

State Profiles

Oklahoma State Profile



Oklahoma's State of Sex Ed

Oklahoma schools are **not** required to teach sex education. However, they are required to provide HIV/AIDS prevention instruction and health education.

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Sex Ed
Requirements



Sex Ed
Content



Current Requirement

- Curriculum must primarily instruct on abstinence.
 - Health education curriculum must include instruction on the ability to obtain, process, and understand basic health information and the services needed to make appropriate health decisions, establishing and maintaining positive relationships, and responsible decision making.
- Curriculum is not required to include instruction on sexual orientation or gender identity but must highlight stigmatizing, false information such as “engaging in homosexual activity, promiscuous sexual activity, intravenous drug use, or contact with contaminated blood products is now known to be primarily responsible for contact with the AIDS virus.”
- Curriculum must include instruction on consent.
- Parents or guardians can submit written notification if they do not want their children to participate in any sexuality and HIV/AIDS courses. **This is referred to as an “opt-out” policy.**
- Oklahoma has no regulation regarding medically accurate sex education curriculum but does require HIV/AIDS prevention curriculum to be “medically accurate”. However, also requiring factually incorrect information about same-sex relationships blatantly conflicts with this requirement.

RECENT LEGISLATION SHAPING THE STATE LANDSCAPE

Sex education continues to be a topic of debate among Oklahoma legislators, with legislation introduced over the past several years seeking to restrict the

quality of instruction young people receive. For example, Senator Shane Jett introduced [Senate Bill 1442](#) in 2022 to prohibit public schools from using certain funds to promote concepts of social emotional learning. While unsuccessful, Senate Bill 1442 is an example of the many attempts of the opposition to stigmatize sex education. Regressive attempts like this harm young people by limiting access to essential educational concepts. Further, many bills were introduced under the guise of “parental rights”. These bills represent the opposition’s attempt to attack sex education by stigmatizing vital and important curriculum and requiring additional, unnecessary procedures for consent, review of instructional materials, and advanced notification. While much of this “parental rights” legislation was ultimately unsuccessful, these bills represent one of the many challenges faced by advocates in Oklahoma’s legislative landscape.

Advocates have celebrated a few incremental victories in the past few years. In 2019, Senator Kay Floyd championed [Senate Bill 926](#), successful legislation that requires curriculum related to human sexuality to include instruction on consent. In 2021, [Senate Bill 89](#), introduced by Senator John Haste was passed into law and requires instruction about how to obtain, process, and understand basic health information and services needed to make appropriate health decisions, establishing and maintaining positive relationships, and responsible decision making. While the legislative text does not name sexuality education, sexual health information and healthy relationships instruction are both understood to be critical components of health education, and health educators may use this opportunity to provide advanced sex education. Advocates are capitalizing on these successes to advance a collaborative effort to require health education in elementary schools. With continued efforts like these, advocates are optimistic about further advancing sex education in Oklahoma

While sex education is not a public school requirement in Oklahoma, schools are required to teach HIV/AIDS prevention and health and physical education. School districts have the ability to decide whether to teach sex education beyond the required HIV/AIDS and health and physical education requirements. Local control over sex education presents unique challenges that have resulted in a glaring disparity regarding the quality of sex education that students receive. Advocates report that at least four different types of sex education curricula are used across the state, with students in larger cities such as Oklahoma City and Tulsa being more likely to receive sex education instruction.

Advocates report that the lack of a statewide mandate, funding and staff availability, and perceived unfavorable public opinion in some communities are among the biggest barriers to providing sex education to Oklahoma youth. Keeping these barriers in mind, advocates can take action right now 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 and take action to address misinformation surrounding sex education. Advocates are encouraged to take action on pending legislation that seeks to advance or restrict the principles of sex education and connect with other advocates such as [Amplify Tulsa](#) and [Metriarch](#). For a current overview of pending legislation, see table below. Further, advocates can contact their representatives to discuss the critical need for advancing sex education requirements. Advocates are encouraged to use the SIECUS [Community Action Toolkit](#) to guide local efforts to advance sex education and to reach out to [EducateUS](#) to get connected to local advocacy groups.

More on sex ed in Oklahoma...

