

The State Board of Education (SBOE) adopts new §§115.11-115.17, 115.25-115.27, and 115.37-115.40, concerning Texas Essential Knowledge and Skills (TEKS) for health education. New §§115.11, 115.25, and 115.37 are adopted without changes to the proposed text as published in the October 9, 2020 issue of the *Texas Register* (45 TexReg 7135) and will not be republished. New §§115.12-115.17, 115.26, 115.27, and 115.38-115.40 are adopted with changes to the proposed text as published in the October 9, 2020 issue of the *Texas Register* (45 TexReg 7135) and will be republished. The new sections update the standards to reflect current health education research and best practices and align with changes to requirements in statute.

REASONED JUSTIFICATION: In accordance with statutory requirements that the SBOE by rule identify the essential knowledge and skills of each subject in the required curriculum, the SBOE follows a board-approved cycle to review and revise the essential knowledge and skills for each subject.

In preparation for the review and revision of the TEKS for health education, the SBOE in September 2017 requested that the commissioner of education convene a group of experts to develop a study to provide guidance for the development of revised health education TEKS. At that time, the SBOE also approved parameters for the recommendations of the commissioner's committee to include a framework for what the strands should be for Kindergarten-Grade 12, distinctions regarding grade levels and/or grade bands at which health concepts are most appropriately taught, and a summary of all statutory requirements related to health education and suggestions regarding the most appropriate way to integrate those requirements into the framework. In 2018, Texas Education Agency (TEA) convened a group of experts to develop recommendations to address the SBOE's charge related to the health education TEKS. This health education advisory committee drafted a response to the SBOE's charge, and the response was submitted to the commissioner. Based on the response, the commissioner provided recommendations to the SBOE at the June 2019 meeting.

The review of the health education TEKS is taking place concurrently with the review of the physical education TEKS. In March 2019, applications to serve on the health education TEKS review work groups were posted on the TEA website. At the April 2019 meeting, SBOE members were asked to designate content advisors for the health education TEKS review. In May 2019, TEA distributed a survey to collect information from educators regarding the review and revision of the health education TEKS. TEA staff provided applications for the health education review work groups to SBOE members on a monthly basis from June 2019 to March 2020.

In August 2019, content advisors met in a face-to-face meeting to develop consensus recommendations regarding revisions to the health education TEKS to share with future work groups. At that time, the content advisors met with representatives from Work Group A to discuss the consensus recommendations. Work Group A convened in September 2019 to review survey results and recommend specific topics that should be included in the proposed framework. The work group was also charged with identifying where student expectations from the current TEKS would fit into the proposed framework. The work group completed recommendations for Kindergarten only. Work Group B was convened in October 2019 and was charged with identifying where student expectations would fit into the proposed framework for all other grade levels and identifying the grade levels where topics developed by Work Group A should be taught. Work Group C was convened in December 2019 and again in early February 2020 to draft recommendations for student expectations in three of the six strands in the proposed framework. Work Group D was convened at the end of February 2020 to draft recommendations for the remaining strands in the proposed framework. Work Group E was convened in March 2020 to review the vertical alignment of the strands across all grade levels and to ensure horizontal alignment with the physical education TEKS. In May 2020, content advisors were sent the draft recommendations for review and met virtually to develop consensus recommendations to be provided to the SBOE. At the June-July 2020 SBOE meeting, the board asked TEA to convene another work group to address specific guidance provided by board members. TEA convened Work Group F virtually in July 2020 to develop final recommendations for revisions to the health education TEKS.

The new sections will supersede the existing health education TEKS for elementary, middle school, and high school in §§115.1-115.7, 115.21-115.23, and 115.31-115.33 beginning with the 2022-2023 school year.

The following changes were made to proposed new 19 TAC Chapter 115 since published as proposed.

Subchapter A, Elementary

Section 115.12(a)(3)(D) was amended by adding the word "prevention" after the word "bullying."

Section 115.12(a)(3)(E) was amended by adding the word "other" before the phrase "trusted adults."

The student expectation in §115.12(b)(2)(A) was amended by adding the word "other" before the phrase "trusted adults."

The student expectation in §115.12(b)(8)(A) was amended by adding the word "another" before the phrase "trusted adult."

The student expectation in §115.12(b)(9)(B) was amended by deleting the phrase "and practice telling a parent or trusted adult if threatened" after the phrase "unsafe situations."

A new student expectation was added to §115.12(b)(10) that states, "recall personal home address as part of a personal safety plan."

The student expectation in §115.12(b)(11) was amended by adding the word "other" before the phrase "trusted adult."

The student expectation in §115.12(b)(12)(C) was amended by replacing the word "a" with the word "another" before the phrase "trusted adult."

The student expectation in §115.12(b)(12)(D) was amended by adding the phrase "and practice" after the word "explain" and by adding the word "another" before the word "trusted adult."

The knowledge and skills statement in §115.12(b)(14) was amended by replacing the phrase "role play" with the word "identify" and by adding the word "another" before the word "trusted adult."

Section 115.13(a)(3)(D) was amended by adding the word "prevention" after the word "bullying."

Section 115.13(a)(3)(E) was amended by adding the word "other" before the phrase "trusted adults."

The student expectation in §115.13(b)(9)(A) was amended by adding the word "another" before the phrase "trusted adult."

A new student expectation was added to §115.13(b)(10) that states, "recall parents'/caregivers' phone numbers as part of a personal safety plan."

The student expectation in §115.13(b)(11)(B) was amended by deleting the word "drugs" after the word "weapons" and by adding the word "another" before the phrase "trusted adult."

The student expectation in §115.13(b)(12) was amended by adding the word "other" before the phrase "trusted adult."

The student expectation in §115.13(b)(13)(D) was amended by adding the word "another" before the phrase "trusted adult."

The student expectation in §115.13(b)(16) was amended by adding the word "another" before the phrase "trusted adult."

Section 115.14(a)(3)(D) was amended by adding the word "prevention" after the word "bullying."

Section 115.14(a)(3)(E) was amended by adding the word "other" before the phrase "trusted adults."

The student expectation in §115.14(b)(10)(B) was amended by adding the word "another" before the phrase "trusted adult."

The student expectation in §115.14(b)(11)(B) was amended by adding the word "another" before the phrase "trusted adult."

A new student expectation was added to §115.14(b)(11) that states, "identify two trusted adults not part of the immediate family and recall their phone numbers as part of a personal safety plan."

The student expectation in §115.14(b)(12)(B) was amended by adding the word "other" before the phrase "trusted adults."

The student expectation in §115.14(b)(13)(C) was amended by adding the word "other" before the phrase "trusted adults."

Section 115.15(a)(3)(D) was amended by adding the word "prevention" after the word "bullying."

Section 115.15(a)(3)(E) was amended by adding the word "other" before the phrase "trusted adults."

The student expectation in §115.15(b)(4)(A) was amended by adding the phrase "including identifying areas for one's personal growth" after the word "formed."

The student expectation in §115.15(b)(4)(B) was amended by adding the word "another" before the phrase "trusted adult."

A new student expectation was added to §115.15(b)(11) that states, "create a personal safety plan."

The student expectation in proposed §115.15(b)(12)(D) was deleted.

The student expectation in §115.15(b)(13)(C) was amended by replacing the phrase "identify examples of" with the word "define" and deleting the phrase "and describe how to respond."

Section 115.16(a)(3)(D) was amended by adding the word "prevention" after the word "bullying."

Section 115.16(a)(3)(E) was amended by adding the word "other" before the phrase "trusted adults."

New §115.16(a)(4) was added to state, "An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:".

New §115.16(a)(4)(A) was added to state, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

New §115.16(a)(4)(B) was added to state, "the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC §28.004(i)-(j))."

New §115.16(a)(4)(C) was added to state, "the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC §28.004(i))."

New §115.16(a)(4)(D) was added to state, "the centrality of abstinence education in any human sexuality curriculum (TEC §28.004(e))."

New §115.16(a)(4)(E) was added to state, "the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33)."

New §115.16(a)(5) was added to state, "Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272)."

The student expectation in §115.16(b)(4)(A) was amended by adding the phrase "including areas for one's personal growth and ways to gather constructive feedback" after the word "others."

The student expectation in §115.16(b)(5)(E) was amended by replacing the phrase "self-harm behaviors that may present when someone is struggling to manage overwhelming emotions or lacks support and explain the importance of telling a parent or trusted adult if observed in self or others" with the phrase "ways to express and manage overwhelming emotions without harming oneself, others, or property such as calming strategies or talking to a parent or another trusted adult."

The student expectation in §115.16(b)(12)(A) was amended by deleting the phrase "and drugs."

A new student expectation was added to §115.16(b)(12) that states, "create a personal safety plan."

The student expectation in proposed §115.16(b)(12)(D) was deleted.

The student expectation in §115.16(b)(14)(D) was amended by adding the word "another" before the phrase "trusted adult."

The knowledge and skills statement in §115.16(b)(20) was amended by deleting the phrase "and pregnancy" after the word "reproduction," replacing the word "analyzes" with the word "identifies," and deleting the phrase "the process of fertilization, and healthy fetal development."

Section 115.17(a)(3)(D) was amended by adding the word "prevention" after the word "bullying."

Section 115.17(a)(3)(E) was amended by adding the word "other" before the phrase "trusted adults."

New §115.17(a)(4) was added to state, "An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:"

New §115.17(a)(4)(A) was added to state, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

New §115.17(a)(4)(B) was added to state, "the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC §28.004(i)-(j))."

New §115.17(a)(4)(C) was added to state, "the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC §28.004(i))."

New §115.17(a)(4)(D) was added to state, "the centrality of abstinence education in any human sexuality curriculum (TEC §28.004(e))."

New §115.17(a)(4)(E) was added to state, "the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33)."

New §115.17(a)(5) was added to state, "Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272)."

The student expectation in §115.17(b)(3)(C) was amended by adding the word "negative" after the word "resisting" and replacing the word "pressure" with the word "influence."

A new student expectation was added to §115.17(b)(4) that states, "identify goals that one wishes to achieve, including identifying areas for one's personal growth and ways to gather constructive feedback."

The student expectation in §115.17(b)(6)(D) was amended by adding the word "another" before the phrase "trusted adult."

The student expectation in §115.17(b)(6)(E) was amended by deleting the phrase "and behavioral."

The student expectation in §115.17(b)(6)(F) was amended by deleting the phrase "self-management" and the word "prevent" and by adding the phrase "others, or property" after the word "oneself" and by adding the word "another" before the phrase "trusted adult."

The student expectation in §115.17(b)(12)(A) was amended by deleting the phrase "and drugs."

The student expectation in proposed §115.17(b)(12)(C) was deleted.

The student expectation in §115.17(b)(12)(C) was amended by replacing the word "evaluate" with the word "identify."

A new student expectation was added to §115.17(b)(12) that states, "create a personal safety plan."

The student expectation in proposed §115.17(b)(14)(A) was deleted.

The student expectation in proposed §115.17(b)(14)(B) was deleted.

The student expectation in §115.17(b)(16)(B) was amended by deleting the phrase "analyze the short- and long-term harmful effects of alcohol, tobacco, other drugs, and dangerous substances and," by replacing the word "their" with the word "the," and by adding the phrase "of alcohol, tobacco, other drugs, and dangerous substances" after the phrase "illegal use."

The student expectation in proposed §115.17(b)(20)(A) was deleted.

The student expectation in §115.17(b)(21)(B) was amended by adding the word "another" before the phrase "trusted adult."

The student expectation in §115.17(b)(21)(D) was amended by deleting the phrase "related to physical intimacy such as holding hands, hugging, and kissing."

The knowledge and skills statement in §115.17(b)(22) was amended by replacing the word "analyzes" with the phrase "identifies the processes of" and by deleting the phrase "the process of" before the word "fertilization."

A new student expectation was added to §115.17(b)(22) that states, "identify significant milestones of fetal development."

Subchapter B, Middle School

Section 115.26(a)(2) was amended by adding the sentences, "Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies. In addition, areas in the standards related to abuse, neglect, violence, loss, grief, trauma, and suicide may directly affect some students in the classroom. Should the educator recognize signs of discomfort with instruction in these areas, students should be referred to the appropriate resource, identified ahead of such instruction, for additional help and support."

Section 115.26(a)(3)(D) was amended by adding the word "prevention" after the word "bullying."

Section 115.26(a)(3)(E) was amended by adding the word "other" before the phrase "trusted adults."

New §115.26(a)(4) was added to state, "An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:".

New §115.26(a)(4)(A) was added to state, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

New §115.26(a)(4)(B) was added to state, "the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC §28.004(i)-(j))."

New §115.26(a)(4)(C) was added to state, "the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC §28.004(i))."

New §115.26(a)(4)(D) was added to state, "the centrality of abstinence education in any human sexuality curriculum (TEC §28.004(e))."

New §115.26(a)(4)(E) was added to state, "the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33)."

New §115.26(a)(5) was added to state, "Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272)."

The student expectation in §115.26(b)(4)(B) was amended to replace the word "implications" with the word "benefits" and to add the phrase "setting and implementing" before the phrase "long-term personal goals."

The student expectation in proposed §115.26(b)(5)(A) was deleted.

The student expectation in §115.26(b)(6)(B) was amended by replacing the phrase "coping with" with the word "managing."

The student expectation in §115.26(b)(6)(E) was amended by inserting the word "another" before the phrase "trusted adult."

The student expectation in §115.26(b)(6)(F) was amended by replacing the phrase "warning signs associated with suicide as" with the phrase "suicide risk and suicide protective factors" and by inserting the word "another" before the phrase "trusted adult."

The student expectation in §115.26(b)(6)(G) was amended by replacing the phrase "describe why self-harm" with the phrase "explain the role of a healthy self-concept in avoiding self-harming," by inserting the word "that" before the phrase "can occur," and by deleting the phrase "or lacks support."

The student expectation in §115.26(b)(10)(D) was amended by replacing the word "in" with the word "between," by inserting the phrase "or minimally processed" after the word "fresh," and by replacing the phrase "versus serving ready-prepared" with the phrase "and commercially prepared or highly."

The student expectation in §115.26(b)(12)(B) was amended by deleting the proposed student expectation and replacing it with a new student expectation that states, "define safe haven and identify dedicated safe haven locations in the community."

A new student expectation was added to §115.26(b)(12) that states, "create a personal safety plan."

The student expectation in §115.26(b)(13)(B) was amended by inserting the phrase "social media posts" after the phrase "such as."

The student expectation in §115.26(b)(13)(C) was amended by inserting the phrase "social media posts" after the phrase "such as."

The student expectation in proposed §115.26(b)(14)(A) was deleted.

The student expectation in §115.26(b)(14)(A) was amended by inserting the phrase "and the importance of reporting suspected abuse" after the word "behavior."

The student expectation in §115.26(b)(14)(D) was amended by replacing the word "or" with the word "and."

The student expectation in §115.26(b)(15)(D) was amended by deleting the phrase "prescription drugs, over the counter drugs."

The student expectation in §115.26(b)(16)(B) was amended by deleting the word "and" before the word "misuse" and by inserting the phrase "and possession" after the word "misuse."

The student expectation in proposed §115.26(b)(16)(C) was deleted.

The student expectation in §115.26(b)(17)(A) was amended by inserting the word "another" before the phrase "trusted adult."

The student expectation in §115.26(b)(17)(C) was amended by replacing the phrase "at least one example" with the word "examples" and by inserting the phrase "unsafe situations regarding" after the phrase "related to."

The student expectation in proposed §115.26(b)(18)(E) was deleted.

The student expectation in proposed §115.26(b)(19)(D) was deleted.

The student expectation in §115.26(b)(20)(A) was amended by replacing the phrase "compare and contrast the differences" with the phrase "define and distinguish."

The student expectation §115.26(b)(20)(E) was amended by replacing the word "dating" with the phrase "dating/romantic."

The student expectation in §115.26(b)(21)(D) was amended by inserting the word "another" before the phrase "trusted adult."

The student expectation in §115.26(b)(21)(E) was amended by replacing the phrase "decision making regarding" with the phrase "making and respecting decisions about" and by replacing the word "promotes" with the word "promote."

The student expectation in §115.26(b)(21)(G) was amended by inserting the word "and" after the word "communicating."

The student expectation in §115.26(b)(22)(E) was amended by replacing the word "identify" with the word "explain."

The student expectation in §115.26(b)(23)(D) was amended by replacing the phrase "that there are" with the word "what" and by inserting the word "are" after the word "risks."

The student expectation in §115.26(b)(23)(E) was amended by inserting the word "other" before the phrase "trusted adults."

The student expectation in §115.26(b)(23)(G) was amended by replacing the abbreviation "STIs" with the abbreviation "STDs/STIs."

Section 115.27(a)(2) was amended by adding the sentences, "Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies. In addition, areas in the standards related to abuse, neglect, violence, loss, grief, trauma, and suicide may directly affect some students in the classroom. Should the educator recognize signs of discomfort with instruction in these areas, students should be referred to the appropriate resource, identified ahead of such instruction, for additional help and support."

Section 115.27(a)(3)(D) was amended by adding the word "prevention" after the word "bullying."

Section 115.27(a)(3)(E) was amended by adding the word "other" before the phrase "trusted adults."

New §115.27(a)(4) was added to state, "An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:".

New §115.27(a)(4)(A) was added to state, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

New §115.27(a)(4)(B) was added to state, "the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC §28.004(i)-(j))."

New §115.27(a)(4)(C) was added to state, "the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC §28.004(i))."

New §115.27(a)(4)(D) was added to state, "the centrality of abstinence education in any human sexuality curriculum (TEC §28.004(e))."

New §115.27(a)(4)(E) was added to state, "the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33)."

New §115.27(a)(5) was added to state, "Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272)."

The student expectation in §115.27(b)(3)(A) was amended by replacing the word "casual" with the word "causal."

The student expectation in proposed §115.27(b)(3)(F) was deleted.

The student expectation in proposed §115.27(b)(5)(A) was deleted.

The student expectation in proposed §115.27(b)(5)(D) was deleted.

The student expectation in §115.27(b)(6)(D) was amended to insert the word "another" before the phrase "trusted adult."

The student expectation in §115.27(b)(6)(E) was amended by inserting the phrase "the suicide risk and suicide" after the word "discuss," by deleting the phrase "of suicide" after the phrase "protective factors," and by inserting the phrase "and the importance of telling a parent or another trusted adult if one observes the warning sign in self or others."

The student expectation in §115.27(b)(6)(F) was amended by inserting the phrase "and discuss protective factors and" after the word "research" and by replacing the phrase "harming oneself" with the phrase self-harming behaviors."

The student expectation in §115.27(b)(7)(A) was amended by inserting the word "the" after the word "determine" and by inserting the phrase "of foods and make healthy decisions about daily caloric intake" after the phrase "nutritional value."

The student expectation in proposed §115.27(b)(7)(B) was deleted.

The student expectation in proposed §115.27(b)(8)(A) was deleted.

The student expectation in §115.27(b)(8)(B) was amended by deleting the word "expenditures."

The student expectation in §115.27(b)(8)(C) was amended by inserting the phrase "apply the CDC guidelines for daily physical activity to" before the word "develop."

The student expectation in §115.27(b)(10)(C) was amended by inserting the phrase "and digital" after the word "community."

The student expectation in §115.27(b)(10)(D) was amended by inserting the word "nutritional" before the word "differences," replacing the word "in" with the word "between," inserting the phrase "or minimally processed food" after the phrase "fresh food," and by replacing the phrase "ready-prepared" with the phrase "commercially prepared or highly."

The student expectation in proposed §115.27(b)(12)(C) was deleted.

A new student expectation was added to §115.27(b)(12) that states, "create a personal safety plan."

The student expectation in §115.27(b)(13)(A) was amended by inserting the phrase "social media posts" after the phrase "such as."

The student expectation in §115.27(b)(13)(B) was amended by inserting the phrase "social media posts" after the phrase "such as."

The student expectation in proposed §115.27(b)(14)(A) was deleted and replaced with a new student expectation that states, "identify forms of family violence, including physical, mental, and emotional violence."

The student expectation in proposed §115.27(b)(14)(B) was deleted.

The student expectation in §115.27(b)(14)(E) was amended by replacing the phrase "preventing bullying, including cyberbullying and harassment" with the phrase "prevention and intervention of all forms of bullying and cyberbullying such as emotional, physical, social, and sexual."

The student expectation in proposed §115.27(b)(14)(H) was deleted.

The student expectation in proposed §115.27(b)(15)(D) was deleted.

The student expectation in §115.27(b)(15)(D) was amended by inserting the phrase "and addiction to alcohol, tobacco, vaping products, drugs, and other substances" after the phrase "substance misuse" and by replacing the phrase "drug abuse, and substance use disorders" with the word "drugs."

The student expectation in proposed §115.27(b)(15)(F) was deleted.

The student expectation in §115.27(b)(16)(A) was amended by inserting the phrase "addiction to alcohol and tobacco and" before the word "prescription."

The student expectation in §115.27(b)(16)(B) was amended by replacing the word "alternatives" with the phrase "alternative activities."

The student expectation in §115.27(b)(18)(B) was amended by inserting the phrase "physical and" after the word "examine."

The student expectation in proposed §115.27(b)(18)(C) was deleted.

The student expectation in §115.27(b)(18)(D) was amended by inserting the word "another" before the phrase "trusted adult."

The student expectation in proposed §115.27(b)(20)(A) was deleted and replaced with a new student expectation that states, "compare and contrast the difference between friendship, infatuation, dating/romantic relationships, and marriage."

The student expectation in §115.27(b)(20)(F) was amended by replacing the word "romantic" with the phrase "dating/romantic" and by deleting and phrase "and responsibility."

The student expectation in §115.27(b)(21)(E) was amended by inserting the word "another" before the phrase "trusted adult."

The student expectation in §115.27(b)(21)(F) was amended by deleting the phrase "and respecting," by replacing the word "safe" with the phrase "setting and respecting personal," and by deleting the phrase "and limits."

The student expectation in §115.27(b)(21)(G) was amended by inserting the word "how" before the phrase "refusal skills," by inserting the phrase "can be used" after the phrase "refusal skills," by replacing the word "pressure" with the word "influences," by inserting the phrase "reinforce personal boundaries to" before the word "avoid," and by inserting the phrase "and behaviors that increase sexual risk" after the word "situations."

The student expectation in proposed §115.27(b)(21)(H) was deleted.

The student expectation in proposed §115.27(b)(21)(J) was deleted.

The student expectation in proposed §115.27(b)(22)(D) was deleted.

The student expectation in §115.27(b)(22)(D) was amended by inserting the word "another" before the phrase "trusted adult."

The student expectation in §115.27(b)(23)(C) was amended by replacing the phrase "sexually transmitted diseases (STDs) and sexually transmitted infections (STIs)" with the phrase "sexually transmitted diseases/sexually transmitted infections (STDs/STIs)."

The student expectation in §115.27(b)(23)(D) was amended by replacing the phrase "STDs and STIs, including skin-to-skin contact and the exchange of bodily fluids through sexual contact" with the abbreviation "STDs/STIs."

A new student expectation §115.27(b)(23) was added that states, "identify the prevalence of STDs/STIs among teens by referencing county, state, and/or federal data sources."

The student expectation in §115.27(b)(23)(F) was amended by replacing the phrase "STDs and STIs" with the abbreviation "STDs/STIs" after the phrase "symptoms of" and the phrase "why not all."

The student expectation in §115.27(b)(23)(G) was amended by replacing the phrase "STD and STI" with the abbreviation "STD/STI."

The student expectation in §115.27(b)(23)(H) was amended by inserting the word "other" before the phrase "trusted adult."

The student expectation in §115.27(b)(23)(J) was amended by inserting the word "other" before the phrase "trusted adults."

The student expectation in §115.27(b)(23)(L) was amended by replacing the word "condoms" with the phrase "barrier protection" and by replacing the phrase "STDs, STIs" with the abbreviation "STDs/STIs."

The student expectation in §115.27(b)(23)(M) was amended by inserting the phrase "the most common types of" after the phrase "transmission of" and by replacing the word "or" with the phrase "cancer and."

The student expectation in §115.27(b)(23)(O) was amended by replacing the word "regarding" with the word "of," by replacing the phrase "child support and" with the phrase "the legal effects of," and by inserting the phrase "and proof" after the word "acknowledgement."

The student expectation in §115.27(b)(23)(P) was amended by replacing the word "implications" with the phrase "aspects of sexual activity with a minor person," by deleting the phrase "and offenses regarding sexual activity as they relate to minor persons, including," and by inserting the phrase "sexual abuse" after the phrase "sexual assault."

Subchapter C, High School

Section 115.38(b)(2) was amended by adding the sentences, "Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies. In addition, areas in the standards related to abuse, neglect, violence, loss, grief, trauma, and suicide may directly affect some students in the classroom. Should the educator recognize signs of discomfort with instruction in these areas, students should be referred to the appropriate resource, identified ahead of such instruction, for additional help and support."

Section 115.38(b)(3)(D) was amended by adding the word "prevention" after the word "bullying."

Section 115.38(b)(3)(E) was amended by adding the word "other" before the phrase "trusted adults."

Section 115.38(b)(3)(F) was amended by replacing the phrase "sexually transmitted infections (STIs)" with the phrase "sexually transmitted diseases/sexually transmitted infections (STDs/STIs)."

New §115.38(b)(4) was added to state, "An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:".

New §115.38(b)(4)(A) was added to state, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

New §115.38(b)(4)(B) was added to state, "the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC §28.004(i)-(j))."

New §115.38(b)(4)(C) was added to state, "the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC §28.004(i))."

New §115.38(b)(4)(D) was added to state, "the centrality of abstinence education in any human sexuality curriculum (TEC §28.004(e))."

New §115.38(b)(4)(E) was added to state, "the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33)."

New §115.38(b)(5) was added to state, "Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272)."

The student expectation in §115.38(c)(2)(A) was amended by inserting the phrase "perspective-taking and" after the word "demonstrate" and by inserting the phrase "show respect for others' feelings and" before the phrase "express empathy."

The student expectation in §115.27(c)(3) was amended by deleting the word "mental" before the phrase "health information."

The student expectation in proposed §115.38(c)(4)(A) was deleted.

The student expectation in §115.38(c)(4)(B) was amended by replacing the word "effects" with the word "events."

The student expectation in §115.38(c)(5)(A) was amended by replacing the phrase "warning signs and" with the phrase "suicide risk and suicide," by deleting the phrase "of suicide as," and by inserting the word "another" before the phrase "trusted adult."

The student expectation in §115.38(c)(5)(B) was amended by replacing the word "assess" with the word "discuss."

The student expectation in proposed §115.38(c)(5)(C) was deleted.

