



WISCONSIN

Wisconsin Sexuality Education Law and Policy

Wisconsin state law encourages, but does not require, school boards to provide “age-appropriate instruction in human growth and development” to grades K–12.¹ Such instruction is meant to provide students with “the knowledge, skills, and support necessary to make healthy decisions” throughout the lifespan regarding their sexual behavior.² The law specifies that instruction teach “medically accurate information,” defined as information “supported by the weight of research conducted in compliance with accepted scientific methods” and, where appropriate, “published in peer-reviewed journals” and “recognized as accurate by relevant leading professional organizations or agencies such as the “American Medical Association, the American Public Health Association, or the American Academy of Pediatrics.”³

Such instruction must address the following:

- the importance of parent-child communication regarding “sexuality and decision making about sexual behavior;”
- “reproductive and sexual anatomy and physiology, including the “biological, psychosocial, and emotional changes” that occur to the human body;
- “puberty, pregnancy, parenting, body image, and gender stereotypes;”
- “the skills needed to make responsible decisions about sexuality and sexual behavior,” including how to practice appropriate social behavior and “recognize, rebuff, and report any unwanted or inappropriate verbal, physical, and sexual behaviors;”
- “the benefits of and reasons for abstaining from sexual activity” that stresses “the value of abstinence as the most reliable way to prevent pregnancy” and sexually transmitted diseases (STDs);
- “the health benefits, side effects, and proper use of contraceptives and barrier methods” to prevent STDs;
- skills for goal-setting, responsible decision making, communication and stress management;
- “how alcohol and drug use affect responsible decision making;” and
- how the media and peers influence an individual’s “thoughts, feelings, and behaviors related to sexuality.”⁴

An educational program in human growth and development must also “use instructional methods and materials that do not promote bias against pupils of any race, gender, religion, sexual orientation, or ethnic or cultural background or against sexually active pupils or children with disabilities.”⁵ If a school board provides instruction in any of these areas, it must “also provide instruction in marriage and parental responsibility.”⁶

The Department of Public Instruction (DPI) is authorized to develop a health education program that includes instruction about STDs, including HIV/AIDS. The program also may include instruction

on human growth and development; however, state law specifies that participation in this component of the health education program is voluntary and DPI is prohibited from requiring local school boards to use a specific human growth and development curriculum.⁷

The DPI created the *Wisconsin School HIV/AIDS Policy Tool Kit* in 2003 to “increase the number of Wisconsin schools implementing scientifically and legally based policies and procedures related to HIV/AIDS,” including those for curriculum evaluation and selection.⁸ The DPI also produced *Human Growth and Development: A Resource Packet to Assist School Districts in Program Development, Implementation and Assessment* which provides information on teen sexual behavior, locally developed materials, other curriculum resources, and evaluation tools.

School boards that choose to provide instruction must provide annual notification to parents outlining the curriculum used for their child’s particular grade level.⁹ Parents and guardians must be given the opportunity to review all materials related to sexuality education classes. If such classes are offered, school boards must form advisory councils consisting of “parents, teachers, school administrators, pupils, health care professionals, members of the clergy, and other residents of the school district”¹⁰ to review the curricula at least every three years.

Parents or guardians may remove their children from sexuality education classes with a written request to the teacher or principal.¹¹ This is referred to as an “opt-out” policy.

See Wisconsin Statutes §§ 115.35, 118.01, and 118.019; *Wisconsin School HIV/AIDS Policy Tool Kit*, and *Human Growth and Development: A resource packet to assist school districts in program development, implementation and assessment*.

Recent Legislation

Comprehensive Sex Education Bill Passed into Law

The *Healthy Youth Act*, Assembly Bill 458, which was introduced in September 2009, requires school districts that offer instruction on human sexuality to provide medically accurate and age-appropriate information that addresses the benefits of abstinence and the benefits and proper use of contraceptives and barrier methods, among other topics. The bill also amends current statute to allow the state to apply for federal funds to be used for evidence-based teen pregnancy prevention programs that have demonstrated success in delaying teen sexual activity, increasing use of contraceptives and reducing pregnancy rates among teens. Governor Bill Ritter signed the bill into law on February 24, 2010.

