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REPORT

ABSTINENCE - ONLY EDUCATION

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SIECUS

REPORT

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Contents

ARTICLES

3

- EXCLUSIVE PURPOSE:
ABSTINENCE-ONLY PROPONENTS CREATE
FEDERAL ENTITLEMENT IN WELFARE REFORM
By Daniel Daley
SIECUS Director of Public Policy

9

- WHAT'S WRONG WITH ABSTINENCE-ONLY
SEXUALITY EDUCATION PROGRAMS?
By Debra W. Haffner, M.P.H.
SIECUS President/CEO

14

- MISH PUBLISHES NEW FRAMEWORK
FOR FEAR-BASED, ABSTINENCE-ONLY EDUCATION
By Ruth Mayer
SIECUS Director of Development and Communications

18

- THE CLINTON ADMINISTRATION'S
ADOLESCENT PREGNANCY PREVENTION PROGRAM:
IGNORANCE DOES NOT EQUAL ABSTINENCE
By Susan K. Flinn
Director of Legislative Affairs
Advocates for Youth

ALSO IN THIS ISSUE...

FROM THE EDITOR	
88 MILLION DOLLARS FOR "ABSTINENCE-ONLY"	
By Mac Edwards	2
FACT SHEET	
THE NATIONAL COALITION TO SUPPORT	
SEXUALITY EDUCATION	20
"ABSTINENCE-ONLY" CURRICULA	22
SIECUS ANNOTATED BIBLIOGRAPHY	
RELIGION, SPIRITUALITY, AND SEXUALITY	23

FROM THE EDITOR

88 MILLION DOLLARS FOR "ABSTINENCE-ONLY"

Mac Edwards

Even though I worked in Washington, DC, for over 20 years, I am still amazed at the way in which the federal government operates. Its recent mandating of "abstinence-only" education across the nation is a perfect example.

Starting this fall, over \$88 million in federal and matching state funds will go toward ineffective "abstinence-only" programs that became law without the benefit of public input or Congressional debate. The U.S. Congress earmarked this money last year by inserting language into welfare reform during a process reserved for corrections and technical revisions.

Categorized as an "entitlement," these programs will now receive automatic re-funding every year for the next five years. Unfortunately, the American public is just learning about the new law and is just realizing it has been denied the opportunity to discuss and debate the issue.

In a related move, President Clinton announced this past January that his Administration's "National Strategy to Prevent Teen Pregnancy" will "step up support for effective programs at the local level that will promote "abstinence until marriage."

We here at SIECUS felt it was critical that we explain not only what is happening in Washington but also what all of us can do together to work for comprehensive sexuality education programs. As a result, we have published this special issue of the *SIECUS Report* and postponed our "Love and Intimacy" issue until June-July.

THE WHOLE STORY

This *SIECUS Report* gives you the whole story concerning "abstinence-only" education in the United States.

Daniel Daley, SIECUS's director of public policy has written "Exclusive Purpose: Abstinence-Only Proponents Create Federal Entitlement in Welfare Reform" to give you an historical perspective on the subject and to show you how the Far Right has worked to achieve its goal of abstinence-only sexuality education.

Debra Haffner, SIECUS's president/CEO, explains in "What's Wrong With Abstinence-Only Sexuality Education Programs?" why this new federal program will not prevent teenage pregnancies or STDs.

Ruth Mayer, SIECUS's director of development and communications, writes in a revealing article, "MISH Publishes New Framework for Fear-Based, Abstinence-Only Education," how the *National Guidelines for Sexuality and Character Education* published by the Medical Institute for Sexual Health (MISH) mirrors the *SIECUS Guidelines* while promoting restrictive abstinence-only programs.

Susan Flinn, the director of legislative affairs at Advocates for Youth, tells readers in "The Clinton Administration's Adolescent Pregnancy Prevention Program: Ignorance Does Not Equal Abstinence" how the President has abandoned comprehensive sexuality education in favor of the abstinence-only approach in welfare reform.

This issue of the *SIECUS Report* concludes with a bibliography on "Religion, Spirituality, and Sexuality" that provides important information on the role religion can play in promoting an understanding of sexuality as an affirming expression of equality, mutual respect, caring and love.

WHAT WE CAN DO TOGETHER

There are a number of things that *SIECUS Report* readers, as proponents of comprehensive sexuality education, can do.

First, you can explain to officials in your state government why they should refuse your state's share of the federal funds. If they insist on accepting the funds, you can urge them to conduct programs aimed at young people in upper elementary and middle schools—those age groups not yet involved in sexual behaviors.

In addition, you can encourage them to design creative programs to increase the likelihood of young people abstaining from sexual relations. These could focus on mentoring, remedial education, sexual abuse prevention, and communications skills. (See "What's a State to Do?" on page 12.)

The "National Coalition to Support Sexuality Education," with over 100 dedicated national organizations, will, of course, continue its work on behalf of comprehensive sexuality education.

If you are interested in learning more about the Coalition or about SIECUS's efforts to advocate for effective sexuality education, contact us. We have much to accomplish.

EXCLUSIVE PURPOSE: ABSTINENCE-ONLY PROPONENTS CREATE FEDERAL ENTITLEMENT IN WELFARE REFORM

Daniel Daley
SIECUS Director of Public Policy

This is a pivotal time for sexuality education. Nearly 80 years after the 1919 White House Conference on Child Welfare declared that "sex instruction...is more properly a task of the school," the federal government is no longer leaving the decision about what to teach about sexuality exclusively to local communities. In late 1996, the 104th U.S. Congress, with approval from President Clinton, took legislative action to install abstinence-only education as *the* sexuality education for unmarried people in the United States.

IN THE BEGINNING...AFLA

While the scale of the federal government's involvement in promoting abstinence-only education has grown substantially, it has actually funded a federal abstinence promotion program for some time.

Since 1981, the Office of Population Affairs has administered the Adolescent Family Life Act Demonstration Grants program (commonly referred to as AFLA). Designed to prevent teen pregnancy through teaching abstinence and to promote adoption (as opposed to abortion) as the appropriate choice for teenagers who become pregnant, AFLA was often viewed as the Far Right's "alternative" to the Title X family planning program and was controversial from the start.

In 1983, a group of clergy and other individuals filed suit against AFLA claiming that it was administered in a way that violated the Establishment Clause of the United States Constitution (separation of church and state). The plaintiffs in *Kendrick v. Sullivan* claimed that the program constituted a federal endorsement of a particular religious point of view. Although the Supreme Court ruled that the statute was constitutional on its face, litigation continued concerning the manner in which the program was administered. In January 1993, just as President Clinton took office, an out-of-court settlement was reached between the Department of Civil Justice and the Center for Reproductive Law and Policy stipulating that AFLA-funded sexuality education:

- may not include religious references
- must be medically accurate
- must respect the "principle of self-determination" of teenagers regarding contraceptive referrals, and
- must not allow grantees to use church sanctuaries for their programs or to give presentations in parochial schools during school hours.

Another controversy surrounding the AFLA program involves the quality of the grantee program evaluations. A

FEDERAL DEFINITION OF ABSTINENCE EDUCATION

Welfare reform legislation defines "abstinence education" as an educational or motivational program which:

- has as its exclusive purpose, teaching the social, psychological, and health gains to be realized by abstaining from sexual activity;
- teaches abstinence from sexual activity outside marriage as the expected standard for all school age children;
- 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;
- teaches that a mutually faithful monogamous relationship in the context of marriage is the expected standard of human sexual activity;
- teaches that sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects;
- teaches that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child's parents, and society;
- teaches young people how to reject sexual advances and how alcohol and drug use increase vulnerability to sexual advances; and
- teaches the importance of attaining self-sufficiency before engaging in sexual activity.

meta-evaluation of the evaluations found them to “vary from barely adequate to completely inadequate.”¹ This means that more than 15 years into exploring the effectiveness of the abstinence-only approach to sexuality education, there are “no methodologically sound studies that demonstrate the effectiveness of curricula that teach abstinence as the only effective means of preventing unintended teen pregnancy.”² One abstinence-only education proponent claims that the poor evaluations are somehow linked to the fact that the overall program was the subject of litigation.³

AFLA has never enjoyed broad-based support—as best demonstrated in its dwindling appropriation from 1981 to 1996. The authorization of the program has never been a subject of a vote in Congress that would permit an accounting of supporters. And since the abstinence-only education component is coupled with AFLA’s care and treatment services for pregnant and parenting teenagers, an assessment of the abstinence-only component’s support is even more ambiguous. It does, however, have a small and dedicated group of Congressional supporters who continue to back the program despite its troubles. These same advocates are the architects of the movement to install broad-scale federally funded abstinence-only education in other venues.

THE END OF COMPREHENSIVE EDUCATION?

