

Comprehensive Sexual Health Education Reporting Survey



Washington Office of Superintendent of **PUBLIC INSTRUCTION**

This questionnaire is intended to collect information regarding implementation of RCW 28A.300.475 (Comprehensive Sexual Health Education, or CSHE). Every public school in Washington must report this information to OSPI annually. OSPI is required to report this information to the Washington Legislature annually, beginning after the 2022-23 school year.

Schools are encouraged to submit this report by June 30, 2022. Schools must submit this report no later than August 31, 2022.

For students in grades K-3, the requirement is “Instruction in Social Emotional Learning” that is consistent with Washington’s Social and Emotional Learning Standards and Benchmarks.

For grades 4-12, all public schools must provide comprehensive sexual health education (CSHE) to all students by the 2022-23 school year. RCW 28A.300.475 defines CSHE as “recurring instruction in human development and reproduction that is medically accurate, age-appropriate and inclusive of all students.

Instruction must be consistent with Health Education K-12 Learning Standards, which provide a framework for comprehensive instruction, and the provisions of the law. Instruction must also be age-appropriate, medically and scientifically accurate and inclusive of all students.

HIV prevention instruction is required annually, beginning no later than grade 5 (RCW 28A.230.070).

INSTRUCTIONS

1. In this questionnaire you will be asked about the contents of the social emotional learning and comprehensive sexual health education instruction provided in your school, the process used to ensure it meets standards, which grade levels received instruction and for approximately how many hours, the estimated percent of students who were opted out of instruction and how parent/guardians were informed about instruction. Before starting the questionnaire, we recommend you gather relevant information you may need and review the RCW and health education standards in the links provided above.
1. This questionnaire should be completed by your school's lead sexual health education teacher or curriculum director (or the person most knowledgeable about sexual health education in your district). Please consult with other people if you are not sure of an answer.
1. We welcome any additional comments you wish you leave in the comments section at the end of the questionnaire.

1. Name: *

2. Title: *

3. Telephone Number (Format: (123) 456-7890):*

4. Email Address: *

5. On behalf of which district and school are you filling out this questionnaire?*

6. What grades does your school include? (Check all that apply) *

K-3

4-5

6-8

9-12

Grades K-3 - Instruction in Social Emotional Learning

Page description:

The requirement in [RCW 28A.300.475](#) for students in grades K-3 is “Instruction in Social Emotional Learning” that is consistent with Washington’s [Social and Emotional Learning Standards and Benchmarks](#). Instruction must be provided at least once in grades K-3. While there is no requirement for a minimum number of hours of instruction or that a formal curriculum be used, best practice suggests using an evidence-based program regularly over multiple grades.

More information and resources about social emotional learning are available from OSPI: <https://www.k12.wa.us/student-success/health-safety/mental-social-behavioral-health/social-emotional-learning-sel>.

Information on evidence-based social emotional learning programs is available from CASEL: <https://casel.org/guide/>.

7. In what grade(s) was instruction in social emotional learning provided? (Check all that apply) *

- Kindergarten
 - Grade 1
 - Grade 2
 - Grade 3
 - None of the above
-

8. What instructional materials were used with K-3 students? (Check all that apply)*

MindUP

PATHS

Responsive Classroom

Ruler

Second Step

Other - Write In

No instructional materials used

9. How many total hours of instruction in social emotional learning were K-3 students provided this year?*

0 hours

Less than 1 hour

1-5 hours

6-10 hours

More than 10 hours

10. How did your district determine that your instruction was consistent with Social and Emotional Learning Standards and Benchmarks? *

- We use a curriculum that has been aligned with the Standards and Benchmarks
- We have mapped our instructional plan to the Standards and Benchmarks
- Other - Write In
- We have not yet determined that instruction is consistent with standards.
- I don't know

Grades 4-5 - Instruction in Comprehensive Sexual Health Education

Page description:

Grades 4-5

Comprehensive Sexual Health Education is required to be provided at least once in grades 4-5. "Once" generally means a unit of instruction that includes sufficient lessons to cover the required content in a way that is consistent with [Health Education K-12 Learning Standards](#), i.e. scaffolded, skills-based instruction.

