

Youth Sexual Health: Education, Youth Behaviors, and School Safety



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YOUTH SEXUAL HEALTH: EDUCATION, YOUTH BEHAVIORS, AND SCHOOL SAFETY

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"As a nation, we have a collective responsibility to equip young people with the information and skills they need to be healthy throughout their lifetime. Though youth today are healthy overall, there is still work to do to address disparities in student health."

–(CDC DASH, 2024)

Understanding the health and wellbeing of Washington youth, including risk behaviors, can help caring adults improve access to needed information and services. This fact sheet includes an overview of youth sexual health and sexual health education in Washington state (WA).

Results presented in this fact sheet are from three main survey sources:

- Healthy Youth Survey (HYS) – HYS is a multi-state agency survey of WA students in grades 6, 8, 10, and 12 asking about wellbeing, behaviors, attitudes, and community and school experiences every two years.
- School Health Profiles Survey (Profiles) – Profiles is a survey developed by the Centers for Disease Control and Prevention (CDC) for principals and lead health educators to assess WA school health policies and practices every two years. OSPI administers the survey.
- Comprehensive Sexual Health Education Reporting Survey (CSHE Reporting Survey) – The Office of Superintendent of Public Instruction (OSPI), at the direction of the legislature, collects information annually from all schools in WA on the implementation of comprehensive sexual health education using the CSHE Reporting survey.

Youth Sexual Behavior & Pregnancy

Lifetime Sexual Intercourse

Five percent of 8th graders, 17% of 10th graders, and 40% of 12th graders reported ever having sex in their lifetime. In a classroom of 30 students, the following numbers have ever had sex:

- **One** 8th grader
- **Five** 10th graders
- **Twelve** 12th graders

Source: 2023 Healthy Youth Survey



Sexual Risk Behaviors

Figure 1 demonstrates the behaviors that students are participating in that put them at risk for unplanned pregnancy and STDs.

Among 12th graders who have ever had sex:

- **6%** had sex before they were 13 years old
- **19%** had sex with 4 or more partners
- **64%** used a condom during last sexual intercourse

Sexual Behavior among Youth Who've Had Sex

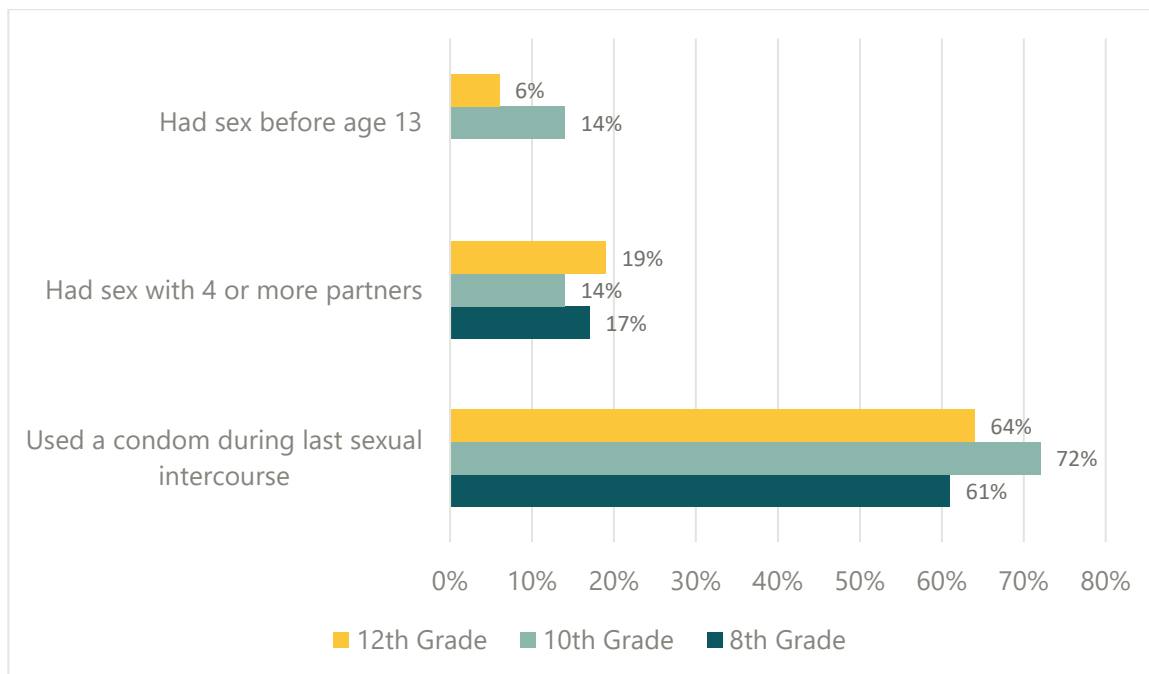


Figure 1: 2023 Healthy Youth Survey

NR: Sex before age 13 not reported for 8th graders since most are 13 years old

As youth become more sexually active, the need for comprehensive sexual health education increases, although the availability of this instruction decreases, putting students at risk for unplanned pregnancy. See Figure 2.