The welfare reform legislation signed into law by President Clinton in August 1996 represents—to date—the broadest attack on the provision of comprehensive sexuality education to young people in the United States. And that is exactly as its authors intended. It is important for advocates of comprehensive sexuality education to understand how this happened.

Perhaps the first incarnation of the only abstinence-only education provision in welfare reform was revealed during the reauthorization of the Elementary and Secondary Education Act in 1994. U.S. Rep. John Doolittle (R-CA) introduced an amendment to restrict the content of sexuality and HIV education which was part of the Far Right’s efforts to block gay and lesbian youth services. This amendment was similar to the current welfare reform definition of abstinence education. His language was amended to underscore the decision-making authority of local communities regarding program content. (Four federal laws prohibit the federal government from dictating the content of community education programs.)

Far Right groups were bitter about this modification. And perhaps this defeat altered their strategy. Opponents of sexuality education learned that they could not successfully restrict *education* programs due to federal laws, but that they could restrict programs through *health* policy and funding mechanisms. They also learned that Congressional and public debate resulted in the defeat or serious modification of their proposals. They applied these lessons to welfare reform.

In September 1995, U.S. Senator Lauch Faircloth (R-NC) and U.S. Senator Rick Santorum (R-PA) introduced legislative language that included the definition of “abstinence education” (See “Federal Definition of Abstinence-Only Education” on page 3.) and called for \$200 million for abstinence-only education from existing Maternal and Child Health Block Grant services for prenatal, pregnancy, and child health services for low-income women and children. The language of this legislation was developed by several Far Right organizations led by the Heritage Foundation. This version of the legislation went nowhere.

Other senators, such as Nancy Kassebaum (R-KS), did not support the \$200 million sum and recommended lowering it to \$75 million. This proposal also met with criticism from maternal and child health advocates who indicated that it would result in a 16 percent cut in existing program services.

ENTITLED TO ABSTINENCE FUNDING

The abstinence-only education provision in the welfare reform legislation was added in the final version of the legislation usually reserved for corrections and technical revisions. In this provision, Congress mandated abstinence-only education by designating a \$50 million per year (1998 through 2002) federal program through the Maternal and Child Health (MCH) Bureau.

This provision was inserted into the authorization language of the MCH Bureau that triggers the requirement that states match every four federal dollars they receive with three state-raised dollars—bringing the potential national outlay to \$88 million. It was inserted without the benefit of open public or Congressional debate.

This provision then passed Congress as part of the larger welfare reform bill. During the House-Senate conference of the bill, the definition of abstinence education remained unchanged but the funding for the program was upgraded to entitlement status—meaning that Congress would automatically fund—and not debate—abstinence-only education each year during the appropriations process. Ultimately, the bill was signed into law by the President with the restrictive definition, substantial funding, and the entitlement status.

The inclusion of this abstinence-only education provision has slowly come to the attention of the public. Sadly, this has happened after the fact and without discussion on the meaning and merit of the provision.

THE AUTHORS’ INTENT

According to a document written by Congressional staff acting on behalf of the authors of the legislation, the intent of Congress in enacting this provision was to change the social norm of premarital sexual activity by enacting federal law. “Regardless of how one feels about the standard of no

STATE-BY-STATE FEDERAL ALLOCATIONS FOR ABSTINENCE-ONLY PROGRAMS

Alabama:	\$1,081,058	Massachusetts:	\$739,012	Tennessee:	\$1,067,569
Alaska:	\$78,526	Michigan:	\$1,899,560	Texas:	\$4,922,091
Arizona:	\$894,137	Minnesota:	\$613,756	Utah:	\$325,666
Arkansas:	\$660,004	Mississippi:	\$1,062,752	Vermont:	\$69,855
California:	\$5,764,199	Missouri:	\$969,291	Virginia:	\$828,619
Colorado:	\$544,383	Montana:	\$186,439	Washington:	\$739,012
Connecticut:	\$330,484	Nebraska:	\$246,177	West Virginia:	\$487,536
Delaware:	\$80,935	Nevada:	\$157,534	Wisconsin:	\$795,859
District of Columbia:	\$120,439	New Hampshire:	\$82,862	Wyoming:	\$80,935
Florida:	\$2,207,883	New Jersey:	\$843,071	Territories	
Georgia:	\$1,450,083	New Mexico:	\$518,368	American Samoa:	\$44,992
Hawaii:	\$131,519	New York:	\$3,377,584	Guam:	\$69,495
Idaho:	\$205,228	North Carolina:	\$1,151,876	Northern Marianas:	\$42,493
Illinois:	\$2,096,116	North Dakota:	\$126,220	Puerto Rico:	\$1,449,018
Indiana:	\$857,042	Ohio:	\$2,091,299		
Iowa:	\$424,908	Oklahoma:	\$756,837	Trust Territories	
Kansas:	\$391,185	Oregon:	\$460,076	Palau:	\$13,501
Kentucky:	\$990,488	Pennsylvania:	\$1,820,070	Micronesia:	\$47,492
Louisiana:	\$1,627,850	Rhode Island:	\$129,592	Marshalls:	\$21,000
Maine:	\$172,468	South Carolina:	\$811,757	Virgin Islands:	\$136,509
Maryland:	\$535,712	South Dakota:	\$169,578		

sex outside marriage, we believe that the statutory language and...the intent of Congress [is] clear. This standard was intended to put Congress on the side of social tradition—never mind that some observers now think the tradition outdated—that sex should be confined to married couples. That both the practices and standards in many communities across the country clash with the standard required by the law is precisely the point.”¹⁴

The document goes on to say "that...the explicit goal of the abstinence-only education program is to change both behavior and community standards for the good of the country. It follows that no program that in any way endorses, supports, or encourages sex outside marriage can receive support from the abstinence education money. Both officials at the MCH Bureau and state officials administering the program have the legal responsibility to ensure that none of the money from this grant is used to support projects that violate this standard."

The document also says that "we believe that projects that do not violate any aspect of the definition, and that emphasize abstinence as the expected standard for school-age children...are eligible for funding. As long as the specific curriculum and teaching of the project do not violate the abstinence until marriage standard, the project should qualify for funds."¹⁵

The architects of this abstinence-only education provision have gone to great pains to ensure that programs that discuss contraception and other protective behaviors are not eligible for inclusion in the program. Funds are also not available to support abstinence components of broader programs. The proponents of the abstinence-only education provision provide an illustrative example:

Assume that a given public school system now conducts a one-year sex education class for tenth graders. During the course of the year, the class curriculum calls for presentation of information about birth control, including instruction in the use of various birth control devices. Now assume that the school officials decide that they would like to revise the course to include a six-week unit that exactly follows the definition of the abstinence education outline in the new statute. Can state MCH officials use their abstinence education dollars to fund this unit of instruction even though other parts of the course teach birth control? We believe it would be illegal to fund this project under the abstinence education statute. The language clearly states that abstinence education is a program which has as its "exclusive purpose" teaching the various principles outlined [in the statute]. If this unit is part of a course that teaches use of birth control, then it violates the "exclusive purpose" criterion.⁶

The draft guidance for implementing these programs was issued by the MCH Bureau on February 27, 1997. (See “Excerpts: *Draft Block Grant Application Guidance, Abstinence Education Provision of the 1996 Welfare Law*” on page 8.) It states that applicants (state health agencies) must adhere to the definition of “abstinence education” articulated in the statute. But it also says that “it is not necessary to place equal emphasis on each element of the definition, however, a project may not be inconsistent with any aspect of the abstinence education definition.” The guidance also requires that applicants describe how they will coordinate other abstinence-only education programs in the state with the abstinence-only programs.

PROBLEMS AND MORE PROBLEMS

Even without comparisons to effective comprehensive approaches to sexuality education, the abstinence-only effort outlined in the statute has serious flaws. First and most seriously, the teachings are not based in fact. (See “What’s Wrong with Abstinence-Only Sexuality Education Programs?” on page 9.)

Another deficiency of the law is that while the authors are painfully clear about what they *don’t* want funded as an “abstinence education” program, they are silent about their definition of many critical concepts. The legislation never defines “sexual activity” to reveal what sexual behaviors these programs are supposed to address. The language is unclear as to where the line is drawn: abstinence from penetrative sexual behaviors?...from outercourse and petting activities?...from masturbation?...from kissing and hand-holding? This lack of definition is clearly problematic for a statute that creates a multimillion-dollar federal entitlement program.

Another deficiency is the broad interpretation of the term *program*. This is particularly important given the “exclusive purpose” language. Should applicants interpret *program* as a specific abstinence promotion “project” or their organization’s overall mission?

