiveness rates of various methods of contraception, including abstinence, condoms, and emergency contraception.
- HE.1.8.39 Explain the differences between the myths and facts of how STDs are transmitted and not transmitted.
- HE.1.8.40 Explain ways to prevent HIV and other STDs.
- HE.1.8.41 List the reasons why it is important to get tested for HIV and other STDs when people are sexually active.
- HE.1.8.42 Discuss the potential impacts of power differences such as age, status or position within relationships.
- HE.1.8.43 Identify prenatal practices that can contribute to a healthy pregnancy.
- HE.1.8.44 Discuss consent as a freely given yes.
- HE.1.8.45 Demonstrate an understanding of how affirmative consent mitigates the impact and consequences of sexual pressure.
- HE.1.8.46 Discuss that no one has the right to touch anyone else without giving and receiving consent.
- HE.1.8.47 Discuss why a person who has been raped or sexually assaulted is not at fault.
- HE.1.8.48 Describe the signs, symptoms, and stages of a pregnancy.
- HE.1.8.49 Identify physical, emotional, and social effects of sexual activity.
- HE.1.8.50 Discuss the impacts of bullying, sexual harassment, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence.



Standard 2 : Analyzing Influences (INF)

HE.2.8.20 Assess factors that may influence condom use and other safer sex decisions.

HE.2.8.21 Analyze how family and friends can influence one's decisions within a healthy intimate relationship.

HE.2.8.22 Assess external influences and societal messages that impact attitudes about sexual, dating, and domestic violence.

HE.2.8.23 Analyze factors that can affect the ability to give or perceive the provision of consent to sexual activity.

HE.2.8.24 Assess influences that may have an impact on deciding whether or when to engage in sexual behaviors.

HE.2.8.25 Analyze how our values impact our sexual health-related decisions.

HE.2.8.26 Assess internal and external influences on decisions about pregnancy options and parenthood.

Standard 3 : Accessing Information (AI)

HE.3.8.7 Access sources of medically-accurate information about human sexual and reproductive anatomy.

HE.3.8.8 Access medically accurate sources of information about puberty, development and sexuality.

HE.3.8.9 Access accurate information about healthy sexuality, including sexual orientation and gender identity.

HE.3.8.11 Assess sources of support such as parents or other trusted adults they can tell if they are being teased, harassed or bullied based on gender identity, sexual orientation, and gender expression.

HE.3.8.13 Select school and community resources for reporting child abuse.

HE.3.8.14 Access medically-accurate information about STDs and HIV transmission and prevention.

HE.3.8.15 Access medically-accurate resources that provide assistance around sexual health, pregnancy, and emergency contraception.

HE.3.8.16 Access medically-accurate sources of pregnancy-related information and support including pregnancy options, safe surrender policies and prenatal care.

Standard 4 : Interpersonal Communication (IC)

HE.4.8.8 Demonstrate effective communication skills to report and/or access help in dangerous situations.

HE.4.8.9 Demonstrate the use of effective communication about the use of contraception including abstinence, condoms, and other safer sex practices.

HE.4.8.10 Demonstrate effective communication skills to ensure affirmative consent in all sexual relationships.

HE.4.8.11 Demonstrate skills to communicate with a partner about STD and HIV prevention, testing and disclosure of status.

HE.4.8.13 Demonstrate asking for help and support if they or someone they know is in an abusive relationship.

HE.4.8.15 Demonstrate ways to communicate decisions about whether or when to engage in sexual behaviors and to practice safer sex.

Standard 5 : Decision Making (DM)

HE.5.8.10 Assess a decision making process to make healthy choices around sexual health.

HE.5.8.11 Assess a decision making process to give or receive consent for consensual sexual activity.

Standard 6 : Goal Setting (GS)

HE.6.8.9 Develop a goal and practice methods to prevent and reduce interpersonal violence (physical, verbal, emotional and sexual violence).

HE.6.8.10 Establish a personal goal to not have sex until you're ready.

HE.6.8.11 Establish a personal goal to use protection when sexually active.

HE.6.8.13 Develop a plan to eliminate or reduce risk for STDs, including HIV.

Standard 7 : Self-Management (SM)

HE.7.8.10 Demonstrate ways to treat yourself and others with dignity and respect, with regard to gender, gender identity, gender expression, and sexual orientation.

HE.7.8.13 Demonstrate the steps to correctly use a condom.

HE.7.8.16 Demonstrate effective ways to communicate personal boundaries and respect the boundaries of your partners when using technology and social media in a relationship.

Standard 8 : Advocacy (ADV)

HE.8.8.8 Advocate for personal health practices that prevent the spread of HIV/AIDS and Hepatitis B and C.

HE.8.8.9 Advocate for informed personal decision-making around sexual activity as it relates to pregnancy, reproduction, and preventing STD/STI's.