While national and state teen pregnancy rates have steadily declined over the past 25 years, 30% of teen girls who have dropped out of high school cite pregnancy or parenthood as a reason ([The National Campaign, 2012](#)).

Sexual Behavior Increases as Instruction Decreases

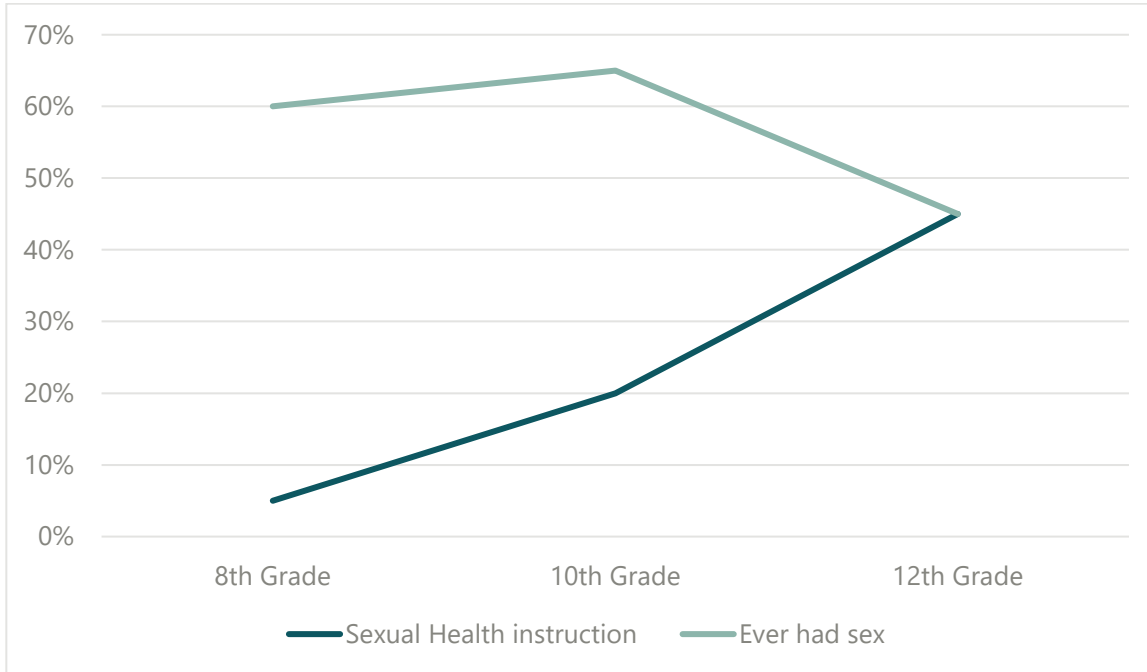


Figure 2: 2023 Healthy Youth Survey

Academic Achievement & Sexual Activity

Students with lower grades are more likely than their peer with higher grades to participate in certain risk behaviors:

- Compared to students with higher grades (mostly A's/B's), students with lower grades (mostly C's/D's/F's) are more likely to be sexually active.

While these results do not prove a casual link between academics, sexual activity, and health, these associations are important because they confirm that students who reported engaging in unhealthy behaviors struggle academically ([CDC, 2017](#)).