11. In what grade(s) was Comprehensive Sexual Health Education instruction provided? (Check all that apply)*

- Grade 4
 - Grade 5
 - None of the above
-

12. What instructional materials were used with 4-5th grade students? (Check all that apply) *

- FLASH
 - Great Body Shop
 - HealthSmart
 - KNOW (for HIV prevention only)
 - Puberty: The Wonder Years
 - Rights, Respect, Responsibility
 - District developed materials
 - Other - Write In
 - No instructional materials used
-

13. How many total hours of Comprehensive Sexual Health Education instruction were 4-5th grade students provided this year? *

- 0 hours
 - Less than 1 hour
 - 1-5 hours
 - 6-10 hours
 - More than 10 hours
-

14. About what percentage of students were opted out of Comprehensive Sexual Health Education instruction this year by parents/guardians? *

- None
 - Less than 1%
 - 1 to 5%
 - 6 to 10%
 - More than 10%
 - I don't know
-

15. How did your district determine that your instruction was consistent with Health Education K-12 Learning Standards? *

- We use a curriculum that has been aligned with the Standards
 - We have mapped our instructional plan to the Standards
 - Other - Write In
 - We have not yet determined that instruction is consistent with Standards
 - I don't know
-

16. Did comprehensive sexual health education instruction address the following skills outlined in the Health Education K-12 Learning Standards? *

	Yes	No	I don't know
Comprehending concepts related to health promotion and disease prevention to enhance health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analyzing the influence of family, peers, culture, media, technology, and other factors on health behaviors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accessing valid information and products and services to enhance health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using interpersonal communication skills to enhance health and avoid or reduce health risks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using decision-making skills to enhance health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using goal-setting skills to enhance health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practicing health-enhancing behaviors to avoid or reduce health risks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advocating for personal, family, and community health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Did your district determine that instructional materials are medically and scientifically accurate? If so, how?

("Medically and scientifically accurate," according to RCW 28A.300.475, means information that is verified or supported by research in compliance with scientific methods, is published in peer-reviewed journals, where appropriate, and is recognized as accurate and objective by professional organizations and agencies with expertise in the field of sexual health including but not limited to the American College of Obstetricians and Gynecologists, the Washington State Department of Health, and the federal Centers for Disease Control and Prevention.) *

- We adopted materials already reviewed by OSPI and DOH
 - We conducted a medical accuracy review in the district
 - We have not yet determined that materials are medically/scientifically accurate
 - I don't know
-

18. If a district-level review was conducted, who participated in the review? (Check all that apply)*

- Health curriculum specialist
 - Reproductive health staff from local/county health department
 - University researcher
 - Sexuality instructor from an institution of higher education
 - Family planning clinic staff
 - Other - Write In
 - I don't know
-

19. The following questions address instruction on sexual health topics required by RCW 28A.300.475.

Please indicate which topics were covered and in which grades. *

	Grade 4	Grade 5	I don't know
The physiological, psychological, and sociological developmental processes experienced by an individual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Abstinence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other methods of preventing unintended pregnancy (besides abstinence) (Note: this topic is not required in 4-5th grade)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other methods of preventing sexually transmitted diseases, including HIV (besides abstinence)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care and prevention resources (e.g. valid and reliable sources of information, including online information)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The development of intrapersonal and interpersonal skills to communicate, respectfully and effectively, to reduce health risks and choose healthy behaviors and relationships based on mutual respect and affection, and free from violence, coercion, and intimidation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The development of meaningful relationships and avoidance of exploitative relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understanding the influences of family, peers, community and the media throughout life on healthy sexual relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affirmative consent and recognizing and responding safely and effectively when violence or a risk of violence is or may be present, with strategies that include bystander training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. How were instructional materials made available for parent/guardian review? (Check all that apply)*

- Posted on district website
 - Access codes provided for online access
 - Hard copies were distributed or made available in districts/schools
 - Communications were made available in language(s) other than English
 - Phone calls to parents/guardians
 - In-person communications (i.e. open house)
 - Other - Write In
 - They were not made available
 - I don't know
-

State law (RCW 28A.300.475) specifically says instruction must be “inclusive of all students, regardless of their protected class status.” It goes on to say that “all curriculum, instruction, and materials must use language and strategies that recognize all members of protected classes.” Current protected classes include:

- Sex
 - Race and color
 - Religion and creed
 - National origin
 - Sexual orientation
 - Gender identity
 - Gender expression
 - Disability
-

21. How did you ensure that instruction was inclusive? In other words, what language and strategies did your curricula, instruction and materials use for this purpose? Examples of strategies might include the following. (Check all that apply)

