
THIRD READING

Bill No: SB 608
Author: Menjivar (D), et al.
Amended: 3/24/25
Vote: 21

SENATE EDUCATION COMMITTEE: 5-2, 4/2/25
AYES: Pérez, Cabaldon, Cortese, Gonzalez, Laird
NOES: Ochoa Bogh, Choi

SENATE HEALTH COMMITTEE: 8-0, 4/9/25
AYES: Menjivar, Durazo, Gonzalez, Limón, Padilla, Richardson, Rubio, Wiener
NO VOTE RECORDED: Valladares, Grove, Weber Pierson

SENATE APPROPRIATIONS COMMITTEE: 5-2, 1/22/26
AYES: Caballero, Cabaldon, Grayson, Richardson, Wahab
NOES: Seyarto, Dahle

SUBJECT: Sexual health

SOURCE: Black Women, for Wellness Action Project
California School Based Health Alliance
Essential Access Health
Generation Up
Voters of Tomorrow California

DIGEST: This bill (1) prohibits public schools serving students in any grades 7 to 12, inclusive, from prohibiting certain school-based health centers from making internal and external condoms available and easily accessible to students; (2) requires the aforementioned public schools to allow condoms to be made available through the course of educational and public health programs and initiatives; (3) requires the California Department of Education (CDE) to monitor compliance with the California Healthy Youth Act (CHYA) as part of its annual compliance

monitoring of state and federal programs; (4) prohibits retailers from restricting sales of nonprescription contraception solely on the basis of age.

ANALYSIS:

Existing Law:

- 1) Establishes the CHYA, which requires local educational agencies (LEAs) to provide comprehensive sexual health and human immunodeficiency virus (HIV) prevention instruction to all students in grades 7 to 12, at least once in middle school and once in high school. (Education Code (EC) § 51933)
- 2) Authorizes an LEA to contract with outside consultants or guest speakers, including those who have developed multilingual curricula or curricula accessible to persons with disabilities, to deliver comprehensive sexual health education and HIV prevention education or to provide training for school district personnel. All outside consultants and guest speakers shall have expertise in comprehensive sexual health education and HIV prevention education and have knowledge of the most recent medically accurate research on the relevant topic or topics covered in their instruction. (EC § 51936)
- 3) Requires that pupils in grades 7 to 12, inclusive, receive comprehensive sexual health education at least once in junior high or middle school and at least once in high school. (EC § 51934)
- 4) Requires that the instruction and related instructional materials be, among other things:
 - a) Age appropriate.
 - b) Medically accurate and objective.
 - c) Appropriate for use with pupils of all races, genders, sexual orientations, and ethnic and cultural backgrounds, pupils with disabilities, and English learners.
 - d) Made available on an equal basis to a pupil who is an English learner, consistent with the existing curriculum and alternative options for an English learner pupil.
 - e) Accessible to pupils with disabilities. (EC § 51934)
- 5) Requires school districts, at the beginning of each school year, or, for a pupil who enrolls in a school after the beginning of the school year, at the time of that

pupil's enrollment, to notify the parent or guardian of each pupil about instruction in comprehensive sexual health education and HIV prevention education and research on pupil health behaviors and risks planned for the coming year. This notice shall do all of the following:

- a) Advise the parent or guardian that the educational materials used in sexual health 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 an outside consultant, as provided.
 - c) 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 LEA. (EC § 51938)
- 6) Provides that the parent or guardian of a pupil has the right to excuse their child from all or part of that education, including related assessments, through a passive consent ("opt-out") process. (EC § 51938)

This bill:

- 1) Prohibits any public school that serves pupils in any grades 7 to 12, inclusive, from prohibiting certain school-based health centers, as defined, from making internal and external condoms available and easily accessible to pupils at the school-based health center.
- 2) Requires each public school that serves pupils in any grades 7 to 12, inclusive, to allow condoms to be made available during the course of, or in connection with, educational or public health programs and initiatives, as specified.
- 3) Requires CDE to monitor compliance with the CHYA as part of its annual compliance monitoring of state and federal programs.
- 4) Prohibits a retail establishment from refusing to furnish nonprescription contraception to a person solely on the basis of age, as specified.
- 5) Clarifies that if, under subsequent provisions of federal law, a nonprescription contraception becomes subject to restrictions on the basis of age, the above prohibition shall not apply to the refusal to furnish that contraception on the basis of age.

