

The SIECUS State Profiles



VERMONT

VERMONT'S SEX ED SNAPSHOT

THE STATE OF SEX EDUCATION

Advocates in Vermont have celebrated significant successes in advancing sex education over the past seven years, particularly after community based youth and sexual health service providers established an Inclusive Sex Ed Taskforce in 2019. Their efforts most recently cumulated in the state's Agency of Education and Department of Health establishing a working group to improve the implementation of sex education. From 2013 through 2018, Vermont was a recipient of the Centers for Disease Control and Prevention (CDC)'s Exemplary Sexual Health Education funds. Administered through the Agency of Education, the funding supported the development of instructional resources and model sex education policies and improved partnerships between the Department of Health and 12 priority school districts. In 2016, the Agency of Education and Department of Health [released a memo](#) encouraging schools to implement a comprehensive sex education program along with a condom distribution program in response to rising STD rates reported by the CDC.

Then in 2019, Representative Kevin Christie, Representative Brian Cina, Representative Dylan Giambatista, and Representative Diana Gonzalez championed [House Bill 3](#), which was successfully enacted. The new law establishes a working group to make recommendations that are designed to, among other goals, increase cultural competency among students in prekindergarten through grade 12. The working group must review current policies to ensure that Vermont schools “promote an overarching focus on preparing all students to participate effectively in an increasingly racially, culturally, and socially diverse Vermont and in global communities.” Ensuring that sex education is culturally responsive to the needs of further marginalized youth, including but not limited to youth of color, LGBTQ youth, and young people with disabilities is a critical step forward in proving comprehensive sex education.

Despite the joint recommendation from the Agency of Education and Department of Health, schools in Vermont are not required to teach comprehensive sex education. Curriculum must include instruction on sexuality and reproduction, STDs, decision making skills, how to recognize and prevent sexual abuse and sexual violence, contraceptives, and outcomes of pregnancy including childbirth, adoption, and abortion. Despite the range of inclusive topics required to be taught, schools are not required to provide instruction on sexual orientation, gender identity, and state statute does not require curriculum to include explicit discussion consent. As a result, advocates report that the quality of content and time dedicated to sex education varies greatly across districts, with some instructors dedicating the majority of health education curriculum to sex education and others dedicating only a few hours of instruction in one grade level to sex education. Advocates report that the lack of a system to monitor if sex education being taught complies with the state's requirements, lack of a system to track what curricula is being taught, and lack of professional development and training for educators are among the biggest barriers to providing comprehensive sex education in Vermont.

To support schools in providing comprehensive sex education, local organizations took action in 2019 to expand and refine their resources. The Vermont Network against Domestic and Sexual Violence revised and republished their Consent Campaign, which provides guidance on including consent within sex education. To further ensure schools are supported in providing inclusive instruction, Outright Vermont, in collaboration with the Agency of Education, released an [educator's guide](#) to implementing LGBTQ-inclusive sex education. Most recently revised in 2018, the guide provides resources and assessment tools to guide educators in providing culturally responsive instruction. Vermont legislators have also recognized the importance of inclusive environments through the passage of [House Bill 333](#), which requires all single stall restrooms in spaces of public accommodation to be gender neutral. In addition, the Vermont Network against Domestic and Sexual Violence revised and republished their [Consent Campaign](#), which provides guidance on including consent within comprehensive sex education.

Advocates can take action right now to address ongoing barriers and ensure that young people in their community have access to quality sex education. After identifying what topics are missing from local sex education requirements, advocates can vocalize the importance of implementing specific elements of comprehensive sex education, such as trauma informed, culturally responsive curriculum that addresses the needs of young people of color and young people with disabilities. They may also advocate for inclusive instruction that includes topics such as sexual orientation, gender identity, and consent. Advocates can take further action by contacting their representatives to discuss the critical need for increasing access to educator training, increasing funding and support for the Agency of Education, and policies that require inclusive sex education instruction. 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

- Schools in Vermont are required to teach sex education as part of their comprehensive health education.
 - Curriculum is not required to be comprehensive.
 - Curriculum must include instruction on abstinence.
- Curriculum is not required to include instruction on sexual orientation or gender identity.
- Curriculum is not required to include instruction on consent. However, curriculum must include instruction on sexual violence.
- Parents or guardians may remove their children from instruction pertaining to disease if the content conflicts with their religious beliefs. [This is referred to as an “opt-out” policy.](#)
- Vermont has no standard regarding medically accurate instruction. However, schools may work with relevant medical authorities to ensure instruction on cervical cancer and the human papillomavirus is up to date.

