

The SIECUS State Profiles



DISTRICT OF COLUMBIA

DISTRICT OF COLUMBIA'S SEX ED SNAPSHOT

THE STATE OF SEX EDUCATION

Advocates have seen tremendous progress over the past decade toward advancing sex education requirements in the District of Columbia. In 2010, Councilwoman Mary Cheh championed the successful [DC Healthy Schools Act](#), which increased the amount of time dedicated to health education and further clarified sex education requirements. Through the Healthy Schools Act, the Office of the State Superintendent of Education (OSSE) [implemented](#) an annual exam for fifth, eighth, and tenth graders on human sexuality, contraception, and drug use. In 2011, the OSSE established the Coordinated Health Education Team to address health gaps in DC schools and enacted two advisory boards, the Risky Behaviors Advisory Board and the Health and Wellness Advisory Board to further review current curriculum and make recommendations for future instruction. In 2016, the DC [Health Education Standards](#) were updated to require instruction on sexual orientation and gender identity. Additionally, the health standards provide guidance on topics such as consent, healthy relationships, contraceptives, and the influence of culture on health practices. The Wrap MC Program, facilitated by DC Health as part of their Sex Is... campaign, was created in 2010 and [recently updated](#) to help young people make informed decisions about their health. The program also certifies students to become peer educators and distribute condoms in their school.

While there is no current set sex education curriculum required in DC schools, the [Sexual Health Curriculum Review Guidance](#), released by the Office of the State Superintendent of Education (OSSE) in 2017, guides educators in providing comprehensive sex education and includes in-depth information about varying health education curriculum that aligns with the Centers for Disease Control and Prevention (CDC)'s Health Education Curriculum Analysis Tool (HECAT). Students in DC Public Schools receive [Rights, Respect, Responsibility](#) (3Rs) curriculum developed by Advocates for Youth.

To further advance sex education in DC schools, the OSSE will continue to assess student knowledge and behavior related to sexual health and develop reports and resources with schools and partners, create grant opportunities, technical assistance, and resources for educators, and publish public reports to guide future advancements. Organizations such as Athletes United for Social Justice (AUSJ), Latin American Youth Center (LAYC), Planned Parenthood of Metropolitan Washington, and the Healthy Babies Project have received funding over the past three years through the DC Personal Responsibility Education Program (PREP) to support sex education opportunities.

Right now, advocates can take action to ensure young people in their community have access to quality sex education. By contacting their local school, advocates can determine what curriculum is being taught and if the school has the resources it needs to implement comprehensive sex education. Further, advocates can contact their representatives to discuss ways in which sex education may be improved. Advocates are encouraged to use the SIECUS [Community Action Toolkit](#) to guide local efforts.

STATE SEX EDUCATION POLICIES AND REQUIREMENTS AT A GLANCE

- District of Columbia schools are required to teach sex education.
 - Curriculum is not required to be comprehensive. However, DC Public Schools, which serves approximately 54% of DC students, is required to use the comprehensive curriculum [Rights, Respect, Responsibility](#) (3Rs). Further, sex education occurs within what is described as a “comprehensive school health education” program.
 - Sex education instruction must include instruction on abstinence.
- Curriculum must [include](#) instruction on how to “differentiate between gender identity, gender expression, sexual orientation, and sex assigned at birth/biological sex,” and detail that “as people grow and develop, they may begin to feel romantically and/or sexually attracted to people of a different gender and/or to people of the same gender.”
- Curriculum must include instruction on how alcohol and other substances can affect the ability to give or perceive the provision of consent to sexual activity. Students must research, compare, and contrast DC minor consent laws.
- Parents can submit a written request to the principal to remove their children from sex education. [This is referred to as an “opt-out” policy.](#)
- The District of Columbia has no standard regarding medically accurate sex education instruction.

STATE HOUSE HIGHLIGHTS

This section highlights sex education bills that were introduced during the 2019 state legislative session as well as bills that have been introduced thus far in 2020. These proposed bills provide a brief overview of both recent and current legislative action taken to advance or restrict sex education. For a more comprehensive look at relevant legislation concerning sex education and related topics such as reproductive health care, LGBTQ rights, and HIV/AIDS, continue reading on to the “State Legislative Activity” section of the District of Columbia’s profile.