Wisconsin’s Youth: Statistical Information of Note¹²

- In 2009, 41% of female high school students and 41% of male high school students in Wisconsin reported ever having had sexual intercourse compared to 46% of female high school students and 46% of male high school students nationwide.
- In 2009, 3% of female high school students and 4% of male high school students in Wisconsin reported having had sexual intercourse before age 13 compared to 3% of female high school students and 8% of male high school students nationwide.
- In 2009, 9% of female high school students and 11% of male high school students in Wisconsin reported having had four or more lifetime sexual partners compared to 11% of female high school students and 16% of male high school students nationwide.

W I S C O N S I N

- In 2009, 32% of female high school students and 27% of male high school students in Wisconsin reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey) compared to 36% of female high school students and 33% of male high school students nationwide.
- In 2009, among those high school students who reported being currently sexually active, 60.5% of females and 69% of males in Wisconsin reported having used condoms the last time they had sexual intercourse compared to 54% of females and 69% of males nationwide.
- In 2009, among those high school students who reported being currently sexually active, 33% of females and 20% of males in Wisconsin reported having used birth control pills the last time they had sexual intercourse compared to 23% of females and 16% of males nationwide.
- In 2009, among those high school students who reported being currently sexually active, 14% of females and 19% of males in Wisconsin reported having used alcohol or drugs the last time they had sexual intercourse compared to 17% of females and 26% of males nationwide.
- In 2009, 90% of high school students in Wisconsin reported having been taught about AIDS/HIV in school compared to 87% of high school students nationwide.

Milwaukee, Wisconsin

- In 2009, 59% of female high school students and 68% of male high school students in Milwaukee, Wisconsin reported ever having had sexual intercourse compared to 46% of female high school students and 46% of male high school students nationwide.
- In 2009, 5% of female high school students and 20% of male high school students in Milwaukee, Wisconsin reported having had sexual intercourse before age 13 compared to 3% of female high school students and 8% of male high school students nationwide.
- In 2009, 16% of female high school students and 33% of male high school students in Milwaukee, Wisconsin reported having had four or more lifetime sexual partners compared to 11% of female high school students and 16% of male high school students nationwide.
- In 2009, 43% of female high school students and 45% of male high school students in Milwaukee, Wisconsin reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey) compared to 36% of female high school students and 33% of male high school students nationwide.
- In 2009, among those high school students who reported being currently sexually active, 60% of females and 74% of males in Milwaukee, Wisconsin reported having used condoms the last time they had sexual intercourse compared to 54% of females and 69% of males nationwide.

- In 2009, among those high school students who reported being currently sexually active, 11% of females and 11% of males in Milwaukee, Wisconsin reported having used birth control pills the last time they had sexual intercourse compared to 23% of females and 16% of males nationwide.
- In 2009, among those high school students who reported being currently sexually active, 13% of females and 22% of males in Milwaukee, Wisconsin reported having used alcohol or drugs the last time they had sexual intercourse compared to 17% of females and 26% of males nationwide.
- In 2009, 85% of high school students in Milwaukee, Wisconsin reported having been taught about AIDS/HIV in school compared to 87% of high school students nationwide.

Wisconsin Youth Sexual Health Statistics

Teen Pregnancy, Birth, and Abortion

- Wisconsin's teen pregnancy rate ranks 45th in the U.S., with a rate of 47 pregnancies per 1,000 young women ages 15–19 compared to the national rate of 70 pregnancies per 1,000.¹³ There were a total of 9,300 pregnancies among young women ages 15–19 reported in 2005, the most recent year for which data are available, in Wisconsin.¹⁴
- Wisconsin's teen birth rate ranked 42nd in the U.S., with a rate of 30.3 births per 1,000 young women ages 15–19 compared to the national rate of 40.5 births per 1,000.¹⁵ In 2005, there were a total of 6,011 live births reported to young women ages 15–19 in Wisconsin.¹⁶
- In 2006, the U.S. teen birth rate increased for the first time in 15 years by 3% from 40.5 to 41.9 births per 1,000 young women ages 15–19, after having steadily declined between 1991 and 2005.¹⁷ Wisconsin's teen birth rate also increased between 2005 and 2006, from 30.3 to 30.9 births per 1,000 young women ages 15–19.¹⁸
- Wisconsin's teen abortion rate ranks 34th in the U.S., with a rate of 9 abortions per 1,000 young women ages 15–19 compared to the national rate of 19 abortions per 1,000. In 2005, there were a total of 1,615 abortions reported among young women ages 15–19 in Wisconsin.¹⁹

