

SENATE No. 259

The Commonwealth of Massachusetts

PRESENTED BY:

Steven A. Tolman

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to comprehensive health education in schools.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
<i>Steven A. Tolman</i>	
<i>Carlos Henriquez</i>	<i>5th Suffolk</i>
<i>Mayor Thomas M. Menino</i>	<i>Boston City Hall 1 City Hall Plaza Boston, MA 02108</i>

SENATE No. 259

By Mr. Tolman, a petition (accompanied by bill, Senate, No. 259) of Steven A. Tolman and Carlos Henriquez for legislation relative to comprehensive health education in schools. Education.

The Commonwealth of Massachusetts

In the Year Two Thousand Eleven

An Act relative to comprehensive health education in schools.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Section 1D of chapter 69 of the General Laws, as appearing in the 2010
2 Official Edition, is hereby amended by inserting in the second paragraph, after the word
3 "languages", the following words:- health education.

4 SECTION 2. Paragraph 3 of said section 1D of said chapter 69, as so appearing, is hereby
5 further amended by striking out the fourth and fifth sentences and inserting in place thereof the
6 following sentence:-

7 The standards for health education shall be age-appropriate, medically accurate and
8 evidence-based and shall, at a minimum, provide for instruction in the following areas: growth
9 and physical development, physical activity and fitness, nutrition and wellness , human
10 immunodeficiency virus and acquired immune deficiency syndrome education, reproduction and
11 sexual health, mental health, family life, interpersonal relationships, disease prevention and
12 control, safety and injury prevention, tobacco, alcohol, and other substance use and abuse

prevention, violence prevention, including teen dating violence, bullying prevention, conflict resolution, ecological health, health disparities and community and public health.

SECTION 3. The fourteenth paragraph of section 1I of said chapter 69, as so appearing, is hereby amended

by striking out clauses (i) and (l) and inserting in place thereof the following clause: -

(i) health education, including drug, tobacco and alcohol abuse prevention programs, nutrition and wellness programs, reproduction and sexuality, interpersonal relationships, violence prevention, bullying prevention, and teen dating violence.

SECTION 4. Section 1 of Chapter 71 of the General Laws, as so appearing, is hereby amended by striking the fifth sentence and inserting in place thereof the following sentence:-

Instruction in health education shall be age-appropriate, medically accurate and evidence-based and shall include, but not be limited to: consumer health, ecology, community health, body structure and function, safety, nutrition and wellness, fitness and body dynamics, dental health, emotional development, safe and healthy relationships with a focus on preventing sexual and domestic violence, reproduction and sexual health, tobacco, alcohol and other substance use and abuse prevention, violence prevention, including teen dating violence, bullying prevention, conflict resolution, health disparities and training in the administration of first aid, including cardiopulmonary resuscitation.

SECTION 5. Notwithstanding any general or special law to the contrary, the commissioner of the department of education shall submit a report on the provision of health education by school districts to the joint committees on education and public health, the clerk of

the house and the clerk of the senate no later than January 1, 2012. The report shall include the following information for each public school district in the Commonwealth: (1) Health education requirements by grade level; (2) Health education curriculum offered by grade level; (3) The training and professional development to teachers for each of the categories in the curriculum frameworks listed in section 1D of Chapter 69 of the General Laws by grade level; (4) The number of students who receive health education by grade level; (5) The number of students who opt-out of any portion of the health education curriculum involving human sexuality education; and (6) The approximate number of hours spent on each of the categories in the curriculum frameworks listed in section 1D of chapter 69 of the General Laws by grade level.

SECTION 6. Consistent with the provisions of said section 1E of said chapter 69, the Massachusetts comprehensive health curriculum framework shall be construed as a guide for local school districts in the development and selection of curriculum, textbooks and instructional materials.

SECTION 7. The department of education, in conjunction with the department of public health, the Massachusetts department of education's AIDS advisory panel and experts on sexuality education shall: (i) compile a list of evidence-based health education curricula, best practices, resources and science-based research that are consistent with the centers for disease control office of adolescent health evidence-based program models, the substance abuse and mental health services administration national registry of evidence-based programs and practices and national health education standards, that shall be made available to schools. The resources may include, but shall not be limited to, print, audio, video or digital media; subscription based online services; and on-site or technology-enabled professional development and training

56 sessions. The department shall biennially update the list of the resources, curricula, best
57 practices and research and shall post them on its website.

58 SECTION 8. The department of elementary and secondary education, in conjunction with
59 the department of health, shall issue a report detailing cost-effective ways for districts to provide
60 training and professional development to support medically accurate, age appropriate and
61 evidence-based health education pursuant to section 1D of Chapter 69 of the General Laws
62 provided, further, that the report shall: (i) include an option available at no cost to school
63 districts, charter schools, approved private day or residential schools and collaborative schools;
64 (ii) explore the feasibility of an option for a “train-the-trainer” model, so-called, with
65 demonstrated success and an option for online professional development; and (iii) include any
66 other options which may be cost effective; provided, further, that the report shall include a cost
67 estimate for professional development; and provided, further, that the report shall be provided to
68 the clerks of the senate and house of representatives not later than August 31, 2012; and
69 provided, further, that the clerks of the senate and house of representatives shall forward the
70 report to the chairs of the house and senate committees on ways and means and the house and
71 senate chairs of the joint committees on education and public health.

72 SECTION 9. Nothing in this act shall be construed to require an MCAS exam on health
73 education.

74 SECTION 10. The department of elementary and secondary education shall periodically
75 review school districts, charter schools, approved private day or residential schools and
76 collaborative schools to determine whether the districts and schools are in compliance with this
77 act.