**Molalla River School District  
Comprehensive Sexuality Education  
GRADE 7/8 Parent/Guardian Individualized Learning Experience Substitution Form**

**If your child will participate in this health instruction, you do NOT need to return this form.** If you do NOT want your child to receive instruction in any of these standards, please fill out the form below and return it to your child's teacher. Your child will be given an individualized assignment in place of the instruction. This assignment is expected to be similar in nature, length and depth of the substituted standards.

It is important to understand that in a student-centered approach to education that utilizes student dialogue, there may be times when your child is in class where a discussion or review may include content from a substituted section. As these types of discussions sometimes occur spontaneously, please understand that we cannot ensure students will not surface this content in class. If, as the parent/guardian you exercise your right to substitute your child's learning experience, it is imperative that you have conversations with your child about this content.

**If you are returning this form to exercise your right to substitute your child's experience from classroom instruction to an individualized experience, please sign below. The teacher and/or principal will contact you to discuss a plan to best meet the needs of your child during instruction.**

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**IF YOU WISH TO SUBSTITUTE YOUR CHILD'S LEARNING EXPERIENCE FROM ANY ASPECT OF THE HEALTH CURRICULUM, PLEASE RETURN THIS FORM TO THE TEACHER SO THEY CAN FOLLOW UP WITH YOU.**

**SCHOOL** \_\_\_\_\_ **DATE** \_\_\_\_\_

**STUDENT NAME** \_\_\_\_\_ **TEACHER NAME** \_\_\_\_\_

**PARENT/GUARDIAN NAME (printed)** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_ **EMAIL ADDRESS** \_\_\_\_\_

**PARENT/GUARDIAN SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

# HIGH SCHOOL HEALTH 1

## COURSE DESCRIPTION

### INTRODUCTION

In accordance with the requirements of the State of Oregon, the Molalla River School District School Board has adopted a Comprehensive Sexuality Education Program. Topics covered in Comprehensive Sexuality Education are based on the strands with standards related to prevention of control of disease, promotion of mental, social, and emotional health, promotion of sexual health, and violence and suicide prevention.

Copies of the Comprehensive Sexuality Education standards, the curriculum for each grade level, textbooks, and other materials are available for public review and have gone through such a process before the approval from the school board for purchasing. Some of these materials are available at your child's school, so please check with your principal and/or child's health teacher first.

Comprehensive Sexuality Education program materials will be made available to parents or guardians upon request. Annually, you will receive a letter outlining the program and topics to be discussed in the classroom.

Although Comprehensive Sexuality Education Programs are designed to assist and support parents and guardians as they educate their children, some parents/guardians may choose to have their children participate in an individualized learning experience as an alternative to instruction of certain standards. Please carefully consider the educational opportunities your child may be missing before substituting an individualized learning experience for your child.

If you exercise your option to substitute your child's learning experience for any part of the Comprehensive Sexuality Education program, your child will spend that time outside the classroom in a designated area to be determined by the school's administrator (e.g. the media center). Your child will not be penalized if you exercise this option. Your child will be expected to work independently during that time with minimum adult supervision.

Please read the standards carefully. Molalla River School District believes the program is important for your child. We look forward to working with parents and guardians to help provide this program to our children.

**If you have any questions, please contact your child's teacher.**

## **HIGH SCHOOL HEALTH 1 STANDARDS:**

### **Strand 5: Comprehensive Sexual Health (CSE)**

#### Standard 1 : Core Concepts (CC)

HE.1.12.13 Compare and contrast human sexual and reproductive systems including body parts and their functions.

HE.1.12.14 Define contraceptive methods including emergency contraception and describe their mechanism of action.

HE.1.12.15 Identify health care practices related to physical changes during adolescent development and early adulthood.

HE.1.12.16 Differentiate between biological sex, sexual orientation, sexual identity and sexual behavior, gender identity and gender expression.

HE.1.12.17 Explain how brain development has an impact on cognitive, social and emotional changes of adolescence and early adulthood.

HE.1.12.20 Describe the human sexual response cycle, including the role hormones play.

HE.1.12.21 Describe the laws related to sexual health care services, including confidential testing and treatment; and disclosure of STD status.

HE.1.12.22 Describe characteristics of healthy and unhealthy romantic and/or sexual relationships.

HE.1.12.23 Explain characteristics of a healthy relationship that is free from threats, coercion or abuse.

HE.1.12.24 Express that everyone has the right to say who touches their body and how.

HE.1.12.25 Express that it is never ok to touch someone, or make someone touch you if they don't want to.

HE.1.12.26 Describe a range of ways to express affection within healthy relationships.

HE.1.12.27 Discuss the impacts of bullying, sexual harassment, sexual abuse, sexual assault, incest, rape, stalking, and dating violence.

HE.1.12.28 Define sexual consent and explain its implications for sexual decision-making

HE.1.12.30 Explain Oregon's laws related to bullying, sexual harassment, coercion, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence.

HE.1.12.31 Identify the laws related to reproductive and sexual health care service (i.e., confidentiality, contraception, pregnancy options, safe surrender policies, prenatal care).

HE.1.12.32 Explain Oregon laws relating to minors' rights around contraception pregnancy, adoption, abortion and parenting.

