

Resource Guide for Texas Independent School Districts





www.TexasisReady.org



9th highest teen birth rate¹ **3rd** highest teen pregnancy rate¹

> Tied for highest percentage of repeat teen births¹

2014

2020

2021

2022

2022 iCHAMPSS 2.o Usability Results (n=9)

100% of people would use iCHAMPSS again

of people think the information they got from iCHAMPSS will help their district **adopt** and **implement** evidence-based programs

of people think the information they got from iCHAMPSS was **accurate** and **trustworthy**

78%

89%

"It's a complete one stop with all the info."

"Selecting human sexuality curriculum can be challenging and it's nice to have a reliable, reputable resource!"

What people had to say about iCHAMPSS...

"It prioritizes the goals of SHACs and provides guidance in supporting the case for sexual health education."

iCHAMPSS 1.0

With CDC funding, an implementation strategy was built to help Texas school stakeholders adopt, implement, and maintain effective programs for sexual health education. iCHAMPSS includes a staging tool to gain a better sense of where your school/school district is in the process, which CHAMPSS step to focus on, and what tools are most useful . It features over 50 tools including CHAMPSS Step Overviews, Success Stories, Facts & Tips Sheets, Helpful Links, and Templates.

www.ichampss.org

Texas Education Code laws change

The Texas Board of Education updated the state's sexual health curriculum standards and the state legislature changed the statute related to the approval process for sex ed.

Healthy Futures of Texas -UTHealth Partnership

This collaboration was used to begin the revamp of iCHAMPSS to help school districts navigate these new policies while minimizing controversy through the Houston Endowment. All of the iCHAMPSS tools have been updated to reflect current policies.

Testing of iCHAMPSS 2.0

A usability test (n=9) was conducted with favorable outcomes and recognition of the need for iCHAMPSS 2.0. Pilot testing is expected to take place Fall 2022.



Research Coordinator at laura.c.thormaehlen@uth.tmc.edu iCHAMPSS Principal Investigators: Melissa Peskin (Lead), PhD, Belinda Hernandez, PhD, Christine Markham, PhD, Ross Shegog, PhD, Paula Cuccaro, PhD, Marie Brault

For more information about iCHAMPSS, please contact Laura Thormaehlen, iCHAMPSS

1. Power to Decide: the campaign to prevent unplanned pregnancy. National and State Data. Texas. 2020. Available at: https://powertodecide.org/what-we-



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Resource Guide

for Texas Independent School Districts

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www.TexasisReady.org

Texas Ready

to support school districts and communities in

IMPLEMENTING SCHOOL-BASED SEX ED

- We provide school districts with **personalized support to select and implement a sex education curriculum** that best fits their needs, using research-based tools and resources like iCHAMPSS.
- We provide the **resources and guidance that teachers and the community need to be part of the process**, and contribute to effective implementation.
- We offer **free virtual or in person trainings** for schools and communities.

WHY IS IT SO IMPORTANT TO PROVIDE TEXAS YOUTH WITH HIGH-QUALITY SEX EDUCATION?

- By the end of high school, <u>65%</u> of Texas students have been sexually active.
- Every <u>25</u> minutes, a baby is born to a teen in Texas.
 - Texas has the <u>**9th</u>** highest teen birth rate and the highest repeat teen birth rate nationwide.</u>

How is sexual health education curricula adopted in Texas?

- Recommendations: School health advisory councils (SHACS) hold at least two public meetings on the proposed curriculum.
 - Community Input: The SHAC presents the recommendation to the school board at a public meeting.
 - Adoption: The board of trustees adopts the curriculum.

<u>2022-23 school year:</u> School districts begin to teach the new Health Education standards.



YOUNG PEOPLE IN TEXAS DESERVE HIGH-QUALITY, MEDICALLY ACCURATE SEX EDUCATION. For more information, visit www.texasisready.org

Texas s Ready

WHY IS SEX EDUCATION IMPORTANT?

As parents, educators, or community members, we want our kids to be healthy from head to toe. And that means providing them with factual, common sense information about how their bodies work.

What is sex education?

Newly adopted Texas Health Education curriculum standards on sexual and reproductive health cover a wide range of topics in age-appropriate ways. In elementary school, students learn about healthy friendships and body safety, and in later elementary grades, about changes to expect with puberty. Older students learn about human reproduction, and how to reduce the risk of unintended pregnancy through abstinence, contraception, or condoms. Students also learn about healthy relationships, how to identify and avoid abusive relationships, and topics such as respecting the boundaries of others.

Why should we teach abstinence-plus sex education?

