

New York State School Health Education Requirements Summary

Schools play an essential role in promoting the health and safety of children and adolescents by helping them to establish lifelong health patterns. Today's health education curricula reflect the growing body of research that emphasizes:

- Teaching functional health information (essential knowledge)
- Shaping personal values and beliefs that support healthy behaviors.
- Shaping group norms that value a healthy lifestyle.
- Developing the essential health skills necessary to adopt, practice, and maintain health-enhancing behaviors.

School Health Education in NYS is based on laws, regulations, and guidelines and is developed in alignment with national, state, and local standards. School programs should also use the Whole School, Whole Community, Whole Child (WSCC) model to promote positive health behaviors.

Health Education Requirements in Commissioner's Regulation 135.1

Commissioner's Regulations 135.1 (j): Health Education means instruction in the understandings, attitudes, and behavior in relation to the several dimensions of health, including but not limited to the misuse of alcohol, tobacco, and other drugs, the prevention and detection of certain cancers, safety, mental health, nutrition, dental health, sensory awareness, disease prevention and control, environmental and public health, consumer health, first aid, and other health-related areas.

Health Education Requirements in Commissioner's Regulation 135.3

Provision for health education, CR 135.3 (a): It shall be the duty of the trustees and boards of education to provide a satisfactory program in health education in accordance with the needs of pupils in all grades.

Elementary Schools, CR 135.3 (b): Health education must be taught as part of a sequential program in grades K-6.

- Health education in the elementary school grades shall be taught by the regular classroom teacher.
- The teacher is responsible for providing pupil participation in planned activities for developing attitudes, knowledge that contributes to their sense of self-worth, respect for their bodies and ability to make constructive decisions regarding their social and emotional, physical health and mental health.
- All elementary schools shall provide appropriate instruction concerning acquired immune deficiency syndrome (AIDS) as part of the sequential health education program for all pupils, grades K-6.

Secondary Schools, CR 135.3 (c): The secondary school curriculum shall include health education as a constant for all pupils.

- Health education shall be required for all pupils in the junior and senior high school grades and shall be taught by teachers holding a certificate to teach health.
- In addition to continued health guidance in the junior high school grades, provision shall also be made for a separate one-half-year course.
- In addition to continued health guidance in the senior high school, provision shall also be made for an approved one-half unit course.
- All secondary schools shall provide appropriate instruction concerning the Acquired Immune Deficiency Syndrome (AIDS) as part of required health education courses in grades 7-8 and grades 9-12.

New York State School Health Education Requirements Summary

Health Education Coordinator: CR 135.3(c) (1)

A member of each faculty with approved preparation shall be designated as health coordinator in order that the entire faculty may cooperate in realizing the potential health-teaching values of the school programs. The health coordinator shall ensure that related school courses are conducted in a manner supportive of health education and provide for cooperation with community agencies and use of community resources necessary for achieving a complete school-community health education program.

Incidental Teaching

A superintendent of schools may assign certified teachers to teach a subject not covered by their certificate (incidental teaching) for a period not to exceed five classroom hours per week when no certified or qualified teacher is available.

However, in response to the COVID-19 crisis, a superintendent of schools may assign certified teachers to teach a subject not covered by their certificate for a period not to exceed ten classroom hours a week during the 2020-2021 school year, when no certified or qualified teacher is available after extensive and documented recruitment.

Please note that teachers who do not hold special education certification cannot have incidental teaching assignments where special education certification is required. For example, a certified mathematics teacher could not teach a mathematics special class via incidental teaching; special education certification is required to teach a special class.

The Commissioner of Education has delegated the approval of incidental teaching to BOCES. School districts should contact their local BOCES for information on requesting approval.

For additional information regarding incidental teaching, please see 8 CCR-NY NYS Commissioner's Regulations 80-5.3.