HE.1.12.33 Describe the importance of getting tested for HIV and other STDs when people are sexually active.

HE.1.12.34 Explain that sexuality includes a multitude of sexual expressions and behaviors that are a normal part of being human.

HE.1.12.35 Describe prenatal practices that can contribute to a healthy pregnancy and possible risk factors. (i.e. healthy nutrition, behaviors, etc.)

HE.1.12.36 Define affirmative consent as a freely given enthusiastic yes.

HE.1.12.37 Demonstrate an understanding of how affirmative consent mitigates the impact and consequences of sexual pressure.

HE.1.12.38 Recognize that many teens successfully use condoms.

HE.1.12.39 Discuss laws related to sex and sexual health.

HE.1.12.40 Explain how fertilization occurs, the stages of pregnancy, and responsibility of parenting.

HE.1.12.41 Explain the ovulation cycle and its relationship to fertilization and pregnancy.

HE.1.12.42 Compare and contrast situations and behaviors that may constitute bullying, sexual harassment, coercion, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence

#### Standard 2 : Analyzing Influences (INF)

HE.2.12.15 Analyze factors that may influence condom use and other safer sex decisions.

HE.2.12.16 Analyze external influences that can impact one's decisions within a healthy intimate relationship.

HE.2.12.17 Analyze the external influences and societal messages that impact attitudes about bullying, sexual harassment, coercion, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence.

HE.2.12.18 Analyze factors that can affect the ability to give or perceive the provision of consent to sexual activity.

HE.2.12.19 Analyze influences that may have an impact on deciding whether or when to engage in sexual behaviors.

HE.2.12.20 Analyze how our values impact our sexual health-related decisions.

HE.2.12.21 Analyze internal and external influences on decisions about pregnancy options and parenthood.

#### Standard 3 : Accessing Information (AI)

HE.3.12.5 Access community resources that provide medically-accurate information about adolescent sexual anatomy and reproductive health..

HE.3.12.6 Access medically-accurate information and resources about pregnancy, pregnancy options, including parenting, abortion, and adoption, prenatal care and services.

HE.3.12.7 Access accurate information about healthy sexuality, including sexual orientation and gender identity.

HE.3.12.9 Access accurate information and resources for survivors of sexual abuse, incest, rape, sexual harassment, sexual assault, domestic violence, dating violence, and stalking.

HE.3.12.11 Access medically-accurate information about STDs and HIV transmission and prevention, including local STD and HIV testing and treatment services with support for disclosure of STD status.

HE.3.12.12 Access medically-accurate information and resources about contraceptive methods, including abstinence, emergency contraception, and condoms.

#### Standard 4 : Interpersonal Communication (IC)

HE.4.12.7 Demonstrate the use of effective communication about the use of contraception including abstinence, condoms, and other safer sex practices.

HE.4.12.8 Practice effective communication skills to ensure affirmative consent in all sexual relationships.

HE.4.12.9 Demonstrate skills to communicate decisions about whether or when to engage in sexual behaviors, and to practice safer sex, including STD and HIV prevention, and STD and HIV testing and disclosure of status.

HE.4.12.11 Demonstrate asking for help and support, if they or someone they know is being hurt or feels unsafe in an intimate or sexual relationship.

#### Standard 5 : Decision Making (DM)

HE.5.12.9 Model a decision making process to make healthy choices around sexual health.

HE.5.12.10 Apply a decision making process to promote consensual sexual activity within healthy relationships.

Standard 6 : Goal Setting (GS)

HE.6.12.6 Set a personal goal to not have sex until you're ready.

HE.6.12.7 Set a personal goal to use protection when sexually active.

HE.6.12.9 Develop short and long-term goals to maintain sexual health.

Standard 7 : Self-Management (SM)

HE.7.12.4 Demonstrate ways to treat yourself and others with dignity and respect, with regard to gender, gender identity, gender expression, and sexual orientation.

HE.7.12.5 Explain individual responsibility for testing and informing partners about STDs and HIV status.

HE.7.12.7 Demonstrate on anatomical models, or list the steps for how to perform breast, testicular, and genital self-exams.

HE.7.12.8 Demonstrate the steps to correctly use a condom and/or other barrier methods.

HE.7.12.11 Demonstrate how to set and respect boundaries around social media and technology use in relationships.

Standard 8 : Advocacy (ADV)

HE.8.12.9 Advocate for access to products, services and medical care to maintain sexual and reproductive health.

HE.8.12.10 Advocate for use of products, services and medical care to maintain sexual and reproductive health.

**Molalla River School District  
Comprehensive Sexuality Education  
HIGH SCHOOL HEALTH 1 Parent/Guardian Individualized Learning Experience Substitution  
Form**

**If your child will participate in this health instruction, you do NOT need to return this form.** If you do NOT want your child to receive instruction in any of these standards, please fill out the form below and return it to your child's teacher. Your child will be given an individualized assignment in place of the instruction. This assignment is expected to be similar in nature, length and depth of the substituted standards.

