



Department of Teaching and Learning

Family Life Education (FLE) is a state-endorsed program. The Family Life Education curriculum for Virginia Beach City Public Schools was developed through the cooperative efforts of school personnel and members of the Community Involvement Team. The program has been in place since 1991.

The Family Life Education program supports the traditional family, promotes parental involvement, fosters positive self-concepts, and provides mechanisms for coping with peer pressures and the stress of modern living. The program also includes, at age-appropriate grade levels, instruction on family living and community relationships, the value of postponing sexual activity until after marriage, human sexuality, human reproduction, and the prevention and effects of sexually transmitted diseases, including HIV/AIDS. The program is taught by teachers who have received special training in the background goals and objectives of family life education.

Copies of the curriculum are available for review in all schools. Detailed information relative to the lesson objectives, audiovisual materials, and instructional procedures are provided in the curriculum guide. A description of all resource materials used in the lessons is included in the curriculum guide.

Each school has copies of the resource materials used by its grade levels available for review, and all resource materials may be reviewed by appointment at the division's Instructional Resource Center, 641 Carriage Hill Road, Virginia Beach, VA 23452, (757) 263-6850. Parents and guardians have the right to review the Family Life Education program offered by the school division, including written and audiovisual educational materials used in the program. Parents and guardians also have the right to excuse their child from all or part of Family Life Education instruction. Parents and guardians are encouraged to review the family life education curriculum materials for their children's grade level.

The Virginia Beach City Public Schools implements the Family Life Education program at all schools, and scheduling is done at the discretion of the principal. Prior to the start of the program, students receive information from their schools to share with parents/guardians. This information includes the dates of instruction for the program as well as more specific information related to the opt-out program. The opt-out program is offered for parents/guardians to opt their children out of the Family Life Education program if they do not wish them to participate in some or all of the program lessons. Since individual schools schedule the dates of their FLE instruction, deadlines for opting-out of the program will vary. However, requests in writing must be honored at any time of the program.

Family Life Education Program Lesson Objectives

The objectives for each grade level are provided below. If you have any questions, feel free to call Brenda Fuller, K-12 Health and Physical Education coordinator (757) 263-1479.

Grade 2

Objective 2.1 Demonstrate appropriate responses to protect oneself from inappropriate actions by strangers, neighbors, family members, and others (which may include information such as sexual abuse)

Grade 5

Objective 5.1 Explain the need to say "NO" to harmful behaviors or activities

Objective 5.2 Identify the emotional and physical changes that occur during puberty (Gender Separated Lesson)

Objective 5.3 Describe threatening or uncomfortable situations and explain methods that can be used for protection

Grade 6

Objective 6.1 Describe the process of human reproduction and fetal development (Gender Separated Lesson)

Objective 6.2 Describe the etiology, effects, and transmission of HIV and the prevention of AIDS

Objective 6.3 Recognize types of child abuse and neglect

Grade 7

Objective 7.1 Explain the physiological changes of adolescence (Gender Separated Lesson)

Objective 7.2 Explain the meaning of sexual abstinence and contraception as a means of birth control and family planning within a marriage (Gender Separated Lesson)

Objective 7.3 Identify the issues associated with the development of friendships and peer relationships as they relate to dating behaviors

Objective 7.4 Explain techniques for preventing and reporting sexual assault and molestation

Grade 9

Objective 9.1 Explain the process of reproduction from conception to childbirth (Gender Separated Lesson)

Objective 9.2 Identify the issues related to teenage pregnancy (Gender Separated Lesson)

Objective 9.3 Explain the factors related to sexual assault

Grade 10

Objective 10.1 Identify factors to be considered in a dating relationship and its evolution into a courtship and marital situation

Objective 10.2 Discuss and justify the advantages of abstinence from premarital sexual activity (Gender Separated Lesson)

Objective 10.3 Summarize current research and findings related to HIV/AIDS

How to Talk to Your Children About Matters Regarding Sexual Behavior

Your child's school does not want to replace you as your child's source of information regarding sexual behavior and the spread of HIV/AIDS. Formal training in your child's school is intended to build on the attitudes, values, and beliefs that you have already instilled in your child. You, as the parent or guardian, must bear the responsibility for teaching your child sexually responsible behavior.