Some sex education only teaches youth about abstinence, or avoiding sex. While this is important, research shows that half of Texas teens will be sexually active by their junior year of high school. "Abstinence-plus" sex education teaches students abstinence is the safest choice, but also provides medically accurate information about topics such as contraception, prevention of sexually transmitted infections, and healthy relationships. Decades of research indicate that abstinence-plus sex education supports healthy outcomes, including delaying the onset of sexual activity and increasing rates of contraceptive use to avoid unintended pregnancies and the transmission of sexually transmitted infections. Texas recently adopted Health Education curriculum standards that will expand abstinence-plus education to all students.

Research shows that providing medically accurate information in school doesn't make students more likely to have sex -- and can be effective at delaying sex. Texas currently has the 9th highest rate of teen birth in the nation, with a baby born to a teen parent once every 25 minutes. Though teen birth rates are declining both nationwide and in Texas, rates of sexually transmitted infections are on the rise. Texas students deserve factual information that can help keep them safe and healthy.

Who supports sex education?

Virtually every major medical organization supports sex education that goes beyond abstinence, including groups such as the American Medical Association, American Pediatric Society, Society for Adolescent Health and Medicine, National Association of School Nurses, and National Association of Social Workers. Most importantly, a large majority of parents support abstinence-plus sex education for their own kids.

How can districts implement sex education?

State statute and curriculum standards have seen major changes in the last two years. This resource guide will provide you with information on how to implement sex education in compliance with state laws. More information is available at www.texasisready.org and www.ichampss.org.





Advancing informed sexual health decisions

Texas Adolescent Health

A baby is born to a teen mom in Texas every **25 minutes**

Disparities >>

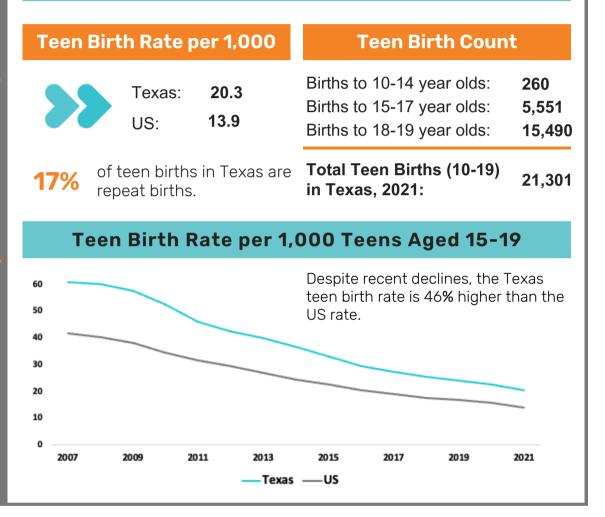
Factors such as access to health care, information, and economic opportunity can lead to disparities in teen birth rates.

Teen Birth Rate

Hispanic 28.2 Black 22.3 White 11.7 Asian 1.5	
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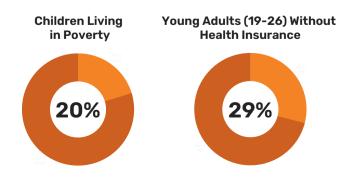
In 2021, the Texas birth rate for Hispanic teens was 2.4 times higher than the rate for white teens.

TEXAS TEEN BIRTHS, 2021



Non-Health Social Factors

Structural issues such as poverty and lack of access to health care can contribute to teen pregnancy rates.



Sexually Transmitted Infections

Though teen pregnancy rates are declining, STIs are increasing among Texas youth. Some increase may be due to better screening, but data suggests actual rates are on the rise.

2020 Reported STI Cases & Rates, Youth 15-24, Texas

	Count of new cases, 2020	Change from 2009	2020 Rate per 100,000
HIV	1,081	10%	26
Chlamydia	83,501	12%	2040
Gonorrhea	27,717	48%	677

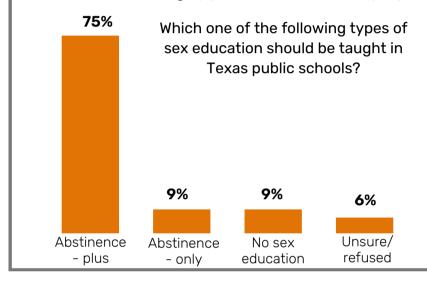


Advancing informed sexual health decisions

Public Opinion Poll Results

Texas voters support abstinence-plus sex ed

Texas voters agree that our youth deserve access to medically accurate, age-appropriate sexual health education. The dialogue around sex education can be divisive, but polling consistently shows that sex education is not a highly partisan issue for most people – it's just common sense.



When asked what should be taught in public schools, 75% of poll respondents, including 68% of Republicans, support teaching abstinence-plus sex education, defined as curricula that "teaches students abstinence is the safest choice, but also provides medically accurate information about topics such as contraception, prevention of sexually transmitted infections, and healthy relationships." More than 2/3 of voters across all political affiliations, geographic regions, genders, and ethnicities support abstinence-plus sex ed in schools.

