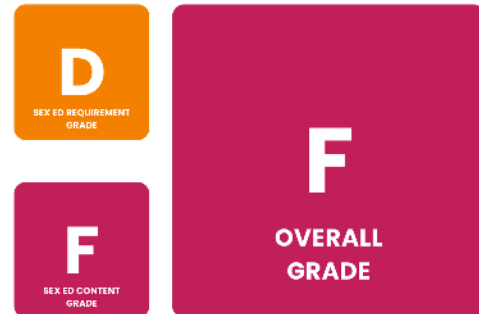




Ohio State of Sex Ed

Health education that covers sexually transmitted infection education, child sexual abuse and assault prevention education, and dating violence education is required. Abstinence must be stressed, and anything beyond that is not required to be taught unless parents opt their child into instruction for it.



[View Bill Tracker](#)

Current Requirement

- Health education that covers topics including STI prevention is required
 - Curriculum must emphasize abstinence.
- Curriculum is not required to include instruction on sexual orientation or gender identity.
- Curriculum is not required to include instruction on consent. Ohio does require instruction on dating violence and sexual violence prevention, which mentions healthy relationships.
- Curriculum stigmatizes abortion
- Upon written request of a parent or guardian, a student may be excused from receiving any or all sex education instruction. This is referred to as an “opt-out” policy. Further, if any education beyond the mandated topics is provided, prior parental consent must be obtained. This is referred to as an “opt-in” policy.
- Ohio has no regulations regarding medically accurate sex education.

RECENT LEGISLATION SHAPING THE STATE LANDSCAPE

Advocates have encountered a standstill in advancing sex education in Ohio, as SIECUS has not observed any sex education-specific legislation since 2022. In the current session, however, regressive lawmakers have introduced Senate Bill 156, a bill that would require “success sequencing” to be taught in Ohio schools. To be clear, “[success sequencing](#)” is another word that denotes “abstinence only until marriage” instruction. It insinuates that students won’t succeed or have good outcomes later in life if they do not wait to marry and then have kids. Not only is [this theory not evidence-based](#), but it is also stigmatizing to youth, shaming them for their decision-making. House Bill 96, an appropriations bill, also slips in funding for “success sequence” curriculum through instruction on social inclusion that the Department of Education must offer as a training program.

Beyond sex education, the Ohio legislature continues to be the stage for legislative attacks in the form of “parental rights” and anti-transgender bills, with three of these being enacted in 2024. [House Bill 8](#), also known as the Parents Bill of Rights, was also enacted and requires schools to adopt policies including parental notification on health and well-being (potential “forced” outing clause) and any instructional materials with “sexuality content”, directly implicating sex education. This law also prohibits any “sexuality content” from being taught in grades kindergarten through third. [House Bill 68](#) and [Senate Bill 104](#) were signed into law and now make Ohio a hostile state for transgender youth by banning gender affirming care for minors and prohibiting transgender youth from using bathrooms and accommodations that align with their identity. While these laws are not direct attacks on sex education, they do seek to make school environments more hostile and less safe and affirming for all students, especially LGBTQIA+ students.

Sex education is required through “sexually transmitted infection education” in Ohio, and schools are required to provide instruction on abstinence, laws related to sexual activity with minors, healthy relationships, dating violence prevention, and personal safety and assault prevention. However, curriculum is not required to be comprehensive, medically accurate, or include instruction on topics such as consent, sexual orientation or gender identity, or contraceptive options. This leaves local school districts to decide what sex education curriculum they provide.

Additionally, Ohio is the [only state in the country that does not have its own state health education content standards](#) as the Legislature is granted authority to decide curriculum requirements. Instead, schools are left unprepared on how to provide health education. As a result the Ohio Department of Education developed a Model [Curriculum](#) in 2019, although this is meant to serve only as guidance.

Local control over sex education presents unique challenges that have resulted in glaring disparities 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 LGBTQ 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 school board, advocates can determine what topics are missing from the current instruction, such as instruction on consent, sexual orientation, gender identity, and contraceptives. Advocates can also focus on ensuring that the curriculum is medically accurate. They can then vocalize the importance of 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. **Ohio's 2025-2026 legislative session convenes January 6th, 2025 and adjourns December 31st, 2026.**

Further, advocates can contact their representatives to discuss the need for a statewide sex education mandate and required implementation of state standards without the approval of the legislature. 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)

More on sex ed in Ohio...

State Law: A Closer Look

Ohio Revised Code Sections 3313.60 and 3313.6011 requires health education that includes human immunodeficiency (HIV)/sexually transmitted infection (STI) instruction, stating that the board of education of each school district must establish a health education curriculum for “all schools under their control.” The health education curriculum must include “[v]enereal disease education,” which must emphasize that “abstinence from sexual activity is the only protection that is [100 percent] effective against unwanted pregnancy, sexually transmitted disease [STD], and the sexual transmission of a virus that causes acquired immunodeficiency syndrome [AIDS].” Additionally, it must:

1. Stress that students should abstain from sexual activity until after marriage;
2. Teach the potential physical, psychological, emotional, and social side effects of participating in sexual activity outside of marriage;
3. Teach that conceiving children out of wedlock is likely to have harmful consequences for the child, the child's parents, and society;
4. Stress that STDs are serious possible hazards of sexual activity;
5. Advise students of the laws pertaining to financial responsibility of parents to children born in- and out-of-wedlock; and
6. Advise students of the circumstances under which it is criminal to have sexual contact with a person under the age of 16, pursuant to section 2907.04 of the Revised Code.
7. Emphasize adoption as an option for unintended pregnancies.

Upon written request of a parent or guardian, a student may be excused from receiving any or all of this instruction. This is referred to as an “opt-out” policy. However, according to Section 3313.6011, any instruction in sex education beyond what is specified above must require advanced parental notification and consent prior to student receiving instruction. This is referred to as an “opt-in” policy.

State Standards

Ohio law does not permit the State Board of Education to adopt the Health Education Standards for required implementation in Ohio schools. The Ohio Department of Education does provide guidance on the overall health education through model curriculum but this is not required to be followed.

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 Ohio's 2023 YRBS results, [click here](#).** In 2023, Ohio participated in high school and middle school YRBS data collection.

Ohio 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 Ohio'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](#).