

Maryland State of Sex Ed

Sex education, also known as "instruction in family life and human sexuality" is required as a part of mandated comprehensive health education via administrative regulations and DoE standards being required to be followed by law. Instruction must be inclusive, age appropriate, and medically accurate. Further, contraception, STI prevention, consent and healthy relationships, and menstruation must be taught. Instruction is still required to emphasize that "refraining from sexual activity" or abstinence is the best method to avoid STIs or unplanned pregnancies.



<u>View Bill Tracker</u>

Current Requirement

- Maryland schools must provide sex education as a part of comprehensive health education that is required to be taught by administrative regulations and enforced Department of Education standards.
 - Curriculum must teach that abstinence is the best method for preventing unintended pregnancy and STIs.
 - Instruction on contraception, STI prevention, consent and healthy relationships, and menstruation must be taught
- Curriculum must include inclusive instruction on sexual orientation and gender identity.

- Curriculum must include instruction on consent and healthy relationships.
- Schools must provide parents or guardians the opportunity to view all instructional materials prior to their use and parents or guardians may remove their children from any or all "Family Life and Human Sexuality" classes. This is referred to as an "opt-out" policy.
- Instruction must be medically accurate

RECENT LEGISLATION SHAPING THE STATE LANDSCAPE

Advocates continue to work diligently to further advance sex education in Maryland. In 2022, advocates introduced House Bill 194 to add age-appropriate education on sexting to sex education curriculum and <u>Senate Bill 852</u> to require each county board of education to hire a health educator who would oversee the implementation of comprehensive health education and study its effectiveness across schools in the county. While ultimately unsuccessful, these proposed bills represent lawmakers' continued efforts to improve sex education curriculum in Maryland.

For the last two years, lawmakers in Maryland have also introduced legislation that wouldupdate state standards for comprehensive health education, make standards more inclusive, and to improve enforcement of the Maryland Comprehensive Health Education Framework through bills such as the failed <u>House Bill 119/Senate Bill 199</u> (2023), <u>House Bill 558</u> (2024). A similar effort in 2025, <u>House Bill 161</u> did eventually pass, but not before oppositional lawmakers <u>gutted the bill</u> of all attempts to improve sex education, prevent opt-out of sexual orientation and gender identity instruction, and enforcement of the framework.

In a similar vein, Maryland continues to experience coordinated state legislative attacks on other inclusive programs in schools via "parental rights" legislation. Since 2022, SIECUS has tracked **10 unsuccessful attempts** to pass "parental rights" bills that would increase parental oversight in the public education system, require school administrators and faculty to "out" students to their parents, and complicate enrollment procedures for sex education. The <u>Maryland Health Education Framework</u> includes instruction on sexual orientation, gender identity, and cultural responsiveness to meet the needs of young people of color. Unfortunately, local control over selecting curriculum and lack of enforcement still present 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 LGBTQAI+ youth, and presents further challenges in ensuring that low income districts have access to the resources needed to implement sex education.

Right now, advocates can take action to ensure young people in their community have access to quality sex education. After contacting their local schools, advocates can determine if the curriculum is in alignment with state standards and what topics, if any, are currently missing from the sex education curriculum. Further, advocates can push for existing state standards to be modeled after and in alignment with the <u>National Sex</u> <u>Education Standards</u>. Advocates can also work within their community to prevent the spread of misinformation about inclusive sex education. Advocates are encouraged to take action on pending legislation that seeks to advance or restrict the principles of sex education. **Maryland's 2025 legislative session convened January 8th, 2025 and adjourned April 7th, 2025.**

Further, advocates can contact their representatives to discuss the need for strengthening the quality of sex education by improving enforcement and adherence to Maryland's Comprehensive Health Education Framework. Advocates are encouraged to use the <u>SIECUS Community Action Toolkit</u> to guide local efforts to advance sex education. For more information on getting involved in local and state advocacy for sex education, reach out to our State Policy Action Manager, Miranda Estes (<u>mestes@siecus.org</u>)

More on sex ed in Maryland...

State Law: A Closer Look

Maryland Code of Public General Laws §7–401 requires instruction in health education and the joint development of standards and guidelines for school health programs by the Departments of Education and Health and Mental Hygiene. The Administrative Regulation fulfilling this requirement, Md. Code Regs. 13A.04.18.01, mandates that each local school board work with its county health department to establish a broad school health education program, including "Family Life and Human Sexuality" and "Disease Prevention and Control" instruction, both of which encompass sex education topics, including human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) education. The goals are to enable students to "demonstrate the ability to use human development knowledge, social skills, and health enhancing strategies to promote positive relationships and healthy growth and development throughout the life cycle;" and to "demonstrate the ability to apply prevention and treatment knowledge, skills, and strategies to reduce susceptibility and manage disease." This instruction must be provided starting prekindergarten through eighth and then offered in ninth through twelfth as needed to meet graduation requirements. Instruction on condoms and contraception must also be medically accurate.

In 2018, Maryland enacted Education Code § 7-445, requiring county boards of education to provide instruction on the meaning of consent, including respecting personal boundaries, in sex education classes.

Schools must provide parents or guardians the opportunity to view all instructional materials prior to their use and parents or guardians may remove their children from any or all "Family Life and Human Sexuality" classes. This is referred to as an "opt-out" policy.

State Standards

Curriculum development is guided by Maryland's <u>Comprehensive Health</u> <u>Education Framework</u>, which is based on the <u>National Health Education</u> <u>Standards</u>. Family life and human sexuality are included in grades K-12. Sexual orientation, gender identity, contraception, HIV, and other sexually transmitted infections are all topics of instruction within this framework. The framework also requires instruction to be age-appropriate and taught by instructors who have been adequately trained in advance. According to Maryland Administrative Code, schools must comply with state standards or the Board of Education may recommend that State funding be withheld. Further, the Department of Education policy requires schools to align with the state curriculum framework. Compliance and enforcement of these policies remains an issue.

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. In recent years, there has been an increase in legislative attacks on the implementation of CDC's Youth Risk Behavior Survey (YRBS) which <u>tracks six categories of health risk</u> <u>behaviors</u> including sexual health behaviors. **To learn more about Maryland's 2023 YRBS results, <u>click here</u>.** In 2023, Maryland participated in high school and middle school YRBS data collection.

Maryland School Health Profiles Data

In 2024, the Centers for Disease Control and Prevention (CDC) released the 2022 <u>School Health Profiles</u>, 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 <u>CDC identifies 22 sexual health education topics</u> as critical for ensuring a young person's sexual health. **To view Maryland's results from the 2022 School Health Profiles Survey, visit CDC's <u>School Health Profiles Explorer</u> tool.**

Visit the CDC's <u>School Health Profiles</u> 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, <u>click here</u>.