Sex, Money, and Politics:
An Analysis of United States Federal Funding for Domestic Abstinence-Only and
Comprehensive Sex Education Programs, 1981-2010

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Abstract

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Sex education is a divisive issue in the United States, seemingly split into two dichotomous curricular camps: abstinence-only-until-marriage education and comprehensive sex education. The federal government began funding abstinence-only education exclusively in 1981, and this funding steadily increased until 2010 when the Obama administration cut all discretionary funding for abstinence-only education programs and began supporting comprehensive sex education. This study will examine the federal government’s role in sex education program policy and the curricula themselves in order to analyze why the federal government has
predominantly supported abstinence-education and why comprehensive education has received support from policymakers and the public, but not federal financial support. On the surface, sex education might seem like another contentious issue between the political right and left; however, abstinence-only and comprehensive sex education are more ideologically complex than simply censoring or providing information to students on birth control methods. After comparing and contrasting the goals, content, outcomes, and critiques of these two curricula, this study will conclude by theorizing about an alternative option to both abstinence-only and comprehensive sex education using multicultural education scholar James A. Banks’ notion of transformative education.
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Introduction

Currently, the United States has the highest rate of teen pregnancies of any industrialized nation (52.4 pregnancies per 1,000 pregnancies in 2011), and many of these pregnancies are unplanned and non-marital.1 According to the Guttmacher Institute, while teenagers currently first become sexually active at an average of 17 years, the number of youth becoming sexually active rapidly increases from 15-19 years of age, with the percentage of sexually active teenagers rising from 16% at age 15 to over 60% at age 19.2 Additionally, “over half of the twenty million new STDs reported each year were among young people between the ages of 15-24.”3 As sex education continues to be one of the main interventions used by local, state, and federal governments to address these issues, these statistics demonstrate the continued importance of the debate over sex education curricula in public schools.

Currently, sexual health education curricula in the United States varies widely.4 As of April 1, 2017, 24 states and the District of Columbia mandate sex education, only 13 states require that the instruction be medically accurate, and only eight states “require that the program must provide instruction that is appropriate for a student’s cultural background and not be biased against any race, sex, or ethnicity.”5 Only 13 states require discussion of sexual orientation, and four of these states require “only negative information” on same-sex relationships to be taught to students.

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1 “American Teens’ Sexual and Reproductive Health,” Guttmacher Institute, September 2016.
2 Ibid.
4 See the appendix for a state-by-state comparison of sex education, provided by the Sexuality Information Education Council of the United States.
5 “General Requirements: Sex Education and HIV Education,” Guttmacher Institute, April 2017.
students. Instruction differs at the district level as well. Local school communities decide the amount of time spent on curriculum, what topics are covered, and if parents can opt-out their students from participating. In fact, currently more states (36) allow parents to remove their children from instruction than require instruction in the first place (24). These statistics do not take into account the wide variety of curricular offerings in charter, private, independent, and parochial schools.

The current curricular debate is between abstinence-only-until-marriage education (AOUME) and comprehensive sexual health education (CSE). AOUME focuses on promoting abstinence, heterosexual marriage, and adoption, and avoids discussing contraception, abortion, and homosexuality. According to the Sexuality Information Education Council of the United States (SIECUS), CSE includes “medically accurate information on a broad set of topics related to sexuality including human development, relationships, decision-making, abstinence, contraception, and disease prevention.” Both curricula have a strong biological focus, and cover puberty and the anatomical features of men and women. Additionally, both curricula are risk-focused and aim to reduce the number of unplanned teenage pregnancies and sexually transmitted diseases, specifically HIV/AIDS.

While sex education has been a part of the United States for over a century, the current curricular debate between AOUME and CSE started in the 1980s when the federal government officially began promoting AOUME, and intensified in the 1990s and early 2000s, as the

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6 “General Requirements: Sex Education and HIV Education.”

7 Ibid.

Religious Right continued to gain influence in politics. Why did the government begin promoting AOUME in the 1980s? Why have abstinence centered programs received more federal funding than comprehensive programs? What are the possible behavioral and social implications of this emphasis for students? This thesis will focus on the United States government’s financial support for both AOUME and CSE from 1981 to 2010. Chapter one will provide a historical and historiographical overview and interpretation of the federal government’s involvement in and funding of AOUME and CSE programs from fiscal year (FY) 1981 to FY 2010. Chapter two will compare the underlying assumptions, topics, goals, outcomes, and critiques of both AOUME and CSE. Chapter three will investigate and expand upon scholarly opinions about the success of AOUME, and the reliance of both AOUME and CSE on specific notions of adolescent sexuality. Finally, this thesis will conclude by theorizing about what a transformative, democratic sex education could look like.
Chapter 1: A Historical and Historiographical Overview

1.1 Early Sex Education

Even though sex education as a course offering in public schools is a relatively modern phenomenon, sex education has been a topic of debate for over a century. While policymakers debate the minutia of sex education curricula such as the inclusion of information about contraceptives, a majority of the recent sex education scholarship, whether historical, sociological, or educational, focuses predominantly on the cultural and political sex education debates. These studies have used sex education to investigate larger questions about adolescent sexuality, religion and government, the role of the family, and American politics.

Three major historical overviews of sex education, Jeffrey P. Moran’s *Teaching Sex: The Shaping of Adolescence in the 20th Century* in 2000, Kristen Luker’s *When Sex Goes to School: Warring Views on Sex and Sex Education Since the Sixties* in 2006, and Jonathan Zimmerman’s *Too Hot to Handle* in 2015, all begin their studies with the Progressive era, 1890-1920. Moran’s *Teaching Sex* begins with the coining of the term “adolescent” by G. Stanley Hall in 1904, and traces the evolution of this concept to investigate why Americans looked to public schools to manage sexuality and why adult fears of sexuality are so pervasive within debates on sex education and other aspects of society.\(^9\) Luker, a sociologist, uses the history of education combined with two decades of interviews with parents in four distinct communities to demonstrate how the current dichotomous political positions in the sex education debates have deep historical roots.\(^10\) Most recently, in the first ever international history of sex education,

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Zimmerman focuses on the rise and growth of sex education globally in order to demonstrate why opposition to sex education has increased despite an overall liberalization of sexual beliefs.\textsuperscript{11}

The onset of the 20\textsuperscript{th} century brought many changes due to industrialization, urbanization, and increased immigration, accompanied by an increased interest in organized sex education. As Americans moved from farms to cities, Progressive-era reformers thought that society’s morals, and specifically people’s sexual morality, was on the decline. In 1913, the American Social Hygiene Association (ASHA) was the first group to champion sex education.\textsuperscript{12} According to Moran, social hygienists were fueled by a “middle class fear of a changing moral and social order,” and thought that the “epidemics” of venereal diseases and prostitution represented a “breakdown of a sexual code that had been central to Victorian responsibility.”\textsuperscript{13} Social hygienists and other middle and upper class reformers, similar to Eugenicists, were worried of being “swamped by inferior races” and felt as if they needed to defend White, upper-class women, the family, the race, and “the survival of society as they knew it.”\textsuperscript{14} These reformers encouraged strict self-discipline as a solution to societal ills such as prostitution, venereal diseases, drug use, illegitimate births, and rising divorce rates.\textsuperscript{15} These early forms of sex education were targeted towards teaching adults the “proper” uses of sexuality in line with upper-middle class values and mainly existed through efforts such as pamphlets and lectures.


\textsuperscript{12} Luker, When Sex Goes to School, 38.

\textsuperscript{13} Moran, Teaching Sex, 29.

\textsuperscript{14} Ibid., 28-29.

\textsuperscript{15} Luker, When Sex Goes to School.
According to Moran, the initial turn towards educating children about sex also started at the turn of the 20\textsuperscript{th} century. As modern city life was viewed as a hindrance to “the family’s ability to pass on a fund of moral knowledge,” and as an example of “a loss of communal social control...[where] neither the structure of the church nor the internal moral voice of the parents nor the censure of the community seemed equal to the forces of modern living.”\textsuperscript{16} In addition, reformers began to turn their focus towards younger children because adults were seen as beyond redemption. As school attendance increased alongside the view that schools were an authority that could provide moral instruction, many reformers believed that schools could offer consistent, self-sustaining sex education without too much publicity.\textsuperscript{17} Even though the U.S. education system is highly decentralized, Zimmerman stated that many educators relied upon the same lectures and pamphlets produced by the ASHA (\textit{Keeping Fit} for boys and \textit{Happy Healthy Womanhood} for girls), thereby generating “an informal national curriculum about sex.”\textsuperscript{18}

Chicago Schools were the first public school district to attempt to formally include sex education into the curricula when superintendent Ella Flagg Young publically promoted a course that contained a series of three purity lectures on biology and physiology, personal sexual hygiene, and venereal diseases to be given by physicians at each of Chicago’s twenty-one high schools.\textsuperscript{19} These lectures were quickly and successfully protested by the Catholic Church, thus ending sex education’s formal entry into public schools. Many schools remained hesitant to break the conspiracy of silence around youth and sex. This created what Moran deems sex education’s defining dilemma, the “tension between teaching young people proper information

\textsuperscript{16} Moran, \textit{Teaching Sex}, 33.

\textsuperscript{17} Ibid., 37.

\textsuperscript{18} Zimmerman, \textit{Too Hot to Handle}, 18-19.

\textsuperscript{19} Moran, \textit{Teaching Sex}, 52.
about sex before their minds were thoroughly debauched and avoiding the possibility that this education would itself arouse precocious interest in sexual matters. ”

Sex education continued to remain a privately funded issue until the U.S. federal government officially became involved in World War I and the spread of venereal diseases increased. Public health historian Alexandra M. Lord in her 2010 book *Condom Nation: The U.S. Government’s Sex Education Campaign from World War I to the Internet* chronicles the U.S. Public Health Service’s sex education efforts and their struggle to balance cultural and public health concerns. Lord details how the Public Health Service’s partnerships and promotional tactics aggravated tensions between multiple levels of government, increased controversies about sexual behaviors, and exacerbated public fears about the federal government’s role in sex education.  

According to Lord, this initial education project during World War I was mostly targeted at draftees, and included lectures, posters, pamphlets, stereomotographs, and films like *Fight to Win*, a movie about soldiers and their encounters with prostitutes.  

These early sex education campaigns often emphasized the power of using masculine strength and self-control to overcome sexual desire in order to reduce prostitution, pornography, masturbation, and the spread of venereal diseases.  

From World War I to the 1960s, sex education experienced two major shifts. In the late 1940s and early 1950s, sex education transformed into “family life education,” which focused on promoting gender-specific behaviors, parenting responsibilities, and a precise notion of the

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22 Ibid.
family that coincided with white, heterosexual, middle-class cultural norms. However, notions of sexuality and the family changed rapidly with the sexual revolution of the 1960s and 1970s, as the link between sex and reproduction was severed due to the legalization and increased availability of contraception and abortion. Sex education also began focusing on personal choice. Groups like Planned Parenthood and SIECUS, which was founded in 1964 and was the first national organization to support sexuality education, began creating curricula that focused more on risk reduction rather than completely denouncing all sexual activity that occurred out of wedlock. Even the federal government shifted its sex education battleground from disease prevention to teen pregnancy prevention, creating a new relationship between the government and American families.

According to Zimmerman, in the 1980s support for sex education in public schools expanded rapidly in America, Europe, and across the globe due to the fear associated with the discovery of AIDS. In fact, by 1979, 90% of American schools offered sex education; however, most of these curricula rarely moved beyond basic biology. While at first HIV/AIDS curricula was more “indicative of a comprehensive sexuality education approach,” groups began “demonizing targeted risk groups” such as prostitutes and gay men and promoting HIV/AIDS as “just retribution and a sign of God’s wrath for the sexual depravity produced by the sexual

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23 Moran, Teaching Sex.
24 Luker, When Sex Goes to School.
25 Lord, Condom Wars.
26 Zimmerman, Too Hot to Handle.
27 Ibid., 15.
revolution in the 1960s and 1970s.” Conservative organizations changed their tactics and instead of opposing sex education, championed “a new so-called morally superior version of sexuality education.” Thus, the main debate on whether or not sex education should be in schools seemingly ended, and a new debate emerged: what type of sex education schools should offer. The 1980s saw the rise of abstinence-only-until-marriage education (AOUME), as the Religious Right gained prominence and focused on promoting family values and reinforcing rigid gender roles.

With support from the Religious Right, and a Republican-majority Congress, the Reagan administration was able to begin funding for AOUME in 1981 with the passage of the Adolescent Family Life Act (AFLA) which promoted chastity and channeled funding away from organizations such as Planned Parenthood to many religious organizations and other conservative groups. The federal government’s emphasis on AOUME would only increase with the Clinton and Bush administrations, even as many curricula were critiqued by numerous policy makers for not decreasing pregnancy or STD rates, for providing false, inaccurate, and discriminatory information to students. In 2010, the Obama administration slowly withdrew federal financial support for AOUME programs and began to support comprehensive sex education (CSE) programs instead.

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29 Ibid.

30 Moran, Teaching Sex.

31 Lord, Condom Wars.

32 Since AOUME curricula assume all students are heterosexual and not sexually active, numerous scholars have claimed that the curricula are discriminatory against LGBTQ and sexually active students. These claims will be elaborated on within Chapter 2.
Janice M. Irvine in her 2002 book about the discursive politics of sex education, *Talk About Sex: The Battles over Sex Education in the United States*, Kristen Luker, and Canadian sex education researcher Alexander McKay in *Sexual Ideology and Schooling: Towards Democratic Sexuality Education* all claim that the 1960s were the start of the current dichotomous positions within the sex education debate, as the sexual revolution firmly divided Americans on issues related to sexuality, marriage, and reproductive rights. While Luker and McKay state that a stalemate exists between the two sides due to their distinct oppositional ideas about human nature and society, Irvine argues that the conservative side has been and remains victorious in these debates due to their success in promoting fear-based rhetoric that coincides with Americans’ anxieties about adolescent sexuality. The fear of adolescent sexuality is also featured prominently in Judith Levine’s 2002 controversial work *Harmful to Minors: The Perils of Protecting Children from Sex*. Levine claims that the policies and practices that Americans have enacted in the hopes of protecting children from sexuality, from consent laws to education to psychology to criminal and reproductive law are not in fact protecting children, and are actually harmful. Levine asserts that America’s fear of adolescent sexuality has limited our understanding of sexuality and children’s relationship to sex.