*

- We used a curriculum that is appropriate for students regardless of religious/spiritual beliefs (i.e. does not promote a particular set of faith-based values/beliefs)
 - We provided instructional materials in more than one language
 - We used a curriculum designed for the primary cultural group represented in our school
 - We used a curriculum that includes images and/or examples of students representing the diversity reflected in our community
 - We used a curriculum that uses inclusive language and/or terminology and avoids derogatory or shaming language in reference to sexual activity and/or sexual orientation
 - We used a curriculum designed specifically for LGBTQ students
 - We provided instruction about sexual orientation
 - We provided instruction about gender identity and gender expression
 - We encouraged students to respect others' sexual and gender identities
 - We provided students with information about LGBTQ resources within the school and community (e.g., counseling services, student support groups)
 - We used a curriculum designed specifically for students with intellectual/developmental disabilities
 - We adapted instruction for students with intellectual/developmental disabilities in the general education classroom (e.g. simplified terminology, adapted handouts, other modifications, etc.)
 - Other - Write In
 - We have not yet determined that instruction is inclusive of all students
 - I don't know
-

Grades 6-8 - Instruction in Comprehensive Sexual Health Education

Page description:

Grades 6-8

Comprehensive Sexual Health Education is required to be provided at least twice in grades 6-8. “Twice” generally means two units of instruction that includes sufficient lessons to cover the required content in a way that is consistent with [Health Education K-12 Learning Standards](#), i.e. scaffolded, skills-based instruction.

22. In what grade(s) was Comprehensive Sexual Health Education instruction provided? (Check all that apply)*

- Grade 6
 - Grade 7
 - Grade 8
 - None of the above
-

23. What instructional materials were used with 6-8th grade students? (Check all that apply) *

- FLASH
 - Get Real
 - HealthSmart
 - Positive Prevention Plus
 - Rights, Respect, Responsibility
 - District developed materials
 - Other - Write In
 - No instructional materials used
-

24. How many total hours of Comprehensive Sexual Health Education instruction were 6-8th grade students provided this year? *

- 0 hours
 - Less than 1 hour
 - 1-5 hours
 - 6-10 hours
 - More than 10 hours
-

25. About what percentage of students were opted out of Comprehensive Sexual Health Education instruction this year by parents/guardians? *

- None
 - Less than 1%
 - 1 to 5%
 - 6 to 10%
 - More than 10%
 - I don't know
-

26. How did your district determine that your instruction was consistent with Health Education K-12 Learning Standards? *

- We use a curriculum that has been aligned with the Standards
 - We have mapped our instructional plan to the Standards
 - Other - Write In
 - We have not yet determined that instruction is consistent with Standards
 - I don't know
-

27. Did comprehensive sexual health education instruction address the following skills outlined in the Health Education K-12 Learning Standards? *

	Yes	No	I don't know
Comprehending concepts related to health promotion and disease prevention to enhance health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analyzing the influence of family, peers, culture, media, technology, and other factors on health behaviors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accessing valid information and products and services to enhance health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using interpersonal communication skills to enhance health and avoid or reduce health risks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using decision-making skills to enhance health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using goal-setting skills to enhance health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practicing health-enhancing behaviors to avoid or reduce health risks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advocating for personal, family, and community health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

28. Did your district determine that instructional materials are medically and scientifically accurate? If so, how?

("Medically and scientifically accurate," according to RCW 28A.300.475, means information that is verified or supported by research in compliance with scientific methods, is published in peer-reviewed journals, where appropriate, and is recognized as accurate and objective by professional organizations and agencies with expertise in the field of sexual health including but not limited to the American College of Obstetricians and Gynecologists, the Washington State Department of Health, and the federal Centers for Disease Control and Prevention.) *

- We adopted materials already reviewed by OSPI and DOH
- We conducted a medical accuracy review in the district
- We have not yet determined that materials are medically/scientifically accurate
- I don't know

29. If a district-level review was conducted, who participated in the review? (Check all that apply) *

- Health curriculum specialist
 - Reproductive health staff from local/county health department
 - University researcher
 - Sexuality instructor from an institution of higher education
 - Family planning clinic staff
 - Other - Write In
 - I don't know
-

30. The following questions address instruction on sexual health topics required by RCW 28A.300.475.

Please indicate which topics were covered and in which grades. *

	Grade 6	Grade 7	Grade 8	I don't know
The physiological, psychological, and sociological developmental processes experienced by an individual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Abstinence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other methods of preventing unintended pregnancy (besides abstinence)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other methods of preventing sexually transmitted diseases, including HIV (besides abstinence)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care and prevention resources (e.g. valid and reliable sources of information and health services, including online information and school- or community-based providers)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The development of intrapersonal and interpersonal skills to communicate, respectfully and effectively, to reduce health risks and choose healthy behaviors and relationships based on mutual respect and affection, and free from violence, coercion, and intimidation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The development of meaningful relationships and avoidance of exploitative relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understanding the influences of family, peers, community and the media throughout life on healthy sexual relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affirmative consent and recognizing and responding safely and effectively when violence or a risk of violence is or may be present, with strategies that include bystander training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

