Leading School Health Organizations Release First-Ever U.S. Standards for Sex Education

Noting that "for years, research has highlighted the need to provide effective, comprehensive sexuality education to young people," a consortium of leading school-focused health education groups released National Sexuality Education Standards: Core Content and Skills, K-12 in January 2012.1,2 The new standards are the product of a two-year cooperative effort among the American Association for Health Education, the American School Health Association, the National Education Association Health Information Network and the Society of State Leaders of Health and Physical Education, in coordination with the Future of Sex Education Initiative—itself a partnership among Advocates for Youth, Answer and the Sexuality Information and Education Council of the United States.

The standards are designed to provide "clear, consistent and straightforward guidance" to teachers, schools, districts and state education agencies in the development of sex education curricula, translating the body of research on school-based programs so that it can be put into practice in the classroom. The standards delineate "minimum, essential" elements for sex education in grades K-12, recognizing the limited time and resources typically devoted to the subject. They also include performance indicators of the knowledge and skills students should have by the end of grades two, five, eight and 12 in seven key areas: anatomy and physiology; puberty and adolescent development; identity (i.e., fundamental aspects of people's understanding of who they are); pregnancy and reproduction; STIs and HIV;

healthy relationships; and personal safety (i.e., identifying and preventing harassment, bullying, violence and abuse).

The National Sexuality Education Standards recommend an age- and developmentally appropriate approach to sex education that progresses from more concrete information to higherorder thinking skills. By way of example, on the topic of pregnancy and reproduction, students are expected to be able to "describe the process of human reproduction" by the end of fifth grade; to "explain the health benefits, risks and effectiveness rates of various methods of contraception, including abstinence and condoms" by the end of eighth grade; and to "analyze internal and external influences on decisions about pregnancy options" by the end of 12th grade.

In addition to providing performance benchmarks, the National Sexuality Education Standards may be helpful in advocating for the introduction and implementation of comprehensive sex education in schools. Middle and high school students today spend very little time in sex education: a median total of six hours in middle school and eight hours in high school is devoted to instruction in HIV, pregnancy and STI prevention. The National Sexuality Education Standards set out to address this gap and are modeled after the National Health Education Standards—the reference on health education adopted by most states. Because the two standards are similar in structure, the sex education standards can be easily slotted under the more general health education rubric.

Although proponents of comprehensive sex education hope the recently released standards will help galvanize further progress on that front, abstinence-only education is once again being given new funding by an increasingly conservative Congress. In FY 2012, social conservatives managed to restore a small grant program for abstinence education that had been tied to an infamous and highly restrictive eight-point definition of what constitutes abstinence education. Enshrined in Title V of the Social Security Act, some of the more controversial components of this definition include teaching that "a mutually faithful monogamous relationship in context of marriage is the expected standard of human sexual activity" and that "sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects." Although the amount of money appropriated for FY 2012—\$5 million is modest in comparison to the program at the height of its run, proponents of abstinence-only education believe, and opponents fear, it could open the door to greater amounts in the future.

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REFERENCES

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