

# The SIECUS State Profiles



## TENNESSEE

### TENNESSEE'S SEX ED SNAPSHOT

#### THE STATE OF SEX EDUCATION

In 2012 the Tennessee legislature passed [Senate Bill 3310](#), a restrictive measure known as the “Gateway Law.” Under this legislation, family life education programs and sex education courses are prohibited from including instruction on “gateway sexual activity” that encourages youth to engage in “non-abstinent behavior.” Educators who fail to comply could face punitive measures, including a \$500 fine. Sex education advocates have routinely pushed back against this restrictive legislation and have attempted to, instead, pass requirements for comprehensive sex education. In 2017, Senator Becky Duncan Massey passed [Senate Bill 1510](#), legislation that requires sexual abuse education in schools. Despite this success, similar efforts have been largely unsuccessful. Collaborative efforts are underway to ensure a comprehensive sex education bill is introduced in 2020, although increased grassroots action is critical to its passage. Advocates note that incremental efforts to build a strong base of support are essential to ensure future success. Organizations such as Girls, Inc. of Chattanooga are working to identify political allies and local champions to advance a comprehensive sex education platform.

In addition to coordinated efforts to pass advanced sex education requirements statewide, advocates note that much needs to be done at the local level as well. Because Tennessee schools are not required to provide sex education to students, school districts are left to decide what type of sex education—if any at all—they teach young people. Due to the state’s restrictive mandate, schools in Tennessee can only provide abstinence-centered curriculum, which is often called [“sexual risk avoidance”](#) programming. There is also a prominent fear of discussing restricted topics that remains prevalent among educators in the state. Students [report](#) that educators often use shame-based, stigmatizing educational tools that target young women and LGBTQ students. These approaches create unsafe and hostile environments for young people. Curriculum has also been reported to lack critical topics such as contraceptive methods, STI prevention, and consent. While all young people in Tennessee are adversely impacted by restrictive sex education curriculum, Black youth in particular are put at a significant disadvantage. SisterReach, a reproductive justice organization based in Memphis, [released a report](#) in 2015 detailing the unique barriers that Black young people face in accessing comprehensive sex education and found that 90 percent of youth surveyed reported that they received inadequate information and felt unable to make informed decisions about their own bodies and sexual choices.

Advocates in Knoxville have been increasing efforts to ensure effective educators are delivering sex education by removing harmful educators that provide restrictive instruction. They believe this is a necessary first step before advancing new sex education requirements. In response to the discriminatory sex education they received, students in Knox County have formed [Just Educate](#), a sex education resource, to uplift the testimony of students and demand that the Knox County Board of Education take action to ensure young people receive affirming sex education instruction.

In an effort to address these gaps in access, Youth and Family Development Centers and youth-serving organizations across the state have implemented after school sex education programs. Planned Parenthood of Tennessee and North Mississippi have provided similar programming in Knoxville, Memphis, Nashville, and the surrounding areas. Despite these efforts, advocates from the Women's Fund of Chattanooga report that it is critical that those who support advancing sex education continue to strategize effective ways to provide comprehensive sex education to youth.

Right now, advocates can take action to ensure young people in their community have access to quality sex education. Advocates can also identify what sex education requirements are currently in place in their district and advocate for the inclusion of specific elements of comprehensive sex education, such as requiring curriculum to be culturally responsive to youth of color and LGBTQ youth. Chattanooga community members report a recent, steady increase in local support for improving sex education. Individuals across the state may find that parents and community members are willing to collaborate and advocate for inclusive sex education curriculum. 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

- Tennessee schools are **not** required to teach sex education. However, schools are required to teach a family life education program if their county pregnancy rate exceeds 19.5 pregnancies per every 1,000 females ages 15-17.
  - Curriculum is not required to be comprehensive.
  - Curriculum must stress abstinence.
- Tennessee statute does not require curriculum to include instruction on sexual orientation or gender identity.
- Curriculum must include instruction on the age of consent.
- Parents and guardians are able to remove their children from sex education instruction upon written request. [This is referred to as an “opt-out” policy.](#)
- Curriculum must be medically accurate.

## 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 Tennessee’s profile.

## 2020 Legislative Session

### **House Bill 2434**, (pending):

- If successful, it would no longer require schools to follow the Sexual Risk Avoidance curriculum. Information would have to be medically accurate and age-appropriate. Curriculums would still prioritize abstinence, but teaching how to use protection to prevent the spread of STIs and HIV, consent, how to talk to parents about sex, and healthy relationships would be required as well. [An identical companion bill was introduced in the Senate.](#)

### **House Bill 2567**, (pending):

- If successful, would establish the Parents' Bill of Rights, which would permit parents and guardians to withhold their children from any aspect of their education that they have a moral or religious objection to.