The student expectation in §115.38(c)(6)(A) was amended by replacing the word "for" with the phrase "to determine the" and by replacing the phrase "including recommended daily calories" with the phrase "of foods and make healthy decisions about daily caloric intake."

A new student expectation was added to §115.38(c)(7) that states, "analyze the relationships between body composition, diet, and physical activity, including how to balance caloric intake and physical activity."

The student expectation in §115.38(c)(8)(A) was amended by inserting the word "nutritional" before the word "differences," by inserting the phrase "or minimally processed" after the phrase "serving fresh," and by replacing the phrase "ready-prepared or" with the phrase "commercially prepared or highly."

The student expectation in proposed §115.38(c)(8)(B) was deleted and replaced with a new student expectation that states, "evaluate the connection between physical activity and dietary choices as they relate to the prevention of chronic conditions."

The student expectation in §115.38(c)(11)(A) was amended by inserting the phrase "social media posts" after the phrase "such as."

The student expectation in §115.38(c)(15)(B) was amended by inserting the word "another" before the phrase "trusted adult."

The student expectation in §115.38(c)(16)(A) was amended by inserting the phrase "physical and" after the phrase "compare and contrast."

The student expectation in proposed §115.38(c)(18)(A) was deleted.

The student expectation in §115.38(c)(18)(A) was amended by replacing the word "dating" with the phrase "dating/romantic."

A new student expectation was added to §115.38(c)(18) that states, "describe how a healthy marriage can provide a supportive environment for the nurturing and development of children."

The student expectation in §115.38(c)(19)(C) was amended by replacing the word "identify" with the word "analyze."

A new student expectation was added to §115.38(c)(19) that states, "examine factors, including alcohol and other substances, that increase sexual risk and that affect setting, perceiving, and making decisions about boundaries."

A new student expectation was added to §115.38(c)(19) that states, "examine and discuss influences and pressures to become sexually active and why it is wrong to violate another person's boundaries and manipulate or threaten someone into sexual activity."

A new student expectation was added to §115.38(c)(19) that states, "explain the importance of reporting to a parent or another trusted adult sexual harassment, sexual abuse, sexual assault, and dating violence involving self or others."

The student expectation in proposed §115.38(c)(20)(A) was deleted.

The student expectation in proposed §115.38(c)(20)(B) was deleted.

The student expectation in §115.38(c)(20)(C) was amended by inserting "another" before the phrase "trusted adult."

The student expectation in §115.38(c)(21)(B) was amended by replacing the phrase "sexually transmitted diseases (STDs) and STIs, including skin-to-skin contact, oral sex, vaginal sex, and anal sex" with "STDs/STIs."

A new student expectation was added to §115.38(c)(21) that states, "investigate and summarize the statistics on the prevalence of STDs/STIs among teens by referencing county, state, and/or federal data sources."

The student expectation in §115.38(c)(21)(D) was amended by replacing the phrase "STDs and STIs" with the abbreviation "STDs/STIs" after the phrase "signs and symptoms of" and before the phrase "show symptoms."

The student expectation in §115.38(c)(21)(E) was amended by replacing the phrase "STD and STI" with the abbreviation "STD/STI," by deleting the phrase "if there is a concern or," and by inserting the phrase "or if there is a concern" after the phrase "yearly physicals."

The student expectation in §115.38(c)(21)(G) was amended by replacing the phrase "STDs, and STIs" with the phrase "and STDs/STIs."

A new student expectation was added to §115.38(c)(21) that states, "identify support from parents and other trusted adults and create strategies, including building peer support, to be abstinent or for return to abstinence if sexually active."

The student expectation in §115.38(c)(21)(I) was amended by replacing the phrase "and may" with the word "to" and by replacing the phrase "STDs, STIs" with the abbreviation "STDs/STIs."

Section 115.39(b)(2) was amended by adding the sentences, "Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies. In addition, areas in the standards related to abuse, neglect, violence, loss, grief, trauma, and suicide may directly affect some students in the classroom. Should the educator recognize signs of discomfort with instruction in these areas, students should be referred to the appropriate resource, identified ahead of such instruction, for additional help and support."

Section 115.39(b)(3)(D) was amended by adding the word "prevention" after the word "bullying."

Section 115.39(b)(3)(E) was amended by adding the word "other" before the phrase "trusted adults."

Section 115.39(b)(3)(F) was amended by replacing the phrase "sexually transmitted infections (STIs)" with the phrase "sexually transmitted diseases/sexually transmitted infections (STDs/STIs)."

New §115.39(b)(4) was added to state, "An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:".

New §115.39(b)(4)(A) was added to state, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

New §115.39(b)(4)(B) was added to state, "the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC §28.004(i)-(j))."

New §115.39(b)(4)(C) was added to state, "the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC §28.004(i))."

New §115.39(b)(4)(D) was added to state, "the centrality of abstinence education in any human sexuality curriculum (TEC §28.004(e))."

New §115.39(b)(4)(E) was added to state, "the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33)."

New §115.39(b)(5) was added to state, "Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272)."

A new student expectation was added to §115.39(c)(5) that states, "discuss how the use of suicide prevention resources such as the National Suicide Prevention Hotline reduces the likelihood of suicide."

A second new student expectation was added to §115.39(c)(5) that states, "research and discuss data on and prevalence of local, state, and national suicide rates among various groups."

The student expectation in proposed §115.39(c)(9)(A) was deleted and replaced by a new student expectation that states, "research and discuss the social and economic impact of chronic conditions, including obesity, heart disease, and diabetes."

The student expectation in §115.39(c)(9)(B) was amended by inserting the phrase "and digital" before the word "resources."

The student expectation in proposed §115.39(c)(13)(A) was deleted.

The student expectation in §115.39(c)(14)(A) was amended by inserting the phrase "substance misuse and" before the word "addiction" and by replacing the word "impacts" with the phrase "impact family and."

The student expectation in proposed §115.39(c)(15)(A) was deleted.

The student expectation in §115.39(c)(19)(C) was amended by replacing the word "describe" with the word "examine."

The student expectation in §115.39(c)(20)(B) was amended by replacing the word "explain" with the word "evaluate" and by inserting the word "another" before the phrase "trusted adult."

The student expectation in §115.39(c)(20)(E) was amended by replacing the phrase "examine and discuss" with the word "evaluate."

The student expectation in §115.39(c)(21)(B) was amended by replacing the phrase "sexually transmitted diseases (STDs) and STIs" with the abbreviation "STDs/STIs."

The student expectation in proposed §115.39(c)(21)(C) was deleted.

The student expectation in §115.39(c)(22)(B) was amended by replacing the phrase "STDs and STIs" with the abbreviation "STDs/STIs."

The student expectation in §115.39(c)(22)(C) was amended by inserting the word "other" before the phrase "trusted adult" and by replacing the phrase "STD and STI" with the abbreviation "STD/STI."

The student expectation in §115.39(c)(22)(D) was amended by replacing the phrase "and may" with the word "to" and by replacing the phrase "STDs and STIs" with the abbreviation "STDs/STIs."

The student expectation in §115.39(c)(22)(E) was amended by inserting the phrase "the most common types of" before the abbreviation "HPV," by inserting the word "cancer" after the words "neck," "cervical," and "anal," and by inserting the phrase "that may occur" before the phrase "in males and females."

The student expectation in §115.39(c)(22)(G) was amended by replacing the word "identify" with the word "assess" and by inserting the word "other" before the phrase "trusted adults."

The student expectation in §115.39(c)(22)(H) was amended by replacing the phrase "describe the" with the phrase "investigate and summarize" and by deleting the phrase "and offenses regarding sexual activity as they relate to minor persons, including."

New §115.40(b)(2) was added to state, "Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies. In addition, areas in the standards related to abuse, neglect, violence, loss, grief, trauma, and suicide may directly affect some students in the classroom. Should the educator recognize signs of discomfort with instruction in these areas, students should be referred to the appropriate resource, identified ahead of such instruction, for additional help and support."

New §115.40(b)(3) was added to state, "An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:".

New §115.40(b)(3)(A) was added to state, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

New §115.40(b)(3)(B) was added to state, "the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC §28.004(i)-(j))."

New §115.40(b)(3)(C) was added to state, "the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC §28.004(i))."

New §115.40(b)(3)(D) was added to state "the centrality of abstinence education in any human sexuality curriculum (TEC §28.004(e))."

New §115.40(b)(3)(E) was added to state, "the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33)."

New §115.40(b)(4) was added to state, "Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272)."

The student expectation in §115.40(c)(1)(A) was amended by replacing the phrase "identify and characterize" with the word "define."

The student expectation in §115.40(c)(2)(A) was amended by replacing the word "apply" with the word "explain."

The student expectation in §115.40(c)(3)(C) was amended by replacing the phrase "compare and contrast different" with the phrase "analyze key."

The student expectation in §115.40(c)(4)(F) was amended by replacing the word "including" with the phrase "and compare with."

The student expectation in §115.40(c)(5)(C) was amended by inserting the phrase "health care" before the phrase "community resources."

The student expectation in §115.40(c)(6)(B) was amended by replacing the phrase "and physician privileges and expectations" with the word "rights," by replacing the phrase "sexually transmitted infection (STI)" with the phrase "sexually transmitted disease/sexually transmitted infection (STD/STI)," and by inserting the phrase "and explain physician privileges" after the phrase "health care."

The student expectation in §115.40(c)(6)(D) was amended by replacing the phrase "the ability" with the word "how."

The student expectation in §115.40(c)(10)(B) was amended by deleting the phrase "the characteristics of."

The student expectation in §115.40(c)(13)(B) was amended by replacing the word "explore" with the word "evaluate."

The student expectation in §115.40(c)(13)(F) was amended by replacing the word "explore" with the word "research."

The SBOE approved the proposed new sections for first reading and filing authorization at its September 11, 2020 meeting and for second reading and final adoption at its November 20, 2020 meeting.

The effective date of the new sections is August 1, 2022.

SUMMARY OF COMMENTS AND RESPONSES: The public comment period on the proposal began October 9, 2020, and ended November 13, 2020. The SBOE also provided an opportunity for registered oral and written comments at its November 2020 meeting in accordance with the SBOE board operating policies and procedures. Following is a summary of the public comments received and corresponding responses.

Comment. A teacher expressed concern with teaching students in Kindergarten through Grade 2 about alcohol, tobacco, and other drugs.

Response. The SBOE disagrees and has determined that student expectations related to alcohol, tobacco, and other drugs are appropriately included in the Kindergarten through Grade 2 TEKS.

Comment. A parent expressed concern with teaching Grade 1 students about drugs and alcohol.

Response. The SBOE disagrees and has determined that drugs and alcohol are appropriately included in the TEKS for Grade 1.

Comment. A parent expressed concern that teaching Drug Abuse Resistance Education (DARE) program to students in Grade 5 is inappropriate.

Response. The SBOE provides the following clarification. The DARE program is not included in the TEKS as adopted. Local districts have the authority to determine curriculum and instructional programs for use to provide instruction in the TEKS.

Comment. A teacher stated that the alcohol, tobacco, and other drugs strand should be moved to the physical education TEKS in Grades 3-5 and deleted from the health education TEKS.

Response. The SBOE disagrees and has determined that the alcohol, tobacco, and other drugs strand is appropriately included in the health education TEKS for Kindergarten-Grade 8 and high school courses.

Comment. The National Association of Social Workers (NASW)-Texas Chapter expressed support for including information about substance use that is non-stigmatizing.

Response. The SBOE agrees and has determined that the health education TEKS provide appropriate substance abuse information that is non-stigmatizing. The SBOE also took action to approve additional changes to respond to other comments.

Comment. A parent recommended that the health education TEKS should not be included at the elementary grade levels.

Response. The SBOE disagrees and has determined that health education TEKS are appropriately included in the elementary grade levels.

Comment. The NASW-Texas Chapter recommended that the SBOE include more neutral language concerning families and family structures so that the standards will acknowledge the different ways families can look.

Response. The SBOE agrees that the health education TEKS should be neutral. The SBOE has determined that the TEKS as adopted are sufficiently neutral and no further language concerning families and family structures is necessary.

Comment. Some 1,767 community members expressed opposition to including any discussion of abortion in the proposed new health education TEKS.

Response. The SBOE agrees that the topic of abortion is not essential in the TEKS for health education. However, the SBOE has also determined that health educators must be aware of relevant state laws. In response to this and other comments, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(E), 115.17(a)(4)(E), 115.26(a)(4)(E), 115.27(a)(4)(E), 115.38(b)(4)(E), 115.39(b)(4)(E), and 115.40(b)(4)(E) to affirm, "the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33)." Additionally, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(5), 115.17(a)(5), 115.26(a)(5), 115.27(a)(5), 115.38(b)(5), 115.39(b)(5), and 115.40(b)(5) to read, "Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272)."

Comment. A person from out of state, 2 parents, and 1,822 community members expressed support for abstinence-based education.

Response. The SBOE agrees and has determined that the TEKS as adopted adequately address abstinence. In response to this and other comments, the SBOE took action to add new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A), 115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to introductions in the TEKS to affirm, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))." Additionally, the SBOE took action to add new §§115.16(a)(4)(D), 115.17(a)(4)(D), 115.26(a)(4)(D), 115.27(a)(4)(D), 115.38(b)(4)(D), 115.39(b)(4)(D), and 115.40(b)(4)(D) to introductions in the TEKS to affirm "the centrality of abstinence education in any human sexuality curriculum (TEC §28.004(e))."

Comment. Some 1,767 community members expressed support for any additional amendments made to the proposed revisions to further promote abstinence and the importance of marriage in providing a supportive environment for the nurturing and development of children.

Response. The SBOE agrees that appropriate sex education that includes abstinence and the importance of marriage is appropriately included in the TEKS for Grades 4-8 and high school and determined that no further language on abstinence and the importance of marriage was necessary. In response to this and other comments, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A), 115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to affirm, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))." Additionally, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(D), 115.17(a)(4)(D), 115.26(a)(4)(D), 115.27(a)(4)(D), 115.38(b)(4)(D), 115.39(b)(4)(D), and 115.40(b)(4)(D) to affirm, "the centrality of abstinence education in any human sexuality curriculum (TEC §28.004(e))."

Comment. Some 1,767 community members expressed support for the proposed health education TEKS and teaching students the risks of early childhood sexual activity.

Response. The SBOE agrees and has determined that the TEKS adequately address risks associated with sexual activity. Additionally, in response to this and other comments, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A), 115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to affirm, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))." Additionally, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(D), 115.17(a)(4)(D), 115.26(a)(4)(D), 115.27(a)(4)(D), 115.38(b)(4)(D), 115.39(b)(4)(D), and 115.40(b)(4)(D) to affirm, "the centrality of abstinence education in any human sexuality curriculum (TEC §28.004(e))."

Comment. Some 54 community members, 4 teachers, and 3 parents stated that any student expectations that are adopted must be taught and cannot be deleted or omitted from instruction per 19 Texas Administrative Code (TAC) §74.1; therefore, the health education TEKS must align with requirements in TEC, §28.004, related to human sexuality instruction.

Response. The SBOE agrees that all the health education TEKS should be taught and not deleted or omitted. In response to this and other comments, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(C), 115.17(a)(4)(C), 115.26(a)(4)(C), 115.27(a)(4)(C), 115.38(b)(4)(C), 115.39(b)(4)(C), and 115.40(b)(4)(C) to affirm, "the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC §28.004(i))."

Comment. The Texas is Ready Coalition, 1 teacher, 5 parents, 11 community members, and 2 people from out of state expressed support for abstinence-plus instruction in the proposed health education TEKS.

Response. The SBOE agrees that appropriate sex education should be included in the health education TEKS for Grades 4-8 and high school courses. Decisions regarding specific instructional approaches are determined by the local school district. In response to this and other comments, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A), 115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to affirm, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

Comment. The Texas is Ready Coalition, 1 teacher, 5 parents, 10 community members, and 2 people from out of state expressed support for evidence-based, developmentally appropriate information on contraception and prevention of STIs.

Response. The SBOE agrees and has determined that contraception and STIs are appropriately addressed in the TEKS. Additionally, in response to this and other comments, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A), 115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to affirm, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

Comment. A teacher, three parents, five community members, and one person from out of state stated that while teaching abstinence is important, an abstinence-only curriculum does not give students the information they need to protect themselves from STIs.

Response. The SBOE agrees that appropriate sex education should be included in the health education TEKS. In response to this and other comments, the SBOE took action to add new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A), 115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to affirm, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

Comment. A person from out of state, 4 teachers, 4 parents, and 1,874 community members expressed opposition to comprehensive sex education.

Response. The SBOE provides the following clarification. The health education standards include a new reproductive and sexual health strand to address the components of human sexuality instruction deemed essential. Decisions regarding specific instructional approaches are determined by the local school district. In response to this and other comments, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A), 115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to affirm, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

Comment. A counselor, 16 parents, and 15 community members expressed support for comprehensive sex education.

Response. The SBOE provides the following clarification. The health education standards include a new reproductive and sexual health strand to address the components of human sexuality instruction deemed essential. Decisions regarding specific instructional approaches are determined by the local school district. In response to this and other comments, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A), 115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to affirm, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

Comment. A parent stated that children do not need sex education classes and are not sexual from birth as comprehensive sex education advocates teach.

Response. The SBOE disagrees and has determined that the health education standards address only the components of human sexuality instruction deemed essential and appropriate for the grade level. Additionally, this content is just one strand within a larger health education framework.

Comment. Five parents, one counselor, and four community members stated that students need full disclosure of unbiased, medical facts on reproductive health care and all contraception options.

Response. The SBOE agrees that appropriate information on reproductive health is important. However, the SBOE disagrees that additional disclosure of contraception options is necessary and has determined that the health education standards address only the components of human sexuality instruction deemed essential and appropriate for the grade level.

Comment. A community member expressed support for the proposed health education TEKS because curriculum grounded in well-researched, medically accurate information results in delayed onset of sexual activity, reduced STIs, decreased number of sexual partners, and fewer unintended pregnancies in teens and young adults.

Response. The SBOE agrees that appropriate sexual education standards are important and has determined that the health education TEKS are medically accurate and well-researched and will positively affect students' behaviors and overall health. The SBOE also took action to approve additional changes to respond to other comments.

Comment. A counselor, two parents, and one community member stated that incomplete sex education leads to increases in risk-taking behaviors that result in teen pregnancy and STIs.

Response. The SBOE agrees and has determined that the health education TEKS include a new and complete reproductive and sexual health strand to address the components of human sexuality instruction deemed essential. In response to this and other comments, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A), 115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to affirm, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

Comment. A parent and a community member expressed support for the proposed health education TEKS because students should have a thorough understanding of contraception and contraceptive methods in addition to the obvious benefits of abstinence.

Response. The SBOE agrees and has determined that contraception, contraceptive methods, and the benefits of abstinence are appropriately included in the health education TEKS as adopted. In response to other comments, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(D), 115.17(a)(4)(D), 115.26(a)(4)(D), 115.27(a)(4)(D), 115.38(b)(4)(D), 115.39(b)(4)(D), and 115.40(b)(4)(D) to affirm, "the centrality of abstinence education in any human sexuality curriculum (TEC §28.004(e))."

Comment. A parent, a teacher, and a community member stated that a complete picture of sex education is necessary to support student's ability to make informed decisions.

Response. This comment is outside the scope of the proposed rulemaking.

Comment. Some 1,767 community members expressed support for reinstating student expectations on fetal development.

Response. The SBOE agrees. In response to this and other comments, the SBOE also took action to add new §115.17(b)(22)(E) to read, "identify significant milestones of fetal development."

Comment. Fifty-one community members expressed support for including all fetal development stages, not just significant milestones, in the TEKS.

Response. The SBOE disagrees and has determined that student expectations focusing on the significant milestones of fetal development are appropriate. Additionally, in response to other comments the SBOE took action to add new §115.17(b)(22)(E) to read, "identify significant milestones of fetal development."

Comment. Three community members and the Texas is Ready Coalition recommended that the SBOE consider adding a reference to both short- and long-term contraceptive methods to the proposed Health I TEKS.

Response. The SBOE disagrees and has determined that contraceptive methods are adequately addressed in the Health I TEKS as amended. The SBOE also took action to approve additional changes to respond to other comments.

Comment. The Medical Institute for Sexual Health and 51 community members recommended deleting the phrase "work and" from the proposed student expectation in §115.38(c)(21)(G) in Health I to read, "analyze the effectiveness and the risks and failure rates (human-use reality rates) of barrier protection and other contraceptive methods, including how they may reduce the risk of STDs, STIs, and pregnancy." The commenters stated that including how contraceptives work would encourage demonstration of contraceptive measures.

Response. The SBOE disagrees that the suggested change is necessary. However, the SBOE agrees that the student expectation could be further clarified. In response to this and other comments, the SBOE took action to amend the student expectation in §115.38(c)(21)(I) to read, "analyze the effectiveness and the risks and failure rates (human-use reality rates) of barrier protection and other contraceptive methods, including how they work to reduce the risk of STDs/STIs and pregnancy."

Comment. Fifty community members asked the SBOE to remove how barrier protection and other contraceptive methods work from the student expectation in §115.39(c)(22)(D) in Health II.

Response. The SBOE agrees. In response to this and other comments, the SBOE took action to amend the student expectation in §115.39(c)(22)(D) to read, "analyze the effectiveness and the risks and failure rates (human-use reality rates) of barrier protection and other contraceptive methods, including how they work to reduce the risk of STDs/STIs and pregnancy."

Comment. A parent stated that high teen pregnancy and STI rates in Texas indicate that education around birth control and safer sex needs to improve.

Response. This comment is outside the scope of the proposed rulemaking.

Comment. A teacher, a parent, 53 community members, and 1 person from out of state expressed opposition to defining sexual consent at elementary and middle school levels.

Response. The SBOE agrees and has determined that sexual consent was not appropriate in the TEKS, but that personal boundaries and refusal skills was appropriate at some grade levels. In response to other comments, the SBOE took action to add new §115.27(b)(23)(P) in Grade 7 to read, "describe legal aspects of sexual activity with a minor person, including the legal age of consent, statutory rape, aggravated sexual assault, sexual assault, sexual abuse, and indecency with a child."

Comment. The Medical Institute for Sexual Health and 1,767 community members expressed opposition to any efforts to add language discussing consent.

Response. The SBOE agrees and has determined that sexual consent was not appropriate in the TEKS, but that personal boundaries and refusal skills was appropriate at some grade levels. In response to this and other comments, the SBOE took action to eliminate §115.27(b)(21)(J), which referenced consent.

Comment. Fifty community members asked the SBOE to remove consent from the student expectation in §115.27(b)(21)(J).

Response. The SBOE agrees and has determined that the student expectation in §115.27(b)(21)(J) is not essential. In response to this and other comments, the SBOE took action to eliminate §115.27(b)(21)(J).

Comment. The Medical Institute for Sexual Health recommended revising the proposed student expectation in §115.27(b)(21)(J) in Grades 7-8 by replacing the term "consent" with "refusal skills."

Response. The SBOE disagrees that the specific change is necessary but did take action to eliminate §115.27(b)(21)(J).

Comment. The NASW-Texas Chapter, the Texas is Ready Coalition, the Texas Association Against Sexual Assault (TAASA), the Texas Medical Association, an administrator, 2 teachers, 21 parents, 24 community members, a representative from an institution of higher education, and 2 persons from out of state expressed support for including information about consent in the proposed health TEKS.

Response. The SBOE disagrees that the term "consent" is necessary and has determined that personal boundaries and refusal skills are more appropriately included in the health education TEKS as amended.

Comment. A community member expressed support for including language about consent beginning with kindergarten.

Response. The SBOE disagrees that the term "consent" is necessary and has determined that personal boundaries are more appropriately included in the health education TEKS for kindergarten.

Comment. The Texas is Ready Coalition, the NASW-Texas Chapter, and four community members expressed support for positive language that is included in the proposed new TEKS regarding traits of healthy relationships, prevention of dating violence, and respect.

Response. The SBOE agrees and has determined that healthy relationships, prevention of dating violence, and respect are appropriately included in the health education TEKS as amended. The SBOE also took action to approve additional changes to respond to other comments.

Comment. A community member stated that the attitude of instructors can reinforce shame and guilt and contribute to lifelong problems with self-esteem and the ability to form stable, loving, and trusting relationships.

Response. This comment is outside the scope of the proposed rulemaking.

Comment. Four parents expressed support for language on boundaries, consent, healthy relationships, and abuse and the prevention of violence in the health education draft TEKS.

Response. The SBOE agrees and has determined that boundaries, healthy relationships, and abuse and the prevention of violence are appropriately included in the health education TEKS as amended. However, the SBOE disagrees that the term "consent" is necessary and has determined that personal boundaries and refusal skills are more appropriately included in the health education TEKS as amended. The SBOE also took action to approve additional changes to respond to other comments.

Comment. A teacher and two parents stated that teaching fifth graders who are ten years old about human immunodeficiency virus (HIV) is inappropriate.

Response. The SBOE agrees and has determined that HIV was not addressed in the Grade 5 TEKS as proposed.

Comment. A community member expressed concern about Sexual Orientation and Gender Identity (SOGI) curriculum programs. The commenter stated that districts should present only biological information about anatomy and reproduction and should not present controversial experimental theories like SOGI that have been widely proven to cause physical and psychological harm to students.

Response. This comment is outside the scope of the proposed rulemaking.

Comment. The Medical Institute for Sexual Health and 1,819 community members expressed support for the omission of differentiated instruction on lesbian, gay, bisexual, transgender, and queer (LGBTQ) issues.

Response. The SBOE agrees and has determined that the health education TEKS do not specifically address LGBTQ issues and are inclusive of all students.

Comment. The NASW-Texas Chapter, Texas is Ready Coalition, 5 teachers, 2 counselors, 3 administrators, 7 parents, 36 community members, a representative from an institution of higher education, and 2 people from out of state expressed support for including language that supports the needs of LGBTQ youth in the proposed health education TEKS.

Response. The SBOE agrees that appropriate sex education should be inclusive and support the needs of all students. However, the SBOE disagrees that it is necessary to specifically address LGBTQ issues in the TEKS.

Comment. The Texas is Ready Coalition and three community members recommended that the proposed health education TEKS emphasize respect for all people, including those of minority genders and sexual orientations, and discourage harmful trends like bullying, discrimination, and victimization. The commenters recommended adding a new student expectation to read, "demonstrate ways to show respect for all, regardless of sexual orientation or gender identity."

Response. The SBOE disagrees that the suggested change is necessary and has determined that the health education TEKS sufficiently emphasize respect for all people and discourage bullying, discrimination, and victimization as amended. The SBOE also took action to approve additional changes to respond to other comments.

