

The SIECUS State Profiles



Missouri

MISSOURI'S SEX ED SNAPSHOT

THE STATE OF SEX EDUCATION

Advocates in Missouri have successfully made incremental advancements to Missouri's sex education requirements and are now considering further efforts to revise the state's current mandate. In 2015, Representative Genise Montecillo successfully championed [House Bill 501](#), which requires sex education instruction to include information on the dangers of sexual predators and how to remain safe on the internet. In 2018, the legislature passed [House Bill 1601](#), sponsored by Representative Holly Rehder and written collaboratively with University of Missouri students, requiring sex education curriculum to include instruction on consent and sexual violence. Such efforts demonstrate consistent support to make sex education more comprehensive in Missouri and provide a framework that advocates may reference to make further advancements.

In addition to these statewide efforts, grassroots advocacy efforts have also focused on advancing local sex education requirements. Missouri advocates report that there are only a few schools that are providing comprehensive sex education, while the majority of districts provide abstinence-only or abstinence-plus instruction. Parkway School District and Lindbergh School District successfully amended their requirements to ensure students receive more comprehensive and inclusive instruction in 2016 and 2017 respectively, and two additional districts are currently in the process of updating their curriculum. Still, the patchwork nature of Missouri's sex education curriculum requirements fail to ensure that all students receive the same quality of sex education. Students [report](#) that their sex education curriculum continues to lack vital information related to reproductive health, including topics such as endometriosis and other uterine disorders. Further, an abysmal three percent of Missouri students [reported](#) receiving LGBTQ-inclusive sex education, according to GLSEN's 2017 National School Climate Survey.

Since Missouri 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 to youth. 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.

To bridge the gaps in education, advocates recommend legislation that requires Missouri schools to include instruction on sexual orientation and gender identity in their sex education curriculum. To ensure more youth have access to comprehensive instruction, they also recommend that the Missouri legislature amend current provisions that prohibit Planned Parenthood educators from teaching sex education. Further, passing legislation that requires all schools to provide comprehensive sex education would ensure that every student in the state receives quality instruction.

Right now, advocates can take action to ensure young people in their community have access to quality sex education. After contacting their local school board, advocates can determine what topics are missing from sex education instruction, such as instruction on consent, sexual orientation and gender identity, and contraceptives. They can then vocalize the important need for advancing sex education requirements in their community. Further, advocates can contact their representatives to discuss the critical need for advancing comprehensive sex education requirements. 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

- Missouri schools are **not** required to teach sex education. However, they are required to teach health education, including HIV/AIDS prevention education.
 - Curriculum is not required to be comprehensive.
 - Curriculum must present abstinence as the preferred choice of behavior.
- If sex education is offered, curriculum is not required to include instruction on sexual orientation or gender identity.
- If sex education is offered, curriculum must include instruction on consent.
- Parents and guardians can remove their children from any part of their sex education instruction. [This is referred to as an “opt-out” policy.](#)
- All course materials related to HIV/AIDS, along with sex education curriculum if offered, 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 Missouri’s profile.

2020 Legislative Session

House Bill 1565 (pending):

- If successful, would clarify the ability of parents and guardians to remove their children from all or part of the district’s or school’s instruction relating to human sexuality or STDs.

MORE ON SEX ED IN MISSOURI

State Law

Missouri schools are required by [Missouri Revised Statute § 170.015](#) to teach health education, including human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) prevention education, beginning in elementary school. If a school chooses to provide additional sex education, Missouri law mandates that all instruction must be medically and factually accurate and “present abstinence from sexual activity as the preferred choice of behavior in relation to all sexual activity for unmarried pupils.” In addition, instruction must “advise students that teenage sexual activity places them at a higher risk of dropping out of school because of the consequences of sexually transmitted diseases [STDs] and unplanned pregnancy.”

