**South Carolina General Assembly**

121st Session, 2015-2016

**S. 574**

**STATUS INFORMATION**

General Bill

Sponsors: Senators Hutto, Shealy, Johnson, Lourie, Campbell, O'Dell and Nicholson

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Companion/Similar bill(s): 3447

Introduced in the Senate on March 18, 2015

Currently residing in the Senate Committee on **Education**

Summary: Comprehensive health education

**HISTORY OF LEGISLATIVE ACTIONS**

Date Body Action Description with journal page number

3/18/2015 Senate Introduced and read first time ([Senate Journal‑page 4](file:///h:\SJ%20Archive\2015\03-18-15.docx))

3/18/2015 Senate Referred to Committee on **Education** ([Senate Journal‑page 4](file:///h:\SJ%20Archive\2015\03-18-15.docx))

5/28/2015 Senate Committee report: Favorable with amendment **Education** ([Senate Journal‑page 3](file:///h:\SJ%20Archive\2015\05-28-15.docx))

5/31/2016 Senate Recommitted to Committee on **Education**

View the latest [legislative information](http://www.scstatehouse.gov/billsearch.php?billnumbers=574&session=121&summary=B) at the website

**VERSIONS OF THIS BILL**

[3/18/2015](file:///p:\pprever\2015-16\574_20150318.docx)

[5/28/2015](file:///p:\pprever\2015-16\574_20150528.docx)

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Indicates New Matter

COMMITTEE REPORT

May 28, 2015

**S. 574**

Introduced by Senators Hutto, Shealy, Johnson, Lourie, Campbell, O’Dell and Nicholson

S. Printed 5/28/15--S.

Read the first time March 18, 2015.

**THE COMMITTEE ON EDUCATION**

To whom was referred a Bill (S. 574) to amend Section 59‑32‑10, Code of Laws of South Carolina, 1976, relating to definitions concerning the Comprehensive Health Education Act, so as to define, etc., respectfully

**REPORT:**

That they have duly and carefully considered the same and recommend that the same do pass with amendment:

Amend the bill, as and if amended, by deleting all after the enacting words and inserting:

/ SECTION 1. Section 59‑32‑10 of the 1976 Code is amended by adding an appropriately numbered subsection at the end to read:

“(8) ‘Medically accurate information’ means information supported by peer‑reviewed research that complies with accepted scientific methods, published in or by medical, scientific, psychological, sociological, governmental, or public health publications, organizations, or agencies such as the United States Centers for Disease Control and Prevention or the United States Health and Human Services Office of Adolescent Health.”

SECTION 2. Section 59‑32‑20 of the 1976 Code, as last amended by Act 293 of 2014, is further amended to read:

“Section 59‑32‑20. (A) Before ~~August 1, 1988~~ August 1, 2016, the board, through the department, shall ~~select or develop~~ ~~an instructional unit~~ make available to districts a list of medically accurate instructional materials with separate components addressing the subjects of reproductive health education, family life education, pregnancy prevention education, and sexually transmitted diseases and make the instructional unit available to local school districts. The board, through the department, also shall make available medically accurate information about other programs developed by other states upon request of a local school district.

(B) In addition to the provisions of subsection (A), before September 1, 2015, the board, through the department, shall ~~select or develop instructional units~~ make available to districts a list of medically accurate instructional materials in sexual abuse and assault awareness and prevention, with separate units appropriate for each age level from four‑year‑old kindergarten through twelfth grade.”

SECTION 3. Section 59‑32‑30 of the 1976 Code, as added by Act 293 of 2014, is amended to read:

“Section 59‑32‑30. (A) Pursuant to guidelines developed by the board, each local school board shall implement the following program of instruction:

(1) ~~Beginning with the 1988‑89 school year,~~ For grades kindergarten through five, medically accurate instruction in comprehensive health education must include the following subjects: community health, consumer health, environmental health, growth and development, nutritional health, personal health, prevention and control of diseases and disorders, safety and accident prevention, substance use and abuse, dental health, and mental and emotional health. Sexually transmitted diseases as defined in the annual Department of Health and Environmental Control List of Reportable Diseases are to be excluded from instruction on the prevention and control of diseases and disorders. At the discretion of the local board, age‑appropriate medically accurate instruction in reproductive health may be included.

