

Resource Guide

for Texas Independent School Districts



www.TexasReady.org



Resource Guide

for Texas Independent School Districts

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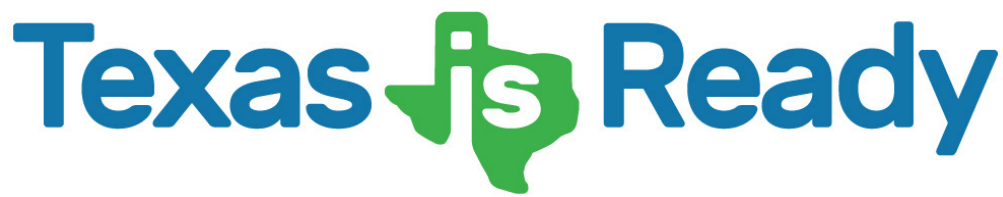
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to support school districts and communities in

Implementing School-based Sex Ed

- ✓ We provide school districts with **personalized support to select and implement a sex education curriculum** that best fits their needs, using research-based tools and resources like iCHAMPSS.
- ✓ We provide the **resources and guidance that teachers and the community need to be part of the process**, and contribute to effective implementation.
- ✓ We offer **free virtual or in person trainings** for schools and communities.

Why is it important to provide young people in Texas with HIGH-QUALITY sex education?

- By the end of high school, **65%** of Texas students have been sexually active.
- Every **25** minutes, a baby is born to a teen in Texas.
- Texas has the **8th** highest teen birth rate and the highest repeat teen birth rate nationwide.

How is sexual health education curricula adopted in Texas?

- ⊕ **Recommendations:** School health advisory councils (SHACS) hold at least two public meetings on the proposed curriculum.
- ↻ **Community Input:** The SHAC presents the recommendation to the school board at a public meeting.
- ✓ **Adoption:** The board of trustees adopts the curriculum.



Young people in Texas deserve high-quality, medically accurate sex education.

Understanding and Implementing Sex Education

As parents, educators, or community members, we want our kids to be healthy from head to toe. And that means providing them with factual, common sense information about how their bodies work.

What is Sex Education?

Texas Health Education curriculum standards for sexual and reproductive health cover a broad range of topics, tailored to be age-appropriate. In elementary school, students learn about healthy friendships and body safety. As they advance to later elementary grades, they discuss changes associated with puberty. Older students receive instruction on human reproduction and methods for preventing unintended pregnancies, including abstinence, contraception, and condoms. They also explore healthy relationships, recognize and avoid abusive situations, and understand the importance of respecting others' boundaries.

Why Abstinence-Plus Sex Education?

Some sex education programs focus only on abstinence, or avoiding sex. While this is important, research shows that by their junior year, about half of Texas teens will be sexually active. "Abstinence-plus" education teaches that abstinence is the best choice but also provides information on contraception, preventing sexually transmitted infections, and healthy relationships. Decades of research show that abstinence-plus education promotes healthy outcomes, including delaying sexual activity, increasing contraception, reducing unintended pregnancies and infections.

Research also shows that accurate medical information doesn't increase sexual activity and can help delay it. **In 2023, Texas had the 8th highest teen birth rate in the nation, with a baby born to a teen every 25 minutes. Though teen birth rate are declining nationwide and in Texas, rates of sexually transmitted infections are on the rise**

Texas students need reliable information to stay safe and healthy.

Who Supports Sex Education?

Nearly every major medical organization supports sex education that goes beyond abstinence, including groups such as the American Medical Association, American Pediatric Society, Society for Adolescent Health and Medicine, National Association of School Nurses, and National Association of Social Workers. Most importantly, a significant majority of parents support abstinence-plus sex education for their own kids.

How Can Districts Implement Sex Education?

State statute and curriculum standards have seen major changes in the last five years. This resource guide will provide you with information on how to implement sex education in compliance with state laws. More information is available at www.texasisready.org and www.ichampss.org.

Who sets the rules for sex ed in Texas schools?

In Texas, the framework for sex education involves multiple layers of oversight and decision-making. Additionally, Texas parents have extensive rights regarding their child's participation in sex education.

SHACs

School Health Advisory Councils, known as SHACs, are volunteer groups made up of parents, students, school staff, members of businesses, medical, and faith communities. Required under state law, SHACs are charged with ensuring local community values are reflected in health education. They make recommendations to the school board on various topics, including sex ed and abuse prevention curricula.

Local School Districts

State law gives local school districts a significant amount of control over sex education. A school district board of trustees adopts sex education curriculum, taking into account the recommendation of the SHAC and feedback from the community. The school district also determines whether or not they will offer electives such as high school health classes, and facilitates training of the teachers who will deliver sex education.

State Board of Education

The State Board of Education (SBOE) is a 15-member elected body that sets education policy in Texas. The SBOE is charged with setting minimum curriculum standards for each course, called the Texas Essential Knowledge and Skills, or TEKS. The recently adopted Health Education TEKS include sex education. The SBOE also adopts lists of approved textbooks and instructional materials for each course.

Texas Legislature

The Texas Legislature is the top decision maker around sex education. The Legislature sets state law around sex education, including many changes made in the 2021 Legislative Session. The Legislature also determines which courses are required for each grade level and for high school graduation. In 2023, the Legislature did not adopt any bills impacting sex education.

Health Education

What do the changes mean for ISDS?

Curriculum Standards

High-quality sex education promotes adolescent health, prevents teen pregnancy, and fosters healthy relationships. In November 2020, the State Board of Education updated Texas sex education standards for the first time in over 20 years. The Texas Essential Knowledge and Skills (TEKS) for Health Education include enhanced guidelines on a broad range of topics, including sexual and reproductive health. **While Health Education is an elective in high school, it is mandatory in middle school**, and these new standards will now introduce important sex education topics at that level. Many school districts will need to update their curricula to meet these new standards.

The TEKS Include:

- Age-appropriate, timely information on key topics like anatomy, puberty, menstruation and human reproduction.
- Information on contraception, condoms, and prevention, screening and treatment of sexually transmitted infections (STIs), now required at the middle and high school levels.
- The importance of abstinence.
- Standards on healthy relationships, such as prevention of sexual abuse, dating violence, sex trafficking, and in support of topics such as healthy communication and respect. While the standards teach the importance of respecting the boundaries of other people, they do not include consent.
- Standards do not cover sexual orientation or gender identity. However, districts may choose to include content that is inclusive of LGBTQ students, including bullying prevention.



To view the TEKS, scan this code

Minimum Standards

The Texas Essential Knowledge and Skills set the minimum curriculum standards that must be delivered to students, **but they are the floor, not the ceiling.**

School districts are free to "teach beyond the TEKS" and include **additional topics** not specified in the TEKS. For instance, even though consent is not explicitly covered in the TEKS, many districts choose to incorporate it into their instruction due to its importance.