HIV and AIDS

- Wisconsin ranks 28th in cases of HIV infection diagnosed in the U.S. among all age groups. In 2007, there were a total of 181 new cases of HIV infection diagnosed.²⁰
- Wisconsin ranks 22nd in cases of HIV/AIDS diagnosed among young people ages 13–19 out of the 34 states with confidential, name-based HIV infection reporting. In 2007, there were a total of 11 young people ages 13–19 diagnosed with HIV/AIDS in Wisconsin.²¹
- Wisconsin's AIDS rate ranks 42nd in the U.S., with a rate of 3.6 cases per 100,000 population compared to the national rate of 12.5 cases per 100,000.²²
- Wisconsin ranks 31st in number of reported AIDS cases in the U.S. among all age groups. In 2007, there were a total of 199 new AIDS cases reported in Wisconsin.²³
- Wisconsin ranks 22nd in number of reported AIDS cases in the U.S. among young people ages 13–19. In 2007, there were a total of 4 AIDS cases reported among young people ages 13–19 in Wisconsin.²⁴

Sexually Transmitted Diseases

- Wisconsin ranks 28th in reported cases of Chlamydia among young people ages 15–19 in the U.S., with an infection rate of 18.26 cases per 1,000 compared to the national rate of 19.51 cases per 1,000. In 2008, there were a total of 7,290 cases of Chlamydia reported among young people ages 15–19 in Wisconsin.²⁵
- Wisconsin ranks 20th in reported cases of gonorrhea among young people ages 15–19 in the U.S., with an infection rate of 5.12 cases per 1,000 compared to the national rate of 4.52 cases per 1,000. In 2008, there were a total of 2,046 cases of gonorrhea reported among young people ages 15–19 in Wisconsin.²⁶
- Wisconsin ranks 31st in reported cases of primary and secondary syphilis among young people ages 15–19 in the U.S., with an infection rate of 0.01 cases per 1,000 compared to the national rate of 0.04 cases per 1,000. In 2008, there were a total of 4 cases of syphilis reported among young people ages 15–19 in Wisconsin.²⁷

Comprehensive Approaches to Sex Education

*SIECUS has identified some examples of model programs, policies, and best practices being implemented in Wisconsin public schools that provide a more comprehensive approach to sex education for young people.*²⁸

Revised State Sex Education Policy

The *Healthy Youth Act*, Wisconsin Act 134, was signed into law by Governor Bill Ritter on February 24, 2010. The legislation permits school districts to teach age-appropriate and medically accurate comprehensive sexuality education. The *Healthy Youth Act* establishes additional requirements for human sexuality instruction than what previously existed under state law and repeals former statute that, among other stipulations, required instruction to stress “abstinence from sexual activity before marriage [as] the most effective way to prevent pregnancy” and STDs, including HIV/AIDS and present abstinence “as the preferred choice of behavior in relationship to all sexual activity for unmarried pupils.”²⁹

The revised law emphasizes positive youth development and ensures that students receive complete and accurate information—regarding sexuality, human growth and development, abstinence, and effective prevention methods to reduce the risk of unintended pregnancy, STDs, and HIV—and develop the skills necessary to maintain healthy relationships, delay sexual initiation, and practice sexual health behavior and decision making. Furthermore, the law positions Wisconsin to apply for federal funding to support comprehensive approaches for delaying sexual activity, increasing contraceptive use, and otherwise reduce the risk of unintended pregnancy among adolescents.

