



Washington State Health Education K–12 Learning Standards:

Talking Points

Standards and Outcomes

The state determines **learning standards**. Standards are broad statements about what students should know and be able to do. They are required to be taught in public schools. An example of a health standard is “Students will demonstrate the ability to use goal-setting skills to enhance health.”

Districts, schools and teachers determine **grade-level outcomes**. Grade-level outcomes (or student learning outcomes) described in the standards are optional for schools and teachers. They give examples of what more specific instruction might look like. An example of a health outcome is “understand germs can cause diseases.”

Districts, schools and teachers select textbooks and other teaching materials (curriculum and instructional materials). The choice of textbooks and other teaching materials, the development of lesson plans and grade-level instruction, and the use of grade-level outcomes are all up to each school district.

The only state legislative requirements for health education topics are CPR and AED instruction, suicide prevention and mental health, and HIV and STD prevention (annual HIV prevention education beginning no later than fifth grade).

Sexual Health Education

Sexual health education is optional. If a district chooses to offer sexual health education, it must be medically and scientifically accurate, age appropriate, appropriate for students regardless of gender, race, sexual orientation, and disability status, and consistent with the [Guidelines for Sexual Health and Disease Prevention](#). These are requirements of the [Healthy Youth Act](#), which was passed by the state legislature in 2007.

Parents may opt their students out of all or part of sexual health education classes.

Most parents support sexual health education. During the past 20 years, in survey after survey (local, state and national), 80 to 85 percent of parents indicate they want their children to receive comprehensive, medically accurate, age-appropriate sex education. ([Advocates for Youth](#)).

All of the grade-level outcomes are optional and were developed using:

- Research on what kind of health education is needed to keep students safe and healthy; and
- Guidelines from organizations such as the American Academy of Pediatrics and the Centers for Disease Control and Prevention (CDC) that recommend when students need information.

Schools may choose whether or not and when to offer specific instruction to students.

Self-Identity Outcomes

Optional grade-level outcomes on “self-identity” were included in the new health standards as a way to promote understanding and respect for a wide variety of students and families. More and more districts each year are asking how they can support students who identify as lesbian, gay or transgender.

A recent [national survey done by the CDC](#) found that students who identify as lesbian and gay experience significantly more bullying, depression, and suicide attempts than other students. Promoting understanding and respect of all students is a way to keep all students safe and healthy so they can learn. (*Morbidity and Mortality Weekly Report: Surveillance Summaries* / August 12, 2016 / 65(9);1–202.

The [American Academy of Pediatrics](#) and the [National PTA](#) are two of many organizations that believe it’s important to provide students with information about gender identity and sexual orientation.

Please note that teaching about topics such as self-identity is not the same as promoting the topics. Classroom teachers should not convey their own values about any sexual health education topic – that is the role of parents.