State Laws

About Sex Ed and Abuse Prevention

Statutory Overview

Most of our laws about sex education and abuse prevention instruction are found in **Section §28.004 of the Texas Education Code**. These laws cover the following topics:

- **School Health Advisory Councils (SHACs):** SHACs are parent and community volunteer groups established by law to ensure local values are reflected in health education. They recommend sex education and abuse prevention curricula to the school board.
- **Curriculum adoption:** : State law mandates that the school board adopt sex education and abuse prevention curricula based on SHAC recommendations, following at least two public SHAC meetings.
- **Sex Education Content:** Instruction on human sexuality should emphasize abstinence as the preferred and safest choice. If contraception and condom use are taught, schools must provide information on their "human use reality rates" regarding efficacy.
- **Parent rights:** Parents must provide written consent in order for their children to receive instruction on the prevention of child abuse, family violence, dating violence or sex trafficking. **Opt-in requirements for sex education expired in 2024, but parents may still opt children out of sex education.**
- **Charter districts:** Charter districts are required to teach the Health Education TEKS, but are not required to follow provisions in 28.004 related to SHACs, curriculum adoption, and opt-in.

Requirements for Health Education in Texas Schools

Health education is no longer a high school graduation requirement but remains mandatory for grades K-8 under the Texas Administrative Code (TAC). Specifically:

- Grades K-5: Health education is part of the required curriculum (TAC §74.2(a)).
- Grades 6-8: TEKS must be taught as part of the required curriculum (TAC §74.3(a)(1)). Districts have flexibility in how to deliver these TEKS across grades 7 and 8.

While high school health education is not required statewide, districts may choose to make it a requirement.



To read the Texas Education Code §28.004, scan the QR code.

Curriculum for Sex Ed and Abuse Prevention

Instruction Materials Adoption

HB 1525, passed in the 87th Legislative Session, established new procedures for school districts to adopt sex education and abuse prevention materials.

This law outlines a specific process for adopting curricula related to sex education, child abuse, dating violence, and sex trafficking, with significant changes introduced in 2021. This process typically takes several months, so districts should plan timelines accordingly.

The steps in TEC §28.004 (e-1) and (q-1) include the following:

- **School Board Resolution:** The school board passes a formal resolution detailing the process for adopting instructional materials related to sex education and the prevention of child abuse, dating violence, and sex trafficking.
- **SHAC Directive:** The school board issues a resolution directing the School Health Advisory Council (SHAC) to review the curriculum and make a recommendation.
- **SHAC Review:** The SHAC reviews the curriculum, holds at least two public meetings, and ensures the curriculum is available for parent review during this process.
- **SHAC Recommendation:** The SHAC presents its curriculum recommendation to the school board.
- **School Board Vote:** The school board votes on the curriculum in a public meeting, with the vote recorded.

What is the SHAC's role?

In Texas, every school district must have a SHAC to ensure that health education reflects local values.

SHACs are made up of at least five members appointed by the school board, with a majority being parents of enrolled students. District employees, students, and community members may also be included. The SHAC reviews and recommends curricula for sex education and the prevention of child abuse, dating violence, and sex trafficking. Recent changes in state law require that notices, minutes, and recordings of SHAC meetings be posted on the district website.

Curriculum for Sex Ed and Abuse Prevention

Instruction Material Adoption

What Materials Can Districts Adopt?

Districts have the flexibility to choose materials beyond those adopted by the State Board of Education (SBOE). They can utilize their Technology and Instructional Materials Allotment for materials not approved by the SBOE (TEC §31.004; TAC §66.1307(f)(3)). Since the SBOE has not adopted Health Education materials for elementary levels, districts have the option to develop or select their own resources.

SBOE-adopted materials offer benefits such as simplified ordering through EMAT and availability in formats for students with disabilities (e.g., braille, large print). However, districts must ensure these materials:

- Cover 100% of the Texas Essential Knowledge and Skills (TEKS).
- Are appropriate for the subject and grade level.
- Have been reviewed by academic experts in the relevant subject and grade.
- Emphasize abstinence as required by TEC §28.004.

Should We Adopt a Health Textbook?

A health textbook typically addresses all Health Education TEKS, including sex education, nutrition, and injury prevention. If the textbook is SBOE-approved, it has been reviewed for grade-level appropriateness and aligns with state standards. Additionally, SBOE-approved textbooks can be easily ordered using TIMA funds. However, health textbooks may not be evaluated for effectiveness and might not provide extensive information on some topics, such as contraception.

Should We Adopt an Evidence-Based Program?

Evidence-based programs are developed by health experts and tested for effectiveness. They often cover important topics not included in the TEKS, such as consent, and are tailored for specific student populations to enhance relevance and impact. However, these programs might not cover all Health TEKS requirements, so districts may need additional resources or textbooks to ensure comprehensive health education.

An evidence-based sex education program is characterized by the following:

- **Research-Driven:** Developed using strong research methods.
- **Rigorously Evaluated:** Thoroughly tested for effectiveness.
- **Peer-Reviewed:** Findings are published in reputable, peer-reviewed journals.
- **Sustained Impact:** Shows positive behavior changes that last at least three months post-implementation.
- **Effective:** Proven to change behavior within the study population.



Implementing Sex Ed and Abuse Prevention Curriculum

Essential Steps for Effective Implementation

Adopting a sex education curriculum is a significant milestone for any district, but its successful implementation requires careful planning.

Follow these key steps to ensure an effective rollout:

1. Parent Outreach

- Inform: Communicate the new curriculum's content, objectives, and benefits clearly to parents.
- Engage: Host informational meetings, provide FAQs, and address any concerns to ensure parent understanding and support.

2. Compliance with State Laws

- Notify: Adhere to state laws regarding parent notification and feedback processes.
- Access: Make the curriculum available for parental review to ensure transparency.

3. Teacher Selection and Preparation

- Identify Instructors: Choose qualified teachers based on their experience and comfort with the curriculum content.
- Train: Offer comprehensive training on curriculum content, teaching methods, and handling sensitive topics.

4. Curriculum Access

- Open Source Materials: Post these materials on the district website. Provide them by mail or email upon request.
- Copyrighted Materials: Ensure parents can:
 - Review materials at the student's campus during regular hours.
 - Purchase a copy at a price not exceeding that paid by the district.
 - Access materials online through a secure account that prevents copying.

5. Parent Notification Letter

- Send a Parent Notification Letter before the school year starts. Letters must include:
 - Information about state law requirements for sex education and abuse prevention.
 - Detailed content and schedule of the instruction.
 - The right to review or purchase curriculum materials.
 - The right to opt out of any part of the instruction without penalty.
 - The right to use grievance procedures for state law violations.
 - Details on accessing curriculum materials online and at the campus.
 - Opportunities for parental involvement in curriculum development, including details on the local school health advisory council.



Teacher Training

Sex Ed and Abuse Prevention

Importance of Teacher Training

Teaching sex education comes with unique challenges compared to other subjects like biology or algebra, due to its complex blend of biological, psychological, cultural, and ethical dimensions. To ensure success, it's crucial to equip school staff with the tools, resources, and support they need to navigate these complexities confidently and sensitively.