Many parents find it difficult to talk about topics related to sexuality with their children and discourage such discussion. When your child seeks information from you, be aware that your silence can communicate the message that the discussion of sexuality is shameful and unhealthy, whereas your willingness to answer all of his or her questions will establish your lines of communication for future discussions.

Children's questions vary when it comes to sexual matters. Your child is influenced by what he or she sees on television, in magazines, on the Internet, and on billboards; what is heard in conversations with peers; and the verbal and nonverbal cues learned from you about your own attitudes toward love, relationships, sexual feelings, and self-esteem.

When your child asks you questions, you should:

- Be honest with your child about your own level of knowledge. If your child asks you a question that you cannot answer, it is okay to tell him or her that you do not know the answer but will find out.
- Answer your child's questions in simple language that he or she can understand.
- Avoid giving body parts nicknames.
- Ask your child what he or she has heard or knows already about the question asked.
- Check to see that your child understands your answer with a statement such as "Does this answer the question you had?"

Your child may ask you questions about your own sexual behavior. Personal questions can present you with a real challenge. You have to decide how much information you want to share with your child. You will not be a “bad” parent if you decide not to respond. You can tell your child that some things are private or you can choose to respond to a question such as “When was the first time you...?” in general terms about how people make decisions regarding sexual behavior. How much you share with your child will depend on your child’s maturity, your own feelings, and the type of relationship you have established with your child.

It is to your advantage to be an approachable parent. You need to make yourself available and willing to answer your child’s questions. You need to answer without anger or intolerance. Once you give your child the feeling that you do not want to discuss sexual matters, he or she will seek the answers someplace else. Often that “someplace else” is an uninformed peer or older adolescent. By being approachable, you can provide your child with the tools to become a sexually responsible adult.

Here are some important things for you to consider as your child’s educator regarding sexual matters:

- You are the primary sex educator for your children. It is your right as well as your responsibility to communicate your family’s specific values about sexuality. You should tell your child your beliefs and what you want for him or her.
- Although it is best to start talking with your child when he or she is young, it is never too late to start discussion. Also, keep in mind that one conversation will not accomplish the task of teaching your child about sexually responsible behavior and your family values.
- Be clear about your own values and beliefs, and be prepared to express them to your children.
- Don’t wait for your child to ask questions about sexuality. Take advantage of situations when you are alone with your child, such as in the car, to start conversations.
- You do not have to be an expert or feel comfortable with the topic of sexuality to educate your child about sexually responsible behavior.
- Keep a variety of pamphlets, books, etc., around the house for your child to read that you have read first. These are available through your minister, the public health department, your doctor, primary health clinics, etc. Also there are numerous family sites on the Internet that offer information for teens and advice for parents.
- Finally, do not feel that you have wasted your time because your child demonstrates a lack of interest or response during the conversation. Children often absorb more information than you realize.

This information was adapted from the following resources: *When the Subject is Sex - Attitudes and Answers for Young Children* - Pamela Wilson and *Some Advice on Raising Sexually Responsible Children* - Betsy Matthews Wright. If you want additional information, there is a wealth of information available in the community and on the Internet for parents and guardians who wish to further their education regarding HIV/AIDS. Here are some sources of information:

- American Red Cross (Health & Safety), (757) 446-7700 Ext. 1
- Centers for Disease Control and Prevention, 1-800-232-4636 or (www.cdc.gov)
- Eastern Virginia Medical School - The Medical College of Hampton Roads Library, (757) 446-5851; Eastern Regional AIDS Resource and Consultation Center, (757) 446-6170 (resource directory is available upon request)
- Norfolk State University Library, (757) 823-8517
- Old Dominion University Library, (757) 683-4154
- Regent University Library, (757) 352-4150
- Sentara Virginia Beach General Hospital, Explore Health, (www.sentara.com/HealthInfo/ExploreHealthWithSentara/Pages/ExploreHealthWithSentara.aspx)

- United States Department of Health and Human Services, (www.hhs.gov) and Health Finder, (www.healthfinder.gov), healthfinder@hhs.gov, (757) 518-2700
- Virginia Beach Public Libraries and Bookmobiles, Information Services, (757) 385-0150
- Virginia Wesleyan College Library, (757) 455-3224

Facts Every Parent Should Know Regarding HIV/AIDS

HIV (Human Immunodeficiency Virus) is the virus that can cause AIDS (Acquired Immune Deficiency Syndrome). Individuals who are infected with HIV can pass it to other individuals by sharing intravenous (IV) drug needles and other equipment, by having sexual contact where there are vaginal secretions or semen is released, or by allowing their blood to enter into an open wound of another person. There is a risk of HIV infection from tattooing and body piercing when contaminated instruments and needles are used. Pregnant women who are infected can pass HIV to their fetus in the womb and/or during birth. Also, infected mothers who breast-feed their babies can transmit the virus.

