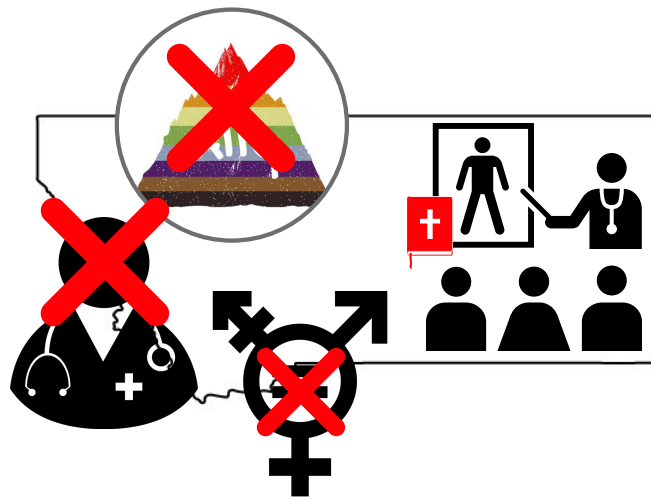


Sex Education in Montana

Requirements:

Montana law mandates that sex education and HIV education are taught. It also stipulates that this education must include a discussion of abstinence.



What it is not:

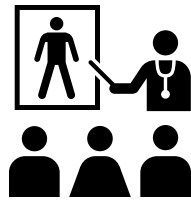
No other guidelines are provided.

Sex Ed in this state is not required to be *medically accurate*, age appropriate, culturally appropriate or unbiased. In Montana, sex education in public schools may promote religion.

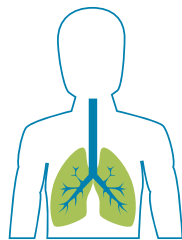
“The Office of Public Instruction firmly endorses the concept of local control for schools. Although the sexuality education provided by a local school should be consistent with the most reasoned approach of public health and health education professionals, the content of curriculum is a decision to be made by the local school board with input from the community.”

Montana OPI Benchmarks (By end of grade):

Grade 4: Identify personal health enhancing strategies that encompass disease prevention.



Grade 8 : Explain relationship between positive behaviors and the prevention of disease. Explain personal health enhancing strategies that encompass sexual activity and disease prevention.



Grade 12: Analyze how attitudes and behaviors can impact health and disease prevention. Explain impact of personal health on body systems, including the reproductive system; develop personal health enhancing strategies that encompass sexual activity and disease prevention.

Who does this affect?

Montana's Youth.

Sexual Activity & Contraception Use

According to the 2017 MT Youth Risk Behavior Survey



43% of MT high schoolers have had sex
(24% of freshmen and 64% of seniors)



55% of sexually active MT high schoolers used a condom
the last time they had sex



41% of sexually active MT high schoolers used birth
control pills, an IUD or Implant or a shot, patch or birth
control.

Who does this affect?

Montana's Youth.

Prevalence of Intimate Partner Violence:

According to the 2017 MT Youth Risk Behavior Survey



7% of MT high school students have experienced physical dating violence



9% of MT high school students have been physically forced to have sexual intercourse



10% of MT high schoolers had experienced sexual dating violence during the past 12 months

That is, being forced by anyone to perform sexual acts such as kissing, touching or being physically forced to have sexual intercourse, that they did not want to do.

National statistics suggest that the rates of individual's who experience sexual violence will **increase throughout their lifetime**, particularly in early adulthood.

Sexual Assault according to the CDC:

Nearly 1 in 5 women (18.3%) and 1 in 71 men (1.4%) in the United States have been raped at some time in their lives, including completed forced penetration, attempted forced penetration, or alcohol/drug facilitated completed penetration.

More than three-quarters of female victims of completed rape (79.6%) were first raped before their 25th birthday, with 42.2% experiencing their first completed rape before the age of 18 (29.9% between 11-17 years old and 12.3% at or before age 10).

