§ 115C-81.30. Reproductive health and safety education provided by local school administrative units.

(a) Each local school administrative unit shall provide a reproductive health and safety education program commencing in the seventh grade. Materials used in this instruction shall be age-appropriate for use with students. Law enforcement agencies, criminal justice agencies, and nongovernmental organizations with experience in sex-trafficking prevention and awareness may provide materials and information. Information conveyed during the instruction shall be objective and based upon scientific research that is peer reviewed and accepted by professionals and credentialed experts in any of the following fields: sexual health education, adolescent psychology, behavioral counseling, medicine, human anatomy, biology, ethics, or health education. Reproductive health and safety instruction provided by the local school administrative units shall do the following:

(1) Teach that abstinence from sexual activity outside of marriage is the expected standard for all school-age children.

(2) Present techniques and strategies to deal with peer pressure and offering positive reinforcement.

(3) Present reasons, skills, and strategies for remaining or becoming abstinent from sexual activity.

(4) Teach that abstinence from sexual activity is the only certain means of avoiding out-of-wedlock pregnancy, sexually transmitted diseases when transmitted through sexual contact, including HIV/AIDS, and other associated health and emotional problems. As used in this section, "HIV/AIDS" means Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome.

(5) Teach that a mutually faithful monogamous heterosexual relationship in the context of marriage is the best lifelong means of avoiding sexually transmitted diseases, including HIV/AIDS.

(6) Teach the positive benefits of abstinence until marriage and the risks of premarital sexual activity.

(7) Provide opportunities that allow for interaction between the parent or legal guardian and the student.

(8) Provide factually accurate biological or pathological information that is related to the human reproductive system.

(9) Teach about the preventable risks for preterm birth in subsequent pregnancies, including induced abortion, smoking, alcohol consumption, the use of illegal drugs, and inadequate prenatal care.

(10) Teach about sexually transmitted diseases. Instruction shall include how sexually transmitted diseases are and are not transmitted, the effectiveness and safety of all federal Food and Drug Administration (FDA)-approved methods of reducing the risk of contracting sexually transmitted diseases, and information on local resources for testing and medical care for sexually transmitted diseases. Instruction shall include the rates of infection among pre-teen and teens of each known sexually transmitted disease and the effects of contracting each sexually transmitted disease. In particular, the instruction shall include information about the effects of contracting the Human Papilloma Virus, including sterility and cervical cancer.

(11) Teach about the effectiveness and safety of all FDA-approved contraceptive methods in preventing pregnancy.

(12) Teach awareness of sexual assault, sexual abuse, and risk reduction. The instruction and materials shall:

a. Focus on healthy relationships.
b. Teach students what constitutes sexual assault and sexual abuse, the causes of those behaviors, and risk reduction.
c. Inform students about resources and reporting procedures if they experience sexual assault or sexual abuse.
d. Examine common misconceptions and stereotypes about sexual assault and sexual abuse.

(13) Teach about sex trafficking prevention and awareness. Each local school administrative unit shall:
a. Collaborate with a diverse group of outside consultants where practical, including law enforcement with expertise in sex-trafficking prevention education, to address the threats of sex trafficking.
b. Collaborate with a diverse group of outside consultants, including law enforcement with expertise in sex trafficking, on a referral protocol for high-risk pupils and minors.

(b) Each local board of education shall adopt a policy and provide a mechanism to allow a parent or a legal guardian to withdraw his or her child from instruction required under subdivisions (10) through (13) of subsection (a) of this section.

(c) Parental Review and Consent. – Each school year, before students may participate in any portion of (i) a program that pertains to or is intended to impart information or promote discussion or understanding in regard to the prevention of sexually transmitted diseases, including HIV/AIDS, or to the avoidance of out-of-wedlock pregnancy or (ii) a reproductive health and safety education program, whether developed by the State or by the local board of education, the parents and legal guardians of those students shall be given an opportunity to review the objectives and materials as provided in G.S. 115C-81.25(d). Local boards of education shall adopt policies to provide opportunities either for parents and legal guardians to consent or for parents and legal guardians to withhold their consent to the students' participation in any or all of these programs.

(d) Information on Contraceptives and Abortion Referral Services. – Students may receive information about where to obtain contraceptives and abortion referral services only in accordance with a local board's policy regarding parental consent. Any instruction concerning the use of contraceptives or prophylactics shall provide accurate statistical information on their effectiveness and failure rates for preventing pregnancy and sexually transmitted diseases, including HIV/AIDS, in actual use among adolescent populations and shall explain clearly the difference between risk reduction and risk elimination through abstinence. The Department of Health and Human Services shall provide the most current available information at the beginning of each school year.

(e) Prohibition on Distribution of Contraceptives. – Contraceptives, including condoms and other devices, shall not be made available or distributed on school property.

(f) School Health Coordinators. – School health coordinators may be employed to assist in the instruction of any portion of the comprehensive school health education program. Where feasible, a school health coordinator should serve more than one local school administrative unit. Each person initially employed as a State-funded school health coordinator after June 30, 1987, shall have a degree in health education.

(g) Duty of Local School Administrative Units. – Each local school administrative unit shall provide a comprehensive school health education program that meets all the requirements of this section and all the objectives established by the State Board. Each local board of education may expand on the subject areas to be included in the program and on the instructional objectives to be met. (2017-126, s. 5.)