



Analysis of State Health Education Laws

ILLINOIS SUMMARY REPORT

Overview

State laws and regulations in health education serve as a foundation to drive school-based programs and instruction. Well-designed and well-implemented sexual health education programs have been shown to reduce student risky sexual behaviors and improve health-related behaviors and outcomes. The following report provides a snapshot of **Illinois** laws and regulations and school health policies and practices related to sexual health education, HIV prevention education, STD prevention education, and sexual health risk behaviors among **Illinois** high school students.

Illinois health education laws and regulations were analyzed across three topics of instruction (sexual health education, HIV Prevention, and STD Prevention) and a variety of characteristics related to curriculum and instruction. These characteristics were identified by researchers as potential facilitators for successful programs. The law and regulation data presented only indicate the presence or absence of a particular component related to health education and may not accurately reflect practice within the state.

Illinois Law Facts

- Local Education Agencies have the authority to choose or approve curriculum for sexual health education, HIV Prevention, and STD Prevention instruction.
- Parents/Guardians must be provided the opportunity to Opt-out students from sexual health education, HIV Prevention, and STD Prevention instruction.
- Instruction regarding contraception is required for sexual health education, HIV Prevention, and STD Prevention.
- Abstinence is a required topic of instruction for sexual health education, HIV Prevention, and STD Prevention.

Core Topics Addressed in Illinois Law

Topic of Instruction	Level of Requirement
Sexual Health Education	Required
HIV Prevention	Required
STD Prevention	Permitted*

*Certain curriculum elements are required if instruction provided.

Presence of Evidence Based Components

Common Attributes of Effective School-Based Sexual Health Education	Included in Law(s) <i>Topic of Instruction</i>
Curriculum is delivered by trained instructors	Optional <i>HIV Prevention</i>
Parental/Stakeholder Involvement. Parents and/or other key stakeholders are involved in the review, development, and/or approval of curriculum	Required <i>Sexual Health Education, HIV Prevention and STD Prevention</i>
Curriculum follows Federal or National Standards, Guidelines, and/or Recommendations	Not included in laws
Curriculum is appropriate for age or developmental stage	Required <i>Sexual Health Education, HIV Prevention and STD Prevention</i>
Curriculum is medically accurate	Required <i>Sexual Health Education, HIV Prevention and STD Prevention</i>
Instruction is sequential across grade levels	Not included in laws
Curriculum includes instruction on strategies or skills	Not included in laws



Centers for Disease Control and Prevention
National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention

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School Health Policies and Practices in Illinois



70% of secondary schools provided those who teach sexual health education with strategies that are age-appropriate, relevant, and actively engage students in learning



99% of secondary schools taught how HIV and other STDs are transmitted in a required course during grades 9, 10, 11, or 12

Percent of secondary schools in Illinois in which teachers tried to increase student knowledge on...



Human Sexuality



HIV Prevention



STD Prevention

Risk Behaviors Among Illinois High School Students



Have had sexual intercourse with ≥ 4 partners



Drank alcohol or used drugs before last sexual intercourse*



Used a condom during last sexual intercourse*



In a classroom of **30** high school students in Illinois, **9** are currently sexually active, **3** ever had sex, but are not currently sexually active, **18** never had sex.

Source: School Health Profiles (Profiles), 2016. Profiles is a national survey of middle and high school principals and lead health education teachers assessing school health policies and practices in states, large urban school districts, and territories.

*Among the students in Illinois who were currently sexually active (had sexual intercourse during the 3 months before the survey).

Source: National Youth Risk Behavior Survey, 2015.

Know Your State Laws and Policies

For more information on: State laws and practices; Attributes of an effective sexual health education program; and State specific health data, visit www.cdc.gov/healthyouth/about/policy.htm