31. How were instructional materials made available for parent/guardian review? (Check all that apply) *

- Posted on district website
 - Access codes provided for online access
 - Hard copies were distributed or made available in districts/schools
 - Communications were made available in language(s) other than English
 - Phone calls to parents/guardians
 - In-person communications (i.e. open house)
 - Other - Write In
 - They were not made available
 - I don't know
-

State law (RCW 28A.300.475) specifically says instruction must be “inclusive of all students, regardless of their protected class status.” It goes on to say that “all curriculum, instruction, and materials must use language and strategies that recognize all members of protected classes.” Current protected classes include:

- Sex
 - Race and color
 - Religion and creed
 - National origin
 - Sexual orientation
 - Gender identity
 - Gender expression
 - Disability
-

32. How did you ensure that instruction was inclusive? In other words, what language and strategies did your curricula, instruction and materials use for this purpose? Examples of strategies might include the following. (Check all that apply)

*

- We used a curriculum that is appropriate for students regardless of religious/spiritual beliefs (i.e. does not promote a particular set of faith-based values/beliefs)
 - We provided instructional materials in more than one language
 - We used a curriculum designed for the primary cultural group represented in our school
 - We used a curriculum that includes images and/or examples of students representing the diversity reflected in our community
 - We used a curriculum that uses inclusive language and/or terminology and avoids derogatory or shaming language in reference to sexual activity and/or sexual orientation
 - We used a curriculum designed specifically for LGBTQ students
 - We provided instruction about sexual orientation
 - We provided instruction about gender identity and gender expression
 - We encouraged students to respect others' sexual and gender identities
 - We provided students with information about LGBTQ resources within the school and community (e.g., counseling services, student support groups)
 - We used a curriculum designed specifically for students with intellectual/developmental disabilities
 - We adapted instruction for students with intellectual/developmental disabilities in the general education classroom (e.g. simplified terminology, adapted handouts, other modifications, etc.)
 - Other - Write In
 - We have not yet determined that instruction is inclusive of all students
 - I don't know
-

Grades 9-12 - Instruction in Comprehensive Sexual Health Education

Page description:

Grades 9-12

Comprehensive Sexual Health Education is required to be provided at least twice in grades 9-12. “Twice” generally means two units of instruction that includes sufficient lessons to cover the required content in a way that is consistent with [Health Education K-12 Learning Standards](#), i.e. scaffolded, skills-based instruction.

33. In what grade(s) was Comprehensive Sexual Health Education instruction provided? (Check all that apply)*

- Grade 9
 - Grade 10
 - Grade 11
 - Grade 12
 - None of the above
-

34. What instructional materials were used with 9-12th grade students? (Check all that apply) *

- All4You2!
 - FLASH
 - Get Real
 - HealthSmart
 - Native Stand
 - Positive Prevention Plus
 - Rights, Respect, Responsibility
 - District developed materials
 - Other - Write In
 - No instructional materials used
-

35. How many total hours of Comprehensive Sexual Health Education instruction were 9-12th grade students provided this year? *

- 0 hours
 - Less than 1 hour
 - 1-5 hours
 - 6-10 hours
 - More than 10 hours
-

36. About what percentage of students were opted out of Comprehensive Sexual Health Education instruction this year by parents/guardians? *

- None
 - Less than 1%
 - 1 to 5%
 - 6 to 10%
 - More than 10%
 - I don't know
-

37. How did your district determine that instruction was consistent with Health Education K-12 Learning Standards? *

- We use a curriculum that has been aligned with the Standards
 - We have mapped our instructional plan to the Standards
 - Other - Write In
 - We have not yet determined that instruction is consistent with Standards
 - I don't know
-

38. Did comprehensive sexual health education instruction address the following skills outlined in the Health Education K-12 Learning Standards? *

	Yes	No	I don't know
Comprehending concepts related to health promotion and disease prevention to enhance health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analyzing the influence of family, peers, culture, media, technology, and other factors on health behaviors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accessing valid information and products and services to enhance health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using interpersonal communication skills to enhance health and avoid or reduce health risks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using decision-making skills to enhance health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using goal-setting skills to enhance health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practicing health-enhancing behaviors to avoid or reduce health risks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advocating for personal, family, and community health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