Comment. A teacher stated that regardless of religious and political beliefs, Texas must be courageous enough to change our culture for the good of all through compassion and inclusivity in our educational practices.

Response. This comment is outside the scope of the proposed rulemaking.

Comment. A teacher, a counselor, a parent, 54 community members, and a person from out of state expressed opposition to redefining marriage as a committed relationship.

Response. The SBOE provides the following clarification. Language referring to committed relationships was revised and was not included in the proposed health education TEKS.

Comment. Two parents and 50 community members expressed opposition to including references to oral and anal sex such as in the proposed student expectation in §115.38(c)(21)(B).

Response. The SBOE agrees and took action to amend the student expectation in §115.38(c)(21)(B) to read, "describe various modes of transmission of STDs/STIs."

Comment. The Texas is Ready Coalition and three community members expressed concern that language in the proposed student expectation in §115.27(b)(23)(D) is imprecise and may cause students to incorrectly assess the risk of types of sexual or non-sexual contact. The commenters recommended reverting to language from previous work group drafts to read, "describe various modes of transmission of STDs/STIs."

Response. The SBOE agrees that the student expectation could benefit from clearer language. In response to this and other comments, the SBOE took action to amend the student expectation in §115.27(b)(23)(D) to read, "describe various modes of transmission of STDs/STIs."

Comment. A teacher questioned the need for health education TEKS and stated that schools should teach the basics and the additional instruction, including teaching children about how to handle their emotions, only adds to the burdens of teachers and schools.

Response. The SBOE provides the following clarification. Health education is part of the enrichment curriculum required by TEC, §28.002(a)(2), that school districts offering Kindergarten through Grade 12 must offer.

Comment. A parent expressed opposition to the proposed health education TEKS because they lead to hostile classroom discussions that do not protect students and medical privacy, and overtly lead to students distrust that parents are making good decisions for them.

Response. The SBOE disagrees and has determined that the health education TEKS sufficiently protect students and their medical privacy and do not negatively impact their trust of their parents.

Comment. TAASA commended the SBOE for including language about respect for personal boundaries across all grade levels.

Response. The SBOE agrees that the inclusion of personal boundaries at all grade levels is essential and took action to approve the health education TEKS as amended. The SBOE also took action to approve additional changes to respond to other comments.

Comment. Some 54 community members, 3 teachers, and 5 parents expressed opposition to the reproductive and sexual health strand because it violates a parent's right to direct the moral and religious teachings of their children per Texas Family Code, §151.001, and would also be in direct violation of TEC, §28.004(a), which allows for local control of the teaching of sex education.

Response. The SBOE disagrees and has determined that appropriate sex education should be included in Grade 4 through high school. However, in response to this and other comments, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A),

115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to affirm, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction." The SBOE also took action to add to the introductions in the TEKS new §§115.16(a)(4)(C), 115.17(a)(4)(C), 115.26(a)(4)(C), 115.27(a)(4)(C), 115.38(b)(4)(C), 115.39(b)(4)(C), and 115.40(b)(4)(C) to affirm, "the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child." Additionally, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(B), 115.17(a)(4)(B), 115.26(a)(4)(B), 115.27(a)(4)(B), 115.38(b)(4)(B), 115.39(b)(4)(B), and 115.40(b)(4)(B) to affirm, "the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction."

Comment. A teacher and two parents stated that teaching fourth graders, who are nine years old, about sexual abuse and sexual assault before they have an understanding of healthy sexual relationships within marriage is inappropriate and invades the latency period.

Response. The SBOE agrees and has determined that the health education TEKS for Grade 4 do not address sexual abuse and sexual assault but do address abuse in developmentally appropriate ways.

Comment. A teacher and a parent asked the SBOE to respect the latency period of childhood (ages 5 to puberty).

Response. The SBOE can neither agree nor disagree as it is unclear what the commenters are requesting with regard to the proposed TEKS.

Comment. Three administrators and one community member expressed concern about including language about sexuality in the proposed health education TEKS for Grades 4 and 5 because it is too early.

Response. The SBOE disagrees and has determined that sex education has been addressed in the TEKS for Grades 4 and 5 in developmentally appropriate ways.

Comment. An administrator, one parent, and one community member expressed concern that the proposed health education TEKS include information regarding sex that is inappropriate for elementary school students and should be taught by parents in the home.

Response. The SBOE agrees that sex education is not appropriate at some grade levels but has determined that sex education has been addressed in the TEKS in developmentally appropriate ways beginning at Grade 4.

Comment. A community member recommended that the SBOE reconsider their vote for the sex program.

Response. The SBOE disagrees and has determined that appropriate sex education should be included in the standards for Grades 4 through high school. The SBOE also took action to approve additional changes to respond to other comments.

Comment. A parent expressed support for allowing local districts make decisions about sex education.

Response. The SBOE agrees that local districts have the authority to make instructional decisions about sex education. In response to this and other comments, the SBOE took action to add to the introductions to the TEKS new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A), 115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to affirm a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction.

Comment. A parent expressed concern that outside groups have an influence on sex education.

Response. This comment is outside the scope of the proposed rulemaking.

Comment. A community member stated that the current health education curriculum does much more damage than benefit. The commenter expressed concern that young lives are being compromised in part because of this woefully inadequate curriculum in the public schools, and one can look at the data to see that Texas is clearly failing young people.

Response. The SBOE disagrees that the current TEKS are damaging to young people and has determined that the health education TEKS as adopted are both adequate and supportive of young people and their decision making.

Comment. A teacher recommended that a teacher who treats students with respect and does not shame them is the best person to inform young people.

Response. This comment is outside the scope of the proposed rulemaking.

Comment. Two parents and one community member expressed concern that the proposed health education TEKS include information regarding sex that is inappropriate for middle school students and should be taught by parents in the home.

Response. The SBOE disagrees and has determined that appropriate sex education should be included in the standards for Grades 4 through high school. The SBOE also took action to approve additional changes to respond to other comments.

Comment. The Texas is Ready Coalition and three community members recommended that the SBOE maintain and adopt language in the proposed health education TEKS that provides information about contraception and the prevention and treatment of STIs at middle school.

Response. The SBOE agrees and has determined that student expectations on contraception and the prevention and treatment of STIs are appropriate included in the health education TEKS for Grade 6 and Grades 7-8.

Comment. A teacher and two community members expressed opposition to the proposed new sex education curriculum.

Response. The SBOE disagrees and has determined that appropriate sex education should be included in the standards for Grades 4 through high school. The SBOE also took action to approve additional changes to respond to other comments.

Comment. Two administrators and a parent stated that sex education instruction should be age appropriate.

Response. The SBOE agrees and has determined that the health education TEKS on human sexuality education are age appropriate.

Comment. A parent and 12 community members expressed support for SBOE members who voted against a radical agenda for sex education in Texas.

Response. The SBOE disagrees that the health education TEKS as adopted present a radical agenda and has determined that appropriate sex education should be included in the standards for Grades 4 through high school.

Comment. Some 50 community members asked the SBOE to remove the student expectations in §115.27(b)(20)(A) and §115.38(c)(18)(A).

Response. The SBOE agrees that the student expectations in §115.27(b)(20)(A) and §115.38(c)(18)(A) were unnecessary and took action to delete §115.27(b)(20)(A) and §115.38(c)(18)(A).

Comment. Two parents and two community member expressed opposition to sex education in schools because parents should be able to educate their children in their own way.

Response. The SBOE disagrees and has determined that appropriate sex education should be included in the standards for Grades 4 through high school. The SBOE also took action to approve additional changes to respond to other comments.

Comment. A parent expressed disagreement with addressing with sixth grade students the signs of pregnancy and what to do if one should become pregnant.

Response. The SBOE agrees and has determined that the signs of pregnancy are appropriately introduced in the high school course, Health I.

Comment. A teacher, 3 parents, and 50 community members stated that throughout the TEKS children should be directed to their parents or guardians, not to trusted adults. The commenters stated that young children do not have the discernment to determine who can be trusted.

Response. The SBOE agrees that children should be directed to their parents or guardians. However, the SBOE disagrees that trusted adults should not be an additional resource for children and has determined that the standards appropriately prepare students for identifying trusted adults.

Comment. A parent expressed opposition to anyone teaching her preteen daughter about fertilization through sexual intercourse.

Response. The SBOE disagrees and has determined that the process of fertilization through sexual intercourse is appropriately included in the health education TEKS for Grades 7-8.

Comment. The Texas is Ready Coalition expressed support for including language on recognizing and seeking help for postpartum depression and other pregnancy-related mood disorders.

Response. The SBOE agrees and has determined that student expectations related to seeking help for postpartum depression and other pregnancy-related mood disorders are appropriately included in the health education TEKS as proposed.

Comment. The Texas is Ready Coalition recommended that the proposed health education TEKS maintain student expectations on puberty at the currently assigned grade levels to ensure that youth have access to basic facts in a timely manner.

Response. The SBOE agrees and has determined that student expectations on puberty are appropriately included beginning at Grade 4 as proposed.

Comment. A parent and a community member expressed support for including STI prevention information in the TEKS.

Response. The SBOE agrees and has determined that STI prevention information is appropriately included in the health education TEKS.

Comment. The Medical Institute for Sexual Health, the Texas is Ready Coalition, and one community member recommended changing all references to "STDs and STIs," to "STDs/STIs." The commenters stated that the intent should be to use the terms interchangeably, which is consistent with the Centers for Disease Control and Prevention and across the field of sexuality education.

Response. The SBOE agrees and took action to change references to "STDs and STIs" throughout the TEKS to "STDs/STIs."

Comment. A community member stated that the changes to the health education standards would align with the Texas HIV Syndicate's Achieving Together plan, which is supported by the Texas Department of State Health Services HIV/STI program.

Response. This comment is outside the scope of the proposed rulemaking.

Comment. The Texas is Ready Coalition recommended that the SBOE maintain improved and medically accurate information on STI prevention, screening, treatment, and access to medical care as proposed.

Response. The SBOE agrees that appropriate sex education that includes medically accurate information on STI prevention, screening, treatment, and access to medical care should be included in the health education TEKS for Grades 4-8 and high school courses. Additionally, in response to this and other comments, the SBOE took action to

add to the introductions in the TEKS new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A), 115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to affirm, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

Comment. A community member stated that in parts of the country where sex education is not taught, the rate of STIs, unwanted pregnancies, and abortions are significantly higher.

Response. The SBOE agrees that appropriate sex education should be included in the health education TEKS for Grades 4-8 and high school courses. Additionally, in response to this and other comments, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A), 115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to affirm, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

Comment. The Texas is Ready Coalition, one parent, and one community member expressed support for the language in the proposed health education TEKS that would support sexual risk reduction instruction.

Response. The SBOE disagrees and has determined that the health education TEKS addressing sexual education should not focus on sexual risk reduction. In response to this and other comments, the SBOE took action to add to the introductions in the TEKS new §§115.16(a)(4)(A), 115.17(a)(4)(A), 115.26(a)(4)(A), 115.27(a)(4)(A), 115.38(b)(4)(A), 115.39(b)(4)(A), and 115.40(b)(4)(A) to affirm, "a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC) §28.004(e)-(h))."

Comment. Two parents expressed support for the proposed new health TEKS.

Response. The SBOE agrees and took action to adopt proposed new health education TEKS for Kindergarten through high school as amended.

Comment. A parent stated that there should be an emphasis on a healthy diet (avoiding sugar and processed foods), exercise, and getting outside rather than on medications.

Response. The SBOE agrees that a healthy diet and exercise are important and has determined that diet and exercise are appropriately addressed in the TEKS for health education. The SBOE also took action to approve additional changes to respond to other comments.

Comment. A community member expressed support for the proposed student expectation in §115.12(b)(2)(A) in Kindergarten which lists parents first as a source for seeking health guidance.

Response. The SBOE agrees that parents should be the first source for seeking health guidance. In response to other comments, the SBOE took action to amend the student expectation in §115.12(b)(2)(A) to read, "name people who can provide health care guidance such as parents, family members, other trusted adults, teachers, and health care professionals."

Comment. A parent recommended that the proposed health education TEKS include social-emotional learning at all levels.

Response. The SBOE agrees that the health education TEKS should include student expectations that support healthy social interactions and emotions and has determined that these concepts are sufficiently addressed at all grade levels in the mental health and wellness strand.

Comment. A parent expressed opposition to including mental health instruction in schools.

Response. The SBOE disagrees and has determined that developmentally appropriate mental health and wellness topics are included in the health education TEKS.

Comment. A community member expressed support for the inclusion of information regarding mental health. The commenter stated that the inclusion of positive mental health information encourages students to feel comfortable talking about problems with educators should problems arise.

Response. The SBOE agrees and has determined that mental health and wellness is appropriately included in the health education TEKS.

Comment. A community member recommended requiring that students be taught mental health information for a certain amount of time throughout the year.

Response. The SBOE provides the following clarification. TEC, §28.002, prohibits the SBOE from adopting rules that designate time spent by a teacher or a student on a particular task or subject.

Comment. The NASW-Texas Chapter expressed support for including information about mental health that is non-stigmatizing.

Response. The SBOE agrees that mental health should be included in the health education TEKS and has determined that the student expectations on mental health are non-stigmatizing.

Comment. A teacher expressed support for educating students about state and federal policies that mandate mental and physical health. The commenter stated that students should also have the opportunity to learn how to advocate for health policies.

Response. The SBOE disagrees that additional instruction on state and federal policies or health advocacy is necessary and has determined that the standards on mental and physical health are appropriate as amended. The SBOE also took action to approve additional changes to respond to other comments.

Comment. A counselor requested that the SBOE add health education to the Foundation High School Program graduation requirements. The commenter stated that revising the TEKS for health education at the high school level is not beneficial to students unless health education is a requirement for graduation.

Response. This comment is outside the scope of the proposed rulemaking.

Comment. A parent expressed support for attention drawn to mental health, general safety, and preventative care in the proposed health education TEKS.

Response. The SBOE agrees and has determined that mental health, general safety, and preventative care are appropriately included in the health education TEKS.

Comment. A teacher, two parents, and one community member expressed concern about the increase in the number of student expectations in the proposed health curriculum standards because the increased number of student expectations will take instructional time from core academic subjects.

Response. The SBOE disagrees and has determined that the health education TEKS as adopted were appropriate in length and scope.

Comment. A teacher, 5 parents, and 51 community members recommended deleting the student expectations in §115.27(b)(23)(L) in Grades 7-8 and §115.39(c)(22)(E) in Health I regarding the Human Papillomavirus (HPV) vaccine.

Response. The SBOE disagrees and has determined that the student expectations in §115.27(b)(23)(L) in Grades 7-8 and §115.39(c)(22)(E) regarding the HPV vaccine are appropriately included. However, in response to other comments, the SBOE took action to amend the student expectation in §115.27(b)(23)(L), relettered as §115.27(b)(23)(M) to read, "explain that HPV vaccines can help prevent the transmission of the most common types of HPV, a virus that can cause genital warts and cervical cancer and other cancers in males and females." Additionally, the SBOE took action to amend §115.39(c)(22)(E) to read, "identify the effectiveness of vaccines in

preventing the transmission of the most common types of HPV, a virus that may cause genital warts and head and neck cancer , cervical cancer , anal cancer , or other cancers that may occur in males and females."

Comment. Some 54 community members, 3 teachers, and 11 parents requested that the SBOE remove the proposed health education student expectations related to immunizations and vaccines.

Response. The SBOE disagrees and has determined that student expectations related to immunizations and vaccines are appropriately included in the health education TEKS.

Comment. A community member objected to including the importance of immunizations as early as Kindergarten in the proposed student expectation in §115.12(b)(2)(C).

Response. The SBOE disagrees and has determined that the student expectation in §115.12(b)(2)(C) regarding the importance of immunizations is appropriately included in the health education TEKS for Kindergarten.

Comment. A teacher, five parents, and one community member recommended deleting the phrase "the importance of immunization" from the proposed student expectations in §115.12(b)(2)(C) in Kindergarten; §115.13(b)(2)(C) in Grade 1; §115.14(b)(2)(D) in Grade 2; and §115.15(b)(2)(E) in Grade 3.

Response. The SBOE disagrees that the suggested change is necessary and has determined that the phrase "the importance of immunization" is appropriately included in the student expectations in §§115.12(b)(2)(C), 115.13(b)(2)(C), 115.14(b)(2)(D), and 115.15(b)(2)(E).

Comment. A teacher, five parents, and one community member recommended deleting the term "immunizations" from the proposed student expectation in §115.26(b)(2)(E) in Grade 6 and §115.40(c)(2)(D) in the Your Health in the Real World TEKS.

Response. The SBOE disagrees that the suggested change is necessary and has determined that the term "immunizations" is appropriately included in the student expectations in §115.26(b)(2)(E) and §115.40(c)(2)(D).

Comment. A teacher, five parents, and one community member recommended deleting the student expectation in §115.40(c)(13)(G) in the Your Health in the Real World TEKS regarding the importance of vaccines across the lifespan.

Response. The SBOE disagrees that the suggested change is necessary and has determined that the student expectation in §115.40(c)(13)(G) regarding the importance of vaccines across the lifespan is appropriately included in the Your Health in the Real World TEKS.

Comment. A parent and a community member recommended maintaining language in the TEKS concerning vaccinations.

Response. The SBOE agrees and has determined that language regarding vaccines is appropriately included in the health education TEKS.

Comment. A parent and a community member asked the SBOE to research the concerns many have about vaccinations.

Response. This comment is outside the scope of the proposed rulemaking.

Comment. A community member expressed support for the Your Health in the Real World TEKS. The commenter stated that the general health information included in the course would benefit all high school students as they become adults.

Response. The SBOE agrees and took action to approve the Your Health in the Real World TEKS as amended.

STATUTORY AUTHORITY. The new sections are adopted under Texas Education Code (TEC), §7.102(c)(4), which requires the State Board of Education (SBOE) to establish curriculum and graduation requirements; TEC, §28.002(a), which identifies the subjects of the required curriculum; TEC, §28.002(c), which requires the SBOE to by rule identify the essential knowledge and skills of each subject in the required curriculum that all students should be able to demonstrate and that will be used in evaluating instructional materials and addressed on the state assessment instruments; TEC, §28.002(r), which requires the SBOE to by rule adopt essential knowledge and skills for the health curriculum that address substance abuse; and TEC, §28.002(s), which requires the SBOE to by rule adopt essential knowledge and skills for the health curriculum that address bullying.

CROSS REFERENCE TO STATUTE. The new sections implement Texas Education Code, §7.102(c)(4) and §28.002(a), (c), (r), and (s).

<rule>

§115.11. Implementation of Texas Essential Knowledge and Skills for Health Education, Adopted 2020.

- (a) The provisions of §§115.12-115.17 of this subchapter shall be implemented by school districts.
- (b) No later than July 31, 2021, the commissioner of education shall determine whether instructional materials funding has been made available to Texas public schools for materials that cover the essential knowledge and skills for health education as adopted in §§115.12-115.17 of this subchapter.
- (c) If the commissioner makes the determination that instructional materials funding has been made available under subsection (b) of this section, §§115.12-115.17 of this subchapter shall be implemented beginning with the 2022-2023 school year and apply to the 2022-2023 and subsequent school years.
- (d) If the commissioner does not make the determination that instructional materials funding has been made available under subsection (b) of this section, the commissioner shall determine no later than July 31 of each subsequent school year whether instructional materials funding has been made available. If the commissioner determines that instructional materials funding has been made available, the commissioner shall notify the State Board of Education and school districts that §§115.12-115.17 of this subchapter shall be implemented for the following school year.
- (e) Sections 115.1-115.7 of this subchapter shall be superseded by the implementation of §§115.11-115.17 of this subchapter.

§115.12. Health Education, Kindergarten, Adopted 2020.

- (a) Introduction.
 - (1) The goal of health education is to provide instruction that allows youth to develop and sustain health-promoting behaviors throughout their lives. The understanding and application of these standards will allow students the ability to gather, interpret, and understand health information; achieve health literacy; and adapt to the ever-evolving science of health. The health education knowledge and skills should be presented to students in a positive manner to support the development of a healthy self-concept and responsible decision making. The standards will help students reinforce, foster, and apply positive character traits.
 - (2) There are essential skills that repeat throughout the five strands and embody the interconnection of health literacy. These skills include decision making, problem solving, goal setting, maintaining healthy relationships with self and others, seeking help and support, and recognizing various influences on health such as social, environmental, media, and genetic. These skills, developed early on and reinforced throughout a student's education, will foster mastery of health concepts. Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies.

- (3) In Kindergarten-Grade 3, students gain an understanding of health information and skills through five strands: physical health and hygiene; mental health and wellness; healthy eating and physical activity; injury and violence prevention and safety; and alcohol, tobacco, and other drugs.
 - (A) Physical health and hygiene education helps to prepare students for improved lifelong health outcomes. Learning about body systems lays the foundation for personal health and hygiene. Health literacy and preventative behaviors empower students to make informed choices to support self, family, and community.
 - (B) The mental health and wellness strand recognizes that the knowledge and skills necessary to manage emotions, reactions, and relationships are essential to reaching one's full potential. Students gain knowledge about social and emotional health, including developing a healthy self-concept, understanding risk and protective factors, and identifying and managing mental health and wellness concerns. In the early grades, students develop fluency around emotions and self-regulation and understand the relationship between feelings, thoughts, and behavior. In subsequent grades, students learn and practice appropriate ways to solve interpersonal conflicts, work to develop a positive self-image, and develop healthy self-management skills.
 - (C) The healthy eating and physical activity strand addresses the importance of nutrition and physical activity to support a healthy lifestyle. Students apply critical-thinking and decision-making skills to make positive health choices. Students learn about essential nutrients, food groups, portion control, government nutritional recommendations, and the health benefits of being physically active. Students evaluate the connection between physical activity and nutrition and the prevention of chronic diseases.
 - (D) By focusing on injury and violence prevention and safety, the standards promote student well-being and awareness of dangerous situations. Supporting student well-being and providing instruction in digital citizenship, bullying prevention, first aid, and identification of safe and unsafe situations creates empowered and educated students who are able to make decisions that keep themselves and others safe. Beginning in Kindergarten and continuing through high school, students gain knowledge and skills to support safety and wellness at school, at home, online, and in the community.
 - (E) The standards under the alcohol, tobacco, and other drugs strand focus on a number of protective factors that develop empowered students who are able to make better-informed decisions, including understanding the impact of substance use on physical, mental, and social health. Through this strand, students learn key concepts about alcohol, tobacco, and other drugs, including the use, misuse, and physiological effects; short- and long-term impacts on health; treatment; risk and protective factors; and prevention. These concepts introduce healthy alternatives and ways for students to ask for and seek out help from parents and other trusted adults.
- (4) Statements containing the word "including" reference content that must be mastered, while those containing the phrase "such as" are intended as possible illustrative examples.
- (5) Students should first seek guidance in the area of health from a parent or legal guardian.
- (b) Knowledge and skills.
 - (1) Physical health and hygiene--body systems. The student examines the structure, function, and relationships of body systems and their relevance to personal health. The student is expected to name the five senses.
 - (2) Physical health and hygiene--personal health and hygiene. The student understands health literacy, preventative health behaviors, and how to access and evaluate health care information to make informed decisions. The student is expected to:
 - (A) name people who can provide health care guidance such as parents, family members, other trusted adults, teachers, and health care professionals;

- (B) identify personal hygiene and health habits that help individuals stay healthy such as hand washing and brushing teeth;
 - (C) discuss ways in which germs are transmitted, methods of preventing the spread of germs, and the importance of immunization; and
 - (D) identify head lice and biting insects that may cause illness and their proper removal and care.
- (3) Mental health and wellness--social and emotional health. The student identifies and applies strategies to develop socio-emotional health, self-regulation, and healthy relationships. The student is expected to:
- (A) identify their own feelings and emotions;
 - (B) describe and practice calming and self-management strategies;
 - (C) discuss how friends can influence a person's behavior;
 - (D) demonstrate skills for making new acquaintances;
 - (E) demonstrate respect and communicate appropriately with individuals; and
 - (F) identify and practice ways to solve conflicts with a friend.
- (4) Mental health and wellness--developing a healthy self-concept. The student develops the capacity for self-assessment and evaluation, goal setting, and decision making in order to develop a healthy self-concept. The student is expected to:
- (A) describe positive social skills and personal qualities such as truth, kindness, reliability, and respectfulness; and
 - (B) discuss the meaning of goals and identify at least one health-related goal.
- (5) Mental health and wellness--identifying and managing mental health and wellness concerns. The student develops and uses appropriate skills to identify and manage conditions related to mental health and wellness. The student is expected to discuss how to treat peers with different learning needs with dignity.
- (6) Healthy eating and physical activity--food and beverage daily recommendations. The student identifies and explains healthy eating strategies for enhancing and maintaining personal health throughout the lifespan. The student is expected to:
- (A) demonstrate an understanding that the human body is composed mostly of water and explain the importance of drinking water daily;
 - (B) identify healthy portion sizes for common food items;
 - (C) identify types of foods that help the body grow, including fruits and vegetables, dairy, and protein; and
 - (D) identify healthy and unhealthy snack choices.
- (7) Healthy eating and physical activity--risk and protective factors. The student identifies and explains risk and protective factors related to healthy eating and physical activity. The student is expected to:
- (A) describe basic facts of food allergy safety such as not sharing food and explain the importance of respecting others who have allergies; and
 - (B) identify habits that help individuals stay healthy such as getting the proper amount of sleep and daily physical activity.
- (8) Injury and violence prevention and safety--safety skills and unintentional injury. The student identifies and demonstrates safety and first aid knowledge to prevent and treat injuries. The student is expected to:

- (A) discuss and demonstrate procedures for responding to emergencies, including reporting to a parent or another trusted adult or contacting 911; and
 - (B) identify the purpose and demonstrate the proper use of protective equipment such as seat belts, booster seats, and bicycle helmets.
- (9) Injury and violence prevention and safety--healthy relationships and conflict-resolution skills. The student differentiates between healthy and unhealthy relationships and demonstrates effective strategies to address conflict. The student is expected to:
- (A) identify roles and characteristics of a trusted adult;
 - (B) identify and role play refusal skills such as saying "no" to protect personal space and to avoid unsafe situations; and
 - (C) identify personal space and appropriate boundaries.
- (10) Injury and violence prevention and safety--healthy home, school, and community climate. The student understands that individual actions and awareness can impact safety, community, and environment. The student is expected to:
- (A) name safe play environments;
 - (B) name objects that may be dangerous such as knives, scissors, and screwdrivers and explain how they can be harmful; and
 - (C) recall personal home address as part of a personal safety plan.
- (11) Injury and violence prevention and safety--digital citizenship and media. The student understands how to be a safe and responsible citizen in digital and online environments. The student is expected to identify situations when one should get help from a teacher, parent, or other trusted adult when made to feel bullied, uncomfortable, or unsafe in a digital or online environment.
- (12) Injury and violence prevention and safety--interpersonal violence. The student understands the impact of interpersonal violence and the importance of seeking guidance and help to maintain personal safety. The student is expected to:
- (A) identify bullying behaviors and the role of the bystander;
 - (B) identify ways to discourage bullying;
 - (C) describe appropriate actions to take in response to bullying such as telling a parent or another trusted adult; and
 - (D) explain and practice how to get help from a parent or another trusted adult when made to feel uncomfortable or unsafe by another person.
- (13) Alcohol, tobacco, and other drugs--use, misuse, and physiological effects. The student understands the difference between the use and misuse of different substances and how the use and misuse of substances impacts health. The student is expected to:
- (A) discuss the proper usage of medications; and
 - (B) discuss the harmful effects of alcohol, tobacco, and drugs on physical health.
- (14) Alcohol, tobacco, and other drugs--risk and protective factors. The student understands how various factors can influence decisions regarding substance use and the resources available for help. The student is expected to identify refusal skills and how to get help from a parent or another trusted adult in unsafe situations involving the use or misuse of alcohol, tobacco, and other drugs.