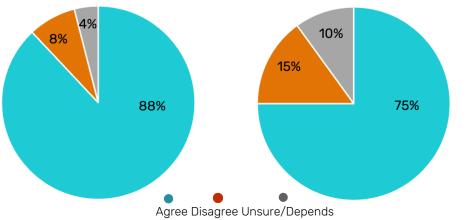
TEXAS VOTERS AGREE

Consent & Boundaries **88**%

of respondents, including 86% of Republicans, agree that "It's important for students to learn about consent, including respecting the boundaries set by other people about their bodies."

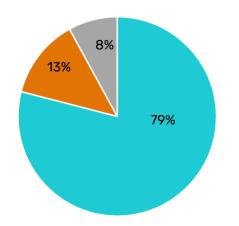
Inclusivity **75%**

of respondents, including 65% of Republicans, agree that "To help prevent bullying of LGBTQ youth, Texas public schools should include standards around cultivating respect for all people, regardless of their sexual orientation or identity."



Contraception & Condoms **79**%

of respondents, including 72% of Republicans, agree that, "Along with abstinence, sex education in public schools should teach students about condoms and contraception."



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Texas Health Education Ready What do the changes mean for ISDS?

NEW CURRICULUM STANDARDS

High-quality sex education supports adolescent health, teen pregnancy prevention, and healthy relationships. In November 2020, for the first time in more than two decades, the State Board of Education (SBOE) adopted new minimum curriculum standards that guide sex education in Texas. These newly adopted Texas Essential Knowledge and Skills, or TEKS, for Health Education include many improvements across a wide array of topics, including sexual and reproductive health. Health Education is an elective at the high school level but required in middle school, and key sex ed topics will now be offered at the middle school level. Many school districts do not currently offer sex education, and will need to adopt updated curriculum to align with new TEKS.



To view new TEKS, scan this code

New TEKS include:

- Age-appropriate, timely information on key topics like anatomy, puberty, menstruation and human reproduction.
- Information on contraception, condoms, and prevention, screening and treatment of sexually transmitted infections (STIs), now required at the middle and high school levels.
- The importance of abstinence.
- Standards on healthy relationships, such as prevention of sexual abuse, dating violence, sex trafficking, and in support of topics such as healthy communication and respect. While the standards teach the importance of respecting the boundaries of other people, they do not include consent.
- Standards do not cover sexual orientation or gender identity. However, districts may choose to include content that is inclusive of LGBTQ students, including bullying prevention.

Minimum Standards

The Texas Essential Knowledge and Skills represent the **minimum** curriculum standards that must be delivered to students. However, in any subject, TEKS are the floor, not the ceiling. School districts are not prohibited from "teaching beyond the TEKS" and may provide instruction in topics that are not covered in TEKS.

For example, while the TEKS do not specifically include content on consent, many districts recognize the importance of this topic and incorporate consent into instructional materials.

What instruction must be provided?

Health education is part of the enrichment curriculum. Following changes in 2009, Health Education is no longer a graduation requirement and is elective at the high school level. However, Health Education TEKS are required to be delivered at the elementary and middle school level.

Per the Texas Administrative Code, all the TEKS for health education for grades K-8 are required to be taught and students must demonstrate proficiency of those TEKS.

- The Texas Administrative Code (TAC) §74.2(a) states that health education is part of the required curriculum for grades K-5.
- The Texas Administrative Code (TAC) §74.3(a)(1) states that the TEKS for health education must be taught in grades 6-8 as part of the required curriculum. For grades 7-8, the TEKS are banded together, which provides districts with the flexibility of when and how to offer the course. For example, a district or campus might decide to teach all these TEKS in grade 7, they might teach all of them in grade 8, or they might teach half of the TEKS in grade 7 and the other half of the TEKS in grade 8.
- While Health Education is not required statewide at the high school level, districts do have the option of choosing to require Health Education in high school.

TexasImage: State LawsReadyAbout Sex Ed and Abuse Prevention

STATUTORY OVERVIEW

Most of our laws about sex education and abuse prevention instruction are found in Section §28.004 of the Texas Education Code. These laws cover the following topics:

- School Health Advisory Councils (SHACs): The law creates SHACs, which are parent and community volunteer groups charged with ensuring that local community values are reflected in health education instruction. SHACs make recommendations to the school board for sex ed and abuse prevention curriculum.
- **Curriculum adoption:** State law requires sex education and abuse prevention curriculum to be adopted by the school board, on the recommendation of the SHAC, with at least two public SHAC meetings.
- Sex education content: Instruction related to human sexuality must stress abstinence from sexual activity for students as the preferred and safest choice of behavior. If education on contraception and condoms is included, schools must teach "human use reality rates" regarding efficacy.
- Parent rights: Parents must provide written consent in order for their children to receive sex education or abuse prevention instruction. They have the right to review or purchase sex education curriculum. They must receive extensive notification about sex education or abuse prevention instruction that will be provided to their children. Parents must be able to review or purchase curriculum materials, and public domain materials must be posted online.
- What laws don't include: Sex education in Texas is not required under statute, although new TEKS covering sex education are required in middle school.
- **Charter districts** are required to teach Health Education TEKS, but are not required to follow provisions in 28.004 related to SHACs, curriculum adoption, and opt-in.