39. Did your district determine that instructional materials are medically and scientifically accurate? If so, how?

("Medically and scientifically accurate," according to RCW 28A.300.475, means information that is verified or supported by research in compliance with scientific methods, is published in peer-reviewed journals, where appropriate, and is recognized as accurate and objective by professional organizations and agencies with expertise in the field of sexual health including but not limited to the American College of Obstetricians and Gynecologists, the Washington State Department of Health, and the federal Centers for Disease Control and Prevention.) *

- We adopted materials already reviewed by OSPI and DOH
 - We conducted a medical accuracy review in the district
 - We have not yet determined that materials are medically/scientifically accurate
 - I don't know
-

40. If a district-level review was conducted, who participated in the review? (Check all that apply)*

- Health curriculum specialist
- Reproductive health staff from local/county health department
- University researcher
- Sexuality instructor from an institution of higher education
- Family planning clinic staff
- Other - Write In

- I don't know
-

41. The following questions address instruction on sexual health topics required by RCW 28A.300.475.

Please indicate which topics were covered and in which grades. *

	Grade 9	Grade 10	Grade 11	Grade 12	I don't know
The physiological, psychological, and sociological developmental processes experienced by an individual	<input type="checkbox"/>				
Abstinence	<input type="checkbox"/>				
Other methods of preventing unintended pregnancy (besides abstinence)	<input type="checkbox"/>				
Other methods of preventing sexually transmitted diseases, including HIV (besides abstinence)	<input type="checkbox"/>				
Health care and prevention resources (e.g. valid and reliable sources of information and health services, including online information and school- and community-based providers)	<input type="checkbox"/>				
The development of intrapersonal and interpersonal skills to communicate, respectfully and effectively, to reduce health risks and choose healthy behaviors and relationships based on mutual respect and affection, and free from violence, coercion, and intimidation	<input type="checkbox"/>				
The development of meaningful relationships and avoidance of exploitative relationships	<input type="checkbox"/>				
Understanding the influences of family, peers, community and the media throughout life on healthy sexual relationships	<input type="checkbox"/>				
Affirmative consent and recognizing and responding safely and effectively when violence or a risk of violence is or may be present, with strategies that include bystander training	<input type="checkbox"/>				

42. How were instructional materials made available for parent/guardian review? (Check all that apply) *

- Posted on district website
 - Access codes provided for online access
 - Hard copies were distributed or made available in districts/schools
 - Communications were made available in language(s) other than English
 - Phone calls to parents/guardians
 - In-person communications (i.e. open house)
 - Other - Write In
 - They were not made available
 - I don't know
-

State law (RCW 28A.300.475) specifically says instruction must be “inclusive of all students, regardless of their protected class status.” It goes on to say that “all curriculum, instruction, and materials must use language and strategies that recognize all members of protected classes.” Current protected classes include:

- Sex
 - Race and color
 - Religion and creed
 - National origin
 - Sexual orientation
 - Gender identity
 - Gender expression
 - Disability
-

43. How did you ensure that instruction was inclusive? In other words, what language and strategies did your curricula, instruction and materials use for this purpose? Examples of strategies might include the following. (Check all that apply) *

- We used a curriculum that is appropriate for students regardless of religious/spiritual beliefs (i.e. does not promote a particular set of faith-based values/beliefs)
- We provided instructional materials in more than one language
- We used a curriculum designed for the primary cultural group represented in our school
- We used a curriculum that includes images and/or examples of students representing the diversity reflected in our community
- We used a curriculum that uses inclusive language and/or terminology and avoids derogatory or shaming language in reference to sexual activity and/or sexual orientation
- We used a curriculum designed specifically for LGBTQ students
- We provided instruction about sexual orientation
- We provided instruction about gender identity and gender expression
- We encouraged students to respect others' sexual and gender identities
- We provided students with information about LGBTQ resources within the school and community (e.g., counseling services, student support groups)
- We used a curriculum designed specifically for students with intellectual/developmental disabilities
- We adapted instruction for students with intellectual/developmental disabilities in the general education classroom (e.g. simplified terminology, adapted handouts, other modifications, etc.)
- Other - Write In
- We have not yet determined that instruction is inclusive of all students
- I don't know

Additional comments

44. Additional comments

(optional):

Thank You!

Thank you for taking our survey. Your response is very important to us.