§115.13. Health Education, Grade 1, Adopted 2020.

- (a) Introduction.
 - (1) The goal of health education is to provide instruction that allows youth to develop and sustain health-promoting behaviors throughout their lives. The understanding and application of these

standards will allow students the ability to gather, interpret, and understand health information; achieve health literacy; and adapt to the ever-evolving science of health. The health education knowledge and skills should be presented to students in a positive manner to support the development of a healthy self-concept and responsible decision making. The standards will help students reinforce, foster, and apply positive character traits.

- (2) There are essential skills that repeat throughout the five strands and embody the interconnection of health literacy. These skills include decision making, problem solving, goal setting, maintaining healthy relationships with self and others, seeking help and support, and recognizing various influences on health such as social, environmental, media, and genetic. These skills, developed early on and reinforced throughout a student's education, will foster mastery of health concepts. Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies.
- (3) In Kindergarten-Grade 3, students gain an understanding of health information and skills through five strands: physical health and hygiene; mental health and wellness; healthy eating and physical activity; injury and violence prevention and safety; and alcohol, tobacco, and other drugs.
 - (A) Physical health and hygiene education helps to prepare students for improved lifelong health outcomes. Learning about body systems lays the foundation for personal health and hygiene. Health literacy and preventative behaviors empower students to make informed choices to support self, family, and community.
 - (B) The mental health and wellness strand recognizes that the knowledge and skills necessary to manage emotions, reactions, and relationships are essential to reaching one's full potential. Students gain knowledge about social and emotional health, including developing a healthy self-concept, understanding risk and protective factors, and identifying and managing mental health and wellness concerns. In the early grades, students develop fluency around emotions and self-regulation and understand the relationship between feelings, thoughts, and behavior. In subsequent grades, students learn and practice appropriate ways to solve interpersonal conflicts, work to develop a positive self-image, and develop healthy self-management skills.
 - (C) The healthy eating and physical activity strand addresses the importance of nutrition and physical activity to support a healthy lifestyle. Students apply critical-thinking and decision-making skills to make positive health choices. Students learn about essential nutrients, food groups, portion control, government nutritional recommendations, and the health benefits of being physically active. Students evaluate the connection between physical activity and nutrition and the prevention of chronic diseases.
 - (D) By focusing on injury and violence prevention and safety, the standards promote student well-being and awareness of dangerous situations. Supporting student well-being and providing instruction in digital citizenship, bullying prevention, first aid, and identification of safe and unsafe situations creates empowered and educated students who are able to make decisions that keep themselves and others safe. Beginning in Kindergarten and continuing through high school, students gain knowledge and skills to support safety and wellness at school, at home, online, and in the community.
 - (E) The standards under the alcohol, tobacco, and other drugs strand focus on a number of protective factors that develop empowered students who are able to make better-informed decisions, including understanding the impact of substance use on physical, mental, and social health. Through this strand, students learn key concepts about alcohol, tobacco, and other drugs, including the use, misuse, and physiological effects; short- and long-term impacts on health; treatment; risk and protective factors; and prevention. These concepts introduce healthy alternatives and ways for students to ask for and seek out help from parents and other trusted adults.
- (4) Statements containing the word "including" reference content that must be mastered, while those containing the phrase "such as" are intended as possible illustrative examples.

- (5) Students should first seek guidance in the area of health from a parent or legal guardian.
- (b) Knowledge and skills.
- (1) Physical health and hygiene--body systems. The student examines the structure, function, and relationships of body systems and their relevance to personal health. The student is expected to demonstrate use of the five senses.
- (2) Physical health and hygiene--personal health and hygiene. The student understands health literacy, preventative health behaviors, and how to access and evaluate health care information to make informed decisions. The student is expected to:
- (A) identify types of health care professionals and describe the services they provide such as medical checkups, dental exams, and vision and hearing screenings;
 - (B) describe personal hygiene and health habits that enhance individual health such as personal hygiene, oral hygiene, and getting enough sleep;
 - (C) describe ways in which germs are transmitted, methods of preventing the spread of germs, and the importance of immunization; and
 - (D) describe where head lice and biting insects that may cause illness, including ticks and mosquitos, are commonly encountered and how to avoid them.
- (3) Mental health and wellness--social and emotional health. The student identifies and applies strategies to develop socio-emotional health, self-regulation, and healthy relationships. The student is expected to:
- (A) identify their own feelings and emotions;
 - (B) discuss and explain how emotions can interrupt thinking and the self-management process;
 - (C) describe and practice calming and self-management strategies;
 - (D) describe ways in which peers and families can work together to build healthy relationships;
 - (E) describe ways to build and maintain friendships;
 - (F) identify ways to respectfully communicate verbally and nonverbally;
 - (G) identify feelings and emotions expressed by others; and
 - (H) identify and practice ways to solve conflicts with friends and peers.
- (4) Mental health and wellness--developing a healthy self-concept. The student develops the capacity for self-assessment and evaluation, goal setting, and decision making in order to develop a healthy self-concept. The student is expected to:
- (A) discuss ways to be kind to self and how to identify areas for growth; and
 - (B) explain the importance of goal setting and task completion.
- (5) Mental health and wellness--identifying and managing mental health and wellness concerns. The student develops and uses appropriate skills to identify and manage conditions related to mental health and wellness. The student is expected to:
- (A) discuss and demonstrate how to treat peers with different learning needs with dignity and respect;
 - (B) identify situations that can create positive stress and positive emotions; and
 - (C) discuss the signs and symptoms associated with negative stress such as loss or grief.

- (6) Healthy eating and physical activity--food and beverage daily recommendations. The student identifies and explains healthy eating strategies for enhancing and maintaining personal health throughout the lifespan. The student is expected to:
- (A) explain that fruits, proteins, vegetables, and dairy provide essential vitamins and minerals;
 - (B) identify recommended portion sizes by comparing portions to familiar objects such as a golf ball for a cookie or a frisbee for a dinner plate;
 - (C) identify the food groups and classify examples of foods into each group; and
 - (D) identify ingredients that make foods and drinks unhealthy such as added sugar and other sweeteners.
- (7) Healthy eating and physical activity--nutrition and physical activity literacy. The student obtains, processes, and understands basic physical activity and nutrition information needed to make health-promoting decisions. The student is expected to identify examples of health information provided by various media and how the examples affect nutritional habits and physical activity.
- (8) Healthy eating and physical activity--risk and protective factors. The student identifies and explains risk and protective factors related to healthy eating and physical activity. The student is expected to:
- (A) identify common food allergies and explain the importance of respecting others who have allergies; and
 - (B) describe habits that improve individual health such as getting enough sleep, eating nutritious foods, and exercising.
- (9) Injury and violence prevention and safety--safety skills and unintentional injury. The student identifies and demonstrates safety and first aid knowledge to prevent and treat injuries. The student is expected to:
- (A) discuss and demonstrate strategies to keep self and others safe by staying away from dangerous situations and reporting to a parent or another trusted adult or contacting 911; and
 - (B) identify the purpose and demonstrate proper use of protective equipment such as seat belts, booster seats, and bicycle helmets.
- (10) Injury and violence prevention and safety--healthy relationships and conflict-resolution skills. The student differentiates between healthy and unhealthy relationships and demonstrates effective strategies to address conflict. The student is expected to:
- (A) practice refusal skills to protect personal space and avoid unsafe situations;
 - (B) identify appropriate personal boundaries, privacy, and space; and
 - (C) recall parents'/caregivers' phone numbers as part of a personal safety plan.
- (11) Injury and violence prevention and safety--healthy home, school, and community climate. The student understands that individual actions and awareness can impact safety, community, and environment. The student is expected to:
- (A) describe the difference between safe and unsafe environments; and
 - (B) identify ways to avoid weapons and harming oneself or others by staying away from dangerous situations and reporting to a parent or another trusted adult.
- (12) Injury and violence prevention and safety--digital citizenship and media. The student understands how to be a safe and responsible citizen in digital and online environments. The student is expected to demonstrate how to get help from a teacher, parent, or other trusted adult when made to feel bullied, uncomfortable, or unsafe in a digital or online environment.

- (13) Injury and violence prevention and safety--interpersonal violence. The student understands the impact of interpersonal violence and the importance of seeking guidance and help to maintain personal safety. The student is expected to:
 - (A) describe consequences for both the victim and the bully and the impact of bullying on the victim;
 - (B) discuss ways of discouraging bullying;
 - (C) explain the differences between teasing, joking, and playing around and bullying; and
 - (D) identify how to get help from a parent or another trusted adult when made to feel uncomfortable or unsafe by another person.
- (14) Alcohol, tobacco, and other drugs--use, misuse, and physiological effects. The student understands the difference between the use and misuse of different substances and how the use and misuse of substances impacts health. The student is expected to:
 - (A) identify the difference between over-the-counter and prescription drugs; and
 - (B) identify and describe the harmful effects of alcohol, tobacco, other drugs, and dangerous substances such as inhalants, vaping products, and household products on physical health.
- (15) Alcohol, tobacco, and other drugs--treatment. The student understands how to seek emergency help for self and others in poisoning and overdose situations. The student is expected to describe what poisoning or overdose could look like and identify how to respond, including who to contact for help.
- (16) Alcohol, tobacco, and other drugs--risk and protective factors. The student understands how various factors can influence decisions regarding substance use and the resources available for help. The student is expected to identify how to get help from a parent or another trusted adult related to alcohol, tobacco, and drug abuse.
- (17) Alcohol, tobacco, and other drugs--prevention. The student demonstrates refusal skills to avoid substance use and misuse. The student is expected to identify unsafe situations and practice strategies to avoid risky behaviors related to alcohol, tobacco, and other drugs.

§115.14. Health Education, Grade 2, Adopted 2020.

- (a) Introduction.
 - (1) The goal of health education is to provide instruction that allows youth to develop and sustain health-promoting behaviors throughout their lives. The understanding and application of these standards will allow students the ability to gather, interpret, and understand health information; achieve health literacy; and adapt to the ever-evolving science of health. The health education knowledge and skills should be presented to students in a positive manner to support the development of a healthy self-concept and responsible decision making. The standards will help students reinforce, foster, and apply positive character traits.
 - (2) There are essential skills that repeat throughout the five strands and embody the interconnection of health literacy. These skills include decision making, problem solving, goal setting, maintaining healthy relationships with self and others, seeking help and support, and recognizing various influences on health such as social, environmental, media, and genetic. These skills, developed early on and reinforced throughout a student's education, will foster mastery of health concepts. Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies.
 - (3) In Kindergarten-Grade 3, students gain an understanding of health information and skills through five strands: physical health and hygiene; mental health and wellness; healthy eating and physical activity; injury and violence prevention and safety; and alcohol, tobacco, and other drugs.

- (A) Physical health and hygiene education helps to prepare students for improved lifelong health outcomes. Learning about body systems lays the foundation for personal health and hygiene. Health literacy and preventative behaviors empower students to make informed choices to support self, family, and community.
 - (B) The mental health and wellness strand recognizes that the knowledge and skills necessary to manage emotions, reactions, and relationships are essential to reaching one's full potential. Students gain knowledge about social and emotional health, including developing a healthy self-concept, understanding risk and protective factors, and identifying and managing mental health and wellness concerns. In the early grades, students develop fluency around emotions and self-regulation and understanding the relationship between feelings, thoughts, and behavior. In subsequent grades, students learn and practice appropriate ways to solve interpersonal conflicts, work to develop a positive self-image, and develop healthy self-management skills.
 - (C) The healthy eating and physical activity strand addresses the importance of nutrition and physical activity to support a healthy lifestyle. Students apply critical-thinking and decision-making skills to make positive health choices. Students learn about essential nutrients, food groups, portion control, government nutritional recommendations, and the health benefits of being physically active. Students evaluate the connection between physical activity and nutrition and the prevention of chronic diseases.
 - (D) By focusing on injury and violence prevention and safety, the standards promote student well-being and awareness of dangerous situations. Supporting student well-being and providing instruction in digital citizenship, bullying prevention, first aid, and identification of safe and unsafe situations creates empowered and educated students who are able to make decisions that keep themselves and others safe. Beginning in Kindergarten and continuing through high school, students gain knowledge and skills to support safety and wellness at school, at home, online, and in the community.
 - (E) The standards under the alcohol, tobacco, and other drugs strand focus on a number of protective factors that develop empowered students who are able to make better-informed decisions, including understanding the impact of substance use on physical, mental, and social health. Through this strand, students learn key concepts about alcohol, tobacco, and other drugs, including the use, misuse, and physiological effects; short- and long-term impacts on health; treatment; risk and protective factors; and prevention. These concepts introduce healthy alternatives and ways for students to ask for and seek out help from parents and other trusted adults.
- (4) Statements containing the word "including" reference content that must be mastered, while those containing the phrase "such as" are intended as possible illustrative examples.
 - (5) Students should first seek guidance in the area of health from a parent or legal guardian.
- (b) Knowledge and skills.
- (1) Physical health and hygiene--body systems. The student examines the structure, function, and relationships of body systems and their relevance to personal health. The student is expected to describe ways to protect the five senses such as wearing sunglasses or using a safe volume setting on audio devices.
 - (2) Physical health and hygiene--personal health and hygiene. The student understands health literacy, preventative health behaviors, and how to access and evaluate health care information to make informed decisions. The student is expected to:
 - (A) describe the importance of individual health maintenance activities such as regular medical checkups, dental exams, and vision and hearing screenings;
 - (B) explain actions an individual should take when not feeling well;
 - (C) discuss the importance of practicing personal hygiene and health habits;

- (D) explain ways in which germs are transmitted, methods of preventing the spread of germs, and the importance of immunization;
 - (E) identify common illnesses and diseases, including asthma, diabetes, and epilepsy, and their symptoms; and
 - (F) discuss the signs and symptoms of illness that may occur after contact with biting insects, including ticks and mosquitos.
- (3) Mental health and wellness--social and emotional health. The student identifies and applies strategies to develop socio-emotional health, self-regulation, and healthy relationships. The student is expected to:
- (A) communicate needs, wants, and emotions in healthy ways;
 - (B) describe and practice calming and self-management strategies;
 - (C) discuss and explain how thoughts and emotions are related;
 - (D) explain the effect of peer influence on an individual's social and emotional health;
 - (E) describe the qualities of a good friend;
 - (F) describe and demonstrate respectful ways to communicate with family members, peers, teachers, and others;
 - (G) identify the feelings and perspectives of others by interpreting their verbal and nonverbal cues; and
 - (H) identify ways to prevent and repair broken friendships.
- (4) Mental health and wellness--developing a healthy self-concept. The student develops the capacity for self-assessment and evaluation, goal setting, and decision making in order to develop a healthy self-concept. The student is expected to:
- (A) discuss ways to be kind to self and others;
 - (B) define personal growth and identify areas for one's personal growth; and
 - (C) list the steps and describe the importance of goal setting and task completion.
- (5) Mental health and wellness--identifying and managing mental health and wellness concerns. The student develops and uses appropriate skills to identify and manage conditions related to mental health and wellness. The student is expected to:
- (A) identify strategies for managing different learning needs of self and others; and
 - (B) identify positive and negative stressors and how they impact emotions and learning.
- (6) Healthy eating and physical activity--food and beverage daily recommendations. The student identifies and explains healthy eating strategies for enhancing and maintaining personal health throughout the lifespan. The student is expected to:
- (A) identify types of nutrients;
 - (B) use familiar objects to identify healthy food portions from different food groups;
 - (C) identify healthy and unhealthy choices within the food groups; and
 - (D) identify the benefits of making healthy beverage choices, including water and milk, and limiting sweetened beverages such as soda and sports drinks.
- (7) Healthy eating and physical activity--nutrition and physical activity literacy. The student obtains, processes, and understands basic physical activity and nutrition information needed to make health-promoting decisions. The student is expected to identify various media that provide health information and how media can influence an individual's health choices such as television advertisements for fast foods and breakfast cereals.

- (8) Healthy eating and physical activity--risk and protective factors. The student identifies and explains risk and protective factors related to healthy eating and physical activity. The student is expected to:
- (A) identify signs and symptoms of common food allergies; and
 - (B) identify the benefits of establishing healthy eating and physical activity habits that will last a lifetime.
- (9) Injury and violence prevention and safety--safety skills and unintentional injury. The student identifies and demonstrates safety and first aid knowledge to prevent and treat injuries. The student is expected to describe steps one can take to reduce hazards, avoid accidents, and prevent accidental injuries for self and others.
- (10) Injury and violence prevention and safety--healthy relationships and conflict-resolution skills. The student differentiates between healthy and unhealthy relationships and demonstrates effective strategies to address conflict. The student is expected to:
- (A) demonstrate refusal skills to protect personal space and avoid unsafe situations; and
 - (B) discuss the importance of telling a parent or another trusted adult when privacy or personal boundaries are not respected or when the student is made to feel unsafe.
- (11) Injury and violence prevention and safety--healthy home, school, and community climate. The student understands that individual actions and awareness can impact safety, community, and environment. The student is expected to:
- (A) describe unsafe situations, including interacting with strangers;
 - (B) explain ways to avoid weapons and report the presence of unsupervised weapons to a parent or another trusted adult;
 - (C) identify the hazards of unsupervised and improper handling of guns and other weapons; and
 - (D) identify two trusted adults not part of the immediate family and recall their phone numbers as part of a personal safety plan.
- (12) Injury and violence prevention and safety--digital citizenship and media. The student understands how to be a safe and responsible citizen in digital and online environments. The student is expected to:
- (A) identify unsafe requests made in a digital or online environment and how to take appropriate action;
 - (B) explain why obtaining help, especially from parents or other trusted adults, is critical when making decisions regarding digital and online use; and
 - (C) identify consequences that result from cyberbullying and inappropriate digital and online usage.
- (13) Injury and violence prevention and safety--interpersonal violence. The student understands the impact of interpersonal violence and the importance of seeking guidance and help to maintain personal safety. The student is expected to:
- (A) describe consequences for the bully and the impact of bullying on the victim;
 - (B) describe the difference between reporting and tattling; and
 - (C) explain why obtaining assistance, especially from parents or other trusted adults, can be helpful when making decisions about personal safety.
- (14) Alcohol, tobacco, and other drugs--use, misuse, and physiological effects. The student understands the difference between the use and misuse of different substances and how the use and misuse of substances impacts health. The student is expected to:

- (A) describe the purposes of prescription and over-the-counter drugs and their intended benefits; and
 - (B) explain the harmful effects on physical health and how to avoid alcohol, tobacco, other drugs, and dangerous substances such as inhalants, vaping products, and household products.
- (15) Alcohol, tobacco, and other drugs--treatment. The student understands how to seek emergency help for self and others in poisoning and overdose situations. The student is expected to describe what poisoning or overdose could look like and identify how to respond, including who to contact for help.
- (16) Alcohol, tobacco, and other drugs--risk and protective factors. The student understands how various factors can influence decisions regarding substance use and the resources available for help. The student is expected to:
- (A) identify unsafe requests related to alcohol, tobacco, and other drugs made by friends; and
 - (B) identify a trusted adult such as a parent, teacher, or law enforcement officer.
- (17) Alcohol, tobacco, and other drugs--prevention. The student demonstrates refusal skills to avoid substance use and misuse. The student is expected to identify ways to avoid unsafe situations related to alcohol, tobacco, and other drugs and demonstrate refusal skills.

§115.15. Health Education, Grade 3, Adopted 2020.

- (a) Introduction.
- (1) The goal of health education is to provide instruction that allows youth to develop and sustain health-promoting behaviors throughout their lives. The understanding and application of these standards will allow students the ability to gather, interpret, and understand health information; achieve health literacy; and adapt to the ever-evolving science of health. The health education knowledge and skills should be presented to students in a positive manner to support the development of a healthy self-concept and responsible decision making. The standards will help students reinforce, foster, and apply positive character traits.
 - (2) There are essential skills that repeat throughout the five strands and embody the interconnection of health literacy. These skills include decision making, problem solving, goal setting, maintaining healthy relationships with self and others, seeking help and support, and recognizing various influences on health such as social, environmental, media, and genetic. These skills, developed early on and reinforced throughout a student's education, will foster mastery of health concepts. Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies.
 - (3) In Kindergarten-Grade 3, students gain an understanding of health information and skills through five strands: physical health and hygiene; mental health and wellness; healthy eating and physical activity; injury and violence prevention and safety; and alcohol, tobacco, and other drugs.
 - (A) Physical health and hygiene education helps to prepare students for improved lifelong health outcomes. Learning about body systems lays the foundation for personal health and hygiene. Health literacy and preventative behaviors empower students to make informed choices to support self, family, and community.
 - (B) The mental health and wellness strand recognizes that the knowledge and skills necessary to manage emotions, reactions, and relationships are essential to reaching one's full potential. Students gain knowledge about social and emotional health, including developing a healthy self-concept, understanding risk and protective factors, and identifying and managing mental health and wellness concerns. In the early grades, students develop fluency around emotions and self-regulation and understand the relationship between feelings, thoughts, and behavior. In subsequent grades, students

learn and practice appropriate ways to solve interpersonal conflicts, work to develop a positive self-image, and develop healthy self-management skills.

- (C) The healthy eating and physical activity strand addresses the importance of nutrition and physical activity to support a healthy lifestyle. Students apply critical-thinking and decision-making skills to make positive health choices. Students learn about essential nutrients, food groups, portion control, government nutritional recommendations, and the health benefits of being physically active. Students evaluate the connection between physical activity and nutrition and the prevention of chronic diseases.
 - (D) By focusing on injury and violence prevention and safety, the standards promote student well-being and awareness of dangerous situations. Supporting student well-being and providing instruction in digital citizenship, bullying prevention, first aid, and the identification of safe and unsafe situations creates empowered and educated students who are able to make decisions that keep themselves and others safe. Beginning in Kindergarten and continuing through high school, students gain knowledge and skills to support safety and wellness at school, at home, online, and in the community.
 - (E) The standards under the alcohol, tobacco, and other drugs strand focus on a number of protective factors that develop empowered students who are able to make better-informed decisions, including understanding the impact of substance use on physical, mental, and social health. Through this strand, students learn key concepts about alcohol, tobacco, and other drugs, including the use, misuse, and physiological effects; short- and long-term impacts on health; treatment; risk and protective factors; and prevention. These concepts introduce healthy alternatives and ways for students to ask for and seek out help from parents and other trusted adults.
- (4) Statements containing the word "including" reference content that must be mastered, while those containing the phrase "such as" are intended as possible illustrative examples.
 - (5) Students should first seek guidance in the area of health from a parent or legal guardian.
- (b) Knowledge and skills.
- (1) Physical health and hygiene--body systems. The student examines the structure, function, and relationships of body systems and their relevance to personal health. The student is expected to name, locate, and describe the primary functions and major components of body systems, including the skeletal, muscular, circulatory, and respiratory systems.
 - (2) Physical health and hygiene--personal health and hygiene. The student understands health literacy, preventative health behaviors, and how to access and evaluate health care information to make informed decisions. The student is expected to:
 - (A) explain the importance of seeking assistance in making decisions about health;
 - (B) describe methods of accessing information about health;
 - (C) identify the benefits of decision making about personal health;
 - (D) identify the importance of taking personal responsibility for developing and maintaining personal hygiene and health habits;
 - (E) explain ways in which germs are transmitted, methods of preventing the spread of germs, and the importance of immunization;
 - (F) identify that there are diseases such as allergies, asthma, diabetes, and epilepsy that are not caused by germs; and
 - (G) identify common vectors, including ticks and mosquitos, and explain how and when to perform a self-check for vectors.
 - (3) Mental health and wellness--social and emotional health. The student identifies and applies strategies to develop socio-emotional health, self-regulation, and healthy relationships. The student is expected to:

- (A) communicate needs, wants, and emotions in healthy ways;
 - (B) describe strategies for assessing thoughts and applying calming and self-management practices;
 - (C) discuss and explain how the brain develops through maturation;
 - (D) distinguish between healthy and harmful influences of friends and others;
 - (E) describe the characteristics of healthy and unhealthy friendships;
 - (F) describe the value of respectful communication;
 - (G) discuss how others may experience situations differently than oneself; and
 - (H) demonstrate strategies for resolving conflicts.
- (4) Mental health and wellness--developing a healthy self-concept. The student develops the capacity for self-assessment and evaluation, goal setting, and decision making in order to develop a healthy self-concept. The student is expected to:
- (A) define self-esteem and ways it is formed, including identifying areas for one's personal growth; and
 - (B) describe the importance of seeking guidance from a parent or another trusted adult in setting goals.
- (5) Mental health and wellness--identifying and managing mental health and wellness concerns. The student will develop and use appropriate skills to identify and manage conditions related to mental health and wellness. The student is expected to:
- (A) describe methods for managing challenges related to long-term health conditions;
 - (B) describe strategies to support others in managing different learning needs;
 - (C) describe positive outcomes of stress, including creativity, focus, energy, drive, and purpose;
 - (D) describe and practice healthy behaviors that reduce stress; and
 - (E) describe the importance of acceptance of oneself and others.
- (6) Healthy eating and physical activity--food and beverage daily recommendations. The student identifies and explains healthy eating strategies for enhancing and maintaining personal health throughout the lifespan. The student is expected to:
- (A) classify foods by the nutrients they provide;
 - (B) plan a balanced meal that follows government nutrition guidelines;
 - (C) examine nutrition labels to identify the difference between foods containing natural sugars and foods with added sugars or sweeteners; and
 - (D) identify and categorize foods based on saturated and unsaturated fat content.
- (7) Healthy eating and physical activity--nutrition and physical activity literacy. The student obtains, processes, and understands basic physical activity and nutrition information needed to make health-promoting decisions. The student is expected to describe the importance of accessing health information through a variety of credible health resources.
- (8) Healthy eating and physical activity--risk and protective factors. The student identifies and explains risk and protective factors related to healthy eating and physical activity. The student is expected to:
- (A) identify the common food allergens listed on food packaging; and
 - (B) describe how healthy and unhealthy behaviors affect body systems and demonstrate refusal skills in dealing with unhealthy eating situations.