The ambiguity within some parts of the statute extends beyond mere word choice to the goal they are asking young or unmarried people to achieve. The definition states that “abstinence from sexual activity outside of marriage [is] the expected standard for school age children.” While this statement seems clear on a cursory reading, it is unclear what young people will understand this to mean for them. Should they abstain from sexual activity until they are married or until they are no longer “school-age children.”

This ambiguity may be born of necessity for the proponents. The document by Congressional staff sees this as a serious problem: “Many professionals appear to believe that it will be difficult enough to convince adolescents that they should refrain from sex during the school years. Convincing them to wait until marriage, which now occurs at age 27 for males and 25 for females, seems so far removed from

current practices (and perhaps even standards) that abstinence education programs would have a better chance of success if they concentrate on the school years.”⁷ This may also reflect that abstinence-only programs favored by the program’s authors are ambiguous in their goals. *Best Friends* by Elayne Bennett teaches abstinence until high school completion whereas *Sex Respect* by Kathleen Sullivan teaches abstinence until marriage. The ambiguous legislative language allows for the possibility of funding proponents’ pet projects.

Another glaring omission from the statute is the requirement of a methodologically sound, scientifically rigorous evaluation of the funded programs. Without a proper, scientific evaluation, the federal government will again fund an abstinence-only effort without the research to determine its effectiveness.

Proponents claim they are not opposed to evaluation. Congressional sponsors say they intend the funds to deliver abstinence education services (thus sidestepping the fact that they could have appropriated additional funds for evaluation even while they were changing the program to entitlement status). Nongovernment proponents say they “hope” funded projects will “attract money” from private foundations or state legislatures for evaluations.

Given the inadequate nature of the evaluations conducted on the AFLA programs, there is only “hope” that these potential evaluations will prove useful. Unfortunately, the silence on the need for evaluations may be an attempt to avoid accountability and embarrassment—or recognition that the programs are unlikely to work.

Not only did the meta-analysis of abstinence-only programs (both AFLA and non-AFLA) find that there are “no methodologically sound studies that demonstrate the effectiveness of curricula that teach abstinence as the only effective means of preventing teen pregnancy”⁸ but a recent evaluation of the \$5 million ENABL abstinence-only initiative in California found that participants in the program were not more likely to abstain after receiving the course. Moreover, there is research that demonstrates comprehensive approaches are effective.⁹

STATE IMPLEMENTATION

States must now make the decision as to whether they are going to accept the federal funds to conduct the restricted abstinence-only sexuality education programs and subsequently find the funds for the state matching requirement. (See “State-By-State Federal Allocations for Abstinence-Only Programs” on page 5.) This may be the stage where the “exclusive purpose” language will become a barrier for proponents. Some states may determine that they are unable to accept the federal funds because they would have to abandon their current programs. The mismatch of the fed-

eral law with current state laws and programs was reflected in a statement by a state health official as retold by Peter van Dyck, director of the Office of State and Community Health of the MCH Bureau: "States don't have that many programs that match this definition."¹⁰ Other states may realize that the strings attached to these funds will bind their ability to pursue other efforts that don't specifically teach the statute's abstinence-only messages.

WHAT NOW?

There is much ahead for proponents and critics of the abstinence-only movement. Advocates with differing perspectives on the issue will watch as states make their decision to accept or reject the federal funds. As programs are implemented, they will probably have renewed concerns about revisiting the sins of the AFLA program—separation of church and state and the dissemination of medically inaccurate information. (The AFLA settlement in the *Kendrick v. Sullivan* case expires in 1998—exactly when the welfare reform abstinence-only education program begins.)

Meanwhile, the AFLA program was altered to reflect the definition in welfare reform; had two-thirds of its appropriation designated for abstinence-only education; and had its appropriation nearly doubled. (This was the first significant increase in funding for the program since its inception.) This brings another 9 million federal dollars to the abstinence-only pot. AFLA programs must adhere to the restrictive definition starting in October 1997. This will mark the start of \$97 million in annual federal spending for abstinence-only programs.

The Christian Coalition announced on January 31, 1997, that they will seek an additional \$150 million federal dollars for these restrictive abstinence-only programs.

Most certainly, the debate will continue.

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**July 21-25, 1997: Pawling, New York
NATISHE**

The North Atlantic Training Institute for Sexual Health Education (NATISHE) is an intensive five-day residential training experience for professionals working in the areas of sexuality, health, and family life education. It is designed for sexuality educators from family planning programs, schools, and community-based organizations, also from HIV/AIDS and other health educators who desire increased skills and knowledge about sexuality education.

NATISHE is skill-oriented training. Rather than emphasizing data or research as many conferences do, NATISHE is experiential and focuses on program development and presentation skills. It is designed to strengthen confidence and overall productivity of sexual health educators in the community through participation in involving workshops, inspirational keynotes, and support groups. This year, NATISHE workshops will include a specialized track for more experienced educators as well as a core track for educators who want to review or develop competencies in sexuality, health, and family life education.

A flyer with more detailed information on NATISHE will be available in early 1997. To receive a flyer, please call Rhonda at 212/594-7741 and ask to be put on the mailing list.

Coordinated by: Cicatelli Associates, Inc. (CAI)
Regional II Family Planning Training Center
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New York, NY 10018-6505



EXCERPTS:
DRAFT BLOCK GRANT APPLICATION GUIDANCE,
ABSTINENCE EDUCATION PROVISION OF THE 1996 WELFARE LAW
(PUBLIC LAW 104-193) NEW SECTION 510 OF TITLE V OF THE U.S. SOCIAL SECURITY ACT

Application Due Date July 15, 1997 (Guidance released February 27, 1997)

I. PURPOSE

Public Law 104-193, signed into law on August 22, 1996, added a new formula grant program (Section 510) to Title V of the Social Security Act. Its purpose is to "enable the State to provide abstinence education, and at the option of the State, where appropriate mentoring, counseling, and adult supervision to promote abstinence from sexual activity, with a focus on those groups which are most likely to bear children out of wedlock." Abstinence education is further defined in the law. (*See Appendix 6.1*)

...

III. APPLICATION AND REVIEW PROCESS

3.2 Who Can Apply For Funds.

Grant applications will be accepted only from the State Health Agency responsible for the administration (or supervision of the administration) of the Title V Maternal and Child Health Services Block Grant.

3.3 Allocation of Funds.

The law provides for an appropriation of \$50 million for each fiscal year 1998 through 2002, beginning with October 1, 1997. The project period for this grant is one year. The \$50 million appropriation will be awarded each year by a formula determined by the proportion that the number of low-income children in the State bears to the total number of low-income children for all the States. If a State chooses not to apply for a grant, that State's allocation will be returned to the Treasury; it will not be available for redistribution among the remaining States.

3.4 Non-Federal Match, Budget, and Carry-Over.

All of Title V, Block Grant Legislation, Sections 503 (Payments to States), 507 (Criminal Penalty for False Statements), and 508 (Non-Discrimination) apply to allotments of this appropriation. Some of these provisions are highlighted below.

There is a required match of 3 non-Federal dollars for every 4 Federal dollars awarded. The non-Federal match must be used solely for the activities enumerated under Section 510 and may be State dollars, local dollars, or in-kind support.

...

IV. REQUIREMENTS FOR PROGRAM NARRATIVE

4.2.1 Describe the Priority Needs in the State for Abstinence Education Programs.

Document the priorities for Abstinence Education in your State. Describe existing programs and gaps in services. As appropriate, describe the needs by population subgroups; males and females <10, 10-14, 15-17, 18-19, 20-24, and >24 years of age, racial and ethnic groups, income groups, and children with special mental and/or physical health needs.

This section should conclude with a limited number of priority needs stated in short sentences and listed in priority order.

4.2.2 Meet the Legislative Priorities.

For a copy of Section 510, see Appendix 6.1. The purpose of the Abstinence Education project is to enable the State to provide abstinence education, and at the option of the State, where appropriate, mentoring, counseling, and adult supervision to promote abstinence from sexual activity, with a focus on those groups which are most likely to bear children out-of-wedlock.

For purposes of this section, the term "abstinence education" means an educational or motivational program which:

- (A) has as its exclusive purpose, teaching the social, psychological, and health gains to be realized by abstaining from sexual activity;
- (B) teaches abstinence from sexual activity outside marriage as the expected standard for all school age children;
- (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;
- (D) teaches that a mutually faithful monogamous relationship in the context of marriage is the expected standard of human sexual activity;
- (E) teaches that sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects;
- (F) teaches that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child's parents, and society;
- (G) teaches young people how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances; and
- (H) teaches the importance of attaining self-sufficiency before engaging in sexual activity.

It is recognized that many States receive relatively modest funding under the legislative formula which will result in the development of programs with significant variation. It is not necessary to place equal emphasis on each element of the definition, however, a project may not be inconsistent with any aspect of the abstinence education definition

4.2.6 Describe, as appropriate, the coordination of this project with other Abstinence-Only Education programs in the State.