Additional scholarly work has focused explicitly on critiquing the curricula themselves instead of American policy and ideology, and this will be expanded upon in chapter two.

Michelle Fine transformed curriculum critique with her 1988 article, “Sexuality, Schooling, and

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35 Ibid., xxxii.
Adolescent Females: The Missing Discourse of Desire,” and continued it twenty years later with “Sexuality Education and Desire: Still Missing After All These Years,” where she states that the anti-sex rhetoric that surrounds sex education harms students, especially teenage girls and low income students of color, who are silenced, victimized, and denied agency and autonomy over their feelings and desires. Sociologists, education scholars, and feminist and queer theorists have continued this work such as Deborah Tolman, Susan Talburt, Eric Rofes, Mary Louise Rasmussen, Joan Gilbert, and James Sears, who have all critiqued sex education curricula for silencing queer and homosexual identities, limiting female agency, and providing damaging and misguided information to teens about their bodies and identities. Most recently in her 2015 book *The Sex Education Debates*, education researcher Nancy Kendall reveals differences, commonalities, and the unintended consequences of the intense political and cultural sex education battles through her extensive ethnographic research in five states with teachers, parents, and students.

From its inception to the present, sex education in the United States has been predominantly problem-focused and fear based. Starting with wartime anxieties over a changing society and the spread of venereal diseases, sex education has continued to focus on the negative consequences of sexual behaviors in an effort to remedy perceived social ills ranging from prostitution and masturbation to divorce and homosexuality. Even with changes in focus over the years, sex education continues to be seen by Americans as a driving force not only in “shaping

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37 These works and these authors’ claims will be described in Chapter 2, beginning on page 35.

[individual] sexual values and behavioral norms,” but also the “shape and direction of society itself.” 39 With these high stakes, sex education is seen as an important method for promoting specific values and behaviors and coping with an ever-changing society. This study will build upon the concluding notions put forth by both McKay and Kendall and call for a democratic sexual education that focuses more on promoting civic understanding rather than reducing pregnancy and infection rates.

While many scholars have examined the reasons for and behind the sex education debates, this study will specifically focus on recent U.S. federal financial policy by examining the laws and curricula themselves. Since 1981, the federal government has financed the majority of AOUME programs through three major funding streams: The 1981 Adolescent Family Life Act, Title V of the 1996 Welfare Reform Act, and the 2000 Community-Based-Abstinence-Education (CBAE) program.40 Despite criticism that AOUME curricula are ineffective, biased, and medically inaccurate, federal funding for AOUME has increased steadily over the past three decades (see figure 1.1). Recently, in 2010, federal financial support for AOUME programs decreased under the Obama Administration with the removal of the AFLA and CBAE. However, Title V funding was reintroduced in 2010. Advocates for CSE have not only struggled to get federal funding for their programs, but are still fighting against states who continue to provide medically inaccurate and biased sex education to students.


40 While these are the three major funding streams for AOUME, they are not only way that AOUME programs can be funded. Additional funding has been allocated in a variety of ways such as through the Healthy Marriage Initiative and Compassion Capitol Fund, HIV/AIDS and STD prevention accounts, and congressional earmarks.
1.2 Adolescent Family Life Act

The beginning of federal financial support for AOUME officially started with the Reagan administration and the passage of the 1981 AFLA. The original bill, S1090, was introduced by Senators Jeremiah Denton (R-AL) and Orrin Hatch (R-UT) as an amendment to the Public
Health Service Act of 1970. While this bill was postponed, its main provisions were incorporated into the Omnibus Budget Reconciliation Act of 1981. The AFLA was officially codified as Title XX of the Public Health Service Act without any hearings or floor votes.

Senators Denton and Hatch were both strong opponents of the Title X family planning program, specifically a 1978 amendment that added services explicitly for teenagers, because they believed it “undermined family values and promoted teen sexual activity and abortion.” Believing that the federal government was already investing too heavily in Planned Parenthood and other family planning services, they wanted to create an initiative that would strictly promote abstinence and the role of the family in the lives and reproductive choices of adolescents. The AFLA was created to address the “problems of premarital sexual relations, pregnancy, and parenthood” through the promotion of chastity, self-discipline, “family values” and adoption. The law stated that these problems were best remedied through a variety of integrated services that would heavily involve the family, religious and charitable organizations, voluntary associations, and groups in both the public and private sectors.

The AFLA was mainly focused on preserving the nuclear family in order to protect adolescents from what members of Congress viewed as the “severe adverse health social and economic consequences” of childbirth and pregnancy among unmarried adolescents. The act’s

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41 “A bill to amend the Public Health Service Act to support services and research related to adolescent pregnancy,” S.1090, 97th Congress, Congress.Gov (1981).


43 42 U.S. Code § 300z.

44 Ibid.

45 Ibid., at.
stated purpose was to find effective means “within the context of the family of reaching adolescents before they become sexually active,” and states that services encouraged by the federal government through the AFLA should “promote [the] involvement of parents.”46 In addition, the AFLA goes so far as to say that the prevention of adolescent sexual activity depends primarily on “developing strong family values and close family ties, since the family is the basic social unit in which the values and attitudes of adolescents concerning sex and pregnancy are formed.”47

In order to accomplish its goals, the AFLA authorized the Secretary of Health and Human Services to offer state grants “to support services and research relating to adolescent pregnancy and parenthood” including services such as “pregnancy testing and maternity counseling, adoption counseling, health services including prenatal and pediatric care, education and family planning, other related health, referral, and education services.”48 Two thirds of the funds were for demonstration projects, one third was for grants, and 1-3% was for evaluation; although these appropriations proportions were reversed in 1996 with the reauthorization of the act.49 The legislation explicitly stated that funds could not be used for family planning services other than counseling and referral services, and grant recipients were explicitly prohibited from providing abortions (with funds provided by the AFLA or elsewhere) and from even subcontracting “with anyone who provides abortion or advocates, promotes, or encourages promotion” of abortion services.50

46 42 U.S. Code § 300z. 10a.

47 Ibid.


49 Saul, “Whatever Happened to the Adolescent Family Life Act?”.

50 42 U.S. Code § 300z.
In regard to education services, the AFLA was focused on financing the creation of curricula that would include information about adoption and the responsibilities of parenting, and cultivate “self-discipline and responsibility in human sexuality,” in addition to developing material that would “support the role of parents as the provider of sex education.”\(^{51}\) Along with accentuating the importance of the family, the curricula and programs supported by the AFLA often had a religious emphasis. Due to the fact that the AFLA explicitly stated that grant recipients should involve community organizations in their programs, including religious groups, and “encourage[d] religious groups to become direct grantees,” many of the sex education programs were created and carried out by specific religious organizations.\(^{52}\)

For example, St. Margaret’s Hospital in Dorchester, MA received $446,806 in FY 1982 and $235,000 in FY 1983 and Catholic Charities of Arlington, Virginia received $75,000 in both FY 1982 and 1983 to create family planning curricula for youth in Catholic, public, and other parochial schools.\(^{53}\) St. Margaret’s claimed that they were not explicitly promoting religion in their programming, but their lessons were found to contain “frequent references to God and Christian love as well as discussions of Catholic philosophy and doctrine on contraception and abortion.”\(^{54}\) Catholic Charities of Virginia also assured the Department of Health and Human Services that their programs did not promote religion, but they did have sessions devoted to Catholic teachings immediately following their family life program. While St. Margaret’s and

\(^{51}\) 42 U.S. Code § 300z.


\(^{53}\) Ibid., 224, 225.

\(^{54}\) Donovan, “The Adolescent Family Life Act and the Promotion of Religious Doctrine, 224.
Catholic Charities had to maintain two separate curricula for parochial and public schools, the potential for bias remained evident.

This seemingly thin line between church and state led to the ACLU filing suit in a federal district court in October 1983 on behalf of a group of federal taxpayers, clergymen, and the American Jewish Congress claiming that the AFLA and its implementation violated the First Amendment’s establishment clause. The plaintiffs claimed that “by requiring grantees to involve religious organizations in their projects and by encouraging religious groups to become direct grantees, the law unconstitutionally [was] promot[ing] and subsidiz[ing] religion and authoriz[ing] the use of religious indoctrination as a means of opposing premarital sex, abortion, and birth control.” The case eventually made its way to the Supreme Court in 1988, where the justices reversed the District Court’s opinion that the AFLA was unconstitutional and argued instead that on its face, the law did have a secular purpose, “did not have the primary effect of advancing religion, and [did] not create an excessive entanglement of church and state.”

However, the court did remand the decision to promote further investigation into the actions of grant recipients to determine whether the law was unconstitutional in its application. Although the AFLA has continued to be criticized by legal scholars and groups such as the ACLU, it has maintained its funding stream, which steadily increased from FY 1982 to FY 2009. In FY 2010, Congress cut AOUME funding, including portions of the AFLA.

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1.3 Title V Abstinence Only Until Marriage Program

Congress revisited abstinence in conjunction with welfare reform in 1996 with the passage of the Personal Work and Responsibility and Work Opportunity Act. This second funding stream for AOUME programs became more expansive, specific, exclusive, and conservative in its direction than the AFLA. Many of the new law’s provisions “were focused on the idea that the traditional welfare system had become a disincentive to marriage and an incentive to non-marital childbearing.”\(^5^8\) In an effort to counter these trends, Congress created a new abstinence education initiative through the codification of Title V, Section 510(b) of the Social Security Act. Section 510(b) created a federal funding stream to provide grants to states for abstinence-only-until-marriage programs, and guaranteed grantees $50 million annually per year from FY 1998 to FY 2002.\(^5^9\) This program, similar to the AFLA, was enacted without public or legislative debate, and was originally administered by the Maternal and Child Health Bureau (MCHB) of the U.S Department of Health and Human Services.\(^6^0\) While Title V was originally authorized for five years, 1998-2002, it continued via resolution until 2008, was reauthorized for a year, and then allowed to expire in 2009.\(^6^1\) However, it was revived with the 2010 Patient Protection and Affordable Care Act and is authorized at $50 million a year until 2014.\(^6^2\)

\(^5^8\) Adam Sonfield and Rachel Benson Gold, “States’ Implementation of the Section 510(b) Abstinence Education Program, FY 1999” Perspectives on Sexual and Reproductive Health 33 no.4, (2001): 166. doi: https://doi.org/10.1363/3316601

\(^5^9\) 42 U.S. Code 710 § 510a

\(^6^0\) “A History of Federal Funding for Abstinence-Only-Until-Marriage Programs.”

\(^6^1\) Ibid.

\(^6^2\) Ibid.
Under Title V of the Social Security Act, states are required to match every four dollars in federal funds with three dollars in local or state funds, for a total annual public expenditure of $87.5 million.\textsuperscript{63} Besides using funds directly for providing abstinence education, the funds can also be used for “mentoring, counseling, and adult supervision to promote abstinence from sexual activity, with a focus on those groups which are more likely to bear children out of wedlock.”\textsuperscript{64} Funds are allocated to states based on a formula “related to the number of low-income children in each state” and states can directly administer the education programs or provide grants to local public entities, including faith-based organizations.\textsuperscript{65} If states choose to accept funds, they can use them or distribute them to sub-grantees such as schools, community organizations, state health departments, or media campaigns, among others.\textsuperscript{66} Similar to the AFLA, faith-based organizations are eligible for funds as long as they do not directly use government money to “teach or promote religion.”

There were two major shifts in abstinence-education that occurred with the addition of Title V funding. Whereas the AFLA was intended to prevent teenage pregnancy, Title V took a more conservative stance and promoted abstinence outside of marriage, for anyone at any age. This became more apparent in FY 2007 when new guidelines stated that the programs should focus on 12-29 year olds, whereas previous programs had focused on youth ages 9-14.\textsuperscript{67} This emphasis on aiding older youth in abstaining from sexual intercourse before marriage seemed

\textsuperscript{63} Sonfield and Gold, “States Implementation of Section 510(b).”\textsuperscript{64} 42 U.S. Code 710 § 510(b)\textsuperscript{65} Sonfield and Gold, “States Implementation of Section 510(b),” 166.\textsuperscript{66} “A History of Federal Funding for Abstinence-Only-Until-Marriage Programs.”\textsuperscript{67} Ibid.
counterintuitive given a report published by the National Center for Statistics that same year which stated by age 20, 77% of Americans had had sex, 75% of which was premarital, and by age 29, 91% of women had engaged in sexual activity.68

Title V funding also contained a more rigid definition of abstinence. In Section 510(b), Congress explicitly gives an eight-point definition of abstinence education, which governs all AOUME programs that receive federal funds, including AFLA programs (see table 1).

