

What You Don't Know Can Hurt You:  
The Skewed Logic and Problems Within Abstinence-Only Education.

Andrea Tedesco

2013 Rhodes Institute for Regional Studies

Introduction:

The past few years Tennessee legislators have had an overwhelming shift towards the highest Republican supermajority in decades. In both the Senate and House of Representatives, Tennessee makes the term “red state” seem like an understatement to describe its political climate. The heavy majority has caused out of state Republican Party members to see Tennessee as a prime place to test whether or not bills can pass. Bills are introduced in Tennessee with the intention of seeing whether or not they could gain traction with fewer Republican policy makers. Understandably, with the rise of this supermajority, there has been a rise of ultraconservative bills such as the SB 49 or the ‘Don’t Say Gay’ bill—advising teachers to never discuss homosexuality—, the subsequent SB 234 or the ‘Say Gay’ bill—commanding teachers to tell parents if a student is suspected of being gay—, HB 3621 or the ‘Gateway Sexual Activity’ bill, and 2013’s upcoming Amendment 1—which will be one of the most anti-choice pieces of legislation the United States has seen. Each of these bills seems more confusing and difficult to implement than the other.

House Bill 3621, also referred to as the Gateway Sexual Activity Bill, was introduced and passed in 2012. The bill was written by Representative Jim Gotto and vocally supported by Memphis’ Representative John DeBerry. The bill makes many changes to the already existing abstinence-only education laws. The authors claim within the bill to want programs in public

schools that will empower youth, encourage them to make healthy life decisions, but also accurately understand sexually transmitted diseases and contraception.<sup>1</sup> Tennessee was already teaching abstinence-only education, but a controversial addition was made in HB 3621: teachers now must teach what the bill refers to as ‘gateway sexual activities’. According to the authors, a gateway sexual activity is any activity that leads to sex—and all of these actions are only allowed to be taught in the language of risk and risk-avoidance. Due to the controversial nature of the bill, it received national attention, with the coverage by Time, New York Magazine, and Think Progress questioning whether Tennessee wanted its adolescents to even hold hands before marriage. The vague definition of gateway sexual activity given in the bill—referring to it as “sexual contact encouraging non-abstinent behavior”<sup>2</sup>—implies that hand holding really could be a gateway activity that educators must now describe only as risky behavior.

In 2012, Tennessee allocated \$3.2 million dollars in funding abstinence-only education programs.<sup>3</sup> During President Bush’s administration, hundreds of millions of dollars was being spent on abstinence-only sex education and programs supporting abstinence.<sup>4</sup> Despite the fact that President Obama’s administration has greatly reduced federal funding to abstinence-only education, Tennessee has continued to support abstinence programs. Whether or not the gateway sexual activity bill will change the more conservative lesson plans already being taught in Tennessee classrooms, it nevertheless represents the continued concern of not actually engaging in honest discussions about sex with adolescents. The debate between abstinence programs and comprehensive sex education is controversial issue with a lot at stake. Abstinence-only programs

---

<sup>1</sup> House Bill 3621, 1, 2012.

<sup>2</sup> HB 3621, 2, 2012.

<sup>3</sup> Tennessee Gov., Department of Health, <http://news.tn.gov/node/8299>, (accessed 12 July 2013).

<sup>4</sup> Waxman, 2, 2004.

continue to cost taxpayers money and, as I will argue, harm Tennessee's students. The truth of the matter is that abstinence-only education is not sex education. It is linguistically incorrect to call something educational about a topic, when the only thing it says about that topic is to not do it. Imagine a swimming class where the kids are only told that swimming is dangerous; therefore, they should never get into the water, or even wear swimsuits—because the act of wearing a swimsuit can often lead to swimming. No parent would call that being educated swimming. In the same way, abstinence-only programs are not “sex education”. They do not teach students about sex, they merely teach students to never have sex. Unfortunately, many of these programs not only do not teach about sex, they also perpetuate dated stereotypes, shame students, and promote conservative opinions and bias— all under the guise of helping empower youth. The debate over abstinence-only education and comprehensive sex education has dire consequences other than taxpayer's money; it literally shapes the way adolescents will think about sex, their sexual nature, and their future decisions.

#### Part I: The Drug Metaphor Taken Too Far

The phrase ‘sex, drugs, and rock & roll’ seems to be the believed pairing with which abstinence-only programs run. Discourse surrounding sex commonly connects, compares, and conflates sex and drugs—especially when it comes to teenagers. The belief is that if a teenager is engaging with risky behavior, he or she will probably be engaging in multiple different types of negative behaviors. When Tennessee's On Point president, Lesley Scarce, was asked what the goal of their curriculum was, she responded: “to help teenagers make the right life choices, in all areas”.<sup>5</sup> She cited studies connecting teens having sex to lower test scores, higher rates of drinking, and other negative behaviors. While it may be true that troubled teens act out in many

---

<sup>5</sup> Interview

different ways—sex being one of them—it is incorrect to conflate doing drugs with having sex. The way humans experience their own sexuality is inherently different to drug addiction. To simply lump together all of these ‘risky behaviors’ is to do a disservice to the adolescents in question. Through this paper, I will try to show that experimenting with drugs and experiencing life as a sexual being are completely different things and should no longer be compared as heavily as they currently are.

