



# Agenda

North Clackamas School Board  
Thursday, June 22, 2023 - 6:30 PM  
Zoom/YouTube  
12400 SE Freeman Way  
Milwaukie, OR 97222

Times listed on the agenda below are only estimates and may be adjusted.

## OPEN SESSION

<b>6:30</b>	<b>Call to Order</b>	
	<b>Community Comments</b>	
	<b>Native Land Acknowledgement</b>	<b>2</b>
	<b>Flag Salute</b>	<b>3</b>
	<b>Minutes - June 8, 2023</b>	<b>4</b>
	<b>Consent Agenda</b>	
	<b>A. Employment Changes</b>	
	<b>B. North Clackamas Education Association Collective Bargaining Agreement 2023-2025</b>	
	<b>C. North Clackamas Administrator Association Employment Agreement 2023-2025</b>	
	<b>D. Addendum to Transportation Supplemental Plan (Walk Zone)</b>	<b>8</b>
	<b>E. Travel Request - Rex Putnam High School Cross Country Team</b>	<b>10</b>
	<b>F. Travel Request - Clackamas High School Cross Country Team</b>	<b>16</b>
<b>7:05</b>	<b>1. Board Reports</b>	
<b>7:20</b>	<b>2. 2023-2024 Organizational Resolution for the Required Designations, Authorizations and Appointments - Action</b>	<b>25</b>
	Presenter: Matt Makara	
<b>7:25</b>	<b>3. Comprehensive Sexuality Education Plan Update - Action</b>	<b>28</b>
	Presenter: Tammy O'Neill	
<b>7:30</b>	<b>Adjourn</b>	



## Native Land Acknowledgment

We acknowledge the land on which we sit and which we call the North Clackamas School District rests on the traditional and indigenous lands and village sites of the Native peoples of the Kalapuya, Chinook, Molalla, and the Clackamas. We take this opportunity to offer gratitude for the ability to learn, work, and be a community on this land, and we offer thanks to the original caretakers of this region. We recognize the historic policies of colonization, genocide, relocation, and assimilation that affected Indigenous and Native families both past and present and that will affect those in the future, and honor the resilience and revitalization of our Indigenous and Native communities. We pay our respects to the Elders, both past and present, who have been the stewards of this land throughout the generations.



## Flag Salute

I pledge allegiance to the Flag of the United States of  
America, and to the Republic for which it stands, one Nation  
under God, indivisible, with liberty and justice for all.

**NORTH CLACKAMAS SCHOOL DISTRICT 12  
CLACKAMAS COUNTY, OREGON  
MINUTES — BOARD OF DIRECTORS MEETING  
June 8, 2023  
Zoom/YouTube**

**Open Session**

With due notice having been given and a quorum present, Chair Mitzi Bauer convened open session at 6:30 p.m. with the following members present:

Mitzi Bauer	–	Chair
Jena Benologa	–	Vice Chair
Orlando Perez	–	Director
Tory McVay	–	Director
Steven Schroedl	–	Director
Kathy Wai	–	Director
Libra Forde	–	Director
Shay James	–	Superintendent
Donna Collingwood	–	Board Secretary

Also present were Cindy Detchon, Ivonne Dibblee, Michelle Riddell, Matt Makara, Petra Callin, and Tammy O’Neill.

Jena Benologa read the Native Land Acknowledgement. Tory McVay led the Pledge of Allegiance.

R22/23-79      **Minutes** – Steven Schroedl moved, Orlando Perez seconded the motion to approve the minutes of the regular Board Meeting held May 11, 2023.

Motion passed unanimously, 7-0.

R22/23-80      **Minutes** – Steven Schroedl moved, Orlando Perez seconded the motion to approve the minutes of the Board Meeting Work Session held May 25, 2023.

Motion passed unanimously, 7-0.

R22/23-81      **Consent Agenda** – Jena Benologa moved, Tory McVay seconded the motion to adopt the consent agenda as recommended:

**Employment Changes** - Approve employment changes as listed, with a copy of the list made as part of the official minutes, as recommended by the Executive Director of Human Resources:

- Administrative terminations

- Licensed transfers and terminations

**Policy Revisions**

- Approve revisions to the following policies and administrative regulations as recommended by the Policy Review Committee.
  - JBA/GBN – Sexual Harassment
  - JBA/GBN-AR(1) – Sexual Harassment Complaint Procedures
  - JBA/GBN-AR(2) - Sexual Harassment Complaint Form
  - GBN/JBA – Sexual Harassment
  - GBN/JBA-AR(1) – Sexual Harassment Complaint Procedures
  - GBN/JBA-AR(2) - Sexual Harassment Complaint Form

**Non-Licensed Administrators Continuation of Contract 2023-2024** - Approve the non-licensed administrators who are being recommended for a one-year contract for 2023-2024.

**2023-2024 Middle School and High School Fee Schedules** - Approve the 2023-2024 Middle School and High School Fee Schedules.

**Travel Request -**

- Grant permission for 16 students from Rex Putnam High School to travel to Rockaway Beach, Oregon, August 19-22, 2023.

**Travel Request -**

- Grant permission for 85 students from Adrienne C. Nelson High School to travel to Newberg, Oregon, June 17-20, 2023.

Motion passed unanimously, 7-0.

**Budget Hearing** - Chair Mitzi Bauer announced the budget hearing open. No one gave testimony, the hearing was closed.

**Resolutions for the Fiscal Year 2023-2024 -**

R22/23-82 Tory McVay moved, Steven Schroedl seconded the motion to adopt the budget for fiscal year 2023-24 in the amount of \$501,002,760.

Motion passed unanimously. 7-0.

R22/23-83 Tory McVay moved, Steven Schroedl seconded the motion to approve the amounts for the fiscal year beginning July 1, 2023, and for the purposes shown are hereby appropriated as presented.

Motion passed unanimously. 7-0.

R22/23-84 Tory McVay moved, Steven Schroedl seconded the motion to approve the following ad valorem property taxes are hereby imposed for tax year 2023-24 upon the assessed value of all taxable property within the district: (1) At the rate per \$1,000 of assessed value of \$4.8701 for permanent rate tax (2) at the rate of \$1.63 per \$1,000 of assessed value for local option tax, and (3) in the amount of \$39,568.614 for the debt service on general obligation bonds.

Motion passed unanimously. 6-0. Libra Forde was not present at time of vote.

R22/23-85 Tory McVay moved, Steven Schroedl seconded the motion to approve the taxes imposed are hereby categorized for the purposes of Article XI section 11b as: (1) Education Limitation permanent rate tax of \$4.8701 per \$1,000 (2) at the rate of \$1.63 per \$1,000, and (3) Excluded from Limitation, General Obligation Bond Debt Service in the amount of \$39,568,614.

Motion passed unanimously. 6-0. Libra Forde was not present at time of vote.

R22/23-86 Tory McVay moved, Orlando Perez seconded the motion to approve the Construction Excise Tax for the 2023-24 Fiscal Year, and thereafter until later modified.

Motion passed unanimously. 6-0. Libra Forde was not present at time of vote.

**Clackamas Community College (CCC) Bond Projects Update - Presentation** -

Clackamas Community College President Tim Cook and Clackamas County College Board Member Rob Wheeler gave a presentation on CCC Bond projects update. Questions and comments from the Board were addressed.

**Addendum to Transportation Supplemental Plan (Walk Zone) - Discussion** - Assistant Superintendent of Operations Cindy Detchon discussed the Addendum to the Transportation Supplemental Walk Zone Plan. Questions and comments from the Board were addressed.

**Comprehensive Sexuality Education Plan - Discussion** - Executive Director of Teaching, Learning and Professional Development Tammy O'Neill discussed the District's Comprehensive Sexuality Plan. Questions and comments from the Board were addressed.

**Board Reports** - Board members made brief reports on activities and events they had attended. They also expressed interest in Chair and Vice Chair positions.

R22/23-87 **World Language Adoption: French Grades 9-12/Spanish Grades 6-12** - Orlando Perez moved, Tory McVay seconded a motion to adopt the World Language: French curriculum for grades 9-12 and Spanish curriculum for grades 6-12. The recommendations for French and Spanish world languages are: Entre Culture & Apprenons - French and Voces Digital & Temas - Spanish.

Motion passed unanimously, 6-0. Libra Forde was not present at the time of vote.

R22/23-88 **Local Option Levy** - Orlando Perez moved, Tory McVay seconded a motion to adopt the proposed resolution directing North Clackamas School District staff to place a continuation of the local option levy on the November 7, 2023 ballot.

Motion passed unanimously, 6-0. Libra Forde was not present at time of vote.

R22/23-89 **Construction Amendment: Maxim Healthcare Staffing Services** - Tory McVay moved, Orlando Perez seconded the motion to increase the contract amount to \$500,000 for Maxim Healthcare Staffing Services to provide special education paraeducators to temporarily fill current vacancies.

Motion passed unanimously, 6-0. Libra Forde was not present at time of vote.

There being no further business to come before the Board, the meeting adjourned at 8:12 p.m.

**Unapproved**

**SUPERINTENDENT’S RECOMMENDATION:**

Approval of the 2023 Addendum to the [Transportation Supplemental Walk Zone Plan](#).

**REASON FOR BOARD CONSIDERATION:**

The safety of our students as they come to school is our first consideration. The last comprehensive analysis and submission of a Walk Zone Supplement Plan was in 2017. The district needs to periodically review the safety of the walk zone and transportation areas. There have been two major roadway improvements since our last update to our plan.

**BUDGET IMPACT/SOURCE OF FUNDS:**

To receive the full 70% reimbursement from the state for transportation expenses, the district must have all transportation provided in the walk zones documented and approved by the NCSD Board. Any bus stops within the walk zone without documented hazards do not receive state reimbursement. The average cost to transport within the walk zone without a documented hazard is approximately \$700 per student per year.

**BACKGROUND:**

The Supplemental Walk Zone Plan documents the analysis of hazards in school walk zones that may require a bus stop for safety. The plan identifies the areas for recommended bus service within a one-mile walking distance from each elementary and middle school and a 1.5-mile distance from each high school. The walk zones have been evaluated for safe walking conditions, including speed and volume of vehicles, width, and condition of the street, shoulders and sidewalks, visibility, crossings, intersections, and any other potential hazards.

The Supplemental Walk Zone Plan is submitted to the Oregon Department of Education for approval and funding (70% of expense) for transportation services. The analysis of walk zones is based on a process and criteria approved by the North Clackamas School Board. That criteria assists in evaluating safe walking conditions, including speed and volume of vehicles, width, and condition of the street, shoulders and sidewalks, visibility, crossings, intersections, and any other potential hazards.

The Walk Zone Supplemental Plan is the product of an 18-month process, including nine months of physical evaluation of our walk zones by the Transportation Department, comprehensive review by an Advisory Committee composed of all stakeholder groups, and extensive community engagement efforts, including PTO meetings at the schools most heavily impacted by recommended changes.

This addendum to the Walk Zone Supplemental Plan includes changes that reflect the following:

- Reducing transportation bus stops in areas with recent road and walkway improvements for approximately 34 students who now have a safe walk path to Ardenwald Elementary School.
- Reducing transportation bus stops in areas with recent road and walkway improvements, including a crosswalk added through a Safe Routes to School Grant, for approximately 18 students who now have a safe walk path to Lot Whitcomb Elementary School.

Each of the recommended changes above has been thoroughly reviewed, physically walked, and analyzed using the same board-adopted criteria. Families who will be potentially impacted have all received notification about these potential changes and this board agenda item in their preferred language. Families are invited to share any concerns that they have with the Transportation Department.

**PRESENTER / STAFF CONTACT:**

Cindy Detchon, Assistant Superintendent of Operations

Kathy Calkins, Director of Transportation

James Prichard, Assistant Director of Transportation

**TRAVEL PERMISSION REQUEST**

Rex Putnam High School-Cross Country Team

**CONSENT E**

June 22, 2023

**SUPERINTENDENT'S RECOMMENDATION:**

Board approval of the request to travel.

**BACKGROUND:**

Rex Putnam High School is requesting permission for 20 students and 4 chaperones to travel to LaPine, Oregon, August 6-10, 2023, for an annual Cross Country retreat. This trip will be \$85.00 per student, with other costs being funded by the Rex Putnam Cross Country budget. This is an annual retreat for the team to complete high-altitude training and team bonding. This trip will be after school is out for the year, and students will not miss any school days.

**SOURCE OF FUNDS:**

See attached Application for Permission to Travel

**ATTACHMENTS:**

Application for Permission to Travel and required attachments

**STAFF CONTACT:**

Petra Callin, Executive Director of Secondary Programs



**Section II – Budget Information – Cost per Student**

**Expenses (per student)**

- 1. Transportation \$ 8.00
- 2. Lodging (no home stays) \$ 15.00
- 3. Meals \$ 85.00
- 4. Fees/Event Expense \$ 17.00
- 5. Other \$ 0

Description of other expenses: \_\_\_\_\_

6. Total cost per student (total lines 1 through 5): \$ 125

7. # of chaperones 4

8. # of students 20

9. Total # of students + chaperones 24

10. Total cost of participation (Line 6 x Line 9): \$ 3000

11. Substitute Teachers: (rates are effective 2022-2023)

a. \_\_\_\_\_ # Full-Day Substitute(s) x \_\_\_\_\_ # of Days @ \$273.60 = \$ 0

b. \_\_\_\_\_ # Half-Day Substitute(s) x \_\_\_\_\_ # of Days @ \$136.80 = \$ 0

c. Total Sub Cost \$ 0

**TOTAL COST OF FIELD TRIP/TRAVEL (Line 10 plus line 11c.): \$ 3000**

Total Funding Resources – including fund raising, student out-of-pocket, contributions, school budget (totals should match): \$ 3,000

Briefly describe fund-raising activities and other resources: \_\_\_\_\_

Students will pay out of pocket to cover food costs, the rest will come from the cross country budget.

*No students will be denied participation due to lack of funds. Adequate sources of revenue must be made available to all students.*

**Section III – Transportation and Lodging Information**

- Transportation:
- NCSD bus
  - NCSD mini bus (Type 20)
  - Rental Vehicle (no rental of 15-passenger vans allowed)
  - Nondistrict commercial transportation (bus, train, plane)
  - Private/personal vehicles (Must have parent/guardian release form)

For use of NCSD minibus or Rental Cars, please identify the NCSD current certified mini-bus drivers:

Name of Driver(s): Nathan Geiter

Kailie Geiter

**NCSD mini buses cannot be used for trips which total more than 600 miles round trip.**

Number of miles round trip: 500

Name the type(s) of nondistrict transportation to be used (including to and from airport) and company name:

RPHS Small bus and a Private vehicle ( Honda Pilot) with parental permission.

Name and location of lodging and description of room arrangements (chaperones may not share rooms with students; see item #2 under Chaperone Guidelines). Students are not allowed to stay with host families without written permission from Superintendent or designee. This is in accordance with Volunteer Policy IICC-AR(1):

La Pine State Park 15800 State Recreation Rd La Pine, OR. One campsite for boys, and one for girls. Chaperones are in separate tents from students. This is an annual trip. Chaperones will monitor each campsite.

**For all travel requests, transportation details and a pre-trip driver requirements forms (If driving a Type 20 NCSD minibus must be included).**

I have read and understand all trip guidelines.

*Nathan White*  
Trip Leader Signature

5/24/23  
Date

**Section IV – Required Attachments for building level approval only.**

The following attachments must accompany this application:

- Detailed Itinerary which includes all planned activities and outline of student expectations specific to the trip.
- Pre-trip Driver Requirements (NCSD minibus-Type 20) upon departure.
- Copy of Permission Release Forms and Emergency Information
- List of chaperones and verification of current background check on file.

**Section V – Required Attachments to be sent to district level. (All other forms stay at the building.)**

- Detailed itinerary which includes all planned activities and outline of student expectations specific to the trip.
- List of chaperones and verification of current background check on file.

**Section VI – Approval**

Principal Level:  Approved  
 Denied

*[Signature]* 5/26/2023  
Principal Date

District Level:  Approved  
 Denied

*[Signature]* 6/12/23  
Executive Director of Elementary/Secondary Date

Date of Board Approval: \_\_\_\_\_

## Rex Putnam XC camping trip 2023 itinerary

### Day #1 August 6th:

Student arrival, loading bus at 7:30 am

Depart from Putnam at 8:00 am

Arrival at Frog Lake(Mt Hood area, on the way to LaPine) for trail run at 9:30 am

Depart from Frog Lake at 11:30 am

Lunch stop in Madras at 12:30 pm

Arrive at LaPine State Park at 3:00 pm

Set up camp 3:15 pm - 5:00 pm

Free time until Dinner 5:00 pm

Dinner at 6:30 pm

Campfire Team bonding 8:00 pm

Lights out, everyone in tents at 10:00 pm

### Day #2 August 7th

Wake up at 8:00 am

AM Coffee W/U! 15 min run/agilities at 8:30 am

Breakfast at 9:00 am

Free time at camp 10:00-11:00 am

Team building games! 11:00 - 12:00 pm

Lunch at 12:30 pm

Afternoon free time (frisbee, spike ball, board games) 1:30 pm - 3:30 pm

Trail run of the day on trails within state park. 4:00-5:30 pm

Dinner at 6:30 pm

Campfire Team bonding 8:00 pm

Lights out, everyone in tents at 10:00 pm

### Day #3 August 8th

Wake up at 8:00 am

AM Coffee W/U! 15 min run/agilities at 8:30 am

Breakfast at 9:00 am

Free time at camp 10:00 am - 12:00 pm

Lunch at 12:30 pm

Afternoon free time (frisbee, spike ball, board games) 1:30 pm - 3:30 pm

Trail run of the day on the Deschutes River trail in LaPine 4:00 - 5:30 pm

Dinner at 6:30 pm

Campfire Team bonding 8:00 pm

Lights out, everyone in tents at 10:00 pm

### Day #4 August 9th

Wake up at 8:00 am  
AM Coffee W/U! 15 min run/agilities at 8:30 am  
Breakfast at 9:00 am  
Pack lunches and get ready for day trip to Paulina Lake 9:30 - 10:15 am  
Depart from LaPine to Paulina Lake 10:30 am  
Arrival at Paulina Lake 11:30 am  
Big run around the Lake 11:45 am - 1:15 pm  
Lunch at 1:30 pm  
Head back to LaPine State Park 2:30 pm  
Arrival back at campsites 3:30 pm  
Afternoon free time (frisbee, spike ball, board games) 3:30pm - 6:00 pm  
Dinner at 6:30 pm  
Campfire Team bonding 8:00 pm  
Lights out, everyone in tents at 10:00 pm

#### Day #5 August 10th

Wake up at 8:30 am  
Pack and gather clothes/gear 8:30-9:00 am  
Breakfast at 9:00 am  
Camp clean up 9:45 - 11:00 am  
Leave LaPine State Park at 11:30 am  
Lunch stop in Madras at 12:45 pm  
Leave Madras at 1:15  
Arrival at Trillium Lake for final run at 2:15  
Depart from Trillium Lake to head towards HS at 3:30 pm  
Arrival at Rex Putnam HS at 5:00 pm

**TRAVEL PERMISSION REQUEST**  
Clackamas High School-Cross Country Team

**CONSENT F**  
June 22, 2023

**SUPERINTENDENT'S RECOMMENDATION:**

Board approval of the request to travel.