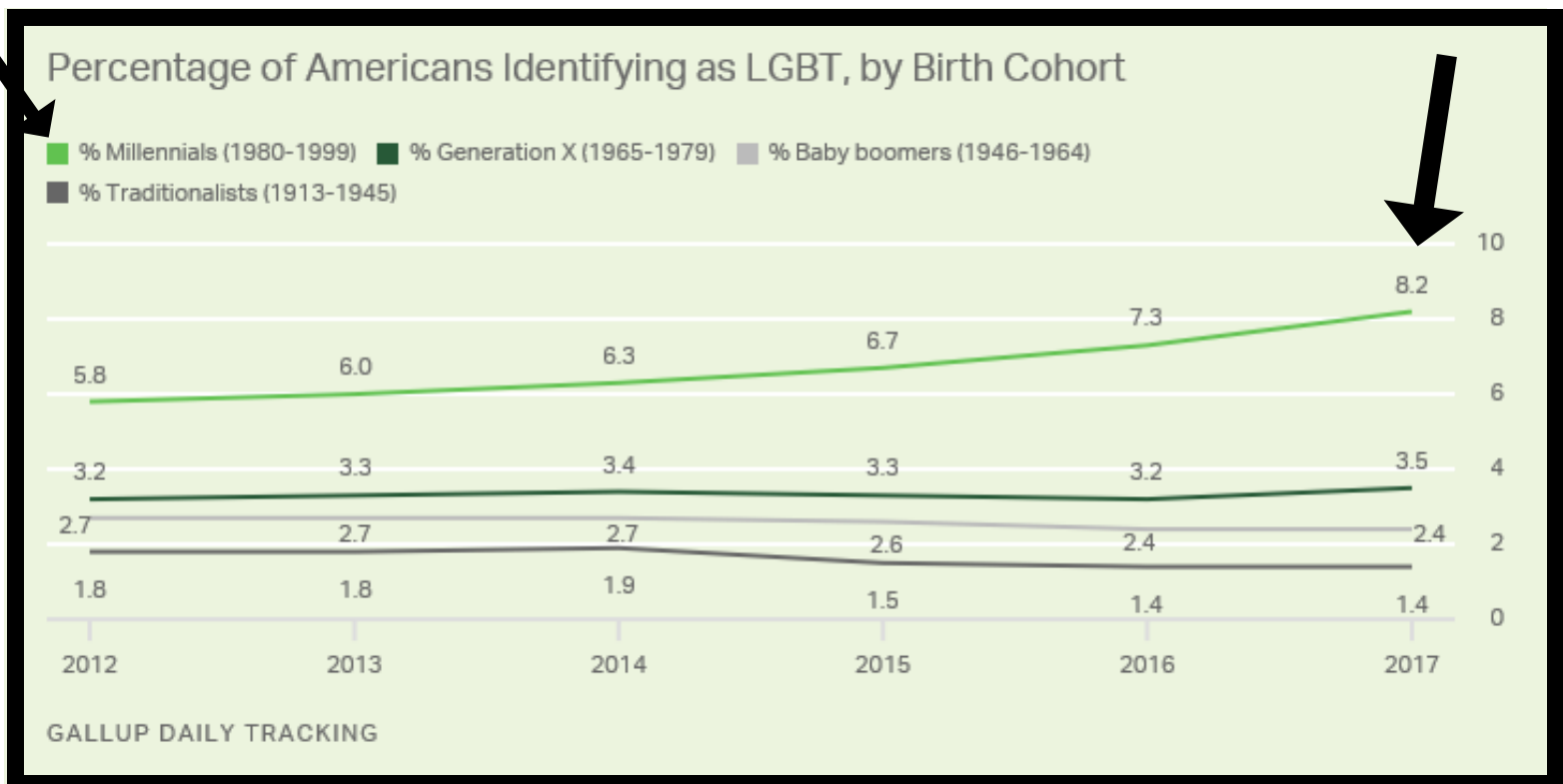
More than half (51.1%) of female victims of rape reported being **raped by an intimate partner** and 40.8% **by an acquaintance**; for male victims, more than half (52.4%) reported **being raped by an acquaintance** and **15.1% by a stranger**.

An estimated **13% of women and 6% of men have experienced sexual coercion in their lifetime** (i.e., unwanted sexual penetration after being pressured in a nonphysical way); and 27.2% of women and 11.7% of men have experienced unwanted sexual contact.

Are LGBTQ+ students being left out of this conversation?

In 2017, Montana did not ask about sexual orientation or gender identity in the YRBS.

**Here's what we know
from Gallup:**



Comprehensive Sexual Education is shown to be *more* effective.

According to a 1993 study by WHO, individual's who receive comprehensive sex ed are more likely to:

