

Amend HB 2 (senate committee printing) by adding the following appropriately numbered SECTION to the bill and renumbering subsequent SECTIONS of the bill and cross-references to those SECTIONS accordingly:

SECTION \_\_\_\_\_. Section 28.004, Education Code, is amended by amending Subsection (e) and adding Subsection (o) to read as follows:

(e) Any course materials and instruction relating to human sexuality, sexually transmitted diseases, or human immunodeficiency virus or acquired immune deficiency syndrome shall be selected by the board of trustees with the advice of the local school health advisory council and must:

(1) be evidence-based;

(2) present abstinence from sexual activity as the preferred choice of behavior in relationship to all sexual activity for unmarried persons of school age;

(3) [~~2~~] devote more attention to abstinence from sexual activity than to any other behavior;

(4) [~~3~~] emphasize that abstinence from sexual activity, if used consistently and correctly, is the only method that is 100 percent effective in preventing pregnancy, sexually transmitted diseases, infection with human immunodeficiency virus, [~~or~~] acquired immune deficiency syndrome, and the emotional trauma associated with adolescent sexual activity;

(5) [~~4~~] direct adolescents to a standard of behavior in which abstinence from sexual activity before marriage is the most effective way to prevent pregnancy, sexually transmitted diseases, [~~and~~] infection with human immunodeficiency virus, and [~~or~~] acquired immune deficiency syndrome; and

(6) [~~5~~] teach contraception and condom use in terms of human use reality rates instead of theoretical laboratory rates, if instruction on contraception and condoms is included in curriculum content.

(o) In this section, "evidence-based" means information verified or supported by research that is:

(1) conducted in compliance with accepted scientific methods;

(2) published in peer-reviewed journals, if appropriate;

(3) recognized as medically accurate, objective, and complete by mainstream professional organizations and agencies with expertise in the relevant field, including the federal Centers for Disease Control and Prevention and the United States Department of Health and Human Services; and

(4) proven through rigorous, scientific evaluation to achieve positive outcomes on measures of sexual risk behavior or its health consequences.