**BACKGROUND:**

Clackamas High School is requesting permission for 22 students and 3 chaperones to travel to Tillamook, Oregon, July 23-27, 2023, for an annual Cross Country retreat. This trip will be \$325.00 per student, with other costs being funded by the Clackamas Cross Country budget. This is an annual retreat for the team to complete high-altitude training and team bonding. This trip will be after school is out for the year, and students will not miss any school days.

**SOURCE OF FUNDS:**

See attached Application for Permission to Travel

**ATTACHMENTS:**

Application for Permission to Travel and required attachments

**STAFF CONTACT:**

Petra Callin, Executive Director of Secondary Programs



**Section II – Budget Information – Cost per Student**

**Expenses (per student)**

- 1. Transportation \$ 0
- 2. Lodging (no home stays) \$ 175
- 3. Meals \$ 150
- 4. Fees/Event Expense \$ \_\_\_\_\_
- 5. Other \$ \_\_\_\_\_
- Description of other expenses: \_\_\_\_\_
- 6. **Total cost per student (total lines 1 through 5):** \$ 325
- 7. # of chaperones 3
- 8. # of students 22
- 9. **Total # of students + chaperones** 25
- 10. **Total cost of participation (Line 6 x Line 9):** \$ 8,125
- 11. Substitute Teachers: (rates are effective 2022-2023)
  - a. 0 # Full-Day Substitute(s) x 00 # of Days @ \$273.60 = \$ 0
  - b. 0 # Half-Day Substitute(s) x 00 # of Days @ \$136.80 = \$ 0
  - c. **Total Sub Cost** \$ \_\_\_\_\_

**TOTAL COST OF FIELD TRIP/TRAVEL (Line 10 plus line 11c.):** \$ 8,125

Total Funding Resources – including fund raising, student out-of-pocket, contributions, school budget (totals should match): \$ 8,125

Briefly describe fund-raising activities and other resources:

We will be asking athletes to pay \$325 for participation. If they are unable to afford the fee, scholarships will be provided from the CHS Cross Country account.

*No students will be denied participation due to lack of funds. Adequate sources of revenue must be made available to all students.*

**Section III – Transportation and Lodging Information**

- Transportation:
- |                                     |   |                                     |  |
|-------------------------------------|---|-------------------------------------|--|
| <input type="checkbox"/>            | NCSD bus  | <input type="checkbox"/>            | Nondistrict commercial transportation (bus, train, plane)          |
| <input checked="" type="checkbox"/> | NCSD mini bus (Type 20)                                 | <input checked="" type="checkbox"/> | Private/personal vehicles (Must have parent/guardian release form) |
| <input type="checkbox"/>            | Rental Vehicle (no rental of 15-passenger vans allowed) |                                     |  |

For use of NCSD minibus or Rental Cars, please identify the NCSD current certified mini-bus drivers:

Name of Driver(s): Jeremy Liebman

\_\_\_\_\_

**NCSD mini buses cannot be used for trips which total more than 600 miles round trip.**

Number of miles round trip: 190

Name the type(s) of nondistrict transportation to be used (including to and from airport) and company name:

Students will either travel on the NCSD mini bus (Type 20) or parents will drop their kids off at The Hvdrenaea Ranch on 7/23/23

Name and location of lodging and description of room arrangements (chaperones may not share rooms with students; see item #2 under Chaperone Guidelines). Students are not allowed to stay with host families without written permission from Superintendent or designee. This is in accordance with Volunteer Policy ICC-AR(1):

Student athletes from Clackamas High School will stay in two large greenhouses, separated by gender. There will be chaperones in separate tents directly next to the greenhouse.

**For all travel requests, transportation details and a pre-trip driver requirements forms (If driving a Type 20 NCSD minibus must be included).**

I have read and understand all trip guidelines.

Jeremy Liebman

Trip Leader Signature

6/12/23

Date

**Section IV – Required Attachments for building level approval only.**

The following attachments must accompany this application:

- Detailed Itinerary which includes **all** planned activities and outline of student expectations specific to the trip.
- Pre-trip Driver Requirements (NCSD minibus-Type 20) upon departure.
- Copy of Permission Release Forms and Emergency Information
- List of chaperones and verification of current background check on file.

**Section V – Required Attachments to be sent to district level. (All other forms stay at the building.)**

- Detailed itinerary which includes **all** planned activities and outline of student expectations specific to the trip.
- List of chaperones and verification of current background check on file.

**Section VI – Approval**

Principal Level:  Approved  
 Denied

John Arntson 6/16/2023  
 Principal Date

District Level:  Approved  
 Denied

[Signature] 6/16/23  
 Executive Director of Elementary/Secondary Date

Date of Board Approval: \_\_\_\_\_

# Clackamas High School XC Camp Out 2023 Itinerary

July 23rd -27th, 2023

The Hydrangea Ranch - Tillamook,OR

Chaperones: Jeremy Liebman, Grant Eldridge, Marie Markham

## Sunday, July 23rd, 2023

11:30 AM Meet Clackamas High School

-Athlete check in and load equipment and personal items on bus

12:00 PM Depart from Clackamas High School

2:30 PM Arrive at Hydrangea Ranch & Settle In

-Unload equipment and personal items

-Set up sleeping areas

3:00 PM Meet and discuss basic ground rules and expectations for the trip

6:30 PM Dinner in Outdoor Pavillion

7:00 PM Free Time

7:30 PM Team Talk

- Goal setting: team and individual

- Goal Sheets (Brainstorm)

8:00 PM Movie-*Without Limits*

10:30 PM Lights Out

**Monday, July 24th, 2023**

8:00 AM Wake Up

8:30 AM Light Breakfast with team

9:00 AM Pack lunches

9:30 AM Team Meeting/Overview of day

10:30 AM Team Time Trial/5K at Camp

11:30 AM Free time and lunch

1:00 PM Team Talk

2:00 PM Make team t shirts (tie dye, sharpies)

3:00 PM Goal Setting

-Individual

-Team

3:30 PM Snack

4:00 PM Team building activities (puzzle pieces/identity wheel/etc)

5:00 PM Summer Planning (how will we welcome freshmen/new athletes, 24 hour challenge, etc.)

6:00 PM Dinner in outdoor pavilion

7:00 PM Evening Activity

9:30 PM Get ready for bed

10:00 PM Lights Out

**Tuesday, July 25th, 2023**

8:00 AM Wake Up

8:30 AM Breakfast at Camp

9:00 AM Prep for long run & Make Lunches

10:00 AM Depart for long run

10:30 AM Start Long run

12:30 PM Arrive back at camp, Lunch, Free time

2:30 PM Intro Scavenger Hunt Competition

3:00 PM Team Scavenger Hunt

5:00 PM Free Time

6:00 PM Dinner in outdoor pavilion

8:00 PM Movie- The Long Green Line

10:00 PM Prep for bed

10:30 PM Lights Out

**Wednesday, July 26th, 2023**

8:30 AM Wake Up

9:00 AM Breakfast & Make Lunches

9:30 AM Intro Team Competition Day

10:00 AM Team Competitions (Point System Development & Tracking)

12:30 PM Lunch

1:00 PM Free Time

2:00 PM Resume Team Competitions

4:30 Team Relay Race around farm

5:30 Free Time

6:00 PM Dinner in outdoor pavilion

6:30 PM Intro to Talent Show Activity  
-Work on skits

8:00 PM Talent Shows  
-Awards

10:00 PM Lights Out

**Thursday, July 27th, 2023**

7:30 AM Wake Up

8:00 AM Breakfast

8:30 AM Pack and Clean Up, Pack lunch

11:30 AM Depart Hydrangea Farm

1:30 PM Arrive Back At Clackamas High School

**2023-2024 ORGANIZATIONAL RESOLUTION FOR THE  
REQUIRED DESIGNATIONS, AUTHORIZATIONS AND  
APPOINTMENTS**

**ACTION**  
Agenda Item #2  
June 22, 2023

**SUPERINTENDENT'S RECOMMENDATION:**

Recommend approval of the designations, authorizations, and appointments as identified in items A. through I. on the attached Organizational Resolution for the Required Designations, Authorizations, and Appointments for Fiscal Year 2023-24.

- A. Chief Administrative Officers and District Clerk (ORS 332.515)
- B. Budget Officer (ORS 294.331)
- C. Deputy Clerk
- D. Custodian of Funds and Established Depositories for School Funds (ORS 328.441, ORS 294.805 to ORS 294.895 and ORS 328.445)
- E. Authority to Invest Funds (ORS 294.035) and (ORS 294.810, 294.815)
- F. Auditors (ORS 297.405, 327.137 and 328.465)
- G. Designate Official Publications
- H. Contract Signers (ORS 279A.075 and 332.075(3))
- I. Legal Counsel

**ORIGINATED BY:**

This is an annual agenda item, required to make needed designations, authorizations, and appointments.

**ATTACHMENTS:**

Organizational Resolution for the Required Designations, Authorizations, and Appointments for Fiscal Year 2023-2024

**PRESENTER / STAFF CONTACT:**

Matthew J. Makara, Executive Director of Finance and Business Services

**ORGANIZATIONAL RESOLUTION FOR THE REQUIRED  
DESIGNATIONS, AUTHORIZATIONS, AND APPOINTMENTS  
FOR FISCAL YEAR  
2023-2024**

**WHEREAS:** BE IT RESOLVED, the Board of Directors of the North Clackamas School District approves the designations, authorizations and appointments as recommended in items A. through I.

**A. Chief Administrative Officers and District Clerk (ORS 332.515)**

- a. Dr. Shay James, Superintendent, shall be the Chief Administrative Officer and District Clerk of the Board of Directors with designated powers as stated in Board Policy, including administration of all local, state and federal funds and programs.

**B. Budget Officer (ORS 294.331)**

- a. Mr. Matthew J. Makara, Executive Director of Finance and Business Services, shall be the Budget Officer.

**C. Deputy Clerk**

- a. Mr. Matthew J. Makara, Executive Director of Finance and Business Services, shall be the Deputy Clerk.

**D. Custodian of Funds and Established Depositories for School Funds (ORS 328.441, ORS 294.805 to ORS 294.895 and ORS 328.445)**

- a. Designate the depositories for school funds to be qualified depositories for public funds as approved by the Oregon State Treasury under ORS 295.002.
- b. Designate the Superintendent (Dr. Shay James) and Executive Director of Finance and Business Services (Mr. Matthew J. Makara) as custodian of funds and authorized to sign checks. Also, Chief of Staff (Ms. Tiffany Shireman) and Assistant Superintendent of Operations (Ms. Cindy Detchon) are authorized to sign checks.
- c. Authorize facsimile signatures for all checks.
- d. Checks of \$50,000 and over require original signatures on a copy of the check (one for \$50,000 to \$99,999 and two for \$100,000 and over).

**E. Authority to Invest Funds (ORS 294.035) and (ORS 294.810, 294.815)**

- a. Authorize the State of Oregon Local Government Investment Pool as an investing agent for the North Clackamas School District No. 12, Clackamas County, Oregon.
- b. Authorize Superintendent (Dr. Shay James) and Executive Director of Finance and Business Services (Mr. Matthew J. Makara) to invest funds in accordance with District policy.

**F. Auditors (ORS 297.405, 327.137 and 328.465)**

- a. Designate Pauly Rogers & Co. as the independent audit firm for the North Clackamas School District.

**G. Designate Official Publications**

- a. Designate the Clackamas Review as the official newspaper for the North Clackamas School District for the 2023-2024 school year.

**H. Contract Signers (ORS 279A.075 and 332.075(3))**

- a. Designate the Assistant Superintendent of Operations (Ms. Cindy Detchon), Executive Director of Finance and Business Services (Mr. Matthew J. Makara) and Director of Business Operations (Ms. Gwen Chapman) authority to enter into contracts.

**I. Legal Counsel**

- a. Designate Miller Nash LLP as the legal counsel firm for the North Clackamas School District.

Approved this 22nd day of June, 2023.

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Mitzi Bauer, Board of Directors Chair

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Shay James, Superintendent/Clerk

## COMPREHENSIVE SEXUALITY EDUCATION PLAN

**ACTION**  
Agenda Item #3  
June 22, 2023

### **SUPERINTENDENT'S RECOMMENDATION:**

Approval of the District's Comprehensive Sexuality Education Plan.

### **REASON FOR BOARD CONSIDERATION:**

The Oregon State Board of Education states that: *each school district board shall provide an age- appropriate, comprehensive plan of instruction focusing on human sexuality education, HIV/AIDS and sexually transmitted infections and disease prevention in elementary and secondary schools as an integral part of the health education.* This Comprehensive Sexuality Education Plan (CSEP) includes the relevant Health legislation and methods NSCD will use to meet all health education requirements.

### **BUDGET IMPACT/SOURCE OF FUNDS:**

No budget impact.

### **BACKGROUND:**

In 2009, the Oregon Legislature passed ORS 336-455 requiring school districts to provide human sexuality education courses in all public elementary and secondary schools as part of health education curriculum. Since that time, Comprehensive Sexuality Education Plans have been required, and subsequently need to be reviewed every two years.

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

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

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

- ORS 339.351-364 (Harassment, Bullying, Cyber-bullying and Intimidation),
- OAR 581-022-0413 (Prevention Education in Drugs and Alcohol),
- OAR 581-022-1510 (Comprehensive Guidance and Counseling),
- SB 79 (CPR Instruction for grades 7-12).
- HB 3294 (The Menstrual Dignity Act, 2021)
- Supporting Gender Expansive Students: Guidance for Schools (2023)

**COMPREHENSIVE SEXUALITY EDUCATION PLAN:**

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

The Comprehensive Sexuality Education Plan provided here for review emphasizes abstinence, but not to the exclusion of a contraceptive skills-based education. The human sexuality information provided is comprehensive, complete, balanced, medically accurate, age-appropriate, not fear or shame-based, and inclusive as required by Oregon Department of Education (Oregon Administrative Rule 581-022-2050).

The ODE provides content standards addressing human sexuality in grade level bands (Grades K-2, 3-5, 6-8, 9-12). In North Clackamas, we have separated the grade bands into standards per individual grade level. Each grade level includes an introduction summarizing essential information for teachers and parents and includes the opportunity to view materials prior to instruction.

The NCS D Comprehensive Sexuality Education Plan 2023-2025 (Draft) follows the adopted plan from May 2019. Revisions were made to reflect the input from our community including clarified course descriptions, the opt out process, and frequently asked questions.

**ATTACHMENTS:**

- [NCS D Comprehensive Sexuality Education Plan](#)

**PRESENTER / STAFF CONTACT:**

Tammy O'Neill, Executive Director of Teaching, Learning & Professional Development  
Laurie Meisner, Associate Director of Teaching, Learning & Professional Development

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



12400 SE Freeman Way  
Milwaukie, Oregon 97222  
<https://www.nclack.k12.or.us>

Presented to NCSD School Board June, 8 2023

# TABLE OF CONTENTS

<a href="#"><u>INTRODUCTION</u></a> .....	2
<a href="#"><u>STATE OF OREGON LEGISLATION REGARDING COMPREHENSIVE SEXUALITY EDUCATION</u></a> .....	9
<a href="#"><u>NCSD IGAI POLICY: HUMAN SEXUALITY, HIV/AIDS, SEXUALLY TRANSMITTED INFECTIONS, HEALTH EDUCATION GUIDELINES</u></a> .....	15
<a href="#"><u>NCSD COURSE DESCRIPTIONS WITH ODE HEALTH SEXUALITY EDUCATION STANDARDS</u></a> .....	20
<a href="#"><u>COMMUNICATION AND GUIDELINES FOR OPT-OUT</u></a> .....	44
<a href="#"><u>GUIDELINES FOR PARENT/COMMUNITY INVOLVEMENT</u></a> .....	46
<a href="#"><u>PROFESSIONAL LEARNING FOR INDIVIDUALS WHO WILL BE TEACHING COMPREHENSIVE SEXUALITY EDUCATION</u></a> .....	47

## APPENDICES

<a href="#"><u>APPENDIX A: ODE SEXUALITY EDUCATION FREQUENTLY ASKED QUESTIONS</u></a> .....	52
<a href="#"><u>APPENDIX B: NCSD SEXUALITY EDUCATION FREQUENTLY ASKED QUESTIONS</u></a> .....	57
<a href="#"><u>APPENDIX C: SEXUALITY EDUCATION INFORMATIONAL SHEETS</u></a> .....	59
<a href="#"><u>APPENDIX D: NCSD CSEP RENEWAL AND REVISION ADVISORY COMMITTEE</u></a> .....	66

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# INTRODUCTION

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# INTRODUCTION

North Clackamas Schools lead students toward graduation, empowering and inspiring them to strengthen the quality of life in our local and global communities. The decisions students make regarding their personal health will either support or hinder their ability to graduate prepared for the demands of college, career, and life. Health education is a component of a well rounded education. As each student shapes their own personal values and beliefs about healthy behaviors, the role of public schools in Oregon is to provide medically accurate and balanced information that is age-appropriate, and inclusive.

