

State Profiles

Washington State Profile



Washington's State of Sex Ed

Sex education is currently mandated in Washington schools.

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Current Requirements At Glance

- Washington schools are required to teach sex education.
- Although curriculum must stress abstinence, abstinence may not be taught to the exclusion of other materials and instruction on contraceptives and disease prevention
- Curriculum must be inclusive of all students, regardless of sexual orientation or gender identity.
- Curriculum is required to include instruction on consent.
- Parents may also remove their children from the class with written notification. **This is referred to as an “opt-out” policy.**
- Curriculum must be medically accurate.

RECENT LEGISLATION SHAPING THE STATE LANDSCAPE

Advocates successfully advanced sex education across Washington with the passage of the **Healthy Youth Act** in 2020. The Healthy Youth Act requires sex education curriculum to be medically and scientifically accurate. Senator Claire Wilson introduced this bill to mandate sex education in Washington schools, successfully championing **the bill (Senate Bill 5395)** to become state law in 2020 with the support of advocates statewide; now all public schools will be required to provide sex education beginning in the 2022-2023 school year.

Efforts to expand the sex education mandate continue with the introduction of **House Bill 2016** in 2022. Introduced by Representative Bradley Klippert, this bill would have required sex education to include instruction on how to prevent and

avoid being recruited into sex trafficking. Legislation like this is essential for young people to maintain autonomy over their own bodies, and make decisions that make sense in the context of their lives. In addition to efforts to advance sex education, opponents in the state also introduced regressive legislation. [Senate Bill 5805](#), introduced by Senator James McCune, would have required parental approval before their child participates in sexual health education, changing from an [opt-out to opt-in](#) system. House Bill 2016 and Senate Bill 5805 both died in committee.

Culturally responsive instruction is necessary to address the unique needs of youth of color, and Native American youth in particular. A [2018 report](#) found that of 148 Native women living in Seattle, Washington, 94 percent reported being sexually assaulted during their lifetime. Such results demonstrate the urgent need to address sexual violence and its impact on marginalized communities within sex education courses.

Right now, advocates can take action to ensure young people in their community have access to quality sex education by ensuring the current mandate is being followed, advocating for expansion of education for people with disabilities, and staying vigilant against the Regressive Minority looking to roll back progressive policies that support respect and inclusion in educational spaces. 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 accountability measures to ensure each district is supported in implementing sex education. Advocates are encouraged to use the SIECUS [Community Action Toolkit](#) to guide local efforts and to reach out to [EducateUs](#) to get connected to local advocacy groups.

More on sex ed in Washington...

State Law: A Closer Look

The Revised Code of Washington, §§ 28A.230.070 requires schools to provide instruction on human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS), “stress[ing] 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.” HIV/AIDS-prevention instruction must be given at least once each school year beginning in fifth grade and must “teach that condoms and other artificial means of birth control are not a certain means of preventing the spread of [AIDS], and reliance on condoms puts a person at risk for exposure to the disease.” Information must be medically accurate. In order to verify medical accuracy, the Washington Department of Health Office on HIV/AIDS must review and approve all HIV/AIDS curricula and supporting materials. Health education that includes instruction on “methods to prevent exposure to and transmission of sexually transmitted diseases (STDs)” is also required by Revised Code of Washington §§ 28A.230.020.

The Revised Code of Washington, § 28A.300.475, known as the Healthy Youth Act, was amended in 2020 to require every Washington public school to provide comprehensive sex education. In addition to the previous mandate that required curriculum to be medically and scientifically accurate and age-appropriate, curriculum must now be inclusive of all students, regardless of their protected class under chapter 49.60 of the Revised Code of Washington. Curriculum is also required to include instruction on affirmative consent and bystander training. Comprehensive sex education must be provided once to students in kindergarten through grade three, once to students in grades 4-5, twice to students in grades 6-8, and twice to students in 9-12. Parents or guardians may remove their children from HIV/AIDS-prevention education if they have attended an information session about the HIV/AIDS curriculum and its presentation. If a school district chooses to provide sex education, parents may also remove their children from the class with written notification. This is referred to as an “opt-out” policy.

State Standards

The Washington Office of Superintendent of Public Instruction and the Department of Health developed guidelines titled *Guidelines for Sexual Health and Disease Prevention*. Any sex education program implemented in schools must be consistent with these guidelines. Washington also provides guidance for best practice for sexual health education in the *Health and Physical Education K-*

12 Learning Standards, released in 2016, and *KNOW HIV/STD Prevention Curriculum*, a voluntary curriculum for use in grades 5–12, as well as a thorough list of other curricula that have been reviewed and approved by the Department of Health. Furthermore, Washington provides *health education standards* as guidance for curriculum development. Understanding “how to maintain sexual health throughout life” and “how communicable diseases are transmitted,” as well as discussion on harassment and bullying due to sexual orientation, are included.

State Legislation

Legislative activity 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. 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. In this section, we will highlight current legislative activity related to these topics. **Washington’s 2023 legislative session is a one-year session, convening on January 9, 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. The State of Washington does not participate in CDC’s Youth Risk Behavior Survey (YRBS), instead conducting their own Healthy Youth Survey. To learn more about Washington’s recent Healthy Youth Survey results, [click here](#).

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

Reported teaching all 22 critical sexual health education topics

- 26% of Washington secondary schools taught students all 22 critical sexual health education topics in a required course in any of grades 6, 7, or 8.
- 55.1% of Washington 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

- 77.7% of Washington secondary schools taught students about the benefits of being sexually abstinent in a required course in any of grades 6, 7, or 8.
- 97.3% of Washington 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

- 65.4% of Washington 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.
- 94.6% of Washington 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

- 70.6% of Washington 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.
- 96.1% of Washington 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

- 59.6% of Washington 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.
- 86.6% of Washington 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

- 52% of Washington secondary schools taught students how to correctly use a condom in a required course in any of grades 6, 7, or 8.
- 85.4% of Washington 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

- 53.3% of Washington secondary schools taught students about methods of contraception other than condoms in a required course in any of grades 6, 7, or 8.
- 90.0% of Washington 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

- 47.6% of Washington secondary schools taught students about sexual orientation in a required course in any of grades 6, 7, or 8.
- 75.6% of Washington secondary schools taught students about sexual orientation 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

- 42.2% of Washington secondary schools taught students about gender roles and stereotypes in a required course in any of grades 6, 7, or 8.
- 79.9% of Washington 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

- 66.4 % of Washington 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 Progress* 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](#).