Among other requirements, the instruction must also:

- 2) Stress that [STDs] are serious, possible, health hazards of sexual activity. Pupils shall be provided with the latest medical information regarding exposure to [HIV], [AIDS], human papillomavirus [HPV], hepatitis, and other [STDs];
- 3) Present students with the latest medically factual information regarding both the possible side effects and health benefits of all forms of contraception, including the success and failure rates for the prevention of pregnancy and [STDs]; or shall present students with information on contraceptives and pregnancy in a manner consistent with the provisions of the federal abstinence education law, 42 U.S.C. Section 510;
- 4) Include a discussion of the possible emotional and psychological consequences of preadolescent and adolescent sexual activity and the consequences of adolescent pregnancy[iv]

The statute was first amended in 2015 to include instruction on “the dangers of sexual predators, including online predators when using electronic communication methods” and “the consequences, both personal and legal, of inappropriate text messaging.” Later, in 2018, the statute was [amended again](#) to include instruction on sexual harassment, sexual violence, and consent.

The specific content of human sexuality instruction must be determined by the school board of each school district or charter school. School districts and charter schools are prohibited from providing abortion services and allowing a person and/or entity that provides abortion services to “offer, sponsor, or furnish” course materials related to human sexuality and STDs.

Prior to instruction, school districts and charter schools must make all curriculum materials available for public inspection. Parents have the right to remove their child from any part of the district’s or school’s human sexuality instruction. [This is referred to as an “opt-out” policy.](#)

STATE STANDARDS

Missouri provides the [Health Education Grade-Level Expectations](#) to guide schools in developing a health education curriculum. Teen pregnancy, contraception, and the transmission, treatment, and prevention of sexually transmitted infections (STIs) are mentioned, as are “behaviors that could enhance HIV transmission.”

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 healthcare services. Below are highlights of current legislative activity related to these topics.

2020 Session: Convened January 8, 2020

TITLE	DESCRIPTION	STATUS
HOUSE BILL 1565	CLARIFIES THE ABILITY OF PARENTS AND GUARDIANS TO REMOVE THEIR CHILDREN FROM ALL OR PART OF THE DISTRICT'S OR SCHOOL'S INSTRUCTION RELATING TO HUMAN SEXUALITY OR STDs.	REFERRED TO THE HOUSE COMMITTEE ON ELEMENTARY AND SECONDARY EDUCATION
HOUSE BILL 1574	PROHIBITS MISSOURI FROM DENYING THE RIGHT TO OBTAIN AN ABORTION AND PROTECTS THE RIGHT TO TERMINATE A PREGNANCY PRIOR TO VIABILITY OR IF NECESSARY TO PROTECT THE LIFE OR HEALTH OF THE PREGNANT PERSON.	READ SECOND TIME IN THE HOUSE
HOUSE BILL 2051	PROHIBITS ASSISTING, COERCING, OR PROVIDING A MINOR WITH GENDER AFFIRMING MEDICAL PROCEDURES OR HORMONAL TREATMENT.	REFERRED TO THE HOUSE COMMITTEE ON JUDICIARY
HOUSE BILL 2283	PROHIBITS HEALTHCARE PROVIDERS FROM PERFORMING CONVERSION THERAPY ON MINORS.	READ SECOND TIME IN THE HOUSE
HOUSE BILL 2285	PROHIBITS ABORTION IN ALL CASES WITH NO EXCEPTIONS.	INTRODUCED IN THE HOUSE
HOUSE JOINT RESOLUTION 82	PROHIBITS TRANSGENDER ATHLETES FROM COMPETING IN SCHOOL ATHLETICS UNLESS THEY JOIN THE TEAM WHICH CORRELATES WITH THEIR SEX ASSIGNED AT BIRTH.	REFERRED TO THE HOUSE COMMITTEE ON GENERAL LAWS
SENATE BILL 658	PROHIBITS ANY LICENSED PROFESSIONAL FROM ENGAGING IN CONVERSION THERAPY WITH A MINOR.	REFERRED TO THE SENATE COMMITTEE ON PROFESSIONAL REGISTRATION
SENATE JOINT RESOLUTION 50	PROHIBITS TRANSGENDER ATHLETES FROM COMPETING IN SCHOOL ATHLETICS UNLESS THEY JOIN THE TEAM WHICH CORRELATES WITH THEIR SEX ASSIGNED AT BIRTH.	REFERRED TO THE SENATE EDUCATION COMMITTEE