- **Selection of Educators:** The first step in preparing school staff is selecting those who are best suited to teach sex education. In smaller districts, this may mean identifying teachers who are particularly comfortable with sensitive content, while in larger districts, it may involve choosing from a broader pool of staff or professionals. Possible candidates can include: nurses and health educators, science teachers, coaches or advisory teachers. Bringing in guest speakers or external educators with specialized knowledge may also be beneficial.
- **Providing Comprehensive Training and Support:** Once school staff are selected, they should receive proper training and support to ensure they are prepared to handle difficult questions and teach the material effectively.
 - **Curriculum-Specific Training:** Training should be provided by either the curriculum publisher or an approved trainer familiar with the specific sexual health content. This will help ensure teachers are confident and well-prepared to deliver the curriculum with fidelity.
 - **Ongoing Support:** Regularly check in with teachers to gauge their confidence levels, identify any challenges they're facing, and provide additional training or resources as needed. Offering ongoing support ensures that educators can address issues as they arise and feel supported in their role.
 - **Utilizing School Resources:** In addition to training, school nurses, counselors, and administrators can be invaluable resources for teachers. They can help clarify complex health topics, offer advice on how to address student concerns, and provide support for handling sensitive conversations.

By thoughtfully selecting school staff and ensuring they have the proper training and ongoing support, districts can create a successful foundation for delivering effective sex education.

Teacher Training

Sex Ed and Abuse Prevention

Importance of Teacher Training

Effective training prepares school staff to confidently teach sex education. Whether your district uses a dedicated human sexuality curriculum or incorporates sex education into a broader health course, training should be comprehensive, adaptable, and focused on the key skills needed for success.

- **Structuring the Training:** training can be delivered in different formats depending on available time and the depth of content:
 - Single Session: A full-day, focused training session might be the best option for districts with limited time.
 - Multiple Sessions: Spreading the training over several shorter sessions allows for more thorough exploration of complex topics.
- **Key Training Focus Areas:** training should cover the following areas to ensure staff are well-prepared to deliver effective sex education:
 - Trauma-Informed Approaches: Teach staff strategies to recognize and address the impact of trauma on students, creating a safe, supportive classroom environment.
 - Inclusivity: Provide guidance on how to create an inclusive classroom that respects diverse student identities and experiences.
 - Handling Sensitive Questions: Equip staff with the skills to answer challenging or uncomfortable student questions in a professional and respectful manner.
 - Curriculum Fidelity and Adaptations: Ensure staff understand how to implement the curriculum accurately, with clear guidance on approved adaptations that may be necessary for local contexts.
- **Extended Professional Development:** Consider offering ongoing professional development in related areas, such as:
 - Mental Health: Help staff identify and address mental health concerns related to sexual health education.
 - Sexual Assault Prevention: Train staff on teaching students about consent, healthy relationships, and sexual assault prevention.
- **Engagement and Support**
 - Interactive Training: Use role-playing, case studies, and group discussions to make the training engaging and practical.
 - Ongoing Support: Provide ongoing resources, peer networks, and access to experts for continued support as staff implement the curriculum.

By focusing on these essential areas, districts can ensure their instructional staff are not only well-informed but also confident in delivering comprehensive and inclusive sex education.

Engaging Parents & Guardians

Sex Ed and Abuse Prevention

Engaging parents and guardians is essential for the success of sex education programs in schools. Their involvement not only helps in reinforcing consistent messages about sexual health but also ensures that the curriculum reflects community values and meets the needs of students. This document explores practical strategies for engaging parents, the significance of their role, and how their collaboration can enhance the overall impact of sex education programs.



How Can We Engage Parents & Guardians?

To effectively engage parents in sex education, schools must prioritize building trust and fostering open communication. A crucial first step is to establish a robust School Health Advisory Council (SHAC) with substantial parent representation. This ensures that community values and concerns are adequately represented. Additionally, conducting parent surveys can offer valuable insights into what most parents value in a sex education curriculum, guiding its development to better align with their priorities.



Communicating relevant information, such as district and community rates of teen pregnancy and STIs, helps underscore the importance of abstinence-plus education and highlights its relevance to parents. To further alleviate concerns and build confidence, schools should engage in extensive outreach about both proposed and adopted curricula, maintaining transparency throughout the process.

Hosting parent nights provides an opportunity for direct interaction, where parents can learn more about the curriculum and ask questions. This fosters a collaborative environment and strengthens the partnership between schools and families.

Additionally, offering supportive training sessions, such as Key Conversations, equips parents with the tools to effectively discuss healthy relationships and sexual health with their children.

Engaging Parents & Guardians

Sex Ed and Abuse Prevention

Why Are Parents & Guardians Important?

Effective sex education relies on strong collaboration between schools, parents, and guardians. Parents and guardians are the primary and most influential teachers of their children, shaping their values and beliefs from an early age. Family values, which are influenced by cultural, religious, and political factors, play a significant role in how children develop their ideas, behaviors, and decision-making as they grow into adulthood.



For health education to be truly impactful, it is crucial that schools and families reinforce consistent messages both at home and in the classroom. Building robust community support for a sex education curriculum is essential for achieving this alignment.

Additionally, state law empowers parents who prefer to handle sex education independently to opt their children out of instruction if they choose. Engaging parents and guardians not only aligns educational efforts with community values but also enhances the overall impact of sex education programs.



Public opinion consistently shows broad, bipartisan support for sex education, with many parents recognizing its importance for their children's safety and health.

What Rights Do Parents & Guardians Have?

The Texas Education Code outlines several key rights for parents regarding sex education.

These rights include:

- Having a say in the selection of the sex education curriculum.
- Receiving notification about the content and scope of the sex education provided.
- Deciding whether or not their child will participate in sex education.
- Reviewing all curriculum materials both during the adoption process and after they are implemented.
- Filing a grievance or appeal if any of these rights are not upheld.

These provisions ensure that parents and guardians are actively involved in and informed about the sex education their children receive, reinforcing their critical role in shaping and supporting effective health education.

Opt-in Requirements

Sex Ed and Abuse Prevention

Texas law now requires parents and guardians to provide written consent to opt their children to participate in instruction on the prevention of child abuse, family violence, dating violence and sex trafficking. Texas is the only state with this requirement for abuse prevention instruction.

Key Changes:

- **Opt-in Requirements:** The opt-in requirements for sex education expired in 2024, but parents still have the right to opt their children out of instruction.
- **Legislative Background:** HB 1525 and SB9 enacted these consent requirements during the 87th legislative session in the second special session, emphasizing the need for written permission for both human sexuality and abuse prevention instruction. **Opt-in requirements for sex education expired in 2024, but parents may opt-out children out of instruction.**

Concerns About Opt-In: While Texas parents have historically had the right to opt out of human sexuality instruction without penalty, there are concerns that some children may miss out on vital education, especially if parents are occupied or not easily reachable. Additionally, children who face abuse may not receive permission from their guardians to learn about these critical topics.

Resources: An opt-in letter template is available for download on the [iCHAMPSS website](https://www.ichampss.org).

Best Practices for Districts:

- **Enhance Communication:** Host family nights to review health education curriculum and address any questions. Transparency is key to helping parents understand what their children will be learning.
- **Allow Ample Time:** While the law requires a 14-day notice for returning forms, consider extending this period to accommodate busy families.
- **Track Responses:** Include checkboxes on forms for “I give consent” and “I do not give consent” to identify students whose forms are not returned.
- **Support Busy Families:** Many parents and guardians may overlook consent forms; proactive communication can help ensure all students receive essential instruction.

Statutory Citations:

- **Human Sexuality Instruction:** TEC §28.004 (i-2), amended by 87-R HB 1525
- **Abuse Prevention Instruction:** TEC §28.004 (q-6), amended by 87-2 SB 9

Texas



Ready

Myth vs. Fact

Sex Ed and Abuse Prevention

Polling shows that a large, bipartisan majority of Texans support abstinence-plus sex education. However, in discussions around sex education and adolescent health, many misperceptions arise. This document outlines some common sex education myths and what the research suggests.

