SEX EDUCATION AS VIOLENCE PREVENTION

Nationally, 1 in 4 girls and 1 in 6 boys experience sexual abuse before the age of 18. [1] Experiencing sexual violence as an adolescent has adverse effects and makes the victim-survivor more likely to experience re-victimization in adulthood. Additionally, a study of sexual harassment and students from grades 7-12 found that 56% of girls and 40% of boys experience sexual harassment of any form (in person or online).

Unfortunately, sexual violence and harassment are part of the everyday life of many teens and adolescents.

Yet, our current opt-in policy for sex education means Nevada students are missing critical, empowering education. Currently, Nevada is only one of four states that have opt-in policies, requiring parental notification and consent, essentially allowing sexual assault prevention to be an option. [2]

To finally end power-based violence within our communities, we must break the current cycle. Sex education, including information about sexual assault and consent, is one of the most effective ways to do so.

Sex Education in Nevada

Nevada Revised Statute (NRS) 389.036 provides the statewide standard for sexual health education in Nevada. NRS 389.036 states among other things that: [4]

- Each school district’s Board of Trustees shall establish a course that teaches factual instruction on acquired immune deficiency syndrome, the human reproductive system, and any related communicable disease and sexual responsibility.
- Parents or guardians of each pupil who will be subjected to sexual health education must be given written notice of the course and then transmit written consent for the child to participate. Sexual health education courses are not a requirement for graduation.

The lack of uniformity across the state means that some students are receiving a better education than others and will likely have better outcomes in life. Those wishing to end sexual violence in Nevada should be deeply concerned with the opt-in policy requirements and its effect on the wellbeing and success of students.
Best Practices

Best practice shows that opt-out sex education policies produce better outcomes. Opt-in policies create unnecessary hurdles that prevent students from accessing the sex education they should receive. Opt-in is designed to make accessing sex education in schools more difficult and it overlooks the fact that parents/guardians have power under both opt-in and opt-out policies. [5]

In addition to being opt-out, sex education should be comprehensive, medically accurate, inclusive, and evidence-based. As life skills develop during a student’s K-12 experience, informing them with comprehensive sex education allows students to recognize healthy relationships, contribute to a healthy relationship, and understand how their choices may affect them or others.

Current interventions for sexual violence focus on older age groups that have already been exposed to risk factors. Primary and early intervention is key in addressing effective prevention. “K-12 program begins early on in the life course when many risk factors are only just beginning to develop, and by reaching young children while they are still in development, it presents the best opportunity to address the problem before it occurs.” [6]

Advocate’s Perspective on Sex Education

Beth Flory, Executive Director of S.A.F.E House, a program in Henderson, Nevada shared her experience working with youth and why comprehensive, opt-out sex education in schools is so important:

An opt-in approach to sex education operates under an assumption that all parents are fully and actively engaged in the lives or their children. Unfortunately, this is not reality. Having opt-in for sex ed assumes that all parents have the ability or desire to pay attention to their children’s educational needs. Sometimes parents don’t engage by choice, struggle with substance use and/or mental health diagnosis or miss important permission slips because they work multiple jobs to pay the bills. I have worked a lot with high risk teens who have encountered or contracted STI’s or became pregnant in their teens. Often, school is the only place that individuals get education, not just scholastically, but in life skills. Without sex education, students do not understand how their body is changing, or how to protect themselves. Without sex education, the cycle perpetuates amongst these high risk teens. [7]