

By: Representatives Henley, Criswell,
Eubanks

To: Education

HOUSE BILL NO. 1233

1 AN ACT TO AMEND SECTIONS 37-13-171 AND 41-79-53, MISSISSIPPI
2 CODE OF 1972, WHICH ARE PROVISIONS RELATING TO THE CURRICULUM FOR
3 SEX-RELATED EDUCATION IN PUBLIC SCHOOLS; TO REQUIRE THE STATE
4 DEPARTMENT OF EDUCATION AND THE MISSISSIPPI DEPARTMENT OF HEALTH
5 TO MAINTAIN THE ESTABLISHED PROTOCOLS AND PROGRAMS IMPLEMENTED TO
6 PROVIDE CONTINUITY IN TEACHING THE APPROVED CURRICULUM AND THE
7 DISSEMINATION OF INFORMATION TO STUDENTS AND PARENTS; TO EXTEND
8 THE REPEALER ON THE PROVISION REQUIRING DISTRICTS TO ADOPT A
9 DEFINITE SEX-RELATED EDUCATION CURRICULUM TO 2019; TO BRING
10 FORWARD SECTION 37-13-173, MISSISSIPPI CODE OF 1972, FOR THE
11 PURPOSE OF POSSIBLE AMENDMENTS; TO AMEND SECTION 41-79-51,
12 MISSISSIPPI CODE OF 1972, TO REQUIRE THE JOINT LEGISLATIVE
13 COMMITTEE ON PERFORMANCE EVALUATION AND EXPENDITURE REVIEW (PEER)
14 TO CONDUCT A REVIEW OF THE EFFICACY OF THE TEEN PREGNANCY
15 PREVENTION TASK FORCE IN THE PERFORMANCE OF ITS DUTIES AND TO MAKE
16 RECOMMENDATIONS TO THE LEGISLATURE WHETHER TO DISSOLVE THE TASK
17 FORCE; TO EXTEND THE REPEALER ON THE TASK FORCE TO 2017; AND FOR
18 RELATED PURPOSES.

19 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

20 **SECTION 1.** Section 37-13-171, Mississippi Code of 1972, is
21 amended as follows:

22 37-13-171. (1) The local school board of every public
23 school district shall adopt a policy to implement abstinence-only
24 or abstinence-plus education into its curriculum by June 30, 2012,
25 which instruction in those subjects shall be implemented not later
26 than the start of the 2012-2013 school year or the local school



27 board shall adopt the program which has been developed by the
28 Mississippi Department of Human Services and the Mississippi
29 Department of Health. The State Department of Education shall
30 approve each district's curriculum for sex-related education and
31 shall maintain the established * * * protocol * * * used by
32 districts to provide continuity in teaching the approved
33 curriculum in a manner that is age, grade and developmentally
34 appropriate.

35 (2) Abstinence-only education shall remain the state
36 standard for any sex-related education taught in the public
37 schools. For purposes of this section, abstinence-only education
38 includes any type of instruction or program which, at an
39 appropriate age and grade:

40 (a) Teaches the social, psychological and health gains
41 to be realized by abstaining from sexual activity, and the likely
42 negative psychological and physical effects of not abstaining;

43 (b) Teaches the harmful consequences to the child, the
44 child's parents and society that bearing children out of wedlock
45 is likely to produce, including the health, educational, financial
46 and other difficulties the child and his or her parents are likely
47 to face, as well as the inappropriateness of the social and
48 economic burden placed on others;

49 (c) Teaches that unwanted sexual advances are
50 irresponsible and teaches how to reject sexual advances and how
51 alcohol and drug use increases vulnerability to sexual advances;



52 (d) Teaches that abstinence from sexual activity before
53 marriage, and fidelity within marriage, is the only certain way to
54 avoid out-of-wedlock pregnancy, sexually transmitted diseases and
55 related health problems. The instruction or program may include a
56 discussion on condoms or contraceptives, but only if that
57 discussion includes a factual presentation of the risks and
58 failure rates of those contraceptives. In no case shall the
59 instruction or program include any demonstration of how condoms or
60 other contraceptives are applied;

61 (e) Teaches the current state law related to sexual
62 conduct, including forcible rape, statutory rape, paternity
63 establishment, child support and homosexual activity; and

64 (f) Teaches that a mutually faithful, monogamous
65 relationship in the context of marriage is the only appropriate
66 setting for sexual intercourse.