- 6) Finds and declares that California has an interest in promoting and expanding equitable access to tools and resources that empower youth to make healthier choices and reduce the spread of sexually transmitted infections (STIs) by making condoms more accessible for young people.

Comments

Need for the bill. According to the author, “Young people should have greater access to medically accurate, unbiased sex education, and readily available health resources to protect their safety and wellbeing. SB 608 aims to address that lack of access by increasing equitable access to condoms and a comprehensive, inclusive, and age-appropriate sexual health education for California youth. When some high schools and retailers are enacting dangerous policies that deny young people the ability to protect themselves we contribute to the current STI epidemic hitting us in California. Investing in prevention is a fraction of the cost compared to the millions California spends on the treatment of STIs every year.”

California Healthy Youth Act. The CHYA was first enacted in 2003 under its previous name, the Comprehensive Sexual Health and HIV/AIDS Prevention Education Act. Originally, the act required LEAs to provide comprehensive sexual health education in any grade, including kindergarten, so long as it consisted of age-appropriate instruction and used instructors trained in the appropriate courses. In 2016, AB 329 (Weber, Chapter 398, Statutes of 2015) renamed the act as the CHYA and required LEAs to provide comprehensive sexual health education and HIV prevention education to all students at least once in middle school and at least once in high school. From its inception in 2003 through today, the CHYA has always afforded parents the right to opt their child out of a portion, or all, of the instruction and required LEAs to notify parents and guardians of this right. Parents and guardians can exercise this right by informing the LEA in writing of their decision.

This bill does not make any changes to the provisions of CHYA but rather requires CDE to monitor compliance with the requirements of existing law as part of its annual compliance monitoring of state and federal programs.

Third time's the charm? SB 608 is the third iteration of the author's efforts to expand access to contraceptives for California students, with the first and second being SB 541 (Menjivar) of 2023 and SB 954 (Menjivar) of 2024, respectively. Notably different in this iteration is the removal of a requirement for schools serving students grades 9 to 12 to make condoms available free of charge, as well as the requirement that notices and additional information about proper condom use be made available to students. The Budget Act of 2024 included a one-time

allocation of \$5 million to support the implementation of SB 954. Despite this allocation, SB 954 was vetoed by Governor Newsom, citing concerns about ongoing cost pressures that were not accounted for in the budget.

FISCAL EFFECT: Appropriation: No Fiscal Com.: Yes Local: Yes

According to the Senate Appropriations Committee:

- The bill's provisions could result in additional, unknown costs for local school districts to comply. These activities include the updating of policies and issuance of guidance regarding the availability of and how to access condoms on school campuses. Additionally, there could be one-time cost pressures for school districts to buy and install tamper-proof dispensers. It is unclear whether the Commission on State Mandates would deem these activities to be reimbursable.
- The California Department of Education indicates that any costs to monitor school compliance with the California Healthy Youth Act would be minor and absorbable within existing resources.

SUPPORT: (Verified 1/22/26)

Black Women for Wellness Action Project (co-source)

California School-Based Health Alliance (co-source)

Essential Access Health (co-source)

Generation Up (co-source)

Voters of Tomorrow (co-source)

Access Reproductive Justice

ACLU California Action

Aids Healthcare Foundation

Alameda County Office of Education

American Academy of Pediatrics, California

APLA Health

Asian Americans Advancing Justice-Southern California

Beyond Aids Foundation

California Academy of Preventive Medicine

California Latinas for Reproductive Justice

California Medical Association

California Primary Care Association

California Teachers Association

CFT- A Union of Educators & Classified Professionals, AFT, AFL-CIO

Courage California

Equality California
GLIDE
Indivisible CA: StateStrong
Latino Coalition for a Healthy California
National Center for Youth Law
National Health Law Program
Reproductive Freedom for All California
San Francisco Aids Foundation
South Asian Network
The Los Angeles Trust for Children's Health
Women's Foundation California

OPPOSITION: (Verified 1/22/26)

Lighthouse Baptist Church
Real Impact
25 Individuals

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