The Human Sexuality Education Law (2009); the Healthy Teen Relationship Act (2013); and, the Child Sexual Abuse Prevention Law (2015) collectively contribute to the Oregon Department of Education's Comprehensive Sexuality Education policy framework. Approved by the State Board of Education in 2016, the Health Education Standards provide consistency in what is taught to students across Oregon to ensure equity in achievement and health.

The state health standards expand on the required knowledge and skills related to comprehensive sexuality education. They expand the notion of what sexual health is, treating sexuality as "a multidimensional process, intimately linked to the basic human needs of being liked and accepted, displaying and receiving affection, feeling valued and attractive, and sharing thoughts and feelings."<sup>1</sup> Thus, the standards cover broad areas including body image, media literacy, gender roles, relationships, and communication. Building on the most current research and the National Health Education Standards<sup>2</sup>, they do not promote sexuality or impose a set of values, but, rather, empower students to recognize, communicate, and advocate for their own health and boundaries. Many research studies have shown that this comprehensive approach works to delay sexual initiation, prevent unintended pregnancies, promote health, and reduce sexual violence and harassment.<sup>3,4</sup>

Each school district in Oregon is responsible for developing a Comprehensive Sexual Education Plan (CSEP) as a part of the Kindergarten through 12th grade Health instructional program. The CSEP is approved by each school district's local school board prior to implementation.

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

- SB 856 (Sex Abuse Prevention Instruction),
- SB 790 (Domestic Violence Education),

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<sup>1</sup> Blum RW. "Sexual health contraceptive needs of adolescents with chronic conditions." *Arch Pediatric Adolescent Med.* 151: 290-297

<sup>2</sup> National Health Education Standards, <https://www.cdc.gov/healthyschools/sher/standards/index.htm>

<sup>3</sup> Kohler et al. "Abstinence-only and Comprehensive Sex Education and the Initiation of Sexual Activity" *Journal of Adolescent Health*, 42(4): 344-351.

<sup>4</sup> <http://www.advocatesforyouth.org/publications/publications-a-z/1487-publications>

- ORS 336.455 (Human Sexuality Education K-12),
- OAR 581-022-1140 (Equal Educational Opportunities),
- OAR 581-022-1440 (Human Sexuality Education),
- OAR 581-022-1210 (District Curriculum, instruction of infectious diseases, including HIV/AIDs and Hepatitis B/C).

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

- ORS 339.351-364 (Harassment, Bullying, Cyber-bullying and Intimidation),
- OAR 581-022-0413 (Prevention Education in Drugs and Alcohol),
- OAR 581-022-1510 (Comprehensive Guidance and Counseling),
- SB 79 (CPR Instruction for grades 7-12).
- HB 3294 (Menstrual Dignity Act)

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

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

Each grade level states specific content standards regarding human sexuality from the Oregon Department of Education. Each grade level includes an introduction summarizing essential information for teachers and parents, which includes the opportunity to view materials prior to instruction and next steps.

The Oregon Department of Education (ODE) conducted an instructional materials adoption for Health education in 2008. Following that, in 2009, the state legislature passed ORS 336.455, requiring school districts to provide human sexuality education courses in all public elementary and secondary schools as part of the health education curriculum. NCSD elementary schools began using "Healthy Kids" from ODE as well as an elementary text from McGraw-Hill that included teacher resources for HIV/AIDS and Drug Education. NCSD secondary schools had been using an NCSD publication called "HIV/AIDS".

In 2012, ODE revised and updated the health standards to align with student abuse reporting procedures. With the addition of new health legislation in 2013, OAR 581-022-1440, components to Human Sexuality Education were clarified to include the following:

- (1)(b) Program is "**balanced**," which means instruction that provides information with the understanding of, and strength of the preponderance of evidence.

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

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

Also in 2015, the National Health Education Standards were revised from their 1995 standards. Some of the changes included the addition of one more standard (from 7 to 8 standards), revision of specific grade level bands, revisions of performance indicators, a new chapter on equity and access for all students, and a new chapter on student assessment. This national work impacted ODE, and in 2016 they adopted new health standards for the state of Oregon.

In early 2016, NCSD conducted a curriculum renewal process to replace outdated materials in order to comply with the national and state legislation. Three subcommittees made up of teachers, administrators, parents, guardians and community members were created at the elementary, middle, and high school levels. Subcommittees reviewed the health standards and updated the materials to match the current legislation. The secondary committee identified new curriculum materials for implementation in the fall of 2016. A community forum was held in order to inform parents about the health standards and new curriculum. Parents were able to view the materials and provide feedback. Following the meeting, the feedback was used to revise the

proposal. The school board approved the purchase of an online curriculum for middle and high school students that included a 2:1 device ratio. Middle school students can utilize the digital interface and texts/resources from “Teen Health” and high school students can utilize the digital interface and texts/resources from “Glencoe Health.” A waiver was granted to NCSD to delay an elementary materials purchase until the 2018-19 school year.

In January 2019, a committee was gathered to identify additional materials to be used at the elementary level. The committee recommended new resources from The Great Body Shop, and continued use of Second Step by counselors. The recommendation to purchase materials was presented to the School Board in May 2019. The 2019-2021 CSEP was adopted by the NCSD School Board May 23, 2019.

In April 2021, a few revisions were made to the 2019-21 document to create the draft 2021-23 NCSD Comprehensive Sexuality Education Plan to be presented to the School Board on May 12, 2021 for approval. Most of these revisions came from updates in communication strategies along with some minor revisions to update course descriptions. The resource [My Future, My Choice](#) (Oregon Department of Human Services for grades 7 and 8) was added to reflect instructional practice. The High School course description now includes specific lessons from [Learning for Justice](#) (formerly Teaching for Tolerance). This HS resource fills a gap not provided by the text and aligns to the use of Learning for Justice in HS Social Studies classrooms.

Again, in February 2023, minor revisions were made to the 2021-23 document to create the draft 2023-25 NCSD Comprehensive Sexuality Education Plan to be presented to the School Board in June 2023 for approval. Most of these revisions came from the organization of the CSEP for readability, updates in communication strategies with families along with some minor revisions to update course descriptions. In 2021, the State of Oregon passed HB 3294 Menstrual Dignity Act and released the resource [Menstrual Dignity for Students Toolkit](#) in November 2022. This resource was added to reflect instructional practice already in alignment with the components to Human Sexuality Education referenced above.

Guiding the work to be done in instruction are the policies put forth as well as a vision for Comprehensive Sexuality Education programs. The following documents from the ODE’s Sexual Abuse Prevention Advisory Group 2015-16 (Vison) and the Oregon Attorney General’s Sexual Assault Task Force (SATF) and Oregon Department of Human Services: Children, Adults, and Families Division describe the importance of integrating prevention into instruction and illustrate the intersections of all the legislation and instruction/content.

#### **Vision (SB 856):**

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

Trauma Informed

Culturally Responsive

## Principles of Effective Prevention

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

### Definitions<sup>5</sup>

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

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

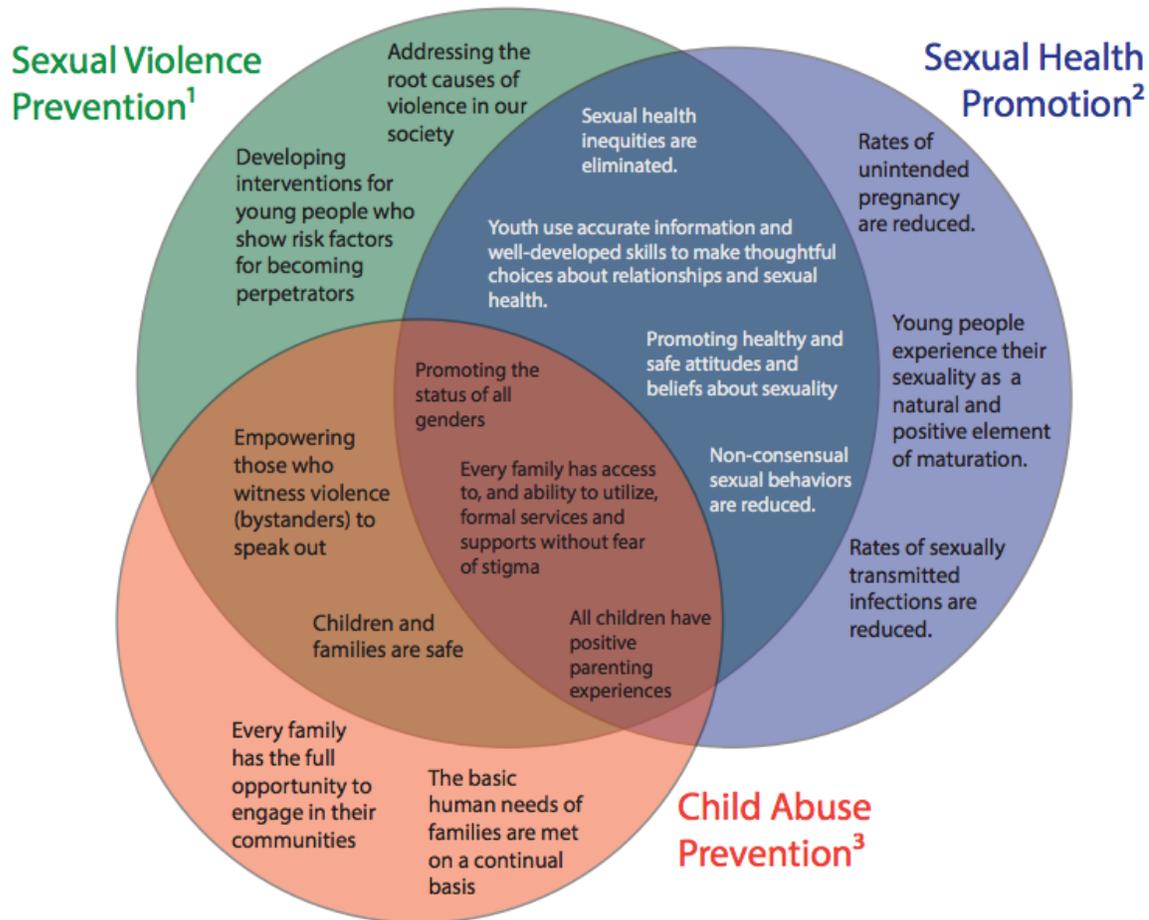
Trauma informed educators recognize the impact of past and current traumatic stress on community members including; children, caregivers, and school staff. They may act in collaboration with other school staff and community programs, using the best available science to facilitate and support the resiliency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

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



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

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



<p><b>Healthy Teen Relationships Act</b> (House Bill 4077)</p>	<p>Requires schools to incorporate age-appropriate education into new or existing training programs in grades 7-12 about teen dating violence and domestic violence, with a focus on promoting healthy relationships.</p>
<p><b>Erin's Law: Child Sex Abuse Prevention</b> (Senate Bill 856)</p>	<p>Requires every school district board to adopt a developmentally appropriate and culturally sensitive child sexual abuse prevention instructional program for students K-12 with a minimum of four instructional sessions per year, as well as professional training for school personnel.</p>
<p><b>Human Sexuality Education</b> (OAR Rule 581-022-1440)</p>	<p>Requires that each school teach comprehensive, age appropriate, medically accurate sexuality education. In addition to sex education topics, this law requires instruction of child abuse prevention, healthy relationships, and goal setting.</p>

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1. Oregon, The Oregon Attorney General's Sexual Assault Task Force. (2006). Recommendations to Prevent Sexual Violence in Oregon: A Plan. <https://oregonsatf.org/wp-content/uploads/2016/12/svpplow.pdf>

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

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

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# STATE OF OREGON LEGISLATION REGARDING COMPREHENSIVE SEXUALITY EDUCATION

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## Health and Sexuality Education Standards in Oregon

The Human Sexuality Education Law (2009); the Healthy Teen Relationship Act (2013); and, the Child Sexual Abuse Prevention Law (2015) collectively contribute to the Oregon Department of Education's Comprehensive Sexuality Education policy framework. Approved by the State Board of Education in 2016, the Health Education Standards provide consistency in what is taught to students across Oregon to ensure equity in achievement and health.

### Comprehensive Sexuality Education

The new Standards expand on the required knowledge and skills related to *comprehensive sexuality education*. They expand the notion of what sexual health is, treating sexuality as "a multidimensional process, intimately linked to the basic human needs of being liked and accepted, displaying and receiving affection, feeling valued and attractive, and sharing thoughts and feelings."<sup>1</sup> Thus, the standards cover broad areas including body image, media literacy, gender roles, relationships, and communication.

Building on the most current research and the National Health Education Standards<sup>2</sup>, they do not promote sexuality or impose a set of values, but, rather, empower students to recognize, communicate, and advocate for their own health and boundaries. Many research studies have shown that this *comprehensive* approach works to delay sexual initiation, prevent unintended pregnancies, promote health, and reduce sexual violence and harassment<sup>3,4</sup>. Although comprehensive sexuality education instruction is a challenge, it is required to replace the outdated model of abstinence-only education, which places young people at increased likelihood of pregnancy and STIs once they do become sexually active<sup>5</sup>.

**For additional resources, visit:**

<http://www.oregon.gov/ode/>  
<http://www.oregon.gov/oha/PH/HealthyPeopleFamilies/Youth/YouthSexualHealth/>  
<http://oregonsatf.org/>

<sup>1</sup> Blum RW. "Sexual health contraceptive needs of adolescents with chronic conditions." *Arch Pediatric Adolescent Med.* 151: 290–297

<sup>2</sup> National Health Education Standards, <https://www.cdc.gov/healthyschools/sher/standards/index.htm>

<sup>3</sup> Kohler et al. "Abstinence-only and Comprehensive Sex Education and the Initiation of Sexual Activity" *Journal of Adolescent Health*, 42(4): 344-351.

<sup>4</sup> <http://www.advocatesforyouth.org/publications/publications-a-z/1487-publications>

<sup>5</sup> Santelli, JS; 2017 "Abstinence Only Until Marriage: an updated review of US policies and programs"

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**Age-appropriate** means curricula designed to teach concepts, information, and skills based on the social, cognitive, emotional, experience and developmental level of students.

**Culturally inclusive** means using materials and instruction strategies that respond to culturally diverse individuals, families, and communities in a respectful and effective manner.

**Medically accurate** means information that is established through the use of the scientific method. Results can be measured, quantified, and replicated to confirm accuracy, and are reported or recognized in peer-reviewed journals or other authoritative publications.

Curriculum can't be shame or fear based. **Shame or fear based** means terminology, activities, scenarios, context, language, and/or visual illustrations that are used to devalue, ignore, and/or disgrace students who have had or are having sexual relationships.

**Positive family communication and involvement** helps students learn to make responsible, respectful and healthy decisions.

**Affirmative consent** is an essential component of healthy sexual behavior. Course material shall promote positive attitudes and behaviors related to healthy relationships and encourage active student bystander behavior.

**Inclusive materials** means using language, and strategies that recognize different sexual orientations, gender identities and gender expression.

Oregon Administrative Rule (OAR)  
581-022-2050

# STATE OF OREGON LEGISLATION REGARDING COMPREHENSIVE SEXUALITY EDUCATION

**In July of 2015, the Oregon Legislature passed Senate Bill 856 which requires schools to provide student sexual abuse prevention instruction in grades Kindergarten through 12. Subsequently, the Oregon State Board of Education passed changes to Oregon Administrative Rule (OAR) 581-022-1440 (Human Sexuality Education):** *“As part of the comprehensive plan of human sexuality instruction, each school district board shall adopt a student sexual abuse prevention instructional program for students in kindergarten through grade 12 (OAR 581-022-1440).”*

This includes:

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

## Comprehensive Sexuality Education and Healthy Teen Relationship Act

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

The Human Sexuality Education Law (2009); the Healthy Teen Relationship Act (2013); and most recently, SB 856 student Sexual Abuse prevention (2015) collectively contribute to the Oregon Department of Education’s (ODE) Human Sexuality OAR and sexual health benchmarks and standards<sup>6</sup>. Aligned to national standards, Oregon’s benchmarks support health, wellbeing, and safety of students. In addition, Oregon law requires that: *Course material and instruction for all human sexuality education courses that discuss human sexuality in public elementary and secondary schools shall enhance students’ understanding of sexuality as a normal and healthy aspect of human development*<sup>7</sup>. School districts can meet new student sex abuse prevention

<sup>6</sup> Sexual Health benchmarks are part of the ODE Health Education Standards.

<sup>7</sup> ORS 336.455 and OAR 581-022-1440

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

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

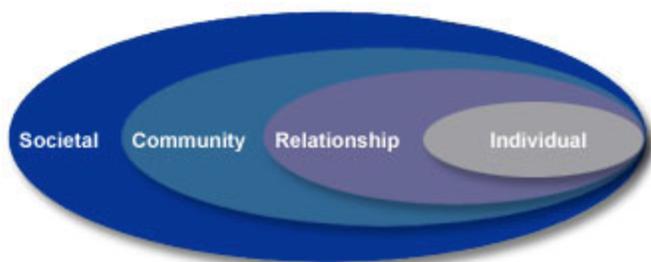
## ODE PRINCIPLES OF EFFECTIVE PREVENTION EDUCATION

In the article **What Works in Prevention: Principles of Effective Prevention Programs**<sup>8</sup>, the authors used a review-of-reviews approach across four areas (substance abuse, risky sexual behavior, school failure, and juvenile delinquency and violence) to identify characteristics consistently associated with effective prevention programs.

