

TIMELINE FOR 2021-2022 INSTRUCTIONAL MATERIALS ADOPTION REVIEW

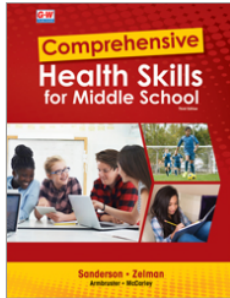
Month	Activities/Tasks
September	<ul style="list-style-type: none"> Selection of District Instructional Materials Review Committees (DIMRC)
October - January	<ul style="list-style-type: none"> DIMRC meet to review and select materials to be recommended for District adoption; recommendations are submitted to senior staff These meetings were announced and open to the public
March	<ul style="list-style-type: none"> Textbook adoption advertisement posted in the newspaper; materials are made available for public access and review at least twenty (20) calendar days prior to School Board consideration Textbook adoption public hearing posted in the newspaper
April	<ul style="list-style-type: none"> Public Hearing (open noticed) to receive comments on recommended materials considered for adoption School Board Meeting to approve annual instructional materials plan identifying instructional materials that will be purchased by the District
May	<ul style="list-style-type: none"> Petition deadline for a parent of a public-school student in M-DCPS or a resident of the county to contest the School Board's adoption of a specific instructional material* Petition/Public Hearing – an unbiased and qualified hearing officer shall conduct an open public hearing on all petitions timely received*
June	<ul style="list-style-type: none"> School Board Meeting to consider hearing officer's findings and recommendations and make a final decision; the final decision is not subject to further petition or review *

*If applicable

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INSTRUCTIONAL MATERIALS PLAN 2022-2023

	Unit of Study/Course	Title	Publisher
	Human Reproduction & Disease Education M/J Comprehensive Science 1, 2, & 3 (grades 6-8)	<i>Comprehensive Health Skills for Middle School</i> , Sanderson, C. A., et al, Goodheart Willcox, 2023, 3 rd Edition	Goodheart Willcox
	Human Reproduction & Disease Education Personal Fitness (grades 9-12)	<i>Comprehensive Health Skills for High School</i> , Sanderson, C. A., et al, Goodheart Willcox, 2023, 4 th Edition	Goodheart Willcox



Comprehensive Health Skills for Middle School 3e, Florida Online Textbook

By: Catherine Sanderson, Lindsay Armbruster, Mary McCarley, and Mark Zelman

Start Date: Mar 17, 2022

End Date: May 17, 2022

CHAPTER 20 PAGE 653

Every state has *safe haven laws* (also called *safe surrender laws*) that allow people to leave their babies at certain facilities with no questions asked and with no legal consequences. These laws protect babies from the dangers of abandonment. Each state has age restrictions for a baby who is left at a safe haven. Safe havens include fire stations, police stations, and hospitals. Babies will be well cared for until they can be adopted.

In some cases, people who are not ready to give birth and raise a child choose to end the pregnancy with a procedure called **abortion**. Abortion is *not* a type of birth control. Birth control methods are designed to *prevent* pregnancy. **Abortion ends a pregnancy that has already begun.** A person who decides to have an abortion should do so at the earliest possible date to avoid potential health risks.

Many people are strongly opposed to abortion. Others believe it is a personal choice. If considering abortion, young people can benefit from a strong family support system. Counseling from doctors and advisors can also be helpful.

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Unplanned Pregnancy

As you have learned, abstinence is the only contraceptive method that is 100 percent effective. With any other method, some pregnancies may still happen. When pregnancy occurs, people have several options. Some people choose to give birth to and raise the baby. Others choose to place the child for adoption, or in some cases, end the pregnancy.

Some people choose to become parents and raise the child. If people decide to parent their child, they must prepare and learn everything they can about parenthood. Parents have many responsibilities. They must provide for all of the child's physical needs, such as food and shelter. They must also provide for the child's emotional needs, such as interacting with the child.

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Emergency Contraception

Even when partners agree to use birth control and try to use it correctly, mistakes can happen. In these cases, a person might use **emergency contraception** to help prevent pregnancy (Figure 20.13). This method of birth control can only be used for a few days after sex, however.

One type of emergency contraception is the copper IUD. If inserted within five days of sexual intercourse, this IUD is the most effective method of emergency contraception.

Several types of emergency contraception pills are also available over-the-counter and do not require prescriptions, including *ella*® and *Plan B One-Step*®. These pills contain hormones that prevent ovulation and thicken cervical mucus.

Emergency contraception is similar to other hormone-based birth control methods, but has a greater amount of the hormones. Emergency contraception pills prevent fertilization. They cannot stop or interrupt a pregnancy that has already occurred. Emergency contraception does not reduce the risk of STIs and should not be used regularly.



