
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1615 Session of
2017

INTRODUCED BY SIMS, DALEY, FRANKEL, SCHLOSSBERG, STURLA, DAVIS,
O'BRIEN, SOLOMON, McNEILL, DeLUCA AND DONATUCCI,
JUNE 23, 2017

REFERRED TO COMMITTEE ON EDUCATION, JUNE 23, 2017

AN ACT

1 Amending the act of March 10, 1949 (P.L.30, No.14), entitled "An
2 act relating to the public school system, including certain
3 provisions applicable as well to private and parochial
4 schools; amending, revising, consolidating and changing the
5 laws relating thereto," in terms and courses of study,
6 providing for sexual health education; and, in sexual
7 violence education at institutions of higher education,
8 further providing for education program.

9 The General Assembly finds and declares as follows:

10 (1) Discussions between youth and their parents or
11 guardians are the most important ways to help youth make
12 responsible and healthy life decisions.

13 (2) However, Pennsylvania's schools and other community
14 groups also have a responsibility to help ensure that the
15 youth have the knowledge and skills necessary to enable them
16 to make responsible life decisions, to protect their health,
17 to prevent unintended pregnancy and to reduce the risk of
18 sexually transmitted infections (STIs).

19 (3) Research has identified highly effective sex
20 education and HIV prevention programs that affect multiple

1 behaviors and achieve positive health impacts. Behavioral
2 outcomes have included delaying the initiation of sex, as
3 well as reducing the frequency of sex, the number of
4 partners, and the incidence of unprotected sex, and
5 increasing the use of condoms and contraception among
6 sexually active participants. Long-term impacts have included
7 lower STI and pregnancy rates.

8 (4) Lowering STI and pregnancy rates may reduce costs
9 for Pennsylvania's health care delivery system. According to
10 the most recent statistics, in 2010, teen pregnancy cost
11 taxpayers \$409 million.

12 (5) Despite significant State and national declines in
13 teen pregnancy since 1991, teen birth ratios are still
14 elevated in several high population urban areas of this
15 Commonwealth. The rates continue to be highest among minority
16 youth.

17 (6) Rates of the two most common STIs (Chlamydia and
18 HPV) are higher in females 15 to 19 years of age than any
19 other age group. One in four adolescent girls will contract
20 an STI. According to the Centers for Disease Control and
21 Prevention (CDC), nearly half of newly diagnosed STIs each
22 year are among sexually active youth, 15 to 24 years of age.
23 African-American youth are over four times more likely to
24 have reported cases of STIs than Hispanics and Caucasians.
25 The lifetime medical cost associated with STIs in young
26 people is estimated to be more than \$6.5 billion.

27 The General Assembly of the Commonwealth of Pennsylvania
28 hereby enacts as follows:

29 Section 1. The act of March 10, 1949 (P.L.30, No.14), known
30 as the Public School Code of 1949, is amended by adding a

1 section to read:

2 Section 1512.2. Sexual Health Education.--(a) A school
3 district required to comply with 22 Pa. Code § 4.29 (relating to
4 HIV/AIDS and other life-threatening and communicable diseases)
5 shall provide students with sexual health education that meets
6 the following criteria:

7 (1) Instruction and materials shall be age appropriate.

8 (2) All information presented shall be medically accurate.

9 (3) Teachings shall include the following information:

10 (i) The benefits of and reasons for not engaging in sexual
11 intercourse.

12 (ii) Not engaging in sexual intercourse is the only certain
13 way to prevent pregnancy and to reduce the risk of sexually
14 transmitted infections (STIs), including HIV.

15 (iii) How alcohol and drug use can affect responsible
16 decision making.

17 (iv) Self-control, temperance, restraint, self-discipline,
18 discretion, discernment, sagacity and respect for others as
19 those characteristics relate to relationships.

20 (v) Relevant elementary education topics such as "good touch
21 vs. bad touch."

22 (4) Provides students with accurate information that
23 includes the following:

24 (i) Side effects, health benefits, effectiveness, safety and
25 proper use of all contraceptive methods approved by the Food and
26 Drug Administration in preventing pregnancy.

27 (ii) STI information, including how STIs are and are not
28 transmitted and the effectiveness of all methods of reducing the
29 risk of contracting STIs approved by the Food and Drug
30 Administration.

1 (5) Addresses healthy relationships and social pressures
2 related to sexual behaviors that include the following:

3 (i) An affirmative consent standard shall be established to
4 emphasize healthy sexual behaviors. The standard shall include
5 the following information:

6 (A) It is the responsibility of both parties to ensure that
7 affirmative consent has been established before proceeding with
8 any sexual activity.

9 (B) The absence of protest or resistance does not comply
10 with affirmative consent.