- (9) Injury and violence prevention and safety--safety skills and unintentional injury. The student identifies and demonstrates safety and first aid knowledge to prevent and treat injuries. The student is expected to develop a home-safety and emergency response plan such as a fire safety plan.
- (10) Injury and violence prevention and safety--healthy relationships and conflict-resolution skills. The student differentiates between healthy and unhealthy relationships and demonstrates effective strategies to address conflict. The student is expected to identify refusal skills such as saying "no" when privacy, personal boundaries, or personal space are not respected.
- (11) Injury and violence prevention and safety--healthy home, school, and community climate. The student understands that individual actions and awareness can impact safety, community, and environment. The student is expected to:
- (A) identify reasons for avoiding violence, gangs, weapons, and drugs;
 - (B) identify characteristics of safe home, school, and community environments;
 - (C) discuss the hazards of unsupervised and improper handling of guns and other weapons; and
 - (D) create a personal safety plan.
- (12) Injury and violence prevention and safety--digital citizenship and media. The student understands how to be a safe and responsible citizen in digital and online environments. The student is expected to:
- (A) identify and discuss the need for safety awareness in a digital or online environment;
 - (B) identify appropriate ways to communicate in digital and online environments;
 - (C) discuss who is appropriate to communicate with and what is appropriate information to share in digital and online environments; and
 - (D) explain consequences that result from cyberbullying and inappropriate digital and online usage.
- (13) Injury and violence prevention and safety--interpersonal violence. The student understands the impact of interpersonal violence and the importance of seeking guidance and help to maintain personal safety. The student is expected to:
- (A) describe how to effectively respond to bullying and cyberbullying of oneself or others;
 - (B) explain the importance of seeking assistance in making decisions about personal safety; and
 - (C) define abuse and neglect.
- (14) Alcohol, tobacco, and other drugs--use, misuse, and physiological effects. The student understands the difference between the use and misuse of different substances and how the use and misuse of substances impacts health. The student is expected to:
- (A) identify misuse and proper use of over-the-counter and prescription drugs; and
 - (B) describe the harmful effects of alcohol, tobacco, other drugs, and dangerous substances, including inhalants, vaping products, and household products, on physical health.
- (15) Alcohol, tobacco, and other drugs--short- and long-term impacts. The student identifies and analyzes the short- and long-term impacts of the use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances. The student is expected to describe the harmful effects of alcohol, tobacco, other drugs, and dangerous substances such as inhalants and household products on mental and social health.

- (16) Alcohol, tobacco, and other drugs--treatment. The student understands how to seek emergency help for self and others in poisoning and overdose situations. The student is expected to describe the signs of poisoning or overdose and identify how to respond, including who to contact for help.
- (17) Alcohol, tobacco, and other drugs--risk and protective factors. The student understands how various factors can influence decisions regarding substance use and the resources available for help. The student is expected to:
 - (A) describe how friends can influence a person's decision to use or not use alcohol or drugs; and
 - (B) describe the difference between reporting and tattling and why it is important to report the use of alcohol, tobacco, and other drugs by friends or peers.
- (18) Alcohol, tobacco, and other drugs--prevention. The student demonstrates refusal skills to avoid substance use and misuse. The student is expected to demonstrate refusal skills related to alcohol, tobacco, and other drugs using assertive communication.

§115.16. Health Education, Grade 4, Adopted 2020.

- (a) Introduction.
 - (1) The goal of health education is to provide instruction that allows youth to develop and sustain health-promoting behaviors throughout their lives. The understanding and application of these standards will allow students the ability to gather, interpret, and understand health information; achieve health literacy; and adapt to the ever-evolving science of health. The health education knowledge and skills should be presented to students in a positive manner to support the development of a healthy self-concept and responsible decision making. The standards will help students reinforce, foster, and apply positive character traits.
 - (2) There are essential skills that repeat throughout the six strands and embody the interconnection of health literacy. These skills include decision making, problem solving, goal setting, maintaining healthy relationships with self and others, seeking help and support, and recognizing various influences on health such as social, environmental, media, and genetic. These skills, developed early on and reinforced throughout a student's education, will foster mastery of health concepts. Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies.
 - (3) In Grade 4 and higher, students gain an understanding of health information and skills through six strands: physical health and hygiene; mental health and wellness; healthy eating and physical activity; injury and violence prevention and safety; alcohol, tobacco, and other drugs; and reproductive and sexual health.
 - (A) Physical health and hygiene education helps to prepare students for improved lifelong health outcomes. Learning about body systems will lay the foundation for personal health and hygiene. Health literacy and preventative behaviors empower students to make informed choices to support self, family, and community.
 - (B) The mental health and wellness strand recognizes that the knowledge and skills necessary to manage emotions, reactions, and relationships are essential to reaching one's full potential. Students gain knowledge about social and emotional health, developing a healthy self-concept, understanding risk and protective factors, and identifying and managing mental health and wellness concerns. In the early grades, students develop fluency around emotions and self-regulation and understand the relationship between feelings, thoughts, and behavior. In subsequent grades, students learn and practice appropriate ways to solve interpersonal conflicts, work to develop a positive self-image, and develop healthy self-management skills.
 - (C) The healthy eating and physical activity strand addresses the importance of nutrition and physical activity to support a healthy lifestyle. Students apply critical-thinking and

decision-making skills to make positive health choices. Students learn about essential nutrients, food groups, portion control, government nutritional recommendations, and the health benefits of being physically active. Students evaluate the connection between physical activity and nutrition and the prevention of chronic diseases.

- (D) By focusing on injury and violence prevention and safety, the standards promote student well-being and awareness of dangerous situations. Supporting student well-being and providing instruction in digital citizenship, bullying prevention, first aid, and the identification of safe and unsafe situations creates empowered and educated students able to make decisions that keep themselves and others safe. Beginning in Kindergarten and continuing through high school, students gain knowledge and skills to support safety and wellness at school, at home, online, and in the community.
 - (E) The standards under the alcohol, tobacco, and other drugs strand focus on a number of protective factors that develop empowered students who are able to make better-informed decisions, including understanding the impact of substance use on physical, mental, and social health. Through this strand, students learn key concepts about alcohol, tobacco, and other drugs, including the use, misuse, and physiological effects; short- and long-term impacts on health; treatment; risk and protective factors; and prevention. These concepts introduce healthy alternatives and ways for students to ask for and seek out help from parents and other trusted adults.
 - (F) Beginning in Grade 4, students learn about changes associated with adolescent development in the reproductive and sexual health strand. In subsequent grade levels, students identify the purpose of these changes and their role in fertilization and reproduction. Students learn the characteristics of healthy and unhealthy relationships and how to use communication and refusal skills to set personal boundaries in dating/romantic relationships. Students also identify how to respond to sexual harassment and abuse.
- (4) An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:
- (A) a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC), §28.004(e)-(h));
 - (B) the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC, §28.004(i)-(j));
 - (C) the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC, §28.004(i));
 - (D) the centrality of abstinence education in any human sexuality curriculum (TEC, §28.004(e)); and
 - (E) the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33).
- (5) Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272).
- (6) Statements containing the word "including" reference content that must be mastered, while those containing the phrase "such as" are intended as possible illustrative examples.
- (7) Students should first seek guidance in the area of health from a parent or legal guardian.
- (b) Knowledge and skills.
- (1) Physical health and hygiene--body systems. The student examines the structure, function, and relationships of body systems and their relevance to personal health. The student is expected to

name, locate, and describe the primary function and major components of the body systems, including the nervous, immune, digestive, and integumentary systems.

- (2) Physical health and hygiene--personal health and hygiene. The student understands health literacy, preventative health behaviors, and how to access and evaluate health care information to make informed decisions. The student is expected to:
 - (A) explain the importance of health information and how it can be used;
 - (B) describe how health care decision making is influenced by external factors such as cost and access;
 - (C) explain strategies for maintaining personal hygiene and health habits;
 - (D) distinguish between communicable and noncommunicable illnesses;
 - (E) explain actions to take when illness occurs, including asthma, diabetes, and epilepsy; and
 - (F) define vector-borne illnesses and describe how to reduce their risk.
- (3) Mental health and wellness--social and emotional health. The student identifies and applies strategies to develop socio-emotional health, self-regulation, and healthy relationships. The student is expected to:
 - (A) analyze how thoughts and emotions influence behaviors;
 - (B) describe the importance of identifying and reframing thoughts and applying calming and self-management strategies when dealing with strong emotions, including anger;
 - (C) discuss and explain how the brain develops during childhood and the role the brain plays in behavior;
 - (D) identify positive and negative characteristics of social groups;
 - (E) explain the importance of being a positive role model;
 - (F) explain the importance of demonstrating consideration when communicating with individuals who use diverse methods to communicate such as different languages or adaptive methods;
 - (G) identify verbal, physical, and situational cues that indicate how others may feel; and
 - (H) explain the difference between assertive behavior and aggressive behavior.
- (4) Mental health and wellness--developing a healthy self-concept. The student develops the capacity for self-assessment and evaluation, goal setting, and decision making in order to develop a healthy self-concept. The student is expected to:
 - (A) discuss ways to help build self-esteem of self, friends, and others, including areas for one's personal growth and ways to gather constructive feedback;
 - (B) explain the advantages of setting short- and long-term goals; and
 - (C) explain the importance of time management with respect to a goal.
- (5) Mental health and wellness--identifying and managing mental health and wellness concerns. The student develops and uses appropriate skills to identify and manage conditions related to mental health and wellness. The student is expected to:
 - (A) describe methods for managing concerns related to long-term health conditions for self and others;
 - (B) differentiate between positive and negative stress;
 - (C) define sources of stress, including trauma, loss, and grief;
 - (D) discuss ways to promote a healthy body image; and

- (E) identify ways to express and manage overwhelming emotions without harming oneself, others, or property such as calming strategies or talking to a parent or another trusted adult.
- (6) Healthy eating and physical activity--food and beverage daily recommendations. The student identifies and explains healthy eating strategies for enhancing and maintaining personal health throughout the lifespan. The student is expected to:
- (A) explain why the body needs each of the six major nutrients contained in foods;
 - (B) identify nutritional information on menus and food labels;
 - (C) determine appropriate portion sizes when eating out, including at fast food restaurants;
 - (D) identify the recommended guidelines for added sugar consumption and explain how excess sugar consumption can impact health, including causing dental cavities and obesity; and
 - (E) identify healthy fast food choices such as ordering smaller serving sizes and substituting salads for fries and grilled foods for fried foods and their associated impacts on health.
- (7) Healthy eating and physical activity--physical activity. The student identifies, analyzes, and applies strategies for enhancing and maintaining optimal personal physical fitness throughout the lifespan. The student is expected to identify the physical, mental, and social benefits of physical fitness.
- (8) Healthy eating and physical activity--nutrition and physical activity literacy. The student obtains, processes, and understands basic physical activity and nutrition information needed to make health-promoting decisions. The student is expected to:
- (A) describe the importance of goal setting and set a goal for making healthy food choices; and
 - (B) gather data from a variety of credible sources to help make informed nutritional and physical activity choices.
- (9) Healthy eating and physical activity--risk and protective factors. The student identifies and explains risk and protective factors related to healthy eating and physical activity. The student is expected to:
- (A) describe the connection between physical activity and the prevention of obesity, heart disease, and diabetes; and
 - (B) differentiate between healthy and unhealthy eating habits and demonstrate refusal skills in dealing with unhealthy eating situations.
- (10) Injury and violence prevention and safety--safety skills and unintentional injury. The student identifies and demonstrates safety and first aid knowledge to prevent and treat injuries. The student is expected to identify and demonstrate strategies for preventing and responding to injuries.
- (11) Injury and violence prevention and safety--healthy relationships and conflict-resolution skills. The student differentiates between healthy and unhealthy relationships and demonstrates effective strategies to address conflict. The student is expected to explain the importance of using refusal skills such as saying "no" when privacy, personal boundaries, or personal space are not respected.
- (12) Injury and violence prevention and safety--healthy home, school, and community climate. The student understands that individual actions and awareness can impact safety, community, and environment. The student is expected to:
- (A) identify strategies for avoiding violence, gangs, and weapons;
 - (B) identify characteristics of gang behavior;

- (C) identify strategies that can be used to promote safety in homes, schools, and communities; and
 - (D) create a personal safety plan.
- (13) Injury and violence prevention and safety--digital citizenship and media. The student understands how to be a safe and responsible citizen in digital and online environments. The student is expected to:
- (A) differentiate between appropriate and inappropriate ways to communicate in digital and online environments;
 - (B) explain what information is appropriate to share and who it is appropriate to share information with in digital and online environments; and
 - (C) discuss the consequences of cyberbullying and inappropriate digital and online communication in relation to home and school environments.
- (14) Injury and violence prevention and safety--interpersonal violence. The student understands the impact of interpersonal violence and the importance of seeking guidance and help to maintain personal safety. The student is expected to:
- (A) analyze distinguishing characteristics of cyberbullying;
 - (B) describe the negative impact bullying, including cyberbullying, has on both the victim and the bully;
 - (C) explain the importance of seeking guidance from parents and other trusted adults on critical personal safety issues; and
 - (D) identify types of abuse and neglect and ways to seek help from a parent or another trusted adult.
- (15) Alcohol, tobacco, and other drugs--use, misuse, and physiological effects. The student understands the difference between the use and misuse of different substances and how the use and misuse of substances impacts health. The student is expected to:
- (A) explain why some drugs require a prescription; and
 - (B) identify the differences between prescription drugs, over-the-counter drugs, other drugs, and dangerous substances, including inhalants, vaping products, and household products.
- (16) Alcohol, tobacco, and other drugs--short- and long-term impacts. The student identifies and analyzes the short- and long-term impacts of use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances. The student is expected to:
- (A) describe the short- and long-term harmful effects of alcohol, tobacco, other drugs, and dangerous substances such as inhalants and household products on mental and social health; and
 - (B) describe the legal consequences of the misuse of alcohol, tobacco, other drugs, and dangerous substances.
- (17) Alcohol, tobacco, and other drugs--treatment. The student understands how to seek emergency help for self and others in poisoning and overdose situations. The student is expected to describe the signs of poisoning or overdose and identify how to respond, including who to contact for help.
- (18) Alcohol, tobacco, and other drugs--risk and protective factors. The student understands how various factors can influence decisions regarding substance use and the resources available for help. The student is expected to:
- (A) distinguish between positive and negative peer influences and their effects on a person's decision to use or not use alcohol or drugs; and

- (B) identify methods available to report unsafe situations related to alcohol, tobacco, and other drugs.
- (19) Alcohol, tobacco, and other drugs--prevention. The student demonstrates refusal skills to avoid substance use and misuse. The student is expected to:
 - (A) demonstrate refusal skills using assertive communication related to alcohol, tobacco, and other drugs; and
 - (B) identify ways to avoid drugs and discuss healthy alternative activities to the use of drugs and other substances.
- (20) Reproductive and sexual health--anatomy, puberty, and reproduction. The student identifies adolescent development. The student is expected to:
 - (A) explain changes that occur in males and females during puberty and adolescent development; and
 - (B) define the menstrual cycle.

§115.17. Health Education, Grade 5, Adopted 2020.

(a) Introduction.

- (1) The goal of health education is to provide instruction that allows youth to develop and sustain health-promoting behaviors throughout their lives. The understanding and application of these standards will allow students the ability to gather, interpret, and understand health information; achieve health literacy; and adapt to the ever-evolving science of health. The health education knowledge and skills should be presented to students in a positive manner to support the development of a healthy self-concept and responsible decision making. The standards will help students reinforce, foster, and apply positive character traits.
- (2) There are essential skills that repeat throughout the six strands and embody the interconnection of health literacy. These skills include decision making, problem solving, goal setting, maintaining healthy relationships with self and others, seeking help and support, and recognizing various influences on health such as social, environmental, media, and genetic. These skills, developed early on and reinforced throughout a student's education, will foster mastery of health concepts. Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies.
- (3) In Grade 4 and higher, students gain an understanding of health information and skills through six strands: physical health and hygiene; mental health and wellness; healthy eating and physical activity; injury and violence prevention and safety; alcohol, tobacco, and other drugs; and reproductive and sexual health.
 - (A) Physical health and hygiene education helps to prepare students for improved lifelong health outcomes. Learning about body systems will lay the foundation for personal health and hygiene. Health literacy and preventative behaviors empower students to make informed choices to support self, family, and community.
 - (B) The mental health and wellness strand recognizes that the knowledge and skills necessary to manage emotions, reactions, and relationships are essential to reaching one's full potential. Students gain knowledge about social and emotional health, developing a healthy self-concept, understanding risk and protective factors, and identifying and managing mental health and wellness concerns. In the early grades, students develop fluency around emotions and self-regulation and understand the relationship between feelings, thoughts, and behavior. In subsequent grades, students learn and practice appropriate ways to solve interpersonal conflicts, work to develop a positive self-image, and develop healthy self-management skills.

- (C) The healthy eating and physical activity strand addresses the importance of nutrition and physical activity to support a healthy lifestyle. Students apply critical-thinking and decision-making skills to make positive health choices. Students learn about essential nutrients, food groups, portion control, government nutritional recommendations, and the health benefits of being physically active. Students evaluate the connection between physical activity and nutrition and the prevention of chronic diseases.
 - (D) By focusing on injury and violence prevention and safety, the standards promote student well-being and awareness of dangerous situations. Supporting student well-being and providing instruction in digital citizenship, bullying prevention, first aid, and the identification of safe and unsafe situations creates empowered and educated students able to make decisions that keep themselves and others safe. Beginning in Kindergarten and continuing through high school, students gain knowledge and skills to support safety and wellness at school, at home, online, and in the community.
 - (E) The standards under the alcohol, tobacco, and other drugs strand focus on a number of protective factors that develop empowered students who are able to make better-informed decisions, including understanding the impact of substance use on physical, mental, and social health. Through this strand, students learn key concepts about alcohol, tobacco, and other drugs, including the use, misuse, and physiological effects; short- and long-term impacts on health; treatment; risk and protective factors; and prevention. These concepts introduce healthy alternatives and ways for students to ask for and seek out help from parents and other trusted adults.
 - (F) Beginning in Grade 4, students learn about changes associated with adolescent development in the reproductive and sexual health strand. In subsequent grade levels, students identify the purpose of these changes and their role in fertilization and reproduction. Students learn the characteristics of healthy and unhealthy relationships and how to use communication and refusal skills to set personal boundaries in dating/romantic relationships. Students also identify how to respond to sexual harassment and abuse.
- (4) An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:
- (A) a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC), §28.004(e)-(h));
 - (B) the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC, §28.004(i)-(j));
 - (C) the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC, §28.004(i));
 - (D) the centrality of abstinence education in any human sexuality curriculum (TEC, §28.004(e)); and
 - (E) the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33).
- (5) Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272).
- (6) Statements containing the word "including" reference content that must be mastered, while those containing the phrase "such as" are intended as possible illustrative examples.
- (7) Students should first seek guidance in the area of health from a parent or legal guardian.
- (b) Knowledge and skills.

- (1) Physical health and hygiene--body systems. The student examines the structure, function, and relationships of body systems and their relevance to personal health. The student is expected to describe the structure, functions, and interdependence of the major body systems, including the reproductive, endocrine, and urinary systems.
- (2) Physical health and hygiene--personal health and hygiene. The student understands health literacy, preventative health behaviors, and how to access and evaluate health care information to make informed decisions. The student is expected to:
 - (A) explain how to manage common minor illnesses such as colds and skin infections;
 - (B) identify how to distinguish between myth and fact when accessing information about health;
 - (C) identify decision-making skills that promote individual, family, and community health;
 - (D) describe the benefits of promoting health maintenance for individuals and households;
 - (E) analyze how personal hygiene helps prevent the spread of germs and communicable illnesses; and
 - (F) distinguish between treatments if infected by various vectors, including ticks and mosquitos.
- (3) Mental health and wellness--social and emotional health. The student identifies and applies strategies to develop socio-emotional health, self-regulation, and healthy relationships. The student is expected to:
 - (A) analyze how thoughts and emotions influence behaviors;
 - (B) practice and apply strategies for calming and self-management;
 - (C) explain ways of maintaining healthy relationships and resisting negative peer influence in social groups;
 - (D) analyze how to identify perspectives and respectful ways to communicate disagreement with friends, family, teachers, and others;
 - (E) define and differentiate between sympathy and empathy toward others; and
 - (F) describe ways to engage in and promote positive interactions when conflict arises.
- (4) Mental health and wellness--developing a healthy self-concept. The student develops the capacity for self-assessment and evaluation, goal setting, and decision making in order to develop a healthy self-concept. The student is expected to:
 - (A) identify and demonstrate strategies to help build self-esteem for self, friends, and others;
 - (B) describe benefits of setting and implementing short- and long-term goals and perseverance to achieve those goals;
 - (C) discuss choices and decision making as part of goal setting; and
 - (D) identify goals that one wishes to achieve, including identifying areas for one's personal growth and ways to gather constructive feedback.
- (5) Mental health and wellness--risk and protective factors. The student recognizes the influence of various factors on mental health and wellness. The student is expected to:
 - (A) identify factors such as school climate and safety measures that affect an individual's physical, emotional, and social health; and
 - (B) discuss how brain development during childhood affects emotions and decision making.
- (6) Mental health and wellness--identifying and managing mental health and wellness concerns. The student develops and uses appropriate skills to identify and manage conditions related to mental health and wellness. The student is expected to:

- (A) compare and contrast healthy and unhealthy methods for managing concerns related to long-term health conditions for self and others;
 - (B) identify situations in which stress can help to achieve goals and build resiliency;
 - (C) examine ways to reduce the impact of stress, trauma, loss, and grief;
 - (D) define eating disorders and disordered eating patterns as mental health concerns and the importance of seeking help from a parent or another trusted adult for self or others if these patterns are observed;
 - (E) describe situations that call for professional mental health services; and
 - (F) discuss healthy alternatives to harming oneself, others, or property and the importance of telling a parent or another trusted adult when someone is struggling to manage overwhelming emotions or lacks support.
- (7) Healthy eating and physical activity--food and beverage daily recommendations. The student analyzes and applies healthy eating strategies for enhancing and maintaining personal health throughout the lifespan. The student is expected to:
- (A) identify foods that are sources of one or more of the six major nutrients;
 - (B) examine food labels and menus for nutritional content, calories, and serving sizes;
 - (C) identify the amount of sugar in common beverages and snacks and the daily recommended allowance for added sugar; and
 - (D) identify caffeine content of common beverages and health concerns associated with excess caffeine consumption.
- (8) Healthy eating and physical activity--physical activity. The student identifies, analyzes, and applies strategies for enhancing and maintaining optimal personal physical fitness throughout the lifespan. The student is expected to explain the physical, mental, and social benefits of fitness.
- (9) Healthy eating and physical activity--nutrition and physical activity literacy. The student obtains, processes, and understands basic physical activity and nutrition information needed to make health-promoting decisions. The student is expected to:
- (A) describe the importance of goal setting and set a goal for achieving appropriate levels of physical activity; and
 - (B) research and evaluate health products and information about physical activity and nutritional choices.
- (10) Healthy eating and physical activity--risk and protective factors. The student analyzes and applies risk and protective factors related to healthy eating and physical activity. The student is expected to:
- (A) describe the connection between dietary choices and the prevention of obesity, heart disease, and diabetes; and
 - (B) identify attitudes and behaviors that can reduce the likelihood of developing chronic conditions such as obesity, heart disease, or diabetes.
- (11) Injury and violence prevention and safety--safety skills and unintentional injury. The student identifies and demonstrates safety and first aid knowledge to prevent and treat injuries. The student is expected to analyze strategies for preventing and responding to injuries.
- (12) Injury and violence prevention and safety--healthy home, school, and community climate. The student understands that individual actions and awareness can impact safety, community, and environment. The student is expected to:
- (A) explain strategies for avoiding violence, gangs, and weapons and define human trafficking;

- (B) examine characteristics of gang behavior;
 - (C) identify safety procedures that can be used in various situations, including violence in the home, school, and community; and
 - (D) create a personal safety plan.
- (13) Injury and violence prevention and safety--digital citizenship and media. The student understands how to be a safe and responsible citizen in digital and online environments. The student is expected to:
- (A) distinguish between appropriate and inappropriate boundaries for digital and online communication and research;
 - (B) explain the benefits of identity protection in digital and online environments; and
 - (C) analyze the consequences of cyberbullying and inappropriate digital and online communication in relation to home, school, and community environments.
- (14) Injury and violence prevention and safety--interpersonal violence. The student understands the impact of interpersonal violence and the importance of seeking guidance and help to maintain personal safety. The student is expected to:
- (A) identify methods available to report bullying;
 - (B) identify ways to advocate for self and others to prevent bullying and cyberbullying behavior; and
 - (C) explain the impact of abuse and neglect and the importance of reporting abuse and neglect.
- (15) Alcohol, tobacco, and other drugs--use, misuse, and physiological effects. The student understands the difference between the use and misuse of different substances and how the use and misuse of substances impacts health. The student is expected to:
- (A) explain the reasons to avoid the misuse of over-the-counter and prescription drugs;
 - (B) identify and explain the importance of each component of prescription and over-the-counter drug labels; and
 - (C) describe the physiological effects of alcohol, vaping products, tobacco, other drugs, and dangerous substances.
- (16) Alcohol, tobacco, and other drugs--short- and long-term impacts. The student identifies and analyzes the short- and long-term impacts of use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances. The student is expected to:
- (A) analyze the short- and long-term harmful effects of alcohol, tobacco, other drugs, and dangerous substances such as inhalants and household products on the functions of the body systems and mental and social health; and
 - (B) describe the legal consequences of the illegal use of alcohol, tobacco, other drugs, and dangerous substances.
- (17) Alcohol, tobacco, and other drugs--treatment. The student understands how to seek emergency help for self and others in poisoning and overdose situations. The student is expected to describe the signs of poisoning or overdose and identify how to respond, including who to contact for help.
- (18) Alcohol, tobacco, and other drugs--risk and protective factors. The student understands how various factors can influence decisions regarding substance use and the resources available for help. The student is expected to:
- (A) analyze how positive peer influence can be used to help a person decide not to use alcohol or drugs; and

- (B) describe the importance of seeking help and reporting unsafe situations related to alcohol, tobacco, and other drugs.
- (19) Alcohol, tobacco, and other drugs--prevention. The student demonstrates refusal skills to avoid substance use and misuse. The student is expected to:
- (A) assess how being assertive, using refusal skills, and evaluating peer influence can affect decision making and problem solving;
 - (B) identify a variety of scenarios and the different types of refusal skills that can be used to avoid the use of alcohol, tobacco, and other drugs; and
 - (C) identify and describe healthy alternative activities to the use of drugs and other substances.
- (20) Reproductive and sexual health--healthy relationships. The student understands the characteristics of healthy romantic relationships. The student is expected to
- identify characteristics of healthy dating/romantic relationships and marriage, including sharing, kindness, honesty, respect, trust, patience, communication, and compatibility.
- (21) Reproductive and sexual health--personal safety, limits, and boundaries. The student understands how to set and respect personal boundaries to reduce the risk of sexual abuse and harassment. The student is expected to:
- (A) define sexual harassment, sexual abuse, sexual assault, and sex trafficking;
 - (B) identify ways of reporting suspected sexual abuse involving self or others such as telling a parent or another trusted adult;
 - (C) identify refusal skills such as saying "no" to any unwanted touch that violates personal boundaries in relationships; and
 - (D) discuss and explain the importance of making decisions regarding setting personal boundaries and respecting the boundaries of others.
- (22) Reproductive and sexual health--anatomy, puberty, reproduction, and pregnancy. The student identifies the processes of adolescent development, fertilization, and healthy fetal development. The student is expected to:
- (A) explain the physical, social, and emotional changes that occur in males and females during puberty and adolescent development;
 - (B) describe the process of the menstrual cycle;
 - (C) identify and describe the role of hormones in the growth and development of secondary sex characteristics such as body hair growth and voice change in males;
 - (D) define the processes of fertilization and reproduction; and
 - (E) identify significant milestones of fetal development.

