

## QSD Comprehensive Sexual Health Education FAQ

Each year, Quincy School District (QSD) has a parent information night to review sexual health curriculum and to give an opportunity for families to opt their student(s) out of all or any part of QSD's comprehensive sexual health curriculum. Due to the spread of COVID-19 in our community, this year's parent night will be in the form of a webinar. The webinar will be on October 21<sup>st</sup> at 5:30pm and promoted on Remind and our social media accounts. The information will be presented in both English and Spanish and will be recorded and available on our website [HERE](#).

This FAQ is meant to address questions about the new law and how that matches our plan in Quincy. Please submit any additional questions to [sexualhealtheducation@qsd.wednet.edu](mailto:sexualhealtheducation@qsd.wednet.edu).

### New State Law

Senate Bill 5395, passed by the Legislature and Washington voters in 2020, went into effect on December 3, 2020 (see [Bulletin 092-20](#)). It requires all schools to provide comprehensive sexual health education (CSHE) by the 2022-23 school year. CSHE is defined in the bill as: Recurring instruction in human development and reproduction that is medically accurate, age-appropriate and inclusive of all students. Instruction must be consistent with [Health Education K-12 Learning Standards](#), which provide a framework for comprehensive instruction and the provisions of Senate Bill 5395.

Current requirements for sexual health education as well as new requirements in the bill are listed below by grade band. For more information about Senate Bill 5395, please visit the [New Legislation](#) page.

OSPI provides technical assistance and support to schools by promoting best practices in HIV/AIDS prevention and sexual health education. [The Guide to Sexual Health Education Implementation in Washington State \(2020\)](#) summarizes legislative requirements and best practices for providing sexual health education in schools. This document is being updated to reflect new legislative requirements.

### **What are the Sexual Health Education Requirements for Grades K-3?**

#### Prior to New State Law

No sexual health content has ever been required for grades K-3. If districts chose to provide sexual health education, it had to be consistent with requirements in the [Healthy Youth Act](#).

#### New State Law

Beginning in the 2022-23 school year, schools must provide [social emotional learning](#) (SEL) to students in grades K-3. SEL provides skills to do things like cope with feelings, set goals, and get along with others. No sexuality content or curriculum will be required, although districts may choose to offer additional instruction in alignment with K-12 Learning Standards.

#### What does this look like in Quincy in Grades K-3?

Quincy School District had already planned to implement a social emotional learning (SEL) curriculum in all grades (K-12) this year. The SEL curriculum for grades K-5 is called [Sanford](#)

[Harmony](#). Teachers were trained in August 2021 for implementation in the 2021-22 school year. Sanford Harmony is “designed to build healthy relationships among students by having them engage in activities that promote understanding and respect.” In grades 6-12, Quincy School District continues teaching social emotional learning in advisory classes with a program called [Character Strong](#). Neither program has sexual content.

## **What are the Sexual Health Education Requirements for Grades 4-5?**

### Prior to New State Law

The only instruction required was HIV/STD prevention, which had to start no later than 5th grade and be provided annually through 12th grade. If districts chose to provide additional sexual health education, it must be consistent with requirements in the Healthy Youth Act.

### New State Law

**Beginning in the 2020-21 school year**, if schools are already providing sexual health education they must ensure that students get age-appropriate instruction on affirmative consent and bystander training.

Affirmative consent is an approach to giving and receiving consent that includes clear, voluntary, enthusiastic permission to engage in sexual activity. It is not just the absence of “no.” In 4th or 5th grade, age-appropriate instruction might focus on hugs or horseplay, handholding, kissing or other touch, as well as virtual contact such as texts or emails or taking photos. Bystander training teaches students how to safely intervene when they see bullying, sexual harassment or unwanted sexual activity. They are included in this legislation as a way for schools to combat the high rates of unwanted sexual contact experienced by youth in our state.

**Beginning in the 2022-23 school year**, schools must start providing comprehensive sexual health education no later than 5th grade. Instruction must be consistent with Health Education K-12 Learning Standards. Grade-level outcomes are provided as examples only and do not represent a required course of instruction.

Required topics of instruction are described in SB 5395, with a focus on helping students understand and respect personal boundaries, develop healthy friendships, and gain a basic understanding of human growth and development. Currently required HIV/STD prevention instruction will continue to be required.