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

1. **Comprehensive:** Prevention strategies should include multiple types of activities, affect multiple settings, and go beyond awareness raising. Note: prevention is a component of a healthy sexuality education. There are several models of comprehensive prevention efforts, such as the Socio-ecological Model, and the Spectrum of Prevention (pictured below<sup>9</sup>).

**Socio-ecological Model**



**Spectrum of Prevention**



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

<sup>8</sup> These nine components are heavily adapted from: Nation, M., Crusto, C., Wandersman, A., Kumpfer, K.L., Seybolt, D., Morrissey-Kane, E., & Davino, K. (2003) What works in prevention: Principles of Effective Prevention Programs. *American Psychologist*, 58, 449-456.

<sup>9</sup> Images taken from <http://www.preventioninstitute.org/component/jlibrary/article/id-105/127.html> and <http://www.cdc.gov/violenceprevention/overview/social-ecologicalmodel.html>

3. **Culturally Responsive:** Prevention strategies recognize the diverse cultural characteristics of learners as assets. Culturally responsive teaching empowers students intellectually, socially, emotionally, and politically by using cultural reference to impart knowledge, skills, and attitudes.<sup>10</sup> A culturally responsive prevention strategy recognizes that each school community, including those that have been historically oppressed, have powerful, and *often unrecognized*, sources of resiliency and protective factors that must be honored through dialogue.
4. **Varied Teaching Methods:** Prevention strategies should include interactive, skills-based components, that are both culturally responsive and trauma informed. According to Erin Casey, “Factors likely to contribute to engagement and interaction include personal relevance of information or presenters, and opportunities to critically evaluate and discuss the content of the presentation.”<sup>11</sup>
5. **Sufficient Dosage:** Participants in your prevention programming need to be exposed to enough of the activities for them to have an effect. Prevention programming needs to be delivered over multiple sessions so that the programming impacts participants’ knowledge, attitudes, beliefs, behaviors, and skill acquisition. This acquisition can only happen with the context of positive relationships with school staff, which also develops and grows over time.
6. **Theory Driven:** Prevention programming should be grounded in prevention theory and research. Effective prevention programming should also be driven by research and knowledge about cultural responsiveness and trauma-informed practices.
7. **Appropriately Timed:** Program activities should be research-informed regarding the developmentally appropriate time to be introduced to specific topics.
8. **Well-trained Staff:** Programs need to be implemented by staff members who are empathetic, competent, and have received sufficient training, support, and supervision.
9. **Outcome Evaluation:** A systematic outcome evaluation is necessary to determine whether a program or strategy worked.

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<sup>10</sup> Oregon Chief Education Office, Equity lens.

<https://www.oregon.gov/highered/about/Documents/State-Goals/HECC-Equity-Lens-2017-reformat.pdf>

<sup>11</sup> Heppner, Neville, Smith, Kivlighan, & Gershuny, 1999.

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

Agencies represented on the advisory group include:

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

### **Where can I access the documents?**

Click [HERE](#) for the direct link to the ODE notice: Health and Sexuality Education Standards

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

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

The district shall provide an age appropriate, comprehensive plan of instruction focusing on human sexuality, HIV/AIDS and sexually transmitted infections and disease prevention in elementary and secondary schools as an integral part of health education and other subjects. Course material and instruction for all human sexuality education courses that discuss human sexuality shall enhance a student's understanding of sexuality as a normal and healthy aspect of human development. A part of the comprehensive plan of instruction shall provide age-appropriate student sexual abuse prevention instruction for students in kindergarten through grade 12. The district must provide a minimum of four instructional sessions annually; one instructional session is equal to one standard class period. In addition, the HIV/AIDS and sexually transmitted infections and disease prevention education and the human sexuality education comprehensive plan shall provide adequate instruction at least annually, for all students in grades 6 through 8 and at least twice during grades 9 through 12.

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

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

Parents of minor students shall be notified in advance of any human sexuality or AIDS/HIV instruction. Any parent may request that their student be excused from that portion of the instructional program under the procedures set forth in Oregon Revised Statute (ORS) 336.035(2).

The comprehensive plan of instruction shall include the following information that:

1. Promotes abstinence for school -age youth and mutually monogamous relationships with an uninfected partner for adults;
2. Allays those fears concerning HIV that are scientifically groundless;
3. Is balanced and medically accurate;

4. Provides balanced, accurate information and skills-based instruction on risks and benefits of contraceptives, condoms and other disease reduction measures;
5. Discusses responsible sexual behaviors and hygienic practices which may reduce or eliminate unintended pregnancy, exposure to HIV, hepatitis B/C and other sexually transmitted infections and diseases;
6. Stresses the risks of behaviors such as the sharing of needles or syringes for injecting illegal drugs and controlled substances;
7. Discusses the characteristics of the emotional, physical and psychological aspects of a healthy relationship;
8. Discusses the benefits of delaying pregnancy beyond the adolescent years as a means to better ensure a healthy future for parents and their children. The student shall be provided with statistics based on the latest medical information regarding both the health benefits and the possible side effects of all forms of contraceptives including the success and failure rates for prevention of pregnancy, sexually transmitted infections and diseases;
9. Stresses that HIV/STDs and hepatitis B/C can be possible hazards of sexual contact;
10. Provides students with information about Oregon laws that address young people's rights and responsibilities relating to childbearing and parenting;
11. Advises students of consequences of having sexual relations with persons younger than 18 years of age to whom they are not married;
12. Encourages family communication and involvement and helps students learn to make responsible, respectful and healthy decisions;
13. Teaches that no form of sexual expression or behavior is acceptable when it physically or emotionally harms oneself or others and that it is wrong to take advantage of or exploit another person;
14. Teaches that consent is an essential component of healthy sexual behavior. Course material shall promote positive attitudes and behaviors related to healthy relationships and sexuality, and encourage active student bystander behavior;
15. Teaches students how to identify and respond to attitudes and behaviors which contribute to sexual violence;
16. Validates the importance of one's honesty, respect for each person's dignity and well-being, and responsibility for one's actions;

17. Uses inclusive materials and strategies that recognize different sexual orientations, gender identities and gender expression;
18. Includes information about relevant community resources, how to access these resources, and the laws that protect the rights of minors to anonymously access these resources; and
19. Is culturally inclusive.

The comprehensive plan of instruction shall emphasize skills-based instruction that:

1. Assists students to develop and practice effective communication skills, development of self-esteem and ability to resist peer pressure;
2. Provides students with the opportunity to learn about and personalize peer, media, technology and community influences that both positively and negatively impact their attitudes and decisions related to healthy sexuality, relationships and sexual behaviors, including decisions to abstain from sexual intercourse;
3. Enhances students' ability to access valid health information and resources related to their sexual health;
4. Teaches how to develop and communicate sexual and reproductive boundaries;
5. Is research based, evidence based or best practice; and
6. Aligns with the Oregon Health Education Content Standards and Benchmark  
All sexuality education programs emphasize that abstinence from sexual intercourse, when practiced consistently and correctly, is the only 100 percent effective method against unintended pregnancy, sexually transmitted HIV and hepatitis B/C infection and other sexually transmitted infections and diseases. Abstinence is to be stressed, but not to the exclusion of contraceptives and condoms for preventing unintended pregnancy, HIV infection, hepatitis B/C infection and other sexually transmitted infections and diseases. Such courses are to acknowledge the value of abstinence while not devaluing or ignoring those students who have had or are having sexual relationships. Further, sexuality education materials, including instructional strategies, and activities must not, in any way use shame or fear-based tactics.

Materials and information shall be presented in a manner sensitive to the fact that there are students who have experienced, perpetrated or witnessed sexual abuse and relationship violence.

The district's health and sexuality education will provide information on menstrual health and will be inclusive and affirming of transgender, non-binary, intersex, and two spirit/indigiqueer students;

be positive and not fear- or shame-based; be age-appropriate; be medically-accurate; be culturally responsive; and be accessible for students with disabilities.

END OF POLICY

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Legal Reference(s):

- |                                       |                                  |                                  |
|---------------------------------------|----------------------------------|----------------------------------|
| <a href="#">ORS 336.035</a>           | <a href="#">ORS 339.370</a>      | <a href="#">OAR 581-022-2030</a> |
| <a href="#">ORS 336.059</a>           |                                  | <a href="#">OAR 581-022-2050</a> |
| <a href="#">ORS 336.107</a>           | <a href="#">OAR 581-021-0009</a> | <a href="#">OAR 581-022-2220</a> |
| <a href="#">ORS 336.455 - 336.474</a> | <a href="#">OAR 581-021-0593</a> |                                  |

**Cross Reference(s):**

IGBHD - State-Required Program/Activity Exemptions

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**[1]The North Clackamas K-12 Comprehensive Sexuality Education Plan of Instruction will be published on the district’s website.**

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# NCS D HEALTH

## COURSE DESCRIPTIONS with

# ODE HEALTH SEXUALITY STANDARDS

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[KINDERGARTEN](#)

[1ST GRADE](#)

[2ND GRADE](#)

[3RD GRADE](#)

[4TH GRADE](#)

[5TH GRADE](#)

[6TH GRADE](#)

[7TH & 8TH GRADE](#)

[HIGH SCHOOL HEALTH](#)

# ELEMENTARY COURSE DESCRIPTION and SEXUALITY EDUCATION STANDARDS

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

Copies of the CSEP standards, the curriculum for each grade level, and student materials are available for public review and have gone through a review process before the approval from the school board for purchasing. Materials are available at your student's school or online, so please check with your principal and/or student's teacher.

The standards that all students in grades K-5 will address from the CSEP include:

- Prevention and Control of Disease,
- Promotion of Mental, Social and Emotional Health,
- Violence Prevention, and
- Promotion of Sexual Health.

Teachers provide age-appropriate lessons on these topics. NCSD uses adopted materials from [The Great Body Shop](#) (The Children's Health Market publishing) and grade specific lessons from *Ready, Set, Respect!* ([GLSEN](#)) and *Rights, Respect, Responsibilities* ([Advocates for Youth](#)) are used to provide content. In addition, all classrooms will receive yearly instruction by licensed school counselors or student development specialists to address SB-856.

These lessons, from [Second Steps: student Protection Unit](#), support the following standards for grades K-3:

- Describe consent as it relates to personal boundaries.
- Identify parents, and other trusted adults they can tell if they are feeling uncomfortable about being touched.
- Demonstrate how to clearly say no, how to leave an uncomfortable situation, and how to identify and talk with a trusted adult if someone is touching them in an uncomfortable way.
- Discuss effective ways to communicate personal boundaries and show respect for the boundaries of others.
- Practice and use refusal skills if someone is touching you inappropriately.

These lessons, from [Second Steps: student Protection Unit](#), support the following standards for grades 4-5:

- Describe consent as it relates to personal boundaries.
- Recognize sexual harassment and sexual abuse.
- Identify trusted adult(s) to report sexual harassment or sexual abuse.
- Discuss effective ways to communicate personal boundaries and show respect for the boundaries of others.
- Demonstrate how to clearly say no, how to leave an uncomfortable situation, and how to report a situation to a trusted adult.
- Practice and use refusal skills.

For more information about curriculum standards and associated materials, please visit the [elementary curriculum webpage](#) and our [NCSD Comprehensive Sexuality Education Plan webpage](#).

Each school year, parents and guardians are encouraged to review the NCSD Comprehensive Sexuality Education Plan, become familiar with the state standards, and ask their student's teacher about Health education and the teacher/school's method for sharing information about lessons and content with families.

Although the CSEP is designed to assist and support parents and guardians as they educate their children, some parents and guardians may choose to have their children opt-out from some or all of the CSEP related content. Before making this decision, please carefully consider the educational opportunities your student may be missing by choosing to opt-out. If you choose to opt-out from any Comprehensive Sexuality Education lesson(s), your student will spend that time outside the classroom in a designated area (i.e. the media center or where there is extra room available in the school). Your student will not be penalized if you choose to opt them out.

NCSD believes that positive Health education is important for your student. We look forward to working with parents and guardians to help provide this program to our students.

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

## **KINDERGARTEN SEXUALITY EDUCATION STANDARDS**

### **KINDERGARTEN STANDARDS and PERFORMANCE INDICATORS**

(Note: this only includes standards related to the Comprehensive Sexuality Education Plan. For instance, strands related to alcohol, tobacco and drug prevention are not included. To see the full Health Standards, please visit the ODE website at: <https://www.oregon.gov/ode/educator-resources/standards/health/pages/default.aspx>)

#### **Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.**

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

HE.1.K.5 List potentially unsafe body fluids and objects to avoid.

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

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

HE.1.K.8 Recognize the importance of treating others with respect including gender expression.

HE.1.K.10 Recognize everyone has the right to say who touches their body, when and how.

HE.1.K.11 Recognize that it is never ok to touch someone, or make someone touch you if they don't want to.

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

#### **Standard 2. Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.**

HE.2.K.4 Provide examples of how friends and family influence how people think they should act on the basis of their gender.

#### **Standard 3. Students will demonstrate the ability to access valid information, products, and services to enhance health.**

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

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

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

**Standard 4. Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.**

HE.4.K.5 Discuss ways to communicate respectfully with and about people of all gender identities, gender expressions and sexual orientations.

HE.4.K.6 Discuss effective ways to communicate personal boundaries and show respect for the boundaries of others.

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

**Standard 7. Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.**

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

## **GRADE 1 SEXUALITY EDUCATION STANDARDS**

### **GRADE 1 STANDARDS and PERFORMANCE INDICATORS**

(Note: this only includes standards related to the Comprehensive Sexuality Education Plan. For instance, strands related to alcohol, tobacco and drug prevention are not included. To see the full Health Standards, please visit the ODE website at: <https://www.oregon.gov/ode/educator-resources/standards/health/pages/default.aspx>)

**Standard 1. Students will comprehend concepts related to health promotion and disease prevention to enhance health.**

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

HE.1.1.5 Describe ways to prevent communicable and non-communicable disease and understand the difference (including HIV/AIDS, and Hepatitis B and C).

HE.1.1.6 Explain that it is important to stay away from potentially unsafe body fluids and objects.

HE.1.1.7 Explain that there are many ways to express gender.

HE.1.1.8 Recognize the importance of treating others with respect including gender expression.

HE.1.1.10 Explain that everyone has the right to say who touches their body, when and how.

HE.1.1.11 Explain that it is never ok to touch someone, or make someone touch you if they don't want to.

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

**Standard 2. Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.**

HE.2.1.4 Provide examples of how friends and family influence how people think they should act on the basis of their gender.

**Standard 3. Students will demonstrate the ability to access valid information, products, and services to enhance health.**

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

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

HE.3.1.4 List who to report to at home, school and in the community if they see unsafe objects or situations.

**Standard 4. Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.**

HE.4.1.5 Discuss ways to communicate respectfully with and about people of all gender identities, gender expressions and sexual orientations.

HE.4.1.6 Identify effective ways to communicate personal boundaries and show respect for the boundaries of others.

**Standard 7. Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.**

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

## **GRADE 2 SEXUALITY EDUCATION STANDARDS**

### **GRADE 2 STANDARDS and PERFORMANCE INDICATORS**

(Note: this only includes standards related to the Comprehensive Sexuality Education Plan. For instance, strands related to alcohol, tobacco and drug prevention are not included. To see the full Health Standards, please visit the ODE website at: <https://www.oregon.gov/ode/educator-resources/standards/health/pages/default.aspx>)

**Standard 1. Students will comprehend concepts related to health promotion and disease prevention to enhance health.**

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

HE.1.2.5 Demonstrate ways to prevent communicable and non-communicable disease and understand the difference (including HIV/AIDS, and Hepatitis B and C).

HE.1.2.6 Explain why it is important to stay away from potentially unsafe body fluids and objects.

HE.1.2.7 Recognize differences and similarities of how individuals identify regarding gender.

HE.1.2.8 Recognize the importance of treating others with respect including gender expression.

HE.1.2.10 Explain that everyone has the right to say who touches their body, when and how.

HE.1.2.11 Explain that it is never ok to touch someone, or make someone touch you if they don't want to.

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

**Standard 2. Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.**

HE.2.2.4 Provide examples of how friends, family, media, society and culture influence how people think they should act on the basis of their gender.

**Standard 3. Students will demonstrate the ability to access valid information, products, and services to enhance health.**

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

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

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

**Standard 4. Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.**

HE.4.2.5 List ways to communicate respectfully with and about people of all gender identities, gender expressions and sexual orientations.

HE.4.2.6 List effective ways to communicate personal boundaries and show respect for the boundaries of others.

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

**Standard 7. Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.**

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

## GRADE 3 SEXUALITY EDUCATION STANDARDS

### GRADE 3 STANDARDS and PERFORMANCE INDICATORS

(Note: this only includes standards related to the Comprehensive Sexuality Education Plan. For instance, strands related to alcohol, tobacco and drug prevention are not included. To see the full Health Standards, please visit the ODE website at: <https://www.oregon.gov/ode/educator-resources/standards/health/pages/default.aspx>)

**Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.**

HE.1.3.6 Identify human reproductive systems including reproductive anatomy and function.

HE.1.3.7 Explain why it is important to stay away from potentially unsafe body fluids and objects.

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

HE.1.3.9 Recognize how puberty prepares human bodies for the potential to reproduce.

HE.1.3.10 Define sexual orientation.

HE.1.3.11 Recognize differences and similarities of how individuals identify regarding gender or sexual orientation.

HE.1.3.12 Recognize the importance of treating others with respect regarding gender expression and sexual orientation.

HE.1.3.14 Explain that everyone has the right to say who touches their body, when and how.

HE.1.3.15 Explain that it is never ok to touch someone or make someone touch you if they don't want to.

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

**Standard 2. Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.**

HE.2.3.6 Recognize how friends, family, media, society and culture influence how people think they should act on the basis of their gender.

HE.2.3.9 Identify potential impacts of power differences (e.g., age, status or position) as they relate to personal boundaries.

**Standard 3. Students will demonstrate the ability to access valid information, products, and services to enhance health.**

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

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

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

HE.3.3.6 Recognize sources of support, such as parents or other trusted adults they can talk to about healthy and unhealthy relationships.