It is important to understand that in a student-centered approach to education that utilizes student dialogue, there may be times when your child is in class where a discussion or review may include content from a substituted section. As these types of discussions sometimes occur spontaneously, please understand that we cannot ensure students will not surface this content in class. If, as the parent/guardian you exercise your right to substitute your child's learning experience, it is imperative that you have conversations with your child about this content.

**If you are returning this form to exercise your right to substitute your child's experience from classroom instruction to an individualized experience, please sign below. The teacher and/or principal will contact you to discuss a plan to best meet the needs of your child during instruction.**

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**IF YOU WISH TO SUBSTITUTE YOUR CHILD'S LEARNING EXPERIENCE FROM ANY ASPECT OF THE HEALTH CURRICULUM, PLEASE RETURN THIS FORM TO THE TEACHER SO THEY CAN FOLLOW UP WITH YOU.**

**SCHOOL \_\_\_\_\_ DATE \_\_\_\_\_**

**STUDENT NAME \_\_\_\_\_ TEACHER NAME \_\_\_\_\_**

**PARENT/GUARDIAN NAME (printed) \_\_\_\_\_**

**PHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_**

**PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_**



## **HIGH SCHOOL HEALTH 2**

### **COURSE DESCRIPTION**

#### **INTRODUCTION**

In accordance with the requirements of the State of Oregon, the Molalla River School District School Board has adopted a Comprehensive Sexuality Education Program. Topics covered in Comprehensive Sexuality Education are based on the strands with standards related to prevention of control of disease, promotion of mental, social, and emotional health, promotion of sexual health, and violence and suicide prevention..

Copies of the Comprehensive Sexuality Education standards, the curriculum for each grade level, textbooks, and other materials are available for public review and have gone through such a process before the approval from the school board for purchasing. Some of these materials are available at your child's school, so please check with your principal and/or child's health teacher first.

Comprehensive Sexuality Education program materials will be made available to parents or guardians upon request. Annually, you will receive a letter outlining the program and topics to be discussed in the classroom.

Although Comprehensive Sexuality Education Programs are designed to assist and support parents and guardians as they educate their children, some parents/guardians may choose to have their children participate in an individualized learning experience as an alternative to instruction of certain standards. Please carefully consider the educational opportunities your child may be missing before substituting an individualized learning experience for your child.

If you exercise your option to substitute your child's learning experience for any part of the Comprehensive Sexuality Education program, your child will spend that time outside the classroom in a designated area to be determined by the school's administrator (e.g. the media center). Your child will not be penalized if you exercise this option. Your child will be expected to work independently during that time with minimum adult supervision.

Please read the standards carefully. Molalla River School District believes the program is important for your child. We look forward to working with parents and guardians to help provide this program to our children.

**If you have any questions, please contact your child's teacher.**

## **HIGH SCHOOL HEALTH 2 STANDARDS:**

### **Strand 5: Comprehensive Sexual Health (CSE)**

#### Standard 1 : Core Concepts (CC)

HE.1.12.13 Compare and contrast human sexual and reproductive systems including body parts and their functions.

HE.1.12.14 Define contraceptive methods including emergency contraception and describe their mechanism of action.

HE.1.12.15 Identify health care practices related to physical changes during adolescent development and early adulthood.

HE.1.12.16 Differentiate between biological sex, sexual orientation, sexual identity and sexual behavior, gender identity and gender expression.

HE.1.12.17 Explain how brain development has an impact on cognitive, social and emotional changes of adolescence and early adulthood.

HE.1.12.20 Describe the human sexual response cycle, including the role hormones play.

HE.1.12.21 Describe the laws related to sexual health care services, including confidential testing and treatment; and disclosure of STD status.

HE.1.12.22 Describe characteristics of healthy and unhealthy romantic and/or sexual relationships.

HE.1.12.23 Explain characteristics of a healthy relationship that is free from threats, coercion or abuse.

HE.1.12.24 Express that everyone has the right to say who touches their body and how.

HE.1.12.25 Express that it is never ok to touch someone, or make someone touch you if they don't want to.

HE.1.12.26 Describe a range of ways to express affection within healthy relationships.

HE.1.12.27 Discuss the impacts of bullying, sexual harassment, sexual abuse, sexual assault, incest, rape, stalking, and dating violence.

HE.1.12.28 Define sexual consent and explain its implications for sexual decision-making

HE.1.12.30 Explain Oregon's laws related to bullying, sexual harassment, coercion, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence.

HE.1.12.31 Identify the laws related to reproductive and sexual health care service (i.e., confidentiality, contraception, pregnancy options, safe surrender policies, prenatal care).

HE.1.12.32 Explain Oregon laws relating to minors' rights around contraception pregnancy, adoption, abortion and parenting.

HE.1.12.33 Describe the importance of getting tested for HIV and other STDs when people are sexually active.

HE.1.12.34 Explain that sexuality includes a multitude of sexual expressions and behaviors that are a normal part of being human.