Table 1: Abstinence Education Definition, as codified in Title V of the Social Security Act

<table>
<thead>
<tr>
<th>(2) For purposes of this section, the term “abstinence education” means an educational or motivational program which—</th>
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<tbody>
<tr>
<td>(A) has as its exclusive purpose, teaching the social, psychological, and health gains to be realized by abstaining from sexual activity;</td>
</tr>
<tr>
<td>(B) teaches abstinence from sexual activity outside marriage as the expected standard for all school age children;</td>
</tr>
<tr>
<td>(C) teaches that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems;</td>
</tr>
<tr>
<td>(D) teaches that a mutually faithful monogamous relationship in context of marriage is the expected standard of human sexual activity;</td>
</tr>
<tr>
<td>(E) teaches that sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects;</td>
</tr>
<tr>
<td>(F) teaches that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child’s parents, and society;</td>
</tr>
<tr>
<td>(G) teaches young people how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances; and</td>
</tr>
<tr>
<td>(H) teaches the importance of attaining self-sufficiency before engaging in sexual activity. (Title V).</td>
</tr>
</tbody>
</table>

Source: 42 U.S. Code 710 § 510b

The above definition demonstrates the rigidity of the standards for Title V and AFLA program recipients. Besides claiming that in order to receive funds programs must have abstinence as its “exclusive purpose,” it also contains three specific points which reference the harmful

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physiological, psychological, and social effects of premarital sex. In addition to strictly dictating that programs must teach monogamous marriage as the only proper way to engage in human sexual activity, section 510(b) also states that programs are only allowed to discuss contraception use and methods in regards to their failure rates.\textsuperscript{69} While programs do not need to meet each part of the definition equally to receive funding, the 2007 guidelines for the program stated that funds “cannot go to programs that are “inconsistent with any aspect of the abstinence education definition.”\textsuperscript{70}

Title V programs have been critiqued by numerous federal and state reports. In 2007, a congressionally funded nine-year study by Mathematica Policy Research on four Title V programs found that none of the programs had a “beneficial impact on young people’s sexual behavior.”\textsuperscript{71} Additionally, 13 states evaluated their Title V programs and had “results ranging from finding the programs ineffective to finding them to be harmful.”\textsuperscript{72} Due to these findings, many states have declined Title V funding. California has never accepted funding, Maine declined funding in 2005 due to compliance issues with its own laws, and New Jersey declined funding in 2006 due to concerns that it would actually “require additional money to clarify partial and misinformation that’s taught.”\textsuperscript{73} By FY 2007, ten states declined funding, and by FY 2009, almost 25 had refused funding.\textsuperscript{74}

\textsuperscript{69} “A History of Federal Funding for Abstinence-Only-Until-Marriage Programs.”

\textsuperscript{70} Sonfield and Gold, “States Implementation of Section 510(b),” 167.


\textsuperscript{72} “A History of Federal Funding for Abstinence-Only-Until-Marriage Programs.”

\textsuperscript{73} Ibid.

\textsuperscript{74} Ibid.
1.4 Community-Based Abstinence Education

A third funding stream for AOUME, and the largest, was created in October 2000, the “Special Projects of Regional and National Significance – Community Based Abstinence Education” (CBAE) which gave grants directly to state and local organizations.\(^{75}\) Funding began in FY 2001 at $20 million, and by FY 2006, “increased over 450% to a total of $113 million” where it stayed until FY 2008. In FY 2009, it was cut by $14.2 million (for a total of $99 million), and CBAE was eliminated with all existing discretionary funding for AOUME programs with the Consolidated Appropriations Act of 2010.\(^{76}\)

CBAE was the most conservative of the three funding streams and also had the most federal oversight. As opposed to Title V where states had the final say, CBAE awarded grants directly to community-based organizations.\(^{77}\) Programs funded under CBAE were required to follow the eight-point definition of abstinence previously codified under Title V, and these guidelines became even more strict with CBAE. In addition to grantees agreeing not to provide participants with any positive information about contraception or safe sex information, they also could not provide this information “even in other settings and with non-CBAE funds.”\(^{78}\) The guidelines also expanded the definition of abstinence from “avoiding sexual intercourse to abstaining from all sexual activity, which refers to any type of genital contact or sexual stimulation between two persons, including, but not limited to sexual intercourse.”\(^{79}\) Not only

\(^{75}\) “A History of Federal Funding for Abstinence-Only-Until-Marriage Programs.”

\(^{76}\) Ibid.

\(^{77}\) Ibid.

\(^{78}\) Ibid.

\(^{79}\) Ibid.
would this expanded definition possibly alienate students who had previously had sexual intercourse, but also students who had ever engaged in any type of sexual activity with a partner.

CBAE also endured extensive criticism during its nine years of implementation. In December of 2004, Representative Henry Waxman (D-CA) released a report with the House Committee on Government Reform that claimed that 80% of the curricula used by CBAE contained “false, misleading, or distorted information.”80 In addition, a November 2006 report by the non-partisan Government Accountability Office “found that the Administration of Children and Families (ACF) was providing very little oversight” of the AOUME programs and that the “federal agency did not review its grantees materials for scientific accuracy or even require grantees to review their own materials for scientific accuracy.”81 Even though in 2007 the ACF specified that all materials must be medically accurate, “this requirement lacked any teeth as grantees were required to only sign as assurance saying the materials in their programs were medically accurate.”82

In a 2008 House of Representatives hearing before the Committee on Oversight and Government Reform on domestic abstinence-only programs, Rep. Henry Waxman in his opening statement claimed that as of 2008, CBAE wasted “$1.3 billion of taxpayer money” on AOUME programs according to a vast array of evidence from organizations such as the American Public Health Association, the American Academy of Pediatrics, the Society for Adolescent Medicine,


81 “A History of Federal Funding for Abstinence-Only-Until-Marriage Programs.”

82 Ibid.
and the American College of Obstetricians and Gynecologists. Representative Waxman called the CBAE a “triumph of ideology over science” that is “bad economics and worse health policy.” In response, CBAE supporters in Congress claimed that the federal government spends too much money on comprehensive sex education (even though many Congressman corrected this statement since as of FY 2008 the federal government spent $0 on CSE,), that CSE “undermines the authority of parents to provide the type of education they want kids to receive” and CSE curricula is often “highly explicit” and leads to sexual fantasies. To counteract the myriad of organizations that spoke against abstinence-only programming, these Congressman frequently cited studies by the Heritage Foundation, a conservative think tank. After rigorous debate, it was determined that CBAE programs were not producing needed results, as 17 states had already begun declining funds as of 2008. CBAE funding was eventually cut along with funding for the AFLA in FY 2010.

1.5 The Obama Administration: FY 2010

The largest budgetary cuts to federal AOUME spending occurred in FY 2010. Funds for CBAE and the AFLA officially ended in 2010, and Title V funding expired the previous year. However, in order to pass the Patient Protection and Affordable Care Act, one of the concessions made to Republican legislators was to reinstate Title V funding. Although, the guidance is more flexible than in previous years, the money used by grantees “still must teach abstinence to the

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83 Domestic Abstinence-Only Programs: Assessing the Evidence: Hearing before the Committee on Oversight and Government Reform, 110th Cong., 1-4 (2008), (opening statement by Henry A. Waxman, Representative and Chairman of the Committee).

84 Ibid., 3.

85 Ibid., (staff report, “Abstinence and its Critics,” prepared for Mark Souder, chairman of the subcommittee on criminal justice, drug policy, and human resources), 64.

86 Ibid., opening statement by Henry A. Waxman, 3.
exclusion of other topics” and funds cannot be used in ways that contradict the federal definition of abstinence. In 2010, only 30 states and Puerto Rico applied for Title V funding.

In FY 2010 and 2011, the Obama Administration provided nearly $190 million in federal funding for comprehensive sex education. The two major sources for CSE funding are the President’s Teen Pregnancy Prevention Initiative (TPPI) and the Personal Responsibility Education Program (PREP). The Consolidated Appropriations Act of 2010 included funding for TPPI, the “first federal funding stream that could be utilized for more comprehensive approaches to sex education.” While supporters of CSE were pleased to see this historical development, some criticized TPPI for focusing too exclusively on teen pregnancy and not on promoting sexually healthy behaviors for all people, notably LGBTQ youth.

Under TPPI, the U.S. Department of Health and Human Services’ Office of Adolescent Health (newly created in 2010), funds $100 million in grants to states, non-profits, faith-based organizations, American Indian/Native Alaska tribal organizations, school districts, departments of education and health, and others for a five-year period. Grants are awarded in amounts ranging from $400,000 to $4 million, and to programs that target youth aged 19 and under.

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87 “A History of Federal Funding for Abstinence-Only-Until-Marriage Programs.”

88 Ibid.

89 Ibid.

90 Funding is also designated through the CDC, specifically the CDC’s Division of Adolescent and School Health. This division works closely with public health departments and focuses specifically on HIV/AIDS prevention.


92 Ibid.

Grantees are required to “replicate programs that have been rigorously evaluated and shown to be effective at reducing teen pregnancies, sexually transmitted infections, or other associated sexual risk behaviors” by Mathematica Policy Research, Inc. In addition, another $25 million was allocated for continued research and $10 million was given to the U.S. Department of Health and Human Services and the CDC to work in conjunction to reduce teen pregnancy in high-risk communities, specifically focusing on African-American and Latino/Hispanic youth aged 15-19. Due to budgetary limits, only 100 grantees out of more than 1,000 applications were awarded in FY 2010: $75 million were awarded to 75 grantees in 32 states and D.C., $15 million in tier two funding was awarded to 19 grantees in 14 states, $9 million was used in combination with the CDC on community programming, and $10 million was used for research.

The Family Youth and Services Bureau of the ACF oversees PREP, the second major funding stream for comprehensive sex education, which was enacted as part of the ACA. The program totals $75 million per year (from 2010-2014) and includes $55 million for state grants, $10 million for innovative approaches, $3.5 million for tribes and tribal organizations, and $6.5 million for research, training, and technical assistance. The “innovative approaches” are funds for community organizations that target “youth ages 10-19 who are homeless, in foster care, live in rural areas or in geographic areas with high teen birth rates, or come from racial or ethnic minority groups,” and support pregnant mothers under age 21. Each state is allocated a

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94 “Teen Pregnancy Prevention Initiative.”
95 Ibid.
96 “History of Federal Funding for More Comprehensive Approaches to Sex Education, FY 10.”
97 Ibid.
98 “Personal Responsibility Education Program (PREP) Fact Sheet,” Family and Youth Services Bureau, 2013, 1.
minimum of $250,000 with additional funding dependent on a formula determined by the number of low-income residents residing in the state.\textsuperscript{99} In FY 2010, 43 states, including many states that have “staunchly supported an abstinence-only-until-marriage approach in the past,” D.C., and the federated states of Micronesia and Puerto Rico applied for funding.\textsuperscript{100}

The grants are awarded to state agencies for the purpose of educating “adolescents on both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections including HIV/AIDS.”\textsuperscript{101} In addition to a focus on abstinence and contraception, programs must include activities for youth who are already sexually active and must “prepare young people for adulthood” by including activities that address three or more of the following subject areas:

(i) Healthy relationships, including, marriage and family interactions.
(ii) Adolescent development, such as the development of healthy attitudes and values about adolescent growth and development, body image, racial and ethnic diversity, and other related subjects.
(iii) Financial literacy.
(iv) Parent-child communication.
(v) Educational and career success, such as developing skills for employment preparation, job seeking, independent living, financial self-sufficiency, and workplace productivity.
(vi) Healthy life skills, such as goal-setting, decision making, negotiation, communication and interpersonal skills, and stress management.\textsuperscript{102}

In addition, the programs are required to replicate evidence-based effective programs or “substantially incorporate elements of effective programs that have been proven on the basis of rigorous scientific research to change behavior, which means delaying sexual activity, increasing

\textsuperscript{99} “History of Federal Funding for More Comprehensive Approaches to Sex Education, FY 10.”
\textsuperscript{100} Ibid.
\textsuperscript{101} 42 U.S. Code 713, § 513.
\textsuperscript{102} Ibid.
condom or contraceptive use for sexually active youth, or reducing pregnancy among youth.”\textsuperscript{103} Programs are also required to be medically accurate, age-appropriate, and culturally relevant to the specific focus population.\textsuperscript{104}

In FY 2010, $100,000,000 was spent on TPPI, $55,526,724 was spent on PREP, and $33,434,552 was spent on Title V.\textsuperscript{105} Organizations and government agencies in 33 states and D.C. received federal funding for comprehensive sex education and teen pregnancy prevention, with California receiving the highest amount at $14,183,520.\textsuperscript{106} In addition, 20 states and D.C. did not receive any federal funding for AOUME programs, which is “the largest number since the creation of the Title V abstinence-only program in 1996.”\textsuperscript{107} However, even with an increased amount of money spent on comprehensive sex education, abstinence is still “stressed” in 30 states, whereas only 19 states “cover” contraception, information about abortion is prohibited in five states, heterosexual marriage is promoted in three states, seven states contain discriminatory curricula against LGBTQ individuals, and parents can opt-out their students from sex education in 39 states.\textsuperscript{108} Therefore, even with changes in funding, abstinence is still a major part of sex education in the United States.

\textsuperscript{103} 42 U.S. Code 713, § 513.
\textsuperscript{104} Ibid.
\textsuperscript{106} Ibid.
\textsuperscript{107} Ibid.
\textsuperscript{108} Ibid.
Chapter 2: A Comparison of AOUME and CSE Curricula

AOUME and CSE are often presented as occupying opposite ends of the current dichotomous sex education debate. While they each have their own curricular specifics and underlying assumptions and values, both AOUME and CSE have the same goal in mind: to reduce teenage pregnancy and STD rates. However, they both claim that their specific method is the most effective and moral way to do so. Alexander McKay, a sexuality education researcher, extensively details the ideologies behind AOUME and CSE in his book *Sexual Ideology and Schooling: Towards Democratic Sexuality Education*. McKay claims that because the two curricula have deep oppositional beliefs and values, a compromise is not realistic. McKay claims that “their divergent moral frameworks make a peaceful coexistence difficult, as the “mere existence of one meaning system in the public sphere is perceived as a threat to the way of life based on another meaning system.”¹⁰⁹ Instead, he calls for the creation of a “democratic sexuality education,” which “would not be based upon judgments about the correctness or superiority” of different value systems, but instead would be deeply committed to accommodating moral pluralism and “freedom of belief.”¹¹⁰ This chapter will compare the underlying assumptions, topics, goals, outcomes, and critiques of both AOUME and CSE in order to demonstrate their differences, commonalities, and complications. Notably, this comparison highlights their shared problematic reliance on claiming a “correct” moral framework which makes discussion, let alone any type of compromise or coexistence, difficult.