67 (3) A program or instruction on sex-related education need
68 not include every component listed in subsection (2) of this
69 section for abstinence-only education. However, no program or
70 instruction under an abstinence-only curriculum may include
71 anything that contradicts the excluded components. For purposes
72 of this section, abstinence-plus education includes every
73 component listed under subsection (2) of this section that is age
74 and grade appropriate, in addition to any other programmatic or
75 instructional component approved by the department, which shall
76 not include instruction and demonstrations on the application and



77 use of condoms. Abstinence-plus education may discuss other
78 contraceptives, the nature, causes and effects of sexually
79 transmitted diseases, or the prevention of sexually transmitted
80 diseases, including HIV/AIDS, along with a factual presentation of
81 the risks and failure rates.

82 (4) Any course containing sex-related education offered in
83 the public schools shall include instruction in either
84 abstinence-only or abstinence-plus education.

85 (5) Local school districts, in their discretion, may host
86 programs designed to teach parents how to discuss abstinence with
87 their children.

88 (6) There shall be no effort in either an abstinence-only or
89 an abstinence-plus curriculum to teach that abortion can be used
90 to prevent the birth of a baby.

91 (7) At all times when sex-related education is discussed or
92 taught, boys and girls shall be separated according to gender into
93 different classrooms, sex-related education instruction may not be
94 conducted when boys and girls are in the company of any students
95 of the opposite gender.

96 (8) This section shall stand repealed on July 1, * * * 2019.

97 **SECTION 2.** Section 41-79-53, Mississippi Code of 1972, is
98 amended as follows:

99 41-79-53. (1) The Mississippi Department of Human Services
100 shall * * * maintain established programs to accomplish the
101 purpose of one or more of the following strategies:



102 (a) Promoting effective communication among families
103 about preventing teen pregnancy, particularly communication among
104 parents or guardians and their children;

105 (b) Educating community members about the consequences
106 of unprotected, uninformed and underage sexual activity and teen
107 pregnancy;

108 (c) Encouraging young people to postpone sexual
109 activity and prepare for a healthy, successful adulthood,
110 including teaching them skills to avoid making or receiving
111 unwanted verbal, physical, and sexual advances;

112 (d) Providing medically accurate information about the
113 health benefits and side effects of all contraceptives and barrier
114 methods as a means to prevent pregnancy and reduce the risk of
115 contracting sexually transmitted infections, including HIV/AIDS;
116 or

117 (e) Providing educational information, including
118 medically accurate information about the health benefits and side
119 effects of all contraceptives and barrier methods, for young
120 people in those communities who are already sexually active or are
121 at risk of becoming sexually active and inform young people in
122 those communities about the responsibilities and consequences of
123 being a parent, and how early pregnancy and parenthood can
124 interfere with educational and other goals.

125 (2) The State Department of Health shall develop programs
126 with the following strategies:



127 (a) To carry out activities, including counseling, to
128 prevent unintended pregnancy and sexually transmitted infections,
129 including HIV/AIDS, among teens;

130 (b) To provide necessary social and cultural support
131 services regarding teen pregnancy;

132 (c) To provide health and educational services related
133 to the prevention of unintended pregnancy and sexually transmitted
134 infections, including HIV/AIDS, among teens;

135 (d) To promote better health and educational outcomes
136 among pregnant teens; and

137 (e) To provide training for individuals who plan to
138 work in school-based support programs regarding the prevention of
139 unintended pregnancy and sexually transmitted infections,
140 including HIV/AIDS, among teens.