The gateway sexual activity bill obviously takes language from current anti-drug education already being taught to students. Abstinence-only curricula operate to tell students to avoid all sexual behaviors—similarly to how anti-drug talks are built around resisting peer pressure and not doing drugs. HB 3621 made additions to the standing abstinence-only education to mandate that teachers must not condone any behavior that could lead to sex and describe those behaviors as inherently risky. The problem is that the bill is that it does not explain exactly which actions fall under the category of gateway activity. The most common way students will have encountered the language of gateway activities is in the realm of drugs: most anti-drug talks include a discussion on how marijuana use is a gateway towards more dangerous drugs. The belief is that once a person has smoked marijuana he or she is suddenly much more at risk to do hard drugs than other students. Describing all actions that lead to non-abstinence behavior as gateway sexual activity makes it sound as if all interactions in a relationship are just done to possibly lead to sex. By utilizing gateway language, there is an implication that if a teenager holds hands or kisses another person, the people involved will suddenly be much more likely to have sex—therefore they are doing something dangerous or risky. The ‘slippery slope’ theory takes a lot of autonomy out of a person: holding hands or kissing does not necessarily make a person more likely to have sex. Authors of the bill claim to want to empower youth, yet says a

teacher must not encourage or advocate students doing anything that could end in non-abstinent behavior. A bill that should be about how to properly teach adolescents to view their sexuality and important choices discusses mainly risk-avoidance and makes the same flaw of conflating smoking, drug use, and sex together. It goes so far as to explicitly order sexual health educators to tell students that if they have sex, they are more likely to do drugs or be subject to sexual violence.<sup>6</sup> This gateway comparison is dishonest and implies that teenagers have no autonomy over their body or actions.

Teenagers will continue to have sex regardless of what they are being taught. The percentages of how many teenagers have sex and whether they are having safe sex will fluctuate, but it is very unlikely—if not impossible—that there will ever be a time when not a single teenager is engaging in sexual activity. Knowing that teenagers will probably be having sex, any sort of sexual health education should ideally take that fact into account. Instead, HB 23621 instructs teachers to “exclusively and emphatically promote sexual risk-avoidance through abstinence, regardless of a student’s current or prior sexual experience”.<sup>7</sup> This means, theoretically, if a student tells a teacher of his or her current sexual activity and asks how to avoid contracting HIV, and if the teacher is following the direction of this bill expressly, the teacher must instruct the student to stop having sex. The idea of a teacher being unable to give integral information to a student for his or her safety is absurd. Teachers need to be able to take a student’s sexual history into account when advising if the student’s wellbeing is the goal. Only promoting abstinence, regardless of a student’s situation, is doing a disservice to those students.

Describing all romantic activity as gateway sexual activity almost implies that sex is something that happens to a person, instead of a conscious act and choice a person must make. It

---

<sup>6</sup> HB 3621, 2, 2012.

<sup>7</sup> HB 3621, 5, 2012.

is insulting to the personal autonomy of a teenager to suggest that something like kissing can simply lead to sex without someone choosing to let that happen. If the bill truly wanted to empower youth, it should encourage sexual education programs to emphasize the many different possible stages in a sexual or romantic interaction, and how something should only happen at the expressed desire of every person included. By emphasizing the personal choices involved in sex, a teacher could acknowledge the power and control a person should always have during any sexual act—whether it is kissing, or something more. Legislators seem so concerned about teenagers having sex that they simply want to take all power away from them, without realizing that acknowledging their power will help them realize they have the power to choose to have sex, or choose to abstain. In most discussions and portrayals of sex, there is a belief that people have a set group of activities that happen until one person involved says to stop. Adolescents should be empowered by being taught the control they have over their actions, and especially the control they have over their own bodies. If empowerment is giving teenagers the power to make the right decisions, it is very flawed to do so by implying how little control they have over those decisions unless they simply say no. It is not empowering to tell a teenager that the only thing they can do to be safe is to run away from making decisions. The truth is, in consensual situations, choosing whether or not to have sex is one of the most personal and autonomous choices a teen can make, and to frame it differently is deceptive and dishonest to the students.

Drugs and sex operate very differently in peoples' lives, so comparing them so closely to one another is simply a bad parallel. Abstinence-only curricula rely on the conflation and comparison between drugs and sex. In order to emphasize a 'just say no' curriculum, it makes sense to simply group sex together with other things people believe adolescents should abstain from doing. However, if the goal of a curriculum really is to encourage healthy behavior and

personal growth, presuming that sex and drugs are almost identical in terms of risky behaviors is false. To be clear, sex can be risky and can have lifelong negative consequences for a person—especially when done with very little understanding—nevertheless, sex, sexuality, and sexual identity are hugely important and integral parts to person’s core existence. Especially in contemporary culture where an emphasis is placed on how a person identifies his or her sexual preferences, sex cannot simply be ignored. Sexuality is a very encompassing idea. It includes not just the act of sex, but how human beings exist within society and relationships. Sexuality is a person’s capacity to be sexual, not just the act itself of being sexual. People are not born heroine addicts, but they are born sexual beings. Even if someone abstains from sex for their entire life, they still have a belief of their own sexuality and sexual activity. For instance, a person who identifies as asexual could spend the majority of his or her time abstaining from sex because of lack of desire. Most would agree, however, that an asexual identity is very different from a recovering addict joining a narcotics anonymous program. The reasons behind having sex, the influence sex has in everyone’s lives—whether they are having it or not—and the positives to sex are uniquely different than doing drugs. The only long-term benefit of doing heroin is pleasure, whereas there are many positive reasons to have sex. Even if someone is choosing to abstain, he or she may choose to masturbate, which is healthy and common behavior that can lead to reduced stress and positive self-esteem.<sup>8</sup> Telling students to never have sex is ignoring the ways people will always be sexual: in their beliefs about their life, in their relationships, and also simply in how people view themselves. The gateway sexual activity bill only describes sex in a negative light, which could lead to students having a very negative self-image. If a person has only been taught that sex is wrong and should be avoided, responding to natural occurrence like

---

<sup>8</sup> <http://www.plannedparenthood.org/health-topics/sex-101/masturbation-23901.htm>

being aroused or trying to determine one's sexual preferences will be muddled in a shameful confusion. The gateway sexual activity bill ignores the many sexual situations a person will get into even if they are choosing to abstain from sexual activity.