HE.1.12.35 Describe prenatal practices that can contribute to a healthy pregnancy and possible risk factors. (i.e. healthy nutrition, behaviors, etc.)

HE.1.12.36 Define affirmative consent as a freely given enthusiastic yes.

HE.1.12.37 Demonstrate an understanding of how affirmative consent mitigates the impact and consequences of sexual pressure.

HE.1.12.38 Recognize that many teens successfully use condoms.

HE.1.12.39 Discuss laws related to sex and sexual health.

HE.1.12.40 Explain how fertilization occurs, the stages of pregnancy, and responsibility of parenting.

HE.1.12.41 Explain the ovulation cycle and its relationship to fertilization and pregnancy.

HE.1.12.42 Compare and contrast situations and behaviors that may constitute bullying, sexual harassment, coercion, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence

#### Standard 2 : Analyzing Influences (INF)

HE.2.12.15 Analyze factors that may influence condom use and other safer sex decisions.

HE.2.12.16 Analyze external influences that can impact one's decisions within a healthy intimate relationship.

HE.2.12.17 Analyze the external influences and societal messages that impact attitudes about bullying, sexual harassment, coercion, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence.

HE.2.12.18 Analyze factors that can affect the ability to give or perceive the provision of consent to sexual activity.

HE.2.12.19 Analyze influences that may have an impact on deciding whether or when to engage in sexual behaviors.

HE.2.12.20 Analyze how our values impact our sexual health-related decisions.

HE.2.12.21 Analyze internal and external influences on decisions about pregnancy options and parenthood.

#### Standard 3 : Accessing Information (AI)

HE.3.12.5 Access community resources that provide medically-accurate information about adolescent sexual anatomy and reproductive health..

HE.3.12.6 Access medically-accurate information and resources about pregnancy, pregnancy options, including parenting, abortion, and adoption, prenatal care and services.

HE.3.12.7 Access accurate information about healthy sexuality, including sexual orientation and gender identity.

HE.3.12.9 Access accurate information and resources for survivors of sexual abuse, incest, rape, sexual harassment, sexual assault, domestic violence, dating violence, and stalking.

HE.3.12.11 Access medically-accurate information about STDs and HIV transmission and prevention, including local STD and HIV testing and treatment services with support for disclosure of STD status.

HE.3.12.12 Access medically-accurate information and resources about contraceptive methods, including abstinence, emergency contraception, and condoms.

#### Standard 4 : Interpersonal Communication (IC)

HE.4.12.7 Demonstrate the use of effective communication about the use of contraception including abstinence, condoms, and other safer sex practices.

HE.4.12.8 Practice effective communication skills to ensure affirmative consent in all sexual relationships.

HE.4.12.9 Demonstrate skills to communicate decisions about whether or when to engage in sexual behaviors, and to practice safer sex, including STD and HIV prevention, and STD and HIV testing and disclosure of status.

HE.4.12.11 Demonstrate asking for help and support, if they or someone they know is being hurt or feels unsafe in an intimate or sexual relationship.

#### Standard 5 : Decision Making (DM)

HE.5.12.9 Model a decision making process to make healthy choices around sexual health.

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Standard 6 : Goal Setting (GS)

HE.6.12.6 Set a personal goal to not have sex until you're ready.

HE.6.12.7 Set a personal goal to use protection when sexually active.

HE.6.12.9 Develop short and long-term goals to maintain sexual health.

Standard 7 : Self-Management (SM)

HE.7.12.4 Demonstrate ways to treat yourself and others with dignity and respect, with regard to gender, gender identity, gender expression, and sexual orientation.

HE.7.12.5 Explain individual responsibility for testing and informing partners about STDs and HIV status.

HE.7.12.7 Demonstrate on anatomical models, or list the steps for how to perform breast, testicular, and genital self-exams.

HE.7.12.8 Demonstrate the steps to correctly use a condom and/or other barrier methods.

HE.7.12.11 Demonstrate how to set and respect boundaries around social media and technology use in relationships.

Standard 8 : Advocacy (ADV)

HE.8.12.9 Advocate for access to products, services and medical care to maintain sexual and reproductive health.

HE.8.12.10 Advocate for use of products, services and medical care to maintain sexual and reproductive health.

**Molalla River School District  
Comprehensive Sexuality Education  
HIGH SCHOOL HEALTH 2 Parent/Guardian Individualized Learning Experience Substitution  
Form**

**If your child will participate in this health instruction, you do NOT need to return this form.** If you do NOT want your child to receive instruction in any of these standards, please fill out the form below and return it to your child's teacher. Your child will be given an individualized assignment in place of the instruction. This assignment is expected to be similar in nature, length and depth of the substituted standards.

It is important to understand that in a student-centered approach to education that utilizes student dialogue, there may be times when your child is in class where a discussion or review may include content from a substituted section. As these types of discussions sometimes occur spontaneously, please understand that we cannot ensure students will not surface this content in class. If, as the parent/guardian you exercise your right to substitute your child's learning experience, it is imperative that you have conversations with your child about this content.