141 (3) It shall be the responsibility of school nurses employed
142 by local school districts implementing the program developed by
143 the State Department of Health under subsection (2) of this
144 section to carry out the functions of those strategies to promote
145 consistency in the administration of the program.

146 **SECTION 3.** Section 37-13-173, Mississippi Code of 1972, is
147 brought forward as follows:

148 37-13-173. Each school providing instruction or any other
149 presentation on human sexuality in the classroom, assembly or
150 other official setting shall be required to provide no less than
151 one (1) week's written notice thereof to the parents of children



152 in such programs of instruction. The written notice must inform
153 the parents of their right to request the inclusion of their child
154 for such instruction or presentation. The notice also must inform
155 the parents of the right, and the appropriate process, to review
156 the curriculum and all materials to be used in the lesson or
157 presentation. Upon the request of any parent, the school shall
158 excuse the parent's child from such instruction or presentation,
159 without detriment to the student.

160 **SECTION 4.** Section 41-79-51, Mississippi Code of 1972, is
161 amended as follows:

162 41-79-51. (1) There is created the Teen Pregnancy
163 Prevention Task Force to study and make recommendation to the
164 Legislature on the implementation of sex-related educational
165 courses through abstinence-only or abstinence-plus education into
166 the curriculum of local school districts and the coordination of
167 services by certain state agencies to reduce teen pregnancy and
168 provide prenatal and postnatal training to expectant teen parents
169 in Mississippi. The task force shall make an annual report of its
170 findings and recommendations to the Legislature beginning with the
171 2012 Regular Session.

172 (2) The task force shall be composed of the following
173 seventeen (17) members:

174 (a) The Chairmen of the Senate and House Public Health
175 and Welfare Committees, or their designees;



- 176 (b) The Chairmen of the Senate and House Education
177 Committees, or their designees;
- 178 (c) The Chairman of the House Select Committee on
179 Poverty;
- 180 (d) One (1) member of the Senate appointed by the
181 Lieutenant Governor;
- 182 (e) The Executive Director of the Department of Human
183 Services, or his or her designee;
- 184 (f) The State Health Officer, or his or her designee;
- 185 (g) The State Superintendent of Public Education, or
186 his or her designee;
- 187 (h) The Executive Director of the Division of Medicaid,
188 or his or her designee;
- 189 (i) The Executive Director of the State Department of
190 Mental Health, or his or her designee;
- 191 (j) The Vice Chancellor for Health Affairs and Dean of
192 the University of Mississippi Medical Center School of Medicine,
193 or his or her designee;
- 194 (k) Two (2) representatives of the private health or
195 social services sector appointed by the Governor;
- 196 (l) One (1) representative of the private health or
197 social services sector appointed by the Lieutenant Governor;
- 198 (m) One (1) representative of the private health or
199 social services sector appointed by the Speaker of the House of
200 Representatives; and



201 (n) One (1) representative from a local community-based
202 youth organization that teaches or has taught a federal or local
203 school district approved curriculum.

204 (3) Appointments shall be made within thirty (30) days after
205 July 1, 2011, and, within fifteen (15) days thereafter on a day to
206 be designated jointly by the Speaker of the House and the
207 Lieutenant Governor, the task force shall meet and organize by
208 selecting from its membership a chairman and a vice chairman. The
209 vice chairman shall also serve as secretary and shall be
210 responsible for keeping all records of the task force. A majority
211 of the members of the task force shall constitute a quorum. In
212 the selection of its officers and the adoption of rules,
213 resolutions and reports, an affirmative vote of a majority of the
214 task force shall be required. All members shall be notified in
215 writing of all meetings, the notices to be mailed at least fifteen
216 (15) days before the date on which a meeting is to be held. If a
217 vacancy occurs on the task force, the vacancy shall be filled in
218 the manner that the original appointment was made.