Grades in School and Sexual Intercourse

Getting lower grades (C's, D's, F's) and sexual intercourse

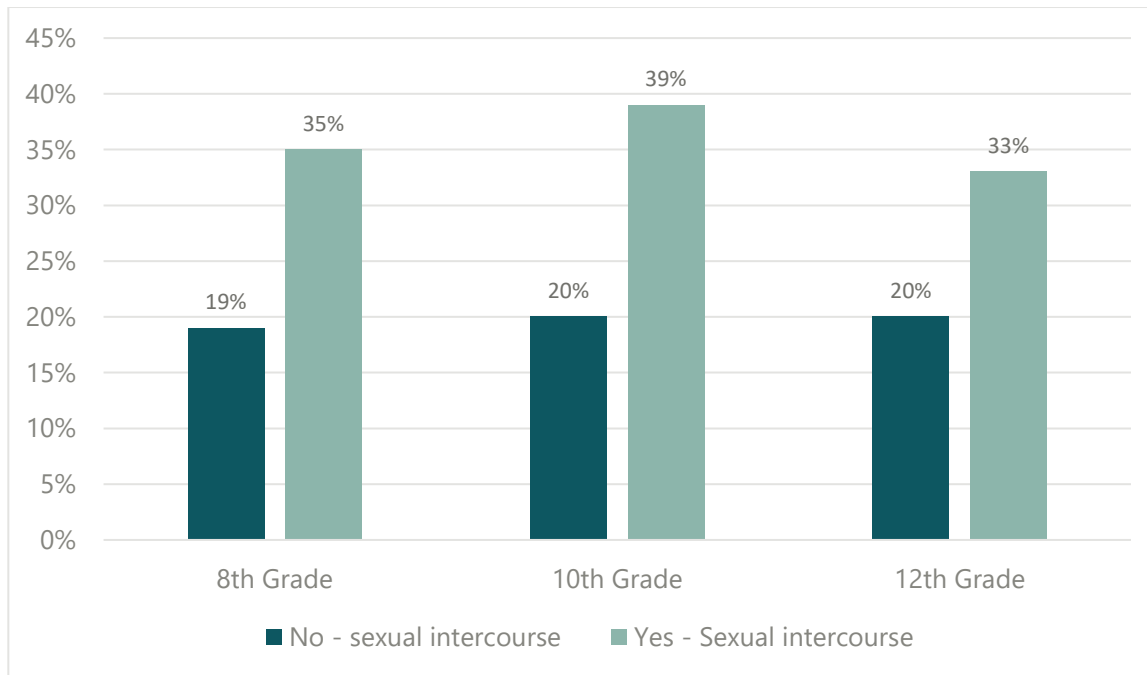


Figure 6: 2023 Healthy Youth Survey

Sexual Violence Prevention

The Washington State Legislature recognizes that every child should experience emotional and physical development that is free from abuse and neglect (Erin’s Law, 2018, Substitute House Bill 1539). The law encourages school-based K-12 sexual abuse prevention education but does not require schools to provide such education. [Recommendations from the Erin’s Law Workgroup](#) stress the importance of utilizing primary prevention strategies to reduce perpetration of and victimization from sexual violence.

Primary prevention works to stop the perpetration of sexual violence before it starts. All members of the school community, including students and families, must be engaged and involved in addressing the root causes of sexual violence. A comprehensive approach to preventing sexual abuse includes implementing school-based social emotional learning, as well as comprehensive sexual health education (CSHE), which research shows to be an effective primary prevention strategy to reduce sexual violence ([Schneider & Hirsch, 2018](#)).

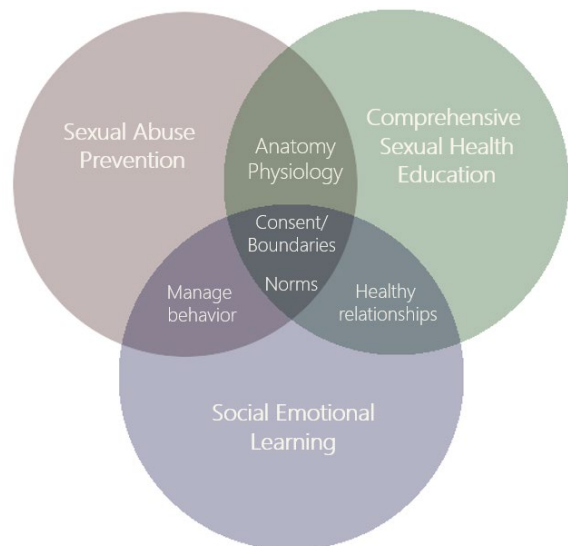


Figure 3: Wessel, OSPI, 2019

Sexual Violence in Washington

According to the 2023 HYS, **11%** of 8th-graders, **15%** of 10th-graders, and **19%** of 12th-graders had been forced into kissing, sexual touch, or intercourse when they did not want to.

Female students experienced higher rates of victimization than their male counterparts.

Responses showed that about one in five students had seen someone about your age pressure someone to kiss, touch, or have sex when they did not want to.

Sexual Health Instruction

Sexual Health Education in Washington Schools

Washington's Comprehensive Sexual Health Education Law ([RCW 28A.300.475](#)) requires that schools offer comprehensive, inclusive, age-appropriate, medically accurate sexual health education that follows the K-12 Health Education Learning Standards and 2005 [Guidelines for Sexual Health Information and Disease Prevention](#). HIV prevention education is required annually for all students in grades 5-12 regardless of the district's decision to teach sexual health education ([RCW 28A.230.070](#)).

A 2014 survey of parents from across the United States demonstrated broad support for sexual health education. Regardless of political affiliation, 93% of parents place high importance on sexual health education in middle and high school, with 89% supporting comprehensive sexual health education." ([PLoS ONE, 2017](#))

Very few parents remove their children from sexual health education. The vast majority of schools excuse fewer than 10% of students (CSHE Reporting Survey 2023, OSPI).

Sexual Health Education Topics

Washington's Comprehensive Sexual Health Education Law ([RCW 28A.300.475](#)) requires comprehensive sexual health education that includes instruction on six key topics: (i) physiological, psychological, and sociological development; (ii) communication skills that promote healthy behaviors and relationships; (iii) health care and disease prevention; (iv) healthy relationships and avoidance of exploitative relationships; (v) the influences of family, peers, community, and media on sexual relationships; and (vi) affirmative consent and bystander intervention. HIV/AIDS prevention is a required health education topic in all public schools per the AIDS Omnibus Act ([RCW 28A.230.070](#)).

OSPI conducts an annual survey of school districts across Washington to assess the implementation of comprehensive sexual health education and AIDS prevention education per the requirements of these laws as part of a report to the Legislature. The following table summarizes data from 275 of 321 districts who responded to a survey for the 2022-2023 school year.