### **Senate Bill 2089**, (pending):

- If successful, would prohibit public schools and other Local Education Agencies from making referrals to and/or endorsing abortion in any class or at any school-related event. [An identical companion bill was introduced in the House.](#)

## MORE ON SEX ED IN TENNESSEE

### STATE LAW

Tennessee law ([§ 49-6-1302](#), [49-6-1304](#), and [49-6-1305](#)) requires local education agencies in counties whose pregnancy rate exceeds 19.5 pregnancies per 1,000 females ages 15–17 to develop and implement a family life education program. These programs must promote “sexual risk avoidance” as their primary goal, and instruction that promotes “gateway sexual activity” is prohibited. [Statute § 49-6-1304](#) was recently amended to include “provid[ing] instruction on the detection, intervention, prevention, and treatment of child sexual abuse, including such abuse that may occur in the home” as a required topic in family life curricula.

If such family life education programs are provided, they must:

1. Emphatically promote sexual risk avoidance through abstinence, regardless of a student's current or prior sexual experience;
2. Encourage sexual health by helping students understand how sexual activity affects the whole person, including the physical, social, emotional, psychological, economic, and educational consequences of non-marital sexual activity;
3. Teach the positive results of avoiding sexual activity, the skills needed to make healthy decisions, the advantages of and skills for student success in pursuing educational and life goals, the components of healthy relationships, and the social science research supporting the benefits of reserving the expression of human sexual activity for marriage;
4. Provide factually and medically accurate information;

5. Teach students how to form pro-social habits that enable students to develop healthy relationships, create strong marriages, and form safe and stable future families;
6. Encourage students to communicate with a parent, guardian, or other trusted adult about sex or other risk behaviors;
7. Assist students in learning and practicing refusal skills that will help them resist sexual activity;
8. Address the benefits of raising children within the context of a marital relationship and the unique challenges that single teen parents encounter in relation to educational, psychological, physical, social, legal, and financial factors;
9. Discuss the interrelationship between teen sexual activity and exposure to other risk behaviors such as smoking, underage drinking, drug use, criminal activity, dating violence, and sexual aggression;
10. Educate students on the age of consent, puberty, pregnancy, childbirth, sexually transmitted diseases [STDs], including but not limited to human immunodeficiency virus [HIV]/acquired immunodeficiency syndrome [AIDS], and the financial and emotional responsibility of raising a child;
11. Teach students how to identify and form healthy relationships, and how to identify and avoid unhealthy relationships;
12. Inform students, in all [schools], concerning the process of adoption and its benefits; and
13. Provide instruction on the detection, intervention, prevention, and treatment of child sexual abuse, including such abuse that may occur in the home.

Tennessee Code allows students to be removed from sex education classes upon written request from their parent or guardian. [This is referred to as an “opt-out” policy.](#)

### STATE STANDARDS

The [Tennessee Health Education Standards](#) include instruction on sexually transmitted infections (STIs), including HIV/AIDS, beginning in grade 3. Beginning in grade 6, the standards include the expectation that students will learn to “identify abstinence from sexual activity as the responsible and preferred choice for adolescents.” The [Tennessee Lifetime Wellness Curriculum Standards](#), which students must complete in order to graduate high school, mandate a section on sexuality and relationships. The standards describe abstinence as a “positive choice” but also include instruction on contraception.

### 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.

#### 2020 SESSION: CONVENED JANUARY 14, 2020

TITLE	DESCRIPTION	STATUS
<a href="#">HOUSE BILL 1572</a>	PROHIBITS TRANSGENDER STUDENTS FROM COMPETING IN SCHOOL ATHLETICS. REQUIRES UNALTERED BIRTH CERTIFICATE.	IN THE HOUSE SUBCOMMITTEE ON K-12 EDUCATION

