

The SIECUS State Profiles



IDAHO

IDAHO'S SEX ED SNAPSHOT

THE STATE OF SEX EDUCATION

Advocates in Idaho have worked to advance sex education at the state and local level in recent years, with their most recent efforts dedicated to ensuring a restrictive parental “opt-in” bill, [House Bill 120](#), did not pass the state legislature.

In 2018, Representative Julie VanOrden introduced [House Bill 414](#) which sought to require sex education curriculum to be medically accurate and include instruction on healthy relationships. Representative VanOrden later introduced [House Bill 579](#) which removed the previous bill's inclusion of healthy relationships and included recognition of the importance of families in their children's education. Although both bills maintained an emphasis on local control of sex education curriculum, including families and community groups in the planning process, and allowed students to be excused from sex education instruction, the bills sparked public debate. Opponents such as the Family Policy Alliance of Idaho believed House Bill 579 to be a direct attack on the rights of parents to direct their children's education. While both bills sought to advance sex education in 2018, further regressive efforts in 2019 demonstrated a range of public opinions among Idaho residents. In 2019, Representative Barbara Ehardt introduced [House Bill 120](#) in an effort to require parents to provide their consent before their children could participate in a sex education course. This is referred to as an “[opt-in](#)” policy and presents an unnecessary barrier to receiving sex education, given that parents are already able to remove their children from instruction under Idaho's “opt-out” policy. Advocates strongly opposed the bill and successfully prevented its passage.

Since Idaho 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 provide. While Idaho's standards require curriculum to encourage abstinence, include instruction on pregnancy and disease prevention and the consequences of sexual activity, healthy relationships, puberty, and STDs, local school districts determine if they want to provide additional instruction. As a consequence, advocates report that the quality of sex education being taught varies greatly by district. Some districts provide comprehensive sex education, while many provide abstinence-only instruction and the remaining choose not to teach sex education at all. Mandating local control over sex education presents unique challenges that have resulted in a glaring disparity regarding the quality of sex education that students receive. Such discretion allows for the implementation of policies and curriculum that stigmatize marginalized youth, such as students of color and LGBTQ youth, and presents further challenges in ensuring that low income districts have access to the resources needed to implement comprehensive sex education.

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Idaho schools have previously demonstrated their disinterest in recognizing the needs of LGBTQ youth after a majority of public schools [failed](#) to adopt protective policies on gender identity and gender expression proposed by the Idaho School Board Association in 2015. Research has [recently found](#) that increased support for LGBTQ students drastically improves mental health outcomes for these young people. Increased action is necessary to ensure LGBTQ youth receive the support they need in order to succeed.

Advocates report that the embroiled political climate in Idaho paired with the minimal health education requirements and a lack of resources to advance sex education create significant barriers to implementing comprehensive sex education across the state.

In an effort to provide young people with access to comprehensive sex education, Planned Parenthood of Greater Washington and North Idaho have begun facilitating a [Youth Empowerment Program](#). Within this program, young people are trained as peer educators to empower young people in their communities to prioritize their sexual and reproductive health.

Right now, advocates can take action to ensure 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 with a focus on ensuring that local LGBTQ youth receive the support they need through the inclusion of sexual orientation and gender identity in sex education instruction. Current advocates report that increased community education is essential to fight against future efforts to implement a parental [opt-in policy](#) and successfully implement advanced sex education curriculum. Those seeking to become involved in advancing sex education can start by addressing misconceptions concerning comprehensive sex education and the benefits of implementing more comprehensive curriculum.

Further, advocates can contact their representatives to discuss the critical need for updated health education requirements, increased funding and staff to support districts with the implementation of advanced curriculum, and the importance of amending the current statute to require inclusive sex education statewide. 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

- Idaho schools are **not** required to teach sex education.
 - If a school offers sex education, curriculum must encourage abstinence.
- Curriculum is not required to include instruction on sexual orientation or gender identity.
- Curriculum is not required to include instruction on consent.
- Parents or guardians can file a written request to the school board to remove their children from sex education instruction. [This is referred to as an “opt-out” policy.](#)
- Idaho statute has no standard on medically accurate sex education. However, the Idaho Department of Education’s health education standards state that growth, development, and family life instruction should 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 Idaho’s profile.

