

The SIECUS State Profiles



CONNECTICUT

CONNECTICUT'S SEX ED SNAPSHOT

THE STATE OF SEX EDUCATION

Advocates have worked diligently to advance sex education across Connecticut, most recently cumulating in the introduction of two bills designed to advance instruction statewide. [House Bill 6192](#), introduced by Representative Themis Klarides, sought to require the State Board of Education to include the role of consent as part of the [Comprehensive Health Services and Sexual Health Services](#) provided by the Department of Education. [House Bill 6622](#), introduced by Representative Russell Morin and Representative Michelle Cook, sought to require instruction on sexual harassment, sexual assault, adolescent relationship abuse, intimate partner violence, and human trafficking in grades 7-12. While both bills were ultimately unsuccessful, they demonstrate a coordinated effort to further advance sex education and information concerning the sexual health and well-being of young people in Connecticut.

While legislators were unable to advance sex education directly, they were successful in passing [House Bill 7215](#). The legislation requires schools to develop a school climate advisory collaborative. Efforts include preventing discrimination against students based on actual or perceived differentiating characteristics, such as race, color, religion, ancestry, national origin, gender, sexual orientation, gender identity or expression, socioeconomic status, academic status, physical appearance or mental, physical, developmental or sensory disability. Although this advancement does not immediately impact sex education instruction, it demonstrates an important step forward in ensuring marginalized young people receive culturally responsive instruction.

Schools in Connecticut are required to teach specific elements related to sex education, including instruction on human growth and development and disease prevention. However, they are not required to provide instruction on any additional topics. The [Guidelines for the Sexual Health Education Component of Comprehensive Health Education](#) offer more advanced sex education guidelines for educators, but state statute does not require schools to follow them. As a result, instruction varies greatly by district depending on how closely each school board aligns their curriculum with the guidelines, if they choose to provide sex education at all. Mandating local control over sex education presents unique challenges that have resulted in a glaring disparity regarding the quality of sex education that students receive. Such discretion allows for the implementation of policies and curriculum that stigmatize marginalized youth, such as students of color and LGBTQ youth, and presents further challenges in ensuring that low income districts have access to the resources needed to implement comprehensive sex education.

To address this gap in education, advocates such as Planned Parenthood of Southern New England offer programming for public, private, and charter schools in addition to community-based organizations and after school programs.

Right now, advocates can take action to ensure young people in their community have access to quality sex education. After contacting their local school board, advocates can determine what topics are missing from sex education instruction, such as instruction on consent, sexual orientation and gender identity, and

contraceptives. They can then vocalize the important need for advancing sex education requirements in their community. Further, advocates can contact their representatives to discuss the critical need for advancing comprehensive sex education. Advocates are encouraged to use the SIECUS [Community Action Toolkit](#) to guide local efforts to advance sex education.

STATE SEX EDUCATION POLICIES AND REQUIREMENTS AT A GLANCE

- Connecticut schools are **not** required to teach sex education. However, they are required to provide instruction on human growth and development and disease prevention, including AIDS.
 - Curriculum is not required to be comprehensive.
 - Connecticut has no standard regarding instruction on abstinence. However, Connecticut’s guidelines for sexual health education include providing instruction on abstinence.
- Curriculum is not required to include instruction on gender identity or sexual orientation. However, Connecticut’s guidelines for sexual health education include providing instruction on gender identity and sexual orientation.
- Curriculum is not required to include instruction on consent. However, Connecticut’s guidelines for sexual health education include providing instruction on age of consent.
- Parents or guardians can remove their children from sex education and STI/HIV education with written notification. [This is referred to as an “opt-out” policy.](#)
- Connecticut has no standard regarding medically accurate sex education instruction. However, Connecticut’s guidelines for sexual health education include providing medically accurate instruction.