Myth 1: Talking About Sex Makes Students More Likely to Have Sex

Fact: No. Research shows that medically accurate sex education does not increase sexual activity and can help delay it.

For example, a 2012 review of 62 studies found that “comprehensive risk-education interventions were associated with declines in various risk behaviors among adolescents” with only one study suggesting a negative impact. A 2016 UN review of 22 systematic reviews also confirmed that such programs delay sexual initiation, reduce sexual activity, and decrease the number of partners.¹

Myth 2: Teaching About Consent Encourages Students to Have Sex

Fact: Teaching consent focuses on understanding and respecting personal boundaries, not encouraging sexual activity.

It means recognizing that everyone is responsible for setting, communicating, and respecting personal boundaries in all types of relationships, not just sexual relationships.

For example, consent education teaches:

- It's ok to choose a high five instead of a hug or opt out of touch altogether
- It's ok to decide whether to hold hands or add someone on social media

This fundamental education from a young age fosters healthy relationships and helps prevent issues like harassment and abuse. Furthermore, recent data shows that 88% of Texas voters, including 86% of Republicans, believe it's crucial for students to learn about respecting others' boundaries.²

Myth 3: Abstinence-Plus Education Increases Risky Behavior

Fact: Studies show that abstinence-plus sex education, including information on contraception and STI prevention, helps reduce risky behaviors.

It supports students in making informed decisions and can lead to increased use of protection and lower rates of unintended pregnancies and STIs.

Sources:

1. <https://www.gutmacher.org/gpr/2019/06/promiscuity-propaganda-access-information-and-services-does-not-lead-increases-sexual#>
2. Texas Campaign to Prevent Teen Pregnancy public opinion polling data, March 2020
3. Texas Youth Risk Behavior Survey, accessed at <http://healthdata.dshs.texas.gov/dashboard/surveys-and-profiles/youth-risk-behavior-survey>
4. Contraception for Adolescents. COMMITTEE ON ADOLESCENCE. Pediatrics Oct 2014, 134 (4) e1244-e1256; DOI: 10.1542/peds.2014-2299

DATA & RESEARCH



healthy futures OF TEXAS

Advancing informed sexual health decisions

A baby is born to a teen mom in Texas once every

» 25 minutes

Teen Birth Counts & Rates

Year	TX Teen Birth Count	TX Teen Birth Rate	US Teen Birth Rate	TX, % above US
2007	54,281	61.8	41.5	49%
2008	54,284	60.7	40.2	51%
2009	52,656	57.9	37.9	53%
2010	47,751	52.2	34.3	52%
2011	42,748	46.9	31.3	50%
2012	40,451	44.4	29.4	51%
2013	37,525	41.0	26.5	55%
2014	35,063	37.8	24.2	56%
2015	32,687	34.6	22.3	55%
2016	29,765	31.0	20.3	52%
2017	26,971	27.6	18.8	47%
2018	25,089	25.3	17.4	45%
2019	24,109	24.0	16.7	44%
2020	22,641	22.4	15.4	45%
2021	21,041	20.3	13.9	46%
2022	21,337	20.4	13.6	50%
2023	20,856	19.4	13.1	49%

Texas Adolescent Health

TEXAS TEEN BIRTHS, 2023

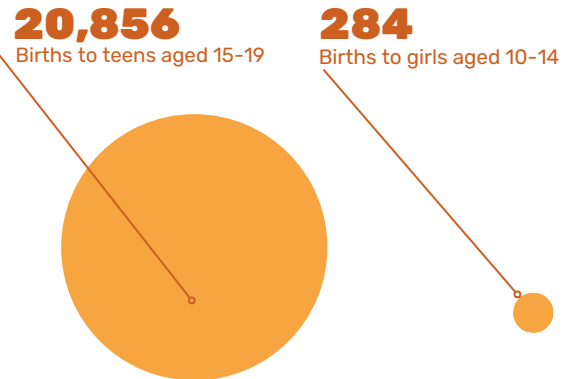
With support, families led by teen parents can thrive. However, early and unintended childbearing can make it harder for young people to achieve personal, educational and professional goals and attain financial stability.

Between 2007, the teen birth rate in both Texas and the US has declined by two-thirds, an astounding public health shift. However, **Texas still has the 8th highest rate of teen birth in the nation**, and the 3rd highest rate of repeat teen birth. Of the 140,977 teens births in the US in 2023, 15% occurred in Texas.

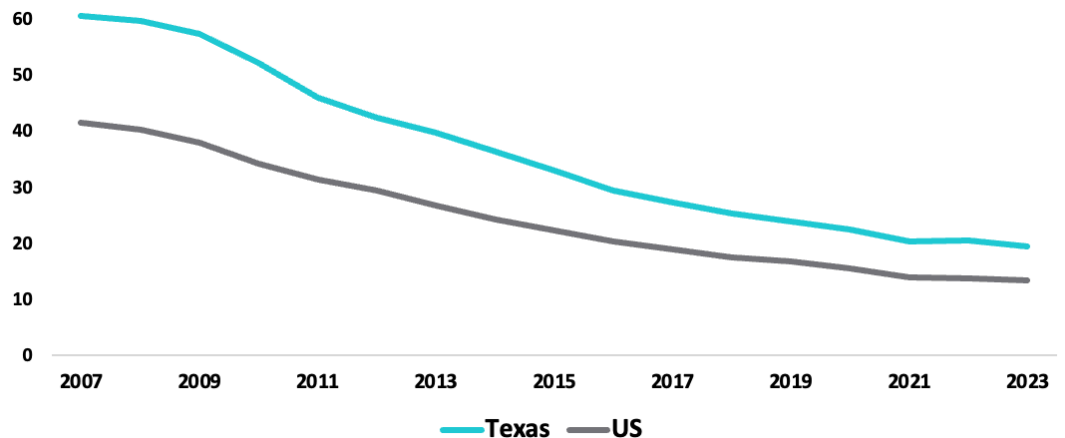
In 2022, the Texas teen birth rate increased for the first time in 15 years, but 2023 saw the rate decline by 5%. In 2023, the Texas teen birth rate was 19.4 per 1,000 girls age 15-19. In other words, 1.94% of Texas teens gave birth, **a rate 49% higher than the national average**.

In 2023 there were 20,856 teen births, including 5,721 births to teens aged 15-17 and 15,135 births to teens aged 18-19. Additionally, there were 284 births to girls under the age of 15. In Texas, 89% of 18-19 year old teen mothers are unmarried, compared to about 25% of mothers in their 30s.

