



Testimony of Julie F. Kay  
Senior Staff Attorney  
Legal Momentum

Hearing: Assessing the Evidence of Domestic Abstinence-Only Programs

The Committee on Oversight and Government Reform

April 23, 2008

## **Overview**

Founded in 1970, Legal Momentum is the nation's oldest legal advocacy organization dedicated to advancing the rights of women and girls. Legal Momentum's Sexuality and Family Rights program promotes women's autonomy, protects women's sexual and reproductive rights, and works to expose policies that limit these rights.

The need for effective, accurate and high-quality sexuality education, free from the bias and political ideology that drives abstinence-only programs, is clear. Legal Momentum believes that teenagers must be given honest and comprehensive information about the risks of sexual activity—and how to responsibly handle those risks if they do decide to become sexually active. Young women and girls in particular need to be empowered with positive messages and accurate information that give them the confidence and ability to make healthy and informed sexual and relationship choices throughout their lives.

In September 2006, Legal Momentum, in partnership with the Human Rights Program at Harvard Law School and the Program on International Health and Human Rights at the Harvard School of Public Health, convened a roundtable of experts from a range of disciplines to discuss abstinence-only programs and their particular impact on women and girls. The daylong meeting was prompted by the dramatic increase in federal funding for these programs and the growing evidence that they are ineffective at best, and harmful at worst.

As an outgrowth of that meeting, Legal Momentum released its recent report, *Sex, Lies & Stereotypes: How Abstinence-Only Programs Harm Women and Girls* (available at <http://www.legalmomentum.org/report2008>). The report draws on the work of the experts who took part in the roundtable, broader academic research, and Legal Momentum's original research into the history, funding, and implementation of abstinence-only programs. It provides the most comprehensive report to date on the abstinence-only movement, and is the first extended inquiry into the gender harms of this approach to sexuality education. This testimony is based on the findings in our report.

Abstinence-only programs rest on the faulty premise that young men and women will never have sex during the average 12–15 years between puberty and presumed heterosexual marriage. Research shows that the vast majority of people do not wait until marriage to have sex: by age 44, 95% of people have had sex before marriage.<sup>1</sup> Thus, they actively deprive young people of information they need to avoid the adverse consequences of sexual activity during these critical years of young adulthood. Even those few individuals who remain abstinent until marriage are left with no tools with which to communicate with their partners about sexual issues or to go about intelligently planning their families once they do marry.

---

<sup>1</sup>See Lawrence B. Finer, *Trends in Premarital Sex in the United States 1954–2003*, 122 Pub. Health Rep. 73, 78 (2007).

When youth schooled by abstinence-only programs do become sexually active, the programs' anti-condom messages may actually discourage them from practicing safe sex, making the negative information the programs offer about contraception and disease prevention particularly dangerous. Such messages deny young people the opportunity to receive vital education to protect their health and well-being and, in particular, impede girls' ability to avoid unwanted pregnancy and sexually transmitted infections ("STIs"), to which they are more biologically susceptible.

The law that governs federally funded abstinence-only programs requires them to teach that sex outside of heterosexual marriage, at any age and under any circumstances, is inherently dangerous and wrong. Abstaining from sexual activity until marriage is presented as the only effective and acceptable way to prevent unwanted pregnancy and STIs.

Despite the fact that over \$1.5 billion in federal and state funding has been allocated for abstinence-only programs since they began in 1982, conclusive, reliable, scientific evidence shows that abstinence-only programs are ineffective at persuading adolescents to remain abstinent until marriage. Moreover, research has shown that even if some abstinence-only programs do temporarily delay sexual activity, these programs may result in greater long-term harm. Seventeen states no longer participate in the Title V abstinence-only-until-marriage program, declining to provide state matching funds.

Increasingly, government abstinence-only funding is being allocated to inexperienced, ideologically motivated, conservative, and anti-abortion groups while, in contrast, comprehensive sex education programs have been effectively precluded from federal funding. The serious negative public health consequences, particularly for women and girls, are of great concern.

### **Censoring and Distorting Reproductive Health Information**

Abstinence-only programs deprive women and girls of critical reproductive health information, with dangerous and even deadly consequences. By keeping young people ignorant about their sexual and reproductive health, abstinence-only programming endangers them, putting them at unnecessary risk of STIs by refusing to educate them about safe sex; it particularly endangers young women, leaving them unable to take control of their own reproductive capacity by failing to provide information about contraception. For women of color, the absence of accurate sexual health information is particularly damaging given the high rates of HIV infection in their communities, while the gender stereotypes promoted by the programs exacerbate racial as well as sexual inequalities.

