

Date of Hearing: April 9, 2025

ASSEMBLY COMMITTEE ON EDUCATION
Al Muratsuchi, Chair
AB 329 (Castillo) – As Introduced January 27, 2025

[This bill has been double referred to the Committee on Judiciary, and may be heard by that Committee on issues under its jurisdiction.]

SUBJECT: California Healthy Youth Act: adoption

SUMMARY: Requires that instruction on all legally available pregnancy outcomes, provided as part of comprehensive sexual health education, includes a discussion of adoption that includes a comprehensive explanation of, and information on, the types of adoption, the rights of a placing birth parent, and specific local adoption resources and support. Specifically, **this bill:**

- 1) Requires that instruction on all legally available pregnancy outcomes, as part of comprehensive sexual health education required by the California Healthy Youth Act (CHYA), include a discussion of adoption that includes a comprehensive explanation of, and information on:
 - a) The types of adoption;
 - b) The rights of a placing birth parent; and
 - c) Specific local adoption resources and support.

EXISTING LAW:

- 1) Establishes the CHYA, which requires school districts (defined to include county boards of education, county superintendents of schools, the California School for the Deaf, the California School for the Blind, and charter schools), to ensure that all students in grades 7 to 12, inclusive, receive comprehensive sexual health education and HIV prevention education. The CHYA defines “comprehensive sexual health education” for these purposes to mean education regarding human development and sexuality, including education on pregnancy, contraception, and sexually transmitted infections. Under the CHYA, the instruction is required to adhere to specified criteria, including, among other things, that students are provided with knowledge and skills for making and implementing healthy decisions about sexuality. (Education Code (EC) 51931 et seq.)
- 2) Requires that all factual information presented pursuant to the CHYA be medically accurate. (EC 51933)
- 3) Defines “medically accurate” to mean verified or supported by research conducted in compliance with scientific methods and published in peer-reviewed journals, where appropriate, and recognized as accurate and objective by professional organizations and agencies with expertise in the relevant field, such as the federal Centers for Disease Control and Prevention, the American Public Health Association, the American Academy of Pediatrics, and the American College of Obstetricians and Gynecologists. (EC 51931)

- 4) Requires, as part of that instruction, that instruction on pregnancy include an objective discussion of all legally available pregnancy outcomes, including, but not limited to, all of the following:
 - a) Parenting, adoption, and abortion;
 - b) Information on the law on surrendering physical custody of a minor child 72 hours of age or younger; and
 - c) The importance of prenatal care. (EC 51934)
- 5) States that a parent or guardian of a student has the right to excuse their child from all or part of comprehensive sexual health education, HIV prevention education, and assessments related to that education through a passive consent (“opt-out”) process. A school district is prohibited from requiring active parental consent (“opt-in”) for comprehensive sexual health education and HIV prevention education. (EC 51938)
- 6) Requires each school district to notify the parent or guardian of each student about instruction in comprehensive sexual health education and HIV prevention education and research on student health behaviors and risks planned for the coming year. Requires that the notice do all of the following:
 - a) Advise the parent or guardian that written and audiovisual educational materials used in comprehensive sexual health education and HIV prevention education are available for inspection;
 - b) Advise the parent or guardian whether the comprehensive sexual health education or HIV prevention education will be taught by school district personnel or by outside consultants. Authorizes a school district to provide comprehensive sexual health education or HIV prevention education, to be taught by outside consultants, and may hold an assembly to deliver comprehensive sexual health education or HIV prevention education by guest speakers, but if it elects to provide comprehensive sexual health education or HIV prevention education in either of these manners, requires the notice to include the date of the instruction, the name of the organization or affiliation of each guest speaker, and the rights of the parent or guardian to request a copy of specified provisions of law.
 - c) Include information explaining the parent’s or guardian’s right to request a copy of the CHYA.
 - d) Advise the parent or guardian that the parent or guardian has the right to excuse their child from comprehensive sexual health education and HIV prevention education, and that in order to excuse their child, they must state their request in writing to the school district. (EC 51938)
- 7) Requires that instruction provided by consultants and guest speakers follow the same requirements as instruction provided by teachers, including being age appropriate, factual and medically accurate, and appropriate for different kinds of students. (EC 51933)

FISCAL EFFECT: This bill has been keyed a possible state-mandated local program by the Office of Legislative Counsel.

COMMENTS:

Need for the bill. The author states, “Adoption is a valuable and often overlooked option in discussions about unplanned pregnancies. This bill ensures that students receive comprehensive education about the adoption process, including their rights and available resources, so they can make fully informed decisions about their futures.

By strengthening adoption education, we are expanding the range of options available to young people, ensuring that no one feels pressured into a decision due to a lack of information or support. This legislation promotes informed choice, fosters a culture of understanding, and empowers students with the knowledge necessary to navigate their options confidently.”