(2) ~~Beginning with the 1988‑89 school year,~~ For grades six through eight, medically accurate instruction in comprehensive health must include the following subjects: community health, consumer health, environmental health, growth and development, nutritional health, personal health, prevention and control of diseases and disorders, safety and accident prevention, substance use and abuse, dental health, mental and emotional health, and reproductive health education. Sexually transmitted diseases are to be included as a part of instruction. At the discretion of the local board, instruction in family life education or pregnancy prevention education or both may be included, but instruction in these subjects may not include an explanation of the methods of contraception before the sixth grade.

(3) ~~Beginning with the 1989‑90 school year,~~ At least one time during the four years of grades nine through twelve, each student shall receive medically accurate instruction in comprehensive health education, including at least seven hundred fifty minutes of reproductive health education and pregnancy prevention education.

(4) The South Carolina Educational Television Commission shall work with ~~the department~~ local districts in developing medically accurate instructional programs and materials that may be available to the school districts. Films and other materials may be designed for the purpose of explaining bodily functions or the human reproductive process. These materials may not contain actual or simulated portrayals of sexual activities or sexual intercourse.

(5) The program of medically accurate instruction provided for in this section may not include a discussion of alternate sexual lifestyles from heterosexual relationships including, but not limited to, homosexual relationships except in the context of instruction concerning sexually transmitted diseases.

(6) In grades nine through twelve, students ~~must~~ also must be given medically accurate and appropriate instruction that adoption is a positive alternative.

(B) Local school boards ~~may use the instructional unit made available by the board pursuant to Section 59‑32‑20, or local boards~~ may develop or select their own medically accurate instructional ~~materials~~ units, curriculum, or both addressing the subjects of reproductive health education, family life education, and pregnancy prevention education. To assist in the selection of components and curriculum materials, each local school board shall appoint a thirteen‑member local advisory committee consisting of two parents, three clergy, two health professionals, two teachers, two students, one being the president of the student body of a high school, and two other persons not employed by the local school district.

(C) The time required for health instruction for students in kindergarten through eighth grade must not be reduced below the level required during the ~~1986‑87~~ 1986‑1987 school year. Medically accurate health instruction for students in grades nine through twelve may be given either as part of an existing course or as a special course.

(D) No contraceptive device or contraceptive medication may be distributed in or on the school grounds of any public elementary or secondary school. No school district may contract with any contraceptive provider for their distribution in or on the school grounds. Except as to that instruction provided by this chapter relating to complications which may develop from all types of abortions, school districts may not offer programs, instruction, or activities including abortion counseling, information about abortion services, or assist in obtaining abortion, and materials containing this information must not be distributed in schools. Nothing in this section prevents school authorities from referring students to a physician for medical reasons after making reasonable efforts to notify the student’s parents or legal guardians or the appropriate court, if applicable.

(E) Any course or instruction in sexually transmitted diseases must be taught within the reproductive health, family life, or pregnancy prevention education components, or it must be presented as a separate component.

(F) Instruction in pregnancy prevention education must be presented separately to male and female students.

(G) Beginning with the 2015‑2016 school year, districts annually shall provide age‑appropriate medically accurate instruction in sexual abuse and assault awareness and prevention to all students in four‑year‑old kindergarten, where offered, through twelfth grade. This instruction must be based on the units ~~developed by the board, through the department~~, curriculum, or both, selected or developed by the local school board pursuant to Section 59‑32‑20(B) and Section 59‑32‑30(B).”

SECTION 4. Section 59‑32‑60 of the 1976 Code is amended to read:

“Section 59‑32‑60. The department shall assure district compliance with this chapter. Each local school board shall consider the programs addressed in this chapter in developing its annual district report. Each local school district shall publish on its website the title and publisher of all health education materials they have approved, adopted, and used in the classroom. If the department determines that a school district is noncompliant with any provision of this chapter, the department shall withhold one percent of funding allocated to that school district for the Student Health and Fitness Act until the department determines that the school district is in compliance with the provisions in this chapter.”

SECTION 5. This act takes effect upon approval by the Governor. /

Renumber sections to conform.

Amend title to conform.

JOHN E. COURSON for Committee.

**STATEMENT OF ESTIMATED FISCAL IMPACT**

**Fiscal Impact Summary**

The bill will have indeterminable expenditure impact to the general fund and no expenditure impact to federal funds and other funds.