We encourage you to submit any updated or additional information on comprehensive approaches to sex education being implemented in Wisconsin public schools for inclusion in future publications of the SIECUS State Profiles. Please visit SIECUS’ “Contact Us” webpage at www.siecus.org to share information. Select “state policy” as the subject heading.

Federal Funding for Abstinence-Only-Until-Marriage Programs

Community-based organizations in Wisconsin received \$2,743,419 in federal funds for abstinence-only-until-marriage programs in Fiscal Year 2009.³⁰

W I S C O N S I N

Title V Abstinence-Only-Until Marriage Funding

- Wisconsin chose not to participate in the Title V abstinence-only-until-marriage program in Fiscal Year 2009. The state was eligible for approximately \$161,398 in funding. Due to the expiration of the grant program on June 30, 2009, three months prior to the end of the federal fiscal year, the state would have received three quarters of the total funding allocated for the full fiscal year.

Community-Based Abstinence Education (CBAE) Funding

- Public and private entities in Wisconsin received \$2,591,419 in CBAE funding for Fiscal Year 2009.
- There are five CBAE grantees in Wisconsin, including three community-based organizations, one not-for-profit consulting organization, and one school district.

Adolescent Family Life Act (AFLA) Funding

- There is one AFLA grantee in Wisconsin, the Red Cliff Band of Lake Superior Chippewa Indians, which received \$152,000 in AFLA funding for Fiscal Year 2009.

Abstinence-Only-Until-Marriage Curricula Used by Grantees

SIECUS is not aware of any commercially available curricula used by abstinence-only-until-marriage grantees in Wisconsin.

To read reviews of abstinence-only-until-marriage curricula commonly used by federal grantees please visit the “Curricula and Speaker Reviews” webpage of SIECUS’ Community Action Kit at www.communityactionkit.org.

Federal Funding for Abstinence-Only-Until-Marriage Programs in FY 2009³¹

Abstinence-Only-Until-Marriage Grantee	Title V	CBAE (Length of Grant)	AFLA (Length of Grant)
AIDS Resource Center of Wisconsin www.arcw.org		\$600,000 (2008–2013)	
The Center for Self-Sufficiency www.centerinc.org		\$599,800 (2008–2013)	
High Expectations, Inc. www.high-expectations.org		\$300,000 (2007–2012)	
Red Cliff Band of Lake Superior Chippewa Indians www.redcliff-nsn.gov			\$152,000 (2004–2009)

W I S C O N S I N

Abstinence-Only-Until-Marriage Grantee	Title V	CBAE (Length of Grant)	AFLA (Length of Grant)
Rosalie Manor Community and Family Services www.rosaliemanor.org www.untilisay.com		\$599,800 (2007–2012)	
School District of Westfield www.westfield.k12.wi.us		\$491,819 (2008–2013)	

Adolescent Health Contact³²

Terry Kruse
 Wisconsin Department of Health and Family Services
 One West Wilson Street, Room 531
 P.O. Box 8916
 Madison, WI 53708
 Phone: (608) 267-9662

Wisconsin Organizations that Support Comprehensive Sexuality Education

ACLU of Wisconsin
 207 East Buffalo Street, Suite 325
 Milwaukee, WI 53202
 Phone: (414) 272-4032

Fair Wisconsin
 122 State Street, Suite 500
 Madison, WI 53703
 Phone: (608) 441-0143
www.fairwisconsin.org

Milwaukee LGBT Community Center
 315 West Court Street Suite 101
 Milwaukee, WI 53212
www.mkelgbt.org

NARAL Pro-Choice Wisconsin
 122 State Street, Suite 308
 Madison, WI 53703
 Phone: (608) 287-0016
www.prochoicewisconsin.org

Planned Parenthood Advocates of Wisconsin
 P.O. Box 2566
 Madison, WI 53701
 Phone: (608) 256-7549
www.ppawi.org

Wisconsin AIDS Fund
 1020 North Broadway, Suite 112
 Milwaukee, WI 53202
 Phone: (414) 272-5805
www.wisconsinaidfund.org