Describe in this section those special coordination efforts or other specific programs not already discussed in Section 4.2.3 above, including those abstinence only education programs funded by other sources.

WHAT'S WRONG WITH ABSTINENCE-ONLY SEXUALITY EDUCATION PROGRAMS?

Debra W. Haffner, M.P.H.
SIECUS President/CEO

SIECUS supports abstinence. I repeat, SIECUS supports abstinence. But SIECUS does not support teaching young people *only* about abstinence.

SIECUS's *Guidelines for Comprehensive Sexuality Education: Kindergarten—12th Grade* state that one of the four primary goals of comprehensive education is "to help young people exercise responsibility regarding sexual relationships, including addressing abstinence and [how] to resist pressures to become prematurely involved in sexual relationships."¹

Abstinence is one of the 36 topics covered in the *Guidelines*, and messages about abstinence are included in age-appropriate sections. (See "What the SIECUS Guidelines Say About Sexual Abstinence" on page 10.)

SIECUS does **not** believe in abstinence-only approaches to sexuality education that have as "their exclusive purpose teaching the social, psychological, and health gains to be realized by abstaining from sexual activity."² (This is what the newly funded \$50 million federal program will require grant recipients to teach American youth. See "Excerpts: Draft Block Grant Guidance, Abstinence Education Provision of the 1996 Welfare Law," on page 8.)

SIECUS does, however, support programs that are abstinence-based—such as *Postponing Sexual Involvement* and *Will Power, Won't Power*—that provide young people with clear messages about abstaining in the context of a broader, more comprehensive program. (See "Abstinence-Only Curricula Without the Fear" on page 22 for abstinence-based programs that are sound pedagogy for their target population.)

Abstinence-only sexuality education is not effective. Proponents of such sexuality education make broad claims that sound exciting. They argue that if you tell young people to abstain from sexual intercourse, they will. These "just say no" programs promise to keep young people from developing "too serious" relationships, from being emotionally hurt, from experimenting with intimacy and sexual behaviors, and, of course, from getting pregnant and from contracting an STD or HIV.

There is no reason to believe that these claims are true. There are *no* published studies in the professional literature indicating that abstinence-only programs will result in young people delaying intercourse. In fact, a recent \$5 million abstinence-only initiative in California not only did not increase the number of young people who abstained,

but, in one school, actually resulted in more students having sexual intercourse after having participated in the course.³ Proponents of abstinence-only fear-based programs often recite their own in-house evaluations as proof that these programs are effective. Yet, they have not published their evaluations in peer-reviewed literature and are not willing to make them available for review by outside researchers.

Comprehensive sexuality education is, on the other hand, an effective strategy for giving young people the skills to delay their involvement in sexual behaviors. Several reviews of published evaluations of sexuality education, HIV prevention, and teenage pregnancy prevention programs have consistently found that:

- sexuality education does not encourage teens to start having sexual intercourse or to increase their frequency of sexual intercourse.⁴
- programs must take place before young people begin experimenting with sexual behaviors if they are to result in a delay of sexual intercourse.⁵
- teenagers who start having intercourse following a sexuality education program are more likely to use contraceptives than those who have not participated in a program.⁶
- HIV programs that use cognitive and behavioral skills training with adolescents demonstrate "consistently positive" results.⁷

Indeed, a recent World Health Organization review of 35 studies found that the programs most effective in changing young people's behavior are those that address abstinence, contraception, and STD prevention.⁸ In addition, the National Institutes of Health's Consensus Panel on AIDS said in February 1997 that the abstinence-only approach to sexuality education "places policy in direct conflict with science and ignores overwhelming evidence that other programs [are] effective."⁹

Fear-based, abstinence-only programs also fail to address many of the antecedents of early first intercourse. Extensive research conducted during the past two decades has clearly delineated a portrait of a young person who begins intercourse prior to age 14.

Education programs cannot influence some of the factors such as early physical development, lower age of menarche or a higher testosterone level, older siblings, single-parent

WHAT THE SIECUS GUIDELINES SAY ABOUT SEXUAL ABSTINENCE

SUBCONCEPT

Abstinence from sexual intercourse is the most effective method of preventing pregnancies and STD/HIV.

DEVELOPMENTAL MESSAGES

Level 2

(*preadolescence, ages 9 through 12, later elementary schools*)

- Intercourse is a pleasurable activity for most adults.
- Children are not ready for sexual intercourse.

Level 3

(*early adolescence, ages 12 through 15; middle school/junior high school*)

- Young teenagers are not mature enough for a sexual relationship that includes intercourse.
- Abstinence from sexual intercourse is the best method to prevent pregnancy and STD/HIV.
- Teenagers who date need to discuss sexual limits with their dating partner.
- People need to respect the sexual limits set by their partners
- Teenagers in romantic relationships can express their feelings without engaging in sexual intercourse.

- There are many ways to give and receive sexual pleasure and not have intercourse.
- Teenagers considering sexual intercourse should talk to a parent or other trusted adult about their decisions, contraception, and disease prevention.
- Most adults believe school-age teenagers should not have sexual intercourse.
- Most religions teach that sexual intercourse should only occur in marriage.
- Abstinence from intercourse has benefits for teenagers.
- Teenagers who have had sexual intercourse can choose to be abstinent.

Level 4

(*adolescence, ages 15 through 18; high school*)

- Many American teenagers have had sexual intercourse and many have not.
- Sexual intercourse is not a way to achieve adulthood.
- Teenagers in romantic relationships can express their sexual feelings without engaging in sexual intercourse.
- Many adults experience periods of abstinence.

household environments, or mothers with lower educational attainment.

Sexuality education programs can, however, potentially address other factors such as young people's perception of their friends' and siblings' sexual behaviors, the timing of first dating, steady relationships, and beliefs about gender role stereotypes.

Other venues such as counseling and mentoring programs can address these other antecedents of early first intercourse: lower school performance, lower reading and writing skills, lack of parental support, lower church attendance, depression, and other problem behaviors, such as substance use (including alcohol and nicotine), and school delinquency.¹⁰

FEDERAL REQUIREMENT #1:

The new welfare reform program requires that sexuality education classes in the United States teach that "abstinence from sexual activity outside marriage is the expected standard for all school-age children." Although adults may very well want this as a standard, it is far

from accurate in describing the reality of today's teenagers.

Almost all American adolescents engage in some type of sexual behavior. Although most policy debates about sexuality education have focused on sexual intercourse and its negative consequences, young people actually explore their sexuality from a much wider framework that includes dating, relationships, and intimacy.

The welfare reform legislation never even defines "sexual activity." Since the definition includes the word "activity" rather than "intercourse," one must assume that it is broader and includes a prohibition against other activities besides sexual intercourse. This is, however, never stated. For clarification, the Medical Institute for Sexual Health MISH defines *abstinence* as "avoiding sexual intercourse as well as any genital contact or genital stimulation"¹¹ Other fear-based curricula define it as any behaviors beyond hand holding and light kissing.¹²

The reality is that sexual behavior is almost universal among American adolescents. A majority of American teenagers date, over 85 percent have had a boyfriend or girl-

friend and have kissed someone romantically, and nearly 80 percent have engaged in deep kissing.¹³

The majority of young people move from kissing to more intimate sexual behaviors during their teenage years. More than 50 percent engage in “petting behaviors.” By the age of 14, more than 50 percent of all boys have touched a girl’s breasts, and 25 percent have touched a girl’s vulva. By the age of 18, more than 75 percent have engaged in heavy petting.¹⁴ From 25 to 50 percent of teens report that they have experienced fellatio and/or cunnilingus.¹⁵ A recent study found that of those teens who are virgins, nearly one third reported that they had engaged in heterosexual masturbation of or by a partner. One tenth of virgins had participated in oral sex, and one percent had participated in anal intercourse.¹⁶

More than half of American teenagers in schools have had sexual intercourse. The latest data from the Youth Risk Behavior Surveillance System of the U.S. Centers for Disease Control and Prevention found that 54 percent of high school students had sexual intercourse, a rate virtually unchanged since the study began in 1990.¹⁷ By the time they reach the age of 20, 80 percent of boys and 76 percent of girls have had sexual intercourse.¹⁸

At each stage of adolescence, higher proportions of boys and girls have had sexual intercourse today than 20 years ago. The largest increase occurred between 1971 and 1979. The increase was modest in the 1980s. It appeared to level off in the 1990s.¹⁹ It is important to note, however, that these trends started much earlier than the 1970s. In fact, the modal age for first intercourse was 17 for men and 18 for women in the 1950s and 1960s. It was 16 for men and nearly 17 for women in the 1970s and 1980s. This is a one-year change over a 40-year span.²⁰

FEDERAL REQUIREMENT #2:
The new federal program also requires that grantees teach that “abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems.”