New York State School Health Education Requirements Summary

Health Education Required Topics, Instructional Staff, and Required Grades

Links to the laws and regulations about the instruction below are included on page 7

Topic	Instructional Staff*	Required Grades
Alcohol/Other Drugs	K-6 instructional personnel Certified health teacher Certified health teacher	Elementary K-6 Middle School High School
Cancer Prevention	Certified health teacher	High School
CPR AED Instruction	Certified health teacher or instructional personnel	High School
Child Sexual Abuse and Exploitation Prevention (Erin's Law)	K-6 instructional personnel, guidance counselors, social workers. For 7-8 th grade students, it is <i>recommended</i> that it be embedded within health instruction	K-6 7-8
HIV/AIDS	K-6 instructional personnel Certified health teacher Certified health teacher	Elementary K-6 Middle School High School
Mental Health	K-6 instructional personnel Certified health teacher Certified health teacher	Elementary K-6 Middle School High School

*Instructional staff may choose to invite subject matter specialists to teach on specific topics. However, the instructional staff maintains responsibility for the class and the curriculum.

NYS Standards for Learning in Health Education

1. Standard: Personal Health and Fitness Students will have the necessary knowledge and skills to establish and maintain physical fitness, participate in physical activity, and maintain personal health.
2. Standard: A Safe and Healthy Environment. Students will acquire the knowledge and ability necessary to create and maintain a safe and healthy environment.
3. Standard: Resource Management. Students will understand and be able to manage their personal and community resources.

A Guidance Document for Achieving the New York State Standards in Health Education

NYSED's, A Guidance Document for Achieving the New York State Standards in Health Education is a critical resource for health educators that focuses on best practices in health education instruction and assessment. It contains seven developmental, personal, and social skills, comprised of multiple sequential sub-skills. The seven skills are self-management, relationship management, stress management, communication, planning and goal setting, decision-making, and advocacy. Mastery of each skill enables students to enhance their personal, family, and community health and safety. All seven skills are important when teaching positive youth development. This guidance document can be found on the [NYSED Health Education website](#), along with Commissioner's Regulation §135.3 and other health education resources.

New York State School Health Education Requirements Summary

New York State Mandated School Health Education Details on Specific Content Areas

CPR

The instruction of hands-only CPR pursuant to Education Law §804-a does not require the instructor to be an authorized CPR/AED instructor because such hands-only instruction will not result in a course completion card. Commissioner's Regulations 100.2(c)(11) indicate the instruction requirements:

11) students in senior high schools shall be provided instruction in hands-only cardiopulmonary resuscitation and the use of an automated external defibrillator.

(i) Standards for such instruction shall be based on a nationally recognized instructional program that utilizes the most current guidelines for cardiopulmonary resuscitation and emergency cardiovascular care issued by the American Heart Association or a substantially equivalent organization and is consistent with the requirements of the programs adopted by the American Heart Association or the American Red Cross, and shall incorporate instruction designed to:

- (a) recognize the signs of a possible cardiac arrest and call 911;
- (b) provide an opportunity to demonstrate the psychomotor skills necessary to perform hands-only compression cardiopulmonary resuscitation; and
- (c) provide awareness in the use of an automated external defibrillator.

(ii) Nothing in this paragraph shall prohibit a voluntary course of instruction in comprehensive cardiopulmonary resuscitation provided by a properly certified instructor in cardiopulmonary resuscitation, which results in a certificate pursuant to the provisions of Education Law section 804-c. Students who receive such instruction in comprehensive cardiopulmonary resuscitation pursuant to the provisions of Education Law section 804-c shall be deemed to meet the requirements of this paragraph.

(iii) Nothing in this paragraph relating to required instruction in hands-only cardiopulmonary resuscitation and instruction in the use of an automated external defibrillator shall require a licensed teacher to possess certification for such instruction that does not result in certification in cardiopulmonary resuscitation or certification in the operation of an automated external defibrillator and its instruction.

(iv) A student identified with a disability that precludes his or her ability to participate in hands-only cardiopulmonary resuscitation and the use of an automated external defibrillator may be exempted from the instruction requirement in this paragraph if the student's individualized education program developed in accordance with section 200.4 of this Title or accommodation plan developed pursuant to section 504 of the Rehabilitation Act of 1973 states that the student is physically or cognitively unable to perform the tasks included in the instruction.

(v) Notwithstanding the provisions of this subdivision, senior high schools shall be exempted from providing an opportunity to students to demonstrate the psychomotor skills necessary to perform hands-only compression cardiopulmonary resuscitation required by this paragraph for the 2019-2020 school year where such schools were unable to provide such opportunity due to school closures ordered pursuant to an Executive Order of the governor pursuant to a State of emergency for the COVID-19 crisis.