STATUTORY AUTHORITY. The new sections are adopted under Texas Education Code (TEC), §7.102(c)(4), which requires the State Board of Education (SBOE) to establish curriculum and graduation requirements; TEC, §28.002(a), which identifies the subjects of the required curriculum; TEC, §28.002(c), which requires the SBOE to by rule identify the essential knowledge and skills of each subject in the required curriculum that all students should be able to demonstrate and that will be used in evaluating instructional materials and addressed on the state assessment instruments; TEC, §28.002(r), which requires the SBOE to by rule adopt essential knowledge and skills for the health curriculum that address substance abuse; and TEC, §28.002(s), which requires the SBOE to by rule adopt essential knowledge and skills for the health curriculum that address bullying.

CROSS REFERENCE TO STATUTE. The new sections implement Texas Education Code, §7.102(c)(4) and §28.002(a), (c), (r), and (s).

§115.25. Implementation of Texas Essential Knowledge and Skills for Health Education, Adopted 2020.

- (a) The provisions of §115.26 and §115.27 of this subchapter shall be implemented by school districts.
- (b) No later than July 31, 2021, the commissioner of education shall determine whether instructional materials funding has been made available to Texas public schools for materials that cover the essential knowledge and skills for health education as adopted in §115.26 and §115.27 of this subchapter.
- (c) If the commissioner makes the determination that instructional materials funding has been made available under subsection (b) of this section, §115.26 and §115.27 of this subchapter shall be implemented beginning with the 2022-2023 school year and apply to the 2022-2023 and subsequent school years.
- (d) If the commissioner does not make the determination that instructional materials funding has been made available under subsection (b) of this section, the commissioner shall determine no later than July 31 of each subsequent school year whether instructional materials funding has been made available. If the commissioner determines that instructional materials funding has been made available, the commissioner shall notify the State Board of Education and school districts that §115.26 and §115.27 of this subchapter shall be implemented for the following school year.
- (e) Sections 115.21-115.23 of this subchapter shall be superseded by the implementation of §§115.25-115.27 of this subchapter.

§115.26. Grade 6, Adopted 2020.

- (a) Introduction.
 - (1) The goal of health education is to provide instruction that allows youth to develop and sustain health-promoting behaviors throughout their lives. The understanding and application of these standards will allow students the ability to gather, interpret, and understand health information; achieve health literacy; and adapt to the ever-evolving science of health. The health education knowledge and skills should be presented to students in a positive manner to support the development of a healthy self-concept and responsible decision making. The standards will help students reinforce, foster, and apply positive character traits.
 - (2) There are essential skills that repeat throughout the six strands and embody the interconnection of health literacy. These skills include decision making, problem solving, goal setting, maintaining healthy relationships with self and others, seeking help and support, and recognizing various influences on health such as social, environmental, media, and genetic. These skills, developed early on and reinforced throughout a student's education, will foster mastery of health concepts. Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies. In addition, areas in the standards related to abuse, neglect, violence, loss, grief, trauma, and suicide may directly affect some students in the classroom. Should the educator recognize signs of discomfort with instruction in these areas, students should be referred to the appropriate resource, identified ahead of such instruction, for additional help and support.

- (3) Students gain an understanding of health information and skills through six strands: physical health and hygiene; mental health and wellness; healthy eating and physical activity; injury and violence prevention and safety; alcohol, tobacco, and other drugs; and reproductive and sexual health.
- (A) Physical health and hygiene education helps to prepare students for improved lifelong health outcomes. Learning about body systems lays the foundation for personal health and hygiene. Health literacy and preventative behaviors empower students to make informed choices to support self, family, and community.
 - (B) The mental health and wellness strand recognizes that the knowledge and skills necessary to manage emotions, reactions, and relationships are essential to reaching one's full potential. Students gain knowledge about social and emotional health, including developing a healthy self-concept, understanding risk and protective factors, and identifying and managing mental health and wellness concerns. In the early grades, students develop fluency around emotions and self-regulation and understand the relationship between feelings, thoughts, and behavior. In subsequent grades, students learn and practice appropriate ways to solve interpersonal conflicts, work to develop a positive self-image, and develop healthy self-management skills.
 - (C) The healthy eating and physical activity strand addresses the importance of nutrition and physical activity to support a healthy lifestyle. Students apply critical-thinking and decision-making skills to make positive health choices. Students learn about essential nutrients, food groups, portion control, government nutritional recommendations, and the health benefits of being physically active. Students evaluate the connection between physical activity and nutrition and the prevention of chronic diseases.
 - (D) By focusing on injury and violence prevention and safety, the standards promote student well-being and awareness of dangerous situations. Supporting student well-being and providing instruction in digital citizenship, bullying prevention, first aid, and identification of safe and unsafe situations creates empowered and educated students who are able to make decisions that keep themselves and others safe. Beginning in Kindergarten and continuing through high school, students gain knowledge and skills to support safety and wellness at school, at home, online, and in the community.
 - (E) The standards under the alcohol, tobacco, and other drugs strand focus on a number of protective factors that develop empowered students who are able to make better-informed decisions, including understanding the impact of substance use on physical, mental, and social health. Through this strand, students learn key concepts about alcohol, tobacco, and other drugs, including the use, misuse, and physiological effects; short- and long-term impacts on health; treatment; risk and protective factors; and prevention. These concepts introduce healthy alternatives and ways for students to ask for and seek out help from parents and other trusted adults.
 - (F) Beginning in Grade 4, students learn about changes associated with adolescent development in the reproductive and sexual health strand. In subsequent grade levels, students identify the purpose of these changes and their role in fertilization and reproduction. Students learn the characteristics of healthy and unhealthy relationships and how to use communication and refusal skills to set personal boundaries in dating/romantic relationships. Students also identify how to respond to sexual harassment and abuse.
- (4) An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:
- (A) a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC), §28.004(e)-(h));

- (B) the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC, §28.004(i)-(j));
 - (C) the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC, §28.004(i));
 - (D) the centrality of abstinence education in any human sexuality curriculum (TEC, §28.004(e)); and
 - (E) the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33).
- (5) Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272).
- (6) Statements containing the word "including" reference content that must be mastered, while those containing the phrase "such as" are intended as possible illustrative examples.
- (7) Students should first seek guidance in the area of health from a parent or legal guardian.
- (b) Knowledge and skills.
- (1) Physical health and hygiene--body systems. The student examines the structure, function, and relationships of body systems and their relevance to personal health. The student is expected to explain how to maintain the healthy status of body systems.
 - (2) Physical health and hygiene--personal health and hygiene. The student understands health literacy, preventative health behaviors, and how to access and evaluate health care information to make informed decisions. The student is expected to:
 - (A) compare immediate and long-term effects of personal health care choices such as personal and dental hygiene;
 - (B) develop criteria for evaluating the validity of health information and sources;
 - (C) describe ways to demonstrate decision-making skills based on health information;
 - (D) identify current health-related issues and recommendations or guidelines;
 - (E) explain the role of preventive health measures, immunizations, and treatment such as wellness exams and dental check-ups in disease prevention;
 - (F) describe actions that should be taken when illness occurs, including asthma, diabetes, and epilepsy; and
 - (G) describe and recognize the signs, symptoms, and treatments of vector-borne illnesses such as Lyme disease or West Nile Virus.
 - (3) Mental health and wellness--social and emotional health. The student identifies and applies strategies to develop socio-emotional health, self-regulation, and healthy relationships. The student is expected to:
 - (A) demonstrate healthy methods for communicating emotions in a variety of scenarios;
 - (B) assess and demonstrate healthy ways of responding to conflict;
 - (C) differentiate between positive and negative peer influence;
 - (D) describe methods for communicating important issues with and understanding perspectives of parents and peers;
 - (E) discuss and demonstrate how to listen and respect others' feelings and perspectives in a variety of scenarios; and
 - (F) identify strategies for using non-violent conflict resolution skills.

- (4) Mental health and wellness--developing a healthy self-concept. The student develops the capacity for self-assessment and evaluation, goal setting, and decision making in order to develop a healthy self-concept. The student is expected to:
- (A) identify how physical and social changes impact self-esteem;
 - (B) identify possible health benefits of setting and implementing long-term personal goals;
 - (C) create and discuss personal life goals that one wishes to achieve and consider the financial impact of graduating from high school, having a full-time job, and waiting until marriage if one plans to have children; and
 - (D) explain the steps in the decision-making process and the importance of following the steps.
- (5) Mental health and wellness--risk and protective factors. The student recognizes the influence of various factors on mental health and wellness. The student is expected to:
- (A) identify and discuss how adolescent brain development influences emotions, decision making, and logic; and
 - (B) relate physical environmental factors such as school climate and availability of resources to individual, family, and community health.
- (6) Mental health and wellness--identifying and managing mental health and wellness concerns. The student develops and uses appropriate skills to identify and manage conditions related to mental health and wellness. The student is expected to:
- (A) examine the outcomes of healthy and unhealthy methods for managing challenges related to long-term health conditions of self and others;
 - (B) identify and describe lifetime strategies for managing conditions that impact learning such as attention-deficit disorder (ADD), attention-deficit/hyperactivity disorder (ADHD), dyslexia, dysgraphia, and sensory issues;
 - (C) identify how to respond positively to develop resiliency;
 - (D) describe healthy and unhealthy self-management strategies for stress, anxiety, depression, trauma, loss, and grief;
 - (E) identify causes and effects associated with disordered eating and eating disorders such as bulimia, anorexia, and binge eating disorder and the importance of seeking help from a parent or another trusted adult for oneself or others related to disordered eating;
 - (F) discuss the suicide risk and suicide protective factors identified by the Centers for Disease Control and Prevention (CDC) and the importance of telling a parent or another trusted adult if one observes the warning signs in self or others;
 - (G) explain the role of a healthy self-concept in avoiding self-harming behaviors that can occur when someone is struggling to manage overwhelming emotions; and
 - (H) identify suicide prevention resources such as the National Suicide Prevention Hotline.
- (7) Healthy eating and physical activity--food and beverage daily recommendations. The student analyzes and applies healthy eating strategies for enhancing and maintaining personal health throughout the lifespan. The student is expected to:
- (A) define micronutrients, including calcium and iron, and their recommended daily allowances;
 - (B) compare and contrast common food labels and menus for nutritional content and calories;
 - (C) describe healthy and unhealthy dietary practices;
 - (D) explain the importance of a realistic personal dietary plan; and

- (E) evaluate the importance of choosing lower sodium alternatives to foods that have high levels of sodium such as salty snacks and canned vegetables.
- (8) Healthy eating and physical activity--physical activity. The student identifies, analyzes, and applies strategies for enhancing and maintaining optimal personal physical fitness throughout the lifespan. The student is expected to:
- (A) identify the CDC guidelines for daily physical activity throughout the lifespan; and
 - (B) analyze the benefits of regular physical activity on mental, physical, and social health.
- (9) Healthy eating and physical activity--nutrition and physical activity literacy. The student obtains, processes, and understands basic physical activity and nutrition information needed to make health-promoting decisions. The student is expected to:
- (A) make a variety of healthy personal food choices and develop short- and long-term goals to achieve appropriate levels of physical activity and improve personal physical fitness levels; and
 - (B) explain the role of media and technology in influencing individual and community health related to physical activity and nutritional choices.
- (10) Healthy eating and physical activity--risk and protective factors. The student analyzes and applies risk and protective factors related to healthy eating and physical activity. The student is expected to:
- (A) analyze the impact of moderate physical activity and dietary choices on the prevention of obesity, heart disease, and diabetes;
 - (B) identify strategies to adopt healthy behaviors to reduce the likelihood of developing chronic conditions such as obesity, heart disease, or diabetes;
 - (C) analyze internal and external factors that influence healthy eating and physical activity behaviors; and
 - (D) discuss the nutritional differences between preparing and serving fresh or minimally processed foods and commercially prepared or highly processed foods.
- (11) Injury and violence prevention and safety--safety skills and unintentional injury. The student identifies and demonstrates safety and first aid knowledge to prevent and treat injuries. The student is expected to describe basic first-aid procedures.
- (12) Injury and violence prevention and safety--healthy home, school, and community climate. The student understands that individual actions and awareness can impact safety, community, and environment. The student is expected to:
- (A) discuss and demonstrate strategies for avoiding violence, gangs, weapons, and human trafficking;
 - (B) define safe haven and identify dedicated safe haven locations in the community;
 - (C) describe the dangers associated with a variety of weapons;
 - (D) explain the importance of complying with rules prohibiting possession of weapons; and
 - (E) create a personal safety plan.
- (13) Injury and violence prevention and safety--digital citizenship and media. The student understands how to be a safe and responsible citizen in digital and online environments. The student is expected to:
- (A) discuss appropriate personal digital and online communication boundaries;
 - (B) develop strategies to resist inappropriate digital and online communication such as social media posts, sending and receiving photos, sexting, and pornography;

- (C) discuss and analyze consequences resulting from inappropriate digital and online communication such as social media posts, sending and receiving photos, sexting, and pornography;
 - (D) discuss strategies and techniques for identity protection in digital and online environments;
 - (E) identify how technology is used to recruit or manipulate potential victims of sex trafficking; and
 - (F) identify the current legal consequences of cyberbullying and inappropriate digital and online communication.
- (14) Injury and violence prevention and safety--interpersonal violence. The student understands the impact of interpersonal violence and the importance of seeking guidance and help to maintain personal safety. The student is expected to:
- (A) identify how exposure to family violence can influence behavior and the importance of reporting suspected abuse;
 - (B) assess healthy and appropriate ways of responding to and discouraging bullying and cyberbullying, including behavior that takes place at school;
 - (C) analyze the impact that bullying has on both victims and bullies;
 - (D) identify strategies for prevention and intervention of all forms of bullying and cyberbullying such as emotional, physical, social, and sexual; and
 - (E) discuss ways to seek the input of parents and other trusted adults in problem solving issues relating to violence and bullying.
- (15) Alcohol, tobacco, and other drugs--use, misuse, and physiological effects. The student understands the difference between use and misuse of different substances and how the use and misuse of substances impacts health. The student is expected to:
- (A) describe the misuse and abuse of prescription and over-the-counter drugs, including combining drugs, and the dangers associated with each;
 - (B) compare and contrast examples of prescription and over-the-counter drug labels;
 - (C) identify and describe practices used to safely store and properly dispose of prescription and over-the-counter drugs; and
 - (D) describe substance abuse and addiction to alcohol, vaping products, tobacco, other drugs, and dangerous substances.
- (16) Alcohol, tobacco, and other drugs--short- and long-term impacts. The student identifies and analyzes the short- and long-term impacts of the use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances. The student is expected to:
- (A) describe the short- and long-term health consequences of prescription and over-the-counter drug misuse and substance use disorders; and
 - (B) discuss the legal consequences related to the use, misuse, and possession of drugs, including prescription drugs.
- (17) Alcohol, tobacco, and other drugs--treatment. The student recognizes and understands the options for treatment and how to seek help related to the use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances. The student is expected to:
- (A) identify ways to report a suspected abuse of drugs to a parent, school administrator, teacher, or another trusted adult;

- (B) identify signs and symptoms of alcohol; tobacco; drugs, including prescription drugs; and other substance use and misuse such as using medicine prescribed for someone else or for reasons other than intended;
 - (C) identify examples of who, when, where, and how to get help related to unsafe situations regarding the use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances.
- (18) Alcohol, tobacco, and other drugs--risk and protective factors. The student understands how various factors can influence decisions regarding substance use and the resources available for help. The student is expected to:
- (A) explain the impact of peer influence on decision making regarding the use of alcohol, tobacco, and other drugs;
 - (B) describe methods for differentiating between positive and negative relationships that can influence alcohol, tobacco, and other drug use;
 - (C) identify physical and social influences on alcohol, tobacco, and other drug use behaviors; and
 - (D) explain the relationships between alcohol, tobacco, drugs, and other substances and the role each can play in unsafe situations such as drinking and driving.
- (19) Alcohol, tobacco, and other drugs--prevention. The student analyzes information and applies critical-thinking skills to avoid substance use and misuse and recognizes the benefits of delayed use. The student is expected to:
- (A) identify ways such as alternative activities and refusal skills to prevent or avoid the use of alcohol, tobacco, drugs, and other substances;
 - (B) demonstrate refusal skills in various scenarios where alcohol, tobacco, and other drugs may be present; and
 - (C) identify and describe strategies for avoiding alcohol, tobacco, and other drugs, including opioids.
- (20) Reproductive and sexual health--healthy relationships. The student understands the characteristics of healthy romantic relationships. The student is expected to:
- (A) define and distinguish between friendship, infatuation, dating/romantic relationships, and marriage;
 - (B) describe how friendships provide a foundation for healthy dating/romantic relationships;
 - (C) list healthy ways to express friendship, affection, and love;
 - (D) describe characteristics of healthy dating/romantic relationships and marriage, including sharing, kindness, honesty, respect, trust, patience, communication, and compatibility;
 - (E) explain that each person in a dating/romantic relationship should be treated with dignity and respect; and
 - (F) describe how healthy marriages can contribute to healthy families and communities.
- (21) Reproductive and sexual health--personal safety, limits, and boundaries. The student understands how to set and respect personal boundaries to reduce the risk of sexual harassment, sexual abuse, and sexual assault. The student is expected to:
- (A) identify that physical, emotional, and sexual abuse and exploitation are all forms of abuse;
 - (B) identify the social and emotional impacts of sexual harassment, sexual abuse, sexual assault, and sex trafficking;

- (C) list the characteristics of unhealthy or harmful relationships, including anger, controlling behavior, jealousy, manipulation, and isolation;
 - (D) identify ways of reporting suspected sexual abuse involving self or others such as telling a parent or another trusted adult;
 - (E) explain how a healthy sense of self and making and respecting decisions about safe boundaries and limits promote healthy dating/romantic relationships;
 - (F) identify communication and refusal skills and how they can be applied in dating/romantic relationships; and
 - (G) explain the importance of clearly communicating and respecting personal boundaries and using refusal skills related to physical intimacy such as holding hands, hugging, and kissing.
- (22) Reproductive and sexual health--anatomy, puberty, reproduction, and pregnancy. The student analyzes adolescent development, the process of fertilization, and healthy fetal development. The student is expected to:
- (A) describe changes in male and female anatomy and physiology during puberty and how rates and patterns of development can vary between individuals;
 - (B) describe the process, characteristics, and variations of the menstrual cycle;
 - (C) analyze the role of hormones related to growth and development and personal health;
 - (D) describe the cellular process of fertilization in human reproduction; and
 - (E) explain significant milestones of fetal development.
- (23) Reproductive and sexual health--sexual risk. The student understands that there are risks associated with sexual activity and that abstinence from sexual activity is the only 100% effective method to avoid risks. The student is expected to:
- (A) identify teen pregnancy as a possible outcome of sexual activity;
 - (B) identify life goals that one wishes to achieve prior to becoming a parent;
 - (C) define sexually transmitted infections (STIs) and sexually transmitted diseases (STDs) as infections or diseases that are spread through sex or sexual activity;
 - (D) identify what emotional risks are associated with sexual activity between unmarried persons of school age;
 - (E) define abstinence as refraining from all forms of sexual activity and genital contact between individuals and discuss the importance of seeking support from parents, other trusted adults, and peers to be abstinent;
 - (F) explain why abstinence is the preferred choice of behavior in relationship to all sexual activity for unmarried persons of school age;
 - (G) identify why abstinence from sexual activity is the only method that is 100% effective in preventing pregnancy; STDs/STIs, including human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS); and the emotional risks associated with adolescent sexual activity;
 - (H) list the benefits of abstinence from sexual activity such as increased self-esteem, self-confidence, student academic achievement, and alignment with personal, family, and moral or religious beliefs and values; and
 - (I) explain how laws protect victims of sexual harassment, sexual abuse, and sexual assault.

§115.27. Grades 7-8, Adopted 2020.

- (a) Introduction.

- (1) The goal of health education is to provide instruction that allows youth to develop and sustain health-promoting behaviors throughout their lives. The understanding and application of these standards will allow students the ability to gather, interpret, and understand health information; achieve health literacy; and adapt to the ever-evolving science of health. The health education knowledge and skills should be presented to students in a positive manner to support the development of a healthy self-concept and responsible decision making. The standards will help students reinforce, foster, and apply positive character traits.
- (2) There are essential skills that repeat throughout the six strands and embody the interconnection of health literacy. These skills include decision making, problem solving, goal setting, maintaining healthy relationships with self and others, seeking help and support, and recognizing various influences on health such as social, environmental, media, and genetic. These skills, developed early on and reinforced throughout a student's education, will foster mastery of health concepts. Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies. In addition, areas in the standards related to abuse, neglect, violence, loss, grief, trauma, and suicide may directly affect some students in the classroom. Should the educator recognize signs of discomfort with instruction in these areas, students should be referred to the appropriate resource, identified ahead of such instruction, for additional help and support.
- (3) Students gain an understanding of health information and skills through six strands: physical health and hygiene; mental health and wellness; healthy eating and physical activity; injury and violence prevention and safety; alcohol, tobacco, and other drugs; and reproductive and sexual health.
 - (A) Physical health and hygiene education helps to prepare students for improved lifelong health outcomes. Learning about body systems lays the foundation for personal health and hygiene. Health literacy and preventative behaviors empower students to make informed choices to support self, family, and community.
 - (B) The mental health and wellness strand recognizes that the knowledge and skills necessary to manage emotions, reactions, and relationships are essential to reaching one's full potential. Students gain knowledge about social and emotional health, including developing a healthy self-concept, understanding risk and protective factors, and identifying and managing mental health and wellness concerns. In the early grades, students develop fluency around emotions and self-regulation and understand the relationship between feelings, thoughts, and behavior. In subsequent grades, students learn and practice appropriate ways to solve interpersonal conflicts, work to develop a positive self-image, and develop healthy self-management skills.
 - (C) The healthy eating and physical activity strand addresses the importance of nutrition and physical activity to support a healthy lifestyle. Students apply critical-thinking and decision-making skills to make positive health choices. Students learn about essential nutrients, food groups, portion control, government nutritional recommendations, and the health benefits of being physically active. Students evaluate the connection between physical activity and nutrition and the prevention of chronic diseases.
 - (D) By focusing on injury and violence prevention and safety, the standards promote student well-being and awareness of dangerous situations. Supporting student well-being and providing instruction in digital citizenship, bullying prevention, first aid, and identification of safe and unsafe situations creates empowered and educated students who are able to make decisions that keep themselves and others safe. Beginning in Kindergarten and continuing through high school, students gain knowledge and skills to support safety and wellness at school, at home, online, and in the community.
 - (E) The standards under the alcohol, tobacco, and other drugs strand focus on a number of protective factors that develop empowered students who are able to make better-informed decisions, including understanding the impact of substance use on physical, mental, and social health. Through this strand, students learn key concepts about alcohol, tobacco,

and other drugs, including the use, misuse, and physiological effects; short- and long-term impacts on health; treatment; risk and protective factors; and prevention. These concepts introduce healthy alternatives and ways for students to ask for and seek out help from parents and other trusted adults.

- (F) Beginning in Grade 4, students learn about changes associated with adolescent development in the reproductive and sexual health strand. In subsequent grade levels, students identify the purpose of these changes and their role in fertilization and reproduction. Students learn the characteristics of healthy and unhealthy relationships and how to use communication and refusal skills to set personal boundaries in dating/romantic relationships. Students also identify how to respond to sexual harassment and abuse.
- (4) An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:
 - (A) a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC), §28.004(e)-(h));
 - (B) the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC, §28.004(i)-(j));
 - (C) the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC, §28.004(i));
 - (D) the centrality of abstinence education in any human sexuality curriculum (TEC, §28.004(e)); and
 - (E) the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33).
 - (5) Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272).
 - (6) Statements containing the word "including" reference content that must be mastered, while those containing the phrase "such as" are intended as possible illustrative examples.
 - (7) Students should first seek guidance in the area of health from a parent or legal guardian.
- (b) Knowledge and skills.
 - (1) Physical health and hygiene--body systems. The student examines the structures, functions, and relationships of body systems and their relevance to personal health. The student is expected to describe the relationships among the body systems.
 - (2) Physical health and hygiene--personal health and hygiene. The student understands health literacy, preventative health behaviors, and how to access and evaluate health care information to make informed decisions. The student is expected to:
 - (A) list specific resources or facilities where members of the community can obtain medical care;
 - (B) explain ways to use health information to help self and others, including seizure awareness, diabetes education, and response plans such as first aid or cardiopulmonary resuscitation (CPR);
 - (C) identify barriers related to solving health problems and ways to overcome barriers; and
 - (D) explain the course, signs, symptoms, and treatments of vector-borne illnesses such as Lyme disease or West Nile Virus.

