

The SIECUS State Profiles



SOUTH CAROLINA

SOUTH CAROLINA'S SEX ED SNAPSHOT

THE STATE OF SEX EDUCATION

Advocates have worked tirelessly to advance sex education requirements across South Carolina, most recently cumulating in the introduction of a set of bills in 2019 ([House Bill 3075](#) and [Senate Bill 305](#)). These bills aimed to require sex education curriculum to include instruction on teen dating violence education. While ultimately unsuccessful, the introduction of both bills demonstrates an important, unified effort to advance sex education requirements in South Carolina.

While schools in South Carolina are required to teach sex education, curriculum is required to stress abstinence and include instruction on sexually transmitted diseases (STDs) and reproductive health education (including human physiology, conception, prenatal care and development, childbirth, and postnatal care). Curriculum is only permitted to discuss contraception in the future context of family planning, and is only permitted to include instruction on homosexual relationships in the context of discussing STDs. Instruction on abortion as a method of birth control is prohibited unless in the context of discussing the complications it may cause. Affirming abortion as a valid outcome of pregnancy is a critical topic for inclusion within comprehensive sex education programs. Limiting access to abortion information further inhibits the ability of young people to make informed decisions about their health and future. Curriculum is not required to be comprehensive and South Carolina has no standard regarding medically accurate sex education. Because of these limiting and restrictive requirements, sex education varies greatly across the state.

In 2016, the Charleston County School Board [rejected](#) a proposal that would have permitted middle school students to learn about contraceptives and included curriculum that referenced LGBTQ identities. In 2013, advocates introduced [House Bill 3435](#) in an ultimately unsuccessful effort to require sex education curriculum to be medically accurate and remove a requirement that pregnancy prevention be presented in a gender segregated setting. The same year, the New Morning Foundation [released a report](#) that found that a majority of districts were not in compliance with the reproductive health education portions of the state's Comprehensive Health Education Act. [One report](#) found that curriculum offered to South Carolina students had included shame-based examples that equate sex to fire to send a message to students that it is safe within the appropriate context (marriage), but otherwise dangerous.

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. Students have [reported](#) that in order to find affirming instruction, they seek after school peer groups to learn more about safer sex practices relevant to LGBTQ people.

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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, healthy relationships, and comprehensive instruction on contraceptives. Advocates can also focus their efforts on requiring curriculum to be comprehensive or medically accurate. 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 and amending South Carolina statute to allow educators to provide affirming instruction on sexual orientation and gender identity. 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

- South Carolina schools are required to teach sex education.
 - Curriculum is not required to be comprehensive.
 - Curriculum must stress abstinence.
- Curriculum must not include instruction on homosexual relationships unless in the context of discussing STDs.
- Curriculum is not required to include instruction on consent. However, the South Carolina Standards for Health and Safety Education recommend instruction on consent.
- Parents must be informed in advance of any sexuality-specific instruction and are allowed to remove their children from any part of the health education classes. [This is referred to as an “opt-out” policy.](#)
- South Carolina has no standard regarding medically accurate sex education instruction.

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 South Carolina’s profile.

2019 Legislative Session

[House Bill 3075](#), (failed):

- Sought to require schools to provide instruction on teen dating violence education developed by the school board. An [identical companion bill](#) was introduced in the Senate.

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MORE ON SEX ED IN SOUTH CAROLINA

STATE LAW

Public schools in South Carolina are [required](#) to provide sexually transmitted disease (STD) education beginning in grade 6, but they are prohibited from providing information on STDs to students prior to that time. Schools are not required to teach about human immunodeficiency virus (HIV) or acquired immunodeficiency syndrome (AIDS). State law specifies that age-appropriate reproductive health education may be offered for grades K–5. STDs and reproductive health are required to be included as a part of comprehensive health education in grades 6–8, and pregnancy prevention may be addressed. Students [must also](#) receive at least 750 minutes of reproductive health education and pregnancy prevention education at least one time over the course of grades 9 through 12. Pregnancy prevention education must be presented in gender segregated settings.

According to [South Carolina Code Annotated §§ 59-32-10](#), “Reproductive health education’ means instruction in human physiology, conception, prenatal care and development, childbirth, and postnatal care, but it does not include instruction concerning sexual practices outside marriage or practices unrelated to reproduction except within the context of the risk of disease. Abstinence and the risks associated with sexual activity outside of marriage must be strongly emphasized.”

The law explains, “[c]ontraceptive information must be given in the context of future family planning.” In addition, no school may distribute contraceptives. Abortion may only be discussed in the context of the complications that it may cause and “must not be mentioned as a method of birth control.” Further, the law specifies that “the program of instruction provided for in this section may not include a discussion of alternate sexual lifestyles from heterosexual relationships including, but not limited to, homosexual relationships, except in the context of instruction concerning [STDs].”

Parents must be informed in advance of any sexuality-specific instruction and [are allowed](#) to remove their children from any part of the health education classes. [This is referred to as an “opt-out” policy.](#)

STATE STANDARDS

The state does not require or suggest a specific curriculum. However, the [South Carolina Standards for Health and Safety Education](#) provide guidance for curricula development. The standards stress abstinence but allow students to be taught “effective methods for the prevention of [sexually transmitted infections] (STIs)/STDs, HIV, and AIDS ... [as well as] unintended pregnancy.” The standards also suggest discussion of dating violence, domestic violence, sexual harassment, rape, sexual assault, sexual abuse, and consent, and teach “refusal and negotiation skills to promote abstinence.”