Facts About Child Sexual Abuse

Before the age of consent, people cannot legally consent to sexual activities.

State laws set the age of consent. **The most common age of consent is 16.**

Most cases of child sexual abuse are committed by someone the child knows well.

Many cases of child sexual abuse go unreported.

Child sexual abuse can begin or take place on the Internet.

*****CCDF Note: Please note that the age of consent in Florida is 18 Years Old, not 16.**

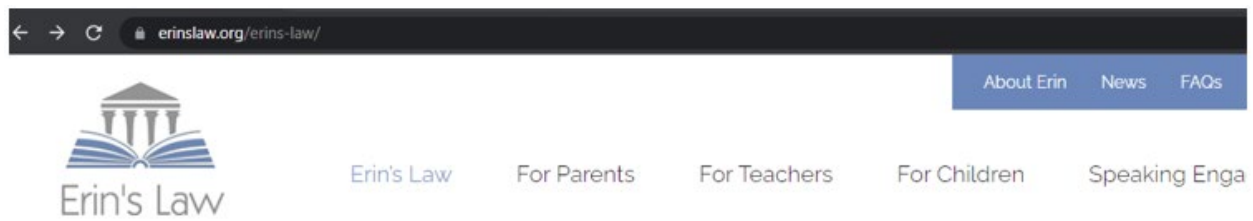
Report Abuse

Recognizing abuse, including neglect, is the first step to stopping it. Some laws require children and teens to be educated about signs of abuse. For example, **Erin's Law** requires that children and teens be taught about body safety to recognize sexual abuse and to speak up if they are being abused.

Reporting abuse can get authorities involved. Anyone who thinks a person is being abused should report this to an authority (for example, a police officer or organization) or a parent or other trusted adult.

Several hotlines help people trying to report abuse and leave abusive situations (**Figure 16.15**). People can also report abuse through local or state departments of human services, law enforcement, and state hotlines.

Source: www.erinslaw.org/erins-law/



It is now pending in these additional states, with more to come:

- | | | |
|------------------|-----------------|--------------------|
| 1. Massachusetts | 2. Florida | 3. Ohio |
| 4. Kentucky | 5. Iowa | 6. Kansas |
| 7. Nebraska | 8. South Dakota | 9. Hawaii |
| 10. Arizona | 11. Idaho | 12. North Carolina |
| 13. Wisconsin | | |

*****CCDF Note: Please note that Erin's Law is not applicable in the State of Florida.**

For Teachers

Talking to Parents

- Do NOT contact the parents if a child discloses abuse
- A parent may try and have their child recant the abuse they reported.
- Parent may take off with child and go into hiding
- Parent may confront abuser if known before police are involved

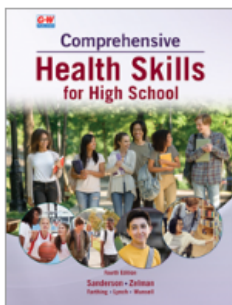
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Natural Methods

Natural methods of birth control do not use barriers or hormones. Some people prefer these natural methods. Natural methods include the fertility awareness method (FAM) and withdrawal.

Withdrawal

Withdrawal, or *pulling out*, is one of the least effective birth control methods when used alone. A male using this method pulls the penis out of the female's vagina before ejaculating. This may keep sperm out of the vagina and reduce the risk of pregnancy.



Comprehensive Health Skills for High School 4e, Florida Online Textbook

By: Catherine Sanderson, Mark Zelman, Melanie Lynch, Melissa Munsell, and Diane Farthing

Start Date: Mar 17, 2022

End Date: May 17, 2022


CHAPTER 4 PAGE 114-115

Gender Identity

Your body and biological sex are part of your identity. **Biological sex**, however, is not the same as a person's gender. **Biological sex** refers to whether you are genetically and physically male or female.


biological sex label
assigned at birth
based on physical
factors such as
hormones,
chromosomes, and
genitalia

A doctor will typically assign a person's biological sex at birth. **Gender** describes the characteristics a society associates with a biological sex. For example, many societies associate certain traits with *femininity* (such as with girls and women) and *masculinity* (such as with boys and men). The societal perception of feminine or masculine traits as the whole of a person's identity is unrealistic. This is because people typically have some masculine and some feminine traits.



gender behavioral, cultural, or psychological traits and roles society associates with a biological sex

Your **gender identity** is a separate component of identity that includes your deeply held thoughts and feelings about gender. Gender identity influences *gender expression*, or the way you outwardly display your gender. This includes the clothes you wear and your physical appearance and behaviors. People with different gender identities use various words to describe their identification with a gender (**Figure 4.9**).