Wisconsin Organizations that Oppose Comprehensive Sexuality Education

Pro-Life Wisconsin
19270 North Hills Drive
P.O. Box 221
Brookfield, WI 53045
Phone: (262) 796-1111
www.prolifewisconsin.org

Wisconsin Family Action
P.O. Box 1327
Madison, WI 53701
Phone: (608) 268-5074
www.wifamilyaction.org

Newspapers in Wisconsin³³

The Capital Times
Newsroom
P.O. Box 8060
Madison, WI 53708
Phone: (608) 252-6400
www.madison.com

Green Bay Press-Gazette
Newsroom
435 East Walnut Street
Green Bay, WI 54301
Phone: (920) 431-8400
www.greenbaypressgazette.com

The Journal Times
Newsroom
212 4th Street
Racine, WI 53403
Phone: (262) 634-3322
www.journaltimes.com

Kenosha News
Newsroom
5800 7th Avenue
Kenosha, WI 53140
Phone: (262) 657-1000
www.kenoshanews.com

Milwaukee Journal Sentinel
Newsroom
333 West State Street
Milwaukee, WI 53203
Phone: (414) 224-2919
www.jsonline.com

Oshkosh Northwestern
Newsroom
224 State Street
Oshkosh, WI 54901
Phone: (920) 235-7700
www.thenorthwestern.com

The Post-Crescent
Newsroom
306 West Washington Street
Appleton, WI 54911
Phone: (920) 733-4411
www.postcrescent.com