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

HE.3.3.8 Recognize sources of support such as parents or other trusted adults they can tell if they are being teased, harassed or bullied based on gender identity, sexual orientation, and gender expression.

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

**Standard 4. Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.**

HE.4.3.5 Describe ways to communicate respectfully with and about people of all gender identities, gender expressions and sexual orientations.

HE.4.3.7 Identify effective ways to communicate personal boundaries and show respect for the boundaries of others.

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

**Standard 7. Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.**

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

## GRADE 4 SEXUALITY EDUCATION STANDARDS

### GRADE 4 STANDARDS and PERFORMANCE INDICATORS

(Note: this only includes standards related to the Comprehensive Sexuality Education Plan. For instance, strands related to alcohol, tobacco and drug prevention are not included. To see the full Health Standards, please visit the ODE website at: <https://www.oregon.gov/ode/educator-resources/standards/health/pages/default.aspx>

**Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.**

- HE.1.4.6 Identify human reproductive systems including reproductive anatomy and function.
- HE.1.4.7 Recognize that abstinence is the most effective method of protection from STD/HIV and pregnancy.
- HE.1.4.8 Recognize that HIV and STDs can be spread through sexual contact with someone who has HIV/STD.
- HE.1.4.9 Define sexual orientation.
- HE.1.4.10 Describe differences and similarities of how individuals identify regarding gender or sexual orientation.
- HE.1.4.11 Understand importance of treating others with respect regarding gender expression and sexual orientation.
- HE.1.4.13 Explain that everyone has the right to say who touches their body, when and how.
- HE.1.4.14 Describe why it is never ok to touch someone, or make someone touch you if they don't want to.

**Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.**

- HE.2.4.6 Describe how friends, family, media, society and culture influence how people think they should act on the basis of their gender.
- HE.2.4.9 Describe potential impacts of power differences (e.g., age, status or position) as they relate to personal boundaries.

**Standard 3. Students will demonstrate the ability to access valid information, products, and services to enhance health.**

- HE.3.4.3 Identify sources of support, such as parents or other trusted adults, to seek information about sexual and reproductive health, including pregnancy and birth.
- HE.3.4.4 Describe sources of medically-accurate information about human sexual and reproductive anatomy.
- HE.3.4.5 Identify people at home, school or in the community who can provide medically accurate information and/or support about puberty and health care practices during puberty.
- HE.3.4.6 Identify people at home, school or in the community who can provide medically accurate information and/or support about healthy sexuality, including sexual orientation and gender identity.
- HE.3.4.7 Identify sources of support, such as parents or other trusted adults they can talk to about healthy and unhealthy relationships.
- HE.3.4.8 Identify sources of support, such as parents or other trusted adults, including school staff, they can tell if they are experiencing sexual abuse.
- HE.3.4.9 Identify sources of support such as parents or other trusted adults they can tell if they are being teased, harassed or bullied based on gender identity, sexual orientation, and gender expression.
- HE.3.4.10 Identify sources of support such as parents or other trusted adults they can tell if they are being sexually harassed or abused.

**Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.**

- HE.4.4.5 Practice ways to communicate respectfully with and about people of all gender identities, gender expressions and sexual orientations.

HE.4.4.7 Describe effective ways to communicate personal boundaries and show respect for the boundaries of others.

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

**Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.**

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

## **GRADE 5 SEXUALITY EDUCATION STANDARDS**

### **GRADE 5 STANDARDS and PERFORMANCE INDICATORS**

(Note: this only includes standards related to the Comprehensive Sexuality Education Plan. For instance, strands related to alcohol, tobacco and drug prevention are not included. To see the full Health Standards, please visit the ODE website at: <https://www.oregon.gov/ode/educator-resources/standards/health/pages/default.aspx>)

**Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.**

HE.1.5.6 Discuss human reproductive systems including reproductive anatomy and function.

HE.1.5.7 Discuss how abstinence is the most effective method of protection from STD/HIV and pregnancy.

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

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

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

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

HE.1.5.12 Discuss ways of expressing gender.

HE.1.5.13 Describe the importance of treating others with respect regarding gender expression and sexual orientation.

HE.1.5.15 Explain that everyone has the right to say who touches their body, when and how.

HE.1.5.16 Discuss why it is never ok to touch someone, or make someone touch you if they don't want to.

HE.1.5.21 Practice how consent relates to personal boundaries.

**Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.**

HE.2.5.6 Provide examples of how friends, family, media, society and culture influence how people think they should act on the basis of their gender.

HE.2.5.9 Discuss potential impacts of power differences (e.g., age, status or position) as they relate to personal boundaries.

**Standard 3. Students will demonstrate the ability to access valid information, products, and services to enhance health.**

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

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

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

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

HE.3.5.7 Discuss the sources of support, such as parents or other trusted adults, they can talk to about healthy and unhealthy relationships.

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

HE.3.5.9 Discuss sources of support such as parents or other trusted adults they can tell if they are being teased, harassed or bullied based on gender identity, sexual orientation, and gender expression.

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

**Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.**

HE.4.5.5 Demonstrate ways to communicate respectfully with and about people of all gender identities, gender expressions and sexual orientations.

HE.4.5.7 Demonstrate effective ways to communicate personal boundaries and show respect for the boundaries of others.

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

**Standard 6: Students will demonstrate the ability to use goal-setting skills to enhance health.**

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

**Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.**

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

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

## GRADE 6 COURSE DESCRIPTION with SEXUALITY EDUCATION STANDARDS

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

In accordance with the requirements of the State of Oregon, the North Clackamas School District School Board has adopted a Comprehensive Sexuality Education Program. In grade 6, there is not a dedicated health class. To be in compliance with SB-856, the four student Sexual Abuse Prevention academic sessions will be taught in 6th grade science classes across the district. Topics will focus on content and skills related to the following:

- Social and Mental/Emotional Wellness (throughout the unit)
- Healthy Relationships
- Identity and Sexuality
- Consent
- STIs and HIV/AIDS
- Understanding Violence
- Abuse Prevention

NCSD recommends curriculum and instruction from the adopted textbook McGraw Hill Glencoe Teen Health with Healthy Relationships and Sexuality and specific lessons developed by the 6th grade science team aligned to the standards. Copies of the Comprehensive Sexuality Education standards, the curriculum for each grade level, textbooks, and other materials are available for public review and have gone through a review process before the approval from the school board for purchasing. Some of these materials are available at your student's school or through your student's teacher, so please check with your principal and/or student's science teacher.

At the beginning of each school year, parents and guardians will be invited to review the CSEP. At that time, you will learn when the materials will be taught and how you as a parent or guardian can reinforce the materials. You will receive a letter reminding you of the opportunity to review curriculum materials.

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

If you choose to opt out from any Comprehensive Sexuality Education lessons, your student will spend that time outside the classroom in a designated area (e.g. the media center). Your student will not be penalized if you choose to opt them out. Your student will be expected to work independently during that time.

NCSD believes that positive Health education is important for your student. We look forward to working with parents and guardians to help provide this program to our students.

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

## **GRADE 6 STANDARDS and PERFORMANCE INDICATORS**

(Note: this only includes standards related to the Comprehensive Sexuality Education Plan. For instance, strands related to alcohol, tobacco and drug prevention are not included. To see the full Health Standards, please visit the ODE website at: <https://www.oregon.gov/ode/educator-resources/standards/health/pages/default.aspx>)

### **Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.**

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

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

HE.1.6.19 Recognize that HIV and STDs can be spread through sexual contact with someone who has HIV/STD.

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

HE.1.6.21 Identify the differences between biological sex, sexual orientation, and gender identity and expression.

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

HE.1.6.23 Define gender roles, gender identity and sexual orientation across cultures.

HE.1.6.24 Identify diversity among people, including age, disability, national origin, race, ethnicity, color, marital status, biological sex, sexual orientation, gender identity and expression.

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

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

HE.1.6.30 Identify situations and behaviors that constitute bullying, sexual harassment, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence.

HE.1.6.31 List the differences between physical, verbal, relational, sexual, and dating violence.

HE.1.6.34 Identify various methods of contraception, including abstinence, condoms, and emergency contraception.

HE.1.6.35 Define how sexuality includes a multitude of sexual expressions and behaviors that are a normal part of being human.

HE.1.6.36 Define the health benefits, risks and effectiveness rates of various methods of contraception, including abstinence, condoms, and emergency contraception.

HE.1.6.37 Identify myths and facts of how STDs are transmitted and not transmitted.

HE.1.6.38 Identify ways to prevent HIV and other STDs.

HE.1.6.39 Recognize the importance of getting tested for HIV and other STDs when people are sexually active.

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

HE.1.6.41 Identify consent as a freely given yes.

HE.1.6.42 Describe how consent is a foundational principle in healthy sexuality and in violence prevention.

HE.1.6.43 Identify that no one has the right to touch anyone else without giving and receiving consent.

HE.1.6.44 Identify why a person who has been raped or sexually assaulted is not at fault.

### **Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.**

HE.2.6.11 Consider potential impacts of power differences (e.g., age, status or position) within friendships, on self and others.

HE.2.6.19 Investigate external influences that have an impact on one's attitudes about gender, sexual orientation and gender identity.

HE.2.6.20 Examine factors that may influence condom use and other safer sex decisions.  
HE.2.6.22 Investigate external influences and societal messages that impact attitudes about interpersonal violence.

**Standard 3. Students will demonstrate the ability to access valid information, products, and services to enhance health.**

HE.3.6.7 Identify sources of medically-accurate information about human sexual and reproductive anatomy.  
HE.3.6.8 Identify resources, including people at home, school or in the community who can provide medically accurate information and/or support about puberty and health care practices during puberty.  
HE.3.6.9 Identify resources, including people at home, school or in the community who can provide medically accurate information and/or support about healthy sexuality, including sexual orientation and gender identity.  
HE.3.6.11 Identify sources of support, such as parents or other trusted adults, including school staff they can tell if they are experiencing sexual abuse.  
HE.3.6.12 Identify sources of support such as parents or other trusted adults they can tell if they are being teased, harassed or bullied based on gender identity, sexual orientation, and gender expression.  
HE.3.6.13 Identify school and community resources for reporting student abuse.  
HE.3.6.14 Identify medically-accurate information about STDs and HIV transmission and prevention.  
HE.3.6.15 Identify medically-accurate resources that provide assistance around sexual health, pregnancy, and emergency contraception.  
HE.3.6.16 Identify medically-accurate sources of pregnancy-related information and support including pregnancy options, safe surrender policies and prenatal care.

**Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.**

HE.4.6.5 Identify how to communicate respectfully with and about people of all gender identities, gender expressions and sexual orientations.  
HE.4.6.9 Explain effective communication skills about the use of contraception including abstinence, condoms, and other safer sex practices.  
HE.4.6.10 Explain effective communication skills to ensure affirmative consent in all sexual relationships.  
HE.4.6.11 Explain the use of effective communication skills to reduce or eliminate risk for STDs, including HIV.

**Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.**

HE.5.6.10 Practice a decision making process to make healthy choices around sexual health.

**Standard 6: Students will demonstrate the ability to use goal-setting skills to enhance health.**

HE.6.6.9 Set a personal goal to prevent and reduce interpersonal violence (physical, verbal, emotional and sexual violence).  
HE.6.6.10 Identify a personal goal to treat your partners with dignity and respect.  
HE.6.6.11 Identify a personal goal to be treated with dignity and respect.

**Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.**

HE.7.6.12 Describe ways to manage the physical and emotional changes associated with puberty, including personal health care practices.  
HE.7.6.13 Identify the steps to correctly use a condom.  
HE.7.6.14 List criteria for evaluating the health of a relationship.

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

**Standard 8: Students will demonstrate the ability to advocate for personal, family, and community health.**

HE.8.6.8 Describe personal health practices that prevent the spread of HIV/AIDS and Hepatitis B and C.

## **GRADES 7 & 8 COURSE DESCRIPTION and SEXUALITY EDUCATION STANDARDS**

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

In accordance with the requirements of the State of Oregon, the North Clackamas School District School Board has adopted a Comprehensive Sexuality Education Program. Topics covered in Comprehensive Sexuality Education are based on the strands with standards related to:

- Social and Mental/Emotional Wellness (throughout the unit)
- STIs and HIV/AIDS Prevention
- Sexual Abuse Prevention
- Abstinence, Contraceptives, and Pregnancy Prevention
- Healthy Sexuality
- Affirming Identities
- Anatomy, Puberty, Menstruation

NCSD recommends curriculum and instruction from the adopted textbook McGraw Hill Glencoe Teen Health with Human Sexuality and specific lessons from My Future, My Choice shared by the Oregon Department of Human Services. Teachers may also use lessons from Rights, Respect, and Responsibility (Advocates for Youth Publishing) and Clackamas Women's Services. Guest speakers and community partners are an option in health classes. Copies of the Comprehensive Sexuality Education standards, the curriculum for each grade level, textbooks, and other materials are available for public review and have gone through a review process before the approval from the school board for purchasing. Some of these materials are available at your student's school or through your student's teacher, so please check with your principal and/or student's health teacher.

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

If you choose to opt out from any Comprehensive Sexuality Education lessons, your student will spend that time outside the classroom in a designated area (e.g. the media center). Your student will not be penalized if you choose to opt them out. Your student will be expected to work independently during that time.

NCSD believes that positive Health education is important for your student. We look forward to working with parents and guardians to help provide this program to our students.

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

## **GRADE 7 STANDARDS and PERFORMANCE INDICATORS**

(Note: this only includes standards related to the Comprehensive Sexuality Education Plan. For instance, strands related to alcohol, tobacco and drug prevention are not included. To see the full Health Standards, please visit the ODE website at: <https://www.oregon.gov/ode/educator-resources/standards/health/pages/default.aspx>)

### **Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.**

HE.1.7.17 Describe the human sexual and reproductive systems including body parts and their functions.

HE.1.7.19 Describe how sexual abstinence relates to pregnancy prevention.

HE.1.7.20 Define how HIV and STDs can be spread through sexual contact with someone who has HIV/STD.

HE.1.7.21 Explain health care practices related to physical changes during puberty.

HE.1.7.22 Define the differences between biological sex, sexual orientation, and gender identity and expression.

HE.1.7.23 Describe the physical, social, cognitive and emotional changes of adolescence.

HE.1.7.24 Define gender roles, gender identity and sexual orientation across cultures.

HE.1.7.25 Recognize diversity among people, including age, disability, national origin, race, ethnicity, color, marital status, biological sex, sexual orientation, gender identity and expression.

HE.1.7.26 Describe sexual intercourse and its relationship to human reproduction.

HE.1.7.28 Discuss why everyone has the right to say who touches their body and how.

HE.1.7.32 Define situations and behaviors that constitute bullying, sexual harassment, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence.

HE.1.7.33 Describe the differences between physical, verbal, relational, sexual, and dating violence.

HE.1.7.36 Define various methods of contraception, including abstinence, condoms, and emergency contraception.

HE.1.7.37 Define how sexuality includes a multitude of sexual expressions and behaviors that are a normal part of being human.

HE.1.7.38 Define the health benefits, risks and effectiveness rates of various methods of contraception, including abstinence, condoms, and emergency contraception.

HE.1.7.39 Define the myths and facts of how STDs are transmitted and not transmitted.

HE.1.7.40 Define ways to prevent HIV and other STDs.

HE.1.7.41 Describe the importance of getting tested for HIV and other STDs when people are sexually active.

HE.1.7.44 Discuss how affirmative consent mitigates confusion within a sexual relationship.

HE.1.7.45 Describe why no one has the right to touch anyone else without giving and receiving consent.

HE.1.7.46 Explain why a person who has been raped or sexually assaulted is not at fault.

HE.1.7.47 Recognize the signs and symptoms of a pregnancy.

### **Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.**

HE.2.7.11 Compare potential impacts of power differences (e.g., age, status or position) within friendships and intimate relationships, of self and others.

HE.2.7.19 Compare multiple external influences that have an impact on one's attitudes about gender, sexual orientation and gender identity.

HE.2.7.20 Compare factors that may influence condom use and other safer sex decisions.

HE.2.7.22 Compare external influences and societal messages that impact attitudes about sexual, dating, and domestic violence.

HE.2.7.23 Analyze factors that can affect the ability to give or perceive the provision of consent to sexual activity.

HE.2.7.24 Analyze influences that may have an impact on deciding whether or when to engage in sexual behaviors.

HE.2.7.25 Describe how our values impact our sexual health-related decisions.

**Standard 3. Students will demonstrate the ability to access valid information, products, and services to enhance health.**

HE.3.7.7 Describe sources of medically-accurate information about human sexual and reproductive anatomy.

HE.3.7.8 Describe medically accurate sources of information about puberty, development and sexuality.

HE.3.7.9 Describe accurate information about healthy sexuality, including sexual orientation and gender identity.

HE.3.7.11 Describe sources of support such as parents or other trusted adults they can tell if they are being teased, harassed or bullied based on gender identity, sexual orientation, and gender expression.

HE.3.7.12 Describe sources of support, such as parents, other trusted adults, and community resources, which they can go to if they are or someone they know is being sexually harassed, bullied, abused, assaulted, or stalked.

HE.3.7.13 Review school and community resources for reporting student abuse.

HE.3.7.14 Describe medically-accurate information about STDs and HIV transmission and prevention.

HE.3.7.15 Describe medically-accurate resources that provide assistance around sexual health, pregnancy, and emergency contraception.

HE.3.7.16 Describe medically-accurate sources of pregnancy-related information and support including pregnancy options, safe surrender policies and prenatal care.

**Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.**

HE.4.7.5 Practice how to communicate respectfully with and about people of all gender identities, gender expressions and sexual orientations.

HE.4.7.9 Practice the use of effective communication about the use of contraception including abstinence, condoms, and other safer sex practices.

HE.4.7.10 Practice effective communication skills to ensure affirmative consent in all sexual relationships.

