

## *Washington Ballot Summary*

# Referendum 90

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***Ballot Title (what voters will see on the ballot):***

The legislature passed Engrossed Substitute Senate Bill 5395 concerning comprehensive sexual health education.

This bill would require school districts to adopt or develop, consistent with state standards, comprehensive, age-appropriate sexual health education, as defined, for all students, and excuse students if their parents request.

Should this constitutional amendment be:  Approved  Rejected

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**Background:**

Current law requires HIV education in public schools in grades 5-12. It also requires that districts which provide additional sexual health education do so with a scientifically accurate curriculum. A large majority of districts currently provide additional sexual health education. The 2019 budget contained funding for the Office of Superintendent of Public Instruction (OSPI) to convene a work group to review sexual health education provisions in current K-12 learning standards and in state law, as well as current practice throughout the state's districts, and to consider the benefits and challenges of requiring comprehensive sexual health education in all K-12 grades. The work group included three each of district representatives, principals, public school health educators, public health officials, and parents. Meetings were open to the public and comments and concerns were solicited and received from over 10,000 stakeholders.

ESSB 5395, based on the group's recommendations, was introduced, passed, and signed by the governor in early 2020. Signature gathering to challenge the bill resulted in certification of Referendum 90, which will appear on the November 2020 ballot. A vote to reject ESSB 5395 will repeal the legislation and a vote to approve will allow it to become law.

**The Effect of the Proposed Referendum If Approved**

- Every public school will be required to provide comprehensive, age-appropriate, medically and scientifically accurate sexual health education inclusive of all students by the 2022-23 school year.
- For grades 6-12, instruction would begin in the 2021-22 school year and be required at least twice per grade.
- For grades K-5, instruction would begin in the 2022-23 school year and be required at least once per grade.

- For grades K-3, the curriculum must be instruction in social-emotional learning. There is no sexuality content.
- For grades 4-12, the curriculum would include age-appropriate instruction in human physiologic, psychological, and sociologic development; communication skills to develop healthy, noncoercive relationships, including the understanding of affirmative consent and bystander training; health care and resources to prevent unintended pregnancy and sexually transmitted diseases, to include, but not be limited to, abstinence.
- OSPI will maintain on its website multiple curricula that adhere to health education learning standards and the 2005 guidelines for sexual health. Districts may choose among these curricula or develop their own, which must be consistent with state guidelines.
- Curricula must be made available to parents before instruction, and parents may have their child excused from instruction with written request.

**Arguments for:**

Proponents believe that quality sexual health education reduces risky behavior that results in unintended pregnancies and sexually transmitted infections. They argue that young people need information to help them understand how to respect personal boundaries and the importance of affirmative consent before sexual activity, and that LGBTQ youth deserve to see themselves reflected positively in sexual health education. They also think that young children need language and knowledge about inappropriate behavior to communicate with trusted adults about such behavior. They point out that the bill's language denies any legislative intent to mix sexual health education into other unrelated curricula.

**Arguments against:**

Opponents note this legislation denies local districts the power to decide whether sexual health education, beyond HIV instruction, will be offered and for which grades. Opponents believe that an extreme curriculum and graphic sexual health education will be mandated in elementary schools. They remain concerned that sexual health education could be mixed into other unrelated curricula.