Kissing does not always lead to sex. In fact, kissing and handholding are relatively risk-free behavior. Instructing teachers to describe 'gateway sexual activity' only in terms of risk-avoidance—and to advise students to not engage in this risky activity—is negative for two main reasons. First, it undermines the trust of the students, and, second, it portrays many different positive social interactions in an incorrect and negative way. While many teachers may not take HB 3621 literally, if done so, they are required to not condone or encourage any sort of activity that may lead to non-abstinent behavior.<sup>9</sup> Under this definition, practically any action could constitute as a gateway sexual activity. When asked to give an example of a gateway sexual activity, the president of On Point answered, "Well we just shouldn't encourage any sort of... experimentation."<sup>10</sup> She did not really give a definition, but defined it with another vague word 'experimentation'. A person can experiment with anything and everything. While she said that people were overreacting and misunderstood what the bill's actual intention is, she herself did not define a gateway sexual activity. When few people can definitively describe what exactly the bill mandates, teachers cannot know exactly what they can and cannot tell students. While kissing can often precede sex, it is false to tell students that kissing is a risky behavior, or a slippery slope that will necessarily lead to sex. Technically speaking, every interaction a person has with his or her future sex partner is an action that *could* lead to non-abstinent behavior. Curricula following HB 3621 could portray many different social interactions as risky behavior that can actually be beneficial in peoples' lives: flirting, romantic relationships, kissing, and

---

<sup>9</sup> HB 3621, 3, 2012.

<sup>10</sup> Interview



more. To group together such a vast array of different activities as risky is dangerous and could harm the students' perceptions of their actions. On the other hand, it could cause students to ignore whatever they are taught as misleading because they have already been misled. If the intention of these programs really is to encourage healthy life decisions, they should write the lesson plans knowing that many teenagers are in fact going to engage in sexual activity or romantic relationships, and misleading them about the consequences of their actions will have no positive benefit.

Sexual education should be taught separately from anti-drug lessons and done so in an honest way. Exaggerating the similarities between sex and drugs, and consequences of possibly innocent actions like handholding, does nothing but harm. If programs want to empower teenagers, they should emphasize the control a person can have over his or her sexual decisions. They should not exaggerate the consequences of actions that can be completely risk-free. Drugs and sex are alike in that they can both have negative consequences. However, that does not mean they should be taught in a similar way or taught in the same curriculum. Ideally, sex education should be teaching adolescents how to positively view their own sexuality and sexual actions. Any curriculum that is created based on HB 3621 would do just the opposite. Students could either disregard everything they are told, or they could be skittish of interactions with another person that could potentially lead to sex.

## Part II: Sex-Negativity: The Fuel of Abstinence-Only Programs

In contemporary feminist and queer theory, one of the most important social topics is attempting to reduce the presence of sex-negativity. There are many and varied arguments within the feminist movement regarding how people ought to perceive their own sexuality and sexual activity. Many contemporary feminists identify the right to have sex as an important step in the

movement, to make progress past the notion that a woman's virginity is her most valuable possession and that sex is inherently wrong. While the sex-positive movement—the belief that nobody should be shamed for their sexual history, or morally judged for their sexual experiences—has advanced greatly in the past few decades, sex-negative beliefs continue to persist in many different areas of society. The majority of abstinence-only curricula are obviously influenced by a sex-negative belief system. Sex-negative thinking influences their focus on exaggerating the negative consequences of sex, promoting ultraconservative viewpoints, and perpetuating traditional gender roles.

The presence of sex-negativity in society can impact everything that is in some way related to sex: both the action, and whether someone is male or female. Broadly speaking, sex-negativity is the philosophy that moral judgments can be applied to a person's sexual preferences or sexual history. Western culture has been hugely influenced and based in the Christian tradition, which traditionally supports the belief that sex is inherently dangerous and sinful. According to this traditionalist system, pleasurable and positive aspects to sex are only permitted in the context of procreative sex between monogamous or married partners. From this, it is logical to deduce that any other forms of sex—typically pre-marital or homosexual in abstinence-only curricula—are wrong and engaging in them demonstrates immorality.<sup>11</sup> Believing that one's sexual experiences can be an accurate gage of one's character is a cause of the double standard of social acceptability between men and women's sex lives, slut-shaming or treating women poorly for their sexual history, shaming people for so-called “deviant” sexual behavior, and many more judgments about how people ought to act in regards to sex. It can be seen how teaching from a sex-negative viewpoint can influence homophobic thinking, blaming

---

<sup>11</sup> Rubin, *From Gender to Sexuality*, 150, 1993.

rape victims, and many more moral judgments commonly seen in news stories and modern discourse. As noted above, the gateway sexual activity bill mandates that sex be discussed only in terms of risky behavior. Discussing sex only in terms of risk is a shame-tactic. It is a way to make students feel guilty for engaging in activities. Part of sex-negativity is the deep shame some people feel when engaging in some sort of sexual activity because of the way they have been educated. Teaching students that sex is wrong and shameful can cause detrimental feelings about sex. The depth of this negative attitude towards sex, however, goes beyond making students doubt and question themselves. According to a governmental report, *The Content of Federally Funded Abstinence-Only Education Programs*, done in 2004 and sponsored by Representative Henry Waxman, the majority of abstinence-only curricula will do almost anything to scare teenagers out of having sex. Abstinence-only curricula were found to be misleading, contain conservative bias, and perpetuate negative stereotypes about women and men.