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In order to develop its curriculum, each local school board [must](#) “appoint a [13]-member local advisory committee consisting of two parents, three clergy, two health professionals, two teachers, two students (one being the president of the student body of a high school), and two other persons not employed by the local school district.” South Carolina also states that the State Department of Education and local school boards must provide “staff development activities” for educators participating in the comprehensive health program.

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.

2020 SESSION: CONVENED JANUARY 14, 2020

TITLE	DESCRIPTION	STATUS
HOUSE BILL 3020	PROHIBITS ABORTION AFTER A FETAL HEARTBEAT IS DETECTED UNLESS IN THE CASE OF A MEDICAL EMERGENCY.	FAVORABLE REPORT FROM THE SENATE COMMITTEE ON MEDICAL AFFAIRS

2019 SESSION: ADJOURNED MAY 9, 2019

TITLE	DESCRIPTION	STATUS
HOUSE BILL 3075	REQUIRES SCHOOLS TO TEACH TEEN DATING VIOLENCE EDUCATION AND REQUIRES THE SCHOOL BOARD TO DEVELOP SUCH CURRICULUM.	DIED IN THE HOUSE COMMITTEE ON JUDICIARY
HOUSE BILL 3182	PROHIBITS “DISMEMBERMENT” ABORTION UNLESS IN THE CASE OF A MEDICAL EMERGENCY.	DIED IN THE HOUSE COMMITTEE ON JUDICIARY
HOUSE BILL 3261	INCLUDES SEXUAL ORIENTATION AND GENDER IDENTITY UNDER PROTECTED CATEGORIES CONCERNING HARASSMENT.	DIED IN THE HOUSE COMMITTEE ON EDUCATION AND PUBLIC WORKS
HOUSE BILL 3289	ESTABLISHES FETAL PERSONHOOD STATUS BEGINNING AT FERTILIZATION.	DIED IN THE HOUSE COMMITTEE ON JUDICIARY
HOUSE BILL 3779	PROHIBITS “DISMEMBERMENT” ABORTION UNLESS IN THE CASE OF A MEDICAL EMERGENCY.	DIED IN THE HOUSE COMMITTEE ON JUDICIARY
HOUSE BILL 3983	PROHIBITS ABORTIONS BASED SOLELY ON A FETAL ANOMALY.	DIED IN THE HOUSE COMMITTEE ON JUDICIARY
SENATE BILL 32	PROHIBITS ABORTION AFTER A FETAL HEARTBEAT IS DETECTED UNLESS IN THE CASE OF A MEDICAL EMERGENCY.	DIED IN THE SENATE COMMITTEE ON MEDICAL AFFAIRS

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SENATE BILL 305	REQUIRES SCHOOLS TO TEACH TEEN DATING VIOLENCE EDUCATION AND REQUIRES THE SCHOOL BOARD TO DEVELOP SUCH CURRICULUM.	DIED IN THE SENATE COMMITTEE ON JUDICIARY
SENATE BILL 485	ESTABLISHES FETAL PERSONHOOD STATUS BEGINNING AT FERTILIZATION.	DIED IN THE SENATE COMMITTEE ON JUDICIARY

LEGISLATIVE KEY

<p>SEX EDUCATION</p> <p>REPRODUCTIVE HEALTH CARE</p> <p>SEXUAL ORIENTATION AND GENDER IDENTITY</p> <p>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 South Carolina’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 South Carolina as reported for the 2017–2018 school year.

Reported teaching all 20 critical sexual health education topics

- 15.5% of South Carolina secondary schools taught students all 20 critical sexual health education topics in a required course in any of grades 6, 7, or 8.
- 38.0% of South Carolina secondary schools taught students all 20 critical sexual health education topics in a required course in any of grades 9, 10, 11, or 12.

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Reported teaching about the benefits of being sexually abstinent

- 84.6% of South Carolina secondary schools taught students about the benefits of being sexually abstinent in a required course in any of grades 6, 7, or 8.
- 93.5% of South Carolina 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

- 78.4% of South Carolina 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.
- 88.0% of South Carolina 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

- 87.4% of South Carolina 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.
- 92.2% of South Carolina 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

- 64.2% of South Carolina 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.
- 83.1% of South Carolina 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

- 34.1% of South Carolina secondary schools taught students how to correctly use a condom in a required course in any of grades 6, 7, or 8.
- 63.2% of South Carolina 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

- 49.6% of South Carolina secondary schools taught students about methods of contraception other than condoms in a required course in any of grades 6, 7, or 8.
- 82.6% of South Carolina 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

- 20.5% of South Carolina secondary schools taught students about sexual orientation in a required course in any of grades 6, 7, or 8.
- 50.0% of South Carolina 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

- 27.7% of South Carolina secondary schools taught students about gender roles, gender identity, or gender expression in a required course in any of grades 6, 7, or 8.
- 51.4% of South Carolina 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

- 40.4% of South Carolina 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](#).