¹¹⁰ Ibid., 9.
2.1 Abstinence-Only Sex Education

**Underlying Assumptions and Goals**

AOUME is frequently connected to the conservative movement, specifically the Religious Right. In McKay’s discussion, he states that AOUME curricula is based on a “restrictive sexual ideology,” and traces this ideology to early Christianity and a “biblically oriented negative perception of human sexuality.”111 In this ideology, sexual desire is connected with earthly sin and destruction, and a force that prevents humans from “flowing upward towards God.”112 This version of sexual ethics emphasizes a need for humans to “suppress sexual desire except for the purposes of procreation which is the only absolutely necessary and therefore justifiable purpose of sexual expression.”113 Using this framework, adolescent sexuality is immoral and cannot be rationally justified. This absolutist, act-centered approach is echoed within AOUME curricula that emphasize “just say no” as the only acceptable moral answer to sexual activity.

While restrictive sexual ideology has not maintained a consistently strong political presence over time, many scholars have written extensively on AOUME and the resurgence of this ethical framework in the 1980s and 1990s due to the rise of the Religious Right.114 This ascension can be viewed as a reaction against the sexual permissiveness of the 1960s and 1970s, the rising rates of divorce, single motherhood, sexually transmitted diseases, and teen pregnancy, the legalization of abortion following Roe V. Wade, and the discovery of HIV/AIDS. McKay

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112 Ibid.

113 Ibid., 40.

claims AOUME supporters are focused on ameliorating these problems “by advocating sexual ethics aimed at restoring the supremacy of the patriarchal nuclear family.” According to education researcher Nancy Kendall:

Although not all members of the New Christian Right are in agreement on all issues, central components of this ideological framework include the idea that the nuclear family is the basic unit of identity, community, and nation, that the male is the head of the family and adults have authority over children, that these hierarchies are biblically ordained and necessary to the social order, that sex is a sacred act that should be kept private and within marriage, that sex that occurs outside a marriage is socially destructive, and that when sinful behavior is widespread, the sinner, society, and nation all suffer.

This movement believes that the purpose of sex education is to instruct students in these values in order to restore a specific type of morality that they believe has previously existed, and cure society of “social ills including homosexual, single-parent families, and the STI epidemic.”

**Curriculum Topics**

Since the implementation of the Adolescent Family Life Act (AFLA) in 1981, the federal government has played a key role in defining AOUME curricula, most notably in requiring programs and grant recipients from all three major sources of funding to follow the eight-point definition outlined in Title V. In addition to promoting abstinence, marriage, and the nuclear family in accordance with this definition, AOUME programs also often contain restrictive positions on homosexuality, abortion, and gender fluidity. The curricula aim to restore the prominence of the heteronormative nuclear family in addition to limiting unwanted pregnancies, abortions, and the spread of sexually transmitted diseases.

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117 Ibid.
Two of the most prominent and widely circulated AOUME curricula, *Sex Respect* and *Teen Aid* were created using funds from the AFLA. Both curricula have been updated multiple times since the 1980s and are still widely used in many school districts throughout the country today. Due to the strict federal regulations for AOUME programs, one can assume that their curricular structures, citations, and content are similar to many other curricula currently being promoted throughout the country. In addition, both *Sex Respect* and *Teen Aid* demonstrate the important role Christianity plays in the AOUME movement. For example, many of the citations within both curricula are from organizations with official, explicit religious agendas. Even the author of *Sex Respect*, Colleen Kelly Mast, authored *Love and Life: A Christian Sexual Morality Guide for Teens*.\(^\text{118}\)

The *Sex Respect* curricula from 1990 and 2001, and the 1990, 1995, and 1998 publications of *Sexuality, Family and Community, a Teen Aid Curriculum*, all began with equating biological sex with gender, both in the text and the glossary pages. The 1990 *Sex Respect* student guide stated on the first page that “sex is used to refer to our gender. From the moment we are conceived, our maleness or femaleness is determined.”\(^\text{119}\) The 2001 *Sex Respect* curriculum also reinforced this belief by stating that “before your hearts starts beating, the gift of your gender has been assigned.”\(^\text{120}\) Operating within this naturalist discourse that focuses on biological determinism, AOUME curricula rely on the assumption that there is an innate

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\(^\text{118}\) McKay, *Sexual Ideology and Schooling*, 70.


connection between biology and behavior that is unchangeable, and thus reinforce rigid gender differences.

The 1990 and 2001 versions of *Sex Respect* contained the exact same fictional interview with a “Dr. R.E. Specter,” a fictional psychologist and teen guidance counselor, who answered questions on puberty, sex, and gender differences. Except for a change in the fictional student’s name, the interview content was almost entirely the same in both editions despite being published eleven years apart. The fictional Dr. R. E. Specter emphasized the *natural* differences between the sexes, and frequently states that compared to girls, boys have less self-control, are more easily aroused, and are more focused on the physicality of intimacy. In response to Sarah’s question: “Are there differences in the sexual nature of males and females?”, Dr. Specter responded:

> When a girl fantasizes, or imagines a love partner, she usually thinks of a male who will make her feel accepted and secure, emotionally close. Her thoughts tend to include the whole person. In contrast, a boy is more likely to focus his thoughts on the reproductive organs, his own and those of his imagined partner. A male can experience complete sexual release with a female even if he doesn’t particularly like her. A female, however, experiences more sexual fulfillment with a person she trusts and who is committed to her. Some people describe the difference this way: boys tend to use love to get sex. Girls tend to use sex to get love.  

When Sarah inquired if this is a good thing, Dr. Specter again emphasized the *naturalness* of these differences, implying their rigidity and ultimate truth. The fictional Dr. Specter attributed these differences in part to hormones: “Females, partly because of the way their hormones work in a monthly cycle, are generally less impulsive, more level headed about sex. This difference helped them to deal with the sexual aggressiveness of some males, whose daily cycle of hormone levels and whose rapid sexual response to what they see and hear make them more readily excitable.”


122 Ibid., 6.
Not only did this provide students with incorrect biological information, it also presented one singular view of gender identity as scientific fact.

*Sex Respect* and *Sexuality, Family, and Community* are not the only AOUME curricula that emphasize the gender binary. Nancy Kendall recently conducted extensive ethnographic research in five U.S. states and examined teachers, students, parents, district officials, and sex education instructors, activists, and advocates from AOUME and CSE. Kendall found that the AOUME curricula she observed often described gender differences as “naturalized and historicized.” Girls were portrayed as emotional, weak, asexual, and in charge of regulating boys’ aggressive, lustful behaviors. Often times educators would use props such as tape to demonstrate that women’s attractiveness and self-worth would be denigrated by frequent sexual activities with boys, like a piece of tape would lose stickiness after being stuck to different surfaces several times. Boys were also expected to prescribe to rigid gender expectations, and Kendall found that many curricula “silence[d] male voices and experiences concerning emotional connections in relationships, responsibility towards women and children, and desires for gender egalitarianism in relationships.”

In line with their goals, AOUME curricula presented abstinence as the only viable option concerning sexual behaviors, often through the use of fear-based language. When trying to discredit birth control’s effectiveness, *Sex Respect* (1990) supported abstinence by stating that “after all no one has ever died from abstinence.” In the 2001 *Sex Respect* curricula,

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123 Kendall, *The Sex Education Debates*, 152.
124 Ibid.
125 Ibid., 162.
contraceptive birth control was only discussed as a tool that can chemically damage women’s mental and physical health, and lower their fertility. Furthermore, the statistics on the failure rate of condoms in both Sex Respect and Sexuality, Family, and Community were extremely high and varied based on the parties engaging in the sexual acts. In addition to providing incorrect information about the effectiveness of birth control in preventing pregnancy, Sex Respect and Sexuality, Family, and Community also gave incorrect information about the effectiveness of condoms in preventing STDs and HIV. Using misleading logic, Sex Respect reported that since the HIV virus can spread anytime and is smaller than a sperm cell, condoms are worse at preventing STDs than pregnancy.

In regards to teenage pregnancy, most of the AOUME presentations, curricula, and teacher-trainings Kendall attended assumed all teenage pregnancies were unwanted, and pathologized single, teen mothers as “examples of social decay,” and the “cause of their children’s negative outcomes.” The only pregnancy options presented to students in AOUME classrooms were keeping the child or adoption. According to Kendall, these emphases reflect AOUME’s assumptions that “girls are primarily responsible for maintaining sexual abstinence outside of marriage,” and concerns that “people, particularly women, are becoming too disinvested in getting married, forming families, and having children.” In this chapter, beyond the obvious consequences of a possible unplanned pregnancy or an STD, the Sexuality, Family,
and Community authors stressed the “psychological consequences beyond pregnancy” including “loss of reputation, limitations in dating/marriage choices, negative effects of sexual adjustment/happiness, loss of self-esteem, preoccupation with sexual matters, family conflict, confusion regarding personal values, loss of goals.”

While Sex Respect and Sexuality, Family, and Community both mention abortion, they exclusively used religious views about conception. Both curricula overtly stated that human life begins at conception and presented no other viewpoints on this issue. The medical information concerning child development was also concerning. The visuals representing the growth of a child in both Sex Respect and Sexuality, Family, and Community were fully formed babies at times when the fetus is not fully developed, and the curricula used the word “baby” or “child” instead of fetus. Both curricula claimed that “babies” have a full heartbeat at 18 days old, and Sex Respect even said that at 6-8 weeks, a “baby” can move its tongue, make a fist, has full brain waves and can respond to touch. Sexuality, Community, and Family had an extensive chapter on abortion and claimed that “babies” will try to “escape from a painful stimulus” at 8 weeks, and at 12 weeks, their entire bodies are sensitive to pain. The curricula did not acknowledge that these claims are still being evaluated by the scientific community.

The curricula also stated that the definition of abortion used by the courts implies “an intent to kill the unborn,” suggesting that abortion is murder and that those who choose to exercise their legal right to choose are doing so without any emotional consequences.

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133 Ibid.

134 Ibid., 72.

*Respect* conflated the possible complications of abortion by asserting that women who have abortions are at a high risk for sterility, uterine infection, miscarriage, prematurity, ectopic pregnancy, and even future child abuse and rage.\textsuperscript{136} Despite a growing body of literature that is beyond the scope of this paper about the safety of abortion procedures, the AOUME curricula is overwhelmingly one-sided in its portrayal of a highly complicated, sensitive, and nuanced issue. Additionally, the demonization of women who choose to have an abortion could be psychologically traumatizing to students in class who have undergone the procedure.

*Sex Respect*’s discussion of the U.S. legal decisions concerning a woman’s right to choose was also problematic. *Sex Respect* claimed that Roe V. Wade made abortion legal during all nine months of a woman’s pregnancy, when in reality, the decision gave women autonomy over their pregnancy during the first trimester and defined different levels of state interest for the second and third trimesters.\textsuperscript{137} Additionally, *Sex Respect* claimed that the court “discovered” the constitutional right to privacy, when in reality, the justices argued that a woman’s right to abortion fell within the right to privacy as protected by the fourteenth amendment and first recognized in the 1965 SCOTUS case Griswold v. Connecticut.\textsuperscript{138} Finally, the curriculum presented Webster v. Reproductive Health Services, a 1986 lower court decision concerning legislative restrictions passed by the state of Missouri on abortions as the equivalent to a SCOTUS decision. These misrepresentations gave students inaccurate medical information and by doing so missed out on an opportunity to engage students in legal analysis.

\textsuperscript{136} *Sex Respect*, 2001, 149-150.


\textsuperscript{138} Griswold v. CT 381 U.S. 479 (1965).
Kendall also discovered that most AOUME programs focused on risk rather than pleasure. Sexual desires were framed as something for both girls and boys to avoid: “girls were urged to rein in any current desires in order to assure their and their future spouse’s purity; boys were urged to not give in to their animalistic nature by viewing porn or having sex, so that they would be able to properly appreciate sex with their wife.”

Sex Respect and the Sexuality, Family, and Community curricula also placed an enormous responsibility on girls to control male sexual desire. Using a metaphor of a car to represent arousal, Sex Respect (1990) claimed that “girls need to keep in mind that boys get turned on more quickly,” and in order to keep the car from crashing, girls need to ensure that they do not send boys the “wrong impression” through their actions and appearance.

According to Fine, the notion that desire is inherently male also endorses the implicit belief that “men aren’t responsible for sexual activity because they are hormonally programmed to want sex, unlike girls.” This creates a female victimization and gatekeeper narrative that distorts notions of consent, sexual violence, and reinforces the concept that girls are asexual objects. Since females are educated primarily as the “potential victim of male sexuality,” adolescent girls represent “no subject in [their] own right”, since the female sexual agent is removed from the subject. This “vulnerability curriculum” focuses on teaching females how to

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139 Kendall, The Sex Education Debates, p. 146
140 Mast, Sex Respect, 1990, 8-10.
“defend themselves against disease, pregnancy, and ‘being used.’”

The emphasis on female victimization leaves no room for any positive image of female sexuality.

Finally, the AOUME programs in Kendall’s research normalized heterosexuality and were silent around transgender and queer issues. The curricula emphasized that heterosexuality is natural by connecting it to marriage and the family. *Sexuality, Family, and Community* had a full chapter on heterosexual marriage which contained sweeping statements like “since the emergence of life on this planet, the nuclear family has been in existence.” The curricula did not address homosexuality, bisexuality, or transsexuality at all except for in discussions of STDs. Both *Sex Respect* and *Sexuality, Community, and Family* discussed AIDS as a predominantly homosexual/bisexual problem (even in the updated 2001 curricula). Student who identify as anything other than heterosexual are not represented in the text at all, and thus every time “sexual activity” is even mentioned, it is assumed to be heterosexual intercourse.

