



REPORT TO THE LEGISLATURE

UPDATE: School Health Profiles

December 2017

Authorizing legislation: RCW 28.A.300.475

(<http://app.leg.wa.gov/rcw/default.aspx?cite=28A.300.475>)

Kathe Taylor

Assistant Superintendent of Teaching and Learning

Prepared by:

- **Laurie Dils**, Sexual Health Education Program Supervisor
Laurie.dils@k12.wa.us | 360-725-6364

Executive Summary

Every two years, OSPI asks Washington public schools to report the curricula they use for sexual health education, in order to gauge how well curricula used in Washington align with requirements of the 2007 Healthy Youth Act. The School Health Profiles Survey is used for this assessment.

The 2016 responses from 293 lead health teachers from around the state indicated that the two most widely used curricula continue to be the “KNOW HIV Prevention” curriculum (KNOW) and the “Family Life and Sexual Health” curriculum (FLASH). Both curricula are consistent with the 2007 Healthy Youth Act (HYA) requirements and the related 2005 Guidelines for Sexual Health and Disease Prevention (“2005 Guidelines”).

OSPI continues to work with the Washington State Department of Health, Centers for Disease Control, and other partners on the implementation of medically accurate, comprehensive sexual health education in Washington schools. Current work to implement 2016 K-12 Health Education student learning standards includes supporting schools in using optional sexual health education grade level outcomes that align with the HYA and 2005 Guidelines. OSPI’s current five-year grant from the CDC, which ends in 2018, has increased OSPI’s capacity to assist schools with their efforts to implement the provisions of the Healthy Youth Act and AIDS Omnibus Law.

Background

[RCW 28A.300.475](#) (medically accurate sexual health education) directs OSPI to collect data about the sexual health education curricula that are taught in Washington State public schools. The School Health Profiles Survey (Profiles), developed by the Centers for Disease Control (CDC) Division of Adolescent and School Health (DASH) and the National Center for Chronic Disease Prevention and Health Promotion, in collaboration with state, local, and territorial departments of health and education, is used for this purpose.

Every two years, OSPI and the Washington State Department of Health (DOH) administer a survey to a random sample of middle schools and high schools. The survey includes two questionnaires—one for school principals and one for lead health education teachers. Starting in 2008, the survey has included supplemental questions (“Washington State Questions”) to help assess implementation of the Healthy Youth Act (HYA) and health policies and instruction related to various grant-funded health goals. The CDC randomly selects schools from a list of all secondary schools provided by OSPI. Participation is voluntary, which means results may only partially represent Washington schools statewide. The CDC produces reports using aggregate data and school-specific results are available only to each participating school.

OSPI, DOH, and other education and public health partners support the use of curricula and other instructional materials that are consistent with the HYA by offering resources to school districts going through the curriculum selection process. Resources include the CDC’s Health Education Curriculum Analysis Tool (HECAT) and OSPI-developed review tools that reflect state-specific requirements related to sexual health education and bias in instructional materials. In addition, OSPI and DOH partner regularly to review sexual health instructional materials for consistency with the HYA. Results from the most recent Sexual Health Education Curriculum Review can be found at <http://www.k12.wa.us/HIVSexualhealth/InstructionalMaterials.aspx>.

Update Status

In spring 2016, 293 lead health education teachers completed the Washington State Questions, compared with 264 in 2014 (an 11 percent increase). Of the 293 lead health teachers reporting, 228 (or 86 percent) reported providing some type of sexual health instruction. That instruction ranged from single-topic instruction such as HIV prevention, abstinence, or sex trafficking to the use of a comprehensive sexual health curriculum. Two curricula continued to be used significantly more often than others: the KNOW HIV Prevention curriculum (KNOW) and the Family Life and Sexual Health curriculum (FLASH).