219 (4) Members of the task force who are not legislators, state
220 officials or state employees shall be compensated at the per diem
221 rate authorized by Section 25-3-69 and shall be reimbursed in
222 accordance with Section 25-3-41 for mileage and actual expenses
223 incurred in the performance of their duties. Legislative members
224 of the task force shall be paid from the contingent expense funds
225 of their respective houses in the same manner as provided for



226 committee meetings when the Legislature is not in session.
227 However, no per diem or expense for attending meetings of the task
228 force may be paid to legislative members of the task force while
229 the Legislature is in session. No task force member may incur per
230 diem, travel or other expenses unless previously authorized by
231 vote, at a meeting of the task force, which action shall be
232 recorded in the official minutes of the meeting. Nonlegislative
233 members shall be paid from any funds made available to the task
234 force for that purpose.

235 (5) The task force shall use clerical and legal staff
236 already employed by the Legislature and any other staff assistance
237 made available to it by the Department of Health, the Mississippi
238 Department of Human Services, the Department of Mental Health, the
239 State Department of Education and the Division of Medicaid. To
240 effectuate the purposes of this section, any department, division,
241 board, bureau, commission or agency of the state or of any
242 political subdivision thereof shall, at the request of the
243 chairman of the task force, provide to the task force such
244 facilities, assistance and data as will enable the task force
245 properly to carry out its duties.

246 (6) In order to carry out the functions and responsibilities
247 necessary to study and make recommendations to the Legislature,
248 the Teen Pregnancy Prevention Task Force shall:

249 (a) Form task force subgroups based on specific areas
250 of expertise;



251 (b) Review and consider coordinated services and plans
252 and related studies done by or through existing state agencies and
253 advisory, policy or research organizations to reduce teen
254 pregnancy and provide the necessary prenatal and postnatal
255 training to expectant teen parents;

256 (c) Review and consider statewide and regional planning
257 initiatives related to teen pregnancy;

258 (d) Consider efforts of stakeholder groups to comply
259 with federal requirements for coordinated planning and service
260 delivery;

261 (e) Evaluate the implementation of sex-related
262 educational courses through abstinence-only or abstinence-plus
263 education in local school districts throughout the state;

264 (f) Evaluate the effect of the adoption of a required
265 sex education policy on teen pregnancy rates and dropout rates due
266 to teen pregnancy on the local school district and statewide
267 levels;

268 (g) Compare and analyze data in districts adopting and
269 implementing abstinence-only education to districts adopting
270 abstinence-plus education;

271 (h) Require the Department of Health, the Mississippi
272 Department of Human Services, the Department of Mental Health, the
273 State Department of Education and the Division of Medicaid to
274 conduct a study of community programs available throughout the
275 state, and the areas wherein they are located, which provide



276 programs of instruction on sexual behavior and assistance to teen
277 parents; and

278 (i) Work through the Department of Health, the
279 Mississippi Department of Human Services, the Department of Mental
280 Health, the State Department of Education and the Division of
281 Medicaid to cause any studies, assessments and analyses to be
282 conducted as may be deemed necessary by the task force.

283 (7) The Joint Legislative Committee on Performance
284 Evaluation and Expenditure Review (PEER) shall conduct a review of
285 the Teen Pregnancy Prevention Task Force and assess the efficacy
286 of the task force in the performance of its assigned duties and
287 the productivity of recommendations presented in compliance with
288 the information required to be included in the annual report.
289 Upon completion of its review the PEER staff shall submit its
290 findings and recommendation on the task force to the Governor,
291 Lieutenant Governor, Speaker of the House and Chairmen of Senate
292 and House Education committees, which shall include a
293 determination of whether the task force should be dissolved, for
294 consideration of the 2017 Regular Session of the Legislature.

295 (* * *8) This section shall stand repealed on July 1, * * *
296 2017.

297 **SECTION 5.** This act shall take effect and be in force from
298 and after July 1, 2016.

