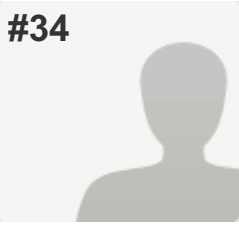


Ending the Epidemic Task Force Recommendation Form

#34



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PAGE 1

Q2: Title of your recommendation

Comprehensive Sexuality Education for all of New York's Students

Q3: Please provide a description of your proposed recommendation

NYS legislature should pass a law that requires the Commissioner of Education and Board of Regents to develop a regulation requiring all school districts to provide K-12 sexuality education, including a policy, essential curricular elements (including instruction regarding PrEP and PEP), and a plan for monitoring implementation and evaluation. Instruction shall be in alignment with the National Sexuality Education Standards (<http://www.futureofsexed.org/documents/josh-fose-standards-web.pdf>) and require that all students in grades K-12 receive a prescribed number of hours of instruction in elementary school, middle school and high school of comprehensive, age-appropriate, medically accurate, unbiased sexual health education.

The regulation should further require those who teach sexuality education to receive appropriate and ongoing training. A sexuality education mandate must come with a substantive implementation plan and accountability metrics, including the number and percent of schools/students who receive education that conforms to National Sexuality Education Standards. Essential to the success of implementation is the creation of a system to support best practices, including training of teachers and creation of a centralized hub for compilation and dissemination of supportive resources.

(Note, this recommendation falls in line with recommendations from the New York State Youth Sexual Health Plan that was released by the State earlier this year:
http://www.health.ny.gov/community/youth/development/docs/2014_nys_youth_sexual_health_plan.pdf)

Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply)

Identifying persons with HIV who remain undiagnosed and linking them to health care

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Facilitating access to Pre-Exposure Prophylaxis (PrEP) for high-risk persons to keep them HIV negative

,

Other (please specify) Prevention among youth

Ending the Epidemic Task Force Recommendation Form

Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply)

Prevention Committee: Develop recommendations for ensuring the effective implementation of biomedical advances in the prevention of HIV, (such as the use of Truvada as pre-exposure prophylaxis (PrEP)); for ensuring access for those most in need to keep them negative; and for expansion of syringe exchange, expanded partner services, and streamlined HIV testing by further implementing the universal offer of HIV testing in primary care, among others. The Committee will focus on continuing innovative and comprehensive prevention and harm reduction services targeted at key high risk populations, as well as grant-funded services that engage in both secondary and primary prevention.

Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?

New policy

Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?

Other (please specify)
Statutory and/or regulatory change required

Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?

Other (please specify) Within the next 1-2 years

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

Sexual health education promotes healthy attitudes concerning growth and development, body image, gender, sexuality, dating, relationships (including familial, friendly, romantic, and intimate), sexual orientation, and gender identity, and positively affects adolescent behavior. Sexual health education provides students with the knowledge, skills, and support they need to make healthy decisions, develop positive beliefs, and respect the important role sexuality plays throughout a person's life. At the secondary level, sexuality education includes the knowledge and skills to delay sexual activity and prevent and protect against sexually transmitted infections (STIs) including HIV, unintended pregnancies, including the effective use of condoms and contraceptives and PrEP.

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

- Some number of conservative politicians and vocal interest groups are likely to oppose any sexuality education mandate, particularly if it extends to the lower grades
- School superintendents may oppose additional monitoring and training requirements
- Principals may object to additional implementation challenges and reporting requirements
- Training, implementation, and oversight will require new resources from the Department of Education.

Ending the Epidemic Task Force Recommendation Form

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

- * Vetting and purchasing curricular materials (state or district level)
- * Teacher training (district level)
- * Establishing an implementation plan
- * Monitoring implementation

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

- * Fewer HIV infections among young people
- * Fewer STI infections among young people
- * Fewer unintended pregnancies among young people
- * Heightened awareness of PrEP among young people, and associated rise in PrEP uptake
- * Increased student understanding of their rights, confidentiality, and accessing and using health care
- * By decreasing stigma and raising awareness, education encourages testing and connection to care.
- * Increase equity of access to medically accurate HIV and sexual health education/information

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

- Students/Youth
- Parents
- Teachers
- Principals
- Superintendants and local Boards of Education
- NYS Department of Education

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

- Create task force to develop goals, implementation strategy, and accountability benchmarks, and propose regulatory language
- Pursue federal funding opportunities to support training and implementation
- Hire state-wide support staff to support districts in implementation and provide targeted training and training-of-trainers (DOE)
- Create/centralize repository of online resources, taking advantage of existing resources (e.g. CDC's extensive resources and databases: <http://www.cdc.gov/healthyouth/AdolescentHealth/registries.htm>)
- Disseminate regulation, implementation and accountability plans (integrate reporting requirements with DASA reporting; include spot-checks of a small number of schools)
- Create train the trainer calendar, with sessions to be offered across the state, and online
- Provide contacts at State DOE to serve as supports to districts, principals, and teachers
- Execute accountability plan

Q15: This recommendation was submitted by one of the following

Other (please specify)
Ad Hoc End of AIDS Community Group: ACRIA, Amida Care, Correctional Association of New York, Jim Eigo (ACT UP/Prevention of HIV Action Group), GMHC, Harlem United, HIV Law Project, Housing Works, Latino Commission on AIDS, Legal Action Center, Peter Staley (activist), Terri L. Wilder (Spencer Cox Center for Health), Treatment Action Group, VOCAL New York