Abstinence-only programs frequently fail to provide basic biological and reproductive health information. Abstinence-only programs often consider basic biology as over-sexualized and prefer to withhold information about students' own bodies and development. For example, the federally-funded Abstinence Clearinghouse recommends against including detailed anatomical diagrams or pictures in curricula and states that

“diagrams of internal organs are acceptable, but images or pictures of external genitalia in any form, whether diseased or healthy, can be detrimental to the health of young men and women’s minds.” There is no evidence to support this claim.

When programs do contain anatomical information, the curricula often focus on the female body, turning it into a treacherous and terrifying place through a fear-based portrayal of sexual activity and STIs. The potential consequences of STIs for women are often deliberately exaggerated -- infertility is commonly cited -- and treatment information is frequently left out. Anti-abortion bias is also manifested in the curricula’s medically inaccurate discussions of pregnancy and assertions about when life begins, and their inclusion of falsehoods about the safety of abortion.

The most grievous aspect of how these curricula discuss STIs is their usual failure to discuss how most STIs can easily be prevented and treated or cured. The importance of condom use and early detection to preserve women’s health is rarely, if ever, mentioned. This approach reinforces the stigma associated with STIs and can discourage students from getting tested or seeking medical attention. Because recent figures from the Centers for Disease Control and Prevention (CDC) show that at least one in four teenage girls nationwide has an STI, with rates even higher for women of color, it is imperative that we offer a more effective approach to disease prevention than abstinence-only.

Abstinence-only programs fail, as well, to address teenage pregnancy. The U.S. still has the highest teen pregnancy rate in the industrialized world although until recently the teen birthrate had declined steadily – a decline that had been attributed to increased contraceptive use by sexually active teens. The most recent data, however, indicate a 3% rise in the teenage birthrate, the first such increase since 1991. Approximately 750,000 teenage girls become pregnant each year, and nearly one-third of all American women will become pregnant by age 20. Teen mothers are more likely to be economically disadvantaged than their peers who do not bear children and are less likely to complete their schooling and take advantage of better work opportunities. Teen pregnancy and teen births also place a tremendous financial burden on the rest of society.

In order to resume the decline in rates of teen pregnancy, it is critical that young people learn about the proper use of contraceptives *before* they begin to engage in sexual activity. People who practice contraception from their first sexual experiences are more likely to continue these practices throughout their lives. Yet abstinence-only programs deliberately withhold contraception information, wrongly believing such information will confuse teenagers and encourage sexual activity.

### **Harmful Stereotypes Aimed at Women and Girls**

Even if abstinence-only programs were effective, the particular harms these programs cause to women and girls makes it unethical to teach them to young people. By using biased and misleading information, employing scare tactics aimed at young women, and promoting a view of human sexuality and relationships that presents gender stereotypes as truth and homophobic sentiments as fact, abstinence-only programs particularly target

women and girls. Legal Momentum’s report, *Sex, Lies & Stereotypes*, includes substantial evidence about how abstinence-only curricula frequently employ outdated gender stereotypes, portraying girls as naturally chaste and casting them as the gatekeepers of rampant male sexuality. By making sex education into abstinence education, abstinence-only programs fail to genuinely address critical issues such as sexual behavior, sexual orientation, and sexual violence or coercion.

As Erin, a young woman from Oregon, told Legal Momentum about her experience participating in an abstinence-only program:

Because we didn’t have accurate information about what was healthy and what wasn’t, I endured some awful situations because I didn’t know the difference. We didn’t talk about respect, boundaries, and sexual communication. So the myth of “boys push and girls resist” informed everything. We never talked about consent because with abstinence curriculum you shouldn’t consent.

Most abstinence-only texts fail to meaningfully discuss rape, sexual assault, or coercion, and even fewer give guidance to victims of sexual violence. Further, when responsibility for male sexual feeling is placed on young women and girls, it removes male responsibility and, in instances of sexual harassment and assault, harmfully blames the victim and excuses the perpetrator. Moreover, there is no acknowledgement that some teens may not experience any sexual feelings, or may be attracted to members of the same sex.

These texts ask girls constantly to monitor their own behavior and to be responsible for dressing in a way that ensures that male sexuality is kept in check. Their tone is condescending to both girls and boys, and fails to provide real guidance to teens about how they can develop healthy relationships of all kinds, whether sexual or not.