Abstinence-only curricula contain incorrect information about sexual health—the very thing about which it claims to be educational. According to the Child Health Director of Tennessee, Michael D. Warren, these programs are funded in order to: “promot[e] positive youth development and preventing physical, emotional and financial outcomes that may be associated with early initiation of sexual activity such as pregnancy and sexually transmitted diseases.”<sup>12</sup> . The gateway sexual activity bill explicitly states that even abstinence-based programs should help students “accurately understand sexually transmitted diseases and contraception.”<sup>13</sup> Even this statement, however, is internally contradictory to the rest of the bill. If teachers are only instructed to promote abstinence, it is difficult to introduce contraception to students in a healthy

---

<sup>12</sup> <http://news.tn.gov/node/8299>

<sup>13</sup> HB 3621, 1, 2012.

and encouraging way. It is inherently contradictory to mandate that teachers both not condone any sort of behavior that would end in sex, yet also teach proper contraception usage. It makes sense, then, that research shows that abstinence-only programs do not in fact teach accurate information about contraception use. Most abstinence programs are only allowed to mention contraception in terms of their failure rates. As these curricula can discuss sex only as risky, they subsequently can also discuss contraception only as risky.<sup>14</sup> When following the gateway sexual activity bill properly, it could be seen as condoning sexual activity to say that the birth control pill—one of the most successful forms of contraception to prevent pregnancy—has a very high success rate when used properly. Several of the curricula analyzed in the 2004 research commonly cited a 1993 discredited study done by Dr. Susan Weller to justify telling students that condoms had a high failure rate and were not effective against STD and HIV transmission.<sup>15</sup> In other curricula, they did not provide context for condom failure-rates when someone uses a condom incorrectly. And, according to the gateway sexual activity bill, dildos cannot be used to demonstrate how to properly put on a condom.<sup>16</sup> Looking at the affects of both the bill and these programs, there are abstinence-only curricula that exaggerate the ineffectiveness of condoms, and HB 3621 ensures that students will not be properly taught how to use them. As a consequence, teachers are employing curricula that state that condoms have a high failure rate, and they cannot demonstrate how to put on a condom, despite the fact that research shows that condoms are more likely to break when used incorrectly. This deadly combination ensures that students are completely ignorant about some contraceptives, directly countering the stated aims of the gateway sexual activity bill.

---

<sup>14</sup> Waxman, 8, 2004.

<sup>15</sup> Waxman, 8, 2004.

<sup>16</sup> HB 3621, 7, 2012.

The misinformation unfortunately does not only apply to lessons on contraception. *Wait (Why Am I Tempted) Training: For the African-American Community*, a curriculum currently being used in Memphis public schools, contains scientifically inaccurate information about HIV transmission. A little over 89.61% of people living with HIV or AIDS in the state of Tennessee reside within Shelby County.<sup>17</sup> Furthermore, the most at-risk members of a community to contract HIV are young, gay, black men.<sup>18</sup> Not only do most abstinence-only curricula ignore homosexual sex, which I will discuss below, *Wait Training* is specifically targeted towards the African American community, who are more at risk for HIV than the Caucasian community. Despite the target audience, *Wait Training* has consistently misrepresented facts about HIV in its curricula. In previous years, the *Wait Training* curriculum has told students that tears and sweat can cause HIV infections to spread, which is scientifically proven to be untrue.<sup>19</sup> The majority of the behaviors that the current curriculum claims put a person at risk for HIV transmission—such as blood transfusions, which are heavily regulated<sup>20</sup>—are in fact not risky at all and have not been believed to a risk factor for HIV for decades. It is inexcusable for a curriculum to have false information, and it is simply astounding that this particular curriculum—aimed at a high-risk group—contains incorrect information about how a person can and cannot contract a disease as potentially deadly as HIV. HIV has been associated with shame for a very long time. During the AIDS epidemic in the 1980's, many people believed HIV and AIDS were sent as punishments to people for being gay. The virus was so unknown that victims were sent away from hospitals, nurses and doctors refused to treat them, and people generally avoided any sort of contact with anyone who was HIV positive. *Wait Training* gives a long list of things that could cause a person

---

<sup>17</sup> <http://www.memphishivtesting.com/memphis-hiv-statistics>

<sup>18</sup> <http://www.avert.org/usa-statistics.htm>

<sup>19</sup> Waxman, 22, 2004.

<sup>20</sup> *Wait Training*, 221, 2006.

to be at risk for HIV that simply are not true. Teaching students that certain interactions with people could cause HIV is encouraging the same type of avoidance that has been seen for decades. Unfortunately, peoples' attitudes towards HIV positive individuals have not progressed as much as one would hope. In this previous year, Kansas passed legislation that would allow HIV positive persons to be quarantined.<sup>21</sup> These types of responses are what occur when people are taught that a multitude of interactions could transmit HIV. HIV positive people can regulate their disease and not give it to sexual partners or children, there is no reason to quarantine a person or avoid a person for being diseased in this way. *Wait Training* is continuing this unnecessary fear of HIV positive people.

Sex negativity is more than just people believing they have the moral high ground because of their choices, it also causes bad policies to be made that harm the overall wellbeing of society. The gateway sexual activity bill was written to try to ensure that teenagers will not have sex—an impossible feat. Instead of accepting the fact that some teenagers will have sex, these curricula actually make things worse. Advocates of sex negativity are convinced that adolescents having sex will make them morally vicious in some way, and bills like the HB 3621 are still written and passed hoping that somehow being even stricter about what a teacher tells students is risky and wrong will change the fact that students will continue having sex. It causes people to still live in fear of diseases like HIV, which are now more regulated and controlled than ever. *Wait Training* encourages and promotes the thinking that someone living with the virus should be contained and ostracized from civil society. Despite the overwhelming scientific evidence supporting how manageable HIV can be, with low risks of transmission to partners or future children, a curriculum written for a high risk group implies that HIV infected people must be

---

<sup>21</sup> <http://www.thedailybeast.com/articles/2013/04/02/kansas-quarantine-bill-has-hiv-aids-advocates-up-in-arms.html>

avoided. This line of thinking is directly derivative of the politically- and religiously-conservative and sex-negative belief system fueling abstinence-only curricula. Most of the authors of abstinence-only curricula believe people ought to have sex only within a marriage, and only people engaging in other sorts of activity would be at risk for STDs and HIV. These curricula are attempting to perpetuate this line of thinking by shaming people for their actions and teaching students that associating with people who have engaged in non-abstinent behavior can be dangerous. The false information contained within abstinence-only curricula about contraception and disease transmission will cause students to be fearful many interactions they have with others. Instead of trying to correct this, the gateway sexual activity bill guaranteed it by informing teachers that they must call all behaviors risky behaviors.