KNOW was developed by OSPI in response to a legislative request in the AIDS Omnibus Act (AOA). OSPI has updated this curriculum several times as necessary to ensure medical accuracy. Public Health Seattle & King County developed the FLASH curriculum. Both curricula are consistent with requirements spelled out in the 2007 Healthy Youth Act and the 2005 Guidelines for Sexual Health and Disease Prevention, although KNOW addresses HIV prevention only.

The supplemental Washington State Survey asks teachers to report their use of “any of the following curricula.” Respondents are able to check all that apply from a pre-populated list of curricula, since many schools use multiple resources to support sexual health education. The Washington State Survey also includes a comments section so that respondents may indicate other instructional materials used in their school.

Top 5 Sexual Health Curricula
1. Family Life and Sexual Health (FLASH)
2. KNOW HIV/STD Prevention
3. Healthy Relationships and Sexuality (Glencoe)
4. Teen Health (Glencoe)
5. Human Sexuality (Glencoe)

OSPI has reviewed the five most widely used curricula for their consistency with the HYA, including medical and scientific accuracy. Three of the five rated *above average*, and two *below average*, not meeting HYA requirements as written. At least 7 percent of schools reported using other curricula that clearly do

not conform to the requirements spelled out in the HYA. Multiple schools reported using a variety of other materials, many of which have not been reviewed by OSPI for consistency with the Healthy Youth Act because they are not widely used.

Conclusion and Next Steps

Statewide activities and support for sexual health education have relied almost entirely on CDC funding since 1988. The current CDC cooperative agreement, *Promoting Adolescent Health Through School-Based HIV/STD Prevention and School-Based Surveillance* (2013-2018) ends on July 31, 2018, and the CDC has indicated there will be no additional funding package for this work.

An on-going collaboration with DOH supports regular curriculum reviews, although resources have decreased over time. The following activities represent work accomplished since our last report, as well as specific work underway for the coming year to support schools and districts with meeting HYA requirements:

Standards, Curriculum Review and Resources

- **Student Learning Standards:** Newly revised K-12 Health Education Student Learning Standards, which include optional grade-level outcomes related to sexual health education, were adopted in 2016. Current efforts support districts in implementing these standards and outcomes.
- **Professional Learning and Support Materials:** OSPI provides a comprehensive array of resources to support quality sexual health education, including online and in-person professional development opportunities:
<http://www.k12.wa.us/HIVSexualhealth/Resources.aspx>.
- **Curriculum Review and Results:** OSPI and DOH collaborate to review sexual health education instructional materials, using experienced reviewers who are recruited through an application process. Four reports have been produced since 2009. The most recent report, completed in spring 2017, includes both full curricula and supplemental materials. Results are included on OSPI’s website in the form of a report and interactive displays of scores and standards alignment:
<http://www.k12.wa.us/CurriculumInstruct/HIV-SexualHealthReview/default.aspx>.
- **KNOW Curriculum Updates:** In March 2014, OSPI released revised versions of the KNOW curriculum for grades 5-6 and 7-8, including Spanish language versions. OSPI is exploring funding options for revision of the HS version, which has not been updated since 2007.

Sexual Health Education Implementation Support

- **Exemplary Sexual Health Education (ESHE) Project:** In August 2013, OSPI received a five-year grant from the CDC, “Promoting Adolescent Health through School-based HIV/STD Prevention and Surveillance” (FOA 1308). The grant supports “exemplary sexual health education” efforts throughout Washington, and in particular within 13 “priority school districts.” This grant has increased OSPI’s capacity to assist schools with their efforts to implement the provisions of the Healthy Youth Act and AIDS Omnibus Law.
- **PREP Project:** Since 2012, OSPI has partnered with DOH to implement the federally funded Personal Responsibility Education Program (PREP). In addition to numerous community- and institution-based projects, fifteen school districts and several institutional education programs are participating in PREP by implementing evidence-based curricula. OSPI’s involvement includes recruitment of districts and supporting them in moving toward compliance with HYA requirements.