On the surface, it is hard to argue with this statement. The SIECUS *Guidelines* themselves state that “abstinence from sexual intercourse is the most effective method of preventing pregnancies and STDS/HIV.” Yet, after learning that abstinence is the “only certain way” to avoid pregnancy and STDS/HIV, young people may get the impression that contraception and condoms are not effective. In fact, many of the fear-based approaches to sexuality education discuss methods of contraception only in terms of their failure rates.²¹ Indeed, professionals who work directly with adolescents in schools and clinics can attest that adolescent vows of abstinence fail far more than condoms do.

Messages that contraception and condoms are not

effective could, unfortunately, reverse the significant strides that American youth have made toward having safer sex during the past two decades. Consider these statistics:

- In 1979, fewer than 50 percent of adolescents used a contraceptive at first intercourse.
- In 1988, more than 65 percent used them.
- By 1990, more than 70 percent used them.²²

Teenagers who receive contraceptive education in the same year that they become sexually active are 70 to 80 percent more likely to use contraceptive methods (including condoms) and more than twice as likely to use the pill.²³

It is vitally important that programs encourage young people who engage in intercourse to use contraception and condoms. According to the National Institutes of Health, “although sexual abstinence is a desirable objective, programs must include instruction in safe sex behavior, including condom use.”²⁴

FEDERAL REQUIREMENT #3:
The new abstinence-only programs must also teach that “a mutually faithful monogamous relationship in the context of marriage is the expected standard of human sexual activity.”

This “information” is clearly not true in American culture. The fact is that the vast majority of Americans begin having sexual relationships (including sexual intercourse) as teenagers. Fewer than 7 percent of men and 20 percent of women aged 18 to 59 were virgins when they were married.²⁵ Only 10 percent of adult men and 22 percent of adult women report that their first sexual experience was with their spouse, many of whom had their first intercourse when they were engaged prior to marriage.²⁶ Indeed, this “norm” was probably never true: a third of all Pilgrim brides were pregnant when they were married.²⁷

There are currently more than 74 million American adults who are classified as single because they have delayed marriage, decided to remain single, are divorced, or have entered into a gay or lesbian partnership. More than three quarters of these men and two thirds of these women have had sex with a partner in the past 12 months.²⁸ Most of them would take offense at this new “standard of human behavior.” Under this new program’s definition, schools will teach young people that these adults must remain celibate throughout their lives.

The concept of chastity until marriage may have made more sense a hundred years ago when teenagers reached puberty in their middle teens. For them, marriage and other adult responsibilities closely followed. Today’s young people are different: They reach puberty earlier, they have intercourse earlier, and they marry in their middle twenties. In fact,

women and men marry several years later today than they did in the 1950s. The current mean age for first marriage is 26.7 years-old for men and 24.5 years-old for women.²⁹

FEDERAL REQUIREMENT #4:
The new federal programs must also teach that “sexual activity outside of marriage is likely to have harmful psychological and physical effects.”

There is no sound public health data to support this statement. It is certainly true that sexual relations can lead to unplanned pregnancies, STDs, and HIV. It is also true that intimate relationships can be harmful for some people. But the reality is that the majority of people have had sexual relationships prior to marriage with no negative repercussions. For example, one study reports that when premarital sexual intercourse is satisfying, it has a positive effect on relationships for both males and females.³⁰ The largest study of adult sexual behavior found that more than 90 percent of men and more than 70 percent of women recall that they wanted their first intercourse to happen when it did; only 6.9 percent of men and 21 percent of women had first intercourse on their wedding night.³¹

CONSENSUS STATEMENT

The National Commission on Adolescent Sexual Health recognizes that adolescent sexuality is a highly charged emotional issue for many adults. It urges, however, that policymakers recognize that sexual development is an

essential part of adolescence and that the majority of adolescents engage in sexual behaviors as part of their overall development.

More than 50 national organizations have endorsed the Commission’s consensus statement that says “society should encourage adolescents to delay sexual behaviors until they are ready physically, cognitively, and emotionally for mature sexual relationships and their consequences.”³²

These organizations urge, however, that “society must also recognize that a majority of adolescents will become involved in sexual relationships during their teenage years. Adolescents should receive support and education for developing the skills to evaluate their readiness for mature sexual relationships.”³²

The reality is that the majority of American adults believe that young people need to be told more than “just say no.” Although 60 percent believe that premarital sexual relations for teenagers is always wrong,³³ more than three-quarters of adults also believe that teenagers need information and access to contraceptive services and STD prevention information.³⁴ Abstinence-only programs, which include misinformation about sexual behaviors and promote fear and shame, are unlikely to prove effective.

If Congress and the states are serious about helping young people delay sexual behaviors and grow into healthy, responsible adults, they will support a comprehensive approach to sexuality education that has a proven track record in accomplishing these goals.

WHAT'S A STATE TO DO?

Many state agencies and governor’s offices are calling SIECUS for information about and assistance on considering these new abstinence-only funds.

SIECUS’s advice to the states is similar to what many people want to tell teenagers. Abstain. And if you’re not going to abstain, act responsibly.

States will make a very important statement if they do not apply for this money. They will say “no” to programs that are based on inaccurate information and fear-based education models. They will refuse to waste scarce federal and state dollars for ineffective abstinence-only programs.

SIECUS recognizes, however, that some states will apply for this money. SIECUS urges these states to use it only to conduct effective programs aimed at young people in upper elementary and middle schools—students who are not yet

sexually active. We urge them not to fund fear-based education as exemplified by the MISH Guidelines and the related curricula listed on page 22. They don’t work. We urge them to contact us for reviews of these programs.

We also urge these states to use their creativity in designing programs to increase young people’s likelihood of abstaining from sexual relations. These might include programs that focus on mentoring; remedial education; child sexual abuse prevention; better communication between parents, physicians, and children about sexuality; mental health services; and career planning for young women. All of these might help increase the age of first intercourse if targeted to young people prior to sexual relations. These programs must, however, be developed and evaluated carefully.

—Debra W. Haffner

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MISH PUBLISHES NEW FRAMEWORK FOR FEAR-BASED, ABSTINENCE-ONLY EDUCATION

By Ruth Mayer

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The Medical Institute for Sexual Health (MISH) has published a guide to implementing sexuality education programs titled the *National Guidelines for Sexuality and Character Education*. The document presents a framework for developing fear-based, abstinence-only programs.

The MISH format is virtually identical to the SIECUS *Guidelines for Comprehensive Sexuality Education*.¹ MISH followed SIECUS's process, conceptual framework, and even its typeface for printing developmental messages.

Like SIECUS, MISH convened a task force to develop the *Guidelines*. Members were, however, almost exclusively from organizations that promote fear-based, abstinence-only programs, including Focus on the Family, Project Reality, the Educational Guidance Institute, and Teen-Aid, Inc.

The SIECUS *Guidelines* were developed by experts affiliated with leading medical, educational, and governmental organizations, including: the U.S. Centers for Disease Control, the American School Health Association, the American Medical Association, and the National School Boards Association.

POINTS OF AGREEMENT

The MISH *Guidelines* contain many valuable messages for young people that are also in the SIECUS *Guidelines* on such topics as families, friendship, and body image. SIECUS agrees with approximately 60 percent of the MISH messages.

Surprisingly, the MISH *Guidelines* recognize that sexuality is an important part of life and consists of far more than sexual behavior. Virtually adopting SIECUS language, the authors write that "sexuality does not mean sexual activity; rather, it refers to all the physical and social characteristics, feelings, and behaviors that make us male or female" (page 48). They also note that a benefit of the sexual revolution of the 1960s and 1970s was that society gained "a more open and positive attitude toward sex. Husbands and wives, parents and children became better able to talk about sex" (page 2).

The MISH *Guidelines* provide a blueprint for sexuality education from elementary school through high school. This is noteworthy in light of the Far Right's history of opposing any sexuality education in public schools and continuing attacks on programs below the eighth grade.

POINTS OF DISAGREEMENT

Despite similarities, the MISH and SIECUS *Guidelines* represent very different approaches to sexuality education. The SIECUS *Guidelines* provide a framework for comprehensive

sexuality education designed to help young people understand "a positive view of sexuality, provide them with information and skills about taking care of their sexual health, and help them acquire skills to make decisions now and in the future"² (page 3).

The MISH *Guidelines*, on the other hand, provide a framework for programs that have one goal: directing students toward the only right "moral" choice—abstinence until marriage. The authors define sexual abstinence as "avoiding sexual intercourse as well as any activity involving genital contact or genital stimulation" (page 7).