Ultimately, *Sex Respect, Sexuality, Community, and Family*, and other AOUME curricula equated adolescent sexuality with an inherently negative, problematic behavior, frequently listing sex as similar to using alcohol and drugs. *Sex Respect* described teenagers using or being educated about birth control through metaphors such as telling teens to shop at a mall whose security system was malfunctioning and giving chocolate to an overweight friend. In one extreme example, *Sex Respect* compared abstinence-only education and comprehensive education to “fire prevention week” and “fire education week” respectively, and criticized comprehensive sex education by describing a “fire education week” that taught students how to

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create fires without burning their house down, and demonstrated the enjoyments of setting small fires in garbage cans.\textsuperscript{146} \textit{Sexuality, Community, and Family} also compared sex to robbery in their portrayal of comprehensive education in the following statement:

Dear adolescent, it is best that you not indulge in robbery. Just say “no.” But we all know that most of you are not capable of controlling yourself and will steal before you leave high school. Therefore, here are some guns and get-away cars so you can steal and never get caught. But, in case they fail and you get arrested, we will find a lawyer who will help you “beat the rap” (avoid the consequences).\textsuperscript{147}

By equating sexuality with such extreme negativity and even criminality, these curricula run the risk of stigmatizing students who have already engaged in sexual activity or students who have been sexually abused. Additionally, by attaching all negative outcomes to pre-marital sex, these curricula are implying that unwanted pregnancy, the spread of STDs, and relationship abuse do not also occur within marriage.

The topics discussed and silenced within the \textit{Sex Respect} and \textit{Sexuality, Community, and Family} in addition to the curricula Kendall surveyed are demonstrative of the restrictive underlying assumptions guiding AOUME. In order to emphasize an absolutist morality where sex is only positive in heterosexual, married relationships, all other topics essentially become taboo. In addition, when the guiding sexual ideology is explicitly focused on the preservation of the nuclear family, individual experiences and interests become less central to the curriculum.

\textit{Outcomes & Critiques}

Numerous studies have critiqued the presentation of topics within the curricula used by most AOUME programs and the effectiveness of the programs in reducing teenage pregnancy and STDs. Trudell and Whatley specifically reviewed the \textit{Sex Respect} curricula and found that


\textsuperscript{147} Roach, Potter, and Teen-Aid Inc., \textit{Sexuality, Community, and Family}, 140.
“it provides insufficient and inaccurate information, relies on fear and guilt, is based on religious assumptions and relies on sectarian sources, ignores the vast majority of teens lived experiences, and lacks respect for differences by specifically promoting a “white, middle class, heterosexual bias.” Sex Respect is not the only curriculum that has been critiqued. Notably, in December 2004, the U.S. House of Representatives Committee on Government Reform – Minority Staff Special Investigations Division filed a report at the request of Democratic Representative Henry Waxman to evaluate the content of thirteen of the most popular abstinence-only curricula used by grantees of the largest federal abstinence initiative at the time, CBAE. Eleven of the thirteen curricula reviewed by the Waxman Report contained errors and distortions of public health information. These eleven curricula are used by 69 grantees including state health departments, school districts, hospitals, religious organizations, and pro-life organizations in 25 states. These grantees have received over $32 million in FY 2003, and over $90 million since FY 2001.

The Waxman report “found that 80% of the abstinence-only curricula, used by over 2/3 of SPRANS [CBAE] grantees in 2003, contain false, misleading, or distorted information about reproductive health.” Specifically, the report found that the curricula contained false information about the effectiveness of contraception, the risks of abortion, and contained


149 The Content of Federally Funded Abstinence-Only Education Programs, (Washington, D.C.: House of Representatives, Committee on Government Reform, Minority Staff Special Investigations Division, 2004), 1-26.

150 Ibid., 7.

151 Ibid.

152 The Content of Federally Funded Abstinence-Only Education Programs, i.
numerous scientific errors. For example, one curricula stated that HIV can be transmitted via sweat and tears.\textsuperscript{153} The report also found that the curricula treated stereotypes about girls and boys as scientific fact and blurred religion and science, often presenting religious views such as life begins at conception, or that a “43-day old fetus [is] a ‘thinking person’” as scientific fact.\textsuperscript{154} According to the report, none of the curricula provided information on how to select and use birth control methods, and several “exaggerate[d] condom failure rates in preventing pregnancy.”\textsuperscript{155} Several curricula cite a 1993 study of condom effectiveness that has been disproved and rejected by the Department of Health and Human Services and fail to credit current studies that accurately claim that condoms have contributed to the decline in STDs such as syphilis and gonorrhea.\textsuperscript{156} Additionally, the report found that curricula often used outdated data from the 1970s about the risks of abortion, and have even presented misleading statistics about pregnancy, including one curriculum that stated “touching another person’s genitals ‘can result in pregnancy.’”\textsuperscript{157}

Authorized by Congress in 1998, Trudell et al. examined four popular abstinence-only programs approved by Title V, Section 510b, My Choice, My Future!, Recapturing the Vision, Families United to Prevent Teen Pregnancy, and Teens in Control. Trudell et al. reported that the abstinence education models within these four programs did not reduce teen sexual activity and did not affect the first age at which teens engage in sexual activity. In fact, Trudell et al. reported

\textsuperscript{153} The Content of Federally Funded Abstinence-Only Education Programs, ii.

\textsuperscript{154} Ibid.

\textsuperscript{155} Ibid., 11.

\textsuperscript{156} Ibid., 10.

\textsuperscript{157} Ibid., 12.
that students actually had gaps in their knowledge of STDs.\textsuperscript{158} Other researchers have found similar results in different studies. Santelli et al. found that while abstinence is “theoretically highly effective in preventing unintended pregnancies and sexually transmitted infections, in actual practice abstinence intentions often fail.”\textsuperscript{159} Researchers have found that AOUME programs can often “undermine the promotion of other preventative behaviors,” and often virginity pledgers and other students who participate in AOUME programs are less likely to use contraceptives when they do engage in sexual activity and are less likely to seek STD screenings.\textsuperscript{160}

While adolescents in the United States initiate sexual activity at the same time as their counterparts in countries such as Sweden, France, Canada, and Great Britain, they also use contraceptives less frequently, and have the highest teen pregnancy rate per any developed country.\textsuperscript{161} Noted sexual education researcher Douglas Kirby has reviewed sex education programs numerous times in multiple developed and developing countries including the United States, Canada, the Netherlands, Norway, Spain, Brazil, Chile, Nigeria, Tanzania, and others, and found that the vast majority discussed or promoted condoms or other types of contraception, and only 7\% of the 56 programs he studied in 2007 were abstinence-only and they were all in the


\textsuperscript{160} Santelli et al., “Explaining Recent Declines in Adolescent Pregnancy,” 154.

\textsuperscript{161} Ibid., 150.
United States.\textsuperscript{162} Even with the success of alternative programs abroad, and the argued domestic failure of AOUME programs, the U.S. continues to predominately rely on AOUME and has struggled to fund comprehensive programs.

\textbf{2.2 Comprehensive Sex Education (CSE)}

\textit{Underlying Assumptions and Goals}

According to McKay, comprehensive sex education is based on a “permissive sexual ideology,” which has emerged and expanded alongside “secularized, evolutionary conceptualizations of human nature…[which] reshaped the intellectual, socio-political climate of Western culture.”\textsuperscript{163} This historical trend removed sexuality from a sacred, higher realm, and treated it as a natural phenomenon.\textsuperscript{164} This framework expands the range of morally acceptable sexual behaviors because “if sexuality is like human beings themselves… it can be more easily viewed as either harmless, neutral, or potentially beneficial.”\textsuperscript{165} This ideology also takes the moral authority out of religion’s hands and places it “in the hands of individuals,” and is thus closely aligned with liberalism’s focus on individual rights and utilitarianism.\textsuperscript{166} This framework claims to foster moral principles such as equality, justice, respect, and honesty; however, AOUME’s absolutist framework makes the same assertion. The malleability of these rhetorical


\textsuperscript{163} McKay, \textit{Sexual Ideology and Schooling}, 53.

\textsuperscript{164} Luker, \textit{When Sex Goes to School}.

\textsuperscript{165} McKay, \textit{Sexual Ideology and Schooling}, 53.

\textsuperscript{166} Ibid., 54.
claims may help each side respectively claim that their vision is “correct,” but it also limits their ability to interact with each other.

CSE curricula are less uniform and their goals and topics are less clearly defined, as there is no specific definition tied to federal resources or monitoring processes, “and the actors and institutions involved in creating the curricula and programs have been more historically and ideologically and disciplinarily diverse than those in AOUME.”

Since sex is seen as a purely biological act, these curricula aim to “provide teens with appropriate information and decision skills so that teens, as rational individuals, can take responsibility for their own lives.”

Along with promoting sex as a natural act and providing scientifically complete and accurate information to students about sex, many curricula are also designed to “support adolescents’ positive exploration of their own sexuality,” in the hopes of reducing bullying and helping students build their self-esteem, explore their identities.

While many CSE advocates claim that these curricula are value-neutral and purely scientific, McKay has demonstrated that many are “shaped by embedded assumptions about what constitutes ‘good’ behavior.”

Curriculum Topics & Critiques

Even though there is a clear focus on providing students with information to make informed choices, McKay emphasized that “few programs have completely escaped the cultural weight of restrictive beliefs because they take place in a larger culture that is heavily influenced by restrictive sexual ideology.” Therefore, many comprehensive programs are often classified

167 Kendall, The Sex Education Debates, 6.
168 Ibid., 152.
169 Ibid., 6.
170 McKay, Sexual Ideology and Schooling, 7.
171 Ibid., 77.
as “abstinence-plus” because they promote abstinence while providing basic factual information about topics like contraception, abortion, and homosexuality.\textsuperscript{172} This is represented by the fact that even though federal funding for CSE has increased since FY 2010, 30 states still “stress” abstinence whereas only 19 states cover contraception in their curricula.\textsuperscript{173} In many CSE curricula, abstinence is listed as the first line of defense against unwanted pregnancy and STDs and has its own chapter. While abstinence as a concept may be explored in more detail in AOUME curricula, it is still promoted heavily in CSE curricula.

Compared to AOUME, students receive more information on contraception and its effectiveness in preventing pregnancy and STDs/HIV. Different contraceptive methods are compared and contrasted and discussions include more options than just condoms and the birth control pill. Students are taught how to use different methods and how to acquire them. Similarly, CSE curricula teach students how to get tested for STDs and discuss the symptoms and treatments of the various infections. Instead of using the predominantly fear-based model that is seen in AOUME, CSE curricula do not inflate the symptoms of STDs, but instead discuss treatment success rates and the importance in getting tested. For example, in the National Sexuality Education Standards, presented by the Future of Sex Education Initiative and approved by numerous nonpartisan health and education organizations, the core concepts for students in grades 9-12 learning about STDs include:

- Evaluate the effectiveness of abstinence, condoms, and other safer sex methods in preventing the spread of STDs, including HIV.
- Describe common symptoms of and treatments for STDs, including HIV.

\textsuperscript{172} Kendall, \textit{The Sex Education Debates}, 7.

\textsuperscript{173} “Federal TPPI, PREP, and Title V Abstinence-Only Funding By State, Fiscal Year 2011.”
• Describe the laws related to sexual health care services, including STD and HIV testing and treatment.¹⁷⁴

These objectives demonstrate the very technical and scientific focus of CSE curricula, as students are often tasked with defining, describing and evaluating aspects of contraception, abstinence, and STDs in accordance with recent medical research and legal information.

In regards to pregnancy, CSE curricula present multiple options to students including keeping the baby, adoption, and abortion. Again, students are usually given this information in a scientific and rational manner. In the National Sexuality Education Standards, the core concepts for students in grades 9-12 learning about pregnancy, pre-natal care, and abortion include being able to define emergency contraception and the laws related to reproductive and sexual health care and pregnancy and abortion, including laws on parenting, surrender policies, and contraception, among others.¹⁷⁵ According to Kendall, most CSE curricula discussed teen parenting in both positive and negative lights, but ultimately framed teenage pregnancy as a “failure of rational decision making and planning.”¹⁷⁶

CSE curricula also differentiate between gender and sex. Within the National Sexual Health Education Standards, there is an entire category on identity. Students in grades 9-12 are expected to be able to “differentiate between biological sex, sexual orientation, and gender identity and expression” in addition to differentiating between “sexual orientation, sexual behavior, and sexual identity.”¹⁷⁷ Many curricula include lessons on gender stereotyping, and the


¹⁷⁵ Ibid., 21.

¹⁷⁶ Kendall, The Sex Education Debates, 141.

role that society, the media, and culture plays in influencing the expression of gender, sexual orientation and identity.\textsuperscript{178} Additionally, numerous free lessons offered to educators on SIECUS’ website included a section on gender role stereotypes that discussed how double standards can be damaging to males and females.

Based on the liberal model of personhood and social relations, CSE curricula tied empowerment to “an expansion of individual and structural choices facilitated through increased knowledge, as opposed to the normalization of a particular gender ideology.”\textsuperscript{179} While CSE curricula discuss topics that were avoided in AOUME curricula like rape, sexual violence, and homosexuality, Kendall pointed out that these discussions presented “all people as equal and equally agentic” but “provided few practical opportunities to discuss or to challenge students experiences or inequities or to engage students and teachers in a critical analysis of inequities.”\textsuperscript{180} By focusing so ardently on providing students with value-free definitions and just facts, CSE educators may be missing out on an opportunity to provide students with a more meaningful discussion of these topics.

One of the only requirements by the federal government to receive funding for CSE is that all of the information presented using federal funds are medically accurate. Therefore, programs are required to present true, accurate, peer-reviewed scientific data. While many see this as an advantage CSE curricula has over AOUME, many CSE curricula have been recently criticized for being overly-scientific. Guided by Enlightenment ideals such as scientific truth and individual rights, most CSE curricula discuss topics such as contraception, abortion, and

\textsuperscript{178} Future of Sex Education Initiative, “National Sexuality Education Standards,” 20.

\textsuperscript{179} Kendall, \textit{The Sex Education Debates}, 166.

\textsuperscript{180} Ibid., 169.
homosexuality in a very technical way by “introducing, defining, and categorizing terms and thus scientifically rationalizing emotion, relationships, embodied experience, and power out of sex education.”\textsuperscript{181} For example, in the National Sexual Health Education Standards, words like “define,” “describe,” “explain,” “decision-making model,” and “individual responsibility” are seen often throughout the core concepts.\textsuperscript{182} These terms describe curricula that often consists of multiple definitions and statistics in order to give students the “value-free” facts so that they can make the best decisions for themselves as individuals.

