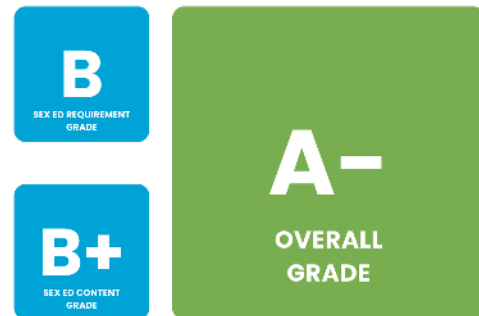




New Jersey State of Sex Ed

Sex education is required via New Jersey's state health education and physical education standards. Instruction must be age-appropriate, evidence-based, culturally appropriate, and medically accurate. Required topics include HIV, STIs, sexuality and gender, consent, contraception, and healthy relationships. Abstinence must be stress, however, abortion must be discussed along with other pregnancy options.



[View Bill Tracker](#)

Current Requirement

- Sex education is included as part of [New Jersey's Comprehensive Health and Physical Education standards](#), which New Jersey schools are required to follow.
- Curriculum must include instruction on sexual orientation and gender identity, pregnancy outcomes, and contraception.
- Curriculum must include instruction on consent and healthy relationships.
- New Jersey allows parents or guardians to remove their children from any part of the health, family life, or sex education classes if it conflicts with their beliefs. **This is referred to as an "opt-out" policy.**
- Curriculum must be age appropriate, evidence-based, culturally appropriate, and medically accurate.

RECENT LEGISLATION SHAPING THE STATE LANDSCAPE

In 2025, there have been at least five legislative attempts to rescind or oppose the teaching of sex education in schools, most specifically in response to the updated New Jersey Learning Standards for Health Education which took effect in the Fall of 2022. [Assembly Bill 670](#) would ban instruction in family life education, sex education, sexual health, sexual orientation, or gender identity to students in preschool through grade four. [Assembly Bill 2580](#), dubbed the “Children’s Innocence Protection Act,” bans sex education, discussion of gender, sexuality, abortion, or contraception from schools. [Assembly Concurrent Resolution 131](#), [Assembly Bill 1283](#), and [Senate Bill 2117](#) all directly oppose or aim to rescind the revised standards. Finally, [Senate Bill 2123 and companion Assembly Bill 1519](#) seek to require parental consent for family life or sex education, aiming to switch New Jersey from an opt-out to an opt-in state. All of the above bills are currently pending in committee. This pushback also comes after advocates in New Jersey have seen significant success in advancing sex education in the past years, most recently with the passage of four laws that require sex education curriculum to include instruction on consent ([N.J.S.A. 18A:35](#)), sexual abuse and assault ([N.J.S.A 18A:35-4.5a](#)), consequences of distributing and soliciting sexually explicit images ([N.J.S.A. 18A:35-4.33](#)), and the “New Jersey Safe Haven Infant Protection Act” ([N.J.S.A. 18A:35-4.40 & 18A:35-4.41](#)).

In 2024, lawmakers also took steps to protect academic freedom and student access to curriculum by passing [Assembly Bill 3446](#), also known as the “Freedom to Read Act.” This bill established requirements for library material in public school libraries and public libraries, and also created protections for school library media specialists and librarians against harassment.

[Thrive NJ Coalition](#), a coalition working to advance the sexual and reproductive health and rights of young people, recently led efforts to strengthen the updated New Jersey Learning Standards for Health Education in 2020. These [new guidelines](#), adopted by the New Jersey Department of Education, took effect in the Fall of 2022. The new learning standards address developmentally- appropriate education on topics including sexual orientation, gender identity, anatomy, consent, boundaries, and health relationships.

However, various school districts have implemented the new required standards at various levels; some pushing back on the new requirements and, [such as one district that only provides all required sex ed content on the final day of classes](#). Others have implemented the standards after the updated requirements. Local control and lack of accountability for implementation 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 LGBTQIA+ youth, and disadvantage younger students who do not receive the age-appropriate instruction that the curriculum builds upon. This inconsistency presents the largest barrier to sex education curriculum for young people in New Jersey.

To further advance sex education in New Jersey, advocates report that they need increased funding for sex education programming and teacher training, and increased support from both the New Jersey Department of Education in addition to local boards of education. Further, increased public knowledge surrounding sex education and an improved ability to dispel myths and concerns regarding sex education is needed to further the reach of sex education statewide.