Sexual Health Education Topics

Grade Levels	Human development	Communication skills	Health care & disease prevention	Healthy relationships	Influences on sexual relationships	Affirmative consent & bystander intervention	HIV/AIDS prevention
4th-5th	39%	32%	N/A	32%	N/A	23%	28%
6th-8th	40%	40%	33%	39%	37%	35%	41%
9th-12th	33%	35%	35%	34%	34%	34%	35%

Table 1. CSHE Reporting Survey 2023, OSPI

Sexual Health Curricula

Sexual Health curricular are reviewed annually by OSPI and DOH for consistency with state requirements.

Most Common Sexual Health Curricula in Washington Secondary Schools of surveyed districts

- Family Life and Sexual Health (FLASH): **40%**
- Self-designed curriculum: **16%**

Source: CSHE Survey 2023, OSPI

The Most commonly used curriculum in WA schools continues to be FLASH, which was developed by Public Health – Seattle & King Co.



More than 25 different curricula were also reported being used. 16% of districts reported using a curriculum they developed themselves. 71% of districts reported using a curriculum that has been found by OSPI and DOH to be consistent with state requirements for comprehensive sexual health education (CSHE Reporting Survey 2023, OSPI).

About **8%** of 4-5th grade schools, **24%** of 6-8th grade schools, and **36%** of 9-12th grade schools reported that they provided 10 or more hours of comprehensive sexual health education (CSHE Reporting Survey 2023, OSPI).

Professional Development & Resources

Teacher Resources

To effectively teach sexual health education, teachers need six types of instructional components: learning objectives, outcomes and content to guide instruction; a written curriculum; a pacing/scheduling guide; teaching resources; age-appropriate strategies to engage students; and methods to assess student knowledge and skills.

- About **56%** of schools gave teachers all six types of materials they needed.
- **74%** of schools gave teachers at least four out of six needed materials

Source: 2022 School Health Profiles – reported by health teachers

Professional Development for Sexual Health Teachers

Sexual health educators need continual professional development (PD) to provide up-to-date, relevant instruction.

- About **a third** of schools provided PD on sexual health topics
- About **50%** or more teachers want more PD in all sexual health topics

To provide students with optimal sexual health instruction, Washington schools can continue to improve in areas including staff development, using evidence-based curricula and providing resources for marginalized and at-risk youth.

Teacher-Reported Professional Development on Sexual Health Received and Desired

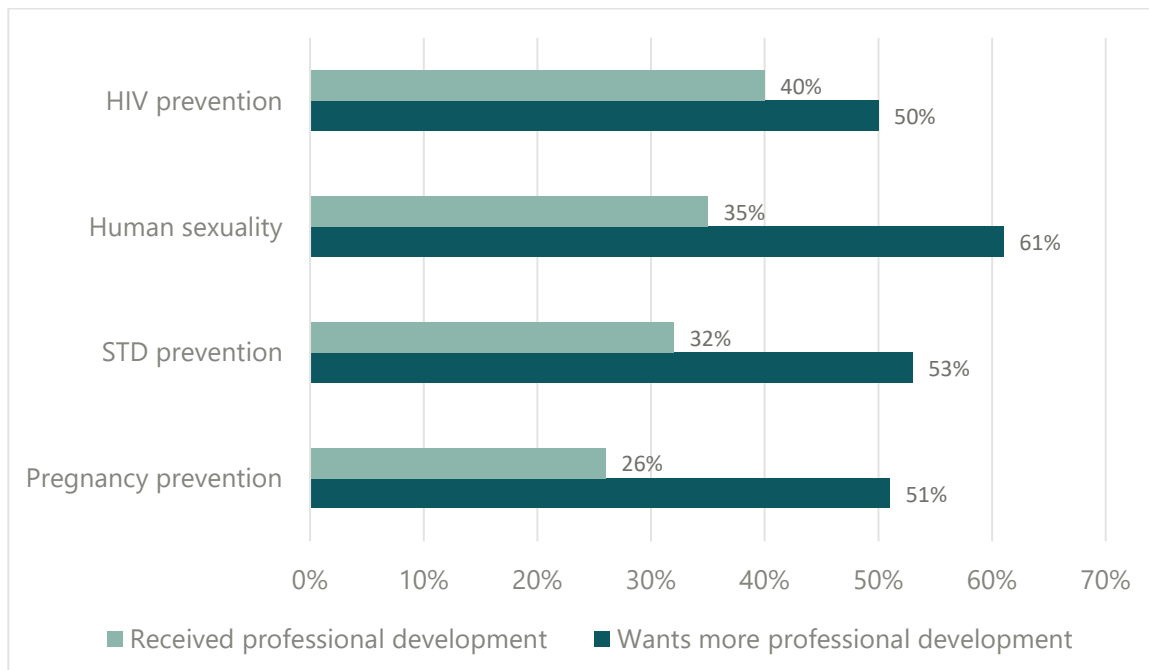


Figure 8: 2022 School Health Profiles – reported by health teachers

Access to Health Services

Access to a registered nurse promotes student safety, improves attendance, fosters academic achievement, reduces health and educational disparities, and contributes to creating an engaged and informed citizenry and workforce. Access to health services is a critical component of wellness and helps ensure the success of Washington State students ([OSPI, School Nurse Corps, 2024](#)).

