



## **A Flawed and Failed Policy: Abstinence-Only Programs**

In order to “support a strong system of public education that promotes gender fairness;” “advocate adequate and equitable funding for quality public education for all students;” protect “programs that meet the needs of girls in elementary and secondary education,” and guarantee “the separation of church and state” as well as “choice in the determination of one’s reproductive life,” all of which are principles of the American Association of University Women’s 2009-2011 Public Policy Program,<sup>1</sup> AAUW opposes federal funding for abstinence-only sex education programs.

AAUW supports the right of every woman to obtain medically accurate information about and access to safe and comprehensive reproductive health services. AAUW opposes federally funded programs that limit young people’s information and choices by promoting only abstinence. Abstinence-only programs censor information on contraception, pregnancy prevention, and sexually transmitted infections. Because the United States has the highest rate of teen pregnancy<sup>2</sup> and sexually transmitted infection in the developed world,<sup>3</sup> AAUW supports comprehensive sexuality education or “abstinence plus” programs that include information about both abstinence and contraception. Such programs are critical in helping to combat teen pregnancy and sexually transmitted infections.

### **Federally-funded Abstinence-only Programs**

Abstinence-only or abstinence-only-until-marriage initiatives are programs that teach abstinence as the only option for teenagers.<sup>4</sup> Proponents of abstinence-only programs argue against any discussion or education about contraception and safe sex, claiming “comprehensive sex-ed programs encourage contraceptive use, assuming that young people will be sexually active. The underlying message in these programs is that sexual activity is okay for teens as long as they use ‘protection.’”<sup>5</sup> However, recent studies conclude that sex education and condom availability programs in schools do not, in fact, increase sexual activity among teenagers.<sup>6</sup> Furthermore, in a report commissioned by the U.S. Department of Health and Human Services, researchers found no evidence that abstinence-only-until-marriage programs actually increased rates of sexual abstinence.<sup>7</sup>

Three federal vehicles fund abstinence-only programs: the Adolescent Family Life Act, the Personal Responsibility and Work Opportunity Reconciliation Act (more commonly known as welfare/TANF), and Community-Based Abstinence Education (formerly known as the Special Projects of Regional and National Significance—Community-Based Abstinence Education).<sup>8</sup> In comparison to the results yielded by abstinence-only programs, comprehensive sexuality education has consistently demonstrated positive results such as delayed initiation of sex, reduced frequency of sex, and increased contraceptive use.<sup>9</sup> Currently there are no federally funded programs dedicated to comprehensive sexuality education programs. In fact, federally funded abstinence-only programs are prohibited from discussing contraceptives except in the context of failure rates.<sup>10</sup>

### **AAUW's Concerns about Abstinence-Only Programs**

- Over 80 percent of abstinence-only curricula contain “false, misleading or distorted information about reproductive health.”<sup>11</sup>
- Abstinence-only programs have never been proven effective in delaying the onset of sexual activities of young people, and often result in riskier sexual behavior by teenagers.<sup>12</sup>
- While the funding for abstinence-only programs has increased in recent years, funding for family planning programs such as Title X has not kept up with increased demands for service or with inflation.<sup>13</sup>
- Abstinence-only programs promote gender stereotypes as fact. For example, one workshop manual states, “Men sexually are like microwaves and women sexually are like crockpots...a woman is stimulated more by touch and romantic words. She is far more attracted by a man’s personality while a man is stimulated by sight. A man is usually less discriminating about those to whom he is physically attracted.”<sup>14</sup>
- The U.S. is the only developed country with formal policies appropriating funds to abstinence-only programs.<sup>15</sup>
- Federally funded abstinence-only programs blur the line separating church and state through their religiously slanted teachings.<sup>16</sup>
- Abstinence-only programs contain medically inaccurate and biased language about HIV/AIDS<sup>17</sup> and condoms.<sup>18</sup>
- Abstinence-only programs have received over half a billion dollars in federal funds since 1997. The Bush administration continuously requested large increases, proposing that funding for abstinence-only programs reach \$204 million in fiscal year 2009.<sup>19</sup> While this increase was denied by lawmakers, abstinence-only programs continue. Fortunately, the Omnibus Appropriations Act passed in 2009 cut \$14 million in funding for abstinence-only programs.<sup>20</sup>

In addition, the U.S. Government Accountability Office issued a report in October 2006 that stated the efforts to ensure the scientific accuracy of abstinence-only programs has been limited. GAO stated that this was because the Administration for Children and Families does not review the education materials used in abstinence-only programs for scientific accuracy, nor require the program administrators themselves to do a review of the material.<sup>21</sup> With so much at stake, as well as the use of taxpayer dollars, it is imperative that sufficient research and oversight be done on these programs to ensure that adolescents are being provided with complete and medically accurate information.