STATE HOUSE HIGHLIGHTS

This section highlights sex education bills that were introduced during the 2020 state legislative session as well as bills that have been introduced thus far in 2021. 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 Vermont’s profile.

No bills have been introduced concerning sex education to date.

MORE ON SEX ED IN VERMONT

STATE LAW

[Vermont Statutes Annotated, Title 16 §§ 131, 133, 134, and 135](#) require schools to include instruction on topics related to sexual health as part of their comprehensive health program. Comprehensive health instruction must be taught in elementary and secondary schools. The comprehensive health program has 10 components that students must learn, four of which are related to sexuality:

1. Body structure and function, including the physical, psychosocial, and psychological basis of human development, sexuality, and reproduction; ...
4. Disease, such as human immunodeficiency virus (HIV) infection, other sexually transmitted diseases (STDs), as well as other communicable diseases, and the prevention of disease; ...
5. Family health and mental health, including instruction that promotes the development of responsible personal behavior involving decision making about sexual activity, including abstinence; skills that strengthen existing family ties involving communication, cooperation, and interaction between parents and students; and instruction to aid in the establishment of strong family life in the future, thereby contributing to the enrichment of the community; ...
8. Human growth and development, including understanding the physical, emotional, and social elements of individual development and interpersonal relationships, including instruction in parenting methods and styles. This shall include information regarding the possible outcomes of premature sexual activity, contraceptives, adolescent pregnancy, childbirth, adoption, and abortion.

Parents or guardians may remove their children from instruction pertaining to “disease, its symptoms, development, and treatment” if the content is in conflict with their religious beliefs. [This is referred to as an “opt-out” policy.](#)

STATE STANDARDS

The [Vermont Health Education Sample Graduation Proficiencies & Performance Indicators](#) and [Sample Comprehensive HIV Policy for Schools: Pre-K–12](#) indicate benchmarks for students to achieve throughout their education. The State Board of Education also adopted the [National Health Education Standards](#) as a framework for schools to develop health curricula.

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. **Vermont’s 2021 session convened on January 6, 2021.**

TITLE	DESCRIPTION	STATUS
SENATE BILL 32	REQUIRES SCHOOLS TO PROVIDE MENSTRUAL HYGIENE PRODUCTS TO STUDENTS. REQUIRES THE AGENCY OF EDUCATION, IN COLLABORATION WITH THE ADVISORY COUNCIL ON WELLNESS AND COMPREHENSIVE HEALTH, TO UPDATE AND DISTRIBUTE TO SCHOOL DISTRICTS A MODEL WELLNESS PROGRAM POLICY.	REFERRED TO THE SENATE COMMITTEE ON EDUCATION (2021)

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 Vermont's Youth Risk Behavior Survey (YRBS) results, [click here](#).

STATE 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 Vermont as reported for the 2017–2018 school year.

Reported teaching all 20 critical sexual health education topics

- 24.1% of Vermont secondary schools taught students all 20 critical sexual health education topics in a required course in any of grades 6, 7, or 8.
- 66.1% of Vermont 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

- 67.8% of Vermont secondary schools taught students about the benefits of being sexually abstinent in a required course in any of grades 6, 7, or 8.
- 98.2% of Vermont 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

- 63.5% of Vermont 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.
- 96.3% of Vermont 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

- 78.0% of Vermont 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.
- 98.2% of Vermont 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

- 51.3% of Vermont 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.
- 41.3% of Vermont 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

- 39.7% of Vermont secondary schools taught students how to correctly use a condom in a required course in any of grades 6, 7, or 8.
- 88.9% of Vermont 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

- 51.4% of Vermont secondary schools taught students about methods of contraception other than condoms in a required course in any of grades 6, 7, or 8.
- 96.4% of Vermont 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

- 66.2% of Vermont secondary schools taught students about sexual orientation in a required course in any of grades 6, 7, or 8.
- 87.0% of Vermont 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

- 69.8% of Vermont secondary schools taught students about gender roles, gender identity, or gender expression in a required course in any of grades 6, 7, or 8.
- 90.7% of Vermont 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

- 65.0% of Vermont 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](#).