

The SIECUS State Profiles



NEVADA

NEVADA'S SEX ED SNAPSHOT

THE STATE OF SEX EDUCATION

Advocates have actively worked to advance sex education in Nevada at the state and local level over the past seven years, celebrating numerous successes and some set-backs. While advocates continue to push for an advanced statewide sex education requirement during the 2021 legislative session, local districts have taken the initiative to improve their curriculum.

In 2017, two bills were introduced to improve sex education requirements. [Assembly Bill 295](#), introduced by Assemblywoman Shannon Billbray-Axelrod, sought to require each school district to establish a sex education course that is evidence-based and factual, along with replacing Nevada's parental "opt-in" policy with an "opt-out" policy. "Opt-in" policies present an unnecessary barrier to receiving sex education. [Assembly Bill 348](#), introduced by Assemblywoman Amber Joiner, sought to require each school district's board of trustees to report the status of the district's course concerning human sexuality. The bill required: periodic revisions of course content to ensure that it is current, age-appropriate, medically accurate; cultural responsiveness to youth of color and LGBTQ young people; and appropriate for students who are learning English or who have physical or mental disabilities. Similar to Assembly Bill 295, Assembly Bill 348 also replaces Nevada's parental "opt-in" policy with an "opt-out" policy.

Both bills garnered public support from students, educators, and community members, but ultimately failed. While Assembly Bill 295 died in committee, Assembly Bill 348 passed both chambers but was vetoed by Governor Brian Sandoval. While efforts to advance sex education in Nevada are well received by many, there continue to be efforts to restrict such action. The Nevada Family Alliance actively opposes legislative efforts to update Nevada requirements, perpetuating false narratives concerning the nature of comprehensive sex education. Moving forward, advocates report that raising public awareness regarding the need for improved sex education will be a top priority to guarantee success in the 2021 legislative session.

While state-wide advancements to sex education are critical in ensuring all youth receive quality sex education instruction, local efforts are also critical. Advocates in Clark County School District, the largest school district in Nevada, have worked tirelessly since 2013 to further advance sex education requirements. They made progress in 2016 when the Clark County School Board approved seven new measures related to sex education, including mandating instruction on STIs, obtaining contraceptives, and consent and sexual assault. In 2019, the Washoe County School District approved new content requirements for sex education, mandating instruction on sexual orientation and gender identity, abstinence, responsible use of technology, information about contraceptives including the cost of an abortion, information on STIs, and consent. Such efforts demonstrate a subtle but significant effort to advance sex education in Nevada.

Sex education is not currently a graduation requirement in Nevada, although schools must offer a human sexuality course. While curriculum must include instruction on AIDS, the human reproductive system, related communicable diseases, and sexual responsibility, each district is tasked with determining what additional curriculum—if any at all—they provide to young people. 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.

Advocates report that students sometimes fail to receive any sex education at all and that abstinence-only proponents are occasionally invited into schools to teach sex education. [According to](#) Assemblywoman Amber Joiner, sex education curriculum lacks consistency even within districts. It has also been reported that instructors often lack access to training on teaching topics related to human sexuality, highlighting the need for further investment in educator trainings to ensure they are supported in providing medically accurate instruction. Students report varying levels of satisfaction with their sex education curriculum, and have [reported](#) that instructors sometimes give the bare minimum when discussing topics such as healthy relationships and fail to discuss topics such as consent and sexual violence.

Despite the numerous barriers to comprehensive sex education, advocates report that many people already think sex education is mandated in Nevada schools. Such lack of awareness deters further action to improve sex education requirements at the state and local level.

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. Advocates can then raise community awareness about the importance of these topics and share their concerns with their district’s Sexuality, Health, and Responsibility Education Advisory Committee. 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.