Fear and danger. The authors of the MISH *Guidelines* assert that there is "no responsible sex for unmarried teenagers" (page 81). They use numerous fear-based messages to convey this view. For example they state that "pre-mature sexual activity is destructive toward self and others. It poses a grave threat to young people's physical health, emotional well-being, and character development" (page 11).

The MISH *Guidelines* describe adolescent sexual relations only in negative terms. The authors state that "the destructive consequences of adolescent sexual activity include pregnancy and its consequences (400,000 teen abortions annually) sexually transmitted diseases (including possible long-term health consequences, such as loss of fertility), emotional hurt, potential difficulty in future relationships, and the development of disrespectful and irresponsible behavior patterns that are antithetical to good character" (page 11).

Contraception. The MISH *Guidelines* provide scant information about contraception. This is in keeping with their belief that "promoting contraceptives may decrease a teenager's fear of pregnancy and thus increase the likelihood of sexual activity" (page 65). In reality, information about contraception does not hasten the onset of intercourse and may increase contraceptive use at first intercourse.²

The MISH *Guidelines* portray birth control as ineffective, particularly when used by adolescents. The authors write that "young adults and adolescents who obtain contraception information often do not read it" (page 65) and that "condom failure rates for preventing pregnancy are very high among unmarried teens" (page 65). In fact, a large proportion of never-married adolescents who use contraceptives succeed in avoiding unintended pregnancy. And never-married teenagers are slightly more successful than never-married women aged 20 to 24 in preventing a pregnancy in the first 12 months of pill or condom use.³

The MISH *Guidelines* include information on only two

MISH NATIONAL GUIDELINES MIRROR SIECUS GUIDELINES: SO SIMILAR YET SO DIFFERENT

The MISH *National Guidelines* and the SIECUS *Guidelines* are virtually identical in conceptual framework and include similar developmental messages. Unfortunately, this helps to camouflage the organization's Far Right messages. Consider these striking similarities:

FRAMEWORK AND STYLE

SIECUS *Guidelines*

- Include six key concepts: "Human Development," "Relationships," "Personal Skills," "Sexual Behavior," "Sexual Health," and "Society and Culture."
- Outline 36 topics addressed in a comprehensive program.
- Present developmental messages for young people from elementary through high school.

MISH *Guidelines*

- Include seven key topics: "Character Formation," "Human Development," "Relationships," "Family," "Sexual Behavior," "Sexual Health," and "Media and Society."
- Outline 33 subtopics that reflect instructional goals.
- Present developmental messages for young people from elementary through high school.

CONTENT

The MISH *Guidelines* co-opt many of the developmental messages in the SIECUS *Guidelines*; 10 percent of the MISH messages are virtually identical to ones developed by SIECUS. A sampling of similar messages follows.

methods of contraception: condoms and oral contraceptives and emphasize that condoms "do not eliminate the risk of pregnancy or STDs. Serious risks remain" (page 10). (In reality, using a condom is 10,000 times safer than not using a condom during intercourse.⁴) Information about oral contraceptives also focuses on failure rates and says that research indicates that 3 to 9 percent of women who use oral contraceptives get pregnant during the first year of use" (page 68). In fact, oral contraceptives are nearly 100 percent effective when used correctly and consistently.⁵

Anti-choice. The MISH *Guidelines* present information that is consistent with an anti-choice viewpoint. Young people are to learn that "in all species, including human beings, life begins to develop at conception" (page 44) and that "life begins to develop at fertilization and progresses through various stages of development to adulthood" (page 48).

Human Development

SIECUS: Men and women have reproductive organs that enable them to have a child (page 12).

MISH: The reproductive systems of men and women enable them to produce children (page 45).

Relationships

SIECUS: Family members can show love for each other in many ways (page 17).

MISH: Family members can exhibit love for each other in many ways (page 54).

Personal Skills

SIECUS: Parents and other adults can help children with decisions (page 26).

MISH: Parents and other respected adults can be good resources for adolescents facing difficult decisions (page 42).

Sexual Health

SIECUS: Proper use of latex, lubricated condoms with a tip, along with a spermicide, can greatly reduce, but not eliminate, the chance of getting STD/HIV (page 40).

MISH: The use of condoms offer risk reduction of some STD transmission, but they do not eliminate the risk (page 67).

Society and Culture

SIECUS: In some places, there is a double standard about sexual practices (page 46).

MISH: In today's society, there still exists a wrongful double standard for girls and boys regarding sexual behavior (page 47).

The information about abortion tells young people that they "don't need to worry about getting an abortion" if they abstain from sexual relations until marriage. (page 67).

Family structure. The MISH *Guidelines* acknowledge that the composition of the American family has dramatically changed. They recognize that "a child may live with two biological parents, one parent, two remarried parents, grandparents, adoptive parents, or other guardians" (page 56).

However, they also assert that "a lifelong, committed, marital relationship provides the best setting for human reproduction and rearing of children" (page 61). This information about the "best" type of family is potentially harmful: researchers believe that a "negative view of one's family structure may lead to lower self-esteem."⁶

Sexual orientation. The MISH *Guidelines* include almost no information about sexual orientation; none of the

developmental messages address this topic. The authors write that while “everyone has sexual desires...sexual activity is best reserved for those who are in a faithful, committed, lifelong, monogamous relationship (traditionally known as marriage)” (page 49).

Finding help. The MISH *Guidelines* only superficially address comprehensive sexuality education. For example, they present detailed information about the transmission of STDs without including facts about treatment or screening and they include only limited information about prenatal care for pregnant women.

UNSUBSTANTIATED STATEMENTS

The MISH *Guidelines* include unsubstantiated statements and present highly subjective messages as fact. For example, the authors assert that adolescents “who do not engage in premature sexual activity have the lowest rate of serious emotional problems” (page 64) and that “few adolescent sexual relationships last if they are outside of marriage” (page 68).

The *Guidelines* also make unsubstantiated assertions about the benefits of premarital abstinence. For example, the authors state that “fidelity may be more difficult in the future if, as an adolescent, a person does not exercise control over his or her sexual desires” (page 62) and that “developing a habit of sexual self-control prior to marriage should help people remain sexually faithful to their spouses in marriage” (page 52).

CONFUSED PEDAGOGY

The MISH *Guidelines* attempt to use the same pedagogy as the SIECUS *Guidelines*. However, the authors frequently present information that is not relevant to the topic under discussion.

For example, a section in the MISH *Guidelines* about puberty includes messages about unrealistic sexual images in the media; a section on gender roles includes information about physical changes during puberty; and a section on parenthood includes messages about the benefits of community service or volunteer work for young people.

LACK OF COMMUNITY ADAPTATION

The SIECUS *Guidelines* recognize that there is no ideal curriculum that will meet the needs of every community in the United States. In fact its Task Force clearly states that “The characteristics of the local situation determine the exact content of the local curriculum. Community attitudes, developmental differences in children, local socioeconomic influences, parent expectations, student needs and expectations, and religious and other cultural perspectives must be paramount in the design of the local sexuality education program” (page 8). The SIECUS *Guidelines* are a starting point for such development.

The authors of the MISH *Guidelines* provide almost no

information about community adaptability of their document. They do include a suggested Policy Statement on sexuality education. Although the authors write that it can be “adapted for use in school systems,” they clearly believe that the MISH *Guidelines* should serve as a blueprint for sexuality education programs. The statement concludes by saying that any sexuality education program should be “consistent with the attached *National Guidelines for Sexuality and Character Education*” (page 30).

CONCLUSION

The MISH *Guidelines* provide a fear-based framework for developing sexuality education programs that focus exclusively on abstinence. They discuss contraceptives and condoms only in terms of method failure and adolescent sexual relations only in terms of negative consequences. The authors do not include any information to help people involved in sexual relationships safeguard their health.

Comprehensive sexuality education programs are designed to provide young people with abstinence education that can help them avoid premature sexual activity. These programs also aim to provide young people with accurate information about human sexuality, the opportunity to explore their own attitudes, and equip them with the skills to make healthy and responsible sexual decisions throughout their lives.

The SIECUS and MISH *Guidelines* represent very different approaches to sexuality education. It is important that professionals and communities developing sexuality education programs understand that the MISH *Guidelines* represent a framework for developing highly restrictive programs that use scare tactics to promote premarital abstinence.

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6. I. H. Gagnon, M. Coleman, and D. Mapes, “A Meta-analytic Review of Family Structure Stereotypes,” *Journal of Marriage and the Family*, May 1990, pp. 287–97.

HOW MISH *GUIDELINES*¹ PROMOTE FEAR-BASED, ABSTINENCE-ONLY SEXUALITY EDUCATION

The *National Guidelines for Sexuality and Character Education* published last year by the Medical Institute for Sexual Health (MISH) in Austin, TX, contain many messages that are consistent with fear-based, abstinence-only programming.