gender identity component of identity that describes deeply held thoughts and feelings about one's gender

Gender identity begins developing during childhood and is influenced by a person's culture and environment (including parents, peers, and the media). By three years of age, children usually know their gender. Soon after, young children learn **gender roles**, or the attitudes and behaviors society considers "appropriate" for a certain gender.

gender roles societal or cultural expectations about how people of a certain gender should behave, dress, speak, and act

Societal assumptions about boys and girls are called **gender stereotypes**. For example, believing that only girls should play with dolls or only boys should play with trucks is gender stereotyping. Another example is thinking that all women are emotional or all men are aggressive. Gender stereotypes influence how people view themselves and others and can lead to unfair treatment of a specific gender.

gender stereotypes preconceived ideas, roles, and characteristics people associate with a certain gender

Gender Identities	
Gender Identity	Description
Agender	Having a gender identity that does not align with any gender; also called <i>gender neutral</i>
Androgynous	Exhibiting masculine and feminine traits equally
Bigender	Having a gender identity that includes two genders
Cisgender	Having a gender identity that matches one's biological sex assigned at birth
Gender fluid	Having a changing, or <i>fluid</i> , gender identity
Gender nonconforming	Having a gender identity that does not follow gender expectations based on a person's biological sex assigned at birth
Gender questioning	Being unsure about one's gender identity or experimenting with different genders
Nonbinary	Having a gender identity that falls outside or between the categories of man and woman; also called <i>gender queer</i>
Transgender	Having a gender identity that does not match one's biological sex assigned at birth

Figure 4.9 Each term describes how a person may identify with gender.

Sexual Orientation

A person's sexual orientation is separate from gender identity. *Sexual orientation* describes the enduring pattern of a person's romantic and/or sexual attraction to other people. Sexuality is an important part of a person's identity.

Minors Can Consent for...

general medical and surgical care	in 21 states
medical care and counseling for substance abuse	in 44 states
outpatient mental health services	in 20 states
inpatient mental health services	in 0 states
STI testing and treatment (over 16 years of age)	in all 50 states
HIV testing and treatment	in 32 states
reproductive health services	in 25 states
prenatal care, delivery services, medical care for a baby	in 27 states

Figure 2.13 In some cases, healthcare providers are authorized or required to notify a parent or guardian about decisions regarding the healthcare of minors.

Minors' rights to access healthcare depend on state laws. If unsure about state laws, teens can ask their doctors for information about consent, decisions, and parent or guardian notification. They can also research this information online.

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Questions to Ask Your Doctor

Will you tell my parents or others the information I tell you?

If I want to, can I talk to you without my parents in the room?

What is causing my symptoms?

Is it normal to feel this way?

What activities should I do or not do while I'm recovering?

How can I prevent this health issue from happening again?

How does this medication work?

Will this test hurt? Can the pain be lessened?

What side effects should I expect?

When should I come back to the doctor?

Figure 2.14 When you go to the doctor, remember that your doctor has seen and heard it *all*. Be open with your doctor and ask all of the questions you want to. *What other questions can you think of to ask your doctor at a physical or wellness exam?*




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Case Study

Who You Are

There are many components to people's identity, including what they look like, as well as how they act, think, relate to other people, and view the world. The following character profiles describe basic parts of these identities.

		
<p>Name: Mikayla Age: 16</p>	<p>Name: Seth Age: 17</p>	<p>Name: Kai Age: 14</p>
<p>Core Values: Friendship, Fun, Humor, Compassion</p>	<p>Core Values: Knowledge, Determination, Optimism</p>	<p>Core Values: Family, Openness, Knowledge, Generosity</p>
<p>Personality: Cheerful, talkative</p>	<p>Personality: Loyal, shy, analytical</p>	<p>Personality: Sympathetic</p>
<p>Physical Identity: Curly, brown hair Brown eyes 5'9" Multiracial (African- American and Caucasian)</p>	<p>Physical Identity: Short, brown hair Hazel eyes 5'7" Caucasian</p>	<p>Physical Identity: Long, brown hair Brown eyes 5'4" Native American</p>
<p>Gender Identity: Cisgender</p>	<p>Gender Identity: Cisgender</p>	<p>Gender Identity: Gender fluid</p>
<p>Sexual Orientation: Bisexual</p>	<p>Sexual Orientation: Heterosexual</p>	<p>Sexual Orientation: Pansexual</p>
<p>Social Identity: Humorous friend,</p>	<p>Social Identity: Committed varsity swimmer, easvaoina</p>	<p>Social Identity: Avid reader, tribe member,</p>

Lesson 4.2 Review

Know and Understand

1. List three factors that influence your core values.
2. Explain what makes up a person's physical identity.
3. What is the difference between biological sex and gender?
4. In your own words, define *ethnicity*.
5. What steps can you take to learn about the different parts of your identity?