Texas Sex Ed Law: FAQs

- Texas law requires abstinence to be presented as the best and safest choice, with more time spent covering abstinence than other methods, but also allows instruction on topics like condoms and contraception.
- Texas law **does not** allow condoms to be distributed in sex ed class.
- Texas law **does** permit condom demonstrations.
- If questions about sensitive topics arise, teachers are always allowed to communicate the content of state law.
- The TEKS are minimum standards (the floor, not the ceiling). Districts may include content that goes beyond the TEKS.
- Districts are not limited to SBOE-adopted textbooks.
- Some districts may adopt policies that are stricter than state law.



To read Texas Education Code §28.004, scan the QR code.

Recent changes to state law

Two bills passed in the 87th Legislative Session (2021) made major changes to state law:

- HB 1525 implemented requirements for parent consent for sed ed, new curriculum adoption processes, stronger parent notification and curriculum access, and more SHAC transparency
- SB 9 (second special session) applied sex education laws to any instruction on the prevention of child abuse, family violence, dating violence or sex trafficking.

Texas Solution For Sex Ed and Abuse Prevention INSTRUCTION MATERIALS ADOPTION

Texas law requires local school districts to follow a specific process when adopting curriculum for sex education, as well as instruction for prevention of child abuse, dating or family violence, and sex trafficking. Many of these steps changed in the 2021 legislative session.

How the process works

HB 1525, passed in the 87th Legislative Session, laid out new processes for district to adopt sex education and abuse prevention instructional materials. This process typically takes several months, so districts should plan timelines accordingly. The steps in TEC §28.004 (e-1) and (q-1) include the following:

- 1. The school board adopts a formal resolution noting the process that the district will use to adopt instructional materials for sex education or prevention of child abuse, dating or family violence, and sex trafficking.
- 2. The school board issues a resolution directing the SHAC to review curriculum and make a recommendation.
- 3. The SHAC reviews curriculum and holds at least two public meetings before selecting their recommendation. During this process, the curriculum must be made available for parent review.
- 4. The SHAC presents the curriculum recommendation to the school board.
- 5. The school board votes on the curriculum through a record vote at a public meeting.

What is the SHAC's role?

Each Texas school district is required by state law to have a School Health Advisory Council, or SHAC. SHACs are charged with ensuring that local values are reflected in health education.

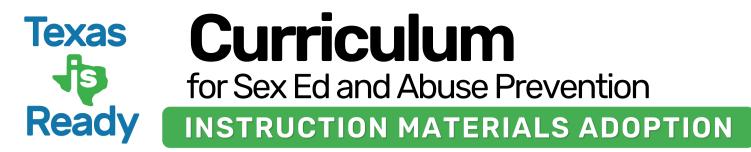
SHACs are made up of at least 5 members, appointed by the school board, though some districts have much larger SHACs. A majority of members must be parents of enrolled students. District employees, students, and community members also may be appointed.

The SHAC reviews curriculum for sex education or prevention of child abuse, dating or family violence, and sex trafficking, and makes a recommendation to the school board.

Following recent changes in state law, SHAC meeting notices, minutes, and audio or video recordings of meetings must be posted on the district website, as described in TEC §28.004 (d-1) and (d-2).

What materials can districts adopt?

- Districts do not have to use materials adopted by the State Board of Education (SBOE). Districts may use their Technology and Instructional Materials Allotment for materials not adopted by the SBOE. (TEC§31.004; TAC §66.1307 (f)(3))
- The SBOE has not adopted Health Education instructional materials for the elementary level.
- Districts may develop their own materials.
- Benefits to SBOE-adopted materials include ease of ordering through EMAT and free access to materials accessible for students with disabilities (braille, large print, etc).
- Districts should be able to show they are providing 100% of TEKS.
- Materials must:
 - Be suitable for the subject and grade level for which curriculum materials are intended, and
 - Be reviewed by academic experts in the subject and grade level for which the curriculum materials are intended.
 - Stress abstinence per TEC §28.004.