New York State School Health Education Requirements Summary

Cancer

Commissioner's Regulations 135.3(a) requires health instruction includes methods of prevention and detection of certain cancers. Education Law Article 17 §804 (5) requires that this includes but is not limited to breast cancer, skin cancer, testicular cancer, and other cancers where certain preventive measures have become generally accepted, and certain detection methods have been adopted and recommended generally to the public. Such instruction shall be an integral part of a required health education course at the senior high school level, in addition to continued health guidance in senior high schools. Any such course shall be taught by teachers holding a certificate to teach health.

HIV/AIDS

Commissioner's regulation §135.3 requires school districts to provide health education instruction in grades K-12 that includes developmentally appropriate instruction in HIV/AIDS concerning the nature of the disease, methods of transmission, and methods of prevention. HIV/AIDS prevention education begins with a supportive learning environment that enhances social and emotional learning and uses a comprehensive, coordinated school health Whole School, Whole Community, Whole Child (WSCC) Model approach. Consistent with the regulation, individual school district HIV/AIDS prevention efforts are locally determined and should be consistent with community values. It is imperative that young people hear a consistent message about the importance of making sexually healthy decisions and that abstinence is the most effective prevention strategy regarding HIV/AIDS and STI prevention.

Note: No pupil shall be required to receive instruction concerning the methods of prevention of AIDS if the parent or legal guardian of such pupil has filed with the principal of the school which the pupil attends a written request that the pupil not participate in such instruction, with an assurance that the pupil will receive such instruction at home.

Mental Health

Education Law §804 was amended by Chapter 390 of the Laws of 2016 and Chapter 1 of the Laws of 2017 to clarify that required health education in schools must include instruction in mental health K-12. Commissioner's Regulation 135.4(a) requires health instruction include the several dimensions of health, including mental health and the relation of physical and mental health, and shall be designed to enhance student understanding, attitudes, and behaviors that promote health, wellbeing, and human dignity.

New York State School Health Education Requirements Summary

Legislation and Regulations Related to School Health

HIV/AIDS Advisory Council [NYS Education Commissioner's Regulation (8 NYCRR) 135.3 (b)(2) and (c)(2)(i)]

In public schools, the board of education shall establish an advisory council which shall be responsible for making recommendations concerning the content, implementation, and evaluation of an AIDS instruction program. The advisory council shall consist of parents, school board members, appropriate school personnel, and community representatives, including representatives from religious organizations. [View the regulation here.](#)

Wellness Policy (Section 204 Of Public Law 111-296, and 7 CFR Part 210)

All schools participating in the Federal School Lunch Program or School Breakfast Program must have a local wellness policy that meets the minimum standards designed to promote sound nutrition, student health, reduce childhood obesity, create a school nutrition environment that promotes students' health, wellbeing, and ability to learn. Teams must include parents, students, representatives of the school food authority, teachers of physical education, school health professionals, the school board, school administrators, and the general public to participate in the development, implementation, and periodic review and update of the local school wellness policy. The school must inform and update the public about the content and implementation of the local school wellness policy. [View the law and Code of Federal Regulations \(CFR\) here.](#)

Education Law Article 19, § 915. Prohibiting the Sale of Certain Sweetened Foods

From the beginning of the school day until the end of the last scheduled meal period, no sweetened soda water, no chewing gum, no candy including hard candy, jellies, gums, marshmallow candies, fondant, licorice, spun candy, and candy-coated popcorn, and no water ices except those which contain fruit or fruit juices shall be sold in any public school within the state. [View the law here.](#)

The Healthy Hunger-Free Kids Act of 2010

A federal law directed the United States Department of Agriculture (USDA) to establish nutrition standards for all foods and beverages sold to students in school during the school day, including foods sold through school fundraisers. Included in this legislation are the National School Lunch and Breakfast programs, the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), the Child and Adult Care Food Program (CACFP), the Summer Food Service Program, the Afterschool Meal Program, and the Supplemental Nutrition Assistance Program Education (SNAP-Ed). [View the United States Department of Agriculture \(USDA\) Healthy Hunger-Free Kids Act webpage and legislation here.](#)

National School Lunch Program and School Breakfast Program: Nutrition Standards for All Foods Sold in School as Required by the Healthy, Hunger-Free Kids Act of 2010 Interim Final Rule (7 CFR Parts 210 and 220) – The National School Lunch Program and School Breakfast Program regulations to establish nutrition standards for all foods sold in schools, other than food sold under the lunch and breakfast programs. This is referred to as **Smart Snacks in School**.