Abstinence-only curricula also exaggerate the consequences of sexual intercourse. One of the most quoted lines in the contemporary pop culture film *Mean Girls* is when the gym teacher tells his students, “Don’t have sex, because you will get pregnant and die.”<sup>22</sup> *Mean Girls* is obviously satirizing abstinence-only education, but, shockingly, it is not too far off from what some students are told about the possible consequences of sex. If abstinence-only curricula actually aimed to empower youth to make educated and smart life decisions, a necessary component to any curriculum would be advising young women about pap smears. Pap smears are a routine exam women need after becoming sexually active, or turning twenty-one years of age.<sup>23</sup> Instead of containing this important information, many of the abstinence-only curricula reviewed implied that cervical cancer is a common consequence to pre-marital sex.<sup>24</sup> Telling young women that they could get cancer from pre-marital sex, while also not discussing the

---

<sup>22</sup> Mark Waters, Director, 2004.

<sup>23</sup> <http://womenshealth.gov/publications/our-publications/fact-sheet/pap-test.cfm#c>

<sup>24</sup> Waxman, 19, 2004.

necessary exam to actually detect cervical cancer, is dangerous and wrong. When curricula educate young people to believe that cancer is a possible consequence of pre-marital sex—and imply that marital sex is perfectly safe—one is forced to question the underlying intentions of these programs.

Abstinence-only programs also exaggerate the potential behavioral and psychological consequences of sex. As previously discussed, sex and other risky behaviors are often clumped together. The gateway sexual activity instructs teachers to tell students about the “interrelationships between teen sexual activity and exposure to other risk behaviors such as... criminal activity, dating violence, and sexual aggression.”<sup>25</sup> This type of shame tactic is exactly what causes people to say rape victims were not actually raped because of their previous sexual history. In multiple rape cases, a victim’s history will come up as evidence that she could not possibly have been raped because she probably wanted to have sex. Implying that if a person has sex they are suddenly more at-risk for sexual aggression and criminal activity is compounding multiple different things that are not necessarily related. Unless these programs go into great depth discussing various mental illnesses and troubled behavior, and how sex could possibly be a way in which people act out, HB 3621 is simply using scare tactics to try to teach students that having sex will put them in danger. One program, *Choose the Best Path*, reviewed in the Waxman Report actually informs students that abstaining from sex will help prevent everything from poverty, to rape, to suicide.<sup>26</sup> Abstinence is not a panacea that suddenly makes life better in every respect and, correspondingly, sex does not guarantee that someone will suddenly put him or herself in dangerous situations.

---

<sup>25</sup> HB 3621, 6, 2012.

<sup>26</sup> Waxman, 20, 2004.



Making exaggerated overgeneralizations and inexact correlations like the ones seen in abstinence-only programs could cause students great mental distress, and likely cannot succeed in accomplishing the stated goals of the programs suggested by the gateway sexual activity bill. HB 3621 authorizes programs that will “empower youth to identify healthy and unhealthy relationships, accurately understand sexually transmitted diseases and contraception, set goals, make healthy life decisions, and build character.”<sup>27</sup> When a curriculum misleads students about the real consequences about sex, they cannot actually make healthy and informed decisions. The students of *Wait Training* programs are given incorrect information about HIV transmission. The majority of abstinence-only curricula exaggerate the negative psychological and physical consequences of sex, going so far as to say that women are more likely to get cancer if they have pre-marital sex. Abstaining from sex can indeed be a healthy life choice, but it should be done with complete understanding of what a person is abstaining from and why. Telling students that if they abstain from sex they will suddenly be less likely to commit suicide is, at best, a very questionable choice of how to interpret correlative research and, at worst, a misleading education reliant upon shaming and scaring them. There is very little chance that any students learning from these curricula are actually achieving the goals set forth by HB 3621.

Many conservative opinions are found within abstinence-only curricula. It is unsurprising that states with more politically- and religiously-conservative populations, like the Southern states<sup>28</sup>, tend to mandate that the only way sex can be discussed in classrooms is in abstinence-only programs. Abstinence-only education programs are a very controversial issue, which are influenced by lawmakers and populations. A majority of the abstinence-only curricula reviewed

---

<sup>27</sup> HB 3621, 1, 2012.

<sup>28</sup>

<http://www.siecus.org/index.cfm?fuseaction=Page.viewPage&pageId=487&parentID=478>

were found to contain more than just information about sex. As many of the curricula's authors believe that they are writing curricula for students to lead healthier lives and make overall better choices, these programs contain prescriptions and proscriptions concerning how people ought to act more generally. Sadly, the ideal choices advocated by these programs tend to represent a very narrow view of what a "proper" person looks and acts like. The curricula reviewed were found to have conservative leanings on everything from perpetuating traditional gender norms to encouraging students to be shamed towards believing in a pro-life standpoint. Unfortunately, as so many controversial and divided issues are in some way related to sex, the curricula are able to put in lessons attempting to teach students what they should think about each of those issues. Abstinence only programs contain unnecessary conservative information.