### **AAUW Supports Comprehensive Sexuality Education**

Comprehensive sexuality education is necessary for several key reasons. First, in 2006 the teen birth rate increased for the first time in 15 years,<sup>22</sup> and rose for a second consecutive year in 2007.<sup>23</sup> Information about contraception, as well as about abstinence, is necessary to reduce the teen pregnancy rate in the U.S. Second, there is a significant correlation between poverty

and adolescent pregnancy.<sup>24</sup> Adolescent childbearing makes it increasingly difficult to attain work experience, secondary or post-secondary education, and thus economic security.<sup>25</sup> Third, only comprehensive sexuality education programs explain how women can protect themselves from sexually transmitted infections if they become sexually active. Adolescent women between the ages of 15 and 19 have the highest rates of gonorrhea and chlamydia compared to any other age/sex group.<sup>26</sup> Comprehensive sexuality education is necessary to help protect these women.

Comprehensive sexuality education has overwhelming support from the medical community. Over 140 national organizations support comprehensive sexuality education, including: American Academy of Pediatrics, American College of Obstetricians and Gynecologists, American Medical Association, American Public Health Association, National Campaign to Prevent Teen Pregnancy, National Education Association, National Medical Association, National School Boards Association, and Society for Adolescent Medicine.<sup>27</sup> AAUW is in agreement with the American Medical Association that schools should implement comprehensive, developmentally appropriate, medically accurate sexuality education programs as part of an overall health education program; such programs should include ample involvement from parents, health professionals, and other concerned members of the community.<sup>28</sup>

### **Legislation in Support of Comprehensive Sexuality Education**

AAUW supports funding for comprehensive sexuality education programs that firmly separate church and state, are medically accurate and age appropriate, and provide choice in determining one's reproductive life. AAUW's advocacy for a woman's right to safe, accessible, and comprehensive reproductive health care and information is an integral part of the organization's effort to gain equity for women in education, at work, and in all aspects of their lives.

AAUW supports legislation that tackles several key issues, including providing funding to states to provide comprehensive sexuality education and increasing funding for federal programs that provide grants for basic family planning and reproductive health care services. AAUW believes that all policymakers, regardless of their views on reproductive rights, can feel comfortable supporting this practical measure because it is an issue of accurate medical information. Abstinence-only programs have not been proven effective at preventing teen pregnancy and sexually transmitted infections and must be replaced by medically accurate comprehensive sex education that works.

### **Resources for Advocates**

It is AAUW advocates across the country who speak their minds on issues important to them that truly advance AAUW's mission. Stay informed with updates on abstinence-only policies and other issues by subscribing to AAUW's Action Network. Make your voice heard in Washington and at home by using AAUW's Two-Minute Activist to urge your members of Congress to support comprehensive sexuality education that is medically accurate and age appropriate, and provides choice in determining one's reproductive life. Write a letter to the

editor of your local paper to educate and motivate other members of your community. Attend town hall meetings for your members of Congress, or set up a meeting with your elected official's district office near you to discuss these policies. AAUW members can also subscribe to *Washington Update*, our free, weekly e-bulletin that offers an insider's view on the latest policy news, resources for advocates, and programming ideas. For details on these and other actions you can take, visit [www.aauw.org/takeaction](http://www.aauw.org/takeaction). For more information, read AAUW's related position papers on reproductive rights. You can find this and other resources on our website at [www.aauw.org](http://www.aauw.org).

### Conclusion

At a time when minors' rates of pregnancy and sexually transmitted infections threaten the lives and livelihoods of women and girls, it is short-sighted to withhold medically accurate and comprehensive information from young people. AAUW believes individuals should have complete and accurate information about their reproductive health and family planning options. Only with complete reproductive health information can young people make informed and appropriate decisions.