[View the USDA Smart Snacks in School webpage and Interim Final Rule here.](#)

New York State School Health Education Requirements Summary

NYS Laws and NYSED Commissioner's Regulations Related to School Health Education

JHS refers to Junior High School and SHS refers to Senior High School

Click on the underlined law or regulation to view it

Law/Regulation	Instructional Content	Grades/Level
<u>EDN Law 801-A</u>	Instruction in civility, citizenship and character education; tolerance, respect for others, dignity instruction that increases awareness and sensitivity to bullying, harassment, and/or discrimination in the relations of people of different races, weights, national origins, ethnic groups, religions, religious practices, mental or physical abilities, sexual orientations, genders, and sexes. Such component shall include instruction of <u>safe, responsible use of the internet</u> and electronic communications.	K-12
<u>EDN Law 803-A</u> <u>EDN Law 803-B</u> <u>8 NYCRR 100.2 (j) (1)(i)</u>	Instruction in the prevention of child abduction. Instruction in the prevention of child sexual exploitation and child sexual abuse. Instruction in avoidance of child sexual abuse as part of counseling/guidance programs, in the coordination of teaching staff.	K-8 K-8 K-6
<u>EDN Law 804</u>	Instruction in mental health, alcohol, drugs, tobacco abuse, and other drugs that must include but is not limited to heroin and opioids and the prevention and detection of certain cancers. <ul style="list-style-type: none"> • Instruction in mental health. • Instruction in driving under the influence of alcohol or drugs. • Instruction to prevent/detect certain cancers (including breast, testicular, skin). • Instruction to develop skills to recognize, cope, address potential violence. 	Grade dependent K-12 SHS SHS By no later than JHS
<u>EDN Law 804-C</u> <u>EDN Law 804-D</u> <u>8 NYCRR 100.2 (c)(11)</u>	Instruction in Hands-Only Cardiopulmonary Resuscitation. (CPR) and Automatic External Defibrillators (AEDs).	SHS
<u>8 NYCRR 135.3 (a), (b), and (c)</u>	Instruction in HIV/AIDS prevention	K-12
<u>8 NYCRR 135.3 (a)</u>	Provide a satisfactory program in health education in accordance with the needs of pupils in all grades.	K-12
<u>8 NYCRR 135.3 (b)</u>	Taught as part of a sequential program by the regular classroom teacher.	K-6
<u>8 NYCRR 135.3 (c)</u>	Required for all pupils in the junior and senior high school. Taught by teachers holding a certificate to teach health. In junior high school grades- a separate one-half-year course. In the senior high school- an approved one-half unit course.	7-12
<u>8 NYCRR 135.3 (c)(2)(ii)</u>	Boards of education or trustees may make condoms available to pupils as part of the district's AIDS prevention instruction program.	Secondary schools

New York State School Health Education Requirements Summary

Education Commissioner's Regulations (8 NYCRR) 135.3

(a) Provision for health education.

It shall be the duty of the trustees and boards of education to provide a satisfactory program in health education in accordance with the needs of pupils in all grades. Such program shall include the several dimensions of health, including mental health and the relation of physical and mental health, and shall be designed to enhance student understanding, attitudes, and behaviors that promote health, wellbeing, and human dignity. This program shall include, but shall not be limited to, instruction concerning the misuse of alcohol, tobacco, and other drugs and the prevention and detection of certain cancers.

(b) Health education in elementary schools.

(1) The elementary school curriculum shall include a sequential health education program for all pupils, grades K-6. In the kindergarten and primary grades, the teacher shall provide for pupil participation in planned activities for developing attitudes, knowledge that contributes to their sense of self-worth, respect for their bodies and ability to make constructive decisions regarding their social and emotional, physical health and mental health. Personal health guidance shall also be provided according to the individual needs of pupils. This guidance shall include the development of specific habits necessary to maintain good individual and community health. In addition to continued health guidance, provision shall be made in the school program of grades 4-6 for planned units of teaching, which shall include health instruction through which pupils may become increasingly self-reliant in solving their health problems and those of the group. Health education in the elementary school grades shall be taught by the regular classroom teachers.