Think Critically

6. Think about your own personality. What personality traits do you possess? How stable has your personality remained over time?
7. With a partner, discuss different types of gender expression. How do people with different gender identities express gender differently?
8. What social groups do you belong to? How do these groups influence your social identity?
9. Give an example of a time you learned from a mistake. What did this experience teach you?

Race and Ethnicity

Idealized images and body types in the media and society reach people from all backgrounds. Unfortunately, US media tends to show mostly Caucasian or light-skinned models. Even when showing models of different races or ethnicities, the media tends to emphasize light eyes, straight hair, and lack of curves, which are more common among Caucasian people.

Gender Identity

Gender identity is also a factor that can influence body image. For example, people who are transgender or nonbinary may wish the physical features of their bodies were in line with their gender identity. For this reason, they may choose to change their appearance to better match gender identity. They may also feel pressure to conform to societal ideals associated with their identified gender.

This desire to feel accepted and meet societal ideals is one reason rates of eating disorders among transgender and nonbinary people are much higher than for others. One survey found that transgender students were more than four times as likely to have an eating disorder and twice as likely to have symptoms of disordered eating compared to other students.

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CHAPTER 21 PAGE 763

Every state has **safe haven laws** (also called *safe surrender laws*) that permit people to leave their babies at certain facilities with no questions asked and with no legal consequences. These laws protect innocent and vulnerable babies from the dangers of abandonment. Each state has age restrictions for a baby who is left at a safe haven. Safe havens include fire stations, police stations, and hospitals. Babies will be well cared for until they can be adopted.

safe haven laws
legislation that permits people to leave their babies at certain facilities with no questions asked; aim to protect babies from abandonment; also called *safe surrender laws*

Ending a Pregnancy

In some cases, people who are not ready to give birth to and raise a child choose to end the pregnancy with a procedure called **abortion**. It is important to realize that abortion is *not* a type of contraception. Contraceptive methods, including emergency contraception, *prevent* pregnancy from happening. **Abortion ends a pregnancy that has already begun.**

abortion procedure that ends a pregnancy

Abortions may be *medical* (use hormones) or *surgical* (use surgery). A person who decides to have an abortion should do so at the earliest possible date. The further along a pregnancy is, the more risks are involved in abortion. In general, abortions performed in the first three months have fewer risks.

You are probably aware that abortion is a controversial topic. **Many people strongly oppose abortion. Others believe it is a personal choice.** If considering abortion, people can benefit from a strong family support system. Counseling from doctors and advisors can also be helpful.

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CHAPTER 24 PAGE 826

Many young people dream of someday having their own families. Parents know, however, that pregnancy and family life demand attention, money, time, and emotional maturity. For people who want to delay having children or do not want children, **contraception** helps prevent pregnancy. It also allows people to remain childless if they choose.

What would you say if a friend asked you how to prevent pregnancy? if you heard someone say pregnancy could be prevented by urinating or douching after sex? How would you react if your dating partner told you pregnancy was not possible the first time you had sex?

contraception any method that reduces the risk of pregnancy resulting from sexual activity

CHAPTER 24 PAGE 848

Withdrawal

Withdrawal, or *pulling out*, is one of the least effective **contraceptive methods**. When people use withdrawal, a male pulls the penis out of the female's vagina before ejaculating. This may keep sperm out of the vagina and reduce the risk of pregnancy.

withdrawal contraceptive method that involves pulling the penis out of the vagina before ejaculation

CHAPTER 24 PAGE 849

Sterilization

Sterilization prevents pregnancy by permanently altering the male or female reproductive system. These alterations work by preventing the sperm and egg from uniting. They do not protect against STIs and HIV.

Choosing Sterilization	
Reasons to Choose Sterilization	Reasons Not to Choose Sterilization
<ul style="list-style-type: none">• Adults know they do not want to have more children.• Adults find other contraceptive methods unacceptable. Hormonal methods may be dangerous for some people, or pregnancy may carry serious risks.• Adults have a genetic disease or disorder they do not want to pass on to children.• Adults know they are and will never be emotionally or financially able to raise a family.	<ul style="list-style-type: none">• Adults might want children, but do not want them now. If there is <i>any</i> chance adults might someday want children, they should not select sterilization.• Adults feel pressured to be sterilized. Adults should make their own decisions since they will live with the effects.• Adults have other personal issues, such as financial or personal stress or relationship conflict. These problems might go away; sterilization will not.