No bills to date have been introduced concerning sex education.

MORE ON SEX ED IN THE DISTRICT OF COLUMBIA

STATE LAW

[District of Columbia Municipal Regulations §§ 5-E2304](#) and [5-E2305](#) state that public schools must provide comprehensive school health education, including instruction on human sexuality and reproduction. The instruction must be age-appropriate and taught in grades pre-kindergarten (pre-K)–12.

The superintendent of the District of Columbia public schools is charged with ensuring that sex education is taught in schools and that students achieve a minimum proficiency in this area. Accordingly, the superintendent must provide systematic teacher training and staff development activities for health and physical education instructors. A list of all textbooks for student and teacher training must be included in the list of textbooks submitted annually to the District Board of Education for its approval.

Parents or guardians may submit a written request to the principal if they wish to remove their children from human sexuality and reproduction education classes. [This is referred to as an “opt-out” policy.](#)

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STATE STANDARDS

The District of Columbia provides [Health Education Standards](#) for students in grades K-12. “Safety Skills,” “Human Body and Personal Health,” and “Disease Prevention” are three of the six learning categories. STIs, HIV, unintended pregnancy, abstinence, and contraception are all discussed. In 2016, the state standards were updated to ensure students learn how to “differentiate between gender identity, gender expression, sexual orientation, and sex assigned at birth/biological sex,” as well as to understand that “as people grow and develop, they may begin to feel romantically and/or sexually attracted to people of a different gender and/or to people of the same gender.” In 2017, the Office of the State Superintendent of Education published the [Sexual Health Curriculum Review](#) to guide educators in providing sex education.

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. The District of Columbia’s 2020 Council Period convened January 2, 2020.

2019 COUNCIL PERIOD: ADJOURNED DEC 21, 2019

TITLE	DESCRIPTION	STATUS
BILL 23-434	PROHIBITS THE DISTRICT GOVERNMENT FROM INTERFERING WITH REPRODUCTIVE HEALTH DECISIONS AND FROM IMPOSING PUNISHMENTS OR PENALTIES FROM A SELF-MANAGED ABORTION, MISCARRIAGE, OR ADVERSE PREGNANCY OUTCOMES. PROHIBITS EMPLOYMENT DISCRIMINATION AGAINST HEALTHCARE PROFESSIONALS WHO PARTICIPATE IN ABORTION OR STERILIZATION PROCEDURES.	DIED IN THE COUNCIL COMMITTEE ON GOVERNMENT OPERATIONS.

LEGISLATIVE KEY

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

YOUTH SEXUAL HEALTH 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. To learn more about the District of Columbia's Youth Risk Behavior Survey (YRBS) results, [click here](#).

DISTRICT OF COLUMBIA 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. Below are key instruction highlights for secondary schools in the District of Columbia as [reported](#) for the 2017–2018 school year.

Reported teaching all 20 critical sexual health education topics

- 91.4% of District of Columbia secondary schools taught students all 20 critical sexual health education topics in a required course in any of grades 6, 7, or 8.
- 51.7% of District of Columbia secondary schools taught students all 20 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

- 73.3% of District of Columbia secondary schools taught students about the benefits of being sexually abstinent in a required course in any of grades 6, 7, or 8.
- 100% of District of Columbia 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

- 69.0% of District of Columbia 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.
- 100% of District of Columbia 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.

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Reported teaching how to create and sustain healthy and respectful relationships

- 77.5% of District of Columbia 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.
- 100.0% of District of Columbia 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

- 64.7% of District of Columbia 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.
- 100.0% of District of Columbia 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

- 56.0% of District of Columbia secondary schools taught students how to correctly use a condom in a required course in any of grades 6, 7, or 8.
- 100% of District of Columbia 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

- 60.3% of District of Columbia secondary schools taught students about methods of contraception other than condoms in a required course in any of grades 6, 7, or 8.
- 100% of District of Columbia 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

- 67.6% of District of Columbia secondary schools taught students about sexual orientation in a required course in any of grades 6, 7, or 8.
- 100% of District of Columbia 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

- 71.4% of District of Columbia secondary schools taught students about gender roles, gender identity, or gender expression in a required course in any of grades 6, 7, or 8.
- 100% of District of Columbia 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

- 75.6% of District of Columbia 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](#).