State Law: A Closer Look

Oklahoma does not require schools to teach sex education. However, according to Oklahoma Statutes [70-11-103.3](#) and [70-11-105.1](#), schools are required to provide human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) prevention education. This education must be limited to the “discussion of the disease AIDS and its spread and prevention” and include instruction on consent. The class must be taught once during either grade 5 or 6, once during grades 7–9, and once during grades 10–12. All curricula and materials must be checked for medical accuracy by the Oklahoma Department of Health and must only include “factual medical information for AIDS prevention.” However, the Department also requires false, stigmatizing information about LGBTQAI+ relationships, which creates an inherent conflict within AIDS prevention instruction. Further,

A) AIDS prevention education shall specifically teach students that:

1. Engaging in homosexual activity, promiscuous sexual activity, intravenous drug use, or contact with contaminated blood products is now known to be primarily responsible for contact with the AIDS virus;
2. Avoiding the activities specified [above] is the only method of preventing the spread of the virus;
3. Sexual intercourse, with or without condoms, with any person testing positive for HIV antibodies, or any other person infected with HIV, places that individual in a high-risk category for developing AIDS.

B) The program of AIDS prevention education shall teach that abstinence from sexual activity is the only certain means for the prevention of the spread or contraction of the AIDS virus through sexual contact. It shall also teach that artificial means of birth control are not a certain means of preventing the spread of the AIDS virus, and reliance on such methods puts a person at risk for exposure to the disease.

In addition to HIV/AIDS education, schools are required to provide health and physical education. Curriculum must include instruction on the ability to obtain, process, and understand basic health information and the services needed to make appropriate health decisions, establishing and maintaining positive relationships, and responsible decision making. If a school district chooses to teach sex education beyond the mandated HIV/AIDS and health education, all curricula and materials must be approved for medical accuracy by the state and by the district superintendent. All materials must also be available to parents for review. In addition, all sex education classes must have “the teaching of or informing students about the practice of abstinence” as one of their primary purposes.

A school district must provide written notification of all sex and HIV/AIDS prevention classes. Parents or guardians can submit written notification if they do not want their children to participate in such classes. **This is referred to as an “opt-out” policy.**

State Standards

Oklahoma’s *Academic Standards for Health Education* provides a standard for the development of health curricula. Sex education is not mentioned.

State Legislation

State legislative activity related to sex education does not take place in isolation from the broader embroiled political and policy climate. In 2022, a national wave of attacks on the rights of lesbian, gay, bisexual, transgender, queer, or questioning (LGBTQAI+) individuals, attempts to restrict or prohibit instruction on “divisive concepts” such as “Critical Race Theory” (which is not taught in public schools), and efforts to limit access to abortion care and other reproductive healthcare services swept the country in an effort to prevent students from receiving sex education and accessing sexual and reproductive healthcare services. Below are highlights of current legislative activity related to these topics. **Oklahoma’s 2023 annual session convenes on February 6, 2023.**

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 Oklahoma’s Youth Risk Behavior Survey (YRBS) results, [click here](#). At the time of publication, 2021 YRBS data has not been made available yet.

Oklahoma School Health Profiles Data

In 2022, 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 22 sexual health education topics](#) as critical for ensuring a young person’s sexual health. Below are key instruction highlights for secondary schools in Oklahoma as [reported](#) for the 2019–2020 school year.

Reported teaching all 22 critical sexual health education topics

- 26.6% of Oklahoma secondary schools taught students all 22 critical sexual health education topics in a required course in any of grades 6, 7, or 8.
- 14.8% of Oklahoma secondary schools taught students all 22 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

- 47.6% of Oklahoma secondary schools taught students about the benefits of being sexually abstinent in a required course in any of grades 6, 7, or 8.
- 41.1% of Oklahoma 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

- 49.8% of Oklahoma 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.
- 42.7% of Oklahoma 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

- 45.8% of Oklahoma 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.
- 39.7% of Oklahoma 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

- 42.3% of Oklahoma 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.
- 33.8% of Oklahoma 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

- 33.4% of Oklahoma secondary schools taught students how to correctly use a condom in a required course in any of grades 6, 7, or 8.
- 23.9% of Oklahoma 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

- 38.6% of Oklahoma secondary schools taught students about methods of contraception other than condoms in a required course in any of grades 6, 7, or 8.
- 37.1% of Oklahoma 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 and gender identity

- 30% of Oklahoma secondary schools taught students about sexual orientation and gender identity in a required course in any of grades 6, 7, or 8.
- 21.6% of Oklahoma secondary schools taught students about sexual orientation and gender identity in a required course in any of grades 9, 10, 11, or 12.

Reported teaching about how gender roles and stereotypes affect goals, decision-making, and relationships

- 32.6% of Oklahoma secondary schools taught students about gender roles and stereotypes in a required course in any of grades 6, 7, or 8.
- 23.9% of Oklahoma secondary schools taught students about gender roles and stereotypes 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

- 33.2% of Oklahoma 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](#).

