



**House  
Legislative  
Analysis  
Section**

Manufacturer's Bank Building, 12th Floor  
Lansing, Michigan 48909  
Phone: 517/373-6466

**AIDS EDUCATION FOR SCHOOLTEACHERS**

**House Bill 4073 as enrolled  
Second Analysis (7-31-90)**

**RECEIVED**

**OCT 08 1990**

**Sponsor: Rep. Teola P. Hunter**

**House Committee: Education**

**Senate Committee: Education & Mental Health**

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**THE APPARENT PROBLEM:**

Public Act 185 of 1987 amended the School Code to specifically require public schools to teach about the transmission and prevention of acquired immunodeficiency syndrome (AIDS). This was a refinement of the already existing requirement that all state public schools provide instruction on the principal modes by which dangerous communicable diseases are spread and the best methods of prevention. Public Act 185, however, failed to specify who should teach children about AIDS or what training would be required of them.

**THE CONTENT OF THE BILL:**

The bill would amend the School Code to specify that those who teach pupils in elementary and secondary public schools about acquired immunodeficiency syndrome (AIDS) — except for licensed health care professionals who have received training on human immunodeficiency virus (HIV) and AIDS — would be required to have special training in HIV infection and AIDS education for young people. The state board of education, in cooperation with the Department of Public Health, would be responsible for training those who trained teachers to teach AIDS education as required in the bill, and would have to provide for the development and distribution to school districts of material for teaching young people about AIDS. The choice of HIV and AIDS education curricula would have to be approved by a school board and implemented in district schools no later than October 1, 1990.

MCL 380.1169

**FISCAL IMPLICATIONS:**

According to the Department of Education, the bill could have budgetary implications for the state since the bill mandates additional training of public school teachers. The bill, under the Headlee Amendment, could cost the state approximately \$150,000 to pay for substitute teachers that would be needed to temporarily fill-in for those teachers who were trained in teaching about AIDS. This assumes 3,000 substitutes would be needed at an average cost of \$50 each per day. The Michigan Model for Comprehensive School Health Education, through its regional coordinators, could provide trained teachers to accomplish the bill's mandate. Also, since fiscal year 1986-87 the state has received federal money to develop, implement, and evaluate a state-wide K-12 program to prevent the spread of AIDS and HIV infection; costs to both the Departments of Education and Public Health would continue to be borne by funds from this grant. Costs to the Department of Education would be incurred, however, if federal funds from this grant were no longer forthcoming. (2-27-90)

**ARGUMENTS:**

**For:**

The legislature decided in 1987 that all public schools in the state must provide instruction to students about AIDS, how it is spread, and how its transmission can be

prevented. The bill would ensure that people providing the instruction are properly trained to carry out the task using the most up-to-date teaching techniques. Because there is no vaccine or cure for this fatal disease, education seems to be the best weapon to prevent its spread. Among the most common forms of transmission are intimate sexual contact and the sharing of hypodermic needles, and engaging in certain behaviors or lifestyles significantly increases the risk of infection. Despite high public awareness of AIDS, there exists a great deal of misinformation and misunderstanding. Thus, educational programs about AIDS should be conducted by trained staff who know what they are talking about and know how to present information effectively. Some school districts have already made sure of this; the bill, however, would require that everyone who teaches about AIDS in public schools must be trained to do so. The Departments of Education and Public Health have already prepared a number of people to conduct the necessary training.

**Against:**

Several concerns have been raised about the bill.

- Can parents choose not to have their children taught about AIDS? Parents can withdraw children from sex education programs but not, apparently, from communicable disease education. AIDS education could be a component of either curriculum. (It is, however, specifically cited as a communicable disease.)
- Is the state obligated to pay for the required teacher training due to the Headlee Amendment, which requires the state to pay the cost of mandated local programs? Further, does the bill provide a mandate at all? In any case, is there state funding available for the training (perhaps through the AIDS education component of the Health Initiative Fund) or are school districts expected to bear the cost?
- Despite the importance of AIDS education, the tradition of local control would demand that the need for this kind of education and the manner in which it is delivered is best left to the discretion of local communities. The seriousness of AIDS and public concern over its spread makes it likely that school districts would provide meaningful AIDS education without a state mandate.

**Response:** Long before there was public concern about AIDS, public schools were required to teach about the spread and prevention of communicable diseases and were obligated to keep instructors up-to-date on the material and on effective teaching methods. When the legislature specifically cited the need to teach about AIDS it did so in the context of the communicable disease education requirement. So, this was not a new state-imposed mandate, but an effort to emphasize the importance of teaching about AIDS. Further, it should be noted that polls show that parents overwhelmingly endorse having the schools teach their children about AIDS.

H.B. 4073 (7-31-90)