- Abstinence is the only true way to avoid sexually transmitted HIV infection.
- Anyone who engages in sexual intercourse outside of a long-term monogamous relationship is at risk for receiving HIV and unknowingly passing it to someone else.
- HIV can be carried by an infected person for as long as 10-12 years before he or she may develop the life-threatening diseases associated with AIDS. Individuals infected with HIV can transmit the virus to another person at any stage of their illness. They may not even know that they have HIV and will not know without a blood test. Today there are medical treatments that can slow down the rate at which HIV weakens the immune system. There are other treatments that can prevent or cure some of the illnesses associated with AIDS, though the treatments do not cure AIDS itself.
- The diagnosis of AIDS occurs when the HIV-infected person's level of CD4+ T-cells in the immune system drops below 200 cells per cubic millimeter of blood or an infection develops that a person with a normal healthy immune system could resist. These infections are called "opportunistic infections." The most common are PCP (pneumocystis carinii pneumonia), Kaposi's sarcoma, uncontrollable herpes, and candida or yeast infections.
- Blood testing for HIV is 99% accurate. The test for the presence of HIV in the blood is actually a test of the number of antibodies the infected person is producing to fight the virus. The average time for antibodies to reach a detectable level is 8-12 weeks. However, it may take as long as 1-3 years to detect the presence of HIV in the blood. During this time, an infected individual whose tests are negative is still capable of infecting others.
- As a result of the testing of donated blood, transfusions given today are considered safe. Prior to 1985 when testing of blood for HIV began, persons receiving transfusions for trauma, major surgeries, hemophilia, etc., may have been infected and tested positive for HIV.
- People with HIV live in every state in the United States and in other countries of the world. People with HIV look like anyone else. People from the city, the country, and the suburbs have HIV. People of all races and all ages can have HIV.
- The tendency to avoid discussion regarding sexual activity with your child can be great. However, a frank discussion about the transmission of the virus through sexual contact provides your child with factual information. You should use your own discretion on these topics and clearly state your value system and feelings to your child.
- Since blood is the other major way of spreading HIV, education about IV drug use should be stressed. Children who experiment with IV drug use would more than likely share needles, since this equipment is not easy for them to obtain. More child-oriented, blood-sharing activities include "blood brothers," tattoos, and home ear piercing. The dangers of these activities need to be stressed as any blood transmission from one person to another can spread the virus.

- There are no documented cases of HIV being transmitted during participation in sports. The very low risk of transmission during sports participation would involve sports with direct body contact in which bleeding might be expected to occur.
- There are conflicting studies and statistics regarding the failure rate of condoms. If you wish to discuss condoms with your children, you should keep in mind that few sexually active teenagers use condoms consistently and correctly.

In your discussion, you should include the following information:

- Condoms are not 100 percent effective in preventing HIV and other sexually transmitted diseases (STDs).
- Condoms can be damaged through storage in a wallet or glove compartment.
- Condoms must be used consistently and correctly to provide maximum protection.
- Any sexual contact with an HIV-infected person is never safe.

As parents, you need to stress the ways HIV can be spread. It is equally important for you to discuss with your child the ways HIV is not spread. These include:

- being near, touching, or shaking hands with an infected person
- eating in a restaurant
- using public restrooms, water fountains, and telephones
- caring for a person with HIV/AIDS if proper procedures are used
- donating blood
- being bitten by mosquitoes and other insects

Revised Fall, 2011. Information provided from the following sources: AIDS - A Guide to Survival; The Houston Academy of Medicine; Eastern Virginia Medical School; Virginia Beach Public Health Department; U.S. Department of Public Health and Centers for Disease Control and Prevention