Districts have many options when selecting a Health Education curriculum. Some key questions to consider include:

- Is the curriculum medically accurate?
- Is the curriculum evidence-based?
- What percent of TEKS does the curriculum cover?
- Does the curriculum align with state statute?
- What is the cost of the curriculum?
- Who will teach the curriculum?
- What training needs do staff have?
- Does the curriculum use shame or fear based methods that could harm students?
- What type of curriculum is right for my students and community?
- Do we need to supplement the curriculum with other resources?

What is an Evidence-Based Sex Education Program?

- Grounded in strong research methods
- Rigorously evaluated
- Research methods were used in the evaluation
- Published in a peer-reviewed journal
- Produced positive behavior changes at least 3 months post-implementation
- Effective in changing behavior in the study population

The iCHAMPSS tool provides a list of evidencebased programs with TEKS alignment.

Many districts face a choice between adopting a standalone health textbook or a separate sex education program. There are benefits and drawbacks to each option.

Should we adopt a Health Textbook?

Pros: A health textbook is likely to meet 100% of Health Education TEKS, both in sex education and other strands such as nutrition, injury prevention, etc. If approved by the State Board of Education, it has already been reviewed and deemed suitable for grade level, and is easy to order using TIMA funds.

Cons: Health textbooks have not been evaluation for efficacy. They may not provide extensive information on topics such as contraception.

Should we adopt an Evidence-Based Program?

Pros: These programs are likely to have been developed by health experts and evaluated for efficacy. They may include content on topics not included in TEKS, such as consent. Many programs are geared to specific student populations.

Cons: Stand-alone sex education programs will not cover all Health TEKS. A separate health textbook is likely to be needed for other topics beyond sexual health.

Texas Ready Ready Sex Ed and Abuse Prevention

PREPARING FOR INSTRUCTION

Adopting a sex education curriculum is a big step for a district, but the work isn't done yet. Implementation of sex education includes many key steps:

- Providing outreach to parents to communicate about the new curriculum.
- Complying with state laws around parent notification, consent, and curriculum access.
- Determining who will teach the curriculum.
- Ensuring that teachers receive appropriate training and are well-prepared to teach sex education.
- Evaluating if the curriculum is meeting district needs.

Parent Notification Letter

A Parent Notification Letter must be sent out prior to the start of the school year for sex education and for abuse prevention instruction:

The parent notification letters must include:

- a statement informing the parent of the human sexuality/abuse prevention instruction requirements under state law
- a detailed description of sex ed/abuse prevention content and a general schedule for instruction
- a statement of the parent's right to review or purchase curriculum materials
- a statement of the parent's right to remove the student from any part of instruction without penalty
- a statement of parents' rights to use the grievance procedure or appeals process concerning any violations of state law
- a statement that any curriculum materials in the public domain must be posted on the district's website, with the address noted
- information describing the opportunities for parental involvement in the development of the curriculum, including information regarding the local school health advisory council

A parent notification letter template is available for download on iCHAMPSS.



Curriculum Access

Open source materials:

- Must be posted on district website
- On parent request, must be provided by mail or by email

Copyrighted materials:

Parents must be able to:

- review the curriculum materials at the student's campus at any time during regular business hours;
- purchase a copy of the curriculum materials from the publisher at a price not to exceed that paid by the district (for contract agreements entered into after 2021); or
- review the curriculum materials online through a secure electronic account in a manner that prevents the curriculum materials from being copied and that otherwise complies with copyright law.

Texas Let's Get Trained Ready Sex Ed and Abuse Prevention

IMPORTANCE OF TRAINING

Teaching sex education can be more challenging for teachers than a topic like biology or algebra, because human sexuality covers biological, psychological, cultural and ethical considerations. We want teachers to feel prepared to handle those challenging student questions and feel confident in their abilities to cover the instructional content.

It's important to consider who will be teaching the curriculum, and what training or classroom management tools they may need. Many different types of staff may be effective at teaching sex education: nurses or counselors, science teachers, coaches, advisory teachers, etc. Especially in small districts, it may be helpful to specifically look for individuals who are comfortable with this content. You can also bring in outside educators.

Regardless of who will be teaching sex ed, districts should ensure that they receive trainings to best support and prepare them for a successful experience. Some items to consider:

- Training should be given by the publisher of chosen curriculum, or an approved trainer for the curriculum or sexual health content.
- Provide financial resources to support teacher training. If no resources are available, there are some free training resources online.
- Training should be provided to all teachers leading the sex ed components, especially if they have not provided instruction before.
- Check in with your teachers to see how prepared they feel and what additional training or support needs they may have.
- School nurses may be able to provide education to teachers on health topics that frequently arise with students.