Bill would require more instruction about adoption than other legally available pregnancy outcomes. Current law requires, as part of comprehensive sexual health instruction, that instruction on pregnancy include an objective discussion of all legally available pregnancy outcomes, including, but not limited to, all of the following:

- Parenting, adoption, and abortion;
- Information on the law on surrendering physical custody of a minor child 72 hours of age or younger; and
- The importance of prenatal care.

This bill seeks to increase requirements regarding instruction on one pregnancy outcome named in the law (adoption), but not the others (parenting, abortion, newborn surrender). ***The Committee may wish to consider that*** 1) staff knows of no evidence that content related to adoption is inadequately or inappropriately taught, and 2) this bill imposes greater requirements related to adoption than the other pregnancy outcomes listed in statute.

California teachers do not have state-adopted instructional materials to teach the state’s health curriculum in grades K-8. The State Board of Education (SBE) adopts instructional materials for grades K-8 after each revision of a curriculum framework. After the revision of the Health Education Framework in 2019, the SBE scheduled an instructional materials adoption in 2020, with final consideration of programs scheduled for November 2020. While the prior adoption in 2004 yielded four adopted programs in Health, the 2020 adoption failed to produce any publisher submissions, and the adoption was cancelled.

According to the CDE, the 2020 adoption was canceled due to a lack of interest from publishers and content developers, and that “while the exact reasons are unknown, this outcome could have resulted from a small pool of K-8 schools with sufficient resources prepared and interested in purchasing health instructional materials or the controversies surrounding this subject area.”

The result of the failed adoption is that school districts are unable to purchase state-adopted materials to provide to teachers of grades K-8. These teachers are responsible for delivering instruction on topics which can be challenging to teach, including comprehensive sexual health education, substance abuse prevention, mental health, human trafficking, sexual assault, and intimate partner violence. ***The Committee may wish to consider*** that when there are no state-

adopted materials school districts must purchase materials which have not been reviewed by the state for alignment with state standards, or teachers must develop their own materials. A measure approved by this Committee on March 12th (AB 86, Boerner) would require that a new instructional materials adoption be conducted for the health curriculum.

Arguments in support. Unplanned Good writes, “Currently, adoption is often overlooked or minimally discussed in sexual education programs, leaving many students unaware of its availability, process, and associated support resources. From 17 years as ED of Unplanned Good, I can confirm for you that most people are unaware of how adoption works today and what it involves. AB 329 ensures that adoption is presented as an equal and informed option alongside parenting and other family planning choices. By integrating clear, factual, and compassionate education on adoption into existing health curricula, this bill empowers young people to make well-informed decisions about their futures.”

Arguments in opposition. Planned Parenthood Affiliates of California writes, “The CHYA requires instruction on pregnancy to specifically include ‘an objective discussion of all legally available pregnancy outcomes, including, but not limited to... parenting, abortion, and adoption.’ The CHYA intentionally requires elements of instruction that must be taught, without over-specifying subtopics. CHYA is a carefully crafted policy that directs educators to provide age-appropriate, medically accurate, and balanced instruction. Current law already ensures that adoption is explicitly discussed, so any additional prescriptive requirements around one topic area only serves to create duplication and an imbalance in the required instruction.”

Prior legislation. AB 281 (Gallagher) of the 2025-26 Session would require each local educational agency (LEA) and charter school, as part of its notification to parents and guardians about instruction in comprehensive sexual health education and HIV prevention education, to advise parents of the name and affiliation of any outside consultant who will be providing instruction.

AB 86 (Boerner) of the 2025-26 Session would require the SBE to adopt instructional materials for health education for kindergarten through 8th grade, on or before July 1, 2028

AB 2229 (Wilson), Chapter 706, Statutes of 2024, adds menstrual health to the content in comprehensive sexual health education students are required to receive once in middle school and once in high school.

AB 517 (Gallagher) of the 2015-16 Session would have required that parents be provided allowed to review materials used by outside consultants and guest speakers in comprehensive sexual health and HIV prevention education, be given the opportunity to make copies of non-copyrighted materials, and be notified of the training of outside consultants and guest speakers to instruct on these topics. This bill failed passage on the Senate Floor.

AB 329 (Weber), Chapter 398, Statutes of 2015, established the CHYA, which requires that students receive specified instruction in comprehensive sexual health and HIV prevention education.

REGISTERED SUPPORT / OPPOSITION:

Support

California Baptist for Biblical Values
California Catholic Conference
California Family Council
Concerned Women for America
Fieldstead and Company
Got Hope
Lifetime Adoption Foundation
Lighthouse Baptist Church
Traditional Values for Next Generations
Unplanned Good
14 individuals

Oppose

Planned Parenthood Affiliates of California

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