Having a full-time school nurse improves student health and student achievement. ([Healthy Schools Campaign, 2014](#)). In Washington, **44%** of schools have a full-time nurse, **61%** of schools have a part-time nurse, and **19%** of schools have a school-based health center (2022 School Health Profiles – reported by principals).

Sexual Health-Related Services or Referrals

Schools play a critical role in promoting the health and safety of young people and helping them establish lifelong healthy behaviors. Research shows that school health programs reduce the prevalence of health risk behaviors among youth and have a positive effect on academic performance.

–(Murray, 2007)

Youth account for nearly half of the 26 million new STIs. Because STIs are preventable, significant reductions in new infections are not only possible, they are urgently needed. Prevention can minimize the negative, long-term consequences of STIs and reduce healthcare costs ([CDC, 2018](#)).



Figure 9: CDC, 2018

Students who are sexually active need productive health-related services and referrals in order to be healthy and avoid school dropout and other potential negative consequences.

About **19%** of schools provided on-site sexual health-related services to students. More often, schools provide referrals to these services in the community, about **46%**.

Source: 2022 School Health Profiles – reported by principals

Reproductive Health services and/or referrals should be available without parental notification or consent according to Washington state law ([RCW 9.02.100](#), [RCW 70.24.110](#)), although some schools with school-based clinics require parental permission for use of clinic services.

Health Services and Referrals Provided at School

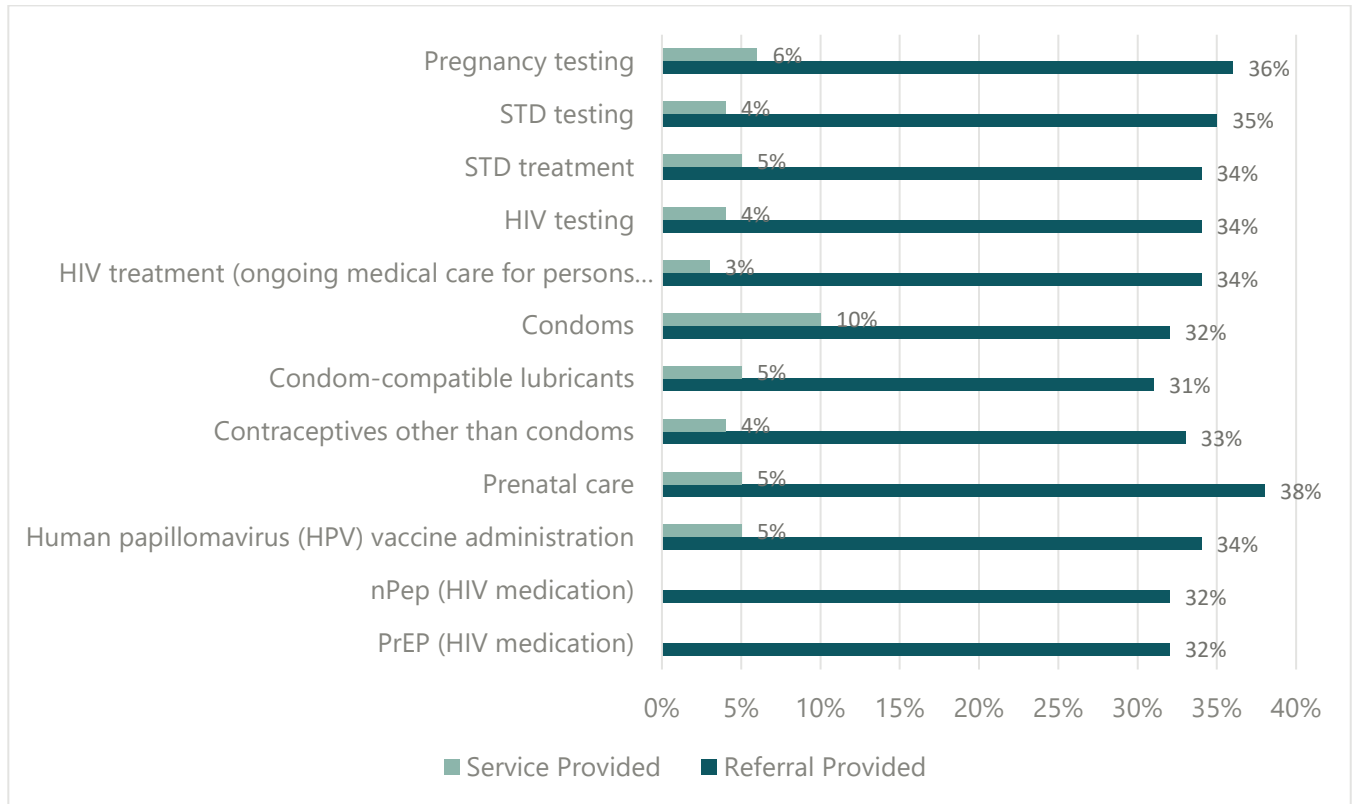


Figure 10: 2022 School Health Profiles – reported by principals

Bullying & Sexual Harassment at School

Student Experiences with Bullying, Harassment & Abuse

“Children who are bullied can experience negative physical, school, and mental health issues. Kids who are bullied are more likely to experience depression and anxiety, health complaints, and decreased academic achievement”
 –stopbullying.gov

Bullying and sexual harassment are experienced by many students today in K-12 schools.