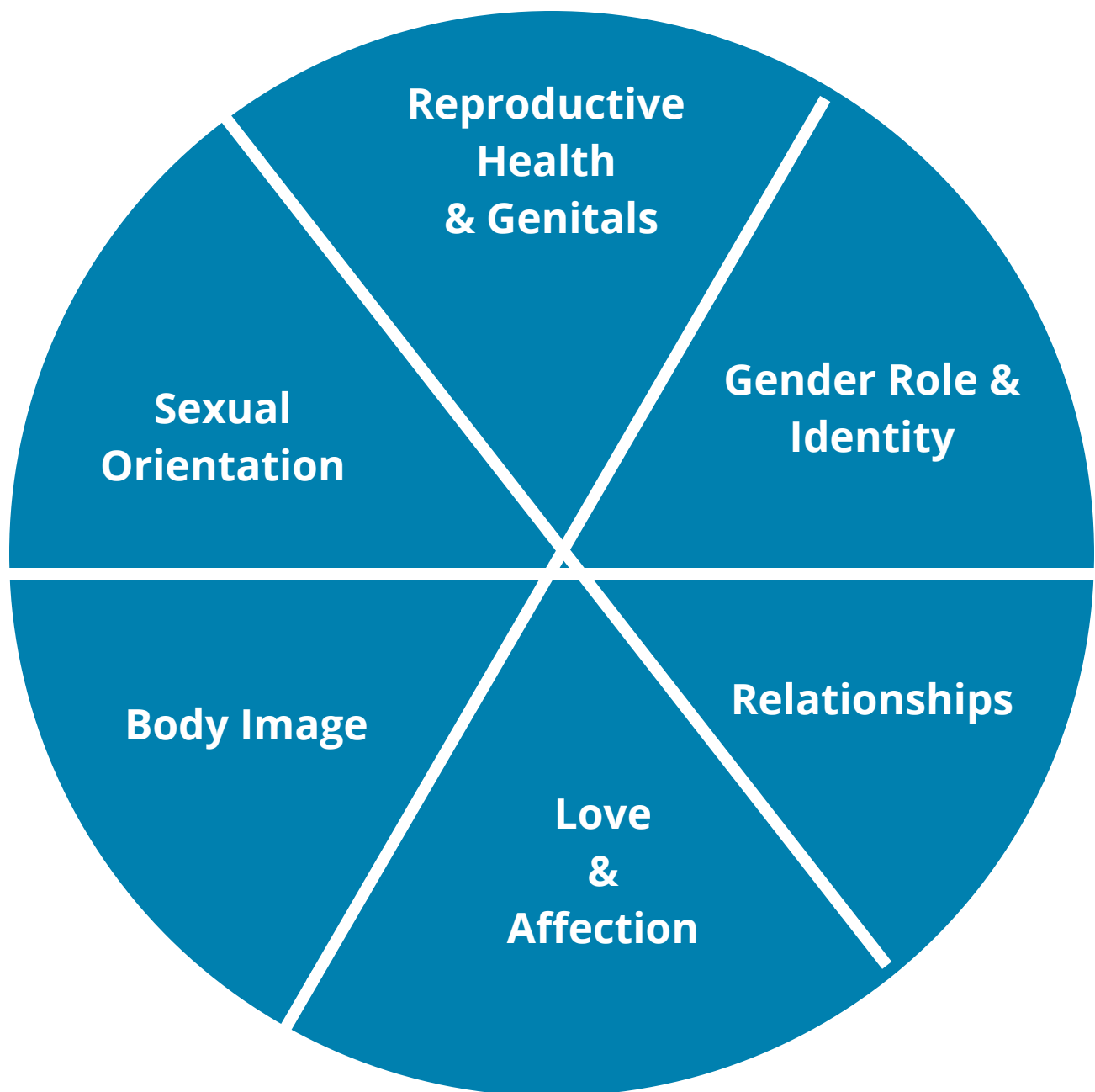
- 1) Delay onset of sexual activity**
- 2) Practice safer sex once they become sexually active.**

Studies conducted by Guttmacher Institute and Planned Parenthood came to similar conclusions.

But abstinence-only groups dismiss these studies as biased and skewed. They argue there is a fundamental flaw in giving kids more information about risky behaviors that they should simply be taught to avoid. They have failed to produce reliable large scale studies to support this.

Sexuality is about more than just sexual intercourse.

There are multiple components to sexuality and these can be taught to youth of all ages in a developmentally appropriate way



With no guidelines for health education curricula, some schools in the Gallatin Valley leave it up to the individual health teachers to decide what to teach.

Students in different classes within the same school may receive vastly different information

So if there are no federal guidelines and very few state guidelines,
where can we get some direction?

The Sexuality Information and Education Council of the United States (SIECUS) has a list of guidelines, by grade level for K- 12.

These guidelines were created by a national task force of experts in the fields of adolescent development, health care, and education. The guidelines provide a framework of the key concepts, topics and messages that all sexuality education programs would ideally include.

We can also look to the CDC for guidance.

19 Critical Sexual Education Topics, according to the CDC

- 1 Communication and negotiation skills
- 2 Goal-setting and decision-making skills
- 3 How to create and sustain healthy and respectful relationships
- 4 Influences of family, peers, media, technology and other factors on sexual risk behavior
- 5 Preventive care that is necessary to maintain reproductive and sexual health
- 6 Influencing and supporting others to avoid or reduce sexual risk behaviors
- 7 Benefits of being sexually abstinent
- 8 Efficacy of condoms
- 9 Importance of using condoms consistently and correctly
- 10 Importance of using a condom at the same time as another form of contraception to prevent both STDs and pregnancy

19 Critical Sexual Education Topics, according to the CDC (continued)

- 11 How to obtain condoms
- 12 How to correctly use a condom
- 13 Methods of contraception other than condoms
- 14 How to access valid and reliable information, products and services related to HIV, STDs, and pregnancy
- 15 How HIV and other STDs are transmitted
- 16 Health consequences of HIV, other STDs and pregnancy
- 17 Importance of limiting the number of sexual partners
- 18 Sexual Orientation
- 19 Gender roles, gender identity or gender expression

School Health Profiles, 2016



Centers for Disease
Control and Prevention
National Center for HIV/AIDS,
Viral Hepatitis, STD, and
TB Prevention

www.cdc.gov/healthyyouth