Training Components

Training can take place in many ways, and may vary depending on if the district is utilizing a human sexuality curriculum or a general health textbook with sex ed components within it. These are training components to consider for educators. **Trainings should:**

- Be long enough to cover topics appropriately (may be offered all at once or broken into multiple days)
- Cover topics and approaches that support:
 - Trauma-Informed approaches
 - Inclusivity
 - Understanding values and biases
 - Answering challenging/sensitive questions that are likely to arise in sex ed instruction
- Discuss a human sexuality curriculum in deeper context
 - understanding fidelity
 - approved adaptations that can be made
 - helpful tips on delivery
- Be fun, engaging and allow for further technical assistance after the training ends
- Cover topics that go beyond human sexuality to foster continued growth
 - Mental health, human trafficking, sexual assault prevention, unconscious bias, etc.

Texas Parents and Ready Sex Education



How can we engage parents?

Schools should take steps to build trust with parents around sex education:

- Ensure they have a robust school health advisory council (SHAC) with plenty of parent representation.
- Consider conducting parent surveys to assess what a majority of parents value in a sex education curriculum.
- Communicate information about district and community rates of teen pregnancy and STIs.
- Provide extensive outreach around proposed and adopted sex education curriculum. Transparency can help alleviate parent concerns.
- Consider hosting parent nights about curriculum where parents have an opportunity to ask questions.
- Host trainings such as *Key Conversations* that support parents in talking with their kids about healthy relationships and sexual health.

Who

Supports sex education?

Public opinion polling consistently shows that a strong and bipartisan majority of parents strongly support sex education, because they believe it will help their kids stay safe and healthy. Parents who prefer to handle sex education on their own are empowered in state law to opt their kids out of instruction.

Why

are parents so important?

Parents are the first and most important teachers of their children. Different families' values vary based on culture, religion, politics and other factors. Those values play a key role in influencing the ideas, behaviors, and decisions of youth as they grow into adulthood.

Health education works best when schools and parents are reinforcing the same messages at home and in the classroom, so ensuring community support for a sex education curriculum is a crucial step.

Parents have a great deal of input into selection of sex ed curriculum. School Health Advisory Councils, or SHACS, are volunteer groups tasked with ensuring that local community values are reflected in health education. Parents are required to make up a majority of SHAC membership.

WHAT

rights do parents have?

The Texas Education Code describes a number of rights that parents have around sex education, including the right to:

- Have a say in which sex ed curriculum is adopted.
- Receive notification of what sex education will be provided.
- Decide whether or not their child will receive sex education.
- Review all sex education curriculum materials during and after adoption.
- File a grievance or appeal if any of these rights are violated



Visit TexasisReady.org to stay up to date on sex ed.

Texas Ready

OPT IN FOR SEX EDUCATION AND ABUSE PREVENTION

Texas parents and guardians now must provide written consent to opt their children into instruction on human sexuality and the prevention of child abuse, family violence, dating violence, and sex trafficking. Texas is one of just five states in the nation with this requirement for sex education, and the *only* state with this requirement for abuse prevention instruction.

Statutory Requirements

Following the passage of HB 1525 in the 87th regular legislative session and SB 9 in the second special session, parents or guardians must provide written consent in order for their children to be able to participate in instruction on human sexuality and the prevention of child abuse, family violence, dating violence, and sex trafficking.

Under new Texas law:

- Permission forms must be sent out at least 14 days prior to instruction.
- Permission forms may not be sent out with any forms or notifications other than the required parent notification for sex education OR abuse prevention instruction.
- Under state law, the consent form for human sexuality instruction and the consent form for instruction on prevention of child abuse, family violence, dating violence, and sex trafficking may not be sent together. The new law does not consider the fact that many districts include abuse prevention as part of sex education.
- Forms must be sent out for instruction on human sexuality instruction, which state law defines as including "instruction in reproductive health."
- Parents maintain the right to opt children out of specific portions of sex education or abuse prevention instruction.

An opt-in letter template is available for download on the iCHAMPSS website.



Concerns about opt-in

Texas parents have long had the right to opt children out of any portion of human sexuality instruction without penalty. Districts voluntarily using opt-in procedures report very high levels of participation, as public opinion polling shows that a majority of parents support sex education for their children. However, some children may slip through the cracks.

Disengaged, absent, or simply busy parents may miss forms at the bottom of a backpack or email inbox, causing their child to miss out on crucial instruction.

In the case of child abuse, family violence, or sex trafficking, a child may be abused or sexually exploited by their parents or guardians. In this case, the child is unlikely to receive permission from their abuser to learn about child abuse.

Best Practices for Districts

- Offer as much communication as possible to parents and guardians, such as parent nights to walk through health education curriculum, and answer all questions. Transparency and openness will help parents understand curricula.
- Ensure you leave plenty of time for parents to return forms. While 14 days is required by law, consider allowing even more time to make sure you have time to resend forms as needed.
- In order to track non-responders, make sure forms include boxes for "I give consent" and "I do not give consent." This will allow you to see which students are falling through the cracks.