On average, around **22%** of Washington State students report being bullied and **18%** report that they do not feel safe at school.

Student Reported – Bullying, Harassment, and Abuse

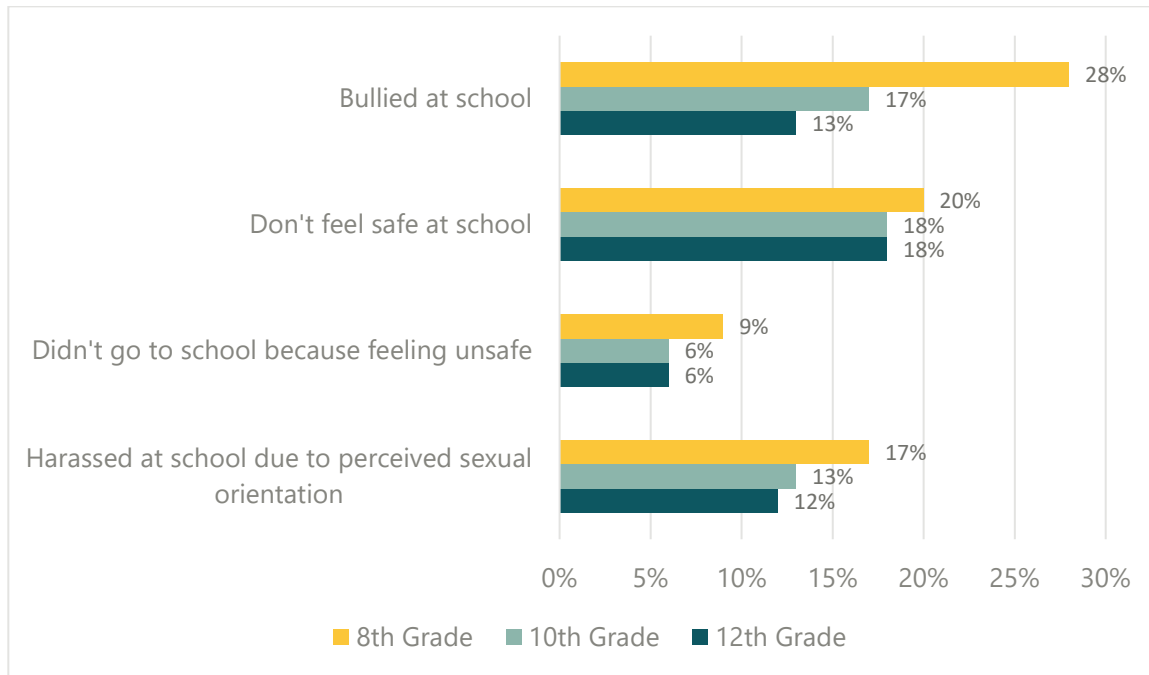


Figure 11: 2023 Healthy Youth Survey

Disparities – LGBTQ+ Youth

- Civil rights laws prohibit discrimination and discriminatory harassment on the basis of gender expression and gender identity in K-12 public schools ([Chapter 28A.642 RCW](#)).
- About **26%** of students describe themselves as lesbian, gay, bisexual, or questioning their sexual orientation or identity (LGBQ). In a classroom of 30 youth, about either youth do not identify as straight (heterosexual). Another **3%** of students identify as transgender. (HYS 2023). Students who identify as LGBTQ+, are significantly more likely to experience bullying, harassment and abuse compared to straight (heterosexual) students (Figure 12).

