

ABSTINENCE EDUCATION

THE 1996 LAW:

Through Section 510, an expansion of the Maternal and Child Health (MCH) block grant enacted as part of the 1996 Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA), \$50 million in federal funds are available each year to support abstinence programs that preclude education about contraception. A state match of \$3 for every \$4 federal dollars is required. The law's definition of a fundable program has eight points, including that the program teach that "sexual activity outside the context of marriage is likely to have harmful psychological and physical effects." Sometimes called "abstinence-unless-married" education, it holds that one should abstain except when married (thus, the divorced, widowed or never-married should abstain whether age 15 or 50).

KEY DEVELOPMENTS:

Funding: Funding for abstinence-unless-married education has expanded beyond the \$50 million per year authorized in the 1996 welfare law. Combined with two other federal sources, the Special Projects of Regional and National Significance-Community-Based Abstinence Education (SPRANS-CBAE) program and the Adolescent Family Life Act (AFLA) total funding in FY 2002 for abstinence-unless-married funding has climbed to \$100 million. Specifically, the 1996 program through the welfare law contributes \$50 million; SPRANS-CBAE provides \$40 million (up from \$20 million in FY 2001); and \$10 million comes from AFLA. Since 1996, over \$550 million has been made available in federal and state matching funds. Proponents of increased SPRANS funding have argued it is necessary to achieve "parity" with more comprehensive approaches to teen pregnancy prevention; however, the "parity" argument contrasts expenditures for abstinence-unless-married education against costs that pay largely for medical services.

All states except one have utilized the Section 510 funds. Many states have targeted younger children and states often use the funds for broad based media campaigns.

Regulations for the 1996 Section 510 abstinence program did not require that funded programs teach each of the eight legislated abstinence points; rather regulations insisted that no funded program undertake an education program that contradicted any of the eight themes. SPRANS grant programs, however, must adhere to *all* eight points. Also, under SPRANS, grants can by-pass states and be awarded directly to local projects. These SPRANS grants can only fund efforts that target 12 to 18 year olds, and grantees may not provide contraceptive education, even with separate funds.

RESEARCH:

Research on federally funded abstinence-until-marriage projects will not be finalized until after reauthorization. However, available research raises concerns about an abstinence education approach that does not provide contraceptive education. A review of "abstinence-only" evaluations found that "there do not currently exist any abstinence-only programs with reasonably strong evidence that they actually delay the initiation of sex or reduce its frequencyⁱ". U.S. Surgeon General David Satcher concurs with this analysis and in the report "Call to Action to Promote Sexual Health and Responsible Sexual Behavior", he states that informing adolescents about contraception "does not increase adolescent sexual activity, either by hastening the onset of sexual intercourse, increasing the frequency of sexual intercourse, or increasing the numbers of sexual partners."ⁱⁱ

Even though some research suggests that particular abstinence strategies appear to delay the onset of sexual activity, this good news is tempered by findings of negative health consequences for some youth. For example, a “virginity pledge”—to abstain from sex until marriage—delays intercourse on average by nearly 18 months. However, pledging had no effect among older teens (18 and older); further, pledgers were less likely than a comparison group to use contraceptives once they had intercourse, and thereby were at greater risk for sexually transmitted infections and pregnancy.ⁱⁱⁱ

In contrast, evaluations of programs that combine abstinence education with contraceptive information find that they can help delay the onset of intercourse without a concomitant concern regarding health risk^{iv}.

LEADER AND PUBLIC OPINION:

Major medical institutions such as the National Institutes of Health, The Institute of Medicine, the White House Office on National AIDS Policy, and the American Medical Association have all issued reports highlighting the scientific research in support of comprehensive sexuality education that also includes contraceptive education^v.

Congressional members on both sides of the aisle have raised the issue of Section 510’s funding inflexibility. In November of 2001, the U.S. House of Representatives subcommittee that is most responsible for welfare devoted a hearing to teen pregnancy prevention, and several members addressed the value of making Section 510 more flexible. At the hearing, Rep. Benjamin Cardin (D-MD) suggested that states are “pigeonholed” by the current law regarding abstinence education and may miss out on opportunities to innovate; Rep. Nancy Johnson (R-CT) noted that the overall welfare law emphasized “devolution” of program and policy decisions to the states—except in relation to abstinence education. Rep. Jim McDermott (D-WA) asked why programs are focused on abstinence-only activities when programs cannot predict which teens will choose to become sexually active.

Virtually all of the parents of 7-12th graders (97%) want their child’s sexuality education program to cover abstinence, according to a national study conducted in 2000 by the Kaiser Family Foundation^{vi}. Notably, these parents also want lessons on how to use condoms (85%) and on general birth control topics (90%)^{vii}. State and local surveys have also found strong support for information about both abstinence and birth control^{viii}.

SOME REAUTHORIZATION OPTIONS:

- Retain the current provision; expand or contract spending
- Change the definition of what types of abstinence program can be funded, including an assurance that any program must be “medically accurate”
- Eliminate the provision; limit federal investment in “abstinence-unless-married education” to programs funded outside PRWORA (i.e. SPRANS-CBAE)
- Allow states to determine what types of abstinence education and teen pregnancy prevention initiatives they believe are appropriate in their state

CLASP RECOMMENDATION

Absent evidence that abstinence-until-married education works better than other abstinence education strategies (including those that provide contraceptive education), and given evidence that the approach appears to create harmful health risks for some, Congress should re-visit the provision. A key question is funding and whether and to what extent the half billion in federal and state funds spent since 1996 on a restrictive approach to abstinence education should continue. To the extent funds are made available, they should be allowed to be spent more flexibly.

ENDNOTES

ⁱ Douglas Kirby, *Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy*, (Washington, D.C.: National Campaign to Prevent Teen Pregnancy, May 2001).

ⁱⁱ Dr. David Satcher, *Call to Action to Promote Sexual Health and Responsible Sexual Behavior*, (Office of the U.S. Surgeon General: June 2001).

ⁱⁱⁱ Peter Bearman and Hannah Brueckner, “Virginity Pledges and the Transition to First Intercourse”, *Pregnancy Prevention for Youth: An Interdisciplinary Newsletter*, Vol. 3, No. 2, (June 2000); “Virginity Pledges as they Affect the Transition to First Intercourse”, *American Journal of Sociology*, Vol. 106, No. 4, (2001).

^{iv} Specifically, several studies found that the evaluated programs not only could delay intercourse but also reduce the frequency of intercourse and the number of partners. Douglas Kirby, *Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy*, (Washington, DC: National Campaign to Prevent Teen Pregnancy, May 2001).

^v Marcela Howell and Ammie N. Feijoo, “Science or Politics? George W. Bush and the Future of Sexuality Education in the United States” (Advocates for Youth Issue Brief, January 2001).

^{vi} “Sex Education in America: A View from Inside the Nation’s Classrooms”, *A Series of National Surveys of Students, Parents, Teachers, and Principals*, Kaiser Family Foundation Website, (September 26, 2000), (Accessed November 6, 2001), Available online: <http://www.kff.org/content/2000/3048/Chartpack.pdf>

^{vii} Ibid.

^{viii} Jodie Levin-Epstein, “Abstinence-Unless-Married Education”, *Center for Law and Social Policy*, (March 1999).