- (3) Mental health and wellness--social and emotional health. The student identifies and applies strategies to develop socio-emotional health, self-regulation, and healthy relationships. The student is expected to:
- (A) identify and analyze different emotions and causal thoughts in self;
 - (B) analyze the relationship between thoughts, feelings, and behaviors and demonstrate healthy techniques for managing reactions in times of emotional stress;
 - (C) evaluate the importance of social groups and peer influences and explain how they can affect individual mental health and wellness;
 - (D) demonstrate perspective-taking and communication skills for building and maintaining healthy relationships and determining when and how to end unhealthy relationships;
 - (E) analyze similarities and differences between one's own and others' perspectives; and
 - (F) practice conflict resolution and mediation skills.
- (4) Mental health and wellness--developing a healthy self-concept. The student develops the capacity for self-assessment and evaluation, goal setting, and decision making in order to develop a healthy self-concept. The student is expected to:
- (A) describe how internal and external factors influence self-esteem;
 - (B) identify and develop strategies for setting long-term personal goals;
 - (C) create and discuss personal life goals that one wishes to achieve and consider the financial impact of graduating from high school, having a full-time job, and waiting until marriage if one plans to have children; and
 - (D) identify decision-making skills that promote individual, family, and community mental health.
- (5) Mental health and wellness--risk and protective factors. The student recognizes the influence of various factors on mental health and wellness. The student is expected to:
- (A) explain how adolescent brain development influences cognitive processing, emotions, and decision making;
 - (B) identify and describe how environmental influences such as air, water, or noise can affect an individual's mental health; and
 - (C) discuss the influence of childhood trauma and how to recognize, process, and overcome negative events.
- (6) Mental health and wellness--identifying and managing mental health and wellness concerns. The student develops and uses appropriate skills to identify and manage conditions related to mental health and wellness. The student is expected to:
- (A) describe methods to support others who have long-term physical health conditions;
 - (B) examine ways to influence peers positively and promote resiliency in others in stressful situations;
 - (C) differentiate between healthy and unhealthy self-management strategies for stress, anxiety, depression, trauma, loss, and grief;
 - (D) describe the consequences of disordered eating and eating disorders such as bulimia, anorexia, and binge eating disorder and the importance of seeking help from a parent or another trusted adult for oneself or others related to disordered eating;
 - (E) discuss the suicide risk and suicide protective factors identified by the Centers for Disease Control and Prevention (CDC) and the importance of telling a parent or another trusted adult if one observes the warning signs in self or others;

- (F) research and discuss protective factors and healthy self-management strategies to avoid self-harming behaviors; and
 - (G) examine how the use of suicide prevention resources such as the National Suicide Prevention Hotline can reduce the likelihood of suicide.
- (7) Healthy eating and physical activity--food and beverage daily recommendations. The student analyzes and applies healthy eating strategies for enhancing and maintaining personal health throughout the lifespan. The student is expected to:
- (A) analyze food labels and menus to determine the nutritional value of foods and make healthy decisions about daily caloric intake;
 - (B) develop a personal dietary plan; and
 - (C) identify and practice strategies for choosing healthy foods and beverages in diverse social environments, including at home, at school, and while dining out.
- (8) Healthy eating and physical activity--physical activity. The student identifies, analyzes, and applies strategies for enhancing and maintaining optimal personal physical fitness throughout the lifespan. The student is expected to:
- (A) explain the relationships between nutrition, physical activity, quality of life, and disease in terms of their mental, physical, and social benefits;
 - (B) identify how to balance caloric intake and physical activity; and
 - (C) apply the CDC guidelines for daily physical activity to develop a physical fitness plan using appropriate technology.
- (9) Healthy eating and physical activity--nutrition and physical activity literacy. The student obtains, processes, and understands basic physical activity and nutrition information needed to make health-promoting decisions. The student is expected to:
- (A) develop and examine progress of short- and long-term goals toward achieving appropriate levels of physical activity, improving personal physical fitness level, and making healthy personal food choices; and
 - (B) explain how media influences buying decisions regarding physical fitness equipment or nutritional products.
- (10) Healthy eating and physical activity--risk and protective factors. The student analyzes and applies risk and protective factors related to healthy eating and physical activity. The student is expected to:
- (A) analyze the impact of moderate physical activity and healthy dietary practices in the prevention of obesity, heart disease, and diabetes;
 - (B) analyze risk factors that may lead to the development of chronic conditions and formulate strategies to reduce the likelihood of developing chronic conditions;
 - (C) identify community and digital resources that can assist in developing healthy eating and physical activity behaviors; and
 - (D) investigate and compare the nutritional differences between preparing and serving fresh food or minimally processed food and serving commercially prepared or highly processed foods.
- (11) Injury and violence prevention and safety--safety skills and unintentional injury. The student identifies and demonstrates safety and first aid knowledge to prevent and treat injuries. The student is expected to demonstrate basic first-aid procedures, including CPR and the choking rescue.

- (12) Injury and violence prevention and safety--healthy home, school, and community climate. The student understands that individual actions and awareness can impact safety, community, and environment. The student is expected to:
- (A) analyze strategies for and the benefits of avoiding violence, gangs, weapons, and human trafficking;
 - (B) define safe haven and identify designated safe haven locations in the community;
 - (C) evaluate the dangers associated with a variety of weapons;
 - (D) evaluate the importance of complying with rules prohibiting possession of and the improper use of weapons; and
 - (E) create a personal safety plan.
- (13) Injury and violence prevention and safety--digital citizenship and media. The student understands how to be a safe and responsible citizen in digital and online environments. The student is expected to:
- (A) develop strategies to resist inappropriate digital and online communication such as social media posts, sending and receiving photos, sexting, and pornography;
 - (B) discuss and analyze the consequences resulting from inappropriate digital and online communication such as social media posts, sending and receiving photos, sexting, and pornography;
 - (C) evaluate strategies and techniques for identity protection in digital and online environments;
 - (D) identify how technology is used to recruit or manipulate potential victims of sex trafficking; and
 - (E) research the current legal consequences of cyberbullying and inappropriate digital and online communication.
- (14) Injury and violence prevention and safety--interpersonal violence. The student understands the impact of interpersonal violence and the importance of seeking guidance and help to maintain personal safety. The student is expected to:
- (A) identify forms of family violence, including physical, mental, and emotional violence;
 - (B) describe the serious effects of bullying, cyberbullying, or harassment such as suicidal ideation and other effects on the individual;
 - (C) explain the responsibility to report bullying behavior, including cyberbullying;
 - (D) describe the seriousness of various forms of bullying such as harassment;
 - (E) analyze strategies for prevention and intervention of all forms of bullying and cyberbullying such as emotional, physical, social, and sexual; and
 - (F) summarize the advantages of seeking advice and feedback regarding the use of decision-making and problem-solving skills related to personal safety.
- (15) Alcohol, tobacco, and other drugs--use, misuse, and physiological effects. The student understands the difference between use and misuse of different substances and how the use and misuse of substances impacts health. The student is expected to:
- (A) differentiate between appropriate and inappropriate use of prescription and over-the-counter drugs, including combining drugs, and the outcomes of each;
 - (B) identify and describe the categories of prescription drugs and their proper uses;
 - (C) identify and explain the importance of each component of an over-the-counter drug warning label; and

- (D) describe how substance misuse and addiction to alcohol, tobacco, vaping products, drugs, and other substances, including prescription drugs, affect the body systems and brain.
- (16) Alcohol, tobacco, and other drugs--short- and long-term impacts. The student identifies and analyzes the short- and long-term impacts of use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances. The student is expected to:
- (A) analyze and explain the short- and long-term health consequences of addiction to alcohol and tobacco and prescription and over-the-counter drug misuse and substance use disorders;
 - (B) analyze the importance of alternative activities to drug and substance use and misuse on mental and social health; and
 - (C) analyze the legal consequences of the use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances.
- (17) Alcohol, tobacco, and other drugs--treatment. The student recognizes and understands the options for treatment and how to seek help related to the use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances. The student is expected to:
- (A) identify and describe treatment options for substance abuse and addiction;
 - (B) identify signs and symptoms of alcohol; tobacco; drugs, including prescription drugs; and other substance use and misuse such as using medicine prescribed for someone else or for reasons other than intended; and
 - (C) identify at least one example of who, when, where, and how to get help related to the use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances.
- (18) Alcohol, tobacco, and other drugs--risk and protective factors. The student understands how various factors can influence decisions regarding substance use and the resources available for help. The student is expected to:
- (A) examine the effects and role of peer influence on decision making and problem solving regarding the use and misuse of alcohol, tobacco, and other drugs;
 - (B) examine physical and social influences on alcohol, tobacco, and other drug use behaviors;
 - (C) differentiate among the relationships of alcohol, tobacco, drugs, and other substances and the roles these substances play in unsafe situations such as drinking and driving; and
 - (D) identify support systems and describe ways to report the suspected abuse of drugs to a parent, school administrator, teacher, or another trusted adult.
- (19) Alcohol, tobacco, and other drugs--prevention. The student analyzes information and applies critical-thinking skills to avoid substance use and misuse and recognizes the benefits of delayed use. The student is expected to develop and apply strategies, including demonstrating refusal skills, for avoiding alcohol, tobacco, and other drugs in various scenarios.
- (20) Reproductive and sexual health--healthy relationships. The student understands the characteristics of healthy romantic relationships. The student is expected to:
- (A) compare and contrast the difference between friendship, infatuation, dating/romantic relationships, and marriage;
 - (B) explain how friendships provide a foundation for healthy dating/romantic relationships;
 - (C) describe healthy ways to express friendship, affection, and love;
 - (D) describe appropriate and effective methods of communicating emotions in healthy dating/romantic relationships and marriage;
 - (E) evaluate the importance of mutual respect, trust, support, honesty, commitment, and reliability in healthy dating/romantic relationships and marriage;

- (F) describe behaviors in dating/romantic relationships that enhance dignity and respect; and
 - (G) describe the benefits of healthy marriages, including companionship and social, emotional, financial, and health benefits.
- (21) Reproductive and sexual health--personal safety, limits, and boundaries. The student understands how to set and respect personal boundaries to reduce the risk of sexual harassment, sexual abuse, and sexual assault. The student is expected to:
- (A) explain that physical, emotional, and sexual abuse and exploitation are all forms of abuse;
 - (B) explain the social and emotional impacts of sexual harassment, sexual abuse, sexual assault, and sex trafficking;
 - (C) define dating violence and the characteristics of unhealthy or harmful relationships, including anger, controlling behavior, jealousy, manipulation, and isolation;
 - (D) identify protective strategies for avoiding unsafe situations that heighten the risk of sexual harassment, sexual abuse, sexual assault, sex trafficking, and teen dating violence;
 - (E) explain the importance of reporting to a parent or another trusted adult sexual harassment, sexual abuse, sexual assault, sex trafficking, and dating violence involving self or others;
 - (F) describe how a healthy sense of self and making decisions regarding setting and respecting personal boundaries promote healthy dating/romantic relationships;
 - (G) discuss and practice how refusal skills can be used to resist negative peer influences and reinforce personal boundaries to avoid dangerous situations and behaviors that increase sexual risk in dating/romantic relationships; and
 - (H) explain the importance of clearly communicating and respecting personal boundaries and why individuals have the right to refuse sexual contact.
- (22) Reproductive and sexual health--anatomy, puberty, reproduction, and pregnancy. The student analyzes adolescent development, the process of fertilization, and healthy fetal development. The student is expected to:
- (A) compare and contrast the physical, hormonal, and emotional changes in males and females that occur during puberty and adolescence;
 - (B) identify how the process of fertilization occurs between a man and a woman through sexual intercourse;
 - (C) explain significant milestones of fetal development and the harmful effects on the fetus of certain substances such as alcohol, tobacco, and prescription drugs and environmental hazards such as lead;
 - (D) describe the importance of telling a parent or another trusted adult, obtaining early pregnancy testing, and seeking prenatal care if signs of pregnancy occur; and
 - (E) define the emotional changes that may occur during and after pregnancy, including postpartum depression, and discuss resources for support and treatment.
- (23) Reproductive and sexual health--sexual risk. The student understands that there are risks associated with sexual activity and that abstinence from sexual activity is the only 100% effective method to avoid risks. The student is expected to:
- (A) explain how teen pregnancy is a possible outcome of sexual activity;
 - (B) explain the short- and long-term educational, financial, and social impacts of pregnancy on teen parents, the child, families, and society;
 - (C) identify the difference between bacterial and viral sexually transmitted diseases/sexually transmitted infections (STDs/STIs), including long-term or lifetime effects such as infertility and cancer;

- (D) describe various modes of transmission of STDs/STIs;
- (E) identify the prevalence of STDs/STIs among teens by referencing county, state, and/or federal data sources;
- (F) list the signs and symptoms of STDs/STIs, including human papillomavirus (HPV), human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS), chlamydia, syphilis, gonorrhea, herpes, and trichomoniasis, and explain why not all STDs/STIs show symptoms initially;
- (G) explain the importance of STD/STI screening, testing, and early treatment for sexually active individuals, including during yearly physicals or if there is a concern;
- (H) identify community resources, a minor's right to consent under certain circumstances, and the importance of parent or other trusted adult support for STD/STI testing and treatment;
- (I) identify emotional risks that can be associated with sexual activity for unmarried persons of school age, including stress, anxiety, and depression;
- (J) identify support from parents and other trusted adults to be abstinent from sexual activity and create strategies for building peer support to be abstinent;
- (K) analyze the importance of abstinence as the preferred choice of behavior in relationship to all sexual activity for unmarried persons of school age;
- (L) analyze the effectiveness and the risks and failure rates (human-use reality rates) of barrier protection and other contraceptive methods in the prevention of STDs/STIs and pregnancy;
- (M) explain that HPV vaccines can help prevent the transmission of the most common types of HPV, a virus that can cause genital warts and cervical cancer and other cancers in males and females;
- (N) research and explain the benefits of abstinence from sexual activity such as increased self-esteem, self-confidence, and student academic achievement;
- (O) define legal implications of teen pregnancy, including the legal effects of acknowledgement and proof of paternity;
- (P) describe legal aspects of sexual activity with a minor person, including the legal age of consent, statutory rape, aggravated sexual assault, sexual assault, sexual abuse, and indecency with a child; and
- (Q) examine the legal ramifications of sexual offenses such as sexual harassment, sexual abuse, and sexual assault.

STATUTORY AUTHORITY. The new sections are adopted under Texas Education Code (TEC), §7.102(c)(4), which requires the State Board of Education (SBOE) to establish curriculum and graduation requirements; TEC, §28.002(a), which identifies the subjects of the required curriculum; TEC, §28.002(c), which requires the SBOE to by rule identify the essential knowledge and skills of each subject in the required curriculum that all students should be able to demonstrate and that will be used in evaluating instructional materials and addressed on the state assessment instruments; TEC, §28.002(r), which requires the SBOE to by rule adopt essential knowledge and skills for the health curriculum that address substance abuse; TEC, §28.002(s), which requires the SBOE to by rule adopt essential knowledge and skills for the health curriculum that address bullying; and TEC, §28.025(a), which requires the SBOE to by rule determine the curriculum requirements for the foundation high school graduation program that are consistent with the required curriculum under TEC, §28.002.

CROSS REFERENCE TO STATUTE. The new sections implement Texas Education Code, §§7.102(c)(4); 28.002(a), (c), (r), and (s); and 28.025(a).

§115.37. Implementation of Texas Essential Knowledge and Skills for Health Education, Adopted 2020.

- (a) The provisions of §§115.38-115.40 of this subchapter shall be implemented by school districts.
- (b) No later than July 31, 2021, the commissioner of education shall determine whether instructional materials funding has been made available to Texas public schools for materials that cover the essential knowledge and skills for health education as adopted in §§115.38-115.40 of this subchapter.
- (c) If the commissioner makes the determination that instructional materials funding has been made available under subsection (b) of this section, §§115.38-115.40 of this subchapter shall be implemented beginning with the 2022-2023 school year and apply to the 2022-2023 and subsequent school years.
- (d) If the commissioner does not make the determination that instructional materials funding has been made available under subsection (b) of this section, the commissioner shall determine no later than July 31 of each subsequent school year whether instructional materials funding has been made available. If the commissioner determines that instructional materials funding has been made available, the commissioner shall notify the State Board of Education and school districts that §§115.38-115.40 of this subchapter shall be implemented for the following school year.
- (e) Sections 115.31-115.33 of this subchapter shall be superseded by the implementation of §§115.37-115.40 of this subchapter.

§115.38. Health I (One-Half Credit), Adopted 2020.

- (a) General requirements. Students shall be awarded one-half credit for successful completion of this course. This course is recommended for students in Grades 9-12.
- (b) Introduction.
 - (1) The goal of health education is to provide instruction that allows youth to develop and sustain health-promoting behaviors throughout their lives. The understanding and application of these standards will allow students the ability to gather, interpret, and understand health information; achieve health literacy; and adapt to the ever-evolving science of health. The health education knowledge and skills should be presented to students in a positive manner to support the development of a healthy self-concept and responsible decision making. The standards will help students reinforce, foster, and apply positive character traits.
 - (2) There are essential skills that repeat throughout six strands and embody the interconnection of health literacy. These skills include decision making, problem solving, goal setting, maintaining healthy relationships with self and others, seeking help and support, and recognizing various influences on health such as social, environmental, media, and genetic. These skills, developed early on and reinforced throughout a student's education, will foster mastery of health concepts. Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies. In addition, areas in the standards related to abuse, neglect, violence, loss, grief,

trauma, and suicide may directly affect some students in the classroom. Should the educator recognize signs of discomfort with instruction in these areas, students should be referred to the appropriate resource, identified ahead of such instruction, for additional help and support.

- (3) Students will gain an understanding of health information and skills through six strands: physical health and hygiene; mental health and wellness; healthy eating and physical activity; injury and violence prevention and safety; alcohol, tobacco, and other drugs; and reproductive and sexual health.
 - (A) Physical health and hygiene education helps to prepare students for improved lifelong health outcomes. Learning about body systems lays the foundation for personal health and hygiene. Health literacy and preventative behaviors empowers students to make informed choices to support self, family, and community.
 - (B) The mental health and wellness strand recognizes that the knowledge and skills necessary to manage emotions, reactions, and relationships are essential to reaching one's full potential. Students gain knowledge about social and emotional health, including developing a healthy self-concept, understanding risk and protective factors, and identifying and managing mental health and wellness concerns. In the early grades, students develop fluency around emotions and self-regulation and understand the relationship between feelings, thoughts, and behavior. In subsequent grades, students learn and practice appropriate ways to solve interpersonal conflicts, work to develop a positive self-image, and develop healthy self-management skills.
 - (C) The healthy eating and physical activity strand addresses the importance of nutrition and physical activity to support a healthy lifestyle. Students apply critical-thinking and decision-making skills to make positive health choices. Students learn about essential nutrients, food groups, portion control, government nutritional recommendations, and the health benefits of being physically active. Students evaluate the connection between physical activity and nutrition and the prevention of chronic diseases.
 - (D) By focusing on injury and violence prevention and safety, the standards promote student well-being and awareness of dangerous situations. Supporting student well-being and providing instruction in digital citizenship, bullying prevention, first aid, and identification of safe and unsafe situations creates empowered and educated students who are able to make decisions that keep themselves and others safe. Beginning in Kindergarten and continuing through high school, students gain knowledge and skills to support safety and wellness at school, at home, online, and in the community.
 - (E) The standards under the alcohol, tobacco, and other drugs strand focus on a number of protective factors that develop empowered students who are able to make better-informed decisions, including understanding the impact of substance use on physical, mental, and social health. Through this strand, students learn key concepts about alcohol, tobacco, and other drugs, including the use, misuse, and physiological effects; short- and long-term impacts on health; treatment; risk and protective factors; and prevention. These concepts introduce healthy alternatives and ways for students to ask for and seek out help from parents and other trusted adults.
 - (F) In the reproductive and sexual health strand, students identify the characteristics of healthy and unhealthy relationships and learn to use communication and refusal skills to set personal boundaries and develop strategies for responding to sexual harassment and abuse. Students describe the changes associated with adolescent development and explain the process of fertilization, fetal development, and the importance of prenatal care. Students also learn that sexual abstinence until marriage is the only 100% effective means of avoiding unplanned pregnancies and sexually transmitted diseases/sexually transmitted infections (STDs/STIs) as well as the legal, financial, and social issues associated with sexual health and reproduction.
- (4) An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:

- (A) a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC), §28.004(e)-(h));
 - (B) the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC, §28.004(i)-(j));
 - (C) the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC, §28.004(i));
 - (D) the centrality of abstinence education in any human sexuality curriculum (TEC, §28.004(e)); and
 - (E) the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33).
- (5) Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272).
- (6) Statements containing the word "including" reference content that must be mastered, while those containing the phrase "such as" are intended as possible illustrative examples.
- (7) Students should first seek guidance in the area of health from a parent or legal guardian.
- (c) Knowledge and skills.
- (1) Physical health and hygiene--personal health and hygiene. The student understands health literacy, preventative health behaviors, and how to access and evaluate health care information to make informed decisions. The student is expected to:
 - (A) analyze health information based on health-related standards;
 - (B) develop and analyze strategies to prevent communicable and non-communicable diseases; and
 - (C) discuss the importance of early detection and warning signs that prompt individuals of all ages to seek health care.
 - (2) Mental health and wellness--social and emotional health. The student identifies and applies strategies to develop socio-emotional health, self-regulation, and healthy relationships. The student is expected to:
 - (A) discuss and demonstrate perspective-taking and ways to show respect for others' feelings and express empathy toward others; and
 - (B) analyze forms of communication such as passive, aggressive, or assertive and their impact on conflict resolution.
 - (3) Mental health and wellness--developing a healthy self-concept. The student develops the capacity for self-assessment and evaluation, goal setting, and decision making in order to develop a healthy self-concept. The student is expected to explain and demonstrate decision-making skills based on health information.
 - (4) Mental health and wellness--risk and protective factors. The student recognizes the influence of various factors influencing mental health and wellness. The student is expected to
 - analyze how adverse childhood experiences such as abuse, neglect, and trauma can influence brain development and how to recognize, process, and overcome negative events for overall mental health and wellness.
 - (5) Mental health and wellness--identifying and managing mental health and wellness concerns. The student develops and uses appropriate skills to identify and manage conditions related to mental health and wellness. The student is expected to:

- (A) discuss the suicide risk and suicide protective factors identified by the Centers for Disease Control and Prevention (CDC) and the importance of telling a parent or another trusted adult if one observes the warning signs in self or others; and
 - (B) discuss how the use of suicide prevention resources such as the National Suicide Prevention Hotline reduces the likelihood of suicide.
- (6) Healthy eating and physical activity--food and beverage daily recommendations. The student analyzes and applies healthy eating strategies for enhancing and maintaining personal health throughout the lifespan. The student is expected to:
- (A) evaluate food labels and menus to determine the nutritional content and value of foods and make healthy decisions about daily caloric intake;
 - (B) compare and contrast the impact of healthy and unhealthy dietary practices; and
 - (C) describe how a personal dietary plan affects overall health and how a plan might differ over the lifespan.
- (7) Healthy eating and physical activity--physical activity. The student identifies, analyzes, and applies strategies for enhancing and maintaining optimal personal physical fitness throughout the lifespan. The student is expected to:
- (A) analyze the relationships between nutrition, physical activity, and quality of life as they relate to mental, physical, and social health benefits; and
 - (B) analyze the relationships between body composition, diet, and physical activity, including how to balance caloric intake and physical activity.
- (8) Healthy eating and physical activity--risk and protective factors. The student analyzes and applies risk and protective factors related to healthy eating and physical activity. The student is expected to:
- (A) evaluate the nutritional differences between preparing and serving fresh or minimally processed food versus serving commercially prepared or highly processed foods; and
 - (B) evaluate the connection between physical activity and dietary choices as they relate to the prevention of chronic conditions.
- (9) Injury and violence prevention and safety--safety skills and unintentional injury. The student identifies and demonstrates safety and first aid knowledge to prevent and treat injuries. The student is expected to demonstrate basic first-aid procedures, including how to perform cardiopulmonary resuscitation (CPR) and choking rescue and how to use an automated external defibrillator (AED).
- (10) Injury and violence prevention and safety--healthy home, school, and community climate. The student understands that individual actions and awareness can impact safety, community, and environment. The student is expected to:
- (A) formulate strategies for avoiding violence, gangs, weapons, and human trafficking; and
 - (B) assess the dynamics of gang behaviors.
- (11) Injury and violence prevention and safety--digital citizenship and media. The student understands how to be a safe and responsible citizen in digital and online environments. The student is expected to:
- (A) develop strategies to resist inappropriate digital and online communication such as social media posts, sending and receiving photos, sexting, and pornography; and
 - (B) identify appropriate responses to situations in which digital and online safety are at risk, including identity protection and recognition of predators.