CHAPTER 24 PAGE 847

Natural Methods and Sterilization				
Method	Use	Requires a Doctor's Visit	Estimated Cost	Number of Pregnancies Expected (per 100 Females)
Tubal ligation (female sterilization)	Surgery to cut or block the fallopian tubes	Yes	\$0–\$6,000 (including doctor's visit), depending on insurance	Fewer than 1
Vasectomy (male sterilization)	Surgery to cut or block the vas deferens, which transport sperm from the testes to the penis	Yes	\$0–\$1,000 (including doctor's visit), depending on insurance	Fewer than 1
Fertility awareness method (FAM)	Methods that track a female's fertile (unsafe) and infertile (safe) days; include the temperature method, cervical mucus method, and calendar method	No (not recommended)	\$0–\$20	2–23
Withdrawal	Pulling the penis out of the vagina before ejaculation	No	\$0	22

CHAPTER 14 PAGE 503

Many factors, including your values, beliefs, and judgment, will influence the decisions you make about physical intimacy and sexual feelings. For teens, a responsible decision for handling these feelings is **sexual abstinence**, or the decision to refrain from sexual activity. **Sexual activity** describes actions that involve contact with a person's reproductive organs and may include sexual touching and sexual intercourse. **Sexual intercourse** involves *penetration*, or the insertion of a body part or object into another body part. It is possible to maintain a rewarding, fun, healthy dating relationship without engaging in sexual activity (Figure 14.23).

sexual abstinence
decision to refrain from sexual activity for physical, social, or emotional reasons

sexual activity
actions that involve contact with a person's reproductive organs; can include sexual intercourse and other activities

sexual intercourse
sexual activity that involves penetration, or insertion of a body part or object into another body part

CHAPTER 14 PAGE 510

Family relationships provide for physical needs, meet mental and emotional needs, and educate and socialize. To have healthy family relationships, you can resolve conflicts constructively with parents and guardians and follow rules. You can negotiate with siblings and respect each other's space. You can also seek to understand grandparents and involve them in your life. You can talk with a trusted adult or reach out to community resources to get help for

CHAPTER 15 PAGE 525-526

Some schools have created **safe zones**, where students know they can feel safe and supported, no matter what. A safe zone can be a specific space, such as an office or classroom, or a particular person (for example, a "safe adult"). Students can go to a safe zone to eat lunch, study, or spend time with friends. If your school has not set up a safe zone program, you could take steps to start one.

Communicate with Trusted Adults

Communicating regularly with a trusted adult can help protect you from bullying behavior. If you tell an adult about your relationships at school and online, that adult can help you with difficult situations. The adult can also advocate for you if bullying does occur. A trusted adult can help address the situation before it gets worse.

CHAPTER 21 PAGE 748



Skills for Health and Wellness

Skills for Seeking Sexual Healthcare

Sexual healthcare, like any type of healthcare, is a normal part of maintaining your health. For some teens, seeking sexual healthcare or asking questions about sexual health can seem awkward or uncomfortable. Your reproductive system is just like any other body system, however. A doctor can help you care for your body and answer any questions you have.

Talking with a school nurse, doctor, or other trusted adult is a great way of getting answers to your sexual health questions and making any healthcare appointments. In many states, minors can also consent to certain sexual health services. For example, all 50 states allow minors to consent to STI testing and treatment. Twenty-five states allow minors to access contraceptive services. Some states also allow minors to seek prenatal care and explore pregnancy options.

A person's race, gender, and certain social factors (such as income and bias) can be barriers to accessing sexual healthcare, including preventive care, testing, and treatment. These factors impact reproductive justice, or the human right to have children, not have children, parent children in a healthy environment, and access sexual healthcare services. Lack of sexual healthcare can raise risks for unwanted pregnancies and STIs, including HIV/AIDS.

Practice Your Skills

Access Information

Knowing how to seek sexual healthcare is an important skill. Talking about this topic can make it less awkward and encourage others to get reliable information and seek healthcare for any issues.

As a class, start by researching answers to the following questions:

- What healthcare facilities offer sexual healthcare in your community? Include doctors' offices, health clinics, any doctors who specialize in sexual health, and free or low-cost options.
- Where in your community could you go to get reliable information about your sexual health?
- In your state, what are minors' rights regarding consent to different healthcare services? What, if any, services require parental notification?
- What symptoms mean a person should seek sexual healthcare? What symptoms indicate a health condition might be an emergency?

Share this information with the trusted adult and keep a copy of this information for when you need it.