2019 SESSION: ADJOURNED MAY 17, 2019

TITLE	DESCRIPTION	STATUS
HOUSE BILL 126	PROHIBITS SELECTIVE ABORTION BASED ON THE PRENATAL DIAGNOSIS OF DOWN SYNDROME OR THE POTENTIAL OF DOWN SYNDROME AND ENACTS A TOTAL ABORTION BAN IF THE SUPREME COURT OF THE UNITED STATES OVERTURNS <i>ROE V. WADE</i> .	ENACTED

HOUSE BILL 127	REQUIRES PARENTS OR GUARDIANS WHO PROVIDE CONSENT FOR THEIR CHILD UNDER 18 YEARS OLD TO OBTAIN AN ABORTION TO NOTIFY ANY OTHER PARENT OR GUARDIAN OF THE ABORTION.	DIED IN THE HOUSE RULES-ADMINISTRATION OVERSIGHT COMMITTEE
HOUSE BILL 156	PROHIBITS ANY LICENSED PROFESSIONAL FROM ENGAGING IN CONVERSION THERAPY WITH A MINOR.	DIED IN THE HOUSE HEALTH AND MENTAL HEALTH POLICY COMMITTEE
HOUSE BILL 339	PROHIBITS ABORTION IF A PHYSICIAN DETERMINES THE FETUS IS CAPABLE OF FEELING PAIN UNLESS IN THE CASE OF A MEDICAL EMERGENCY	DIED IN THE HOUSE
HOUSE BILL 431	PROHIBITS ANY PERSON FROM TRANSPORTING A MINOR ACROSS A STATE LINE TO OBTAIN AN ABORTION WITHOUT THE CONSENT OF THE MINOR AND A PARENT OR GUARDIAN.	DIED IN THE HOUSE CHILDREN AND FAMILIES COMMITTEE
HOUSE BILL 536	PROHIBITS MISSOURI FROM DENYING THE RIGHT TO OBTAIN AN ABORTION AND PROTECTS THE RIGHT TO TERMINATE A PREGNANCY PRIOR TO VIABILITY OR IF NECESSARY TO PROTECT THE LIFE OR HEALTH OF THE PREGNANT PERSON.	DIED IN THE HOUSE CHILDREN AND FAMILIES COMMITTEE
HOUSE BILL 671	ASSERTS THAT LIFE BEGINS AT FERTILIZATION; ESTABLISHING THAT IT WILL NOT BE DEPRIVED OF LIFE, LIBERTY, OR PROPERTY WITHOUT DUE PROCESS OF LAW UNDER THE MISSOURI CONSTITUTION.	DIED IN THE HOUSE CHILDREN AND FAMILIES COMMITTEE
HOUSE BILL 680	PROHIBITS ABORTION IF A PHYSICIAN DETERMINES THE FETUS IS CAPABLE OF FEELING PAIN.	DIED IN THE HOUSE RULES ADMINISTRATIVE OVERSIGHT COMMITTEE
HOUSE BILL 771	PROHIBITS SELECTIVE ABORTION BASED ON THE PRENATAL DIAGNOSIS OF DOWN SYNDROME OR THE POTENTIAL OF DOWN SYNDROME.	DIED IN THE HOUSE CHILDREN AND FAMILIES COMMITTEE
HOUSE BILL 789	PROHIBITS ABORTION.	DIED IN THE HOUSE CHILDREN AND FAMILIES COMMITTEE
HOUSE BILL 850	PROHIBITS ABORTION IF A PHYSICIAN DETERMINES THE FETUS IS CAPABLE OF FEELING PAIN.	DIED IN THE HOUSE CHILDREN AND FAMILIES COMMITTEE
HOUSE BILL 870	PROHIBITS ABORTION IF A PHYSICIAN DETERMINES THE FETUS IS CAPABLE OF FEELING PAIN UNLESS IN THE CASE OF A MEDICAL EMERGENCY.	DIED IN THE HOUSE CHILDREN AND FAMILIES COMMITTEE
HOUSE BILL 964	PROHIBITS ABORTION IF A FETAL HEARTBEAT IS DETECTED EXCEPT IN THE CASE OF A MEDICAL EMERGENCY.	DIED IN THE HOUSE CHILDREN AND FAMILIES COMMITTEE
HOUSE BILL 1070	PROHIBITS ABORTION EXCEPT IN THE CASE OF A MEDICAL EMERGENCY.	DIED IN THE HOUSE CHILDREN AND FAMILIES COMMITTEE
HOUSE BILL 1174	REQUIRES EVERY LAW ENFORCEMENT AGENCY TO ADOPT A WRITTEN POLICY REGARDING INTERACTIONS WITH MINORS TO ENSURE THAT ALL MINORS ARE TREATED EQUALLY REGARDLESS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, ANCESTRY, SEX, SEXUAL	DIED IN THE HOUSE CRIME PREVENTION AND PUBLIC SAFETY COMMITTEE