STATE SEX EDUCATION POLICIES AND REQUIREMENTS AT A GLANCE

- Nevada schools are required to establish a human sexuality course. However, the course cannot be a requirement for graduation and therefore does **not** ensure all students receive sex education.
 - Curriculum is not required to be comprehensive.
 - Nevada has no standard regarding instruction on abstinence. However, curriculum must emphasize abstinence as the only way to avoid pregnancy and STIs.
- Curriculum is not required to include instruction on sexual orientation and gender identity.
- Curriculum is not required to include instruction on consent.
- Parents must provide written consent for their children to participate in human sexuality education. [This is referred to as an “opt-in” policy.](#)
- Nevada has no standard regarding medically accurate sex education instruction. However, instruction on AIDS must be factual.

STATE HOUSE HIGHLIGHTS

Recently introduced bills concerning sex education will be highlighted within this section. Nevada has no regular session in 2020.

2019 Legislative Session

Assembly Bill 295, (failed):

- Sought to require each board of trustees of a school district to establish a course in sexuality education that is evidence-based and factual along with the standards for the course. Requires two students who attend schools in the district to join the advisory committee. Removes Nevada's "opt-in" policy, instead allowing parents and guardians to remove their children from sex education instruction. [This is referred to as an "opt-out" policy.](#)

Assembly Bill 348, (failed):

- Sought to require each board of trustees of a school district to report the status of the district's course concerning human sexuality, periodically revise the course content to ensure it is current, age appropriate, medically accurate when applicable, appropriate for students of any race, sex, gender identity or gender expression, sexual orientation, or ethnic or cultural background, and appropriate for students who are learning English or who have physical or mental disabilities. Removes Nevada's "opt-in" policy, instead allowing parents and guardians to remove their children from sex education instruction. [This is referred to as an "opt-out" policy.](#)

MORE ON SEX ED IN NEVADA

STATE LAW

[Nevada Revised Statutes § 389.036](#) mandates that each school district's board of trustees "shall establish a course or unit of a course of":

- a) Factual instruction concerning acquired immunodeficiency syndrome (AIDS); and
- b) Instruction on the human reproductive system, related communicable diseases, and sexual responsibility.

Such classes cannot be a requirement for graduation. Furthermore, each board of trustees must appoint an advisory committee to advise on course content and instructional materials. Advisory committees shall consist of five parents who have children in the school district and four representatives from the medicine, counseling, religion, student, or teaching communities. Nevada law also requires that:

The parent or guardian of each pupil to whom a course is offered must first be furnished written notice that the course will be offered. The notice must be given in the usual manner used by the local district to transmit written material to parents, and [it] must contain a form for the signature of the parent or guardian of the pupil consenting to his attendance. Upon receipt of the written consent of the parent or guardian, the pupil may attend the course. If the written consent of the parent or guardian is not received, he must be excused from such attendance without any penalty as to credits or academic standing. [This is referred to as an "opt-in" policy.](#)

STATE STANDARDS

The Nevada Department of Education provides [Health Education Standards](#) to help guide curriculum development. Beginning in grades 6-8, students learn to “analyze risky behaviors that may lead to the spread of communicable disease (i.e., sexually transmitted infections (STIs).” There is no other guidance on sex education in Nevada’s standards.

STATE LEGISLATIVE ACTIVITY

Legislative activity in state capitals related to sex education does not take place in isolation from the broader influences and conversations in society and the 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 healthcare services all restrict students from receiving comprehensive sex education and accessing sexual and reproductive healthcare services. In this section, we will highlight current legislative activity related to these topics. Nevada has no regular session in 2020.