Teen Birth Rate



Teen Birth Rate per 1,000 Teens Aged 15-19, 2007 - 2023

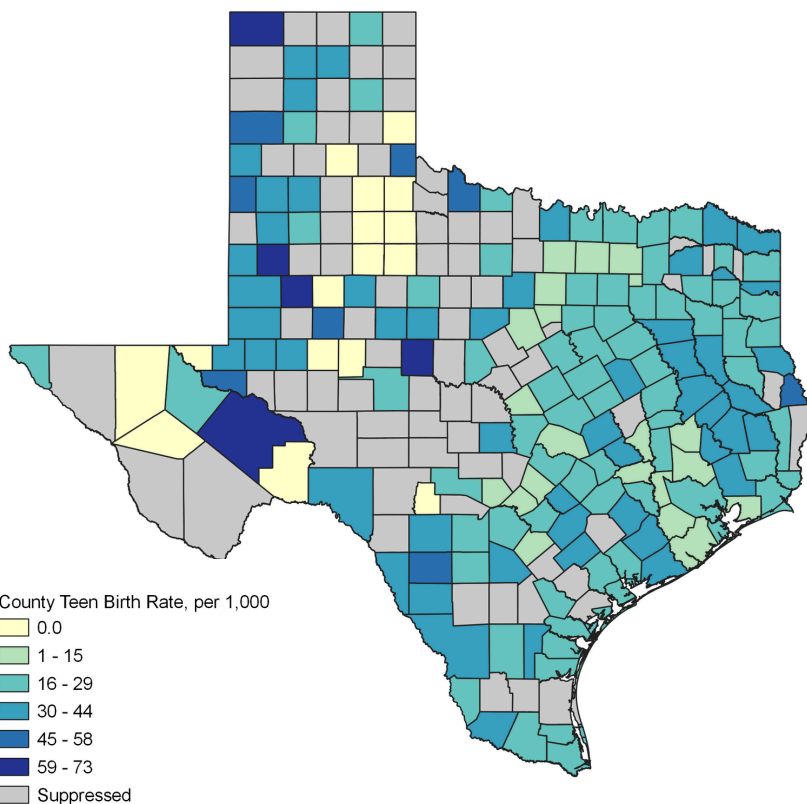


COUNTY RATES

2023 Teen Birth Rates for Large Counties

Area	Total Teen Births, 15 - 19	Teen Birth Rate 2023	Change, 22 - 23
Bell County	255	18.9	-12%
Bexar County	1,342	18.4	-9%
Brazoria County	176	12.9	-24%
Brazos County	155	11.4	4%
Cameron County	493	28.6	-6%
Collin County	275	6.5	12%
Comal County	61	10.4	-15%
Dallas County	2,132	23.8	-3%
Denton County	289	8.5	-1%
Ector County	219	35.1	-19%
El Paso County	707	22.1	-8%
Ellis County	129	15.8	-3%
Fort Bend County	222	6.7	-9%
Galveston County	180	15.3	-8%
Grayson County	101	21.0	-2%
Gregg County	100	22.4	-22%
Guadalupe County	101	15.8	20%
Harris County	3,284	19.5	-4%
Hays County	109	10.1	-11%
Hidalgo County	1,105	28.6	-7%
Jefferson County	231	28.8	-3%
Johnson County	117	16.6	-19%
Kaufman County	131	18.9	-4%
Lubbock County	250	18.6	-25%
McLennan County	218	19.8	26%
Midland County	186	31.7	-5%
Montgomery County	297	12.0	-17%
Nueces County	295	24.6	-7%
Parker County	75	13.4	4%
Potter County	143	35.5	-15%
Randall County	89	16.5	5%
Smith County	166	19.6	-2%
Tarrant County	1,414	17.8	0%
Taylor County	168	29.5	40%
Tom Green County	89	21.3	-10%
Travis County	707	18.0	7%
Webb County	397	34.2	-4%
Wichita County	96	20.9	1%
Williamson County	175	8.1	5%
Texas	20,856	19.4	-5%

Due to their large populations, more than half of Texas births occur in just 7 counties: Harris, Dallas, Tarrant, Bexar, Hidalgo, El Paso, and Travis. However, the highest rates of teen birth tend to occur in more rural counties, especially counties in west Texas or the border regions. Counties with a population below 100,000 have a teen birth rate that is 29% higher than the state average.



Note: If there are fewer than 10 teen births in a county, the data is suppressed to protect privacy. However, rates in these counties may still be high.

WHAT IS A TEEN BIRTH RATE?

A teen birth rate is a mathematical formula that shows how many girls between the ages of 15-19 out of a 1,000 had a baby in a given year. Teen birth rates can be calculated at the national, state, county, or even zip code level. Teen birth rates are shown per 1,000 girls aged 15-19. A teen birth rate of 30 per 1,000 means that 3% of teens in a given area had a baby that year.

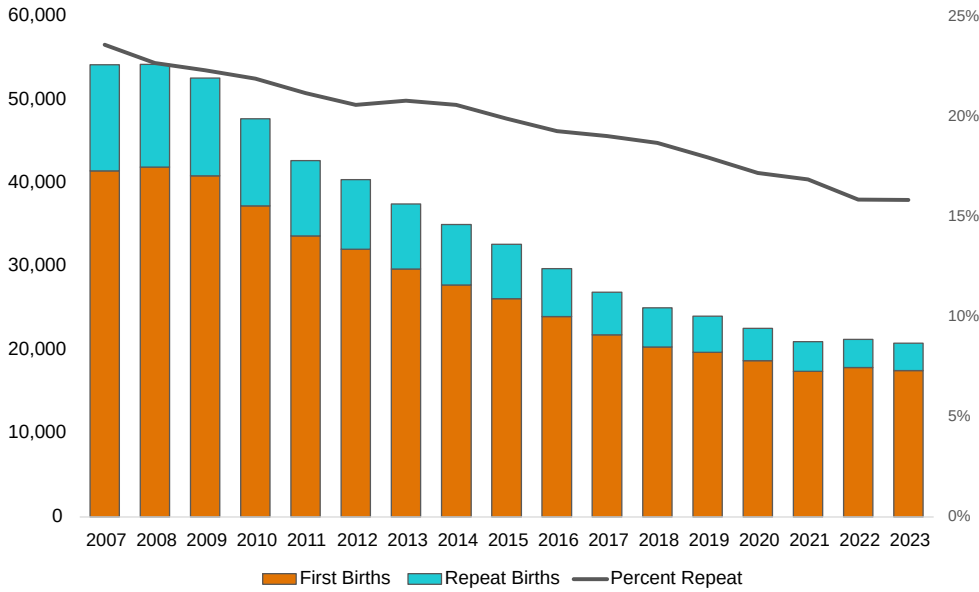
Count of teen births in Travis County in 2023 → 707

Estimated number of girls aged 15-19 living in Travis County in 2023 → 39,398

$$\frac{707}{39,398} \times 1,000 = \text{Travis County 2023 teen birth rate of 18.0 per 1,000}$$

To see rates for all Texas counties, visit <https://hftx.org/resources/teen-birth-in-texas/>

REPEAT TEEN BIRTHS



16% of teen births in Texas are repeat teen births.

Texas has the third highest rate of repeat teen birth in the nation. In 2023, there were 3,311 repeat teen births in Texas, down from 12,727 repeat births in 2007, when 24% of teen birth were repeat.