Similarly, to AOUME, CSE curricula were also risk-focused, rather than pleasure-focused. While sexual desire was often discussed as a natural component of sexuality, Kendall noticed that many programs placed an addendum on this statement by adding that “acting on these desires was inappropriate because of the physical dangers it might entail.”\textsuperscript{183} In order to “protect” adolescents from what is perceived as ruinous and problematic sexual behaviors (which for adolescents could mean any type of sexual activity at all), these curricula often implicitly reinforce a gendered notion of men’s sexual subjectivity and female sexual objectivity. While male pleasure is taught as biology, adolescent females are educated as “victims of male sexual desire.”\textsuperscript{184} Puberty for males is defined as the emergence of sexual desire through discussions of ejaculation and masturbation, and female puberty is defined by periods and unwanted pregnancies.\textsuperscript{185} This is reinforced by anatomical studies within sex education curricula that only

\textsuperscript{181} Kendall, The Sex Education Debates, 225.

\textsuperscript{182} Future of Sex Education Initiative, “National Sexuality Education Standards.”

\textsuperscript{183} Kendall, The Sex Education Debates, 147.


focus on women’s reproductive organs, and denote little if any time to diagrams that show the vulva, labia, or clitoris. Thus, discussions of puberty and anatomy in both curricula often reinforce the idea that sexual behaviors can be characterized by men in search of desire, and females in search of protection. 

The assumption that “normal boys have raging hormones” which make them obsessed with sexuality and compelled to act on it, while girls are devoid of personal desire, and instead yearn for “love, relationships, and romance” is reinforced by popular culture. In 2016, it was estimated that adolescents are exposed to 14,000 references of sex each year on television, and that 70% of prime-time television now contains sexual content.” These pop culture examples often reinforce gendered, objectified notions of females by providing examples of how girls can provide pleasure to boys, “juxtaposed with stories of sexual violation and harassment.” Sociologist Deborah Tolman claims that when sexualized images of girls are prevalent, their feelings are never portrayed.” When feelings are displayed, they are in a desexualized context within romance narratives in books, movies, music, and television. These narratives emphasize that women primarily search for emotional connection, not sexual desire. These narratives remain mostly unexamined within common curricula, and thus reinforce and promote the tropes of the asexual, pure woman and the hypersexual male.

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186 Orenstein, Girls and Sex, 62.
189 Orenstein, Girls and Sex, 38.
190 Tolman, Dilemmas of Desire, 8.
191 Ibid.
In an effort to promote what proponents claim is a “value-free,” rational, scientific curriculum, CSE curricula has often failed to explore eroticism and intimacy, silenced student voices, and reinforced sexist, racist, heteronormative messages. Students may learn textbook definitions of stereotypes, gender, and homosexuality, but students are not exploring these concepts or ideologies, or examining how power and sexuality function in society. Even though students are constantly exposed to sexual stimuli, they are “deprived of opportunities for guided meaning making or knowledge constructed from educated social interaction that might result in understanding.”\textsuperscript{192} By claiming they are “value-free,” CSE curricula are also not acknowledging how they are privileging specific sexualities through their expectations of appropriate sexual behavior.

The current curricula co-construct a specific notion of adolescent sexuality in which girls and boys are “relentlessly exposed to a set of rules, principles and roles that are mapped out for the production of ‘normal’ heterosexual adolescent relationships and sexual behavior.”\textsuperscript{193} While homosexuality is constructed as an inferior “other” to heterosexuality, women are further dichotomized into “asexual, moral women to be protected by marriage” and “their sexual, immoral counterparts.”\textsuperscript{194} These constructions fail to acknowledge the “gender-based power inequities that define, shape, and construct experiences of sexuality.”\textsuperscript{195} For girls to see


\textsuperscript{193} Tolman, \textit{Dilemmas of Desire}, 6-7.


themselves as “good,” not only do they need to limit their behaviors and actions to those that are defined as pure, they also need to “construct their own individual and emerging self against the ‘other,’” – those who “enact sexuality and femininity different than what they feel is appropriate and safe.”

Anything outside of a heterosexual married relationship derogates these women and removes them from “protected” status. This could result in a myriad of consequences ranging from being socially ostracized to even being subjected to physical violence.

While LGBTQ students are acknowledged within CSE and curricula often include lesson plans on bullying and transgender, homosexual, and bisexual issues, these topics are still presented as an addendum. For example, in a 1995-1996 Oakland curriculum, sexual intercourse was defined as “penile-vaginal” and was described in great detail while at the bottom of the same page there were only two sentences on anal and oral sex. By presenting a definition of sexual intercourse as penile-vaginal, these curricula often continue to “other” non-heterosexual students, even if they do include information on the issues that these students might face in school and in life.

Even though CSE curricula have been praised by progressives for being more inclusive, their firm reliance on the rational, liberal individual has also restricted students from discussing inequities that they may have experienced in their lives. By limiting the curriculum to a sterile, scientific presentation of facts, little room is left for analysis or interpretation. In addition, by stating that the curriculum is only a value-neutral presentation of facts, students are not engaging


197 Ibid., 55.

in the numerous public debates on sexuality nor are they engaged in any knowledge-making or knowledge-interrogating processes.

**Outcomes**

Unlike AOUME, there is scientific evidence that CSE curricula can help teens delay the onset of sexual activity, reduce the frequency of sexual activity, reduce the number of sexual partners, and increase condom and contraceptive use. Researchers found that youth aged 15-19 who received comprehensive sex education were “50% less likely to experience pregnancy than those who received abstinence-only education.” Advocates for Youth compiled a list of programs that have been proven effective and out of 26 identified programs, 23 included comprehensive sex education as at least one component of the program. Based on survey data, of these 23 programs, 14 delayed the onset of sexual activity, 13 showed statistically significant declines in teen pregnancy, HIV, and STDs, 14 increased condom usage among teens, 9 increased contraceptive use, 13 reduced the number of sex partners and/or increased monogamy among program participants, and 10 programs reduced the incidence of unprotected sex.

A 2009 report by Douglas Kirby and B.A. Laris, evaluated fifty-five studies of curriculum-based programs, 48 of which were comprehensive. Across all studies, 64% or two-thirds of the programs decreased one or more types of sexual behavior, 38% had a positive impact on two or more behaviors, and none of the programs increased sexual behavior in teens, contrary to what many AOUME proponents argue. In fact, 41% of the programs delayed the

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199 Advocates for Youth, “Comprehensive Sex Education: Research and Results,” (2009), 1.

200 Ibid.

201 Ibid., 1-2.

initiation of sex, 31% decreased the frequency of sex, and 40% reduced the number of sexual partners. None hastened the initiation of sex nor increased the frequency of sex. Additionally, “42% reported an increase in condom usage and 40% an increase in contraceptive use.” Overall, this study strongly indicated that comprehensive sex education programs are more likely to have a positive impact on teen sexual behavior rather than a negative impact.

In addition, other sectors of the U.S. government encourage and promote condom usage, implying that educating students on how to use condoms is beneficial. The U.S. Public Health Service has included condom use as an objective in its Healthy People Campaign for 2000 and 2020 and the CDC encourages condom use as an effective way to protect oneself from STDs. Furthermore, a majority of the public supports comprehensive sex education. According to Advocates for Youth, public opinion polls consistently show more than 80% of Americans support teaching comprehensive sex education in high schools and middle schools. In one poll, 85% believed that teens should be taught about birth control and preventing pregnancy, and 7 in 10 opposed government funding for abstinence-only programs. This support also does not just come from the political left; in a poll of 1,000 self-identified Republicans and Independents, 60% of Republicans and 81% of Independents supported public schools teaching comprehensive sex education. Despite continued public support, CSE has only recently been funded by the federal government, and abstinence continues to be promoted throughout numerous U.S. states.

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203 Kirby and Laris, “Effective Curriculum-Based Sex and STD/HIV Education Programs for Adolescents,” 22.

204 Ibid., 23.

205 Advocates for Youth, “Comprehensive Sex Education,” 2.

206 Ibid.

207 Ibid.
Chapter 3: Resituating the Dichotomous Curriculum Debate

Despite extensive research that has claimed that AOUME curricula are not only ineffective but also medically inaccurate and biased, the U.S. federal government has continued to fund these programs for three decades. Not only did the funds continue after their inception in 1981, they also increased as more funding streams opened in 1996 and 2000. While AOUME is often associated with the Religious Right and conservative Republicans, it has been a policy supported by both Republican and Democratic administrations, although support continues to be stronger on the political right. Even with the removal of most AOUME funding and the onset of CSE funding in 2010, Title V funding programs still received $33,434,522 in FY 2010, roughly 18% of the total U.S. expenditures for sex education funding. 208 Thirty states continue to receive Title V funds, with programs in Texas and Florida receiving the most in FY 2010, totaling in at $5,402,595 and $2,601,681 respectively. 209 Even in states that receive funds for CSE programming, these curricula continue to stress abstinence.

Why does abstinence continue to be so heavily promoted in the United States? Many of the aforementioned scholars who influenced this study discussed the disconnect within the sex education debates between adult concerns and the actual lived experiences of youth. While some scholars state that these adult anxieties have stalemated the sex education debate, others believe it has led to the success of parental and religious groups that are firm supporters of AOUME. Most scholars have recognized the need for an updated curriculum that reflects the concerns and needs of youth, rather than the fears of adults. This chapter will explore and expand upon one possible explanation for the continuation of funding for AOUME in the United States – the prevalent fear

208 “Federal TPPI, PREP, and Title V Abstinence-Only Funding By State, Fiscal Year 2011.”
209 Ibid.
of adolescent sexuality in the U.S., in order to theorize about an alternative approach to sex education that is relevant to all students and grounded in an examination of the historical construction of age, sex, gender, and culture.

Zimmerman claims that despite an overall liberalization of sexual attitudes and an increase in sex education programs, large-scale opposition to sex education has continued to increase over time because parents and religious organizations ultimately do not want to lose their authority. While Zimmerman does this analysis on a global scale, he does note that nowhere have parents and religious organizations been more successful in their opposition than in the United States with its “deep-rooted traditions of lay and local school control.”210 Within the U.S. context, Irvine focuses specifically on the triumph of the Religious Right in capitalizing on adult anxieties to successfully oppose comprehensive sex education on a local and national level in her analysis of the rhetoric used in the sex education debates.

Moran and Levine describe how the overwhelming anxieties adults have about teenage sexual behaviors have actually limited the discussions within the sex education debates. Moran historically traces the concept of adolescence from its inception in 1904 to the end of the 20th century, and ends up questioning if it is even a useful category of analysis. He claims that “no magic wall separates teens’ behaviors from the patterns of their elders,” and that the “belief in this imaginary wall continues to distort adults’ understanding of adolescent behavior.”211 Finally, Levine argues that not only does this “magic wall” limit our “understanding of sexuality and

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210 Zimmerman, Too Hot to Handle, 97.

211 Moran, Teaching Sex, 231-232.
children’s relationships to sex,” it is actually harmful to minors because it creates unhealthy circumstances for their sexual development and understanding.\textsuperscript{212}

This shared fear of adolescent sexuality and agency is apparent throughout the federal funding laws for sex education in the United States and within the curricula themselves. While the debates on AOUME and CSE disagree on curricular specifics, such as whether or not to discuss contraception, both curricula reinforce very specific notions of age and sexuality. In fact, most curricula that fall under either category instruct students to avoid sexual activity and consider their programs to be successful if there is a reduction in teen sexual activity. AOUME believes that parents should become “the ultimate gatekeepers to their children’s knowledge,” since youth have overpowering urges and lack the necessary “self-regulatory capacities” to control these desires.\textsuperscript{213} While CSE supporters believe that adolescents are individual agents and should be given the tools and information to make rational decisions, they still don’t fully support the idea of adolescent agency. CSE holds steadfast to the general idea that sexual activity is an adult activity, and that adolescents should absorb information, and then use it when they are ready. While the political right views “ready” as synonymous with entrance into a monogamous, heterosexual marriage, this stage is less clear on the CSE side of the debate as their conception of an adult sexual actor does not have specific parameters beyond the ability to make a rational decision. However, both sides reinforce the notion that sexual activity is a mature, adult activity.

If both sides of the debate rely on the same underlying notion about adulthood and sexual behavior, what would an improved, more relevant sex education curriculum look like? How would it discuss adolescent sexuality? McKay and Kendall both invoke democratic values to

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\textsuperscript{212} Levine, \textit{Harmful to Minors}, xxxii.

\textsuperscript{213} di Mauro and Joffe, “The Religious Right and the Reshaping of Sexual Policy,” 81.
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propose a new type of sexual health education curriculum – one that would not simply focus on the “right” way to reduce behaviors, but would teach students about their bodies, behaviors, and identities through multiple lenses. In their approaches, students would become more critically informed citizens through learning about both sides of the debate and partaking in civic discussions. This chapter will expand upon their notions of a democratic sex education by also connecting the theme of democratic understanding to multicultural education scholar James Banks’ notion of transformative knowledge. This chapter will additionally claim that in order to create a democratic, transformative sex education, adults not only need to reconceptualize adolescent sexuality, but also reexamine notions of childhood and adulthood and recognize how these conceptions have changed over time.

3.1 Fear of Adolescent Sexuality and the Success of the AOUME Movement

Even though polls have demonstrated significant public support for CSE, “this support has not translated into tangible public opposition to abstinence-only education or into visible support for comprehensive education.” In their 2007 article, “The Religious Right and the Reshaping of Sexual Policy: An Examination of Reproductive Rights and Sexuality Education,” Diane di Mauro, a specialist in the areas of sexuality research and education, and Carol Joffe, a sociologist, claim that the Religious Right has capitalized on the fear of adolescent sexuality in a more pervasive and convincing way than supporters of CSE. di Mauro and Joffe state that by framing “the issue as one between good and evil,” the conservative moment has been able to use “language and emotion to seize the rhetorical high ground.” They demonstrate that the

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215 Ibid., 79.
conservative moment’s rhetorical, financial, and organizational tactics have been effective at the local, state, and national levels.