HE.4.7.11 Practice the use of effective communication skills to reduce or eliminate risk for STDs, including HIV.

**Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.**

HE.5.7.10 Practice a decision making process to make healthy choices around sexual health.

**Standard 6: Students will demonstrate the ability to use goal-setting skills to enhance health.**

HE.6.7.9 Through the goal setting process, create and analyze ways to prevent and reduce interpersonal violence (physical, verbal, emotional and sexual violence).

HE.6.7.10 Set a personal goal to treat your partners with dignity and respect.

HE.6.7.11 Set a personal goal to be treated with dignity and respect.

**Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.**

HE.7.7.10 Describe ways to treat yourself and others with dignity and respect, with regard to gender, gender identity, and sexual orientation.

HE.7.7.13 Describe the steps to correctly use a condom.

HE.7.7.14 Assess the criteria for evaluating the health of a relationship.

HE.7.7.15 Practice ways to treat your friends, family and partner with dignity and respect.

**Standard 8: Students will demonstrate the ability to advocate for personal, family, and community health.**

HE.8.7.9 Discuss personal health practices that prevent the spread of HIV/AIDS and Hepatitis B and C.

HE.8.7.10 Identify how informed personal decision-making around sexual activity as it relates to pregnancy, reproduction, and preventing STD/STI's.

**GRADE 8 STANDARDS and PERFORMANCE INDICATORS**

(Note: this only includes standards related to the Comprehensive Sexuality Education Plan. For instance, strands related to alcohol, tobacco and drug prevention are not included. To see the full Health Standards, please visit the ODE website at: <https://www.oregon.gov/ode/educator-resources/standards/health/pages/default.aspx>)

**Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.**

HE.1.8.17 Explain the human sexual and reproductive systems including body parts and their functions.

HE.1.8.19 Explain how sexual abstinence relates to pregnancy prevention.

HE.1.8.20 Explain how HIV and STDs can be spread through sexual contact with someone who has HIV/STD.

HE.1.8.21 Explain the health care practices related to physical changes during puberty.

HE.1.8.22 Explain the differences biological sex, sexual orientation, and gender identity and expression.

HE.1.8.23 Explain the physical, social, cognitive and emotional changes of adolescence.

HE.1.8.24 Explain gender roles, gender identity and sexual orientation across cultures.

HE.1.8.25 Examine diversity among people, including age, disability, national origin, race, ethnicity, color, marital status, biological sex, sexual orientation, gender identity and expression.

HE.1.8.26 Explain sexual intercourse and its relationship to human reproduction.

HE.1.8.28 Explain why everyone has the right to say who touches their body and how.

HE.1.8.32 Discuss situations and behaviors that constitute bullying, sexual harassment, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence.

HE.1.8.33 Compare and contrast the differences between physical, verbal, relational, sexual, and dating violence.

HE.1.8.36 Explain various methods of contraception, including abstinence, condoms, and emergency contraception.

HE.1.8.37 Explain that sexuality includes a multitude of sexual expressions and behaviors that are a normal part of being human.

HE.1.8.38 Explain the health benefits, risks and effectiveness rates of various methods of contraception, including abstinence, condoms, and emergency contraception.

HE.1.8.39 Explain the differences between the myths and facts of how STDs are transmitted and not transmitted.

HE.1.8.40 Explain ways to prevent HIV and other STDs.

HE.1.8.41 List the reasons why it is important to get tested for HIV and other STDs when people are sexually active.

HE.1.8.44 Discuss consent as a freely given yes.

HE.1.8.45 Demonstrate an understanding of how affirmative consent mitigates the impact and consequences of sexual pressure.

HE.1.8.46 Discuss that no one has the right to touch anyone else without giving and receiving consent.

HE.1.8.47 Discuss why a person who has been raped or sexually assaulted is not at fault.

HE.1.8.48 Describe the signs, symptoms, and stages of a pregnancy.

HE.1.8.49 Identify physical, emotional, and social effects of sexual activity.

HE.1.8.50 Discuss the impacts of bullying, sexual harassment, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence.

**Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.**

HE.2.8.11 Assess potential impacts of power differences (e.g., age, status or position) within intimate relationships, of self and others.

HE.2.8.19 Assess external influences that have an impact on one's attitudes about gender, sexual orientation and gender identity.

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

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

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

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

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

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

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

**Standard 3. Students will demonstrate the ability to access valid information, products, and services to enhance health.**

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

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

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

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

HE.3.8.12 Assess sources of support, such as parents, other trusted adults, and community resources, which they can go to if they are or someone they know is being sexually harassed, bullied, abused, assaulted, or stalked.

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

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

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

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

**Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.**

HE.4.8.5 Demonstrate how to communicate respectfully with and about people of all gender identities, gender expressions and sexual orientations.

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

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

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

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

HE.4.8.14 Demonstrate effective strategies to avoid or end an unhealthy relationship.

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

**Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.**

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

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

**Standard 6: Students will demonstrate the ability to use goal-setting skills to enhance health.**

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

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

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

HE.6.8.12 Discuss a personal goal to be treated with dignity and respect.

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

**Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.**

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

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

HE.7.8.15 Assess ways to treat your partner with dignity and respect.

**Standard 8: Students will demonstrate the ability to advocate for personal, family, and community health.**

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

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

## HIGH SCHOOL HEALTH COURSE DESCRIPTION

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

In accordance with the requirements of the State of Oregon, the North Clackamas School District School Board has adopted a Comprehensive Sexuality Education Program. Topics covered in Comprehensive Sexuality Education are based on the strands with standards related to:

- Growth and Development
- Anatomy, Puberty, Menstruation
- Healthy Sexuality
- STIs and HIV/AIDS Prevention
- Sexual Abuse Prevention
- Abstinence, Contraceptives, and Pregnancy Prevention

NCSD recommends curriculum and instruction from the adopted textbook [McGraw Hill Glencoe Health and Healthy Sexuality](#). High School teachers may provide specific lessons from [Learning for Justice](#) (formerly Teaching for Tolerance). Guest speakers and community partners are an option in health classes. NCSD schools frequently connect with staff from school-based Health Clinics and community organizations like [Clackamas Women's Services](#). Copies of the Comprehensive Sexuality Education standards, the curriculum for each grade level, textbooks, and other materials are available for public review and have gone through a review process before the approval from the school board for purchasing. Some of these materials are available at your student's school or through your student's teacher, so please check with your principal and/or student's health teacher.

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

If you choose to opt out from any Comprehensive Sexuality Education lessons, your student will spend that time outside the classroom in a designated area (e.g. the media center). Your student will not be penalized if you choose to opt them out. Your student will be expected to work independently during that time.

NCSD believes that positive Health education is important for your student. We look forward to working with parents and guardians to help provide this program to our students.

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

## HIGH SCHOOL STANDARDS and PERFORMANCE INDICATORS

(Note: this only includes standards related to the Comprehensive Sexuality Education Plan. For instance, strands related to alcohol, tobacco and drug prevention are not included. To see the full Health Standards, please visit the ODE website at: <https://www.oregon.gov/ode/educator-resources/standards/health/pages/default.aspx>)

### **Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.**

- HE.1.12.13 Compare and contrast human sexual and reproductive systems including body parts and their functions.
- HE.1.12.14 Define contraceptive methods including emergency contraception and describe their mechanism of action.
- HE.1.12.15 Identify health care practices related to physical changes during adolescent development and early adulthood.
- HE.1.12.16 Differentiate between biological sex, sexual orientation, sexual identity and sexual behavior, gender identity and gender expression.
- HE. 1.12.18 Describe the intersection of varied identities, including gender, race, ethnicity, sexual orientation, ability, etc.
- HE.1.12.19 Discuss the importance of treating people with HIV or other STDs with respect.
- HE.1.12.20 Describe the human sexual response cycle, including the role hormones play.
- HE.1.12.21 Describe the laws related to sexual health care services, including confidential testing and treatment; and disclosure of STD status.
- HE.1.12.22 Describe the characteristics of healthy and unhealthy romantic and/or sexual relationships.
- HE.1.12.23 Explain the characteristics of a healthy relationship that is free from threats, coercion or abuse.
- HE.1.12.24 Express that everyone has the right to say who touches their body and how.
- HE.1.12.25 Express that it is never ok to touch someone, or make someone touch you if they don't want to.
- HE.1.12.26 Describe a range of ways to express affection within healthy relationships.
- HE.1.12.27 Discuss the impacts of bullying, sexual harassment, sexual abuse, sexual assault, incest, rape, stalking, and dating violence.
- HE.1.12.28 Define sexual consent and explain its implications for sexual decision-making.
- HE.1.12.30 Explain Oregon's laws related to bullying, sexual harassment, coercion, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence.
- HE.1.12.31 Identify the laws related to reproductive and sexual health care service (i.e., confidentiality, contraception, pregnancy options, safe surrender policies, prenatal care).
- HE.1.12.32 Explain Oregon laws relating to minors' rights around contraception pregnancy, adoption, abortion and parenting.
- HE.1.12.33 Describe the importance of getting tested for HIV and other STDs when people are sexually active.
- HE.1.12.34 Explain that sexuality includes a multitude of sexual expressions and behaviors that are a normal part of being human.
- HE.1.12.35 Describe prenatal practices that can contribute to a healthy pregnancy and possible risk factors. (i.e. healthy nutrition, behaviors, etc.)
- HE.1.12.36 Define affirmative consent as a freely given enthusiastic yes.
- HE.1.12.37 Demonstrate an understanding of how affirmative consent mitigates the impact and consequences of sexual pressure.
- HE.1.12.38 Recognize that many teens successfully use condoms.
- HE.1.12.39 Discuss laws related to sex and sexual health.
- HE.1.12.40 Explain how fertilization occurs, the stages of pregnancy, and responsibility of parenting.
- HE.1.12.41 Explain the ovulation cycle and its relationship to fertilization and pregnancy.

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

**Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.**

HE.2.12.7 Analyze the influence of friends, family, media, society, and culture on the intersections of gender, sexual orientation, race, ethnicity and other identities.

HE.2.12.9 Analyze how the family influences health beliefs, behaviors and outcomes.

HE.2.12.10 Analyze potential impacts of power differences (e.g., age, status or position) within sexual relationships.

HE.2.12.11 Analyze how the perception of norms influences healthy and unhealthy behaviors.

HE.2.12.12 Analyze how personal values and beliefs influence individual health practices and behaviors.

HE.2.12.13 Analyze how public health policies and government regulations can influence health promotion and disease prevention.

HE.2.12.14 Analyze the relationship between health risk factors and the likelihood of engaging in unhealthy behaviors.

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

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

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

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

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

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

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

**Standard 3. Students will demonstrate the ability to access valid information, products, and services to enhance health.**

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

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

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

HE.3.12.8 Access reliable information and resources about healthy and unhealthy relationships, and healthy boundaries as they relate to intimacy and sexual behavior.

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

HE.3.12.10 Access resources for help if they or someone they know are being bullied or harassed, or have been sexually abused or assaulted or otherwise feel unsafe.

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

HE.3.12.12 Access medically-accurate information and resources about contraceptive methods, including abstinence, emergency contraception, and condoms.<sup>71</sup>

**Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.**

- HE.4.12.1 Practice effective and appropriate verbal and nonverbal communication skills with peers and adults to enhance health.
- HE.4.12.3 Demonstrate and/or assess refusal, negotiation, and collaboration skills to enhance health and avoid or reduce health risks.
- HE.4.12.5 Demonstrate respectful communication with and about people of all gender identities, gender expressions and sexual orientations.
- HE.4.12.6 Demonstrate communication skills that foster healthy intimate and sexual relationships and show personal boundaries and respect for the boundaries of others.
- HE.4.12.7 Demonstrate the use of effective communication about the use of contraception including abstinence, condoms, and other safer sex practices.
- HE.4.12.8 Practice effective communication skills to ensure affirmative consent in all sexual relationships.
- HE.4.12.9 Demonstrate skills to communicate decisions about whether or when to engage in sexual behaviors, and to practice safer sex, including STD and HIV prevention, and STD and HIV testing and disclosure of status.
- HE.4.12.11 Demonstrate asking for help and support, if they or someone they know is being hurt or feels unsafe in an intimate or sexual relationship.
- HE.4.12.12 Demonstrate effective strategies to avoid or end an unhealthy relationship.

**Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.**

- HE.5.12.8 Apply a decision-making process to make choices about contraception, including abstinence and condoms.
- HE.5.12.9 Model a decision making process to make healthy choices around sexual health.
- HE.5.12.10 Apply a decision making process to promote consensual sexual activity within healthy relationships.

**Standard 6: Students will demonstrate the ability to use goal-setting skills to enhance health.**

- HE.6.12.6 Set a personal goal to not have sex until you're ready.
- HE.6.12.7 Set a personal goal to use protection when sexually active.
- HE.6.12.8 Develop a personal goal to be treated with dignity and respect.
- HE.6.12.9 Develop short and long-term goals to maintain sexual health.

**Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.**

- HE.7.12.4 Demonstrate ways to treat yourself and others with dignity and respect, with regard to gender, gender identity, gender expression, and sexual orientation.
- HE.7.12.5 Explain individual responsibility for testing and informing partners about STDs and HIV status.
- HE.7.12.6 Describe how alcohol and other drug use can affect one's ability to perceive or provide consent.
- HE.7.12.7 Demonstrate on anatomical models, or list the steps for how to perform breast, testicular, and genital self-exams.
- HE.7.12.8 Demonstrate the steps to correctly use a condom and/or other barrier methods.
- HE.7.12.9 Analyze the criteria for evaluating the health of a relationship.
- HE.7.12.10 Demonstrate respect for the boundaries of others and practice affirmative consent.
- HE.7.12.11 Demonstrate how to set and respect boundaries around social media and technology use in relationships.

**Standard 8: Students will demonstrate the ability to <sup>72</sup>advocate for personal, family, and community health.**

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

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

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# COMMUNICATION AND GUIDELINES FOR OPT-OUT

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## COMMUNICATION AND GUIDELINES FOR OPT-OUT

Although Comprehensive Sexuality Education is designed to assist and support parents/guardians as they educate their children, some parents/guardians may choose to have their child not participate. Parents/guardians wanting to opt their child out of Comprehensive Sexuality Education instruction should communicate with their student's Health & Wellness Specialist/Health teacher or the building principal. In the event that a parent/guardian opts their student out of sexuality education, it is their responsibility to teach the state standards to their student.

NCSD will communicate in all district supported languages with families as follows:

Elementary
<ul style="list-style-type: none"><li>• <a href="#">Example K-5 beginning of the School Year Parent Letter</a></li><li>• <a href="#">Example quarterly Parent Letter</a></li><li>• <a href="#">Example K-5 Opt-Out Google Form</a></li><li>• <a href="#">Example K-5 Opt-Out paper form</a></li><li>• <a href="#">K-5 Health Curriculum Map</a></li><li>• <a href="#">K-5 Health Quick Reference for CSEP Materials Including The Great Body Shop and Supplemental Lessons</a></li></ul>
Middle School & High School
<ul style="list-style-type: none"><li>• <a href="#">Example Middle School Beginning of the School Year Letter</a></li><li>• <a href="#">Example Middle School Opt Out Google Form</a></li><li>• <a href="#">Example High School Beginning of the Year Letter</a></li><li>• <a href="#">Example High School Opt Out Google Form</a></li><li>• <a href="#">6th Grade Science Curriculum Guide</a> (see Health Unit)</li><li>• <a href="#">7th Grade Health Curriculum Guide</a></li><li>• <a href="#">8th Grade Health Curriculum Guide</a></li><li>• <a href="#">High School Health 1 Curriculum Guide</a></li><li>• <a href="#">High School Health 2 Curriculum Guide</a></li></ul>

## ADDITIONAL INFORMATION AND SCHOOL BASED CONTACTS

Please use the following information to find the appropriate contact for questions or concerns.

- The Health & Wellness Specialist (elementary) or Health teacher (middle/high school) at your student's school
- The Counselor at your student's school
- Principal at your student's school

Guiding questions for families:

- When/how does the communication occur for health and/or human sexuality topics that will

be taught throughout the year?

- When can I review materials and/or discuss the syllabus with my student's teacher?
- How do I work in collaboration with my student's teacher to develop an individualized learning experience?

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# GUIDELINES FOR PARENT/COMMUNITY INVOLVEMENT

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[BACK TO TABLE OF CONTENTS](#)

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

An important element in the successful implementation of a Comprehensive Sexuality Education Plan (CSEP) is parent, guardian and community input. Parents, guardians, and community members are asked to provide input on any Health/CSEP materials adoption. The district is committed to a planned approach for parent, guardian and community involvement and input.

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

- Oregon Department of Education staff members provide information sessions on Comprehensive Sexuality Education and related topics by request. North Clackamas School District has worked alongside ODE experts in previous years to create this plan.
- NCSD works to provide regular and timely communication to parents/guardians in alignment with the communication outlined in the previous section of this document.
- Each teacher of content aligned to the Comprehensive Sexuality Education Plan is asked to communicate with parents/guardians and students involved in the health program.
- The number of students at each grade level who have opted out of Comprehensive Sexual Education will also be monitored by the school Health & Wellness Specialist/Health teacher and school principal.
- Provisions must be in place for an ongoing review of local curriculum and instructional materials before they are used in the classroom in accordance with the Oregon Department of Education's cycle for the adoption of Health materials.
- Individual schools will provide opportunities to view curriculum and materials related to content in Comprehensive Sexuality Education. For additional opportunities, please contact the school.