Student Reported – Bullying, Harassment, and Abuse

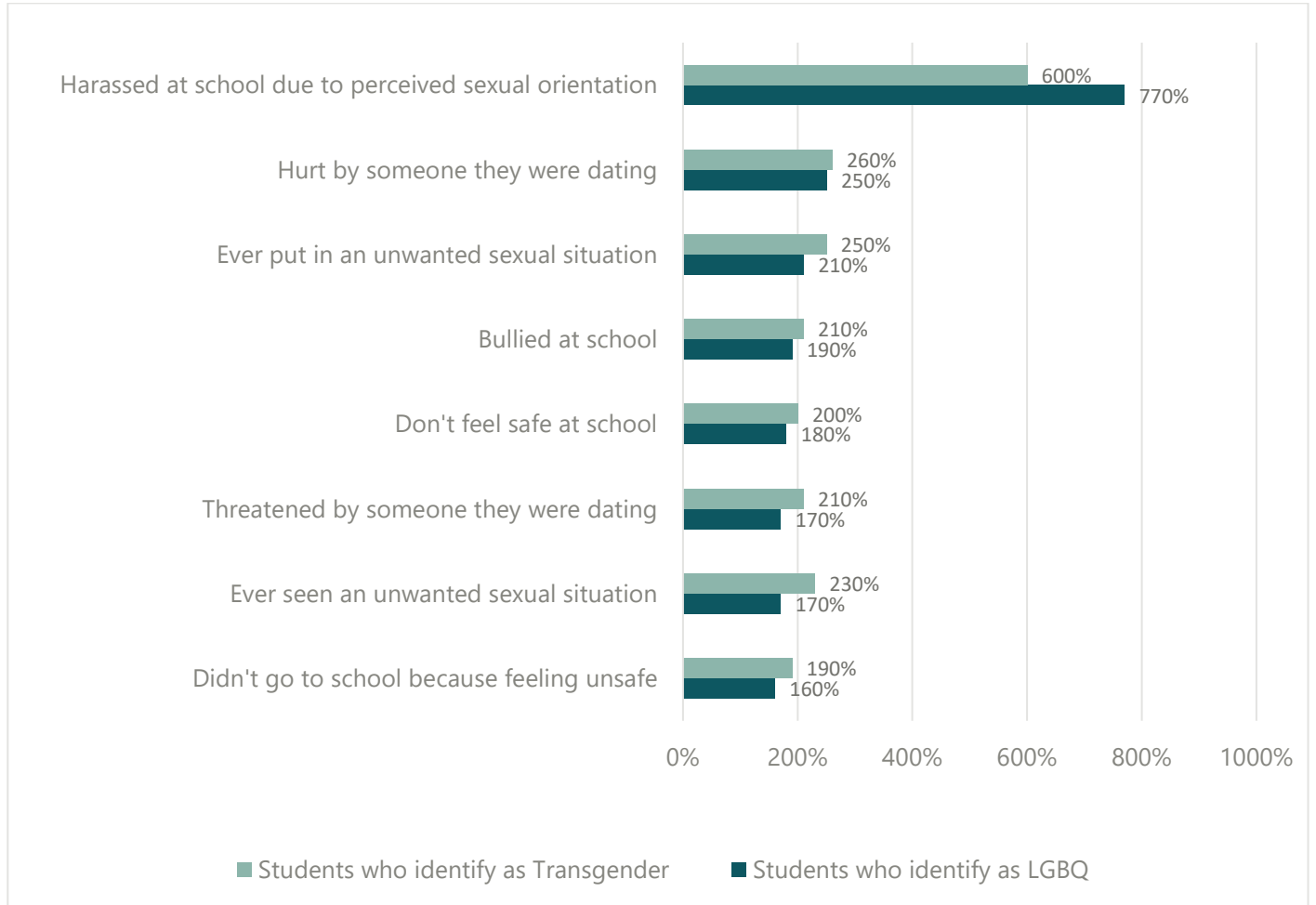


Figure 12: 2023 Healthy Youth Survey

Creating Safe School Environments

School Efforts to Create Safe Environments

School climate has a major impact on students, shaping their experiences within the school walls and their changes for educational success. School climate can either reinforce negative influences or help students grow, learn and graduate.

—(APHA, 2024)

Washington School reported:

- **91%** have designated staff to confidentially report bullying and sexual harassment, including electronic aggression.
- **97%** publicize policies on bullying and sexual harassment, including electronic aggression.
- **92%** have staff that received professional development on preventing, identifying and responding to bullying and sexual harassment, including electronic aggression.
- **51%** provide parents with information about preventing student bullying and sexual harassment, including electronic aggression (i.e., cyber-bullying).
- **51%** have teachers who received PD about how to support lesbian, gay, bisexual, and transgender students.

Source: 2022 School Health Profiles – reported by principals and health teachers

School Efforts to Create Safe Environments FOR LGBTQ+ Youth

Our schools are where we can make the first stand against discrimination and bullying, and promote inclusivity and openness for every child. Our LGBTQ+ students deserve the love, respect, and civil rights that are owed to EVERY person. My job as superintendent is to ensure every single student in Washington receives a high-quality education, and I will never back down from that."

–Superintendent Chris Reykdal

Washington School reported:

- **Over 99%** prohibit harassment based on sexual orientation or gender identity
- **92%** identify "safe spaces" for LGBTQ+ youth
- **89%** encourage professional development on safe and supportive school environments for all students, regardless of orientation or identity
- **63%** facilitate access to social and psychological services for LGBTQ+ youth
- **71%** facilitate access to social and psychological services for LGBTQ+ youth
- **66%** have a student-led club to create a safe and accepting environment for all youth, regardless of sexual orientation or gender identity

Source: 2022 School Health Profiles – reported by principals and health teachers

While most schools are making significant efforts to provide safe spaces for students, there is still work to be done to ensure that comprehensive sexual health education (CSHE) includes language and strategies inclusive of LGBTQ+ students

- **35%** of schools report using at least one strategy to ensure comprehensive sexual health education is inclusive of LGBTQ+ students (source: OSPI CSHE Reporting Survey, 2023)

Most fundamentally, the relationship between school climate, health, well-being and effective education revolves around meeting students' physical and emotional needs so that they are present in class and able to excel. Schools that stress inclusion, safety and encouraged, and where the physical and emotional health of the entire school community is purposefully made a priority, are the backdrop that students need in order to succeed academically and avoid dropout (APHA, 2011).