These excerpts from the MISH *Guidelines* reflect their narrow approach to critical sexuality education topics.

Abstinence

- The only truly “safe sex” for adolescents is avoiding vaginal intercourse, anal intercourse, oral sex, mutual masturbation, and genital contact (“outercourse”) before marriage (page 10).
- Sexual abstinence is the only medically safe and morally responsible choice for unmarried teenagers (page 7).
- Adolescent sexual abstinence offers the freedom to develop respect for oneself and others, use energy to accomplish life goals, be creative in expressing feelings, develop necessary communication skills, develop self-appreciation, achieve financial stability before having a family, and establish greater trust in marriage (page 10).
- Adolescent sexual abstinence offers the freedom from parenting too soon, STDs, problems linked to contraceptives, abortion, emotional problems (guilt, doubt, worry, rejection, depression, loss of reputation) associated with premature sexual activity, pressure to marry early, and unintentional and intentional exploitation (page 10).

Sexual Activity

- Teenagers and young adults need to hear the message that having sex outside of marriage is, from a medical standpoint, highly dangerous because of the increased number of STDs and the increased susceptibility young people have to those STDs (page 5).
- Sex for unmarried teens is clearly high-risk behavior in that it jeopardizes their physical health and emotional well-being as well as their future fertility (page 5).
- Premature sexual activity is destructive toward self and others. It poses a grave threat to young people's physical health, emotional well-being, and character development. It also harms public health and a nation's moral character (page 11).
- To avoid premature sexual activity, young people need an understanding of the physical and emotional dangers of sexual activity (page 11).
- If we respect and care about someone, we will not act in ways that jeopardize that person's present or future reproductive health. When two unmarried people are

involved in a sexual relationship, they are endangering their own and each other's reproductive health by risking transmission of STDs (page 58).

- Most adolescents have never had the many destructive consequences of premature sexual involvement clearly explained to and discussed with them (page 42).
- Sexual activity for unmarried adolescents involves serious physical and emotional risks (page 57).
- Premature sexual activity can have a significant negative impact on a person emotionally (page 68).
- Sexual activity by unmarried adolescents is dangerous regardless of who one's partner is (page 11).
- Sexual activity can interfere with the development of healthy dating relationships (page 51).
- Premarital sexual activity often leads to infections of the reproductive system (page 64).

Contraception

- Condoms and other barrier “protection” do not make sex outside marriage physically safe (you can still get pregnant or catch an STD), emotionally safe (you can still get hurt), or ethically loving (you aren't loving somebody if you're gambling with his or her health and happiness) (page 7).
- Contraceptives, including condoms, do not eliminate the risk of pregnancy or STDs. Serious risks remain. Sex education programs must include information regarding the true failure rates of contraceptive techniques (page 10).
- Despite the use of contraceptives, sexual activity may result in pregnancy (page 67).
- Sexually active adolescents are at physical and emotional risk even if they use contraceptives or condoms (page 65).
- Mature adults involved in a lifetime commitment should be aware of the failure rates of contraceptives (page 65).

Human Development

- In all species, including human beings, life begins to develop at conception (page 44).
- A human life begins to develop at conception, when a man's sperm fertilizes a woman's egg (page 45).
- Life begins to develop at fertilization and progresses through various stages of development to adulthood (page 48).

1. The Medical Institute for Sexual Health (MISH), *National Guidelines for Sexuality and Character Education*, Austin, TX, 1996.

**THE CLINTON ADMINISTRATION'S
ADOLESCENT PREGNANCY PREVENTION PROGRAM:
IGNORANCE DOES NOT EQUAL ABSTINENCE**

Susan K. Flinn
Director of Legislative Affairs
Advocates for Youth
Washington, DC

For the first time in recent memory, a sitting President—vocal on the issue of teenage pregnancy prevention—says he is committed to enacting a progressive agenda. Describing teenage pregnancy as “the most serious problem facing our nation today,” the President called for a national campaign to address the issue during his 1995 State of the Union Address. And in a January 1997 radio address, he cited data indicating birth rates for teenagers have declined four years in a row and pledged that the federal government would “step up support for effective programs at the local level.”

The “National Strategy to Prevent Teen Pregnancy,” issued by the U.S. Department of Health and Human Services (HHS) two days after President Clinton’s radio promise outlines this support and meets a Congressional requirement that HHS report on pregnancy prevention initiatives.¹

In this report, HHS promotes funding for “abstinence-until-marriage” education approved by the federal government—a step that is likely to reverse the downward trend in teenage pregnancies which the President spotlighted in his radio address.

Section A: Increase Opportunities Through Welfare Reform. This section of the “National Strategy” recaps the teen parenting and pregnancy provisions of last year’s welfare reform law that increases funding for restrictive and inaccurate abstinence-only sexuality education programs. The law provides funding for curricula that teach abstinence from “sexual activity outside of marriage is the expected standard for human activity.” It continues that sexual activity outside of marriage “is likely to have harmful psychological and physical effects.” No other messages—such as effective contraception or disease prevention—are allowed. The HHS report includes abstinence-only education in its list of “critical components of our national strategy.”

Section B: Support Promising Approaches. This section briefly outlines some of the programs affecting teen pregnancy that are supported by the HHS. The appendix outlines more initiatives and gives the misleading impression that myriad HHS programs directly target teen pregnancy. For example, the percentage of Social Service Block Grants (SSBG), Empowerment Zones and Enterprise Communities, or Medicaid funds actually spent on direct teen pregnancy prevention efforts is questionable.

Section C: Build Partnerships. This section describes the vital process of building partnerships among state, local, and national organizations to address teen pregnancy. It highlights the “National Campaign to Prevent Teen Pregnancy” and notes that HHS will work with the Campaign to implement the “National Strategy.” Both HHS and the Clinton Administration have worked closely in the past with other national organizations that have long histories of expertise in this area. It is hoped that such partnerships will continue in the future.

Section D: Improve Data Collection, Research, and Evaluation. This section includes a call for improved data collection, research, and evaluation to “further our understanding of the magnitude, trends, and causes of teen pregnancies and birth.” Such research is essential in expanding successful prevention programs, and the nation must intensify data collection efforts, particularly around high-risk behaviors and vulnerable populations. In the past, opponents of adolescent health programs have attacked these data collection efforts (such as the *National Youth Risk Behavior Survey*) because they believe that researching such behavior is tantamount to endorsing it. Public health advocates must watch carefully to see if President Clinton will work to secure Congressional support for increased effective data collection mechanisms that explore adolescent reality.

Section E: Disseminate Information on Innovative and Effective Practices. This section describes how important it is to “know about the approaches most likely to be successful in preventing teen pregnancy” and to support and replicate these approaches. Appendix III reproduces five “promising and successful” program descriptions from the HHS document, *Preventing Teen Pregnancy: Promoting Promising Strategies*.

Not one of these programs would qualify for the restrictive “abstinence-only” funding promoted in the “National Strategy.” The programs were included in the HHS document because they work. They work because they include information about abstinence, family planning, and contraception rather than relying on a single, overly simplistic message. In both documents and meetings, the Clinton Administration has extolled these programs; the “National Strategy” might have called for increased funding for the replication of these models.

Instead, in **Section F: Support and Encourage Adolescents to Remain Abstinent**, the "National Strategy" reiterates its primary public strategy—supporting abstinence. The abstinence campaign is built around a program entitled "Girl Power!" created by HHS last year to prevent substance abuse among young girls. The "National Strategy" is less clear about the role of men, although boys are scheduled for targeting with "education and support necessary to postpone fatherhood."

President Clinton has an opportunity—and the responsibility—to build support for pregnancy prevention programs that work. He must take the lead in a nationwide effort to recognize and find the programs and research that make a difference.

There are two dangers with the "National Strategy." The first is that it will accomplish nothing and eventually fade from the public eye. The other is that it will actually harm young people by promoting ineffective and dishonest messages and strategies.

The "National Strategy" appears poised to promote unrealistic and punitive messages that any expression of sex-

uality outside of marriage is bad, and that all Americans should refuse "sexual activity" until marriage—despite the fact that 75 percent of high school graduates have had sexual intercourse and most Americans who marry do so in their late twenties.

Pregnancy prevention experts in the Clinton Administration have acknowledged that withholding information about sexuality will *not* help young people avoid pregnancy or STDs. They know that the comprehensive programs they have highlighted in the past do not meet the new restrictive "abstinence-only" criteria and will be denied funding.

While calling for pregnancy prevention efforts that replace "political rhetoric with a strategy of giving people the tools to solve their problems," the Clinton Administration is promoting an unworkable proposal that promises to set back pregnancy prevention efforts.