Political Blogs in Wisconsin

Blogging Blue
www.bloggingblue.com

Eye on Wisconsin
www.eye-on-wisconsin.blogspot.com

Forward our Motto
www.forwardourmotto.blogspot.com

Uppity Wisconsin
www.uppitywis.org

- ¹ Wis. Stat. § 118.01(1) and (2), <<http://www.legis.state.wi.us/2009/data/acts/09Act134.pdf>>.
- ² Wis. Stat. § 118.01(1).
- ³ Wis. Stat. § 118.01(2)(b)1–3.
- ⁴ Wis. Stat. § 118.019(2)(a)1–9.
- ⁵ Wis. Stat. § 118.019(2)(b).
- ⁶ Wis. Stat. § 118.019(2m)(a).
- ⁷ Wis. Stat. § 115.35(1).
- ⁸ *Wisconsin School HIV/AIDS Policy Tool Kit* (Madison, WI: Wisconsin Department of Public Instruction, 2003), accessed 15 April 2010, <<http://dpi.wi.gov/sspw/pdf/hivtoolkit.pdf>>, 9.
- ⁹ Wis. Stat. § 118.019(3).
- ¹⁰ Wis. Stat. § 118.019(5).
- ¹¹ Wis. Stat. § 118.019(4).
- ¹² Danice K. Eaton, et al., “Youth Risk Behavior Surveillance—United States, 2009,” *Surveillance Summaries, Morbidity and Mortality Weekly Report*, vol. 59, no. SS-5 (4 June 2010): 98–109, accessed 4 June 2010, <<http://www.cdc.gov/mmwr/pdf/ss/ss5905.pdf>>. Note: Milwaukee also participated in the 2009 YRBS.
- ¹³ *U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity*, (Washington, DC: Guttmacher Institute, January 2010), accessed 5 March 2010, <<http://www.guttmacher.org/pubs/USTPTrends.pdf>>, Table 3.1.
- ¹⁴ *Ibid.*, Table 3.2.
- ¹⁵ Joyce A. Martin, et al., “Births: Final Data for 2006,” *National Vital Statistics Reports*, vol. 57, number 7 (Hyattsville, MD: Centers for Disease Control and Prevention, 7 January 2009), accessed 5 March 2010, <http://www.cdc.gov/nchs/data/nvsr/nvsr57_07.pdf>, Table B.
- ¹⁶ *U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity*, Table 3.2.
- ¹⁷ Martin, et al., “Births: Final Data for 2006,” 4.
- ¹⁸ *Ibid.*, Table B.
- ¹⁹ *U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity*, Table 3.5.
- ²⁰ “Cases of HIV Infection and AIDS in the United States and Dependent Areas, 2007,” *HIV/AIDS Surveillance Report*, vol. 19, (Atlanta, GA: Centers for Disease Control and Prevention, February 2009), accessed 5 March 2010, <<http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2007report/pdf/2007SurveillanceReport.pdf>>, Table 18.
- ²¹ Slide 6: “Estimated Numbers of HIV/AIDS Cases among Adolescents 13 to 19 Years of Age, 2007—34 States,” *HIV/AIDS Surveillance in Adolescents and Young Adults (through 2007)*, (Atlanta, GA: Centers for Disease Control and Prevention, May 2009), accessed 25 March 2010, <<http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>>.
- ²² *Ibid.*; “AIDS Case Rate per 100,000 Population, All Ages, 2007,” (Menlo Park, CA: Kaiser Family Foundation), accessed 5 March 2010, <<http://www.statehealthfacts.org/comparetable.jsp?ind=513&cat=11&sub=120&yr=62&typ=1&sort=a>>.
- ²³ *Ibid.*, Table 16.
- ²⁴ Slide 15: “Reported AIDS Cases among Adolescents 13 to 19 Years of Age, 2007—United States and Dependent Areas,” *HIV/AIDS Surveillance in Adolescents and Young Adults (through 2007)*, (Atlanta, GA: Centers for Disease Control and Prevention, May 2009), accessed 25 March 2010, <<http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>>.
- ²⁵ “Wonder Database: Selected STDs by Age, Race/Ethnicity, and Gender, 1996–2008 Results,” (Atlanta, GA: Centers for Disease Control and Prevention), 30 June 2009, accessed 5 March 2010, <<http://wonder.cdc.gov/>>; see also Table 10: “Chlamydia: Reported Cases and Rates Per 100,000 Population by Age Group and Sex: United States, 2004–2008,” *Sexually Transmitted Disease Surveillance 2008*, (Atlanta, GA: Centers for Disease Control and Prevention, Division of STD Prevention, November 2009), accessed 5 March 2010, <<http://www.cdc.gov/std/stats08/surv2008-Complete.pdf>>, 95.
- ²⁶ *Ibid.*; see also Table 20: “Gonorrhea—Reported Cases and Rates per 100,000 Population by Age Group and Sex: United States, 2004–2008,” *Sexually Transmitted Disease Surveillance 2008*, 106.
- ²⁷ *Ibid.*; see also Table 33: “Primary and Secondary Syphilis—Reported Cases and Rates per 100,000 Population by Age Group and Sex: United States, 2004–2008,” *Sexually Transmitted Disease Surveillance 2008*, 121.
- ²⁸ This is by no means a complete list of all comprehensive programming and policies related to sexuality education, but rather some examples of best practices and model programs that SIECUS identified.
- ²⁹ Previous Wis. Stat. § 118.019(2m)(b)(2) and (1).
- ³⁰ This refers to the federal government’s fiscal year, which begins on October 1st and ends on September 30th. The fiscal year is designated by the calendar year in which it ends; for example, Fiscal Year 2009 began on October 1, 2008 and ended on September 30, 2009.
- ³¹ Through the Fiscal Year 2010 appropriations process, Congress eliminated all discretionary funding for abstinence-only-until-marriage programs, including the entire CBAE program and the abstinence-only-until-marriage portion of AFLA. The grant years listed in the chart reflect the years for which funding was originally approved; however, the grants effectively ended in Fiscal Year 2009.

³² SIECUS has identified this person as a state-based contact for information on adolescent health and if applicable, abstinence-only-until-marriage programs.

³³ This section is a list of major newspapers in your state with contact information for their newsrooms. This list is by no means exhaustive and does not contain the local level newspapers which are integral to getting your message out to your community. SIECUS strongly urges you to follow stories about the issues that concern you on the national, state, and local level by using an internet news alert service such as [Google alerts](#), becoming an avid reader of your local papers, and establishing relationships with reporters who cover your issues. For more information on how to achieve your media goals visit the SIECUS [Community Action Kit](#).