	ORIENTATION, GENDER IDENTITY, AGE, DISABILITY, OR FAMILIAL STATUS.	
SENATE BILL 106	REQUIRES PARENTS OR GUARDIANS WHO PROVIDE CONSENT FOR THEIR CHILD UNDER 18 YEARS OLD TO OBTAIN AN ABORTION TO NOTIFY ANY OTHER PARENT OR GUARDIAN OF THE ABORTION.	DIED IN THE SENATE SENIORS, FAMILIES, AND CHILDREN COMMITTEE
SENATE BILL 139	PROHIBITS ABORTION IF A FETAL HEARTBEAT IS DETECTED UNLESS IN THE CASE OF A MEDICAL EMERGENCY.	BILL COMBINED WITH SENATE BILLS 279, 139, & 345
SENATE BILL 170	REPEALS THE PREVIOUSLY ENFORCED 72 HOUR WAITING PERIOD PRIOR TO AN ABORTION	DIED IN THE SENATE HEALTH AND PENSIONS COMMITTEE
SENATE BILL 279	PROHIBITS ABORTION IF A PHYSICIAN DETERMINES THE FETUS IS CAPABLE OF FEELING PAIN AND ESTABLISHES A TOTAL ABORTION BAN IF THE SUPREME COURT OF THE UNITED STATES OVERTURNS <i>ROE V. WADE</i> .	DIED IN THE SENATE
SENATE BILL 345	PROHIBITS ABORTION UNLESS IN THE CASE OF A MEDICAL EMERGENCY.	COMBINED WITH SENATE BILLS 279, 139, & 345

LEGISLATIVE KEY

<p>SEX EDUCATION REPRODUCTIVE HEALTH CARE SEXUAL ORIENTATION AND GENDER IDENTITY HIV/AIDS (THAT IMPACTS YOUTH)</p>

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 Missouri’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 Missouri as [reported](#) for the 2017–2018 school year.

Reported teaching all 20 critical sexual health education topics

- 17.6% of Missouri secondary schools taught students all 20 critical sexual health education topics in a required course in any of grades 6, 7, or 8.
- 26.1% of Missouri 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

- 76.7% of Missouri secondary schools taught students about the benefits of being sexually abstinent in a required course in any of grades 6, 7, or 8.
- 94.7% of Missouri 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

- 66.9% of Missouri 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.
- 91.6% of Missouri 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

- 76.7% of Missouri 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.
- 92.9% of Missouri 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

- 64.9% of Missouri 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.
- 89.0% of Missouri 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

- 24.5% of Missouri secondary schools taught students how to correctly use a condom in a required course in any of grades 6, 7, or 8.
- 37.4% of Missouri 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

- 44.9% of Missouri secondary schools taught students about methods of contraception other than condoms in a required course in any of grades 6, 7, or 8.
- 69.9% of Missouri 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

- 35.7% of Missouri secondary schools taught students about sexual orientation in a required course in any of grades 6, 7, or 8.
- 46.7% of Missouri 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

- 34.5% of Missouri secondary schools taught students about gender roles, gender identity, or gender expression in a required course in any of grades 6, 7, or 8.
- 49.3% of Missouri 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

- 44.3% of Missouri 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](#).