Appendix A – Curricula reported by schools

Washington 2016 School Health Profiles
 Weighted Lead Health Education Teacher
 Survey Results from Supplemental Questionnaire

Schools and percentages of schools in which teachers or other presenters taught any of the following sexuality education curricula for students in any of grades 6 through 12. Of the 377 schools in the sample, teachers from 293 schools completed the survey.

Curriculum title	Schools reporting use of curriculum	Percent of schools reporting use of curriculum
Family Life and Sexual Health (FLASH)	159	54
KNOW HIV/STD Prevention	152	51
Healthy Relationships and Sexuality (Glencoe)	68	23
Teen Health (Glencoe)	66	23
Human Sexuality (Glencoe)	43	15
The Great Body Shop	21	7
Lifetime Health (Holt)	11	3
Health Smart (ETR Associates)	10	3
Teen Aid	7	2
SHARE	5	1
Reducing the Risk (ETR Associates)	4	1
Safer Choices (ETR Associates)	4	1
Get Real about AIDS (CHEF)	3	1
Health: A Guide to Wellness (Glencoe)	3	1
Health (Pearson)	3	1
WAIT	3	1
APEX online course	2	0.6
Draw the Line (ETR Associates)	2	0.6
Health (Prentice Hall)	2	0.6
AWARE	2	0.6
Making Proud Choices (ETR Associates)	2	0.6

“Other Curricula” reportedly used by schools:

Comments included in the Lead Health Education Teacher Survey Results from Profiles Supplemental Questionnaire related to “other curricula” used to teach sexual health education (each representing one distinct comment).

Brad Henning DVD

Connexions (Pregnancy Resource Center) AWA

Choices Magazine

Health and Wellness

Life Science Prentice Hall

EALR based relate

Only used Teen Health course I & III 2003 edition from Glencoe Health. We completed the Communicable Disease chapter and Growth and Development chapters. We use refusal skill S.T.O.P.

Mad-Hope Suicide Prevention

Human Relations Curriculum

Human Relations Media

Health Choices - Edynamics

PowerPoints, HIV puzzles

teenhealth.org

Tissam, Discovery Education

Prentice Hall Textbook

By school following state stds.

ROOM ONE

Health

CADA

Access to health Fact or Fiction (J&B Products Inc)

Straight Talk about Puberty - Girls and Boys

Comprehensive Health textbook

Target Online

Advanced Academics Personal Health/Safety w/ sex ed (online)

McGraw Hill Health Text

Arc of Spokane Educator Relationships/Healthy Relationships

Smart Love Smart Freedom

ACELLUS

Planned Parenthood

The Puberty Workshop

Appendix B – School Health Survey questions

2016 SCHOOL HEALTH PROFILES

LEAD HEALTH EDUCATION TEACHER – Washington State Questions

Please answer a few more questions that are specifically relevant to Washington schools.

SUICIDE PREVENTION

27. During this school year, did teachers in this school use any of the following curricula to teach suicide prevention in a required course in any of grades 6 through 12? (Mark yes or no for each curriculum; if a different curriculum was used, please describe it under "Other".)

	Yes	No
a. Help curriculum	<input type="radio"/>	<input type="radio"/>
b. Look, Listen, Link curriculum	<input type="radio"/>	<input type="radio"/>
c. Other	<input type="radio"/>	<input type="radio"/>

SEXUAL HEALTH EDUCATION

The following questions are about SEXUAL HEALTH EDUCATION (not the required HIV/AIDS education). Sexual health education refers both to teaching about sexuality and to the lifelong process of learning about sexuality. Typically, the main objectives of formal sexual health education programs include:

- Fostering responsibility regarding sexual relationships, including addressing abstinence, resisting pressure, and encouraging the use of contraception and other sexual health measures, including Sexually Transmitted Infections prevention.
- Providing opportunities to explore and assess personal values, to increase self-esteem, create insights concerning relationships with others, and understand one's obligations and responsibilities to self and others.
- Developing communication, decision-making, assertiveness, and peer refusal skills in order to support healthy relationships.