### What does this look like in Quincy in Grades 4-5?

Over five years ago, Quincy School District partnered with Cardea and the Washington State Personal Responsibility Education Program (WA PREP) to conduct a curriculum adoption process that included a team of 23 participants from the schools and community. Read [HERE](#) for the article written about the process.

The committee decided on a program called [Draw the Line](#)/Respect the Line for Grade 5, along with the [KNOW Curriculum](#) for the required HIV/AIDS prevention. Quincy School District has continued to partner with Cardea for professional learning and training as programs are

being evaluated to ensure they include affirmative consent and bystander training. No major changes to the curriculum are anticipated.

### **What are the Sexual Health Education Requirements for Grades 6-8 and 9-12?**

#### Prior to New State Law

The only instruction that was required was HIV/STD prevention, which had to start no later than 5th grade and be provided annually through 12th grade.

If districts chose to provide additional sexual health education, it had to be consistent with requirements in the Healthy Youth Act. Additionally, according to RCW 28A.300.145, instruction must include "age-appropriate information about the legal elements of sexual [sex] offenses (under chapter 9A.44 RCW) where a minor is a victim and the consequences upon conviction."

#### New State Law

Age-appropriate instruction on affirmative consent and bystander training are now required and all schools in the state must start providing comprehensive sexual health education at least twice in grades 6-8 and at least twice in grades 9-12

Required topics of instruction are described in SB 5395, with a focus on helping students understand and respect personal boundaries, develop healthy friendships and dating relationships, gain a deeper understanding of human growth and development, and develop skills to support choosing healthy behaviors and reduce health risks, including abstinence and other STD/pregnancy prevention approaches, and understanding the influence of family and society on healthy sexual relationships. Currently required HIV/STD prevention instruction will continue to be required.

#### What does this look like in Quincy in Grades 6-8?

[Draw the Line](#)/Respect the Line is taught in Grades 6 and 7. Quincy School District continues to partner with Cardea for professional learning and training as programs are being evaluated to ensure they meet all legislative requirements.

#### What does this look like in Quincy in Grades 9-12?

[FLASH](#) is the curriculum at Quincy High School. Quincy School District has continued to partner with Cardea for professional learning and training as programs are being evaluated. No major changes to the FLASH curriculum is anticipated.

Up until this year, QSD has taught only the FLASH curriculum in 9th grade. Starting the 21-22 school year, districts are required to provide sexual health education at a different grade level. This year, a one-day sexual health video and lesson called [Native Voices](#) will be taught during 12<sup>th</sup> grade English classes, facilitated by a trained teacher.

### **Can parents opt their child out of sexual health instruction?**

Yes, parents and guardians will still be able to opt their children out of sexual health instruction. Senate Bill 5395 strengthens this provision by requiring districts to honor parent/guardian requests.

### **Where did the graphic illustrations come from that I saw on social media?**

Several social media posts inserted illustrations from a book intended for parents and guardians into a lesson plan for 4th graders. The book was one of several optional books on a handout for parents and guardians wishing to continue talking with their child about puberty and reproduction. The book is not part of a lesson, curriculum, or instruction that a teacher or school would provide to a student. Images showing sexual positions would never be used in Washington state classrooms. Other graphic images in social media posts are from websites and not part of the curriculum itself. Students are never provided “how-to” instruction related to sex.

### **Does new legislation (Senate Bill 5395) take away local flexibility?**

No. Most districts are already providing sexual health education and will be able to continue using the same curriculum. School districts will still work with parents, families, and the community to select or create a curriculum that best meets the needs of their students and communities.

The Quincy School District will continue to use the curriculum already in place at the different levels, with the addition of one extra unit in high school as required.

### **Will the legislation require one curriculum for the whole state to use?**

No. The new legislation maintains districts’ ability to choose from many curricula that meet requirements or to create their own.

The Quincy School District will continue to use the curriculum already in place at the different levels, with the addition of one extra unit in high school as required.

### **Will OSPI need to approve districts’ curriculum choices?**

No. The new legislation maintains OSPI’s role in reviewing curricula for consistency with state requirements and making a list available for districts as a resource. The authority to approve curricula for use in schools currently rests with districts and that would continue. Districts would need to provide the name of the curriculum they are using and describe how it meets state requirements, but OSPI does not have the authority to approve or deny districts’ choices.