Organizationally, the AOUME movement with its ties to the Religious Right has been able to acquire more national advocacy organizations and financial resources than its progressive counterpoint. For example, in 2002 there were 12 large national organizations opposed to CSE, as opposed to one single-issue pro-CSE national organization, SIECUS.\(^{216}\) That year, Focus on the Family, a prominent national conservative organization had a budget of $110 million and a daily radio show that was syndicated on 15,000 stations, while SIECUS’ budget for 1999 was only $2 million.\(^{217}\) Currently, there are more national organizations that support CSE such as Advocacy for Youth and Future of Sex Education; however, the Religious Right is notorious for its success in not only funding research centers and think tanks (in contrast to progressives who tend fund advocacy and social service programs) but also for its ability to galvanize community members to seek local public office, especially on school boards.\(^{218}\) This cohesive structure between national organizations and small communities also allows AOUME supporters to have a single, unifying message, while CSE supporters are more ideologically diverse.

Sociologist Janice M. Irvine focuses specifically on the rhetorical success of the Religious Right in promoting AOUME and capitalizing on adult fears of adolescent sexuality in her book *Talk About Sex: The Battles over Sex Education*. Irvine classifies the main rhetorical mode that the Religious Right uses as oppositional, in that it focuses on associating elements of sex education with “a specific set of negative or frightening meanings,” and uses evocative and

\(^{216}\) Irvine, *Talk About Sex*.

\(^{217}\) Ibid., 70.

\(^{218}\) Ibid. 71.
inflammatory language to “incite political arguments while at the same time flattening their complexity.” 219 According to Irvine, these oppositional strategies include:

- repetition of evocative sexual language (calling a health education text “pornography”)
- establishing sex educators as targets for blame (they have been called everything from Communists to dirty old women to pedophiles)
- the invention of depravity narratives (circulating fictive tales to scare parents and discredit sex educators)
- the claim that sex education speech is performative (that talking about sex enacts sex)
- and the secularization of religious arguments (using medical claims that may be misleading or inaccurate to advance religious morality). 220

Irvine claims that this “sex aversion language…trumps the barely existent language of sexual affirmation,” as there is “little safe ground for those who speak out in support of sexuality.” 221 As long as adolescent sexuality is viewed as dangerous, AOUME automatically becomes an easier curriculum to implement, because it circumvents “controversy and opposition and in process, gain[s] access to government funding.” 222

The only real area where CSE supporters can effectively challenge AOUME supporters is in terms of promoting curricula that has medically accurate, scientific information, which could explain the continued emphasis on scientific rationality within CSE curricula. Since the ACLU sued the AFLA for promoting religion in 1982, CSE advocates have been able to argue that their curricula are more fact-based and accurate. However, due to large organizational and financial resources, conservative opponents have utilized information from their own research institutes to

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219 Irvine, Talk About Sex, 11.

220 Ibid., 73.

221 Ibid., 12.

support their curricula. This was evident in the 2008 Congressional hearing on the effectiveness of sex education where the Senators supporting AOUME frequently cited The Heritage Foundation as the basis for their support.\textsuperscript{223}

Unable to effectively argue against AOUME without championing teenage sex and being shamed or discredited, CSE supporters end up touting a watered-down, abstinence-plus version of sex education. Even though additional information is provided to students on contraception and abortion among other facets of sexuality, CSE educators often self-censor and try to only focus topics that are “safe.”\textsuperscript{224} Citing Bonnie Trudell’s ethnographic work with sex educators, Irvine noted that CSE educators often reduce their curricula to “a series of facts that students learn for the exam but rarely discuss in class in an attempt to avoid controversy.”\textsuperscript{225} The curricula are “devoid of the language of pleasure, pain, and intimacy,” and sexual literacy has become “a checklist of knowledge, skills, and information with no invitation of the adolescent to explore feelings or express sexual authenticity.”\textsuperscript{226} It is more reflective of adult fears rather than adolescent feelings, experiences, or needs.

Although supporters of AOUME and CSE continue to argue over how best to ameliorate the problems of adolescent sexuality, it is precisely this emphasis on the “problem” component that creates an environment where AOUME can thrive. AOUME has a clear and consistent message, an effective local, state, and national organizational structure, abundant resources, and

\textsuperscript{223} See pages 22-23.

\textsuperscript{224} Di Mauro and Joffe, “The Religious Right and the Reshaping of Sexual Policy,” 82.

\textsuperscript{225} Irvine, \textit{Talk About Sex}, 122.

rhetorical strategies that CSE advocates have not been able to effectively argue against. Although CSE promotes providing adolescents with scientific information and rational decision-making skills, their blurry understanding of maturity creates more questions than answers, especially in a climate where fear-based rhetoric is often extremely effective. When can adolescents engage in sexuality? When are they mature? If these questions cannot be answered clearly, how can CSE be expected to create advocacy organizations and acquire enough resources to challenge AOUME? If Americans continue to fear adolescent sexuality, how can CSE promote the benefits of educating teenagers to lead healthy, sexually fulfilled lives? In their attempt to compromise and shut down controversy, CSE’s curricula have failed to create a true alternative to AOUME. In order to create transformative curricular programs that actually aid students in making educative choices, childhood, adulthood, maturity, and their connections to ideas about sexuality need to be reimagined.

3.2 Shifting Notions of Childhood, Adulthood, and Adolescent Sexuality

The Conceptual Binary Between Childhood and Adulthood

Theoretically, the concept of adolescence seems to be in a state of flux, stuck in a dichotomous binary between childhood and adulthood. Even though the teenage years are seen as a distinctive stage of life, youth are often viewed as volatile, restless, and emotional. When compared to the innocent, playful trope of the child, adolescents and children are mainly grouped together in the political and legal domain as simply pre-adults. Maturity is still viewed within a binary system; children and teens are seen as immature, and are only viewed as mature when they reach adulthood. This not only universalizes children’s and adolescents’ experiences, it also distorts how fluid emotional, intellectual, and even physical maturity can be.
As opposed to many European systems of sexual health education that assume that sexual activity is a normal and healthy part of aging, Americans answer the questions of “whether and when” children are sexual beings by emphasizing that they are not naturally sexual, and that they do not become sexual until they are married or mature.227 This central idea permeates most of American society’s beliefs about children and sex, and thus is heavily influential in sex education. Citing historian Anne Higonnet, Janice Irvine states that the “romantic child” or the “modern image of a naturally, asexual pure child is at the heart of the century-long conflict over sex education.”228 This romantic notion of children’s purity and innocence is dependent on protection. While AOUME and CSE may disagree on the type of protection (i.e. teaching students strict moral rules or scientific facts) the goal of both programs remains the same: protecting children from engaging in risky sexual behaviors in order to avoid specific “problems” like teen pregnancy and sexually transmitted infections.

The naturally innocent, primitive, emotional child that dominates American societal belief is contrasted with the archetype of the accomplished, civilized, rational adult. Educational philosopher John Dewey stated that childhood and adulthood are often seen as fixed points between developing and developed. Dewey believed this dualism can be problematic because it associates immaturity with a negative void, a period where children are inherently lacking capacities, and adulthood with a positive, fixed period where development and growth are complete. This mode of binary thinking creates a false image of a perfect adult, and constructs an image of growth as something that is given and not actively pursued.229 Although Dewey does

228 Irvine, *Talk about Sex*, 13
not mention these concepts at the time, these external adult standards are often heavily racialized, class-based, and sexualized based on white, middle-class, heteronormative ideals. It is not enough for children to be brought up to be an adult, but a specific, certain kind of adult.

Human development thus becomes “analogized with the progress of civilization itself,” where “narrative tropes of development, the beginning and the ending, constitute a binary opposition joined through a transitional middle.” Since these middle transitional years are seen as children “gaining mastery over primitive instincts,” adult monitoring is important for the “sake of [both] individual and social progress.” These unstable “middle” years become the sharp precipice between emotions/rationality and uncontrolled behavior/responsible actions. Children are “fragilely innocent until the moment they step over some line, at which point they become instantly, irredeemably wicked.” Youth are then dangerously dangling between the balance of purity and deviance based on an understanding of maturity as a fixed end point rather than an on-going process.

This strict divide between childhood and adulthood remains prevalent today, and is especially seen within mainstream sex education curricula. Children are still held “to perfectionist standards that adults are not expected to meet,” and their problems are seen as “separate from those of adults,” as if they are not interconnected. If we let go of the “narrative of adolescent-becoming and adult-being that situates the present as accomplished fact rather than

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232 Levine, Harmful to Minors, xxxi-xxxii.

233 Ibid., 354.
as a part of continual processes of becoming,” we can better understand maturity as in
development and pertaining to the realm of possibilities, rather than to the realm of truth.”²³⁴

*Historical Understandings of Childhood*

These notions of childhood, adolescence, and maturity that are implicitly interwoven throughout both curricula are also culturally specific concepts that have changed and transformed throughout American history. In the introduction to the edited essay collection, *Sexuality and the Curriculum: The Politics and Practices of Sexuality Education*, which analyzes the hidden curriculum in sex education, James T. Sears claims that most sex education curricula are plagued by an “absence of a historical understanding of the changing conception of childhood.”²³⁵ When youth sexuality is modeled after a passive, asexual child, it is difficult for educators to have discussions of gender identity, sexuality, or sexual pleasure. This “politicized and highly exploitable icon” of the romantic child ignores the complexities of real childhood lived experiences.²³⁶ Childhood thus needs to be understood and re-rooted in historical context in order to create an image where innocence and protection “do not depend on a repudiation of some level of understanding.”²³⁷

Steven Mintz in his book *Huck’s Raft: A History of American Childhood*, also critiques this nostalgia for a singular innocent and passive childhood experience. Mintz claims that “childhood is not an unchanging biological stage of life, but rather a social and cultural construct

²³⁴ Talburt, “Intelligibility and Narrating Queer Youth,” 35-36.


²³⁷ Ibid., 198.
that has changed radically over time.” Mintz demonstrates that perceptions of childhood are heavily influenced by the economic and social context of the time. For example, during the pre-modern stage of childhood, Mintz claims that American children were seen as “adults-in-training that needed to be prepared for salvation and inducted into the world of work as early as possible.” This image of childhood as a brief training period before adulthood mirrored the economic and social realities of the time, where most families needed to have multiple children working in order to survive. There was not a term yet for adolescence as “full adulthood was measured by economic independence rather than age.”

This belief started to shift with industrialization, as the children of the urban middle class became a source of social capital instead of sources of labor that were no longer economic assets to the family. Childhood for this class became a “stage of life to be enjoyed and prolonged,” a formative era where “character and habits were shaped for good.” Certain children came to be seen as innocent, fragile, malleable, and corruptible, and in need of protection from mandatory school attendance and child labor laws, and institutions such as orphanages, reform schools, and children’s hospitals. However, Mintz is careful not to attribute this view of childhood to all youth. Within the laboring classes and the institution of slavery, children continued to be

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239 Ibid., 10.

240 Luker, *When Sex Goes to School*, p. 47.


242 Ibid., 77.
“indispensable economic resources whose labor could be exploited in new ways” as the market economy grew.²⁴³

The concept of adolescence did not even enter public discourse until psychologist G. Stanley Hall popularized the term in 1904.²⁴⁴ Based on the expanding field of 19th century childhood studies that embraced the development-as-civilization model and a Victorian moral code that stressed sexual repression and self-control, the concept and modern understanding of adolescence was created.²⁴⁵ In this model, childhood was seen as a time of freedom and innocence, and adolescence was seen as a distinct, conflict-ridden stage of development.²⁴⁶ Hall heavily relied on biological stages of development and claimed that children were growing up too fast, that adolescence needed to be prolonged, and that the “early and mid-teenage years needed to be spent in specialized institutions designed to meet adolescents’ special and psychological needs.”²⁴⁷

As Moran demonstrates in his historical overview of the changing notions of adolescence, youth culture was altered and affected by multiple dynamics within society. Conceptions of childhood and adolescence were constructed and re-constructed throughout history along with changes to the institution of the family, school reform movements, and the growth of the modern consumer economy.²⁴⁸ These conceptions were also often codified in the

²⁴³ Mintz, A History of American Childhood, 134.
²⁴⁴ Ibid., 187.
²⁴⁶ Mintz, A History of American Childhood, 196.
²⁴⁷ Ibid., 187.
²⁴⁸ Moran, Teaching Sex.
legal and medical arenas, perhaps most strikingly in marriage and consent laws. While numerous factors such as economics, family structure, and death and birth rates affect marriage rates, AOUME’s reliance on marriage as a threshold into adulthood is an inconclusive way to determine maturity, as the age one could even legally get married has changed rapidly over time.

The history of childhood is neither completely linear or uniform as society has often shifted between protecting adolescents from adulthood and preparing adolescents for adulthood. There is extensive literature on the history of childhood that is beyond the scope of this thesis; however, it does suggest that child development does not fit neatly within a singular historical or philosophical narrative. Children have widely different experiences, and their levels of maturity and competence are shaped by the social, cultural, and economic aspects of the time period. Thus, without rooting notions of childhood in a historical context, broad statements within sex education curricula about adulthood and even specific comments about the appropriate age for marriage miss an opportunity to examine and evaluate changing notions of maturity.

*The Social Construction of Adolescent Sexuality*

Both AOUME and CSE’s commitment to supporting the prohibition of sexual activity represent the “mixture of fear, judgment, and prohibition that marks the treatment of adolescent sexuality.”