For more information, call 202/785-7793 or e-mail [VoterEd@aauw.org](mailto:VoterEd@aauw.org).

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<sup>1</sup> American Association of University Women. (June 2009). *2009-11 AAUW Public Policy Program*. Retrieved July 9, 2009, from [http://www.aauw.org/advocacy/issue\\_advocacy/principles\\_priorities.cfm](http://www.aauw.org/advocacy/issue_advocacy/principles_priorities.cfm).

<sup>2</sup> Will Dunham. *Teen Births Tilt Up, Unmarried Rate Hits Record*. Retrieved January 12, 2009, from <http://www.reuters.com/article/domesticNews/idUSN0561785120071205>.

<sup>3</sup> U.S. Department of Health and Human Services, Office on Women's Health, The National Women's Health Information Center. (May 2005). *Sexually Transmitted Diseases: Overview*. Retrieved January 12, 2009, from <http://www.4woman.gov/faq/stdsgen.htm>.

<sup>4</sup> The Alan Guttmacher Institute (AGI). (December 2006). *In Brief: Facts on Sex Education in the United States*. Retrieved January 12, 2009, from [http://www.guttmacher.org/pubs/fb\\_sexEd2006.html](http://www.guttmacher.org/pubs/fb_sexEd2006.html).

<sup>5</sup> Family Research Council. *Why Wait: The Benefits of Abstinence Until Marriage*. Retrieved July 7, 2009, from <http://www.frc.org/get.cfm?i=IS06B01>.

<sup>6</sup> Kirby, Douglas. (2007). *Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy and Sexually Transmitted Diseases*. Retrieved January 12, 2009, from [http://www.thenationalcampaign.org/EA2007/EA2007\\_sum.pdf](http://www.thenationalcampaign.org/EA2007/EA2007_sum.pdf).

<sup>7</sup> Mathematica Policy Research, Inc. (2007). *Impacts of Four Title V, Section 510 Abstinence Education Programs*. Retrieved January 12, 2009, from [www.mathematica-mpr.com/publications/pdfs/impactabstinence.pdf](http://www.mathematica-mpr.com/publications/pdfs/impactabstinence.pdf).

<sup>8</sup> Sexual Information and Education Council of the United States. (2007). *No More Money for Abstinence-Only-Until-Marriage Programs*. Retrieved January 12, 2009, from <http://www.nomoremoney.org/history.html>.

<sup>9</sup> Kirby, Douglas. (2007). *Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy and Sexually Transmitted Diseases*. Retrieved January 12, 2009, from [http://www.thenationalcampaign.org/EA2007/EA2007\\_sum.pdf](http://www.thenationalcampaign.org/EA2007/EA2007_sum.pdf).

<sup>10</sup> Sexual Information and Education Council of the United States. "No More Money for Abstinence-Only-Until-

Marriage Programs.” (2005). Retrieved January 12, 2009, from <http://www.nomoremoney.org/reality.html>.

<sup>11</sup> U.S. House of Representatives Committee on Government Reform—Minority Staff Special Investigations Division. (December 2004). *The Content of Federally Funded Abstinence-Only Education Programs*, prepared for Rep. Henry A. Waxman. Retrieved January 12, 2009, from <http://www.democrats.reform.house.gov/Documents/20041201102153-50247.pdf>.

<sup>12</sup> Kirby, Douglas. (2007). *Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy and Sexually Transmitted Diseases*. Retrieved January 12, 2009, from [http://www.thenationalcampaign.org/EA2007/EA2007\\_sum.pdf](http://www.thenationalcampaign.org/EA2007/EA2007_sum.pdf).

<sup>13</sup> National Family Planning and Reproductive Health Association. (2007). *Family Planning Facts*. Retrieved January 12, 2009, from [http://www.nfprha.org/main/family\\_planning.cfm?Category=Main&Section=Main](http://www.nfprha.org/main/family_planning.cfm?Category=Main&Section=Main).

<sup>14</sup> Sexuality Information and Education Council of the United States. (August 2005). *In Their Own Words: What Abstinence-Only-Until-Marriage Programs Say*. Retrieved January 12, 2009, from [http://www.siecus.org/policy/in\\_their\\_own\\_words.pdf](http://www.siecus.org/policy/in_their_own_words.pdf).