The Quincy School District will continue to use the curriculum already in place at the different levels, with the addition of one extra unit in high school as required.

### **How will parents be involved and informed about the sexual health education being provided by their child’s school?**

Parents and guardians will be notified by the district of planned instruction and what curriculum will be used. They will still be allowed to review their district’s curriculum at any time. In addition, parents and guardians are critical partners in their children’s sexual health education, and several comprehensive curricula include family

homework assignments for every lesson to encourage and foster family-based values discussions as they pertain to sexual health.

### **What will be required in kindergarten?**

No sexuality content or curriculum is required for grades K–3. Social and emotional learning (SEL) is the new requirement for grades K–3. Social and emotional learning is a process of building awareness and skills in managing emotions, setting goals, establishing relationships, and making responsible decisions that support success in school and in life. We are already addressing SEL with no sexual content.

### **At what grade level does instruction on sexual health education begin?**

Currently required HIV prevention instruction must begin no later than 5th grade. Beginning in the 2020–21 school year, sexual health education must be offered to students in grades 6–12. Starting in the 2022–23 school year, sexual health instruction will begin in 4th or 5th grade, depending on district decisions. Instruction must be consistent with Washington’s Health & Physical Education K–12 Learning Standards, but grade level outcomes will continue to be optional for districts. Required instruction for grades 4–5 focuses on helping students understand and respect personal boundaries, develop healthy friendships, and gain a basic understanding of human growth and development.

### **What is meant by “comprehensive” sexual health education?**

Comprehensive sexual health education, as defined in the bill, is recurring instruction in human development and reproduction. It is medically and scientifically accurate, age-appropriate, and appropriate for all students, regardless of protected class. The word comprehensive refers to instruction covering a wide variety of topics over time, as reflected in the next question. It does not refer to instruction that is embedded in other content areas.

### **The bill says instruction must be consistent with state learning standards – does that mean all health education grade-level outcomes for K–12 must be taught?**

No. The grade-level outcomes in the Health & Physical Education K–12 Learning Standards provide an example of what comprehensive instruction might look like, but they are not required to be taught. Since the only requirement for grades K–3 is social emotional learning (SEL), only the SEL standards would apply for those grades. For grades 4–12, the Health Education grade level outcomes serve as examples of what districts might consider teaching in each grade, but instructional decisions are up to each district.

### **Isn’t sexual abuse prevention education already required in schools?**

No. The Washington State Legislature passed “Erin’s Law” (House Bill 1539) in 2018. It directed OSPI to review sexual abuse curricula and to develop recommendations for

schools wishing to provide sexual abuse prevention instruction. It did not require schools to provide such instruction.

### **What is “affirmative consent” and “bystander training” and why are they included in this legislation?**

Affirmative consent is an approach to giving and receiving consent for any activity that includes clear, voluntary, enthusiastic permission. It is not just the absence of “no.” In earlier grades it might focus on hugs or horseplay, and in older grades on hugs, exchanging photos, or romantic or sexual contact. This approach reinforces and honors every student’s right to set healthy boundaries for themselves and for every student to feel their needs are respected in turn. Bystander training teaches students how to safely intervene when they see bullying, sexual harassment, or unwanted sexual activity. These topics are included in this legislation as a way for schools to combat the high rates of unwanted sexual contact experienced by youth in our state. According to the 2018 Healthy Youth Survey, 12.3% of 8th graders, 18.9% of 10th graders, and 25.2% of 12th graders had been forced into kissing, sexual touch, or intercourse when they did not want to.

### **How does sexual health education improve the safety of students?**

Research shows comprehensive sexual health education is an important and effective sexual abuse and violence prevention strategy. When students learn about and develop skills related to affirmative consent, they are more able to set personal boundaries and respect the boundaries of others.

### **Doesn’t comprehensive sexual health education give students permission or encouragement to have sex?**

No. Research on comprehensive sexual health education shows just the opposite. Students who receive comprehensive sexual health education are more likely to delay having sex, and more likely to have fewer partners and use protection when they do have sex. Additional benefits include improved knowledge, attitudes, and outcomes related to healthy relationships and personal safety and touch; increased intentions for communicating with parents about sexuality in the media; reduced bullying related to sexual orientation; and increased empathy and respect.