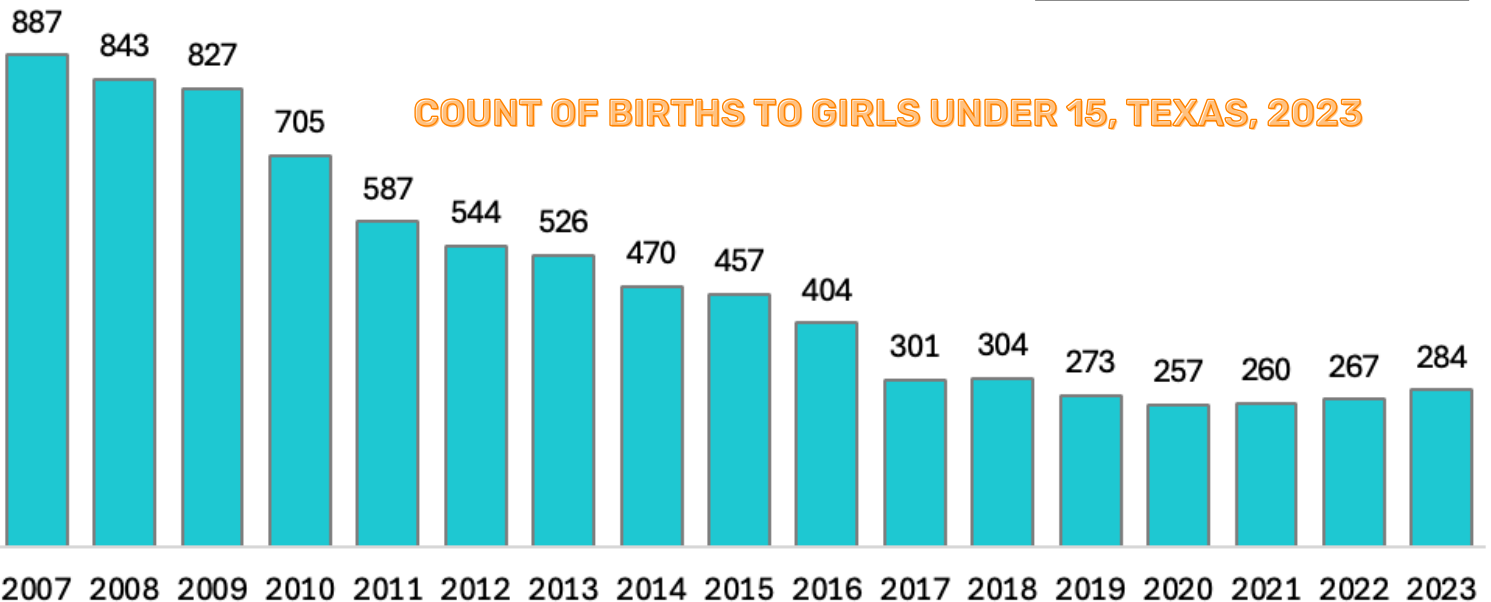
In Texas, a teen mother can consent to any medical care for her baby, but under state law, she cannot consent to her own health care, including birth control to prevent additional unintended pregnancies.

BIRTHS UNDER 15

Births to girls between the ages of 10-14 have declined by two-thirds since 2007. However, preteen births increased by 11% in Texas between 2020 and 2023, rising each year. Of the 1,766 births to preteens in the US, 16% occurred in Texas. These pregnancies are frequently the result of abuse or neglect, and may also create a serious health risks, as preteens are more than 50% more likely than mothers in their 20s to experience maternal morbidity or have a child who is transferred to the NICU.

Preteen Births by County, 2023

Harris	50
Dallas	35
Bexar	25
Hidalgo	13
Tarrant	10
Other Counties	151
Total	284



DISPARITIES IN TEEN BIRTH RATES

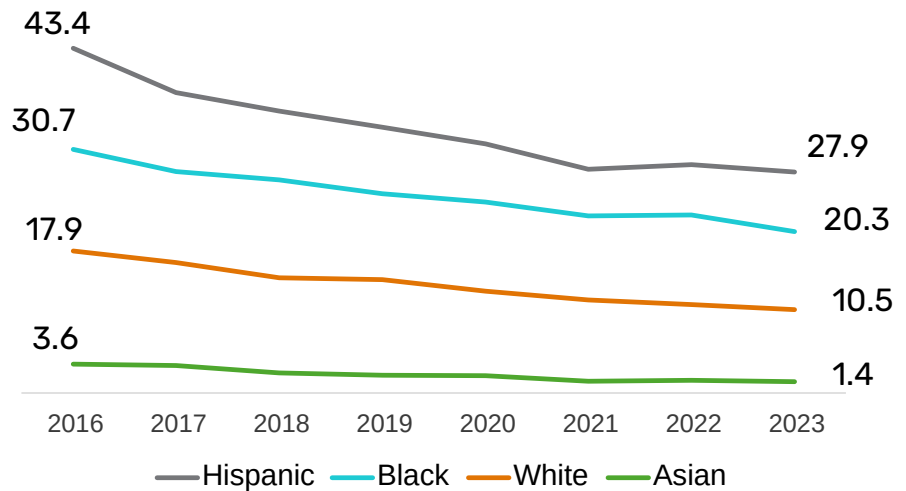
Factors such as access to health care, information, and economic opportunity can lead to disparities in teen birth rates. Though rates for all ethnicities have declined in the last decade, the rate of decline has been slower for black and Hispanic teens.

In 2022, the birth rate for Hispanic teens was 2.6 times higher than white teens. This gap increased to 2.7 times higher in 2023.

In 2023, 68% of teen births were to Hispanic teens, including 13,633 white Hispanic teens and 472 teens who identify as both Hispanic and black, Asian, American Indian or Hawaiian Pacific islander. In Texas, 96% of non-Hispanic teen mothers and 76% of Hispanic teen mothers were born within the US.

Teen Birth Count by Ethnicity, 2023

Hispanic:	13,633
Black:	2,767
White:	3,456
Asian :	68
American Indian:	21
Hawaiian/ Pacific Islander:	25
More than one race:	784



WHAT'S AHEAD FOR TEEN BIRTH RATES?

In 2022, the Texas teen birth rate increased for the first time in 15 years. While the increase was small -- just half a percent -- it was a concerning trend after a decade and a half of decline. In 2023, the Texas teen birth rate resumed its decrease. However, the 5% decrease was smaller than prior years, which averaged an 8% drop.

Preliminary data for the first 9 months of 2024 show that the count of Texas births for the months of January to September has decreased by 2% compared to 2023. Based on this early data, it is likely that the 2024 will show a modest decrease compared to 2023.

Count of Texas Teen Births, January - September

2023 - 15,404
2024 - 15,044



NON-MEDICAL DRIVERS OF HEALTH

Non-Medical Drivers of Health are conditions in the places where people live, learn, work and play that affect a wide range of health risks and outcomes. These issues can contribute to adolescent health, including teen pregnancy and rates of sexually transmitted infections.

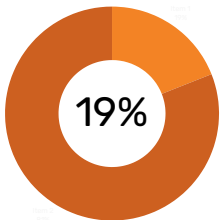
Young people in Texas are more likely than their peers nationwide to live in poverty, not have health insurance, or experience one or more Adverse Childhood Experiences, or ACES.

➤ Health Care Access

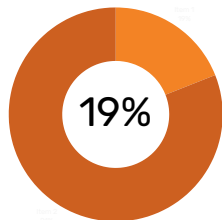
Texas is the largest state in the nation to not expand Medicaid. As a result, many young people in Texas are uninsured.

Programs such as Healthy Texas Women and the state's Family Planning Program provide access to care such as birth control, cancer screenings, STI screening and treatment, and other services.