2019 SESSION: ADJOURNED JUNE 4, 2019

TITLE	DESCRIPTION	STATUS
ASSEMBLY BILL 295	REQUIRES EACH BOARD OF TRUSTEES OF A SCHOOL DISTRICT TO ESTABLISH A COURSE IN SEXUALITY EDUCATION THAT IS EVIDENCE-BASED AND FACTUAL ALONG WITH THE STANDARDS FOR THE COURSE. REQUIRES TWO STUDENTS WHO ATTEND SCHOOLS IN THE DISTRICT TO BECOME A MEMBER OF THE ADVISORY COMMITTEE. REMOVES NEVADA’S “OPT-IN” POLICY, INSTEAD ALLOWING PARENTS AND GUARDIANS TO REMOVE THEIR CHILDREN FROM SEX EDUCATION INSTRUCTION. THIS IS REFERRED TO AS AN “OPT-OUT” POLICY.	DIED IN THE ASSEMBLY COMMITTEE ON EDUCATION
ASSEMBLY BILL 327	REQUIRES PHYSICIANS TO PROVIDE A PATIENT SEEKING AN ABORTION WITH A LIST OF PROVIDERS THAT PERFORM ULTRASOUNDS FREE OF CHARGE AND PERMITS THE PATIENT TO OPT OUT OF VIEWING THE ULTRASOUND.	DIED IN THE ASSEMBLY COMMITTEE ON HEALTH AND HUMAN SERVICES
ASSEMBLY BILL 348	REQUIRES EACH BOARD OF TRUSTEES OF A SCHOOL DISTRICT TO REPORT THE STATUS OF THE DISTRICT’S COURSE CONCERNING HUMAN SEXUALITY, PERIODICALLY REVISE THE COURSE CONTENT TO ENSURE IT IS CURRENT, AGE APPROPRIATE, MEDICALLY ACCURATE WHEN APPLICABLE, APPROPRIATE FOR STUDENTS OF ANY RACE, SEX, GENDER IDENTITY OR GENDER EXPRESSION, SEXUAL ORIENTATION, OR ETHNIC OR CULTURAL BACKGROUND, AND APPROPRIATE FOR STUDENTS WHO ARE LEARNING ENGLISH OR WHO HAVE PHYSICAL OR MENTAL DISABILITIES. REMOVES NEVADA’S “OPT-IN” POLICY, INSTEAD ALLOWING PARENTS AND GUARDIANS TO REMOVE THEIR CHILDREN FROM SEX EDUCATION INSTRUCTION.	VETOED
SENATE BILL 179	DECRIMINALIZES SELF-INDUCED ABORTIONS.	ENACTED

LEGISLATIVE KEY

<p>SEX EDUCATION REPRODUCTIVE HEALTHCARE 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 Nevada'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.

Nevada did not participate in the 2018 School Health Profiles.

Below are key instruction highlights for secondary schools in Nevada as [reported](#) for the 2015–2016 school year. In this edition of the School Health Profiles, the CDC identified 19 sexual health education topics and has since updated the number of topics to 20.

Reported teaching all 19 critical sexual health education topics

- 15.1% of Nevada secondary schools taught students all 19 critical sexual health education topics in a required course in any of grades 6, 7, or 8.
- 38.5% of Nevada secondary schools taught students all 19 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

- 83.4% of Nevada secondary schools taught students about the benefits of being sexually abstinent in a required course in any of grades 6, 7, or 8.
- 93% of Nevada 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

- 75.6% of Nevada 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.
- 85.8% of Nevada 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

- 79% of Nevada 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.
- 88.8% of Nevada 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

- 70.1% of Nevada 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.
- 85.1% of Nevada 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

- 34.3% of Nevada secondary schools taught students how to correctly use a condom in a required course in any of grades 6, 7, or 8.
- 64.4% of Nevada 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

- 72.7% of Nevada secondary schools taught students about methods of contraception other than condoms in a required course in any of grades 6, 7, or 8.
- 89.1% of Nevada 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

- 31.4% of Nevada secondary schools taught students about sexual orientation in a required course in any of grades 6, 7, or 8.
- 51.8% of Nevada 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

- 34.9% of Nevada secondary schools taught students about gender roles, gender identity, or gender expression in a required course in any of grades 6, 7, or 8.
- 54.5% of Nevada 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

- 43.3% of Nevada 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](#).