STATE HOUSE HIGHLIGHTS

Recently introduced bills concerning sex education will be highlighted within this section. This section highlights 2020 sex education bills that were introduced during the last state legislative session and 2021 sex education bills that have been introduced during the current state legislative session thus far. These proposed bills provide a brief snapshot of both recent and current legislative action taken to advance or restrict sex education. For a more comprehensive look at recent and current legislation concerning sex education and related topics such as reproductive health care, efforts to advance or restrict LGBTQ rights, and HIV/AIDS as it relates to young people, continue reading on to the “State Legislative Activity” section of Connecticut’s profile.

NO BILLS HAVE BEEN INTRODUCED CONCERNING SEX EDUCATION TO DATE.

MORE ON SEX ED IN CONNECTICUT

STATE LAW

Connecticut state law does not require schools to teach sex education, but [Connecticut General Statutes §§ 164-10-16\(b\)–\(f\)](#) does require schools to teach human growth and development and disease prevention. Connecticut law also states: “Each local and regional board of education shall offer during the regular school day planned, ongoing and systematic instruction on acquired immune deficiency syndrome [AIDS], as taught by legally qualified teachers.”

The Connecticut State Board of Education is charged with developing family life education curriculum guidelines that “shall include, but not be limited to, information on developing a curriculum including family planning; human sexuality; parenting; nutrition; and the emotional, physical, psychological, hygienic, economic and social aspects of family life, provided the curriculum guides shall not include information pertaining to abortion as an alternative to

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family planning.” However, Connecticut statute also states that the instruction must be left to the discretion of local or regional boards of education.

Parents or guardians may remove their children from sex education and/or STI/HIV education classes with written notification. [This is referred to as an “opt-out” policy.](#)

STATE STANDARDS

The [Guidelines for the Sexual Health Education Component of Comprehensive Health Education](#) provide guidance for sex education curricula in Connecticut. This 79-page document includes “differentiating between gender identity, sexual orientation, and the concept of gender roles,” identifying and discussing “the value of postponing sexual activity, the methods and effectiveness of contraception, ways to protect oneself from communicable diseases,” and defining and describing “healthy sexuality and sexual expression throughout the lifespan.”

STATE LEGISLATIVE ACTIVITY

State legislative activity related to sex education does not take place in isolation from the broader embroiled political and policy climate. Attacks on the rights of lesbian, gay, bisexual, transgender, queer, or questioning (LGBTQ) individuals, and efforts to limit access to abortion care and other reproductive health care services prevent students from receiving comprehensive sex education and accessing sexual and reproductive health care services. Below are highlights of current legislative activity related to these topics. **Connecticut’s 2021 session convened January 6, 2021.**

No legislation has been introduced concerning sex education, reproductive health care, sexual orientation and gender identity, or HIV/AIDS (that impacts youth) to date.

LEGISLATIVE KEY

SEX EDUCATION
REPRODUCTIVE HEALTH CARE
SEXUAL ORIENTATION AND GENDER IDENTITY
HIV/AIDS (THAT IMPACTS YOUTH)

YOUTH SEXUAL HEALTH DATA

Young people are more than their health behaviors and outcomes. While data can be a powerful tool to demonstrate the sex education and sexual health care needs of young people, it is important to be mindful that these behaviors and outcomes are impacted by systemic inequities present in our society that affect an individual’s sexual health and well-being. To learn more about Connecticut’s Youth Risk Behavior Survey (YRBS) results, [click here](#).

CONNECTICUT SCHOOL HEALTH PROFILES DATA

In 2019, the Centers for Disease Control and Prevention (CDC) released the School Health Profiles, which measure school health policies and practices and highlight which health topics were taught in schools across the country. Since the data were collected from self-administered questionnaires completed by schools’ principals and lead health education teachers, the CDC notes that one limitation of the School Health Profiles is bias toward the reporting of more positive policies and practices. In the School Health Profiles, the [CDC identifies 20 sexual health education topics](#) as critical for ensuring a young person’s sexual health.