**Explanation of Fiscal Impact**

**State Expenditure**

The bill amends Section 59-32-10 to define medically accurate information and amends Section 59-32-20 to provide that the State Department of Education should select or develop medically accurate comprehensive health education units and sexual abuse and assault awareness units to be made available to local school districts. In addition, the bill amends Section 59-32-60 that directs each school district to publish the title and publisher of all health education materials that they use in the classroom. It further directs State Department of Education to withhold one percent of funding allocated to the school district until the department determines the school district is in compliance.

**State Department of Education.** The department indicated that the changes prescribed in the bill can be implemented into current curriculum. Therefore, there is no expenditure impact to the department or local school districts.

**Educational Television (ETV).** ETV does have access to these types of videos in their StreamlineSC and PBS Learning Media repositories. There would be some cost to acquiring, marketing, training for, and maintaining those sites. However, if ETV would be required to produce new videos, the costs for new video production would not be known until production staff met with the State Department of Education to determine exactly what would be produced.

Frank A. Rainwater, Executive Director

Revenue and Fiscal Affairs Office

**A** **BILL**

TO AMEND SECTION 59‑32‑10, CODE OF LAWS OF SOUTH CAROLINA, 1976, RELATING TO DEFINITIONS CONCERNING THE COMPREHENSIVE HEALTH EDUCATION ACT, SO AS TO DEFINE “MEDICALLY ACCURATE INFORMATION”; TO AMEND SECTION 59‑32‑20, AS AMENDED, RELATING TO THE REQUIREMENT THAT THE STATE BOARD OF EDUCATION PROVIDE COMPREHENSIVE HEALTH EDUCATION UNITS AND SEXUAL ABUSE AND ASSAULT AWARENESS UNITS TO LOCAL SCHOOL DISTRICTS AND SECTION 59‑32‑30, RELATING TO THE REQUIREMENT THAT LOCAL SCHOOL DISTRICTS IMPLEMENT COMPREHENSIVE HEALTH EDUCATION PROGRAMS, BOTH SO AS TO MAKE CONFORMING CHANGES; AND TO AMEND SECTION 59‑32‑60, RELATING TO THE REQUIREMENT THAT THE DEPARTMENT OF EDUCATION REPORT COMPLY WITH THE REQUIREMENTS OF THE ACT, SO AS TO REQUIRE EACH DISTRICT SHALL PUBLISH ON ITS WEBSITE HEALTH EDUCATION MATERIALS APPROVED, ADOPTED, AND USED IN DISTRICT CLASSROOMS, AND TO PROVIDE A PENALTY FOR NONCOMPLIANCE.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Section 59‑32‑10 of the 1976 Code is amended by adding an appropriately numbered subsection at the end to read:

“(8) ‘Medically accurate information’ means information supported by peer‑reviewed research that complies with accepted scientific methods, published in or by medical, scientific, psychological, sociological, governmental, or public health publications, organizations, or agencies such as the United States Centers for Disease Control and Prevention or the United States Health and Human Services Office of Adolescent Health.”

SECTION 2. Section 59‑32‑20 of the 1976 Code, as last amended by Act 293 of 2014, is further amended to read:

“Section 59‑32‑20. (A) ~~Before August 1, 1988,~~ The board, through the department, shall select or develop ~~an~~ medically accurate instructional unit with separate components addressing the subjects of reproductive health education, family life education, pregnancy prevention education, and sexually transmitted diseases and make the instructional unit available to local school districts. The board, through the department, also shall make medically accurate available information about other programs developed by other states upon request of a local school district.

(B) In addition to the provisions of subsection (A), before September 1, 2015, the board, through the department, shall select or develop medically accurate instructional units in sexual abuse and assault awareness and prevention, with separate units appropriate for each age level from four‑year‑old kindergarten through twelfth grade.”

SECTION 3. Section 59‑32‑30 of the 1976 Code, as added by Act 293 of 2014, is amended to read:

“Section 59‑32‑30. (A) Pursuant to guidelines developed by the board, each local school board shall implement the following program of instruction:

(1) ~~Beginning with the 1988‑89 school year,~~ For grades kindergarten through five, medically accurate instruction in comprehensive health education must include the following subjects: community health, consumer health, environmental health, growth and development, nutritional health, personal health, prevention and control of diseases and disorders, safety and accident prevention, substance use and abuse, dental health, and mental and emotional health. Sexually transmitted diseases as defined in the annual Department of Health and Environmental Control List of Reportable Diseases are to be excluded from instruction on the prevention and control of diseases and disorders. At the discretion of the local board, age‑appropriate medically accurate instruction in reproductive health may be included.

