

Date of Hearing: August 5, 2026

ASSEMBLY COMMITTEE ON APPROPRIATIONS

Buffy Wicks, Chair

SB 608 (Menjivar) – As Amended June 22, 2026

Policy Committee:	Education	Vote:	6 - 1
	Health		12 - 3

Urgency: No State Mandated Local Program: Yes Reimbursable: Yes

SUMMARY:

This bill prohibits a local educational agency (LEA) from prohibiting a school-based health center serving a school of the LEA from making internal and external condoms available to students in grades seven to 12 and requires an LEA to allow condoms to be made available to such students in connection with educational or public health programs and initiatives.

The bill requires the California Department of Education (CDE) to monitor compliance with these provisions as part of its annual compliance monitoring of existing state and federal programs. It also prohibits a retail establishment from refusing to furnish nonprescription contraception to a person solely on the basis of their age by means of any conduct, including requiring the customer to present identification for purposes of demonstrating their age.

FISCAL EFFECT:

- 1) One-time Proposition 98 General Fund costs of an unknown but potentially significant amount, possibly in the hundreds of thousands of dollars for LEAs, collectively statewide, to update policies and notifications as necessary to reflect availability and access to condoms on campus in addition to potential costs associated with tamper-proof dispensers and storage. To the extent an LEA is already implementing such measures costs would be lower.
- 2) Minor and absorbable costs to the CDE.

If the Commission on State Mandates determines the bill's requirements to be a reimbursable state mandate, the state would need to reimburse these costs to LEAs or provide funding through the K-12 Mandate Block Grant.

COMMENTS:

- 1) **Purpose.** 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 sexually transmitted infection (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.

- 2) **Background. *Sexual Health and Education.*** AB 329 (Weber), Chapter 398, Statutes of 2016, known as the California Healthy Youth Act, requires local educational agencies 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. Parents may opt their child out of a portion, or all, of the instruction and schools are required to notify parents of this right.

As noted in the Assembly Committee on Education analysis of this bill, the Youth Risk Behavior Survey found that in 2023, an average of 21% of California's high school students reported being sexually active and 52% of those students did not use condoms during their last sexual encounter.

Previous Efforts. This bill is the third iteration of a bill regarding the provision of condoms to students in grades seven to 12. The previous two, SB 954 (Menjivar) and SB 541 (Menjivar), both of the 2023-24 Legislative Session, also required a public school to provide condoms for free to all students in grades nine to 12. Both SB 954 and SB 541 were vetoed by the Governor for cost.

- 3) **Support and Opposition.** The bill has multiple registered groups in support and opposition with proponents arguing, among other things, that condom use among young people has declined in recent years, particularly in low-income communities due to cost, while opponents argue that providing free condoms at school may have the unintended consequence of increasing STD transmission rates due to a false sense of security associated with condom use.

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