

Dear Fifth Grade Parent,

The Connecticut State Department of Education requires that students in the elementary school have two years of instruction in AIDS education. This year, as part of the 5th grade Health curriculum, your child will be learning developmentally appropriate information about AIDS. These lessons are intended to help your child develop an awareness of the subject and make appropriate decisions that will help him/her lead a healthy life-style.

As you know, AIDS is a preventable disease that has reached epidemic proportions throughout the world. The key to stopping the spread of AIDS is knowledge. We believe that students need to learn about AIDS in their early school years and about ways to protect themselves.

We will focus on the following objectives:

AWARENESS & ATTITUDES - The students will:

- Review the attitudes & behavior that can help protect them from illness.
- Be aware that abstinence from sexual activity & illegal drug use can help protect them from AIDS.
- Be aware that no one is immune to AIDS.
- Recognize that all people with AIDS are worthy of compassion.

HEALTH PRACTICES - The students will:

- Understand the importance of abstaining from sexual activity & illegal drugs.
- Think ahead to the consequences of decisions.
- Not share needles for injecting drugs, for piercing ears & other body parts, for tattooing, for steroids, or to become blood brothers or blood sisters.
- Use safety precautions with blood: don't touch it and call an adult if someone is bleeding.

AIDS INFORMATION – The students will:

- Distinguish between HIV & AIDS.
- Be aware of the history of and statistics about the AIDS epidemic.
- Describe how germs work.
- Discuss the immune system and the effect of HIV on it.
- Describe methods of transmission, including sharing needles with, having sex with, and blood to blood contact with an HIV infected person.
- Be aware of the signs & stages of HIV/AIDS.
- Describe tests available for detection of HIV.

Please complete the permission form below and return it to me by _____. If you have questions about these lessons, please feel free to call me or my principal.

Sincerely,

Child's Name: _____

Do you give permission for your child to take part in the AIDS lessons? ___YES ___NO

(Parent Signature)

(Date)