Abstinence programs utilize traditional gender roles and teach them as scientific fact. Now, obviously during the anatomy portion of any sexual health curriculum, there has to be a discussion about the differences between boys' and girls' bodies. The differences discussed really only need to go so far as to describe basic anatomical differences, and why those differences are relevant—for instance; it would fit within a scientific curriculum to say that women can get pregnant and men cannot. The separation between sex and gender is very important when deciding what may be necessary for a sexual health curriculum: sex is a strictly enforced binary of male and female assigned at birth based on outward genitalia, whereas gender is a spectrum of one's own personal identity. There is no reason to include false scientific descriptions about how each sex acts. The ideal of the nuclear family—one father, one mother, and kids, each with a very particular role in that family—was very popularly encouraged in the 1950's as what everyone should be aiming to achieve.<sup>29</sup> While some people have moved away

---

<sup>29</sup> [http://www.pbs.org/wgbh/amex/pill/peoplevents/p\\_mrs.html](http://www.pbs.org/wgbh/amex/pill/peoplevents/p_mrs.html)

from the nuclear family ideal, many still believe that the same picture presented in the 1950's of what everyone ought to strive for should continue to be strived for today. For instance, Family Action Council of Tennessee—one of the organizations who continue to support abstinence-only programs—continually sends out weekly emails to subscribers with opinion pieces describing how new legislation in the United States is ruining family values.<sup>30</sup> Luckily for the Family Action Council of Tennessee—whose acronym is FACT— but unluckily for the students of Tennessee, abstinence programs have decided to take it upon themselves to keep the nuclear family ideal dominant in the minds of the students.

One of the goals of abstinence-only programs is to help students recognize healthy and unhealthy relationships. One would think this goal would create a perfect opportunity to introduce and encourage dialogue and awareness about dating violence and sexual assaults. Instead of discussing things actually pertaining to healthy and unhealthy relationships, most abstinence-only curricula see this goal as forum to introduce oversimplified and incorrect information on what men need in relationships versus what women need—widely based on stereotypes and caricature ideas of men and women. *Wait Training*, taught in Memphis, teaches students that “just as a woman needs to feel a man’s devotion to her, a man has a primary need to feel a woman’s admiration... when his unique characteristics and talents happily amaze her.”<sup>31</sup> So, according to this lesson plan, a healthy relationship is when a woman spends her time being amazed by her male companion’s “unique talents”. The programs reviewed describe girls as delicate and needing protection from their men, while men need to be in control. One program went so far as to say that a woman ought not interfere in her man’s endeavors because by giving

---

<sup>30</sup> <http://factn.org/marriage-and-family-gay-marriage/>

<sup>31</sup> Waxman, 17, 2004.

her own suggestions, she could ruin his confidence.<sup>32</sup> The moral of that lesson implies that women should not have a voice in their relationship—and these are the lessons being taught because adolescents are supposed to know what healthy and unhealthy relationships look like. It is very obvious that the aim of these curricula is to portray women in a passive caretaker role and men in the aggressive protector role. These programs are being taught as sexual health and scientific fact. When high school students are supposed to be learning about healthy relationship behaviors, these programs instead indoctrinate them into centuries- old belief systems that undermine the progress of women everywhere. They are teaching students that women are the weaker more passive sex who should not have an active role in anything. The story about ruining a man's confidence has the message that women should not interfere with men running things. Not only do these lesson plans send very dated messages to women and men on their inherent value to society, they lead to the type of thinking that allows for rape apology, slut shaming, and victim blaming. When students are told that a man needs little to no preparation for sexual desire, whereas a woman may need hours of emotional preparation<sup>33</sup>, it sets up a dangerous precedent of allowing men to claim a lack of responsibility for their aggressive actions and blame it on biology, or blame it entirely on the woman—something that is seen much too frequently in court cases. In a recent rape trial, the Steubenville case, despite the fact that the victim was passed out during the attack, many people still tried to claim that she deserved it in some way for being at a party.<sup>34</sup> These programs are all teaching—as fact—that men are more aggressive in nature and that women ought not act out of their place as virginal and more emotional beings. This type of thinking promotes the belief that women should not progress beyond their household duties and

---

<sup>32</sup> Waxman, 18, 2004.

<sup>33</sup> Waxman, 18, 2004.

<sup>34</sup> <http://www.huffingtonpost.com/news/steubenville-rape>

that men are more suited to powerful positions. Programs that intend to help students make good decisions and recognize healthy relationships should not contain so much flawed beliefs about how women and men ought to behave. A program that contains stereotype as fact and teaches lessons to attempt to perpetuate traditional gender roles has no place in public school systems.

Abstinence-only curricula are inherently biased toward a pro-marriage standpoint. While less controversial programs will not say explicitly that students should be saving themselves for marriage, many still contain explicit endorsements of marriage. This standpoint is problematic for three reasons: it posits marriage as some ultimate goal instead of focusing on the actual relationship, it ignores the fact that many people do not actually want to get married, and it is necessarily homophobic. While HB 3621 states that abstinence only programs must discuss healthy relationships and help students recognize them, most of the curricula reviewed simply used that as a tool to describe stereotypical differences between women and men. Simply saying that everyone ought to get married and that sex is better in the sacred union of marriage<sup>35</sup> does not actually teach students what a healthy relationship is. The programs describe marriage as the best possible relationship two people can have, yet rarely discuss important things like dating violence or communication within relationships. Two people being married does not mean that they magically have a perfect union, and abstinence-only programs endorsing marriage so heavily could give the wrong idea to students.

Writing an entire curriculum around the idea of waiting until marriage also ignores the fact that there are large groups of people who do not want to get married or are not legally able to get married. Sadly, as most supporters of abstinence-only curricula are very conservative, it is unsurprising that the gateway sexual activity bill, and most programs, is extremely homophobic.

---

<sup>35</sup> *Wait Training*, 10, 2006.