**If you are returning this form to exercise your right to substitute your child's experience from classroom instruction to an individualized experience, please sign below. The teacher and/or principal will contact you to discuss a plan to best meet the needs of your child during instruction.**

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**IF YOU WISH TO SUBSTITUTE YOUR CHILD'S LEARNING EXPERIENCE FROM ANY ASPECT OF THE HEALTH CURRICULUM, PLEASE RETURN THIS FORM TO THE TEACHER SO THEY CAN FOLLOW UP WITH YOU.**

**SCHOOL** \_\_\_\_\_ **DATE** \_\_\_\_\_

**STUDENT NAME** \_\_\_\_\_ **TEACHER NAME** \_\_\_\_\_

**PARENT/GUARDIAN NAME (printed)** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_ **EMAIL ADDRESS** \_\_\_\_\_

**PARENT/GUARDIAN SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

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# **GUIDELINES FOR PARENT/COMMUNITY INVOLVEMENT AND CONTACT FLOWCHART**

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## **Guidelines for Parent/Community Involvement and Communication**

### **Introduction:**

An important element in the successful implementation of a Comprehensive Sexuality Education Plan is parent/guardian/community involvement. A theme that runs throughout the program is the parent/guardian/teacher team approach to Comprehensive Sexuality Education. Because of the sensitive nature of program content, a planned approach to parent/community involvement is critical.

### **Plan for Parent/Guardian/Community Involvement:**

It is recommended that in each school district that offers Comprehensive Sexuality Education, a community involvement team should be identified, such as our MRSD Health Advisory Committee. This may include anyone from the district office personnel, administrators, teachers, school board members, parents, a member of the medical and mental health profession.

Parents/guardians and community-based personnel are encouraged to participate in all information forums, feedback loops, and committee meetings.

### **Parent/Guardian Involvement Activities:**

Oregon Department of Education staff members provide information sessions on Comprehensive Sexuality Education and related topics by request. Molalla River School District worked alongside ODE experts in coming up with this plan. Each teacher of the Comprehensive Sexuality Education plan is asked to communicate with parents and students involved in the program.

In the spring of 2018, during the parent/guardian/community information forum, everyone had the opportunity to have access to the standards, new legislation, FAQ, Q&A, as well as the proposed curriculum materials. Following this session, the feedback was then used to refine the proposal that was approved by the school board related to the curriculum that was to be purchased. This document completed the process for approval in April, 2018 for the instruction related to Comprehensive Sexuality Education.

## MRMS Contact Flowchart

### ***Oregon Department of Education***

- Why and how were these standards chosen?
- What is the legislation that impacts what my students learn in school?
- **Contact: Ely Sanders – Sexual Health and School Health Specialist**  
**Email: [ely.sanders@state.or.us](mailto:ely.sanders@state.or.us) Phone: 503-947-5904**

### ***MRMS District Office***

- How do we adopt materials for us in the classroom?
- What are the MRMS policies regarding CSEP?
- How can I get involved in the Advisory Committee or find information about communication of CSEP?
- **Contact: Kathleen French ([kathleen.french@molallariv.k12.or.us](mailto:kathleen.french@molallariv.k12.or.us))**

### ***School Site***

- What's the communication of when health will be taught?
- How do I review materials?
- How do I opt-out?
- **Contact: School Principal**

### ***Classroom***

- What's the communication of when CSEP lessons are taught?
- **Contact: Teacher**



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# **APPENDIX A**

## **STATE OF OREGON LEGISLATION REGARDING COMPREHENSIVE SEXUALITY EDUCATION**

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## STATE OF OREGON LEGISLATION REGARDING COMPREHENSIVE SEXUALITY EDUCATION

**In July of 2015, the Oregon Legislature passed Senate Bill 856 which requires schools to provide child sexual abuse prevention instruction in grades Kindergarten through 12.**

**Subsequently, the Oregon State Board of Education passed changes to Oregon Administrative Rule (OAR) 581-022-1440 (Human Sexuality Education):** *“As part of the comprehensive plan of human sexuality instruction, each school district board shall adopt a child sexual abuse prevention instructional program for students in kindergarten through grade 12 (OAR 581-022-1440).”*

This includes:

- A minimum of 4 instructional sessions (equal to or greater than a standard class period) of sex abuse prevention instruction per year for grades kindergarten through 12.
- Sexual abuse instruction is integrated and part of required district comprehensive sexuality education plan and is aligned with state standards.
- Instruction is age appropriate, medically accurate, and is not shame or fear based.
- Instruction is culturally inclusive and is responsive to diverse students including race, ethnicity, gender identity, and sexual orientation.
- A parental involvement component to inform parents about child sexual abuse topics.
- A professional training component for administrators, teachers, and other school personnel.
- An evaluation component with measurable outcomes.
- Trauma informed instruction and services.