(2) All elementary schools shall provide appropriate instruction concerning the acquired immune deficiency syndrome (AIDS) as part of the sequential health education program for all pupils, grades K-6. Such instruction shall be designed to provide accurate information to pupils concerning the nature of the disease, methods of transmission, and methods of prevention; shall stress abstinence as the most appropriate and effective premarital protection against AIDS, and shall be age-appropriate and consistent with community values. No pupil shall be required to receive instruction concerning the methods of prevention of AIDS if the parent or legal guardian of such pupil has filed with the principal of the school which the pupil attends a written request that the pupil not participate in such instruction, with an assurance that the pupil will receive such instruction at home. In public schools, such instruction shall be given during an existing class period using existing instructional personnel, and the board of education or trustees shall provide appropriate training and curriculum materials for the instructional staff who provide such instruction and instructional materials to the parents who request such materials. In public schools, the board of education or trustees shall establish an advisory council which shall be responsible for making recommendations concerning the content, implementation, and evaluation of an AIDS instruction program. The advisory council shall consist of parents, school board members, appropriate school personnel, and community representatives, including representatives from religious organizations. Each board of education or trustees shall determine the content of the curriculum and approve its implementation and shall be responsible for the evaluation of the district's AIDS instruction program.

New York State School Health Education Requirements Summary

(c) Health education in secondary schools.

(1) The secondary school curriculum shall include health education as a constant for all pupils. In addition to continued health guidance in the junior high school grades, provision shall also be made for a separate one-half-year course. In addition to continued health guidance in the senior high school, provision shall also be made for an approved one-half unit course. Health education shall be required for all pupils in the junior and senior high school grades and shall be taught by teachers holding a certificate to teach health. A member of each faculty with approved preparation shall be designated as health coordinator in order that the entire faculty may cooperate in realizing the potential health-teaching values of the school programs. The health coordinator shall ensure that related school courses are conducted in a manner supportive of health education and provide for cooperation with community agencies and use of community resources necessary for achieving a complete school-community health education program.

(2) (i) All secondary schools shall provide appropriate instruction concerning the acquired immune deficiency syndrome (AIDS) as part of required health education courses in grades 7-8 and grades 9-12. Such instruction shall be designed to provide accurate information to pupils concerning the nature of the disease, methods of transmission, and methods of prevention; shall stress abstinence as the most appropriate and effective premarital protection against AIDS, and shall be age-appropriate and consistent with community values. No pupil shall be required to receive instruction concerning the methods of prevention of AIDS if the parent or legal guardian of such pupil has filed with the principal of the school which the pupil attends a written request that the pupil not participate in such instruction, with an assurance that the pupil will receive such instruction at home. In public schools, such instruction shall be given during an existing class period using existing instructional personnel, and the board of education or trustees shall provide appropriate training and curriculum materials for the instructional staff who provide such instruction and instructional materials to the parents who request such materials. In public schools, the board of education or trustees shall establish an advisory council which shall be responsible for making recommendations concerning the content, implementation, and evaluation of an AIDS instruction program. The advisory council shall consist of parents, school board members, appropriate school personnel, and community representatives, including representatives from religious organizations. Each board of education or trustees shall determine the content of the curriculum and approve its implementation, and shall be responsible for the evaluation of the district's AIDS instruction program.

(2) (ii) Boards of education or trustees that make condoms available to pupils as part of the district's AIDS instruction program shall:

- (a) submit a condom distribution policy to the advisory council for appropriate recommendations;
- (b) make condoms available only to pupils who participate in an appropriate AIDS instruction program as defined in this section;
- (c) provide each pupil receiving condoms with accurate and complete personal health guidance as to the risks of disease that may result from the pupil's use or misuse of such product, which appropriately takes into account the child's age;
- (d) assure that such personal health guidance is provided by health service personnel or school personnel trained and supervised by competent health professionals or health educators; and
- (e) submit for approval by the commissioner a plan for the training of health service personnel, as defined in section 136.1(c) of this Title, or school personnel who will provide such personal health guidance. Such plan shall be approved upon a finding of the commissioner that the training is adequate to prepare such personnel or school personnel to provide the required personal health guidance in an effective manner.