The very heteronormative definition give in HB 3621 of sex is whenever a “penis is inserted in a vagina, mouth, or anus”.<sup>36</sup> This means that any young women who are questioning their sexual orientation are taught that sex can only really happen when a penis is involved, and that as same-sex marriage is not legal, either they cannot have “real” sex, or gay people should never have sex. Despite the fact that these curricula find room to include lessons on how a man and woman ought to act, very few contain lesson plans on sexual orientation and the important role it plays in modern society. If these programs were actually written to encourage healthy relationships and safe sex practices, they would include information for gay high school students. Unfortunately the conservative bias of the policy makers and organizations supporting abstinence-only education has huge sway in how the lesson plans are written. It is not possible for the queer students learning from these curricula to actually be able to make healthy life decisions as the HB 3621 claims it wants.

The programs also promote a pro-life standpoint in regards to abortion. One of the most controversial issues in the history—and ongoing fight—of reproductive rights has been abortion. The enforced dichotomy in contemporary dialogue is pro-choice versus pro-life. This language is obviously intentionally shocking: to be against pro-life makes it sound as if a person must be in favor of death, which is obviously not the case for the actual political standpoint. In terms of sexual health education, abortion should be discussed when telling students the options for dealing with an unplanned pregnancy. A lesson plan should probably tell students how they may need parental approval if they are a minor, depending on which state they live in, and also what exactly an abortion is—as abortion is a great taboo in society and very few people actually know what is involved in the medical procedure. What should not be part of a lesson plan is

---

<sup>36</sup> HB 3621, 3, 2012.

intentionally anti-choice studies and rhetoric to scare students into not having abortions or attempting to sway their beliefs towards one political side. Sex education should not be political; it should be about raising awareness, education, and overall health of those being taught the curriculum. In many of the abstinence curricula, the only discussion of abortion was to tell students how damned they would be if they ever underwent the procedure. Many of the lessons used extremely outdated and disproven studies saying that students could become sterile, more suicidal, or have complications in future pregnancies if they underwent an abortion procedure.<sup>37</sup> Regardless of what one believes, intentionally using outdated studies to portray abortion as having a high percentage of lifelong consequences is wrong. The lessons should be unbiased and scientific. Telling students that if they have an abortion their futures could be ruined is libelous and propaganda. Curricula claim to be up to date, but intentionally use these decade old studies to further their political agendas and add yet another thing to make students feel ashamed about. The intentions of whoever is writing these curricula are could not possibly to help progress knowledge and safety in adolescents, or they would not include so much false data.

Allowing so much conservative bias to exist within educational programs is going to negatively impact students. The majority of the abstinence-only curricula are influenced by a very strong sex-negative viewpoint: that if students are having sex, they are in some way ruining themselves. People believe so strongly in the moral impacts of sex, that they can justify writing entire curricula around shaming students for their natural sexual being. The gateway sexual activity bill not only condones this type of behavior, it explicitly mandates it. The bill forces teachers to only discuss sex as a risky activity<sup>38</sup>, to only discuss contraception in terms of failure

---

<sup>37</sup> Waxman, 13, 2004.

<sup>38</sup> HB 3621, 3, 2012.

rates<sup>39</sup>, and tell students that if they consider having an abortion they are probably going to ruin their lives. The question one is forced to ask when reviewing abstinence-only programs is whether they are actually going to help anyone who is taught them. It is hard to defend curricula that are shown time and time again to blatantly lie to students and spend the majority of the time making them feel ashamed or sway towards a more conservative viewpoint for all of their decisions.

### Part III: Comprehensive Sex Ed—And it actually works!

The alternative to abstinence-only education programs is comprehensive sexual health educations. Currently, if there is to be a sexual health program, the two options are either abstinence-only programs or comprehensive sexual education programs. The comprehensive programs do teach abstinence, but most programs also teach proper contraception use, how to avoid STIs and unwanted pregnancies, and many more things related to sexual health. The question continually being raised by some of the misinformation within abstinence-only curricula is: what is the goal of sexual health education in public schools? Governmental health departments fund these programs so there must be an intention to raise the overall health of a community. As the Child Health Director stated, the goal of spending tax dollars on these programs is to help decrease STI/STD rates and teenage pregnancy rates. When considering STD/STI and teenage pregnancy rates, looking at comprehensive data, abstinence-only programs fail to promote the general wellbeing of a population. While teenage pregnancy rates have plummeted in states teaching a form comprehensive sex education—such as California, Connecticut, and Massachusetts<sup>40</sup>—high percentages continue to remain in the South, with

---

<sup>39</sup> Waxman, 8, 2004.

<sup>40</sup> <http://thinkprogress.org/health/2013/07/19/2325441/california-teen-birth-rate-plummet/>



Mississippi, Arkansas, and Tennessee in the top ten highest state percentages.<sup>41</sup> In Title V evaluations on effectiveness of abstinence-only programs, it was found that there was no delay in sexual debut.<sup>42</sup> Looking back at the goals HB 3621 states for abstinence-only programs, it does not explicitly state that the desired result is fewer teen pregnancies and lower STI/STD rates. The bill states that the programs should “empower youth to identify healthy and unhealthy relationships, accurately understand sexually transmitted diseases and contraception, set goals, make healthy life decisions, and build character.”<sup>43</sup> I have already discussed how the programs reviewed do not properly teach students about contraception use or an accurate understanding of sexually transmitted diseases. It is debatable whether the programs in Tennessee are achieving subjective goals like ‘building character’ within adolescents—as it is hard to prove something like that through data. If the goal of sexual health classes in public schools is to raise public sexual health, abstinence-only programs are not the right choice.

Memphis residents support using comprehensive sexual health programs in public schools. The general reason why sexual education programs are such a controversial issue is because many people tend to believe that if adolescents are told how to have sex safely, they will be more likely to have sex. Apparently, people would rather ignore the obvious—that teenagers will have sex—and spend time, effort, and money promoting curricula that do not work. The truth is, evaluations of comprehensive sex education programs have found that they do not increase sexual activity in teenagers, the number of partners someone will have, or the age at which students begin having sex.<sup>44</sup> People are allowing their convictions to take precedence over

---

<sup>41</sup> <http://thinkprogress.org/health/2013/05/23/2053841/teen-birth-rate-drop-high-south/>

<sup>42</sup> Hauser D. ,Title V State Evaluations, 2004.