Connecticut did not participate in the 2018 School Health Profiles.

Below are key instruction highlights for secondary schools in Connecticut as [reported](#) for the 2015–2016 school year. In this edition of the School Health Profiles, the CDC identified 19 sexual health education topics and has since updated the number of topics to 20.

Reported teaching all 19 critical sexual health education topics

- 18.6% of Connecticut secondary schools taught students all 19 critical sexual health education topics in a required course in any of grades 6, 7, or 8.
- 54.2% of Connecticut secondary schools taught students all 19 critical sexual health education topics in a required course in any of grades 9, 10, 11, or 12.

Reported teaching about the benefits of being sexually abstinent

- 75.1% of Connecticut secondary schools taught students about the benefits of being sexually abstinent in a required course in any of grades 6, 7, or 8.
- 95.5% of Connecticut secondary schools taught students about the benefits of being sexually abstinent in a required course in any of grades 9, 10, 11, or 12.

Reported teaching how to access valid and reliable information, products, and services related to HIV, other STDs, and pregnancy

- 68.5% of Connecticut secondary schools taught students how to access valid and reliable information, products, and services related to HIV, other STDs, and pregnancy in a required course in any of grades 6, 7, or 8.
- 94.8% of Connecticut secondary schools taught students how to access valid and reliable information, products, and services related to HIV, other STDs, and pregnancy in a required course in any of grades 9, 10, 11, or 12.

Reported teaching how to create and sustain healthy and respectful relationships

- 75.3% of Connecticut secondary schools taught students how to create and sustain healthy and respectful relationships in a required course in any of grades 6, 7, or 8.
- 94.5% of Connecticut secondary schools taught students how to create and sustain healthy and respectful relationships in a required course in any of grades 9, 10, 11, or 12.

Reported teaching about preventive care that is necessary to maintain reproductive and sexual health

- 63.6% of Connecticut secondary schools taught students about preventive care that is necessary to maintain reproductive and sexual health in a required course in any of grades 6, 7, or 8.
- 90.8% of Connecticut secondary schools taught students about preventive care that is necessary to maintain reproductive and sexual health in a required course in any of grades 9, 10, 11, or 12.

Reported teaching how to correctly use a condom

- 30.8% of Connecticut secondary schools taught students how to correctly use a condom in a required course in any of grades 6, 7, or 8.
- 80% of Connecticut secondary schools taught students how to correctly use a condom in a required course in any of grades 9, 10, 11, or 12.

Reported teaching about methods of contraception other than condoms

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- 46.5% of Connecticut secondary schools taught students about methods of contraception other than condoms in a required course in any of grades 6, 7, or 8.
- 92.9% of Connecticut secondary schools taught students about methods of contraception other than condoms in a required course in any of grades 9, 10, 11, or 12.

Reported teaching about sexual orientation

- 47.3% of Connecticut secondary schools taught students about sexual orientation in a required course in any of grades 6, 7, or 8.
- 80.4% of Connecticut secondary schools taught students about sexual orientation in a required course in any of grades 9, 10, 11, or 12.

Reported teaching about gender roles, gender identity, or gender expression

- 49.9% of Connecticut secondary schools taught students about gender roles, gender identity, or gender expression in a required course in any of grades 6, 7, or 8.
- 77.5% of Connecticut secondary schools taught students about gender roles, gender identity, or gender expression in a required course in any of grades 9, 10, 11, or 12.

Reported providing curricula or supplementary materials relevant to lesbian, gay, bisexual, transgender, or questioning (LGBTQ) youth

- 57.5% of Connecticut secondary schools provided students with curricula or supplementary materials that included HIV, STD, or pregnancy prevention information relevant to LGBTQ youth.

Visit the CDC's [School Health Profiles](#) report for additional information on school health policies and practices.

The quality of sex education taught often reflects funding available for sex education programs.

To learn more about federal funding streams, [click here](#).