

State Profiles

South Carolina State Profile



South Carolina's State of Sex Ed

South Carolina schools are required to teach reproductive health education.

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Current Requirements

- Curriculum is not required to align with the [National Sex Education Standards](#).
- Curriculum must stress abstinence.
- Curriculum is not required to include instruction on sexual orientation or gender identity.
- Curriculum is not required to include instruction on consent. However, the South Carolina Standards for Health and Safety Education recommend instruction on consent.
- Instruction on abortion as a method of birth control is prohibited unless in the context of discussing the complications it may cause.
- 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.](#)
- Teachers who fail to comply with the curriculum established by the school board are subject to dismissal.
- South Carolina has no regulation regarding medically accurate sex education instruction.

RECENT LEGISLATION SHAPING THE STATE LANDSCAPE

Advocates have faced challenges during the 2022 legislative session with a series of legislation involving parental rights and sex education. An example is [House Bill 4555](#), introduced by Representative Robert May, which sought to create a procedure for parents to withdraw their child from any portion of the school district’s health education that relates to sex education. Similarly, [Senate Bill 900](#),

introduced by Senator Dwight Loftis, establishes the parental right to review and object to instructional material and reaffirms the right to remove a child from sex education. Fortunately, these two bills were unsuccessful and not passed into law. These legislative efforts harm young people by unjustly restricting sex education under the guise of empowering parents. Further, advocates expect additional aggressive legislative attacks on sexual and reproductive rights in a state that is becoming known for its mistreatment of transgender youth and their families, as well as restricting access to abortion care.

Despite recent attacks on sex education, advocates have successfully defended against attacks on LGBTQAI+ inclusivity within sex education in the past years. In 2020, the U.S. District Court for South Carolina **declared** the state's anti-LGBTQ curriculum law ([S.C. Code § 59-32-30\(A\)\(5\)](#)) unconstitutional. The statute prohibited districts from including in their health education any "discussion of alternative sexual lifestyles from heterosexual relationships including, but not limited to, homosexual relationships except in the context of instruction concerning sexually transmitted diseases." This historic ruling demonstrates a unified effort to confront attacks on health education in South Carolina.

Additionally in 2022, two bills were introduced that sought to update requirements for reproductive health education. [Senate Bill 1348](#) and [House Bill 5483](#), both titled "Reproductive Health Rights Act" sought to change the definition for "reproductive health education" to include "age-appropriate, comprehensive, and medically accurate" as curriculum requirements. These bills would have allowed for discussion of sexual activity outside of marriage and removed emphasis from abstinence. While both were unsuccessful, they reflect legislators' efforts to introduce legislation that would make sex education policy more robust in South Carolina. Instead, South Carolina's young people continue to face inadequate and disparate sex education due to local control rules. 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 sex education. Students have **reported** that they struggle to receive affirming instruction in the classroom and that their questions about non-heterosexual relationships often go unanswered.

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 instruction on contraceptives. Advocates can also focus their efforts on requiring curriculum to be inclusive of LGBTQIA+ lifestyles or medically accurate. They can then vocalize the important need for advancing sex education requirements in their community. Advocates are encouraged to take action on pending legislation that seeks to advance or restrict the principles of sex education. 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 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 and to reach out to [EducateUs](#) to get connected to local advocacy groups.

More on sex ed in South Carolina...

State Law: A Closer Look

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.”

The law establishes that any public school educator who is found in violation of the provisions of the chapter or who fails to comply with the curriculum established by the school board is subject to dismissal. Private schools are not required to comply with South Carolina’s sex education requirements established under the state’s comprehensive health education program.

In 2020, the U.S. District Court for South Carolina **declared S.C. Code § 59-32-30(A) (5)** unconstitutional. The lawsuit alleged that the code violated the Equal Protection Clause of the Fourteenth Amendment to the U.S. Constitution by discriminating against students who are lesbian, gay, bisexual, transgender, and queer (LGBTQ). The statute had previously prohibited districts from including in their health education any “discussion of alternate sexual lifestyles from heterosexual relationships including, but not limited to, homosexual relationships except in the context of instruction concerning sexually transmitted diseases.”

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.”

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 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. **South Carolina’s 2023-2024 session convenes on January 10, 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 South Carolina’s Youth Risk Behavior Survey (YRBS) results, [click here](#). At the time of publication, 2021 YRBS results were not made available yet.

South Carolina School Health Profiles Data

In 2022, the Centers for Disease Control and Prevention (CDC) released the 2020 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 South Carolina as reported for the 2019–2020 school year.

Reported teaching all 22 critical sexual health education topics

- 11.8% of South Carolina secondary schools taught students all 22 critical sexual health education topics in a required course in any of grades 6, 7, or 8.
- 39.7% of South Carolina 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

- 62.8% 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.
- 93.9% 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

- 52.7% 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.
- 91% 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

- 60% 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.
- 95.5% 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

- 53.7% 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.
- 91% 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

- 17% 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.
- 67.4% 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

- 37.1% 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.
- 84.7% 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.

Reported teaching about sexual orientation and gender identity

- 25.2% of South Carolina secondary schools taught students about sexual orientation and gender identity in a required course in any of grades 6, 7, or

8.

- 49% of South Carolina 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

- 41.9% of South Carolina secondary schools taught students about gender roles and stereotypes in a required course in any of grades 6, 7, or 8.
- 73.7% of South Carolina 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

- 34.7% 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](#).

