



Vermont's State of Sex Ed

Sex education is required in Vermont schools as a part of their mandated "comprehensive health education" program in public schools.

Download Scorecard

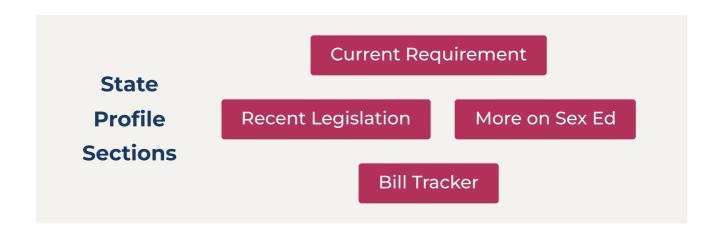


Sex Ed Requiremen t



Sex Ed Content





Current Requirement

- Curriculum does not require instruction on sexual orientation or gender identity. However, the curriculum must be culturally competent.
- Curriculum must include instruction on abstinence.
- Curriculum is not required to include instruction on consent. However, curriculum must include instruction on sexual violence.
- Parents or guardians may remove their children from instruction pertaining to disease if the content conflicts with their religious beliefs. This is referred to as an "opt-out" policy.
- Vermont has no law regarding medically accurate instruction. However, schools may work with relevant medical authorities to ensure instruction on cervical cancer and the human papillomavirus is up to date.

RECENT LEGISLATION SHAPING THE STATE LANDSCAPE

Advocates in Vermont have celebrated significant successes in advancing sex education. In 2019, Representative Kevin Christie, Representative Brian Cina, Representative Dylan Giambatista, and Representative Diana Gonzalez championed House Bill 3, which was successfully enacted. The law established a working group to make recommendations that are designed to, among other goals, increase cultural competence among students in pre-kindergarten through grade 12. The working group must review current policies to ensure that Vermont schools "promote an overarching focus on preparing all students to participate effectively in an increasingly racially, culturally, and socially diverse Vermont and in global communities." Ensuring that sex education is culturally

responsive to the needs of further marginalized youth, including but not limited to youth of color, LGBTQ youth, and young people with disabilities is a critical step forward in providing sex education.

According to Vermont's statutes, sex education curriculum must include instruction on sexuality and reproduction, STDs, decision making skills, how to recognize and prevent sexual abuse and sexual violence, contraceptives, and outcomes of pregnancy including childbirth, adoption, and abortion. Despite the range of inclusive topics required to be taught, the sex education curriculum is not entirely comprehensive as it still does not require instruction on sexual orientation, gender identity, or affirmative consent. As a result, advocates report that the quality of content and time dedicated to sex education varies greatly across districts, with some instructors dedicating the majority of health education curriculum to sex education and others dedicating only a few hours of instruction in one grade level to sex education. Advocates report that the lack of a system to monitor if sex education being taught complies with the state's requirements, lack of a system to track what curriculum is being taught, and lack of professional development and training for educators are among the biggest barriers to providing sex education in Vermont.

To support schools in providing quality sex education, advocates must push for legislation that requires "health education" curriculum to align with the National Sex Education Standards.

Advocates can take action right now to address ongoing barriers and ensure that young people in their community have access to quality sex education. After identifying what topics are missing from local sex education requirements, advocates can vocalize the importance of implementing specific elements of sex education, such as trauma informed, culturally responsive curriculum that addresses the needs of young people of color and young people with disabilities. They may also advocate for inclusive instruction that includes topics such as sexual orientation, gender identity, and consent. 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. Advocates can take further action by contacting their representatives to discuss the critical need for increasing access to educator training, increasing funding and support for the Agency of Education, and policies that require inclusive sex education instruction. Advocates are encouraged to use the SIECUS Community

More on sex ed in Vermont...

State Law: A Closer Look

Vermont Statutes Annotated, Title 16 §§ 131, 133, 134, and 135 require schools to include instruction on topics related to sexual health as part of their comprehensive health program. Comprehensive health instruction must be taught in elementary and secondary schools. The comprehensive health program has 10 components that students must learn, four of which are related to sexuality:

- 1. Body structure and function, including the physical, psychosocial, and psychological basis of human development, sexuality, and reproduction; ...
- 4. Disease, such as human immunodeficiency virus (HIV) infection, other sexually transmitted diseases (STDs), as well as other communicable diseases, and the prevention of disease; ...
- 5. Family health and mental health, including instruction that promotes the
 development of responsible personal behavior involving decision making
 about sexual activity, including abstinence; skills that strengthen existing
 family ties involving communication, cooperation, and interaction between
 parents and students; and instruction to aid in the establishment of strong
 family life in the future, thereby contributing to the enrichment of the
 community; ...
- 8. Human growth and development, including understanding the physical, emotional, and social elements of individual development and interpersonal relationships, including instruction in parenting methods and styles. This shall include information regarding the possible outcomes of premature sexual activity, contraceptives, adolescent pregnancy, childbirth, adoption, and abortion.

Parents or guardians may remove their children from instruction pertaining to "disease, its symptoms, development, and treatment" if the content is in conflict with their religious beliefs. This is referred to as an "opt-out" policy.

State Standards

The Vermont Health Education Sample Graduation Proficiencies & Performance Indicators and Sample Comprehensive HIV Policy for Schools: Pre-K–12 indicate benchmarks for students to achieve throughout their education. The State Board of Education also adopted the National Health Education Standards as a framework for schools to develop health curricula.

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. **Vermont's 2023 annual session convenes on January 4, 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 Vermont's Youth Risk Behavior Survey (YRBS) results, click here. At the time of publication, the 2021 YRBS data was not made available yet.

Vermont 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 Vermont as reported for the 2019–2020 school year.

Reported teaching all 22 critical sexual health education topics

- 24.8% of Vermont secondary schools taught students all 22 critical sexual health education topics in a required course in any of grades 6, 7, or 8.
- 52.1% of Vermont 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

- 68.5% of Vermont secondary schools taught students about the benefits of being sexually abstinent in a required course in any of grades 6, 7, or 8.
- 93.2% of Vermont 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

- 60.8% of Vermont 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.
- 88.8% of Vermont 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

- 71.5% of Vermont 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.
- 88.9% of Vermont secondary schools taught students how to create and sustain healthy and respectful relationships in a required course in any of

Reported teaching about preventive care that is necessary to maintain reproductive and sexual health

- 52.7% of Vermont 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.
- 90.9% of Vermont 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

- 39.4% of Vermont secondary schools taught students how to correctly use a condom in a required course in any of grades 6, 7, or 8.
- 91.1% of Vermont 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

- 47.6% of Vermont secondary schools taught students about methods of contraception other than condoms in a required course in any of grades 6, 7, or 8.
- 93.3% of Vermont 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

- 61.2% of Vermont secondary schools taught students about sexual orientation and gender identity in a required course in any of grades 6, 7, or 8.
- 84.4% of Vermont 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

- 49.2% of Vermont secondary schools taught students about gender roles and stereotypes in a required course in any of grades 6, 7, or 8.
- 77.7% of Vermont 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

• 72.4% of Vermont 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 Pro les 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.