Statutory Citations

Opt in provisions are located in Chapter 28 of the Texas Education Code:

- Human Sexuality instruction: TEC §28.004 (i-2), amended by 87-R HB 1525
- Abuse prevention instruction: TEC §28.004 (q-6), amended by 87-2 SB 9.

Texas Ready

TEXAS IS READY TO SUPPORT YOU

High-quality implementation of the newly adopted health curriculum standards could result in virtually every Texas student receiving access to medically accurate information on topics such as contraception, prevention of sexually transmitted infections, and healthy relationships.

School-based sex education is a key resource in large-scale support of adolescent sexual health. Parents are the first and most important teachers of their children and have a fundamental right to be in charge of their children's education. As in all critical education topics, students are best served when schools and parents partner to build their knowledge and skills. Additionally, for some young people, school-based sex education is their only opportunity to receive this vital information.

However, many districts, especially smaller and less-resourced rural districts, tell us they face significant barriers in implementing new standards. Some common barriers include confusion with complex Texas laws around sex education, lack of time resources to identify high-quality curriculum, under-resourced school health advisory councils, and real or perceived low levels of community support for sex education. Even after curriculum adoption, implementation challenges such as teacher training and compliance with state laws around topics such as parent notification and consent may take significant district resources.

Texas is Ready is here to support school districts in lessening the barriers to implementing high-quality, evidence-based sex education and ensuring that marginalized groups of youth have equal access to it.



Schools





Parents & Community



Students

SHACS

SCHOOLS & CHARTERS

School administrators and staff must decide who will teach sexual health education in the classrooms (teachers, coaches, school nurses, external partners, etc.) and assess the training needs of the chosen educators.

Texas is Ready supports these efforts by linking schools with partners that deliver sex ed, as well as partners that deliver training for best practices for delivering sexual health education.

This specialized training teaches the information and skills necessary to facilitate sexual health education in a way that creates a safe space for learners, while also being inclusive and trauma-informed, with a values-neutral approach.

SHACS & DISTRICTS

Texas school districts are required to form SHACs to ensure that local community values are reflected in each district's health education instruction.

Texas is Ready supports SHACs and school districts by linking them to curriculum publishers and by providing education on the updates to the TEKS, statutory compliance, SHAC roles and responsibilities, school board roles and responsibilities, and selection of evidence-based curriculum that covers the TEKS and meets the needs of their student populations and communities.

PARENTS & COMMUNITIES

Informed parents and caretakers of young people are not only better able to help their children stay healthy and reach their full potential, but are also better positioned to partner with and support schools as they implement sexual health education.

Texas is Ready supports parents, caretakers, and communities by linking them to parent-facing educational programming such as *Askable Adults, Key Conversations*, and *Families Talking Together*.

STUDENTS

There are some student populations that are typically left out when traditional sexual health education classes are being delivered (i.e. students with physical disabilities and youth who live in systems of care).

Texas is Ready supports educators to assist with the selection and implementation of appropriate sexual health education that is sensitive to each population's circumstances.

Texas is Ready aims to ensure that all Texas youth receive high-quality sexual health education in public schools by bringing awareness to the disparities and partnering with experts to offer trainings that address the needs of special populations.



Visit TexasisReady.org to request services.



Texas Sex Education Ready FACTS AND MYTHS

Polling shows that a large, bipartisan majority of Texans support abstinence-plus sex education. However, in discussions around sex education and adolescent health, many misperceptions arise. This document outlines some common sex education myths and what the research suggests.

SHOULDN'T PARENTS BE THE ONES TO TEACH THEIR KIDS ABOUT SEX?

No matter the subject, parents are their children's first teachers. Different families' values may vary based on culture, religion, politics and other factors. Those values, which are cultivated in a home environment, may play a key role in influencing the ideas, behaviors, and decisions of youth as they grow into adulthood. However, many parents do not feel comfortable talking about sexual health topics with their children. As with other subjects like math and science, parents may not have extensive medical knowledge to share. Even highly engaged and informed parents often appreciate schools partnering to reinforce the information they're providing at home. And not all Texas students have parents or families. Over half a million Texas youth are in the child welfare system.

In the absence of medically-accurate, age-appropriate instruction, students often turn to less reliable sources of information that may convey inaccurate or inappropriate examples of healthy romantic and sexual relationships. Those sources may include peers, siblings, or internet websites. Many studies find that the average age that kids are first exposed to online pornography is 11. Age-appropriate, medically accurate classroom instruction on sexual health is critical so that all youth, regardless of whether they have families to provide this information or not, have a baseline of knowledge that will give them the tools to make safe and healthy decisions.