For More Information

- For more information about this report, contact Laurie Dils, Associate Director, Health and Sexual Health Education, laurie.dils@k12.wa.us
- To read more about the School Health Profiles Survey, please see: <https://www.cdc.gov/healthyyouth/data/profiles/index.htm>
- For information about the Healthy Youth Survey and for more survey results, please see: www.AskHYS.net or contact Doua Ka, doua.ka@k12.wa.us
- For information about the Comprehensive Sexual Health Education Survey, contact: Laurie Dils, Associate Director, Health and Sexual Health Education, laurie.dils@k12.wa.us

References

- Division of Adolescent and School Health (DASH), Centers for Disease Control and Prevention (CDC). *Healthy Youth, Successful Futures*. Accessed in 2024 from: <https://www.cdc.gov/healthyyouth/about/DASH-Snapshot.htm>
- The National Campaign to Prevent Teen and Unplanned Pregnancy, Shuger. L. (2012). *Teen pregnancy and High School Dropout: What Communities Can Do to Address These Issues*. Washington, D.C. Accessed from: <https://powertodecide.org/what-we-do/information/resources-library/teen-pregnancy-and-high-school-dropout>.
- Raspberry CN, Tiu GF, Kann L, McManus T, Michael SL, Merlo CL, Lee SM, Bohm MK, Annor F, Ethier K. (2017). *Health-related behaviors and academic achievement among high school students – United States, 2015*. MMWR Morbidity and Mortality Weekly Report. Rep 2917;66:922-927. Accessed from: https://www.cdc.gov/mmwr/volumes/66/wr/mm6635a1.htm?s_cid=mm6635a1_w
- Wessel, A. (2019). *Venn diagram – sexual health education, social emotional learning, and sexual abuse prevention* [digital image]. Olympia, WA: Office of Superintendent of Public Instruction.

- Schneider, M., & Hirsch, J. S. (2018). *Comprehensive sexuality education as a primary prevention strategy for sexual violence perpetration*. Trauma, Violence, & Abuse. Accessed from: <https://doi.org/10.1177/1524838018772855>
- The Washington State Department of Health and the Office of the Superintendent of Public Instruction. (2005). *Guidelines for Sexual Health Information and Disease Prevention*. <https://ospi.k12.wa.us/sites/default/files/2023-08/sexeduidelines011005.pdf>.
- Kantor L, Levitz N (2017) *Parents' views on sex education in schools: How much do Democrats and Republicans agree?* PLoS ONE 12(7): e0180250. Accessed from: <https://doi.org/10.1371/journal.pone.0180250>.
- Office of Superintendent of Public Instruction, School Nurse Corps. Accessed in 2024 from: <https://ospi.k12.wa.us/student-success/health-safety/school-health-nursing-services/school-nurse-corps>
- Murray NG, Low BJ, Hollis C, Cross AW, Davis SM. (2007). *Coordinated school health programs and academic achievement: A systematic review of the literature*. Journal of School Health 2007;77:589-600.
- Healthy Schools Campaign. (2014). *Research Shows Full-time School Nurses Improve Student Health and Learning*. Accessed from: <https://healthyschoolscampaign.org/blog/research-shows-full-time-school-nurses-improve-student-health-and-learning-5707/>.
- Centers for Disease Control and Prevention (CDC). (2018) *Incidence, Prevalence, and Cost of Sexually Transmitted Infections in the United States, 2018*. Accessed from: <https://www.cdc.gov/nchhstp-newsroom/factsheets/incidence-prevalence-cost-stis-in-us.html>
- StopBullying.gov. *Effects of Bullying*. Accessed in 2024 from: <https://www.stopbullying.gov/bullying/effects>
- American Public Health Association Center for School, Health and Education. *School Climate*. Accessed in 2024 from: <http://www.schoolbasedhealthcare.org/key-issues/school-climate>
- American Public Health Association Center for School, Health and Education. (2011). *School Climate, Student Success and the Role of Center for School-Based Health Care*. Accessed from: <http://www.schoolbasedhealthcare.org/key-issues/school-climate>
- Healthy Youth Survey [data file]. (2023) WA Department of Health, Office of Superintendent of Public Instruction, Liquor and Cannabis Board, and Health Care Authority [producer]. Olympia, WA: Healthy Youth Survey Planning Committee.
- OSPI [Sexual Health Education \(ospi.k12.wa.us\)](https://ospi.k12.wa.us)
- OSPI [School Safety Center \(ospi.k12.wa.us\)](https://ospi.k12.wa.us)
- OSPI [Comprehensive Safety Planning Toolkit \(ospi.k12.wa.us\)](https://ospi.k12.wa.us)

- OSPI [Gender-Inclusive Schools \(ospi.k12.wa.us\)](https://ospi.k12.wa.us)

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