28. About what percent of students are waived out of the sexual health education classes (not the required HIV/AIDS education) by their parents/guardians? (Mark one response.)

None	Less than 1%	1 to 5%	6 to 10%	More than 10%
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

29. About how many total hours of instruction in sexual health education do students receive in grades 6 through 8? (Mark one response.)

None	Less than 1 hour	1 to 5 hours	6 to 10 hours	More than 10 hours
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

30. About how many total hours of instruction in sexual health education do students receive in grades 9 through 12? (Mark one response.)

None	Less than 1 hour	1 to 5 hours	6 to 10 hours	More than 10 hours
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

31. Who teaches the sexual health education classes in this school? Mark all that apply.

- | | | |
|--------------------------------------------------------------|------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="radio"/> a. Family and consumer science teacher | <input type="radio"/> b. Health teacher | <input type="radio"/> c. Other classroom teacher (i.e., not a health or PE teacher) |
| <input type="radio"/> d. Outside speakers | <input type="radio"/> e. Panel/speakers bureau | <input type="radio"/> f. Peer educators |
| <input type="radio"/> g. Physical education teacher | <input type="radio"/> h. School nurse | <input type="radio"/> i. Other |

32. During this school year, did teachers or other presenters in this school use any of the following curricula to teach sexual health education for students in any of grades 6 through 12? (Mark yes or no for each curriculum; if a different curriculum was used, please describe it under "Other".)

- | | Yes | No | | Yes | No |
|--------------------------------------------------|-------------------------|-------------------------|---------------------------------------|-------------------------|-------------------------|
| a. Family Life and Sexual Health (FLASH) | <input type="radio"/> a | <input type="radio"/> b | b. Lifetime Health (Holt) | <input type="radio"/> a | <input type="radio"/> b |
| c. Get Real About AIDS (CHEF) | <input type="radio"/> a | <input type="radio"/> b | d. Reducing the Risk (ETR Associates) | <input type="radio"/> a | <input type="radio"/> b |
| e. Health Smart (ETR Associates) | <input type="radio"/> a | <input type="radio"/> b | f. Safer Choices (ETR Associates) | <input type="radio"/> a | <input type="radio"/> b |
| g. Health: A Guide to Wellness (Glencoe) | <input type="radio"/> a | <input type="radio"/> b | h. SHARE | <input type="radio"/> a | <input type="radio"/> b |
| i. Healthy Relationships and Sexuality (Glencoe) | <input type="radio"/> a | <input type="radio"/> b | j. Teen Aid | <input type="radio"/> a | <input type="radio"/> b |
| k. Human Sexuality (Glencoe) | <input type="radio"/> a | <input type="radio"/> b | l. Teen Health (Glencoe) | <input type="radio"/> a | <input type="radio"/> b |
| m. The Great Body Shop | <input type="radio"/> a | <input type="radio"/> b | n. WAIT | <input type="radio"/> a | <input type="radio"/> b |
| o. KNOW HIV/STD Prevention | <input type="radio"/> a | <input type="radio"/> b | p. Other (please describe): | | |

- | | Yes | No | Don't Know |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-------------------------|-------------------------|
| 33. Have the sexual health education curricula taught in this school been reviewed for <u>medical and scientific accuracy</u> ? (Mark one response.) | <input type="radio"/> a | <input type="radio"/> b | <input type="radio"/> c |
| 34. Have the sexual health education curricula taught in this school been reviewed to be <u>consistent with the 2005 DOH-OSPI Guidelines for Sexual Health and Disease Prevention</u> ? (Mark one response.) | <input type="radio"/> a | <input type="radio"/> b | <input type="radio"/> c |

Thank you, we greatly appreciate your responses!
Please return this form with the full Profiles questionnaire.

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Chris Reykdal • State Superintendent
Office of Superintendent of Public Instruction
Old Capitol Building • P.O. Box 47200
Olympia, WA 98504-7200