### Comprehensive Sexuality Education and Healthy Teen Relationship Act

OAR 581-022-1440 (Human Sexuality Education) requires that each school teach comprehensive, age appropriate, medically accurate sexuality education. In addition to sex education topics like growth and development; STD, STI, and HIV instruction; and abstinence promotion, Oregon’s Comprehensive Sexuality Education (CSE) law requires instruction on child abuse prevention, healthy relationships, and goal setting. In addition, CSE incorporates instructional requirements of the Oregon Healthy Teen Relationship Act (HTRA) passed by the legislature in 2013 and modified in 2015. HTRA requires schools to incorporate age-appropriate education into new or existing training programs in grades 7-12 about teen dating violence and domestic violence.

The Human Sexuality Education Law (2009); the Healthy Teen Relationship Act (2013); and most recently, SB 856 Child Sexual Abuse prevention (2015) collectively contribute to the Oregon Department of Education’s (ODE) Human Sexuality OAR and sexual health benchmarks and standards. Aligned to national standards, Oregon’s benchmarks support health, wellbeing, and safety of students. In addition, Oregon law requires that: *Course material and instruction for all human sexuality education courses that discuss human sexuality in public elementary and secondary schools shall enhance students’ understanding of sexuality as a normal and healthy aspect of human development.* School districts can meet new student sex abuse prevention

instructional requirements by implementing and maintaining already required CSE instruction per OAR 581-022-1440. [4]

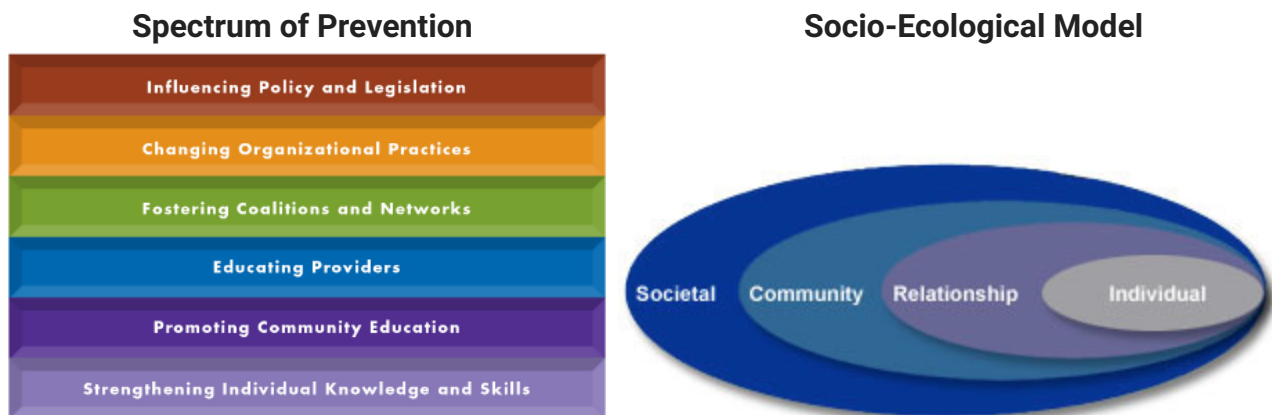
The Oregon Department of Education in partnership with over 20 community stakeholders specializing in child abuse and sexual violence prevention have developed the following guidance as a resource tool for school administrators.

## ODE PRINCIPLES OF EFFECTIVE PREVENTION EDUCATION

In the article **What Works in Prevention: Principles of Effective Prevention Programs**, the authors used a review-of-reviews approach across four areas (substance abuse, risky sexual behavior, school failure, and juvenile delinquency and violence) to identify characteristics consistently associated with effective prevention programs.

The characteristics below have been adapted to infuse a trauma informed and racial equity perspective. Students experience disparities in outcomes based on race, and so **culturally responsive practices**, a **trauma informed lens** and an **emphasis on building positive, safe relationships** with adults must be incorporated into any prevention program.

1. **Comprehensive:** Prevention strategies should include multiple types of activities, affect multiple settings, and go beyond awareness raising. Note: prevention is a component of a healthy sexuality education. There are several models of comprehensive prevention efforts, such as the Socio-ecological Model, and the Spectrum of Prevention (pictured below).



**Positive Relationships:** At the foundation of all programming, is a deliberate nurturing of strong and positive relationships between students and adults. Factors that contribute to positive relationships include school staffs' ability to have compassion and empathy for students' lived experiences, including experiencing trauma, racism and other forms of discrimination.

**Culturally Responsive:** Prevention strategies recognize the diverse cultural characteristics of learners as assets. Culturally responsive teaching empowers students intellectually, socially,

emotionally, and politically by using cultural reference to impart knowledge, skills, and attitudes. A culturally responsive prevention strategy recognizes that each school community, including those that have been historically oppressed, have powerful, and *often unrecognized*, sources of resilience and protective factors that must be honored through dialogue.

**Varied Teaching Methods:** Prevention strategies should include interactive, skills-based components, that are both culturally responsive and trauma informed. According to Erin Casey, “Factors likely to contribute to engagement and interaction include personal relevance of information or presenters, and opportunities to critically evaluate and discuss the content of the presentation.”

