



## New Mexico State of Sex Ed

Sex education is required and state standards outline content to be taught. No mandate for a sex education curriculum to be comprehensive exists, nor is there a standard regarding a medically accurate sex education curriculum. There is no requirement to include sexual orientation or gender identity as part of the instruction. There is also no requirement to include instruction on consent in New Mexico. Finally, when HIV/STD information is provided in New Mexico, it is required that schools “stress” abstinence. New Mexico also has an “opt-out” policy, meaning parents or guardians can request to remove their child from sex education instruction.



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### Current Requirement

- New Mexico schools are required to provide sex education via state health standards being required to be followed.
  - Curriculum is required to stress abstinence.
- Curriculum on HIV/AIDS prognosis and prevention is required.
- Curriculum is not required to include instruction on sexual orientation or gender identity.
- Curriculum is not required to be medically accurate.
- Curriculum is not required to include instruction on consent.

- Parents and guardians can request to remove their student from sex education instruction. [This is referred to as an “opt-out” policy.](#)

## **RECENT LEGISLATION SHAPING THE STATE LANDSCAPE**

Advocates report that a growing number of school districts have begun implementing sex education, and an increasing number of young people have participated in sex education programs across the state. However, since New Mexico schools are required to follow the health education standards set by the New Mexico Public Education Department including instruction on HIV/AIDS, pregnancy prevention, cultural portrayals of gender, and healthy relationships education. However, school districts are largely left to decide if they want to provide additional curriculum. In 2022, New Mexico lawmakers introduced [House Bill 44](#), which aimed to mandate public schools and both public and private post-secondary institutions to adopt policies addressing affirmative consent and the prevention of sexual assault, domestic violence, dating violence, harassment, and stalking. The bill also sought to amend the Public School Code to establish affirmative consent as the standard for sexual activity. However, it was unsuccessful, and when reintroduced in 2023 as [House Bill 43](#) it failed to pass once again.

Although students must complete a half credit of health education to graduate in New Mexico, advocates report that the lack of accountability measures makes it difficult to know if each district is offering sex education through this format, despite sex education being a crucial component of holistic health education. During the 2025 legislative session, [SB 258](#) attempted to mandate comprehensive human sexuality education in public schools. The bill proposed that, starting in the 2027–2028 academic year, middle and high school students receive instruction encompassing topics such as consent, healthy relationships, sexual orientation, gender identity, and reproductive health. Additionally, [SB 258](#) sought to mandate medically accurate information on all methods of preventing unintended pregnancy and STIs; pregnancy outcome options, including adoption, abortion, and parenting; the link between Human Papillomavirus (HPV) and cancer; other types of cancer affecting the reproductive organs; and consent, as well as ways to identify and prevent sexual and physical violence- all presented in an inclusive, shame-free, and unbiased manner. This legislation would have also required the Public Education Department to develop academic content and

performance standards for this curriculum and establish a process to approve school districts' curricula. Unfortunately, this bill failed to pass despite strong grassroots support from advocates and organizations, like [Equality New Mexico](#).

In 2023, New Mexico passed two important pieces of legislation- [House Bill 7](#) and [House Bill 134](#)- that, while not explicitly about sex education, significantly support the broader goals of reproductive health and rights, which are central to quality sex ed. [HB 7](#), the Reproductive and Gender-Affirming Health Care Freedom Act, protects individuals' rights to access reproductive and gender-affirming health care by prohibiting public bodies from interfering with or discriminating against that access. HB 134 ensures that public schools provide free menstrual products in middle and high schools, reducing stigma and addressing barriers to menstrual equity. Neither bill mandates classroom instruction nor makes changes to sex education curricula, but both create conditions that support comprehensive, inclusive health education. By affirming the importance of access to reproductive health services, HB 7 reinforces the values of autonomy, bodily integrity, and informed decision-making that are foundational to sex ed. Similarly, HB 134 recognizes menstruation as a normal and manageable part of adolescent health, supporting a more open and stigma-free approach to topics often covered in sex education. These policies also remove practical and political barriers that can prevent schools from engaging honestly with students about their reproductive health.

The lack of legislative progress in New Mexico has left most decisions regarding sex education topics to local control. Local control over sex education presents unique challenges that have resulted in a glaring disparity regarding the quality of sex education that students receive. Local control allows districts to implement policies and curriculum that stigmatize marginalized youth, such as students of color and LGBTQIA+ youth. Young people of color, and Hispanic, Native, and Black youth in particular face increased rates of adverse health outcomes in New Mexico. In addition, advocates report that some schools continue to rely on crisis pregnancy centers (CPCs) to deliver instruction- especially in more rural districts. CPCs provide them with false, manipulative information about abortion care under the guise of healthcare and have increasingly received federal funding to deliver abstinence-only instruction [nationwide](#).

Right now, advocates can take action to ensure young people in their community have access to quality sex education. Particularly, advocates can invest in local school board races to elect strong advocates who support sex education. Advocates can also contact their local school board to determine what topics are missing from sex education instruction, such as instruction on consent, sexual orientation and gender identity, medical accuracy, and contraceptives. They can then vocalize the important need for advancing instruction requirements in their community. Advocates are encouraged to take action on pending legislation that seeks to advance or restrict the principles of sex education. **New Mexico's 2025 legislative session convened January 21st, 2025, and adjourned March 22nd, 2025.**

Further, advocates can contact their representatives to discuss the critical need for a statewide sex education mandate. Advocates are encouraged to use the [SIECUS 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](mailto:mestes@siecus.org))

## **More on sex ed in New Mexico...**

### **State Law: A Closer Look**

[New Mexico Administrative Codes §§ 6.12.2.10, 6.29.6.8, and 22-13-1.1.1](#) mandate that schools must teach a course in health education in either middle or high school. Each school district must “provide instruction about [human immunodeficiency virus] (HIV) and related issues in the curriculum of the required health education content area to all students in the elementary grades, in the middle/junior high school grades, and in the senior high school grades.” This instruction must include “ways to reduce the risk of getting HIV/[acquired immunodeficiency syndrome] (AIDS), stressing abstinence.” Outcomes of such instruction should include the “ability to demonstrate refusal skills, overcome peer pressure, and use decision-making skills.” Educational materials and the grade levels at which they are introduced are determined by local school districts. All instruction must be age-appropriate. Local school boards must “ensure the involvement of parents, staff, and students in the development of policies and the review of instructional

materials.” The state neither suggests a curriculum nor limits what may or may not be included in sex education instruction.

[New Mexico Administrative Code 6.29.6.3](#) requires schools to adopt the academic content and performance standards and to measure the performance in public schools.

## State Standards

The [Health Education Content Standards](#) include “abstinence education” instruction beginning in [grades 3 and 4](#). Beginning in [grades 7 and 8](#), performance standards in health education include understanding “how healthy alternatives can replace unhealthy behaviors (i.e., abstinence, condom use, [and] other pregnancy prevention methods).” Students in [grades 9 through 12](#) are to demonstrate knowledge of pregnancy prevention that includes various methods of contraception, such as hormonal methods and the proper use of condoms. The curriculum also covers strategies for maintaining healthy relationships and resolving harmful behaviors in relationships. The impact of cultural and media portrayals of gender roles is included as a topic of discussion as well.

The standards state that each school district must have a policy allowing parents to “request that their child be exempted from the parts of the health education curriculum that address the sexuality performance standards.” Alternative lessons must be created for exempted students. [This is referred to as an “opt-out” policy](#). Local school boards must include parents, staff, and students in developing their own opt-out policy.

## 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 Mexico's 2023 YRBS results, [click here](#).**

## New Mexico 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 Mexico'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](#).**