<sup>15</sup> Boonstra, Heather. (February 2002). *Guttmacher Report on Public Policy. Teen Pregnancy: Trends and Lessons Learned*. Retrieved January 12, 2009, from <http://www.guttmacher.org/pubs/tgr/05/1/gr050107.pdf>.

<sup>16</sup> American Civil Liberties Union. (June 2008). *Abstinence-Only-Until-Marriage Programs Censor Vital Health Care Information*. Retrieved January 12, 2009, from <http://www.aclu.org/reproductiverights/sexed/12670res20070822.html>.

<sup>17</sup> U.S. House of Representatives Committee on Government Reform—Minority Staff Special Investigations Division. (December 2004). *The Content of Federally Funded Abstinence-Only Education Programs*, prepared for Rep. Henry A. Waxman. Retrieved January 12, 2009, from <http://www.democrats.reform.house.gov/Documents/20041201102153-50247.pdf>.

<sup>18</sup> Sexuality Information and Education Council of the United States. (August 2005). *In Their Own Words: What Abstinence-Only-Until-Marriage Programs Say*. Retrieved January 12, 2009, from [http://www.siecus.org/policy/in\\_their\\_own\\_words.pdf](http://www.siecus.org/policy/in_their_own_words.pdf).

<sup>19</sup> NARAL Pro-Choice America Foundation. (March 2009). *Abstinence-Only Programs: Ideology over Science*. Retrieved November 19, 2007, from <http://www.prochoiceamerica.org/assets/files/Sex-Ed-Ab-Only-Ideology.pdf>.

<sup>20</sup> American Civil Liberties Union (March 11, 2009). *Omnibus Appropriations Bill Advances Reproductive Health Care: Legislation Reduces Funding for Failed Abstinence-Only Programs*. Retrieved April 14, 2009, from <http://www.aclu.org/reproductiverights/sexed/39001prs20090311.html>.

<sup>21</sup> Government Accountability Office. (October 2006). *Abstinence Education: Efforts to Assess the Accuracy of and Effectiveness of Federally Funded Programs*. *GAO Highlights*, GAO-07-87. Retrieved January 12, 2009, from <http://www.gao.gov/new.items/d0787.pdf>.

<sup>22</sup> Centers for Disease Control and Prevention. (December 5, 2007). *Births: Preliminary Data for 2006. National Vital Statistics Reports, 56(7)*. Retrieved January 12, 2009, from [http://www.cdc.gov/nchs/data/nvsr/nvsr56/nvsr56\\_07.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr56/nvsr56_07.pdf).

<sup>23</sup> Erik Eckholm. '07 U.S. Births Break Baby Boom Record. Retrieved April 14, 2009, from [http://www.nytimes.com/2009/03/19/health/19birth.html?\\_r=1](http://www.nytimes.com/2009/03/19/health/19birth.html?_r=1).

<sup>24</sup> The National Campaign to Prevent Teen Pregnancy. (2005). *The 'What If' Project*. Retrieved January 12, 2009, from <http://www.thenationalcampaign.org/national-data/the-what-if-project.aspx>.

<sup>25</sup> Klein, Jonathan D. and the Committee on Adolescence. (2005). *Adolescent Pregnancy: Current Trends and Issues*. *Pediatrics*, 116, 281-286. Retrieved January 12, 2009, from <http://pediatrics.aappublications.org/cgi/reprint/116/1/281.pdf>.

<sup>26</sup> Centers for Disease Control and Prevention. (2009). *Trends in Reportable Sexually Transmitted Diseases in the United States, 2007*. Retrieved on July 7, 2009, from <http://www.cdc.gov/STD/stats07/trends.htm>.

<sup>27</sup> Sexual Information and Education Council of the United States. (2007). *The National Coalition to Support Sexuality Education Coalition Members*. Retrieved January 12, 2009, from <http://www.ncse.org/organizations.html>. National Education Association. (2007). *NEA 2007-2008 Resolutions, B-47 Sex Education*. Retrieved January 12, 2009, from <http://aeaonline.org/news/pdf/NEA%20Resolutions.pdf>. The National Campaign to Prevent Teen Pregnancy. *Our Mission*. Retrieved January 12, 2008, from <http://www.thenationalcampaign.org/about-us/our-mission.aspx>.

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