**Sufficient Dosage:** Participants in your prevention programming need to be exposed to enough of the activities for them to have an effect. Prevention programming needs to be delivered over multiple sessions so that the programming impacts participants’ knowledge, attitudes, beliefs, behaviors, and skill acquisition. This acquisition can only happen with the context of positive relationships with school staff, which also develops and grows over time.

**Theory Driven:** Prevention programming should be grounded in prevention theory and research. Effective prevention programming should also be driven by research and knowledge about cultural responsiveness and trauma-informed practices.

**Appropriately Timed:** Program activities should be research-informed regarding the developmentally appropriate time to be introduced to specific topics.

**Well-trained Staff:** Programs need to be implemented by staff members who are empathetic, competent, and have received sufficient training, support, and supervision.

**Outcome Evaluation:** A systematic outcome evaluation is necessary to determine whether a program or strategy worked.

### **Who Participated in the ODE Sexual Abuse and Sexual Violence Advisory Group?**

Agencies represented on the advisory group include:

- Impact Northwest, Communities for Safe Kids Program
- CARES Northwest (Child Abuse and Evaluation Services)
- The Kid’s Center, a child abuse intervention center
- Trauma-Informed Oregon
- The Oregon Network of Child Abuse Intervention Centers
- Multnomah County, Domestic and Sexual Violence Coordinating Office
- Oregon Health Authority, Adolescent and School Health Program
- Raphael House (Domestic Violence Agency).
- Jackson County Sexual Assault Resource Center
- Oregon Abuse Advocates and Survivors in Service
- Oregon Department of Education
- The Oregon Network of Child Abuse Intervention Centers

· Oregon Attorney General's Sexual Assault Task Force

**Where can I access the documents?**

ODE has posted guidance for implementation of SB 856 on our Sexuality Education Resources page: <http://www.ode.state.or.us/search/page/?id=1773>

**What if I have additional questions?**

ODE is happy to answer any questions you may have. In addition ODE may be able to provide technical assistance and/or training specific to comprehensive sexuality education and sexual violence prevention. For questions and assistance please contact:

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Sexual Health and School Health Specialist | **Oregon Department of Education**

Office of Learning | Student Services Unit

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## **APPENDIX B: GUIDELINES FOR TRAINING INDIVIDUALS WHO WILL BE TEACHING COMPREHENSIVE SEXUALITY EDUCATION**

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## GUIDELINES FOR TRAINING INDIVIDUALS WHO WILL BE TEACHING COMPREHENSIVE SEXUALITY EDUCATION

### INTRODUCTION:

Molalla River School District provides a Comprehensive Sexuality Education program which includes instruction that:

- Is age appropriate, medically accurate, and is not shame or fear based.
- Is culturally inclusive and is responsive to diverse students including race, ethnicity, gender identity, and sexual orientation.
- Provides information with the understanding of, and strength of, the preponderance of evidence.
- Is provided in a sensitive manner that acknowledges and supports students who have experienced trauma.
- In addition, disease prevention education for HIV/AIDS, sexually transmitted infections, sexually transmitted diseases, and the human sexuality education comprehensive plan **shall** provide adequate instruction at least annually, for all students grades 6-8 and at least twice during grades 9-12.
- And further, sexuality education materials, instructional strategies, and activities **must not, in any way**, use shame or fear based tactics.

In order to best do this, it is important to outline the training procedures for those who will be instructing this critical content to our children. Below, it is broken down into elementary and secondary school as certifications and trainings may differ.

### ELEMENTARY SCHOOL

To be in compliance with state legislation and aligned to the standards put out by ODE, MRSD elementary schools will follow the procedure related to our Comprehensive Sexuality Education Plan.

- SB 856 Compliance topics around Sex Abuse Prevention Education K-5 will be taught in four sessions by school counselors.
  - School counselors are trained by and will use the “Child Protection Unit” provided by Second Step. For more information about Second Step or to preview the units, please go to <http://www.cfchildren.org/child-protection> .
  - The curriculum contains teacher training materials that provide resources and support for teachers to recognize and respond to reports of abuse by students.
- All other topics will be taught at an age-appropriate level by a designated teacher at the grade level.
- 4th and 5th grade human sexuality content will be taught by the classroom teacher. Please refer to the MRSD course outlines for concrete content expectations per grade level.

## **SECONDARY SCHOOL**

To be in compliance with state legislation and aligned to the standards put out by ODE, MRSD secondary schools will follow the procedure related to our Comprehensive Sexuality Education Plan.

- SB 856 compliance topics around Sex Abuse Prevention Education in grades 6-12 will be taught in four sessions by classroom teachers in collaboration with Clackamas Women's Services.

In addition, SB 856 requires we include a parental involvement component to inform parents about child sexual abuse topics, including characteristics of offenders, "grooming" behaviors and how to discuss child sexual abuse prevention with children. To access more information, please click on the following links.

- [\(K-5\) Second Step](#)
- [\(6-12\) Clackamas Women's Services](#)
- For Reference: [Senate Bill 856](#)