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# PROFESSIONAL LEARNING FOR INDIVIDUALS WHO WILL BE TEACHING COMPREHENSIVE SEXUALITY EDUCATION

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## PROFESSIONAL LEARNING FOR INDIVIDUALS WHO WILL BE TEACHING COMPREHENSIVE SEXUALITY EDUCATION

North Clackamas School District provides a Comprehensive Sexuality Education program which includes instruction that:

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

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

### ELEMENTARY SCHOOL

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

- SB 856 Compliance topics around Sex Abuse Prevention Education K-5 will be taught in four sessions by school counselors.
  - School counselors will use the “student Protection Unit” provided by [Second Step](#).
  - The curriculum contains training materials that provide resources and support for teachers to recognize and respond to reports of abuse by students.
- All other topics will be taught at an age-appropriate level by a designated classroom teacher or Health & Wellness Specialist.
- Current and best practices are to teach everyone together, and not separate by gender for instruction. Learning together means that no students are forced to feel excluded because they have been placed in a space that does not reflect who they are. Please refer to the NCSD course outlines for content expectations for each grade level.
- The adopted curriculum includes [The Great Body Shop](#) . The supplemental lesson(s) are from [Rights, Respect Responsibility](#). Please refer to the NCSD course outlines for content expectations for each grade level.
- Any supplemental materials selected by the teacher to further address the health standards must be approved by the building principal.
- The Teaching, Learning & Professional Development Department will identify professional learning opportunities for teachers.
- All teachers, who are new to Comprehensive Sexuality Education, will be provided with specific training to the content and curriculum.

## SECONDARY SCHOOL

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

- All content related to Comprehensive Sexuality Education in grades 6-12 will be taught by a certified health teacher, and other trained professionals including the compliance areas around SB 856 in the four sessions required by law.
- In addition, SB 856 requires we include a parental involvement component to inform parents about student sexual abuse topics, including characteristics of offenders, “grooming” behaviors and how to discuss student sexual abuse prevention with children.
- The adopted curriculum includes Teen Health: McGraw Hill, Glencoe Health. The supplemental resources include ODE/OHA’s [My Future, My Choice](#), [Clackamas Women’s Services](#) and [Learning for Justice](#) (formerly Teaching for Tolerance).
- Any supplemental materials selected by the teacher to further address the health standards must be approved by the building principal.
- The Teaching, Learning & Professional Development Department will identify professional learning opportunities for teachers.
- All teachers, who are new to Comprehensive Sexuality Education, will be provided with specific training to the content and curriculum.

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# APPENDIX A

## ODE FREQUENTLY ASKED QUESTIONS ON SEXUALITY EDUCATION

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[BACK TO TABLE OF CONTENTS](#)



## Sexuality Education Frequently Asked Questions

### 1. What is comprehensive sexuality education?

- **Comprehensive sexuality education is a curriculum-based process of teaching and learning about the emotional, physical, and social aspects of human sexuality and healthy relationships.**
- Sexuality Education aims to equip children and young people with knowledge and skills that will empower them to:
  - Realize their health, well-being, and dignity;
  - Develop respectful social and sexual relationships;
  - Consider how their choices affect their well-being and that of others;
  - Understand and ensure the protection of their rights throughout their lives.

### 2. What does “comprehensive” mean?

- **Comprehensive means complete, medically accurate, and age-appropriate.**
- **It ensures that sexuality education teaches that many adults will have sexual relationships in their lives, and it takes learning throughout life from trusted adults to promote that these relationships are healthy, safe, and happy.**
- These key components of comprehensive sexuality education support young people to choose abstinence as the safest way to prevent STIs and unintended pregnancy. They also provide the skills and knowledge necessary to make healthy and safe decisions. Comprehensive sexuality education includes the most critical information to prevent sexual violence and promote health.

### 3. What does sexual health include?

- **Sexual health is a broad area and is about so much more than we usually consider sexuality.**
- Oregon's Health Education sexuality education standards address sexuality as a lifelong process linked to basic human needs of having friendships and relationships, displaying and receiving affection, feeling valued and loved, and sharing thoughts and feelings.
- The standards cover socio-emotional learning concepts, including:
  - body image,
  - media literacy,
  - decision-making,
  - gender roles,
  - healthy relationships,
  - communication.
- The standards cover sexual and reproductive health issues, including, but not limited to:
  - sexual and reproductive anatomy and physiology
  - puberty and menstruation
  - reproduction,
  - modern contraception,
  - sexually transmitted infections.
- Although some of these topics may be challenging to teach, they are important to support students' safety, health, and well-being.

### 4. How can I be sure this content is appropriate for my child?

- **Oregon Laws and education standards require that all content is age-appropriate. Age-appropriate means that curricula are responsive to the changing needs and capabilities of children and young people as they grow.**
- The ‘mechanics’ or ‘technique’ of reproduction is never emphasized—the focus of sexuality education is on healthy sexual behaviors and the importance of healthy and equal relationships.

- Based on the age and development of learners, sexuality education addresses relevant topics when it is most timely for their health and well-being.
- Oregon standards are grade specific and reflect the most current research and the National Health Education Standards.

## 5. Why is sexuality an appropriate topic of learning for young children?

- **‘Sexuality’ can be understood as a core dimension of being human, which includes:**
  - understanding the human body,
  - emotional connection and love,
  - gender,
  - intimacy,
  - reproduction.
- Sexuality education teaches that sexuality is a normal part of being human so that children are not ashamed or embarrassed about asking trusted adults’ questions or seeking help when needed.
- It works! Many research studies have shown that when sexuality education is taught early and consistently, it contributes to young people waiting longer to have sex, having sex less often, having fewer partners, taking fewer risks, and using condoms and contraception more often.
- Abstinence-only education does not work. Studies have also shown that abstinence-only education is ineffective for all the above outcomes.

## 6. Why does sexuality education require that gender identity and sexual orientation be taught in the classroom?

- **Teaching these topics supports inclusion and respect, prevents violence, and encourages the learning and overall health and well-being of all students—especially those who may identify as lesbian, gay, bisexual, queer, non-gender binary, or transgender (LGBTQ)— by affirming that all students are deserving of dignity, respect, and inclusion.**
- Research has shown that students who identify as lesbian, gay, bisexual, queer, non-gender binary, or transgender, (LGBTQ) experience higher rates of bullying, sexual assault, and other traumas. These student populations also experience higher rates of depression, pregnancy, suicidal ideation, and anxiety. This leads many young people to drop out or be chronically absent.
- Research has shown that individuals who bully based on others’ gender identities and/or sexual orientation are at higher risk for also perpetrating sexual violence. Education around gender identity and sexual orientation promotes acceptance and establishes norms that bullying and hate are never acceptable.
- Teaching and modeling inclusivity, appreciation of diversity, and respect inside and outside the classroom make schools and all students safer.
- Many children start expressing their gender identity in early childhood, and it is the responsibility of public education to provide safe places for all students, regardless of their gender expression or identity, so they can learn and grow.
- ODE’s *Supporting Gender Expansive Students: Guidance for Schools* and Oregon’s Equality Act reaffirm this commitment to serving all students.
- All students, no matter their sexual orientation, should be treated with dignity and respect and supported in pursuing learning, health, and academic success.

## 7. Can parents opt their children out of certain sexuality education components?

- **Sexuality Education standards are included in the mandatory Health Education Standards. Health Education is a core subject in Oregon, and every public school in Oregon requires its instruction.**
- It is important for the health and safety of children to be in school for all health education components, including socio-emotional learning, healthy relationships, and sexuality education. It is encouraged that if a parent finds a portion of the content inappropriate, they opt out only of that portion and not the entire curriculum.
- According to Oregon Law, parents can opt their children out of any or all sexuality education components. However, parents cannot opt their children out of the entire health course or program without written documentation of a religious or disability-related reason. In those cases, parents would also have to demonstrate to the school district how to comply with the Health Education Standards with alternative instruction.

## 8. How does sexuality education address socio-emotional learning and mental health concepts?

- **Sexuality education focuses on teaching the foundations of socio-emotional well-being, not just teaching about bodies and preventing STIs.**

- Social and emotional learning is the process of learning the knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions.
- Sexuality education teaches skills related to building safe and positive relationships, understanding and accepting differences, challenging bias, resolving conflict, and making healthy decisions.
- Oregon's Health Standards include instruction requirements that cover respect, healthy communication, active listening, identifying personal values, self-assertion, and goal setting.

## 9. How does sexuality education work to prevent sexual violence and assault?

- **Studies have shown that teaching sexuality education contributes to preventing sexual violence and gender based discrimination.**
- Sexuality education supports young people in recognizing what makes relationships healthy and unhealthy, and how to get help from trusted adults when they need it.
- Students learn the names of their body parts and that they have a right to decide who can and can't touch their bodies. This knowledge and set of skills empower students to communicate what makes them uncomfortable, talk about their experiences and concerns, and ask trusted adults questions without shame or embarrassment.
- Sexuality education also supports young people to build stronger and healthier relationships at all ages of development. This is done through socio-emotional skill building, such as healthy communication, respect, self-assertion, and challenging bias.

## 10. How big of a problem is sexual violence in Oregon?

- **In Oregon, over 1 in 8 students experience teen dating violence before age 18.** 1 in 2 women in Oregon experiences sexual assault in their lifetimes. Sexual violence is a huge issue in Oregon that public education has a responsibility to face.
- The rates are higher among girls and LGBTQ students.
- Despite misconceptions, boys also experience teen dating violence far too frequently: more than 1 out of 10 boys experience sexual violence before the age 18.

## 11. How big of a problem are sexually transmitted infections in Oregon?

- **Sexually transmitted infections are Oregon's most frequently reported infections and account for almost two thirds of all reportable infections.**
- Sexually transmitted infections have been increasing dramatically in the past few years in Oregon.
- Adolescents and young adults between 15-24 years of age have the highest infection rates.
- Most sexually transmitted infections, if not identified and managed appropriately, can cause serious complications. Women and newborns bear an inordinate share of complications.

## 12. Are condom demonstrations required in schools?

- **Condom education is an effective way to help youth use condoms correctly and consistently when they begin to have sex. It has been shown to be a best practice in health promotion.**
- Oregon Sexuality Education standards require students to know how to use a condom. In 6th grade, students must "identify" the steps to use a condom. In 7th, they should be able to "describe" the steps. In 8th they must "demonstrate the steps", and in 12th grade, students should be able to "demonstrate the steps to use a condom and/or other barrier methods correctly".
- The average Oregonian starts having sex around age 17—but at least 8% start having sex in 8<sup>th</sup> grade. This means that young people need the knowledge and skills to stay safe in middle school.
- Condom use among adolescents is inconsistent. Adolescents are more likely to experience condom failures, and these failures discourage condom use.
- Evidence shows that educating youth about condoms does not make them more likely to start having sex. Condom education is associated with a lower likelihood of sexual involvement.

## 13. What happens if a school district does not teach Oregon's Health & Sexuality Education standards?

- **To get public funding, schools must comply with the Oregon Department of Education's Division 22 Standards.** This includes teaching the Health Standards and performance indicators.

- If a school does not comply with the law, a parent or concerned community member could file a complaint with the school, school district, or ODE. The complaint process for each School District is available on their website and the ODE website.

**For more information, please contact:**

Oregon Department of  
Education  
Sexuality Education  
ODE.SexEd@ode.oregon.gov

## References:

1. Oregon Department of Education; 2016; Oregon Health Education Standards, <http://www.oregon.gov/ode/educator-resources/standards/health/Documents/2016ORHEStandardstable.pdf>.
2. Oregon Sexuality Education Policy, ORS 336.455; 2009: [Oregon Human Sexuality Education Law](#), OAR 581-22- 2050 [Oregon Human Sexuality Education Standards](#)
3. Oregon Department of Education; 2023; Supporting Gender Expansive Students: Guidance for Schools Students:<https://www.oregon.gov/ode/students-and-family/equity/civilrights/Pages/Gender-Identity-Guidance.aspx>
4. Espelage, D. L., Basile, K. C., De La Rue, L., & Hamburger, M. E. (2015). Longitudinal Associations among Bullying, Homophobic Teasing, and Sexual Violence Perpetration among Middle School Students. *Journal of Interpersonal Violence*, 30(14), 2541–2561. <https://doi.org/10.1177/0886260514553113>
5. United Nations Educational, Scientific, and Cultural Organization; 2018; [International technical guidance on sexuality education: an evidence-informed approach](#)
6. Oregon Youth Sexual Health Partnership, Oregon Office of the Governor; 2015; [Oregon Youth Sexual Health Plan, YSH Plan 5-year update](#), <http://www.oregon.gov/oha/PH/HealthyPeopleFamilies/Youth/YouthSexualHealth>
7. Oregon Health Authority; 2017; [Oregon Healthy Teens Survey](#) <http://www.oregon.gov/oha/ph/BirthDeathCertificates/Surveys/OregonHealthyTeens/Pages/index.aspx>
8. Oregon Safe Schools and Communities Coalition; 2017; Oregon Safe Schools Report <https://www.oregonsafeschools.org>

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# **APPENDIX B**

## **NCSD FREQUENTLY ASKED QUESTIONS ON SEXUALITY EDUCATION FOR FAMILIES**

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## Health and Comprehensive Sexuality Education Frequently Asked Questions for Families

- 1. Who determines the content of health and comprehensive sexuality education (CSEP) lessons?**

The content of NCSD health lessons is based on the Oregon Department of Education's K-12 Health Education Standards and related Legislation - The Human Sexuality Education Law (2009), the Healthy Teen Relationship Act (2013), and the Child Sexual Abuse Prevention Law (2015). In NCSD, a team of professional educators including teachers, counselors, principals, central office staff, as well as members of the community review and select materials that support the Comprehensive Sexuality Education Plan (CSEP). Materials are reviewed and updated for age-appropriateness, cultural inclusivity, trauma responsiveness, and medical accuracy.
- 2. Which curriculums are used at NCSD?**

NCSD utilizes The Great Body Shop curriculum for grades K-5, Teen Health (McGraw Hill) for grades 6-8, and Glencoe Health (McGraw Hill) for grades 9-12. Supplemental materials are needed to meet certain Oregon health standards which extend beyond national standards covered in the above texts. NCSD uses resources and materials from Clackamas Women's Services, My Future, My Choice, Rights, Respect, Responsibilities, Planned Parenthood, Inside Out, and Clackamas County Fire to cover these lessons.
- 3. How can I review the lessons before they are taught?**

For elementary students, Parents/Guardians can use the online codes provided in the monthly communication to view the student materials. Some of the materials are available on our website and others, due to copyright restrictions, are available upon request in our schools or district office. For students in middle and high school, materials are available during conferences or by request.
- 4. From whom, when, and how will I be notified prior to sexual health topics being taught?**

For elementary students, NCSD schools send out monthly communication regarding topics that will be taught the following month. Principals determine how the monthly communication will be distributed at their school. For secondary students, teachers will send a letter to families at least one month prior to the start of sexuality education instruction.
- 5. How do I opt my student out of a particular lesson or unit?**

At the elementary level, opt out forms will be sent with the monthly communication letters in which sexual health topics are taught. Principals will determine how these are disseminated in their school. Counselors will also notify families when the Child Abuse Prevention lessons (Erin's Law) are taught. If an opt-out form is received, teachers will have a conversation with a Parent/Guardian about which lesson(s) a student will opt out. Families are encouraged to preview the lessons before opting out. At the secondary level, letters are provided at the beginning of the semester.
- 6. What would my student do instead of participating in the lesson or unit?**

An alternate setting would be provided for the child to complete an alternative assignment agreed upon by the school and Parents/Guardians.

**APPENDIX C**  
**SEXUALITY EDUCATION**  
**CONCEPTS AND SKILLS**  
**BY GRADE LEVEL**  
**INFORMATIONAL SHEETS**

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[BACK TO TABLE OF CONTENTS](#)



# Oregon Comprehensive Sexuality Education: STDs

Oregon’s Health Education Standards are designed to promote healthy, safe, violence-free communities for all people. This includes promoting concepts and fostering skills for healthy individuals and healthy relationships in age-appropriate ways. By aligning the standards with best-practice and the unique policy infrastructure in Oregon (including OAR Rule 581-0221440, SB 856, and HB 4077) our state is working to address and end violence in our schools and communities.

	K	1st	2nd	3rd	4th	5th	6th	7th	8th	HS
Explain that it is important to stay away from potentially unsafe body fluids and objects.		✓	✓	✓						
Describe ways to prevent communicable and non-communicable disease (including HIV/AIDS, and Hepatitis B/C).	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Recognize that abstinence is the most effective method of protection from STD/HIV and pregnancy.					✓	✓	✓	✓	✓	
Recognize that HIV/STDs can be spread through sexual contact.					✓	✓	✓			
Explain how HIV and STDs can be spread through sexual contact with someone who has HIV/STD.								✓	✓	
Describe the importance of getting tested for HIV and other STDs when people are sexually active.							✓	✓	✓	✓
Identify myths and facts of how STDs are transmitted and not transmitted.							✓	✓	✓	
Describe medically-accurate information about STDs and HIV transmission and prevention.							✓	✓		
Practice effective communication skills about STD and HIV prevention, testing and disclosure of status.							✓	✓	✓	
Advocate for personal health practices that prevent the spread of HIV/AIDS and Hepatitis B and C.							✓	✓	✓	
Advocate for informed personal decision-making around sexual activity related to reproduction and preventing STD/STI's.								✓	✓	
Access medically-accurate info. about STDs/HIV transmission and prevention, including local testing and treatment services.									✓	✓
Develop a plan to eliminate or reduce risk for STDs, including HIV.									✓	✓
Discuss the importance of treating people with HIV or other STDs with respect.										✓
Describe laws related to sexual health care services, including confidential testing/treatment; and disclosure of STD status.										✓
Demonstrate skills to communicate decisions about whether or when to engage in sexual behaviors, and to practice safer sex, including STD/HIV prevention, testing, and disclosure of status.										✓
Explain individual responsibility for testing and informing partners about STDs and HIV status.										✓

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# Oregon Comprehensive Sexuality Education: Consent

Oregon’s Health Education Standards are designed to promote healthy, safe, violence-free communities for all people. This includes promoting concepts and fostering skills for healthy individuals and healthy relationships in age-appropriate ways. By aligning the standards with best-practice and the unique policy infrastructure in Oregon (including OAR Rule 581-0221440, SB 856, and HB 4077) our state is working to address and end violence in our schools and communities.