*Last Updated April 8, 2020*

<a href="#">HOUSE BILL 1689</a>	PROHIBIT TRANSGENDER AND INTERSEX STUDENTS FROM COMPETING IN SCHOOL ATHLETICS. REQUIRES UNALTERED BIRTH CERTIFICATE AND DNA TESTING.	IN THE HOUSE SUBCOMMITTEE ON K-12 EDUCATION
<a href="#">HOUSE BILL 2135</a>	PROHIBITS PUBLIC SCHOOLS AND OTHER LOCAL EDUCATION AGENCIES FROM MAKING REFERRALS TO AND/OR ENDORSING ABORTION IN ANY CLASS OR AT ANY SCHOOL-RELATED EVENT.	ASSIGNED TO SUBCOMMITTEE ON CURRICULUM, TESTING, & INNOVATION
<a href="#">HOUSE BILL 2434</a>	SEX ED INFORMATION WOULD STILL EMPHASIZE ABSINANCE, BUT NOW HAVE TO BE MEDICALLY-ACCURATE AND AGE-APPROPRIATE.	ASSIGNED TO SUBCOMMITTEE ON CURRICULUM, TESTING, & INNOVATION
<a href="#">HOUSE BILL 2567</a>	PERMITS PARENTS AND GUARDIANS TO WITHHOLD THEIR CHILDREN FROM ANY ASPECT OF THEIR EDUCATION WHICH THEY HAVE A MORAL OR RELIGIOUS DISAGREEMENT WITH.	ASSIGNED TO SUBCOMMITTEE ON CHILDREN & FAMILIES
<a href="#">SENATE BILL 1780</a>	PROHIBITS ABORTION AFTER A FETAL HEARTBEAT CAN BE DETECTED.	REFERRED TO THE SENATE COMMITTEE ON JUDICIARY
<a href="#">SENATE BILL 2089</a>	PROHIBITS PUBLIC SCHOOLS AND OTHER LOCAL EDUCATION AGENCIES FROM MAKING REFERRALS TO AND/OR ENDORSING ABORTION IN ANY CLASS OR AT ANY SCHOOL-RELATED EVENT.	PASSED ON SECOND CONSIDERATION, REFERRED TO SENATE COMMITTEE ON EDUCATION
<a href="#">SENATE BILL 2215</a>	BANS CONVERSION THERAPY ON PREPUBESCENT MINORS. AFTER PUBERTY MINORS COULD BE SUBJECTED TO CONVERSION THERAPY IF THREE PHYSICIANS WRITE LETTERS RECOMMENDING IT. ANY VIOLATION OF THIS BILL WOULD BE CONSIDERED CHILD ABUSE.	REFERRED TO THE SENATE COMMITTEE ON JUDICIARY
<a href="#">SENATE BILL 2583</a>	SEX ED INFORMATION WOULD STILL EMPHASIZE ABSTINENCE, BUT NOW HAVE TO BE MEDICALLY-ACCURATE AND AGE-APPROPRIATE.	PASSED ON SECOND CONSIDERATION, REFERRED TO SENATE COMMITTEE ON EDUCATION

#### 2019 SESSION: ADJOURNED MAY 2, 2019

TITLE	DESCRIPTION	STATUS
<a href="#">HOUSE BILL 77</a>	PROHIBITS ABORTION AFTER A FETAL HEARTBEAT IS DETECTED UNLESS IN THE CASE OF A MEDICAL EMERGENCY.	DIED IN THE SENATE
<a href="#">HOUSE BILL 1410</a>	PROHIBITS STATE FUNDING OF ABORTION.	DIED IN THE SENATE
<a href="#">HOUSE BILL 1029</a>	ENACTS A TOTAL ABORTION BAN IF THE SUPREME COURT OVERTURNS <i>ROE V. WADE</i> .	ENACTED
<a href="#">SENATE BILL 1236</a>	PROHIBITS ABORTION AFTER A FETAL HEARTBEAT IS DETECTED UNLESS IN THE CASE OF A MEDICAL EMERGENCY.	DIED IN THE SENATE COMMITTEE ON JUDICIARY

<a href="#">SENATE BILL 1257</a>	ENACTS A TOTAL ABORTION BAN IF THE SUPREME COURT OVERTURNS <i>ROE V. WADE</i> .	ENACTED
<a href="#">SENATE BILL 1418</a>	PROHIBITS STATE FUNDING OF ABORTION.	DIED IN THE SENATE COMMITTEE ON JUDICIARY

#### 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 Tennessee'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 Tennessee as [reported](#) for the 2017–2018 school year.

#### Reported teaching all 20 critical sexual health education topics

- 9.8% of Tennessee secondary schools taught students all 20 critical sexual health education topics in a required course in any of grades 6, 7, or 8.
- 32.2% of Tennessee 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

- 40.1% of Tennessee secondary schools taught students about the benefits of being sexually abstinent in a required course in any of grades 6, 7, or 8.
- 92.5% of Tennessee 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

- 34.4% of Tennessee 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.
- 88.1 % of Tennessee 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

- 43.5% of Tennessee 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.
- 90.3% of Tennessee 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

- 27.0% of Tennessee 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.
- 83.6% of Tennessee 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

- 11.0% of Tennessee secondary schools taught students how to correctly use a condom in a required course in any of grades 6, 7, or 8.
- 41.2% of Tennessee 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

- 19.9% of Tennessee secondary schools taught students about methods of contraception other than condoms in a required course in any of grades 6, 7, or 8.
- 62.6% of Tennessee 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

- 12.7% of Tennessee secondary schools taught students about sexual orientation in a required course in any of grades 6, 7, or 8.
- 54.1% of Tennessee 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

- 16.4% of Tennessee secondary schools taught students about gender roles, gender identity, or gender expression in a required course in any of grades 6, 7, or 8.
- 55.6% of Tennessee 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

- 27.7% of Tennessee 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](#).**