

HIV Requirements

Notice that R90 did not do away with this law and Initiative 1109 will not do away with it either. This act was the beginning of mandating the discussion of condoms that led to anal and oral sexual definitions as young as 5th grade. To deal with HIV education, it will take a bill in the legislature or another referendum or initiative specifying that this is dealt with as a STD without an annual statewide mandate.

<https://www.k12.wa.us/student-success/resources-subject-area/sexual-health-education/sexual-health-education-requirements-washington-state-frequently-asked-questions-faq>



Washington Office of Superintendent of **PUBLIC INSTRUCTION**

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Sexual Health Education Requirements in Washington State: Frequently Asked Questions (FAQ)

Contact Information

Sexual Health Education

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What is my district/school required to teach related to sexual health?

HIV/AIDS prevention is required for all students in Washington **annually**, through grade 12, beginning no later than 5th grade. This requirement was established by the [AIDS Omnibus Act](#) (RCW 28A.230.070).

What does the AIDS Omnibus Act require?

In addition to requiring that all students receive yearly instruction starting no later than grade 5, HIV/AIDS prevention education must:

- Be approved for medical accuracy
- Address the life-threatening dangers of HIV/AIDS, its transmission, and its prevention
- Include behaviors that place a person at risk of contracting HIV and methods to avoid such risk

In addition, schools must:

- Provide a parent/guardian curriculum preview presentation, during weekend or evening hours (including curriculum and other materials used for instruction)
- Provide notice of the curriculum preview event at least one month prior to instruction
- Allow parents/guardians to remove students from HIV/AIDS prevention education **if** they attended the preview event and **if** they object in writing

Is my district required to use the KNOW curriculum?

No, districts may use any curriculum that has been reviewed for medical accuracy and coverage of required content by either the WA Department of Health (DOH) or local experts as defined in the AIDS Omnibus Act. The KNOW curriculum, developed by OSPI at the direction of the legislature, has undergone DOH and Centers for Disease Control and Prevention (CDC) review and is approved for use in WA schools. Training on use of the KNOW curriculum is provided by OSPI, but is not required. The KNOW curriculum is available for free download on the [HIV/Sexual Health Education webpage](#). It is recommended that HIV prevention education occur in the context of comprehensive sexual health education.

Is my district required to teach other sexual health content?

There are several state laws requiring specific sexual health content in the public schools:

- [RCW 28A.230.020](#) (Common School Curriculum) requires that "all teachers shall stress the importance of...methods to prevent exposure to and transmission of sexually transmitted diseases..."
- [RCW 28A.300.145](#) was amended by the legislature in 2013 to require that schools offering sexual health education 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."

- IF schools do teach sexual health content, it must conform to the requirements of the **Healthy Youth Act (HYA)**.

What is the Healthy Youth Act?

In September 2008, Washington State's Healthy Youth Act (HYA) went into effect. This law, [RCW 28A.300.475](#), relates to medically and scientifically accurate sexual health education in schools. The Healthy Youth Act requires that when teaching sexual health education, schools **must assure that the instruction:**

- Is medically and scientifically accurate.
- Is age-appropriate.
- Is appropriate for students regardless of gender, race, disability status, or sexual orientation.
- Includes information about abstinence **and** other methods of preventing unintended pregnancy and sexually transmitted diseases, neither to the exclusion of the other.
- Is consistent with the 2005 [Guidelines for Sexual Health Information and Disease Prevention](#).

In addition, schools must ([WAC 392-410-140](#)):

- Provide at least one month's notice to parents before teaching sexual health education.
- Allow parents/guardians to review the sexual health education curriculum/materials offered in his or her child's school upon filing a written request with the school district board of directors, the principal of the school his or her child attends, or the principal's designee.
- Allow parents to excuse their child from sexual health education by submitting a written request.

What does "sexual health education" include?

[WAC 392-410-140](#) defines sexual health education as including development (physiological, psychological, and sociological), communication skills (intra- and interpersonal), health care and prevention resources, healthy relationships, and family/peer/community/media influences on healthy sexual relationships.