Recent public opinion research shows that 79% of Texas voters prefer sex education that teaches about topics like contraception and condoms in addition to abstinence. [1] Most parents want schools to be partners in helping to keep their children safe and healthy.

WHAT IS "ABSTINENCE-PLUS" SEX EDUCATION?

"Abstinence-plus" sex ed teaches students abstinence is the safest choice, but also provides medically accurate information about topics such as contraception, prevention of sexually transmitted infections, and healthy relationships. Decades of research indicate that abstinence-plus sex education supports healthy outcomes, including delaying the onset of sexual activity and increasing rates of contraceptive use to avoid unintended pregnancies and the transmission of sexually transmitted infections. [2]

In contrast, "abstinence only education" is defined in Section 510 of Title V of the Social Security Act as educational programs that "ensure that the unambiguous and primary emphasis…is a message to youth that normalizes the optimal health behavior of avoiding nonmarital sexual activity."

New Health Education TEKS include student learning expectations around abstinence-plus topics.

Sources:

[1] Texas Campaign to Prevent Teen Pregnancy public opinion polling data,

[2] March 2020https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2016/11/comprehensive-sexuality-education

WHY SHOULD WE TEACH SEX EDUCATION?

Chapter 74 of the Texas Administrative Code requires districts to provide all Health Education TEKS to students in elementary and middle school. While Health Education is an elective at high school, this is often the time when students are most in need of this information. Half of high school juniors report that they've been sexually active, rising to 65% by their senior year. [1] Nearly half of sexually-active high school students reported not using a condom during their last sexual encounter, indicating significant risk for sexually transmitted infections (STIs). And while rates of teen birth are on the decline, STIs are on the rise.

We strongly encourage schools to offer information about all available forms of contraception, including long- acting reversible contraception (LARC), which is 99% effective in preventing unintended pregnancy in actual use and also has high rates of user continuation and user satisfaction. For this reason, LARC methods are recommended as a first-line option for adolescents by professional medical organizations including the American College of Obstetricians and Gynecologists (ACOG) and the American Academy of Pediatrics [2].

Most professional medical organizations, including the American Academy of Pediatrics Committee on Child Abuse and Neglect, urge parents to teach children medically accurate names for body parts, including genitalia. This allows children to to clearly communicate medical needs about their body, set boundaries, and learn about the body is a scientific way.

DOES TALKING ABOUT SEX MAKE STUDENTS MORE LIKELY TO HAVE SEX?

No. Research shows that providing medically accurate information in school doesn't make students more likely to have sex -- and can be effective at delaying sex. For example:

"A pair of 2012 systematic reviews ... examining 62 studies published between 1988 and 2007 likewise found that comprehensive risk-reduction interventions were associated with declines in various risk behaviors among adolescents. Only one of the 62 studies suggested a potential negative impact. The evidence base is further bolstered by a United Nations-commissioned 2016 review of 22 systematic reviews, which found that curriculum-based comprehensive sex education programs contribute to delayed initiation of sexual intercourse, decreased frequency of sexual intercourse, fewer sexual partners and less risk taking." [3]

DOES TEACHING ABOUT CONSENT ENCOURAGE STUDENTS TO HAVE SEX?

The concept of "consent" is critical to the understanding that there is much more to this issue than teaching "refusal". 'Refusal' puts the onus of the decision about behavior on one party, rather than recognizing the responsibility of all parties involved in setting, communicating, and most importantly respecting personal boundaries. This is true not just in sexual relationships, but in all types of relationships at all age levels. For example, kindergarten students should understand and learn to communicate that they can choose a high five instead of a hug, and they can also choose not to be touched at all. Middle schoolers may choose whether or not they want to hold hands or be friends on social media. This fundamental education from a young age can instill concepts that foster lifelong healthy relationships and protect against workplace harassment, domestic violence, dating violence, sexual assault, and sexual abuse.

Recent public opinion research shows Texas voters agree: 88% of respondents, including 86% of Republicans, agreed with the statement, **"It's important for students to learn about consent, including respecting the boundaries set by other people about their bodies."** [4]

Sources:

[1] Texas Youth Risk Behavior Survey, accessed at http://healthdata.dshs.texas.gov/dashboard/surveys-and- profiles/youth-risk-behavior-survey 2] Contraception for Adolescents. COMMITTEE ON ADOLESCENCE. Pediatrics Oct 2014, 134 (4) e1244-e1256; DOI: 10.1542/peds.2014-2299 [3] https://www.guttmacher.org/gpr/2019/06/promiscuity-propaganda-access-information-and-services-does-not-lead-increases-sexual# [4] Texas Campaign to Prevent Teen Pregnancy public opinion polling data, March 2020



Resource Guide

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FOR INQUIRIES: EMAIL US AT JRCHESTER@HEALTHYFUTURES-TX.ORG

www.TexasisReady.org