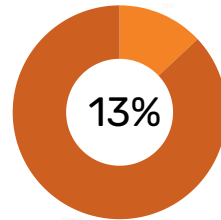
When teens do become pregnant, most are eligible for Pregnant Women's Medicaid, which covers more than 4 out of 5 teen births in Texas.



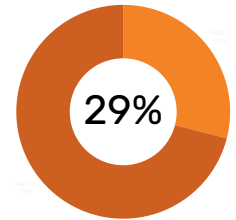
of Texas children live in poverty



of Texas children experience at least 2 ACES



of Texas children under the age of 18 don't have health insurance

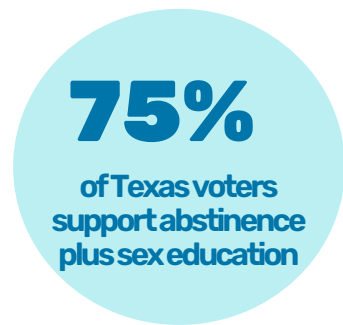


of young adults (age 19-26) in Texas don't have health insurance

SEXUAL HEALTH EDUCATION

Sexual health education can help young people stay safe and healthy by providing factual information on topics like healthy relationships, abstinence, birth control, and prevention of sexually transmitted infections. This type of school-based instruction is widely supported by Texas parents.

In 2020, the Texas State Board of Education updated the minimum curriculum standards for Health Education, including appropriate sexual health information in the middle school level, when all students are required to be offered this instruction. In Texas, parents maintain the right to opt their children out of any instruction on sexual health or abuse prevention without penalty.



Young people in Texas report that they want to receive information on sexual health from trusted sources such as schools, parents and doctors, rather than relying on the internet or peers. However, despite recent improvements to state standards, many Texas students still do not receive adequate school-based instruction.

SEXUALLY TRANSMITTED INFECTIONS, 2023

Though teen birth rates have declined in recent years, STIs are increasing among Texas youth. Some of this increase may be due to declining condom usage, changes in access to health care, or other factors. Minors in Texas can consent to screening and treatment for most STIs.

A word of caution about STI data: the reported data only show the cases that have been diagnosed. However, in a country where many young people lack access to health care, a “low” rate may simply reflect the fact that many cases are undiagnosed. Conversely, a high rate or increasing rates could indicate improved access to screening and treatment.

Health Education in Texas public schools now includes information on the types of STIs and the importance of prevention, screening, and treatment.

In Texas in 2023

57% of chlamydia cases,
43% of gonorrhea cases,
19% of syphilis cases, and
21% of HIV cases

occurred in youth under
the age of 25

To find low-cost HIV and STI testing locations, visit dshs.texas.gov/hivstd/testing

Sexually Transmitted Infections and HIV in Texas, 2023

	Count, 2023, Ages 15-24*	Count, 2023, All Ages	Change from 2019, Youth
Chlamydia	85,974	150,056	6%
Gonorrhea	23,070	53,793	8%
Syphilis	5,080	26,155	76%
HIV new diagnoses	1,071	5,076	3%

*New HIV diagnoses in youth show data for ages 13-24

CONGENITAL SYPHILIS

Congenital syphilis, once nearly eradicated, has shown an alarming increase in recent years, both in Texas and the US. Congenital syphilis occurs when a pregnant woman who has syphilis passes the infection on to her baby, often resulting in death or lifelong disability. While early treatment can often prevent infection, many pregnant women with syphilis do not receive timely or adequate care. When a woman is diagnosed with syphilis during pregnancy, the infant is nearly three times as likely to be admitted to the NICU.

Teen mothers have the highest incidence of syphilis during pregnancy of any age group in Texas.

Year	Rate, TX	Rate, US	Cases, TX	Cases, US	TX % of total
2019	140.4	50.3	530	1,884	28%
2020	153.5	59.9	565	2,163	26%
2021	183.1	78.6	684	2,881	24%
2022	236.6	102.8	922	3,769	24%
2023	238.6	105.8	930	3,882	24%

24%

of reported congenital syphilis cases in 2023 occurred in Texas

Between 2019 and 2023 Texas congenital syphilis cases increased by

70%

Youth STI Data by Texas County, 2023

Area	Chlamydia		Gonorrhea		Syphilis		HIV	
	Count, 2023, Ages 15-24	Change from 2019	Count, 2023, Ages 15-24	Change from 2019	Count, 2023, Ages 15-24	Change from 2019	Count of New Diagnoses, 2023, Ages 13-24	Change from 2019
Bell County	1,606	10%	459	42%	42	-9%	13	-57%
Bexar County	4,562	-12%	1,270	50%	464	53%	85	25%
Brazoria County	1,009	10%	220	96%	44	132%	9	-31%
Brazos County	1,030	25%	331	165%	30	30%	7	--
Cameron County	1,830	24%	200	120%	111	178%	23	130%
Collin County	1,723	7%	399	86%	90	80%	30	58%
Comal County	208	-19%	42	5%	18	80%	**	--
Dallas County	10,230	-11%	3,398	56%	580	16%	162	15%
Denton County	1,772	25%	496	74%	96	92%	19	-14%
Ector County	561	5%	102	9%	30	0%	6	--
El Paso County	2,928	33%	520	112%	172	100%	32	7%
Ellis County	541	47%	156	95%	16	100%	5	--
Fort Bend County	1,817	24%	461	126%	92	254%	21	-13%
Galveston County	871	-7%	208	79%	38	111%	12	-14%
Grayson County	286	-2%	49	7%	12	200%	**	--
Gregg County	511	34%	100	56%	17	183%	6	--
Guadalupe County	291	-2%	80	78%	18	38%	**	--
Harris County	16,964	20%	5,220	104%	1,190	103%	273	-12%
Hays County	882	22%	226	109%	36	0%	14	27%
Hidalgo County	2,147	4%	372	85%	155	52%	25	47%
Jefferson County	968	10%	315	76%	79	103%	23	28%
Johnson County	334	-1%	67	16%	14	100%	**	--
Kaufman County	499	35%	144	172%	19	111%	6	0%
Lubbock County	1,539	-4%	406	26%	106	266%	18	100%
McLennan County	1,068	5%	279	51%	30	20%	5	0%
Midland County	677	12%	115	35%	25	92%	5	0%
Montgomery County	1,116	23%	216	88%	54	59%	18	0%
Nueces County	1,477	-24%	432	107%	72	29%	6	-25%
Parker County	191	12%	27	13%	5	-38%	**	--
Potter County	572	-22%	187	-18%	32	167%	9	-18%
Randall County	404	77%	104	167%	24	380%	0	--
Smith County	853	37%	210	71%	35	133%	11	-8%
Tarrant County	6,483	15%	2,123	106%	297	79%	67	-14%
Taylor County	348	2%	63	3%	23	667%	5	--
Tom Green County	445	-16%	88	31%	33	450%	**	--
Travis County	4,019	-3%	1,310	96%	236	55%	38	15%
Webb County	789	6%	156	333%	70	250%	**	--
Wichita County	298	-13%	94	92%	15	36%	**	--
Williamson County	1,240	37%	305	193%	30	30%	**	--
Texas	85,974	6%	23,070	8%	5,080	76%	1071	3%

ABOUT US

Healthy Futures of Texas is a statewide nonpartisan, non-profit organization committed to improving the wellbeing of young Texans through equitable access to sexual health education, contraception, and resources.