(2) ~~Beginning with the 1988‑89 school year,~~ For grades six through eight, medically accurate instruction in comprehensive health must include the following subjects: community health, consumer health, environmental health, growth and development, nutritional health, personal health, prevention and control of diseases and disorders, safety and accident prevention, substance use and abuse, dental health, mental and emotional health, and reproductive health education. Sexually transmitted diseases are to be included as a part of instruction. At the discretion of the local board, instruction in family life education or pregnancy prevention education or both may be included, but instruction in these subjects may not include an explanation of the methods of contraception before the sixth grade.

(3) ~~Beginning with the 1989‑90 school year,~~ At least one time during the four years of grades nine through twelve, each student shall receive medically accurate instruction in comprehensive health education, including at least seven hundred fifty minutes of reproductive health education and pregnancy prevention education.

(4) The South Carolina Educational Television Commission shall work with the department in developing medically accurate instructional programs and materials that may be available to the school districts. Films and other materials may be designed for the purpose of explaining bodily functions or the human reproductive process. These materials may not contain actual or simulated portrayals of sexual activities or sexual intercourse.

(5) The program of medically accurate instruction provided for in this section may not include a discussion of alternate sexual lifestyles from heterosexual relationships including, but not limited to, homosexual relationships except in the context of instruction concerning sexually transmitted diseases.

(6) In grades nine through twelve, students ~~must~~ also must be given medically accurate and appropriate instruction that adoption is a positive alternative.

(B) Local school boards may use the medically accurate instructional unit made available by the board pursuant to Section 59‑32‑20, or local boards may develop or select their own medically accurate instructional materials addressing the subjects of reproductive health education, family life education, and pregnancy prevention education. To assist in the selection of components and curriculum materials, each local school board shall appoint a thirteen‑member local advisory committee consisting of two parents, three clergy, two health professionals, two teachers, two students, one being the president of the student body of a high school, and two other persons not employed by the local school district.

(C) The time required for health instruction for students in kindergarten through eighth grade must not be reduced below the level required during the ~~1986‑87~~ 1986‑1987 school year. Medically accurate health instruction for students in grades nine through twelve may be given either as part of an existing course or as a special course.

(D) No contraceptive device or contraceptive medication may be distributed in or on the school grounds of any public elementary or secondary school. No school district may contract with any contraceptive provider for their distribution in or on the school grounds. Except as to that instruction provided by this chapter relating to complications which may develop from all types of abortions, school districts may not offer programs, instruction, or activities including abortion counseling, information about abortion services, or assist in obtaining abortion, and materials containing this information must not be distributed in schools. Nothing in this section prevents school authorities from referring students to a physician for medical reasons after making reasonable efforts to notify the student’s parents or legal guardians or the appropriate court, if applicable.

(E) Any course or instruction in sexually transmitted diseases must be taught within the reproductive health, family life, or pregnancy prevention education components, or it must be presented as a separate component.

(F) Instruction in pregnancy prevention education must be presented separately to male and female students.

(G) Beginning with the 2015‑2016 school year, districts annually shall provide age‑appropriate medically accurate instruction in sexual abuse and assault awareness and prevention to all students in four‑year‑old kindergarten, where offered, through twelfth grade. This instruction must be based on the units developed by the board, through the department, pursuant to Section 59‑32‑20(B).”

SECTION 4. Section 59‑32‑60 of the 1976 Code is amended to read:

“Section 59‑32‑60. The department shall assure district compliance with this chapter. Each local school board shall consider the programs addressed in this chapter in developing its annual district report. Each local school district shall publish on its website the title and publisher of all health education materials they have approved, adopted, and used in the classroom. If the department determines that a school district is noncompliant with any provision of this chapter, the department shall withhold one percent of funding allocated to that school district until the department determines that the school district is in compliance with the provisions in this chapter.”

SECTION 5. This act takes effect upon approval by the Governor.

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