Right now, advocates can take action in their communities to strengthen adherence to New Jersey's sex education standards. They can contact their local board of education to vocalize the importance of implementing sex education, the need for greater support for educators, and the positive impact that evidence-based, age-appropriate, and culturally responsive curriculum can have on all youth throughout New Jersey. Advocates are encouraged to take action on pending legislation that seeks to advance or restrict the principles of sex education. **New Jersey's 2024-2025 legislative session convenes January 9th, 2024, and is expected to adjourn on January 13th, 2026.**

Further, advocates can contact their representatives to discuss the critical need for a statewide sex education mandate that adheres to the [National Sex Education Standards](#). Advocates are encouraged to use the [Community Action Toolkit](#) 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 (mestes@siecus.org).

More on sex ed in New Jersey...

State Law: A Closer Look

New Jersey law, §§ 18A:35-7 and §§ 18A:35-8, mandates at least 150 minutes of health education during each school week in grades 1-12. In addition, high school students must acquire 3.75 credits of health education each year.

While all sex education programs must provide a comprehensive range of high-quality information, state law also requires that programs and curricula stress abstinence ([NJ Rev Stat § 18A:35-4.20](#)). [iii] In addition, “[a]ny instruction concerning the use of contraceptives or prophylactics such as condoms shall also include information on their failure rates for preventing pregnancy, human immunodeficiency virus (HIV) and other [sexually transmitted diseases] (STDs) in actual use among adolescent populations and shall clearly explain the difference between risk reduction through the use of such devices and risk elimination through abstinence.”

In 2018, New Jersey enrolled [P.L.2018, c.80](#), which requires instruction on the “social, emotional, and legal consequences of distributing and soliciting sexually explicit images through electronic means” at least once in middle school as part of the health education curriculum.

In 2019, [§§ 18A:35-4.37](#) was enrolled, which requires age-appropriate instruction in grades 6-12 on the law and the meaning of consent. [§§ 18A:35-4.40](#) requires instruction on the “New Jersey Safe Haven Infant Protection Act” in grades 9-12. [§§ 18A:35-4.5a](#) requires instruction on age-appropriate sexual abuse and assault awareness and prevention education in preschool through grade 12. [§§ 18A:35-4.33](#) requires instruction on the social, emotional, and legal consequences of distributing and soliciting sexually explicit images once during middle school.

New Jersey allows parents or guardians to remove their children from any part of the health, family life, or sex education classes if it is “in conflict with

[their] conscience, or sincerely held moral or religious beliefs.” This is referred to as an “opt-out” policy.

State Standards

School districts must align their health education curricula with the New Jersey Department of Education’s [Core Curriculum Content Standards for Comprehensive Health and Physical Education](#). The required disciplinary concepts of the Comprehensive Health & Physical Education (CHPE) standards include: Personal Growth and Development, Pregnancy and Parenting, Emotional Health, Social and Sexual Health, Community Health Services and Support Movement Skills and Concepts, Physical Fitness, Lifelong Fitness, Nutrition, Personal Safety, Health Conditions, Diseases and Medicines, Alcohol, Tobacco and other Drug, and, Dependency, Substances Disorder and Treatment. Instructional benchmarks and concepts correspond to grade level from K - 12 and build on skills and concepts throughout a student’s development.

Within the disciplinary concept of Social and Sexual Health, described as “a person’s ability to communicate and interact with others efficiently. Individuals are able to form meaningful relationships with others and interact in healthy, appropriate ways. They encompass respect and accept differences of an individual’s race, religion, gender identity, gender expression, ethnicity, disability, socioeconomic background, and perspectives of health-related decisions. The extent to which people connect with others in different environments, adapt to various social and sexual situations, feel supported by individuals, institutions, and experience a sense of belonging, all contribute to social and sexual health.” Pregnancy and Parenting is described as “...stages in life that impact all aspects on one’s wellness. Regardless of the circumstance, pregnancy and parenting brings changes to an individual’s emotional, financial, physical, mental, and social well-being. These stages can include many happy experiences but can also be the source of great challenges. Like any new skill, parenting takes knowledge, skills, and practice to be successful. However, other factors such as medical and financial challenges can make this stage in life more difficult. Preparation is the key to a healthy pregnancy, delivery and transition to parenting.”

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 [tracks six categories of health risk behaviors](#) including sexual health behaviors. **To learn more about New Jersey's 2023 YRBS results, [click here](#).**

New Jersey School Health Profiles Data

In 2024, the Centers for Disease Control and Prevention (CDC) released the 2022 [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. **To view New Jersey's results from the 2022 School Health Profiles Survey, visit CDC's [School Health Profiles Explorer tool](#).**

Visit the CDC's [School Health Profiles](#) 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](#).