We address the increasing barriers that young people in Texas face to obtain quality sex education and access to contraception and preventative sexual healthcare, promoting a healthier future for all Texans.

 [Learn more at hftx.org.](https://hftx.org)

OUR PILLARS

**ADVOCACY****AWARENESS****HEALTH
EDUCATION****RESEARCH****TRAINING AND
TECHNICAL
ASSISTANCE****DATA SOURCES**

Page 1: All data are Healthy Futures of Texas analysis of Natality Data from CDC Wonder, accessed at <https://wonder.cdc.gov/natality.html>. Data shown are final 2023 rates.

Page 2: Large County data are from Natality Data from CDC Wonder, accessed at <https://wonder.cdc.gov/natality.html>. Teen birth counts of small counties shown in map were provided via email by Texas DSHS. Teen birth rates were calculated using Vintage 2023 postcensal single-race estimates of the resident population, accessed at <https://www2.census.gov/programs-surveys/popest/datasets/2020-2023/counties/asrh/>

Page 3: Healthy Futures of Texas analysis of Natality Data from CDC Wonder, accessed at <https://wonder.cdc.gov/natality.html>. Maternal morbidity includes Maternal Transfusion, Third or Fourth Degree Perineal Laceration, Ruptured Uterus, Unplanned Hysterectomy, or Admission to Intensive Care Unit.

Page 4: Healthy Futures of Texas analysis of Natality Data from CDC Wonder, accessed at <https://wonder.cdc.gov/natality.html>; Healthy Futures analysis of CDC Wonder Provisional Natality, 2023 through Last Month, accessed at <https://wonder.cdc.gov/natality-expanded-provisional.html>

Page 5: Non Medical drivers of Health definition from Texas HHS. Percent of children with ACES from <https://sph.uth.edu/research/centers/dell/legislative-initiatives/docs/2022/ACES-Report-102622.pdf>. Percent of children in poverty from US Census Bureau Small Area Income and Poverty Estimates (SAIPE) Program. Percent of children and youth uninsured from American Community Survey, S2701 Selected Characteristics of Health Insurance Coverage in the United States, 5 year estimates. Sex Education public opinion polling from <https://hftx.org/wp-content/uploads/2023/05/Updated-Branding-Public-Opinion-Poll-Results.pdf>

Page 6 - 7: All STI data from NCHHSTP AtlasPlus, <https://www.cdc.gov/nchhstp/about/atlasplus.html>

RESOURCES



Services for Districts, Schools, Parents and Guardians, and Students

The effective implementation of health curriculum standards can ensure that nearly every student in Texas receives accurate, evidence-based information on contraception, STI prevention, and healthy relationships.

School-based sex education is vital for supporting adolescent health. While families play a crucial role in guiding their children's education, collaboration between schools and families enhances students' knowledge and skills. For many, school-based sex education is their primary source of essential information.

The **Texas is Ready** program supports by providing technical assistance to navigate complex state laws, access quality curricula, and strengthen School Health Advisory Councils. However, many districts still face challenge, including insufficient teacher training and difficulties with parent notification and consent, which strain limited resources.

HOW TEXAS IS READY CAN HELP



Districts

We support school districts by connecting them with reputable curriculum publishers and offering essential training on TEKS updates and statutory compliance. We provide guidance on the roles and responsibilities of School Health Advisory Councils (SHACs) and school boards, as well as assistance in selecting evidence-based curricula tailored to the unique needs of their students and communities.



Schools and Charters

We help schools and charters by linking them to valuable curriculum resources and providing education on TEKS updates and compliance requirements. Our support includes guidance on effective SHAC operations and the selection of evidence-based curricula that address the specific needs of their student populations.



Parents and Communities

We connect parents and caregivers to educational programs that empower them to engage effectively in their children's health education. We provide resources that help families support their children's health and collaborate with schools on sexual health education initiatives.



Students

We assist in selecting and implementing inclusive sexual health education curricula that meet the diverse needs of all students, including those with disabilities and youth in care systems. Our aim is to ensure that every Texas youth receives high-quality sexual health education, raising awareness of disparities and providing targeted training in collaboration with experts.

iCHAMPSS 2.0

www.ichampss.org

★ **9th** highest teen birth rate¹

★ **3rd** highest teen pregnancy rate¹

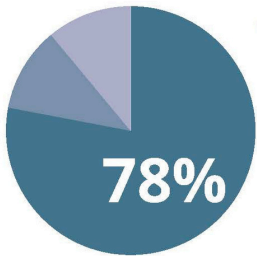
★ Tied for highest percentage of repeat teen births¹ **17%**

2022 iCHAMPSS 2.0

Usability Results (n=9)

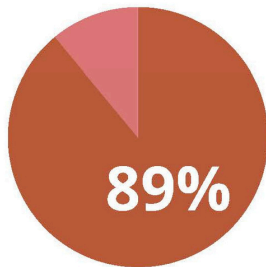


100% of people would use iCHAMPSS **again**



*of people think the information they got from iCHAMPSS will help their district **adopt** and **implement** evidence-based programs*

*of people think the information they got from iCHAMPSS was **accurate** and **trustworthy***



What people had to say about iCHAMPSS...

"It's a complete one stop with all the info."

"Selecting human sexuality curriculum can be challenging and it's nice to have a reliable, reputable resource!"

"It prioritizes the goals of SHACs and provides guidance in supporting the case for sexual health education. "

2014

iCHAMPSS 1.0

With CDC funding, an implementation strategy was built to help Texas school stakeholders adopt, implement, and maintain effective programs for sexual health education. iCHAMPSS includes a staging tool to gain a better sense of where your school/school district is in the process, which CHAMPSS step to focus on, and what tools are most useful. It features over 50 tools including CHAMPSS Step Overviews, Success Stories, Facts & Tips Sheets, Helpful Links, and Templates.

2020

Texas Education Code laws change

The Texas Board of Education updated the state's sexual health curriculum standards and the state legislature changed the statute related to the approval process for sex ed.

2021

Healthy Futures of Texas - UTHealth Partnership

This collaboration was used to begin the revamp of iCHAMPSS to help school districts navigate these new policies while minimizing controversy through the Houston Endowment. All of the iCHAMPSS tools have been updated to reflect current policies.

2022

Testing of iCHAMPSS 2.0

A usability test (n=9) was conducted with favorable outcomes and recognition of the need for iCHAMPSS 2.0. Pilot testing is expected to take place Fall 2022.

For more information about iCHAMPSS, please contact **Laura Thormaehlen, iCHAMPSS Research Coordinator** at laura.c.thormaehlen@uth.tmc.edu

iCHAMPSS Principal Investigators: Melissa Peskin (Lead), PhD, Belinda Hernandez, PhD, Christine Markham, PhD, Ross Shegog, PhD, Paula Cuccaro, PhD, Marie Brault

¹. Power to Decide: the campaign to prevent unplanned pregnancy. National and State Data. Texas. 2020. Available at: <https://powertodecide.org/what-we-do/information/national-state-data/texas>. Accessed October 19, 2022.



Resource Guide for Texas Independent School Districts



Is your district ready to **launch?**



Visit TexasReady.org
to request services.



For inquiries email us at
azelaya@healthyfutures-tx.org

www.TexasReady.org