- (12) Injury and violence prevention and safety--interpersonal violence. The student understands the impact of interpersonal violence and the importance of seeking guidance and help to maintain personal safety. The student is expected to:
- (A) research and analyze how exposure to family violence can influence cyclical behavioral patterns;
 - (B) create a personal action plan, including identifying areas of support, for use when encountering bullying, cyberbullying, or harassment; and
 - (C) describe the ramifications of bullying behavior.
- (13) Alcohol, tobacco, and other drugs--use, misuse, and physiological effects. The student understands the difference between use and misuse of different substances and how the use and misuse of substances impacts health. The student is expected to:
- (A) examine examples of drug labels to determine the drug category and intended use;
 - (B) identify and describe the importance of the safe storage and proper disposal of prescription and over-the-counter drugs; and
 - (C) develop strategies for preventing the misuse of prescription and over-the-counter drugs, including recognizing the negative effects of combining drugs.
- (14) Alcohol, tobacco, and other drugs--short- and long-term impacts. The student identifies and analyzes the short- and long-term impacts of the use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances. The student is expected to describe the interrelatedness of alcohol and other drugs to health problems.
- (15) Alcohol, tobacco, and other drugs--treatment. The student recognizes and understands the options for treatment and how to seek help related to the use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances. The student is expected to:
- (A) investigate and identify treatment options for substance abuse and addiction and misuse, including prescription drugs; and
 - (B) explain how to report suspected abuse of drugs to a parent, school administrator, teacher, or another trusted adult.
- (16) Alcohol, tobacco, and other drugs--risk and protective factors. The student understands how various factors can influence decisions regarding substance use and the resources available for help. The student is expected to:
- (A) compare and contrast physical and social influences on alcohol, tobacco, and other drug use behaviors;
 - (B) design materials for health advocacy such as promoting a substance-free life; and
 - (C) discuss ways to participate in school-related efforts to address health-risk behaviors.
- (17) Alcohol, tobacco, and other drugs--prevention. The student analyzes information and applies critical-thinking skills to avoid substance use and misuse and recognizes the benefits of delayed use. The student is expected to:
- (A) analyze the relationship between the use of refusal skills and the avoidance of alcohol, tobacco, and other drugs; and
 - (B) analyze the role that alcohol and other drugs play in unsafe situations, including sexual abuse and assault.
- (18) Reproductive and sexual health--healthy relationships. The student understands the characteristics of healthy romantic relationships. The student is expected to:
- (A) analyze how friendships provide a foundation for healthy dating/romantic relationships;

- (B) identify character traits that promote healthy dating/romantic relationships and marriage; and
 - (C) describe how a healthy marriage can provide a supportive environment for the nurturing and development of children.
- (19) Reproductive and sexual health--personal safety, limits, and boundaries. The student understands how to set and respect personal boundaries to reduce the risk of sexual harassment, sexual abuse, and sexual assault. The student is expected to:
- (A) describe the characteristics of sex trafficking such as grooming, controlling behavior, exploitation, force, fraud, coercion, and violence;
 - (B) analyze the characteristics of harmful relationships that can lead to dating violence;
 - (C) analyze healthy strategies for preventing physical, sexual, and emotional abuse;
 - (D) analyze how a healthy sense of self and making and respecting decisions about safe boundaries and limits promote healthy dating/romantic relationships;
 - (E) explain and demonstrate how refusal strategies can be used to say "no" assertively to unhealthy behaviors in dating/romantic relationships;
 - (F) examine factors, including alcohol and other substances, that increase sexual risk and that affect setting, perceiving, respecting, and making decisions about boundaries;
 - (G) examine and discuss influences and pressures to become sexually active and why it is wrong to violate another person's boundaries and manipulate or threaten someone into sexual activity; and
 - (H) explain the importance of reporting to a parent or another trusted adult sexual harassment, sexual abuse, sexual assault, and dating violence involving self or others.
- (20) Reproductive and sexual health--anatomy, puberty, reproduction, and pregnancy. The student analyzes adolescent development, the process of fertilization, and healthy fetal development. The student is expected to
- analyze the importance of telling a parent or another trusted adult, obtaining early pregnancy testing, and seeking prenatal care if signs of pregnancy occur.
- (21) Reproductive and sexual health--sexual risk. The student understands that there are risks associated with sexual activity and that abstinence from sexual activity is the only 100% effective method to avoid risks. The student is expected to:
- (A) research and analyze the educational, financial, and social impacts of pregnancy on teen parents, the child, families, and society, including considering the effects on one's personal life goals;
 - (B) describe various modes of transmission of STDs/STIs;
 - (C) investigate and summarize the statistics on the prevalence of STDs/STIs among teens by referencing county, state, and/or federal data sources;
 - (D) describe signs and symptoms of STDs/STIs, including human papillomavirus (HPV), human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS), chlamydia, syphilis, gonorrhea, herpes, and trichomoniasis, and identify that not all STDs/STIs show symptoms;
 - (E) analyze the importance of STD/STI screening, testing, and early treatment for sexually active people, including during yearly physicals or if there is a concern;
 - (F) analyze emotional risks that can be associated with sexual activity for unmarried persons of school age, including stress, anxiety, and depression;

- (G) analyze the importance and benefits of abstinence from sexual activity as it relates to emotional health and the prevention of pregnancy and STDs/STIs;
- (H) identify support from parents and other trusted adults and create strategies, including building peer support, to be abstinent or for return to abstinence if sexually active;
- (I) analyze the effectiveness and the risks and failure rates (human-use reality rates) of barrier protection and other contraceptive methods, including how they work to reduce the risk of STDs/STIs and pregnancy; and
- (J) explain the legal responsibilities related to teen pregnancy, including child support and acknowledgement of paternity.

§115.39. Health II (One-Half Credit), Adopted 2020.

- (a) General requirements. Students shall be awarded one-half credit for successful completion of this course. Recommended prerequisite: Health I. This course is recommended for students in Grades 9-12.
- (b) Introduction.
 - (1) The goal of health education is to provide instruction that allows youth to develop and sustain health-promoting behaviors throughout their lives. The understanding and application of these standards will allow students the ability to gather, interpret, and understand health information; achieve health literacy; and adapt to the ever-evolving science of health. The health education knowledge and skills should be presented to students in a positive manner to support the development of a healthy self-concept and responsible decision making. The standards will help students reinforce, foster, and apply positive character traits.
 - (2) There are essential skills that repeat throughout six strands and embody the interconnection of health literacy. These skills include decision making, problem solving, goal setting, maintaining healthy relationships with self and others, seeking help and support, and recognizing various influences on health such as social, environmental, media, and genetic. These skills, developed early on and reinforced throughout a student's education, will foster mastery of health concepts. Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential competencies. In addition, areas in the standards related to abuse, neglect, violence, loss, grief, trauma, and suicide may directly affect some students in the classroom. Should the educator recognize signs of discomfort with instruction in these areas, students should be referred to the appropriate resource, identified ahead of such instruction, for additional help and support.
 - (3) Students will gain an understanding of health information and skills through six strands: physical health and hygiene; mental health and wellness; healthy eating and physical activity; injury and violence prevention and safety; alcohol, tobacco, and other drugs; and reproductive and sexual health.
 - (A) Physical health and hygiene education helps to prepare students for improved lifelong health outcomes. Learning about body systems lays the foundation for personal health and hygiene. Health literacy and preventative behaviors empowers students to make informed choices to support self, family, and community.
 - (B) The mental health and wellness strand recognizes that the knowledge and skills necessary to manage emotions, reactions, and relationships are essential to reaching one's full potential. Students gain knowledge about social and emotional health, including developing a healthy self-concept, understanding risk and protective factors, and identifying and managing mental health and wellness concerns. In the early grades, students develop fluency around emotions and self-regulation and understand the relationship between feelings, thoughts, and behavior. In subsequent grades, students learn and practice appropriate ways to solve interpersonal conflicts, work to develop a positive self-image, and develop healthy self-management skills.

- (C) The healthy eating and physical activity strand addresses the importance of nutrition and physical activity to support a healthy lifestyle. Students apply critical-thinking and decision-making skills to make positive health choices. Students learn about essential nutrients, food groups, portion control, government nutritional recommendations, and the health benefits of being physically active. Students evaluate the connection between physical activity and nutrition and the prevention of chronic diseases.
 - (D) By focusing on injury and violence prevention and safety, the standards promote student well-being and awareness of dangerous situations. Supporting student well-being and providing instruction in digital citizenship, bullying prevention, first aid, and identification of safe and unsafe situations creates empowered and educated students who are able to make decisions that keep themselves and others safe. Beginning in Kindergarten and continuing through high school, students gain knowledge and skills to support safety and wellness at school, at home, online, and in the community.
 - (E) The standards under the alcohol, tobacco, and other drugs strand focus on a number of protective factors that develop empowered students who are able to make better-informed decisions, including understanding the impact of substance use on physical, mental, and social health. Through this strand, students learn key concepts about alcohol, tobacco, and other drugs, including the use, misuse, and physiological effects; short- and long-term impacts on health; treatment; risk and protective factors; and prevention. These concepts introduce healthy alternatives and ways for students to ask for and seek out help from parents and other trusted adults.
 - (F) In the reproductive and sexual health strand, students identify the characteristics of healthy and unhealthy relationships and learn to use communication and refusal skills to set personal boundaries and develop strategies for responding to sexual harassment and abuse. Students describe the changes associated with adolescent development and explain the process of fertilization, fetal development, and the importance of prenatal care. Students also learn that sexual abstinence until marriage is the only 100% effective means of avoiding unplanned pregnancies and sexually transmitted diseases/sexually transmitted infections (STDs/STIs) as well as the legal, financial, and social issues associated with sexual health and reproduction.
- (4) An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:
- (A) a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC), §28.004(e)-(h));
 - (B) the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC, §28.004(i)-(j));
 - (C) the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC, §28.004(i));
 - (D) the centrality of abstinence education in any human sexuality curriculum (TEC, §28.004(e)); and
 - (E) the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33).
- (5) Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272).
- (6) Statements containing the word "including" reference content that must be mastered, while those containing the phrase "such as" are intended as possible illustrative examples.
- (7) Students should first seek guidance in the area of health from a parent or legal guardian.

(c) Knowledge and skills.

- (1) Physical health and hygiene--personal health and hygiene. The student understands health literacy, preventative health behaviors, and how to access and evaluate health care information to make informed decisions. The student is expected to:
 - (A) analyze the cost, availability, and accessibility of health care services;
 - (B) analyze methods of overcoming barriers related to solving health problems; and
 - (C) analyze the influence of laws, policies, and practices, including those related to disease prevention, on health-related issues.
- (2) Mental health and wellness--social and emotional health. The student identifies and applies strategies to develop socio-emotional health, self-regulation, and healthy relationships. The student is expected to:
 - (A) evaluate positive and negative effects of various relationships on physical, emotional, and social health;
 - (B) apply communication skills that demonstrate consideration and respect for individual differences and perspectives; and
 - (C) evaluate the effectiveness of conflict resolution techniques in various situations.
- (3) Mental health and wellness--developing a healthy self-concept. The student develops the capacity for self-assessment and evaluation, goal setting, and decision making in order to develop a healthy self-concept. The student is expected to describe how internal and external factors influence self-esteem.
- (4) Mental health and wellness--risk and protective factors. The student recognizes the influence of various factors influencing mental health and wellness. The student is expected to formulate strategies for combating environmental factors that have a detrimental effect on mental health.
- (5) Mental health and wellness--identifying and managing mental health and wellness concerns. The student develops and uses appropriate skills to identify and manage conditions related to mental health and wellness. The student is expected to:
 - (A) describe the impact of positive stress on building resiliency and promoting mental health and wellness;
 - (B) discuss the impact of choosing healthy self-management strategies for stress, anxiety, depression, trauma, loss, and grief on mental health and wellness;
 - (C) research and explain the behaviors associated with eating disorders and their impact on health;
 - (D) discuss how the use of suicide prevention resources such as the National Suicide Prevention Hotline reduces the likelihood of suicide; and
 - (E) research and discuss data on and prevalence of local, state, and national suicide rates among various groups.
- (6) Healthy eating and physical activity--food and beverage daily recommendations. The student analyzes and applies healthy eating strategies for enhancing and maintaining personal health throughout the lifespan. The student is expected to design a realistic, long-term personal dietary plan that promotes individual and family health.
- (7) Healthy eating and physical activity--physical activity. The student identifies, analyzes, and applies strategies for enhancing and maintaining optimal personal physical fitness throughout the lifespan. The student is expected to:
 - (A) compare and contrast the impact of active and sedentary lifestyles on overall health; and
 - (B) develop a physical fitness profile using appropriate technology.

- (8) Healthy eating and physical activity--nutrition and physical activity literacy. The student will obtain, process, and understand basic physical activity and nutrition information needed to make health-promoting decisions. The student is expected to:
- (A) analyze the progress of short- and long-term goals in achieving appropriate levels of physical activity, improving personal physical fitness levels, and making healthy personal food choices; and
 - (B) analyze marketing and advertising techniques in health product and service promotion.
- (9) Healthy eating and physical activity--risk and protective factors. The student analyzes and applies risk and protective factors related to healthy eating and physical activity. The student is expected to:
- (A) research and discuss the social and economic impact of chronic conditions, including obesity, heart disease, and diabetes; and
 - (B) create a plan for accessing community and digital resources that can assist in developing healthy eating and physical activity behaviors.
- (10) Injury and violence prevention and safety--safety skills and unintentional injury. The student identifies and demonstrates safety and first aid knowledge to prevent and treat injuries. The student is expected to discuss risk-taking behaviors, including driving under the influence and distracted driving, and their associated consequences.
- (11) Injury and violence prevention and safety--healthy home, school, and community climate. The student understands that individual actions and awareness can impact safety, community, and environment. The student is expected to:
- (A) discuss and evaluate ways to respond to harmful situations that involve weapons; and
 - (B) develop educational safety models for children and adults for use at home, school, and in the community.
- (12) Injury and violence prevention and safety--digital citizenship and media. The student understands how to be a safe and responsible citizen in digital and online environments. The student is expected to:
- (A) discuss and analyze consequences resulting from inappropriate digital and online communication such as sending and receiving photos, sexting, and pornography; and
 - (B) assess the legal and ethical ramifications of unacceptable behaviors in digital and online environments.
- (13) Injury and violence prevention and safety--interpersonal violence. The student understands the impact of interpersonal violence and the importance of seeking guidance and help to maintain personal safety. The student is expected to:
- (A) identify and respond to situations requiring intervention for victims of bullying, cyberbullying, or harassment; and
 - (B) promote strategies for prevention and intervention of all forms of bullying and cyberbullying such as emotional, physical, social, and sexual.
- (14) Alcohol, tobacco, and other drugs--use, misuse, and physiological effects. The student understands the difference between use and misuse of different substances and how the use and misuse of substances impacts health. The student is expected to:
- (A) analyze how substance misuse and addiction to alcohol, tobacco, drugs, and other substances impact family and community health;
 - (B) analyze the importance of alternative activities to drug and substance misuse and abuse; and

- (C) identify individual and community protective factors and skills that prevent substance misuse and substance use disorders.
- (15) Alcohol, tobacco, and other drugs--short- and long-term impacts. The student identifies and analyzes the short- and long-term impacts of the use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances. The student is expected to
- evaluate the impact of laws relating to the use and misuse of prescription and over-the-counter drugs, alcohol, tobacco, and other substances on self and community.
- (16) Alcohol, tobacco, and other drugs--treatment. The student recognizes and understands the options for treatment and how to seek help related to the use and misuse of alcohol; tobacco; drugs, including prescription drugs; and other substances. The student is expected to identify ways to support and assist someone who shows signs and symptoms of alcohol, tobacco, or drug use and misuse.
- (17) Alcohol, tobacco, and other drugs--risk and protective factors. The student understands how various factors can influence decisions regarding substance use and the resources available for help. The student is expected to:
- (A) discuss risk-taking behaviors such as drinking and driving with their associated legal, social, and physical consequences;
 - (B) analyze physical and social environmental influences on the misuse and abuse of prescription drugs in places such as school, sports, or entertainment; and
 - (C) design a public health information campaign related to safe havens, where to go for help, or reporting drug-related behaviors.
- (18) Alcohol, tobacco, and other drugs--prevention. The student analyzes information and applies critical-thinking skills to avoid substance use and misuse and recognizes the benefits of delayed use. The student is expected to develop strategies for preventing use or misuse of alcohol, tobacco, and other drugs, including opioids.
- (19) Reproductive and sexual health--healthy relationships. The student understands the characteristics of healthy romantic relationships. The student is expected to:
- (A) compare and contrast effective and ineffective methods of communicating emotions in healthy dating/romantic relationships and marriage;
 - (B) analyze behaviors in romantic relationships that enhance dignity and respect; and
 - (C) examine how a healthy marriage can provide a supportive environment for the nurturing and development of children.
- (20) Reproductive and sexual health--personal safety, limits, and boundaries. The student understands how to set and respect personal boundaries to reduce the risk of sexual harassment, sexual abuse, and sexual assault. The student is expected to:
- (A) identify community resources to support individuals who have experienced sexual harassment, sexual abuse, sexual assault, dating violence, and sex trafficking;
 - (B) evaluate the importance of reporting to a parent or another trusted adult sexual harassment, sexual abuse, sexual assault, and dating violence involving self or others;
 - (C) discuss how refusal skills can be used to set limits and boundaries to avoid behaviors that increase sexual risk;
 - (D) analyze factors, including alcohol and other substances, that increase sexual risk and that affect setting, perceiving, respecting, and making decisions about boundaries; and
 - (E) evaluate influences and pressures to become sexually active and why it is wrong to violate another person's boundaries and manipulate or threaten someone into sexual activity.

- (21) Reproductive and sexual health--anatomy, puberty, reproduction, and pregnancy. The student analyzes adolescent development, the process of fertilization, and healthy fetal development. The student is expected to:
- (A) analyze the significance of hormonal, physical, emotional, and social changes in males and females and their relationship to sexual health;
 - (B) list factors such as heredity, environment, STDs/STIs, and the mother's health and nutrition that can affect fetal development from conception through birth; and
 - (C) describe the emotional changes that may occur during and after pregnancy, including postpartum depression, and identify resources for support and treatment.
- (22) Reproductive and sexual health--sexual risk. The student understands that there are risks associated with sexual activity and that abstinence from sexual activity is the only 100% effective method to avoid risks. The student is expected to:
- (A) analyze the options available to teenage parents such as parenting or the process of adoption and the legal rights of parties involved;
 - (B) evaluate long-term or lifetime effects of bacterial and viral STDs/STIs, including infertility and cancer;
 - (C) identify community resources, minors' right to consent under certain circumstances, and the importance of parent or other trusted adult support for STD/STI testing and treatment;
 - (D) analyze the effectiveness and the risks and failure rates (human-use reality rates) of barrier protection and other contraceptive methods, including how they work to reduce the risk of STDs/STIs and pregnancy;
 - (E) identify the effectiveness of vaccines in preventing the transmission of the most common types of HPV, a virus that may cause genital warts and head and neck cancer, cervical cancer, anal cancer, or other cancers that may occur in males and females;
 - (F) analyze the benefits of abstinence from sexual activity, including focusing on personal development and encouraging individuals to build healthy relationships not complicated by sexual involvement;
 - (G) assess support from parents and other trusted adults and create strategies, including building peer support, to be abstinent or for return to abstinence if sexually active;
 - (H) investigate and summarize legal aspects of sexual activity with a minor person, including the legal age of consent, statutory rape, aggravated sexual assault, sexual assault, and indecency with a child; and
 - (I) investigate and summarize current laws relating to sexual offenses such as sexual harassment, abuse, and assault.

§115.40. Your Health in the Real World (One-Half Credit), Adopted 2020.

- (a) General requirements. Students shall be awarded one-half credit for successful completion of this course. This course is recommended for students in Grades 9-12.
- (b) Introduction.
 - (1) Living your best life is understanding how to navigate the health care system. The objective of this course is to empower students and their families to sustain or improve their quality of life as it relates to their own health and the health of their community. To achieve this objective, students will understand health care terminology as it relates to insurance and public health. Further, students will acquire the knowledge and skills needed to utilize community, state, and federal health care services and related resources.
 - (2) Health class educators are encouraged to partner with school counselors where available to schedule time for them to deliver classroom guidance lessons to help teach these essential

competencies. In addition, areas in the standards related to abuse, neglect, violence, loss, grief, trauma, and suicide may directly affect some students in the classroom. Should the educator recognize signs of discomfort with instruction in these areas, students should be referred to the appropriate resource, identified ahead of such instruction, for additional help and support.

- (3) An integral part of health education involves educators being aware of state laws relevant to human sexuality instruction. These laws include affirming:
 - (A) a local school district's control over the provision of human sexuality instruction to ensure that local community values are reflected in that instruction (Texas Education Code (TEC), §28.004(e)-(h));
 - (B) the right of a parent or legal guardian to be informed of the provision of human sexuality instruction to their child and review the content of that instruction (TEC, §28.004(i)-(j));
 - (C) the right of a parent or legal guardian to remove their child from any portion of human sexuality instruction without penalty to the child (TEC, §28.004(i));
 - (D) the centrality of abstinence education in any human sexuality curriculum (TEC, §28.004(e)); and
 - (E) the right of a parent or legal guardian to be informed of and consent to an abortion performed on their pregnant child (with judicially authorized or medical emergency exceptions) (Texas Family Code, Chapter 33).
 - (4) Educators also should be aware of and abide by the statutory prohibition on taxpayer resource transactions between state governmental entities, including public schools, and abortion providers or an affiliate of an abortion provider (Texas Government Code, Chapter 2272).
 - (5) Statements containing the word "including" reference content that must be mastered, while those containing the phrase "such as" are intended as possible illustrative examples.
 - (6) Students should first seek guidance in the area of health from a parent or legal guardian.
- (c) Knowledge and skills.
- (1) Health literacy--health consumerism. The student understands medical terminology in health decision making. The student is expected to:
 - (A) define medical expressions or terms used by health care professionals; and
 - (B) define basic terminology for general use such as reading prescription labels.
 - (2) Health literacy--health consumerism. The student interprets personal medical information for health decision making. The student is expected to:
 - (A) interpret and explain take-home instructions from a health care professional;
 - (B) identify normal vital signs, including temperature, blood pressure, heart rate, body mass index (BMI), oxygen, and blood glucose levels;
 - (C) interpret medication labels, including supplements and over-the-counter and prescription drugs; and
 - (D) analyze the importance of each component of personal medical history, including immunizations, previous treatments, current medical records, and family history.
 - (3) Health literacy--health consumerism. The student analyzes the different facets of health insurance. The student is expected to:
 - (A) differentiate between types of insurance, including health, vision, and dental insurance;
 - (B) evaluate the advantages, disadvantages, and costs of public and private insurance benefits;
 - (C) analyze key components of insurance, including copay and deductible;

- (D) describe different ways to pay for health care, including paying cash, health savings accounts, and flexible spending accounts; and
 - (E) interpret the components of a medical bill such as the explanation of benefits (EOB).
- (4) Health literacy--health consumerism. The student identifies the proper use of medications and becomes familiar with the effects of pharmaceuticals. The student is expected to:
- (A) compare and contrast the differences between generic and name-brand medications;
 - (B) identify cost differentials of similar medications and the rights of the consumer, including the ability to ask a pharmacist for other options;
 - (C) explain the limitations of medications, including the differences between symptomatic treatment and treatment for a cure;
 - (D) identify different types of improper use of medications, including using expired medications and using, overusing, and misusing non-prescribed medications;
 - (E) identify ways to properly dispose of medications and equipment and explain the importance of proper disposal; and
 - (F) explain what Food and Drug Administration (FDA) approval means and compare with off-label use.
- (5) Health literacy--patient advocacy. The student identifies alternatives to health insurance coverage. The student is expected to:
- (A) research and describe available health care sharing plans;
 - (B) identify the options of community health care resources, including federally qualified healthcare centers (FQHC) and non-profit community clinics; and
 - (C) identify available health care community resources such as medical, dental, vision, pharmacy, x-ray, and laboratory services.
- (6) Health literacy--patient advocacy. The student demonstrates proper patient/health care professional communication. The student is expected to:
- (A) define the Health Information Privacy and Portability Act (HIPPA) and explain how it relates to confidentiality of medical records;
 - (B) identify patient rights, including rights to sexually transmitted disease/sexually transmitted infection (STD/STI) testing and pregnancy health care and explain physician privileges;
 - (C) define the role of a chaperone in a medical setting, including the patient's ability to request or remove one;
 - (D) demonstrate how to have a collaborative conversation with a health care professional, including asking questions and advocating for self and others;
 - (E) analyze the impact of medical bias on health outcomes; and
 - (F) evaluate resources relevant to patients' legal rights, including the Centers for Medicare and Medicaid Services' Patient's Bill of Rights (2020).
- (7) Health literacy--health applications and technology. The student analyzes and evaluates software applications and other technology as they relate to personal health care. The student is expected to:
- (A) compare and contrast remote (telehealth and e-medicine) and in-person health care and treatment;
 - (B) research and describe the effects of inequitable distribution of technology in health care, including medical facilities and home environments;

- (C) differentiate between credible and false health information on the internet and social media;
 - (D) analyze the risks of sharing private health information; and
 - (E) evaluate the use and effectiveness of a personal fitness device or health application.
- (8) Health literacy--navigating the health care system. The student examines and interprets various health insurance plans, government guidelines for health plans, and coverage of non-traditional health care. The student is expected to:
- (A) compare and contrast insurance plans, including health maintenance organization (HMO), preferred provider organization (PPO), Medicare, Medicaid, and the Children's Health Insurance Program (CHIP);
 - (B) research and explain current federal, state, and local government guidelines for health insurance; and
 - (C) distinguish between insurable and non-insurable health services, including elective procedures and integrative and non-traditional health care.
- (9) Health care occupations--working within the health care system. The student explores different careers in the health care industry and analyzes their various roles. The student is expected to:
- (A) explore and describe a variety of careers in the health care industry; and
 - (B) analyze the various roles in the health care delivery system, including health care administration, health care professionals, public health professionals, corporate health care, and research and development.
- (10) Public health--policy resources. The student understands the resources available for protecting and improving the health of people and their local, national, and international communities. The student is expected to:
- (A) identify the roles of leading public health organizations such as county health departments, the Centers for Disease Control and Prevention (CDC), and the World Health Organization (WHO);
 - (B) compare and contrast U.S. and global health issues;
 - (C) explain the ways that local, state, national, and international organizations support public health; and
 - (D) analyze the effects of public policy on the prevention of communicable and noncommunicable diseases.
- (11) Public health--policy recommendations. The student applies public health resources to create solutions to daily health challenges. The student is expected to:
- (A) research and discuss an emerging health issue or topic such as health equity or a pandemic;
 - (B) appraise the impact of leading health organizations on emerging health issues and topics;
 - (C) explore and explain the effects of environmental policy on public health;
 - (D) analyze the interconnectedness of different sectors of the health care industry and how they improve public health; and
 - (E) evaluate the impact of public health policy on emergency preparedness.
- (12) Public health--mental health. The student recognizes the interconnectedness of mental health and public health. The student is expected to:
- (A) examine the relationship between mental health and physical health;
 - (B) evaluate the importance of social interaction and its impact on health;

- (C) describe the connection between mental health and the increase in homelessness and incarceration; and
 - (D) analyze the impact of social stigma on accessing mental health services, including barriers to treatment.
- (13) Prevention--healthy living. The student evaluates the effects of health behaviors on preventing disease. The student is expected to:
- (A) appraise the effect of biological family medical history (genetics), including maternal and paternal, on health outcomes or risk for illness;
 - (B) evaluate the benefits of regular checkups;
 - (C) classify primary, secondary, and tertiary preventions;
 - (D) define comorbidities and their impact on health;
 - (E) examine health risk factors such as sedentary lifestyle and poor diet that can lead to negative health outcomes;
 - (F) research and describe preventative services covered by insurance plans;
 - (G) explain the importance of vaccines across the lifespan;
 - (H) evaluate the effectiveness of a personal health plan that includes nutrition, exercise, healthy weight, and sleep in preventing chronic disease; and
 - (I) evaluate the effectiveness of prevention campaigns on health behavior such as substance use, misuse, and abuse.