	K	1st	2nd	3rd	4th	5th	6th	7th	8th	HS
Recognize that everyone has the right to say who touches their body, when and how, and explain why.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Explain that it is never ok to touch someone, or make someone touch you if they don't want to, and describe why.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Define and practice consent as it relates to personal boundaries.	✓	✓	✓	✓	✓					
Identify consent as a freely given yes.							✓	✓	✓	
Describe how consent is a foundational principle in healthy sexuality and in violence prevention.							✓			
Identify that no one has the right to touch anyone else without giving and receiving consent.							✓	✓	✓	
Explain effective communication skills to ensure affirmative consent in all sexual relationships.							✓	✓	✓	
Practice a decision making process to give or receive consent.							✓	✓		
Discuss how affirmative consent mitigates confusion within a sexual relationship.								✓		
Assess a decision making process to give or receive consent for consensual sexual activity.									✓	
Practice effective communication skills to ensure affirmative consent in all sexual relationships.								✓	✓	✓
Analyze factors that can affect the ability to give or perceive the provision of consent to sexual activity.								✓	✓	✓
Demonstrate an understanding of how affirmative consent mitigates the impact and consequences of sexual pressure.									✓	✓
Define sexual consent and explain its implications for sexual decision making.										✓
Define affirmative consent as a freely given enthusiastic yes.										✓
Describe how alcohol and other drug use can affect one’s ability to perceive or provide consent.										✓
Demonstrate respect for the boundaries of others and practice affirmative consent.										✓
Apply a decision making process to promote consensual sexual activity within healthy relationships.										✓

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# Oregon Comprehensive Sexuality Education: Relationships

Oregon’s Health Education Standards are designed to promote healthy, safe, violence-free communities for all people. This includes promoting concepts and fostering skills for healthy individuals and healthy relationships in age-appropriate ways. By aligning the standards with best-practice and the unique policy infrastructure in Oregon (including OAR Rule 581-0221440, SB 856, and HB 4077) our state is working to address and end violence in our schools and communities.

	K	1st	2nd	3rd	4th	5th	6th	7th	8th	HS
Identify healthy verbal and nonverbal ways to express needs, wants, and feelings.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Describe a range of ways people express affection within various types of relationships.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Identify and demonstrate effective ways to communicate personal boundaries and show respect for the boundaries of others.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Describe the characteristics of healthy and unhealthy relationships.				✓	✓	✓	✓	✓	✓	✓
Discuss potential impacts of power differences (e.g., age, status or position) as they relate to personal boundaries in various types of relationships.				✓	✓	✓	✓	✓	✓	✓
Recognize sources of support, such as parents or other trusted adults they can talk to about healthy and unhealthy relationships.				✓	✓	✓	✓	✓	✓	✓
Practice communication skills that foster healthy relationships.				✓	✓	✓	✓	✓	✓	✓
Investigate and assess school policies and programs that promote healthy relationships and a safe and inclusive environment for all.							✓	✓		
List and practice ways to treat your friends, family and partner with dignity and respect.							✓	✓	✓	
Explain that sexuality includes a multitude of sexual expressions and behaviors that are a normal part of being human.							✓	✓	✓	✓
Analyze how family, friends, and other external influences can impact one’s beliefs about and decisions within a healthy intimate relationship.							✓	✓	✓	✓
Access reliable information and resources about healthy and unhealthy relationships, and healthy boundaries as they relate to intimacy and sexual behavior.							✓	✓	✓	✓
Explain and demonstrate effective skills to negotiate agreements about the use of technology in relationships.							✓	✓	✓	✓
Demonstrate how to set and respect boundaries around social media and technology use in relationships.							✓	✓	✓	✓
List criteria for evaluating the health of a relationship.							✓	✓	✓	✓
Demonstrate effective strategies to avoid or end an unhealthy relationship.									✓	✓
Explain characteristics of a healthy relationship that is free from threats, coercion or abuse.										✓
Demonstrate communication skills that foster healthy intimate and sexual relationships and show personal boundaries and respect for the boundaries of others.										✓

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# Oregon Comprehensive Sexuality Education: Sex and Reproduction

Oregon's Health Education Standards are designed to promote healthy, safe, violence-free communities for all people. This includes promoting concepts and fostering skills for healthy individuals and healthy relationships in age-appropriate ways. By aligning the standards with best-practice and the unique policy infrastructure in Oregon (including OAR Rule 581-0221440, SB 856, and HB 4077) our state is working to address and end violence in our schools and communities.

	K	1st	2nd	3rd	4th	5th	6th	7th	8th	HS
Name reproductive body parts, using proper anatomical terms, and stages in the basic growth processes of all people.	✓	✓	✓							
Identify sources of support, such as parents or other trusted adults, to seek information about sexual and reproductive health, including pregnancy and birth.	✓	✓	✓	✓	✓	✓				
Recognize sources of medically accurate information about human sexual and reproductive anatomy, puberty and personal hygiene.				✓	✓	✓	✓	✓	✓	✓
Identify human reproductive systems including anatomy and function.				✓	✓	✓	✓	✓	✓	
Describe and analyze how the school and community can support personal health practices and behaviors.					✓	✓	✓	✓	✓	✓
Recognize the importance of assuming responsibility for personal health behaviors.							✓	✓	✓	✓
Define contraceptive methods including abstinence, condoms, and emergency contraception and describe their mechanism of action.							✓	✓	✓	✓
Define sexual intercourse and its relationship to human reproduction.							✓	✓	✓	
Examine factors that may influence condom use and other safer sex decisions.							✓	✓	✓	✓
Demonstrate effective communication skills about the use of contraception including abstinence, condoms, and other safer sex practices.							✓	✓	✓	✓
Identify/describe the steps to correctly use a condom.							✓	✓		
Demonstrate the steps to correctly use a condom and/or other barrier methods.									✓	✓
Establish a personal goal to not have sex until you're ready.									✓	✓
Assess internal and external influences on decisions about pregnancy options and parenthood.									✓	✓
Identify medically-accurate resources that provide assistance around sexual health, pregnancy, emergency contraception, and pregnancy related information and support including pregnancy options, safe surrender policies and prenatal care.							✓	✓	✓	✓
Describe the human sexual response cycle, including the role hormones play, the ovulation cycle, how fertilization occurs, the stages of pregnancy, and responsibility of parenting.										✓
Identify laws related to sex and sexual health, reproductive and sexual health care services, and minors' rights around contraception pregnancy, adoption, abortion and parenting.										✓
Recognize that many teens successfully use condoms.										✓

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# Oregon Comprehensive Sexuality Education: Gender

Oregon’s Health Education Standards are designed to promote healthy, safe, violence-free communities for all people. This includes promoting concepts and fostering skills for healthy individuals and healthy relationships in age-appropriate ways. By aligning the standards with best-practice and the unique policy infrastructure in Oregon (including OAR Rule 581-0221440, SB 856, and HB 4077) our state is working to address and end violence in our schools and communities.

	K	1st	2nd	3rd	4th	5th	6th	7th	8th	HS
Describe and practice ways to communicate respectfully with and about people of all gender identities, gender expressions and sexual orientations.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Recognize and explain that there are many ways to express gender.	✓	✓								
Recognize differences and similarities of how individuals identify regarding gender.			✓							
Recognize the importance of treating others with respect including their gender expression.	✓	✓	✓							
Describe differences and similarities of how individuals identify regarding gender or sexual orientation.				✓	✓	✓				
Describe the importance of treating others with respect including their gender expression and sexual orientation.				✓	✓	✓				
Describe how friends, family, media, society and culture influence how people think they should act on the basis of their gender.	✓	✓	✓	✓	✓	✓				
Discuss ways of expressing gender.						✓				
Describe and demonstrate ways to treat yourself and others with dignity and respect, with regard to gender, gender identity, gender expression, and sexual orientation.				✓		✓		✓	✓	✓
Identify and describe sources of support such as parents or other trusted adults they can tell if they are being teased, harassed or bullied based on gender identity, sexual orientation, and gender expression.				✓	✓	✓	✓	✓	✓	
Identify resources, including people at home, school or in the community who can provide medically accurate information and/or support about healthy sexuality, including sexual orientation and gender identity.				✓	✓	✓	✓			
Explain the differences between biological sex, sexual orientation, and gender identity and expression.							✓	✓	✓	
Recognize diversity among people, including age, disability, national origin, race, ethnicity, color, marital status, biological sex, sexual orientation, gender identity and expression.							✓	✓	✓	
Investigate external influences that have an impact on one’s attitudes about gender, sexual orientation and gender identity.							✓	✓	✓	
Describe and access accurate information about healthy sexuality, including sexual orientation and gender identity.							✓	✓	✓	
Differentiate between biological sex, sexual orientation, sexual identity and sexual behavior, gender identity and gender expression.										✓
Describe the intersections of varied identities, including gender, race, ethnicity, sexual orientation, ability, etc.										✓
Analyze the influence of friends, family, media, society, and culture on the intersections of gender, sexual orientation, race, ethnicity, and other identities.										✓

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# Oregon Comprehensive Sexuality Education: Violence

Oregon’s Health Education Standards are designed to promote healthy, safe, violence-free communities for all people. This includes promoting concepts and fostering skills for healthy individuals and healthy relationships in age-appropriate ways. By aligning the standards with best-practice and the unique policy infrastructure in Oregon (including OAR Rule 581-0221440, SB 856, and HB 4077) our state is working to address and end violence in our schools and communities.

	K	1st	2nd	3rd	4th	5th	6th	7th	8th	HS
Demonstrate effective communication skills to report/access help if they or someone they know is being hurt, feels unsafe, or is in a dangerous situation.	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Identify sources of support, such as parents or other trusted adults, including school staff, they can tell if they are experiencing sexual abuse.	✓	✓	✓	✓	✓	✓	✓			
Demonstrate and assess strategies to prevent, manage, or resolve interpersonal conflicts without harming self or others.				✓	✓	✓	✓	✓	✓	✓
Explain bullying/teasing and why they are inappropriate behaviors.	✓	✓	✓	✓	✓	✓				
Describe, demonstrate, and advocate for ways students can work together to promote dignity and respect for all people.				✓	✓	✓	✓	✓	✓	✓
Describe how others can take action when someone else is being teased, harassed, bullied or cyberbullied.					✓				✓	
Explain how forms of bullying, cyberbullying, harassment, discrimination, and violence can affect health and safety.							✓	✓	✓	
Define and discuss the consequences of prejudice and oppression, discrimination, racism, sexism and hate crimes.							✓	✓	✓	
Explain why a person who has been raped or sexually assaulted is not at fault.							✓	✓	✓	
Identify school and community resources for reporting child abuse.							✓	✓	✓	
Describe sources of support such as parents or other trusted adults they can tell if they are being teased, harassed or bullied based on gender identity, sexual orientation, and gender expression.								✓	✓	
Identify situations and behaviors that constitute bullying, sexual harassment, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence.							✓	✓	✓	✓
Advocate for school policies and programs that promote healthy relationships with dignity and respect for all in a safe and inclusive environment, free from violence and bullying.							✓	✓	✓	✓
Analyze external influences and societal messages that impact attitudes about interpersonal violence.							✓	✓	✓	✓
Demonstrate asking for help and support, if they or someone they know is being hurt or feels unsafe in an intimate or sexual relationship.								✓	✓	✓
Discuss the impacts of bullying, sexual harassment, sexual abuse, sexual assault, incest, rape, stalking, and dating violence.									✓	✓
Explain Oregon’s laws related to bullying, sexual harassment, coercion, sexual abuse, sexual assault, incest, rape, stalking, domestic violence, and dating violence.										✓
Access accurate information and resources for survivors of sexual abuse, incest, rape, sexual harassment, sexual assault, domestic violence, dating violence, and stalking.										✓

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# **APPENDIX D**

# **NCSD CSEP RENEWAL AND REVISION**

# **ADVISORY**

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[\*\*BACK TO TABLE OF CONTENTS\*\*](#)

**North Clackamas School District points of contact:  
Office of Teaching, Learning and Professional Development**

**Tammy O'Neil**  
Executive Director

**Laurie Meisner**  
Associate Director

**Dianna Ngai**  
Associate Director

**2023 NCS D CSEP Renewal and Revision Advisory**

<b>Tammy O'Neil</b> Executive Director Teaching, Learning & Professional Development	<b>Laurie Meisner</b> Associate Director Teaching, Learning & Professional Development	<b>Dianna Ngai</b> Associate Director Teaching, Learning & Professional Development	<b>Megan Lee</b> NCS D Employee Wellness Coordinator	<b>Amber Mondae-Bozman</b> K-5 Health and Wellness Instructional Coach
<b>Meagan Sternberg</b> 6-12 Health and Wellness Instructional Coach	<b>Karon Webster</b> Principal Bilquist Elementary	<b>Alyssa Engle</b> Assistant Principal Clackamas HS	<b>Jeremy Cohen</b> Associate Director of Secondary Programs	<b>Meghan Winter</b> Health Teacher Putnam HS
<b>Megan Adams</b> Health Teacher Alder Creek MS	<b>Chad Craner</b> Counselor Happy Valley MS	<b>Tina Matheis</b> Health & Wellness Specialist Rock Creek MS	<b>Brittany Lopez</b> Instructional Coach Milwaukie El Puente Elementary	<b>**Community Feedback</b>

*\*\*Parent, Guardian, and Community member feedback about Health content and the CSEP Plan was noted and tracked individually and in teacher/admin summaries.*

**2021 NCS D Health Renewal and Revision Advisory**

<b>Kara Mortimer</b> Associate Director Teaching and Learning	<b>Maureen Callahan</b> Executive Director Teaching and Learning	<b>Brittany Lopez</b> Instructional Coach Teaching and Learning	<b>Megan Lee</b> NCS D Employee Wellness Coordinator	<b>Sara Westersund</b> K-5 Health and Wellness Coordinator
<b>Jennifer Kiltow</b> Associate Director Elementary Programs	<b>Hannah Andrews</b> Health Teacher Clackamas Middle College	<b>Health Team</b> Clackamas HS	<b>Health Team</b> Milwaukie HS	<b>Health Team</b> Putnam HS
<b>Health Team</b> Alder Creek MS	<b>Health Team</b> Happy Valley MS	<b>Health Team</b> Rock Creek MS	<b>Health Team</b> Rowe MS	<b>**</b>

*\*\*Parent, Guardian, and Community member feedback about Health content and the CSEP Plan was noted and tracked individually and in teacher/admin summaries. COVID protocols prohibited school, parent, and district staff from meeting as a group to discuss plan revisions.*

**2019 NCS D Health Renewal and Revision Contributors**

<b>Carissa Albin</b> Teacher Oak Grove Elementary	<b>Deanna Benson</b> Teacher Rock Creek Middle School	<b>Noel Carey</b> Health and Wellness Specialist, Riverside Elem	<b>Freeland Church</b> Counselor Milwaukie High School	<b>Jaime Clarke</b> Instructional Coach Teaching and Learning
<b>Amanda Hopping-Winn</b> Community Member	<b>Dana Johnson</b> Teacher Rowe Middle School	<b>Liz Kobs</b> Community Member	<b>Megan Lee</b> NCS D Employee Wellness Coordinator	<b>Susannah Lightbourne-Maynard</b> Oak Grove Elementary
<b>Mary Masterson</b> NCS D Oral Health Program Community Member	<b>Michael Ralls</b> Director, Social Services NCS D District Office	<b>Whitney Reed</b> Teacher View Acres Elementary	<b>Terri Saunders</b> Health and Wellness Specialist, Ardenwald Elem	<b>Stephanie Schie</b> Teacher Verne Duncan Elementary
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**2016 NCSD Health Renewal Advisory Committee Contributors**

<b>Deanna Benson</b> Teacher Rock Creek Middle School	<b>Kyle Bracy</b> Teacher Milwaukie High School	<b>Amy Busch</b> Administrator Linwood and Sojourner	<b>Maureen Callahan</b> Executive Director Teaching and Learning	<b>Claudia Carle</b> Teacher Alder Creek Middle School
<b>Trisha Claxton</b> NCSD School Board Member	<b>Daryl Dixon</b> NCSD School Board Member	<b>K.T. Emerson</b> Administrator Milwaukie High School	<b>Dom Giancola</b> Teacher Clackamas High School	<b>Janna Good</b> DLI Program Specialist El Puente and Riverside
<b>Jaime Guinn</b> Teacher Mt. Scott Elementary	<b>Andrew Hill</b> Teacher Rex Putnam High School	<b>Maureen Hinman</b> Community Member	<b>Johnene Laminak</b> Community Member	<b>Korey Landolt</b> Teacher Clackamas High School
<b>Valorie Larson</b> Teacher Clackamas High School	<b>Richard Lattman</b> Teacher Happy Valley Elementary	<b>Stephanie Leske</b> Teacher Rex Putnam High School	<b>Chris Mauthé</b> Instructional Coach Teaching and Learning	<b>Leslie McGraw</b> Teacher Linwood Elementary
<b>Kristen Paschall</b> Teacher Linwood Elementary	<b>Michael Ralls</b> Director, Social Services NCSD District Office	<b>Danni/y Rosen</b> Community Member	<b>Christine Saulsbury</b> Teacher Rowe Middle School	<b>Stephen Schroedl</b> NCSD School Board Member
<b>Rose Marie Vu</b> Teacher Mt. Scott Elementary	<b>Barb Widmer</b> Community Member	<b>Eddie Wilkins</b> Teacher Clackamas High School		

**Original Consultants and Contributors:**

- **Sasha Grenier** *Sexual Health and School Health Specialist, Oregon Department of Education*
- **Ely Sanders-Wilcox** *Education Program Specialist, Oregon Department of Education*
- **Ewan Brawley** *Director of Teaching and Learning, Clackamas County Education Service District*
- **Andrea Lockard** *Former Program Specialist, Teaching and Learning, Clackamas County Education Service District*
- **Jenny Withycombe, PhD** *Health Program Teacher on Special Assignment, Portland Public Schools*