11 (C) Past sexual relations and existing relationships are not
12 indicative of affirmative consent.

13 (ii) Sexual health education shall emphasize the dangers and
14 risks of the social pressures of sexting. The emphasis shall
15 include the following information:

16 (A) Images are easily shared and can be made publicly
17 available online.

18 (B) Once distributed online, images can be difficult to
19 remove.

20 (C) Consequences of sexting in some cases include charges of
21 criminal activity such as child pornography and disseminating of
22 indecent material to minors.

23 (6) Discusses sexual activity as it relates to risk for STIs
24 and pregnancy.

25 (7) Encourages youth to communicate with parents, guardians
26 and other trusted adults about sexuality.

27 (8) Instructors are permitted to answer in good faith any
28 questions initiated by a student or students that are germane to
29 the material of the course.

30 (9) Instructions and materials shall be appropriate for use

1 with, and shall not promote bias against, pupils of all races,
2 genders, sexual orientations, ethnic and cultural backgrounds,
3 gender identities, sexually active pupils and pupils with
4 disabilities.

5 (b) (1) A student shall be excused from all or any part of
6 the sexual health education required by this section if the
7 student's parent or guardian provides a written request to the
8 school.

9 (2) Information about the school district's sexual health
10 instruction, including curriculum, information being provided to
11 students and a list of written and audio-visual materials used
12 for the education shall be made publicly available to parents
13 and guardians through the school district's publicly accessible
14 Internet website, if available, the school district's student
15 manual or any other means of communication currently used by the
16 school district. A form for excusing a student from all or any
17 part of the sexual health education shall also be made available
18 to parents and guardians in the same manner.

19 (3) A student whose parent or guardian submits a written
20 request for the student to be excused from all or any part of
21 the sexual health education shall not be subject to disciplinary
22 action or academic penalty for exercising the right to be
23 excused from the education.

24 (c) The Department of Education, in consultation with the
25 Department of Health, shall develop and maintain a list of
26 sexual health education curricula that are consistent with the
27 requirements of this section. The list should be updated at
28 least annually and made available on the Department of
29 Education's publicly accessible Internet website. The Department
30 of Education shall promulgate rules reasonably necessary to

1 implement, administer and provide oversight for the provisions
2 of this section.

3 (d) No funds appropriated by the Commonwealth for sex
4 education shall contravene the provisions of this section.

5 (e) Nothing in this section shall be construed to apply to
6 parochial or private schools.

7 (f) In fulfilling the education requirements enumerated in
8 subsection (a):

9 (1) local school districts shall approve and select
10 curricula, textbooks and instructional materials that are
11 appropriate for the students of the district covered by this
12 section;

13 (2) the curricula selected shall be consistent with the
14 criteria in subsection (a); and

15 (3) sex education curriculum resources adopted by the
16 Commonwealth shall be construed as a guide for local school
17 districts as they develop their educational program in
18 accordance with this section.

19 (g) As used in this section, the following words and phrases
20 shall have the meanings given to them in this subsection:

21 (1) "Affirmative consent" in relation to sexual activities
22 by both parties of legal age, shall mean affirmation,
23 willingness and conscious agreement to sexual activity.

24 (2) "Age appropriate" shall mean topics, messages and
25 teaching methods suitable to particular ages or groups of
26 children and adolescents, based on developing cognitive,
27 emotional and behavioral capacity typical for the age or age
28 group.

29 (3) "Medically accurate" shall mean information supported by
30 peer-reviewed research conducted in compliance with accepted

1 scientific methods and recognized as accurate by leading
2 professional organizations and agencies with relevant
3 experience, including the American Medical Association and the
4 Department of Health.

5 (4) "Sexting" shall mean the procurement or distribution of
6 sexually explicit photographs or messages via electronic means
7 such as a cell phone.

8 Section 2. Section 2003-G(a)(2) of the act is amended to
9 read:

10 Section 2003-G. Education program.

11 (a) General rule.--Institutions of higher education and
12 private licensed schools shall establish a sexual violence
13 awareness educational program. Institutions of higher education
14 and private licensed schools may collaborate with a Statewide
15 nonprofit organization, local rape crisis center or local sexual
16 assault program that arranges for the provision of services to
17 sexual violence and rape victims in the development of a sexual
18 violence awareness education program. Each education program
19 shall provide the following:

20 * * *

21 (2) A discussion of affirmative sexual consent,
22 including [an explanation that the victim is not at fault]
23 the information specified for the affirmative consent
24 standard under section 1512.2(a)(5)(i).

25 * * *

26 Section 3. The addition of section 1512.2 of the act shall
27 apply to school years beginning after the effective date of this
28 section.

29 Section 4. This act shall take effect in 90 days.