

# Maryland Health Education Legislation

This chart is not intended to replace a thorough review of each law. It is a guide for LEAs regarding the legislation affecting health education programs. All legislation listed below can be found on the [Maryland General Assembly webpage](#)

Legislation	Bill Synopsis	Local Requirements
<p><a href="#">HB 251 of 2018</a> Education – Family Life and Human Sexuality Curriculum – Boundaries and Consent</p>	<p>Beginning in the 2018/2019 school year, a county board must provide age-appropriate instruction on the meaning of “consent” and respect for personal boundaries as part of the family life and human sexuality curriculum in every grade in which the curriculum is taught in public schools in the county.</p> <p>“Consent” means the unambiguous and voluntary agreement between all participants in each physical act within the course of interpersonal relationships, including respect for personal boundaries.</p>	<ul style="list-style-type: none"> <li>• LEAs are required to include age-appropriate instruction on the meaning of consent in all family life and human sexuality curriculum.</li> <li>• LEAs will certify compliance with this statute during the COMAR certification for Health Education in 2020.</li> </ul>
<p><a href="#">SB 1060 of 2017</a> Heroin and Opioid Education and Community Action Act of 2017 (Start Talking Maryland Act)</p>	<p>The State Board of Education shall develop and implement a program of drug addiction and prevention education in the public schools. This program shall be started before the sixth grade in each public school by teachers who are trained in the field of drug education. The State Board of Education shall establish standards for determining how a teacher is considered to be “trained in the field of drug addiction and prevention education”. The program shall include instruction related to heroin and opioid addiction and prevention, including information relating to the lethal effect of fentanyl. The instruction required shall be a stand-alone program: delivered in grade bands as follows:</p> <ul style="list-style-type: none"> <li>○ Third grade through fifth grade;</li> <li>○ Sixth grade through eighth grade; and</li> <li>○ Ninth grade through twelfth grade</li> </ul>	<ul style="list-style-type: none"> <li>• Expand an existing drug addiction and prevention program in the public schools to encompass heroin, opioid, and fentanyl use.</li> <li>• A stand alone, instructional program related to heroin and opioid addiction and prevention is required in grade bands as follows:             <ul style="list-style-type: none"> <li>○ Third grade through fifth grade</li> <li>○ Sixth grade through eighth grade</li> <li>○ Ninth grade through twelfth grade</li> </ul> </li> <li>• LEAs will certify compliance with this statute during the COMAR certification for Health Education in 2020.</li> </ul>

<p><a href="#">HB 72 of 2016</a>  Education – Sexual Abuse and Assault Awareness and Prevention Program – Development and Implementation</p>	<p>The State Board of Education and certain nonpublic schools in the State are required to develop and implement a program of age-appropriate education on the awareness and prevention of sexual abuse and assault. The program must be taught by teachers who are trained to provide instruction on the awareness and prevention of sexual abuse and assault and incorporated into the health curriculum of local boards of education and nonpublic schools. The State board must adopt regulations to carry out the bill.</p>	<ul style="list-style-type: none"> <li>• LEAs are required to implement a program relating to the awareness and prevention of sexual abuse and assault.</li> <li>• LEAs will certify compliance with this statute during the COMAR certification for Health Education in 2020.</li> </ul>
<p><a href="#">HB1366 of 2014</a>  Public Schools – Cardiopulmonary Resuscitation and Automated External Defibrillator and Automated External Defibrillator Instruction (Breanna’s Law)</p>	<p>Public high school students are required to complete, as part of the health or physical education curriculum, instruction in CPR that includes hands-only CPR and the use of an AED beginning with students entering grade 9 in the 2015-2016 school year. Each county board of education has to provide instruction, as part of the health or physical education curriculum, in CPR that includes hands-only CPR and the use of an AED in every public school that enrolls student in any of the grades 9 through 12 beginning in the 2015-2016 school year.</p>	<ul style="list-style-type: none"> <li>• Each county board shall provide, as part of the health or physical education curriculum, instruction in cardiopulmonary resuscitation that includes hands-only cardiopulmonary resuscitation and the use of an automated external defibrillator in every public school that enrolls students in any of the grades 9 through 12 in the county.</li> <li>• Physical practice of the skills (using training devices) is required.</li> <li>• The program must be from AHA, ARC or approved by MSDE.</li> <li>• LEAs will certify compliance with this statute during the COMAR certification for Health Education in 2020.</li> </ul>

<p><a href="#">HB9 of 2012</a> Education – Children and Youth – Reporting of Information Concerning Student Health, Well-Being, and Growth</p>	<p>The State Board of Education is required to encourage the county boards of education to incorporate age-appropriate lessons on diabetes and its treatment and prevention into the jurisdiction’s health education curriculum. By December 1, 2012, and every five years thereafter, MSDE must report to the Governor and the General Assembly a summary of the information reported to the State Superintendent of Schools during the COMAR certification process for the financial literacy curriculum. By December 1, 2015, and every five years thereafter, MSDE must report to the Governor and the General Assembly a summary of the information reported to the State Superintendent of Schools during the COMAR certification process for the health education instruction and lessons on dating violence and diabetes.</p>	<ul style="list-style-type: none"> <li>• LEAs are encouraged to incorporate age-appropriate lessons on diabetes and its treatment and prevention into the county boards’ health education curriculum.</li> <li>• LEAs will certify compliance with this statute during the COMAR certification for Health Education. This was last completed in 2015 and will happen next in 2020.</li> </ul>
<p><a href="#">HB1401 of 2012</a> State Department of Education – Oral Health Education</p>	<p>MSDE is required to support and facilitate oral health education, including oral disease prevention and dental health promotion, in every jurisdiction and develop a process to monitor implementation of oral health education. By December 1, 2015, and every five years thereafter, MSDE must submit to the Governor and the General Assembly a summary of the information reported by MSDE to the State Superintendent of Schools during the certification of the health education State curriculum. The State Board of Education must encourage the local boards of education to incorporate age-appropriate lessons on oral disease prevention and dental health promotion into the county board’s health education curriculum.</p>	<ul style="list-style-type: none"> <li>• LEAs are to incorporate age-appropriate lessons on oral disease prevention and dental health promotion into the county boards’ health education curriculum.</li> <li>• LEAs will certify compliance with this statute during the COMAR certification for Health Education. This was last completed in 2015 and will happen next in 2020.</li> </ul>