What is "comprehensive sexual health education"?

The term “comprehensive” refers to instruction that includes a wide variety of important sexual health topics and that is provided over time, each unit building on previous information and skills. The Health Education K-12 Learning Standards provide an example of comprehensive sexual health education.

What does "medically and scientifically accurate" mean?

"Medically and scientifically accurate" means information that is verified or supported by research in compliance with scientific methods, is published in peer reviewed journals, and is recognized as accurate by objective professional organizations and agencies with expertise in the field of sexual health, including DOH, the CDC, and the American College of Obstetricians and Gynecologists.

What does "age-appropriate" mean?

Age-appropriate refers to instructional materials and instruction that are based on the age and development of learners. It addresses relevant topics at a time that is most useful to protect students' health and well-being and to answer questions that typically arise. Health Education K–12 Learning Standards are age-appropriate, as determined by organizations like the American School Health Association, the National Education Association, the Society of State Leaders of Health and Physical Education, the American Association for Health Education, the American Academy of Pediatrics, and the Washington teachers who participated in developing grade-level outcomes.

Do schools have to use a specific curriculum?

No, schools can use any curriculum/materials they choose, as long as they comply with the requirements of the Healthy Youth Act. Schools are strongly encouraged to use the expertise of DOH to determine medical and scientific accuracy and to use the [OSPI](#) or [CDC](#) curriculum review tools to assess consistency with the 2005 Guidelines. The [HIV/Sexual Health Education page](#) contains reports on three major curriculum reviews done jointly by OSPI and DOH in 2009, 2011 and 2015, which assessed how commonly used curricula address HYA requirements.

Can schools use materials that have not been reviewed by OSPI and DOH?

Yes, schools can review their own materials for consistency with the Healthy Youth Act (see above). HIV/AIDS prevention materials must be reviewed by DOH for medical accuracy.

Can schools use the KNOW curriculum by itself and be compliant with the HYA?

No. The KNOW curriculum is an excellent tool for HIV prevention education, but it does not provide adequate content to meet the criteria outlined in the 2005 Guidelines for Sexual Health and Disease Prevention. Schools using the KNOW curriculum to satisfy the requirements of the AIDS Omnibus Act, who wish to provide additional sexual health education, should supplement the curriculum with other materials to be consistent with the Healthy Youth Act.

Can outside speakers provide sexual health presentations in schools?

Yes, schools may offer presentations by outside speakers as long as all speakers and their messages/materials are consistent with the requirements of the HYA (medically/scientifically accurate, appropriate for all students, including information about abstinence and other prevention methods, and consistent with the 2005 Guidelines). Abstinence-only presentations may not be provided and abstinence may not be taught to the exclusion of other instruction on contraceptives and disease prevention. Schools may refer to the "Sexual Health Education Guest Speaker Guidelines and Checklist," available on the [Healthy Youth Act](#) page of the OSPI website, to help assess speaker alignment with state law.

Who is responsible for implementing the Healthy Youth Act?

Implementation of the Healthy Youth Act is a partnership between OSPI and DOH. OSPI is required by law to provide regular updates of the list of reviewed curricula and to survey schools on curricula being used. DOH is available for technical assistance related to medical and scientific accuracy. OSPI and DOH coordinate closely to implement the HYA and to provide support to districts. Districts and schools are responsible for ensuring that their instruction is consistent with the law.

How do the 2016 [Health and PE Student Learning Standards](#) relate to the Healthy Youth Act?

Grade-level student learning outcomes provide guidance for schools on what students should know and be able to do related to a variety of topics, including sexual health. While the eight overarching health education standards are required to be taught, the grade-level outcomes are not required. They represent best practice and are aligned with state legislative requirements for districts that do provide such instruction. Adoption of the standards in 2016 did not change the fact that sexual health education is optional for districts in Washington State. There are no new instructional requirements for schools related to the standards.

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