The sexist stereotypes that are so prevalent in abstinence-only education are particularly harmful for young women during adolescence. This “hidden curriculum” on gender—teaching men and women “proper” gender roles as a necessary, but unacknowledged, part of teaching abstinence-only—portrays women as socially and sexually submissive and strips them of ownership of their own ambitions and desires. For young women, there is already a strong stigma attached to female sexual agency. Research shows that many young women feel that they lack the power to make autonomous sexual decisions, a shortcoming that often leads to risky, unhealthy, and unwanted sexual experiences. Many girls fear that if they broach the topic of safe sex with their partners, they will be thought of as promiscuous and be rejected and ostracized as a result.

These narrow and outdated gender stereotypes ignore the diversity of gender roles and family structures common in the U.S. today. Many programs also perpetuate sexist and racist stereotypes about women of color. When teachers and other adults present such stereotypes as fact, students are less likely to recognize gender discrimination, more likely to excuse acts of male sexual aggression (and less likely to recognize instances where males are victims of sexual violence), and less able to develop as ambitious,

intelligent, and healthy young adults. Indeed, the gender stereotypes taught in abstinence-only programs are dangerous not only because they undermine female sexual decision-making, but also because they limit opportunities and negatively affect societal expectations for men and women alike.

### **Stigmatizing Homosexuality**

Abstinence-only programs also deliberately stigmatize LGBT (lesbian, gay, bisexual, transgender) youth and families. These programs are required by the federal funding guidelines to instruct students that heterosexual marriage is the “expected standard” for sexuality, and that having sexual relationships or children outside of marriage is harmful. Perpetuating such prejudice is damaging to teens who identify as LGBT or are struggling with their sexuality, and to children in LGBT-headed families.

In addition, many abstinence-only programs conflate being gay with being HIV-positive, diseased, or disease-prone. Negative portrayals of homosexuality in abstinence-only programs can contribute to school harassment and violence as well as to discrimination against LGBT youth. More broadly, they send the message to young adults that discrimination against LGBT individuals is acceptable, thus implicitly (and often explicitly) undermining state and local anti-discrimination laws.

The stigmatization of homosexuality in abstinence-only education is no accident. Because the federal abstinence-only funding definition requires funded programs to emphasize that a “mutually faithful relationship in the context of marriage is the expected standard of human sexual activity” and to emphasize the “harmful psychological and physical effects” of sexual activity outside of marriage, funded programs must either avoid the issue of homosexuality entirely or treat it negatively.

### **Stigmatizing Single-Parent Families**

The emphasis on marriage in abstinence-only curricula also has a detrimental impact on the millions of children born and raised outside of marital relationships. Under federal law, funded programs must teach that bearing children out of wedlock is “harmful” to children, parents, families, and society, and that a monogamous relationship in the context of marriage is the only acceptable expression of human sexuality.

This rhetoric is of no minor concern. In 2004, 35% of all births were to unmarried parents. The federal abstinence-only funding definition sends a clear message about these children, stating: “Bearing children out of wedlock is likely to have harmful consequences for the child, the child’s parents, and society.” This immediately stigmatizes the millions of children born to unwed parents, teaching them that their very existence is bad for society, and that their parents were wrong to have them.

Moreover, in the past decade, the percentage of children living with both parents has dropped, while the percentage living in single-parent households has increased. By 2006, nearly one-quarter (23%) of children lived with only their mothers, 5% lived with only

their fathers, and 5% lived with neither of their parents. Many children in the 12.2 million single-parent families in the U.S. live with or have overnight visits from a parent's boyfriend or girlfriend. Sixteen percent of children living with single fathers and 10% of children living with single mothers also lived with their parent's cohabiting partner. The funding definition stigmatizes all of these families and relationships by declaring that monogamy is the "expected standard" and that any sex outside of marriage is likely to be harmful. The extent of the harm to children's respect for themselves and their parents from this condemnation and shame is unknown.

### **Conclusion**

Abstinence-only programs in the U.S. and worldwide are facing increasing scrutiny by state and national governments, public health experts, women's rights advocates, and concerned parents and young people. Challenges to these programs, through legislative efforts, community initiatives, and legal action, are seen nationwide. It is time for the federal government to stop funding these ineffective and harmful programs and to seek to ensure that young people receive accurate and complete sexual and reproductive health information and services.