Sexuality is seen first and foremost as an “adult” form of expression, and one that has grave consequences for adolescents who decide to “play with fire.” This can be seen directly echoed in the *Sex Respect* curricula that calls adolescence “the toddlerhood of sexuality” and compares teaching students about safe sex with giving an eight-year-old a car loan and

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“trust[ing] a baby with a butcher knife.” As Cindy Patton writes in her 1996 book about the fears and concerns brought about by the AIDS epidemic, *Fatal Advice: How Safe Sex Education Went Wrong*, “it’s as if some magical threshold must be crossed before young people can safely engage in the pursuit of pleasure together.” This does not discount the fact that there are biological prerequisites for engaging in sexual activities; however, many scholars have challenged this singular focus on the biological aspect of sexuality.

Cultural anthropologist Gayle Rubin in her 1984 essay “Thinking Sex” states that “human sexuality is not comprehensible in purely biological terms.” Rubin’s “domino theory of sexual peril” provides further insight into Western society’s construction of children’s sexuality by demonstrating the effervescent need society has in drawing an imaginary line between good and bad sex and sexual order and chaos. Within this line, children’s sexuality is always seen as connected to bad sex and thus ultimate chaos. Rubin wrote that “popular culture is permeated with ideas that erotic variety is dangerous, unhealthy, depraved, and a menace” and laws are able to enforce these ideas of heteronormativity by emphasizing the trope of the innocent child. From anti-obscenity laws to policies against homosexuals and sex offenders, “the notion that sex *per se* is harmful to the young has been chiseled into extensive social and legal structures designed to insulate minors from sexual knowledge and experience.”

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254 Ibid., 152.

255 Rubin, “Thinking Sex,” 144.
Due to the fact that political and legal structures are reliant on childhood protection as justification for punitive policies, Rubin argued that society is “especially ferocious in maintaining the boundary between childhood ‘innocence’ and adult ‘sexuality’” and is consequently unable to nurture, develop, or even recognize the sexuality of the young, and instead focuses on the denial and punishment of any sexual activity under a randomized, fictional, age of “consent.” Rubin argued that the political and legal system use childhood protection oftentimes as the basis for determining the outer limits of the charmed circle of sexuality (behaviors that are unnatural, bad, abnormal, and damned). This image of the child is not connected to any actual, lived experiences of any historical children, but instead is an almost mythical representation of the seemingly perfect child that could be a realized, collective faultless future. By using the notion of innocent, asexual children, popular culture and political and legal structures have been able to pass punitive sexual policies that as Rubin describes, are based on an imaginary line between order and chaos. Therefore, regardless of the curriculum, adolescents are still intrinsically linked to deviance.

Within the social construction of adolescence and adolescent sexuality, and in the current sex education debates, there is a large emphasis on the protection of children so that they can become productive and moral adults. Society denies teenage sexuality, while at the same time fearing it as a path to deviance and crime. These contradictions have created an image of youth as an object that needs to be protected, controlled, harnessed, and steered in a normative direction. Levine compares these modern efforts to protect the romantic child in order to produce

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256 Rubin, “Thinking Sex,” 158.

decent adults to the “solicitude and cruelty” of the “foot binder’s technique of enhancing the beauty of the woman by stunting the graceful foot of the girl.”258 If maturity is more fluid than a space-filler between two specific end-points, a theoretical space is needed to discuss the historical realities of youth and their desires and practices. In order to reimagine adolescent sexuality, and operate outside of the rigid dichotomies between innocence and maturity, normal and deviant, and childhood and adulthood, adolescents must be disconnected from the imagined, universalized innocent child in order to voice their desires and exercise authentic agency over their bodies and sexualities.

258 Levine, Harmful to Minors, p. xxxi.
Conclusion: A Democratic, Transformative Sex Education

Sex education in the United States has a long history of using fear-based tactics to limit “problem” societal behaviors. Even in the modern era, both AOUME and CSE programs share the goals of limiting teenage pregnancy and sexually transmitted diseases. While these goals are important, they are also limiting, and sex education is more ideologically complex than just a tool to regulate individual behaviors. For example, the main goal of sex education programs in Sweden is “to help each individual develop a sex life that [is] personally meaningful and satisfying.”259 By prioritizing each individual’s healthy sexual development, Sweden is able to foster “sexual sovereignty” instead of arguing over which specific set of values or morals should be instilled in youth.260 If students are able to genuinely consider other perspectives, programs could also provide students with authentic opportunities for deliberation, which is a key ingredient to supporting diversity and democracy.

Even though AOUME and CSE curricula are based on very different ideologies, McKay and Kendall both claim that schools can still model and “practice participatory democratic decision-making processes” by presenting a diverse array of opinions and beliefs to students.261 This diversity of opinion could also help foster new kinds of discussions and debates within the classroom. Without helping students examine the underlying beliefs and assumptions that have driven the creation of these curricula, not only will the debate stay at a standstill, but students will miss out on crucial learning opportunities. In order to truly reflect the diversity of society,

259 Zimmerman, Too Hot to Handle, 90.
260 Ibid., 91.
261 Kendall, The Sex Education Debates, 231.
curricula like CSE cannot “avoid the often-divisive issues that are the product of ideological diversity” but must focus, explore, and deconstruct these issues to aid understanding.²⁶²

Additionally, since both AOUME and CSE are fundamentally opposed to teenage sexuality and view maturity as operating within a strict binary system between a romanticized child and a mature adult, they cannot truly engage in any meaningful discussions of adolescent sexual behaviors and identity. As Kendall observed, most curricula and approaches “were far more representative of adults’ concerns and experiences than of teens.”²⁶³ Both curricula thus fail to connect their curricula to students lived experiences, which makes it difficult for students to understand themselves, their peers, and how sexuality is and has been interpreted and understood on a large scale.

AOUME and CSE disseminate certain “truths” about sexual behaviors and beliefs, without acknowledging the lived experiences of many students living within the United States. These curricula often reinforce an ageist, heteronormative view of sexuality and silence LGBTQ issues, all the while contributing to the continued objectification of women and men. The curricula explicitly privilege certain sexualities and reinforce traditional notions of purity and deviance, which are further constructed along gender, racial, and class lines. Especially within the U.S., “racist and sexist ideologies permeate the social structure to such a degree that they become hegemonic, and are mainly seen as normal, natural, and inevitable.”²⁶⁴ When these ideologies within mainstream academic knowledge and popular culture connect to produce

²⁶² Irvine, Talk About Sex, 107.

²⁶³ Kendall, The Sex Education Debates, 235.

²⁶⁴ Collins, Black Feminist Thought, 5.
school knowledge, specific ways of knowing are legitimized. Without an examination of how human interests, experiences, and normative assumptions have influenced knowledge, students are missing an opportunity to critically examine themselves and their societies.

Multicultural education scholar James A. Banks defines transformative knowledge as “concepts, paradigms, themes, and explanations that challenge mainstream academic knowledge and that expand the historical and literary canon.” This knowledge is influenced by human interests and experiences, “reflects the social relationships within society,” and challenges traditional hegemonic power dynamics in order to help people improve society. Using this model, a transformative sex education curriculum would look very radical, even compared to current progressive curricula. First, it would be inclusive of all genders, sexualities, races, religions, and ethnicities.

The curriculum would begin by having students learn about sexuality and sexual behaviors from multiple sources, but would also encourage students to challenge and investigate these sources in order to critically examine the current pervasive stereotypes and beliefs that exist. By interrogating and challenging the definitions and constructions perpetuated throughout mainstream knowledges and popular culture, a transformative sex education curriculum could start the process of dismantling the present dichotomies of good/bad, normal/deviant, male/female, and heterosexual/homosexual in order to be more inclusive and relevant to students. Students would be encouraged to challenge and investigate the sources of knowledge

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266 Ibid., 16.

267 Ibid., 17.

that informed their views of themselves, their bodies, and their beliefs. This curriculum would expose students to the power dynamics present in sexual actions, behaviors, and knowledge production. Students would also learn the ways both girls and boys are objectified within society and taught to operate within strict gendered social scripts in order to critically examine structural oppression.

Next, the curriculum would help students create connections between these knowledge sources and themselves. A transformative sex education would center the lived experiences of youth. Educators would recognize that all students’ notions of sexuality have been informed by “peers, culture, religion, violence, history, passion, authority, rebellion, body, past and future, and gender and racial relations of power” and that these experiences would need to be examined. A transformative sex education curricula would be collaborative and constantly in process, as students’ beliefs, ideas, and experiences would guide and influence the discussions and material. Educators would also need to provide females with “access to a legitimate position of sexual subjectivity.” These discussions would “release women from a position of receptivity, in order to “enable an analysis of dialectics of victimization and pleasure,” and would “pose female adolescents as subjects of sexuality, initiators as well as negotiators.” The classroom would create a space for a teenage girl to “see herself as a sexual being who feels entitled to sexual pleasure and sexual safety, who makes sexual choices, and who has an identity as a sexual being” – and that means “placing desire at the heart of sexual subjectivity.” It would also

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270 Ibid., 43.
271 Tolman, Dilemmas of Desire, 6.
create a space for boys to explore their emotions and their experiences with perceptions of masculinity.

Due to its focus on student experience, this curriculum would also have real, historical actors at its heart. Instead of creating policy goals and outcomes that are based on the ahistorical trope of a Romantic child, a transformative sex education curriculum would ground its discussions in not only the current lived reality of youth, but also within socio-political and historical contexts. This would open up sex education from being a two-hour class once a year to a class where history, literature, economics, and other subjects also had a place. Students could examine present day issues like teen pregnancy, abortion, and STDS within historical contexts and thus have deeper, richer discussions about the policies and debates that are currently taking place today. Students could also learn and practice research skills through their examination of how statistics are used in the current policy deliberations.

Finally, these new curricula would empower students to construct their own notions of sexuality. Instead of just passively receiving information, students would learn material, interrogate and challenge sources of information, and finally construct their own concepts. The classroom would encourage communication and positive identity constructions. It would expose and discuss silences, and help students to understand their experiences in order to feel like autonomous agents of their own bodies. This curriculum would “invite adolescents to explore what feels good and bad,” and would be “grounded in experiences, needs, and limits.”  

Ultimately, by combining the analytical with the experiential, students will be exposed to a “richer way of knowing.”

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273 bell hooks, Teaching to Transgress: Education as the Practice of Freedom (New York: Routledge, 1994).
Society is rapidly changing and becoming more inclusive of all genders and sexualities. In order to prepare students to live and interact in the world, sex education needs to transform alongside society. It is not enough to simply add discussions of contraception and view sexual health education as progressive. As demonstrated, even the most comprehensive curriculum silences many students, and often reinforces a gendered, racialized narrative that “good” girls are passive, asexual victims of male sexual desire. These narratives are damaging to both boys and girls, and especially to low-income students of color whose sexual identities are inextricably connected with societal narratives of deviance. The current mainstream curricula do not provide enough space for a critical examination of students lived experiences and leave no space for female agency. By incorporating multiple knowledges into the classroom and interrogating popular beliefs about sexuality, the sex education classroom can move beyond a classroom of silences and scattered uncomfortable giggles and into a site of empowerment for all students.

In order to implement a transformative, democratic curriculum, we need to first abandon the notion of the romantic child and the urge to protect adolescents from sexuality. The debate should not be on whether sex education should be value-free or value-laden, because the implicit and underlying assumptions guiding CSE and AOUME are not easily reconciled. CSE advocates have tried so ardently to avoid controversy in order to compromise that they have lost sight of their original goals to truly empower students with knowledge and the decision-making skills to understand themselves and society. Without letting go of the need to control adolescent sexuality, CSE supporters cannot effectively provide a counter-argument to the rigid, fear-based, dichotomous rhetoric that dominates AOUME.

The societal conversation needs to revert back to what the purpose of sex education actually is, and what it can be. Both the political right and left have a history of not supporting
federal intervention in education policy; however, sex education tends to be viewed as more of a health issue than an education issue, as seen by its inclusion in health sections rather than education sections of appropriations bills. In this light, sex education has become a way for both the right and the left to maneuver their specific guiding beliefs into the political arena. If sex education is viewed as just that, education, perhaps the focus will return to the students themselves. If the goal is to help students develop a healthy and complete understanding of sexuality rather than simply reducing rates of teen pregnancies and STDS, students need to be introduced to a variety of diverse beliefs and empowered to construct their own notions and identities, so that they can understand themselves, their peers, and society in order to function as democratic citizens living in a diverse world.
Appendices

Appendix A: “Dedicated Federal Abstinence-Only-Until-Marriage Funding by Fiscal Year (1982-2011)”


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Notes: Dollars in millions. CBAE and AFLA are rounded to the nearest million. Earmarks are rounded to the second decimal.

*This includes only the portion of the program dedicated to abstinence-only-until-marriage programs.
†Fifty million in federal dollars are allocated for the Title V abstinence-only-until-marriage program. The grant requires states to provide three state-raised dollars or the equivalent in services for every four federal dollars received. If all states participated in the program and contributed matching funds, the match would total $37.5 million.
‡CBAE includes approximately $4.5 million each year for evaluation.
#In addition to the three traditional funding streams, at least $3.75 million in earmark funds were allocated for abstinence-only-until-marriage programs in federal Fiscal Years (FY) 2004 and 2005, along with $835,000 in FY2008 and $535,000 in FY2009. The vast majority of these earmarks went to Pennsylvania.

Appendix B: Federal TPPI, PREP, and Title V Funding, FY 2010

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<th>PREP**</th>
<th>Title V Ab-Only</th>
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*Amounts listed include Teen Pregnancy Prevention Initiative (TPPI) Tier 1: Evidence-Based Programs, Tier 2: Innovative Strategies, and Tier 2: Communitywide Initiatives funding.

**Amounts listed include Personal Responsibility Education Program (PREP) state-grant and Personal Responsibility Education Innovative Strategies (PREIS) funding.

***Florida was awarded Fiscal Year 2010 PREP state-grant funds but later returned the funds to the federal government.

Appendix C: Sexuality and STD/HIV Education Policies, by state, as of 2017.

Bibliography

42 U.S. Code § 300z. Title XX of the Public Health Service Act.


42 U.S. Code 713, § 513. Personal Responsibility Education.

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Griswold v. CT 381 U.S. 479 (1965).