<sup>43</sup> HB 3621, 1, 2012.

<sup>44</sup> <http://www.advocatesforyouth.org/storage/advfy/documents/fssexcur.pdf>

the most studies and evaluations done comparing comprehensive sexual education and abstinence-only programs. Memphis has a high HIV positive population and a high teenage pregnancy rate, obviously sexual health is something that needs to be addressed. A poll conducted by the Mid-South Survey Research Center in 2009 found that over 80% of Memphis residents believe comprehensive sex education should be taught in public schools. That is an overwhelming majority compared to the fewer than 20% who believe abstinence-based sex education should be taught in schools.<sup>45</sup> Comprehensive programs do teach abstinence, but they also teach necessary skills in a scientifically correct way to empower students with the knowledge they need to be healthy sexual beings. A change needs to be made with sexual health programs. Despite the dire need—or perhaps illustrated by—Memphis is currently only legally allowed to implement programs that are shown to be ineffective. Students are being misinformed, misled, and shamed. When looking at the data, it is clear that none of these tactics work. Legislators should recognize the fact that teenagers are going to have sex and address the fact in a healthy way by actually educating them. If sexual education continues to exist within public schools, which residents of Memphis believe it should, then a comprehensive sexual health program should be used. The current laws in Tennessee do not represent the best interests of its citizens. They are doing a disservice by wasting money on programs that not only do not educate students, they give incorrect facts and actually make things worse for the students.

---

<sup>45</sup> *Attitudes Toward Sex Education in Memphis, 2011.*

Work Cited

Administration for Children and Families, Department of Health and Human Services. "Review of Comprehensive Sex Education Curricula." 2007.

Advocates for Youth. 2006. "Effective Sex Education". Accessed July 22<sup>nd</sup>, 2013.

<http://www.advocatesforyouth.org/storage/advfy/documents/fssexcur.pdf>

Avert. 2011. "Unites States of America HIV & AIDS Statistics." Accessed July 18<sup>th</sup>, 2013.

<http://www.avert.org/usa-statistics.htm>

CaPece, Elokin. "Critique of a Critique". 2007.

CaPece, Elokin. Interview by Andrea Tedesco. In Person. Memphis, June 28<sup>th</sup>, 2013.

Coker, Catherine. Interview by Andrea Tedesco. In Person. Memphis, June 28<sup>th</sup>, 2013.

Culp-Ressler, Tara. 2013. "Thanks to Better Sex Ed, California's Teen Birth Rate Has

Plummeted by 60 Percent." Think Progress. Accessed July 20<sup>th</sup>, 2013.

<http://thinkprogress.org/health/2013/07/19/2325441/california-teen-birth-rate-plummet/>

Culp-Ressler, Tara. 2013. "U.S. Teen Birth Rate Continues To Plummet, But Remains

Stubbornly Higher In The South." Think Progress. Accessed July 20<sup>th</sup>, 2013.

<http://thinkprogress.org/health/2013/05/23/2053841/teen-birth-rate-drop-high-south/>

Family Action Council of Tennessee. 2013. "When Families are Healthy, So is Society."

Accessed July 18<sup>th</sup>, 2013. <http://factn.org/marriage-and-family-gay-marriage/>

Freedlander, David. 2013. "Kansas Quarantine Bill Has HIV/AIDS Advocates Up in Arms".

Daily Beast. Accessed July 25<sup>th</sup>, 2013.

<http://www.thedailybeast.com/articles/2013/04/02/kansas-quarantine-bill-has-hiv-aids-advocates-up-in-arms.html>

- HIV Testing in Memphis. 2013. "Memphis HIV & STD Statistics." Accessed July 18<sup>th</sup>, 2013.  
<http://www.memphishivtesting.com/memphis-hiv-statistics>
- Huffington Post. 2013. "Steubenville Rape Case". Accessed July 25<sup>th</sup>, 2013.  
<http://www.huffingtonpost.com/news/steubenville-rape>
- Kelsey, Meredith, and Trenholm, Christopher. "Impacts of Four Title V, Section 510 Abstinence Education Programs". Mathematica Policy Research Inc. 2007.
- Mid-South Survey Research Center. 2011. "Attitudes Toward Sex Education in Memphis."  
University of Memphis Center for Research on Women.
- PBS. 2001. "Women's Roles in the 1950s". Accessed July 18<sup>th</sup>, 2013.  
[http://www.pbs.org/wgbh/amex/pill/peoplevents/p\\_mrs.html](http://www.pbs.org/wgbh/amex/pill/peoplevents/p_mrs.html)
- Rubin, Gayle S. *Thinking Sex: Notes for a Radical Theory of Politics of Sexuality*. 1984.
- Scarce, Lesley. Interview by Andrea Tedesco. Phone. Memphis, June 27<sup>th</sup>, 2013.
- SIECUS. 2010. "A Portrait Of Sexuality Education and Abstinence-Only-Until-Marriage Programs in The States." Accessed July 23<sup>rd</sup>, 2013.
- U. S. House. *HB 3621, An Act to amend Tennessee Code Annotated, Title 49, Chapter 6, relative to family life instruction*. 2012.
- TN.Gov. 2012. "Department of Health Awards Abstinence Education Grants". Accessed July 18<sup>th</sup>, 2013. <http://news.tn.gov/node/8299>
- Wait Training. 2006.
- Warren, Jennifer. Interview by Andrea Tedesco. In Person. Memphis, June 28<sup>th</sup>, 2013.
- Waxman, Henry. 2004. "The Content of Federally Funded Abstinence-Only Education Programs". United States House of Representatives Committee on Government Reform.