2019 Legislative Session

House Bill 120 (failed):

- Sought to require parents or guardians to provide written permission before their children could participate in sex education. [This is referred to as an “opt-in” policy.](#)

MORE ON SEX ED IN IDAHO

STATE LAW

Sex education is not mandated in Idaho. [Idaho Statute §33-1608](#) states that the “primary responsibility of family life and sex education” rests with a student’s home and church and that “the schools can only complement and supplement those standards which are established in the family.” Local school boards may decide to offer sex education. If a school board institutes sex education, the program must place “major emphasis” on the home (including “appreciation of the important place the family home holds in the social system of our culture”), family, and church as areas of importance for learning such knowledge. School boards must include parents and community groups in all aspects of instituting and evaluating sex education programs.

In addition, the statute states that programs should give young people “the scientific, physiological information for understanding sex and its relation to the miracle of life.” They must also include “knowledge of the power of the sex drive and the necessity of controlling that drive by self-discipline.”

Parents or guardians who wish to excuse their children from sex education must file a written request to the school board. The school board will then supply the parent with the necessary forms to remove the child from the class. [This is referred to as an “opt-out” policy.](#)

STATE STANDARDS

For schools offering sex education, the Idaho Department of Education’s [Idaho Content Standards for Health Education](#) requires content related to the “consequences of sexual activity” beginning in grades 6-8. By grade 12, this content should include “encouragement of abstinence from sexual activity, sexually transmitted diseases (STDs) (e.g., transmission and prevention), and pregnancy prevention.” All information should be “factual, medically accurate, and objective.”

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. Idaho's 2020 session convened January 13, 2020.

2019 SESSION: ADJOURNED APRIL 11, 2019

TITLE	DESCRIPTION	STATUS
HOUSE BILL 52	PROHIBITS LICENSED COUNSELORS FROM ENGAGING IN CONVERSION THERAPY WITH A PERSON UNDER 18 YEARS OLD. PROHIBITS STATE FUNDING FOR CONVERSION THERAPY.	DIED IN THE HOUSE COMMITTEE ON WAYS AND MEANS
HOUSE BILL 120	REQUIRES PARENTS OR GUARDIANS TO PROVIDE WRITTEN PERMISSION FOR THEIR CHILDREN TO PARTICIPATE IN SEX EDUCATION.	DIED IN THE SENATE COMMITTEE ON EDUCATION

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

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Reported teaching all 20 critical sexual health education topics

- 9.4% of Idaho secondary schools taught students all 20 critical sexual health education topics in a required course in any of grades 6, 7, or 8.
- 20.3% of Idaho 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

- 72.0% of Idaho secondary schools taught students about the benefits of being sexually abstinent in a required course in any of grades 6, 7, or 8.
- 96.8% of Idaho 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

- 56.8% of Idaho 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.
- 87.0% of Idaho 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

- 72.8% of Idaho 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.
- 94.6% of Idaho 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

- 54.6% of Idaho 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.
- 87.2% of Idaho 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

- 13.7% of Idaho secondary schools taught students how to correctly use a condom in a required course in any of grades 6, 7, or 8.
- 36.3% of Idaho 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

- 34.5% of Idaho secondary schools taught students about methods of contraception other than condoms in a required course in any of grades 6, 7, or 8.
- 72.2% of Idaho secondary schools taught students about methods of contraception other than condoms in a required course in any of grades 9, 10, 11, or 12.

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Reported teaching about sexual orientation

- 31.0% of Idaho secondary schools taught students about sexual orientation in a required course in any of grades 6, 7, or 8.
- 50.6% of Idaho 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

- 29.1% of Idaho secondary schools taught students about gender roles, gender identity, or gender expression in a required course in any of grades 6, 7, or 8.
- 42.1% of Idaho 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

- 30.8% of Idaho 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](#).