1."A National Strategy to Prevent Teen Pregnancy" (Washington, DC: U.S. Department of Health and Human Services, 1997).

REVIEW

Dubious Conceptions: The Politics Of Teenage Pregnancy

Kristen Luker
Harvard University Press
79 Garden Street
Cambridge, MA 02138
617/495-2600
1996, 283 pp \$24.95

I enthusiastically add to the praise this book has received by suggesting that it become mandatory reading for those directly responsible for public policy and sexual health initiatives as well as for educators, youth agency program directors, and parents.

The author presents both conservative and liberal ideas on the "problems" of teenage pregnancy. In the process, she weaves together the history of this nation's social policy and its societal beliefs that contribute to the reader's understanding of the complexity of this issue.

For example, she examines the impact that our nation's beliefs about age and readiness for "adult" behavior have on the way our culture views teenage pregnancy. Though 18- and 19-year-olds are technically teenagers, they are also recognized as

adults in many of our laws and less than 50 years ago they would have been encouraged to marry and have children. Two-thirds of all new teen mothers today are 18 or 19 years old and are included in the data to justify how many "young" teens are pregnant. The reality, Luker points out, is that teen mothers are no more common today than they were in 1900. Though they are likely to be more sexually involved, they are also more likely to utilize contraception.

Dubious Conceptions is a valuable resource for many reasons. Luker draws from extensive data, blends history of the culture with current views, and helps the reader to analyze why social policies adopted over time either do or do not work.

She also challenges myths. One of the major beliefs held within our culture is that welfare creates and encourages the rise in pregnant teens. Luker demonstrates that out-of-wedlock births increased in all industrialized societies just as the countries were cutting welfare spending. The assumption that welfare promotes such births is not borne out by the facts.

Dubious Conceptions could be useful to family planning advocates who are often in a position to answer challenges on abortion,

adoption, and the provision of contraception for teenagers. On this, Luker is clear. Initiatives to improve the availability and education on contraceptives have worked, and she argues that reducing the public funding for poor women will only result in more pregnancies and public support.

Throughout, she develops the theme that we should be troubled by "...the fact that poor and minority women feel they risk losing so little by having a child at an early age." She says that "if America cares about its young people, it must make them feel that they have a rich array of choices so that having a baby is not the only or most attractive one on the horizon."

She also gives positive reinforcement to the gains made in understanding what types of sexuality education (helping students to develop resistance skills) may possibly delay intercourse or increase the likelihood that contraceptives will be used.

*Reviewed by Konstance McCaffree, Ph.D.,
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of Education, University of Pennsylvania,
Philadelphia, PA.*

THE NATIONAL COALITION TO SUPPORT SEXUALITY EDUCATION

The National Coalition to Support Sexuality Education consists of over 100 national non-profit organizations which are role models in promoting health, education, and social concerns for American youth. Coalition members are committed to the mission of assuring that comprehensive sexuality education is provided for all children and youth in the United States by the year 2000.

These organizations represent a broad constituency of child development specialists, educators, health care professionals, parents, physicians, religious leaders, and social workers whose combined work reaches more than 30 million young people.

The Coalition's goals are to:

- Advocate for sexuality education policies and programs at the national and state level;
- Develop strategies for implementing sexuality education initiatives at the local, state, and national level;
- Assist national organizations concerned with youth to establish policies and programs on sexuality education;
- Provide an opportunity for networking, resource sharing, and collaborating among national organizations supporting sexuality education;
- Develop strategies to address the activities of those who oppose providing children with comprehensive sexuality education;

- Host seminars on key issues in sexuality education;
- Identify the latest research, data analysis, and program evaluation materials in the field of sexuality education; and
- Strive to improve the cultural competency of materials and messages within the field of sexuality education.

Sexuality education is a lifelong process of acquiring information and forming attitudes, beliefs, and values about identity, relationships, and intimacy. It encompasses sexual development, reproductive health, interpersonal relationships, affection, intimacy, body image, and gender roles.

Sexuality education seeks to assist children in understanding a positive view of sexuality, provide them with information and skills about taking care of their sexual health, and help them acquire skills to make decisions now and in the future.

Comprehensive school-based sexuality education underscores and supplements the role of parents in the sexuality education of their children and reinforces the notion that responsibility and obligation for sexuality education are shared on a community-wide basis.

For more information about the National Coalition to Support Sexuality Education, contact: Publicity Policy Office, Sexuality Information and Education Council of the United States (SIECUS), 1711 Connecticut Avenue, N.W. Suite 206, Washington, DC 20009 Phone: 202/265-2405 Fax: 202/462-2340 E-mail: <SIECUSDC3@aol.com>. Web site: <<http://www.siecus.org>>.

Coalition Members

Advocates for Youth
AIDS Action Council
American Academy of Child and Adolescent Psychiatry
American Association for Health Education
American Association for Marriage and Family Therapy
American Association of Family & Consumer Sciences

American Association on Mental Retardation
American Association of School Administrators
American Association of Sex Educators, Counselors and Therapists
American College of Obstetricians and Gynecologists
American Counseling Association

American Jewish Congress
American Library Association
American Medical Association
American Nurses Association
American Orthopsychiatric Association
American Psychiatric Association
American Psychological Association
American Public Health Association

American School Health Association	National Abortion Federation	National Organization on Adolescent Pregnancy, Parenting and Prevention
American Social Health Association	National Abortion & Reproductive Rights Action League	National Resource Center for Youth Services
Association of Reproductive Health Professionals	National Alliance of State and Territorial AIDS Directors	National School Boards Association
Association for Sexuality Education and Training	National Asian Women's Health Organization	National Urban League
Association of State and Territorial Directors of Public Health Education	National Association of Counties	National Women's Law Center
Association of State and Territorial Health Officials	National Association of County and City Health Officials	National Women's Health Network
ASTRAEA National Lesbian Action Foundation	National Association of People with AIDS	Office of Family Ministries & Human Sexuality, National Council of Churches
AVSC International	National Association for Equal Opportunity in Higher Education	Parents, Families and Friends of Lesbians and Gays
Blacks Educating Blacks About Sexual Health Issues	National Association of School Psychologists	People for the American Way
Boston Women's Health Book Collective	National Black Women's Health Project	Planned Parenthood Federation of America
Catholics for a Free Choice	National Center for Health Education	Population Communications International
Center for Policy Alternatives	National Coalition of Advocates for Students	Presbyterians Affirming Reproductive Options
Center for Reproductive Health Policy Research	National Committee for Public Education and Religious Liberty	Religious Coalition for Reproductive Choice
Center for Reproductive Law and Policy	National Council of La Raza	Sexuality Information and Education Council of the United States
Center for Sexuality and Religion	National Council of Negro Women	Society for Adolescent Medicine
Center for Women Policy Studies	National Council on Family Relations	Society for Developmental and Behavioral Pediatrics
Child Welfare League of America	National Council of State Consultants for School Social Work Services	Society for Public Health Education
Children's Defense Fund	National Education Association Health Information Network	Society for the Scientific Study of Sexuality
Coalition on Sexuality and Disability, Inc.	National Family Planning and Reproductive Health Association	The Alan Guttmacher Institute
Education Development Center, Inc.	National Gay and Lesbian Task Force	Unitarian Universalist Association
ETR Associates	National Information Center for Children & Youth with Disabilities	United Church Board for Homeland Ministries
Federation of Behavioral, Psychological and Cognitive Sciences	National Latino/a Lesbian and Gay Organization	United States Conference of Mayors
Gay and Lesbian Medical Association	National League for Nursing	University of Pennsylvania, Graduate School of Education
Girls, Incorporated	National Lesbian and Gay Health Association	The Young Women's Project
Hetrick-Martin Institute	National Medical Association	YWCA of the U.S.A.
Human Rights Campaign	National Mental Health Association	Zero Population Growth, Inc.
The Institute for Advanced Study of Human Sexuality Alumni Association	National Minority AIDS Council	
Jewish Women International	National Native American AIDS Prevention Center	
The Latina Roundtable on Health & Reproductive Rights	National Network for Youth	
Midwest School Social Work Council		
Mothers' Voices		

The Coalition's breadth reflects the widespread public support for sexuality education for the nation's youth.

If your national organization is interested in joining, please contact SIECUS.

"ABSTINENCE-ONLY" CURRICULA WITHOUT THE FEAR

Some sexuality education curricula that focus exclusively on "abstinence only" without relying on fear or other scare tactics can often be effective when taught within the context of broader, more comprehensive programs. Some of them include:

Growing Together:

A Sexuality Education Program for Girls Ages 9-11

This program was developed to help increase positive communication about sexual information and values between parents and their daughters ages 9 through 11. It is undergoing revisions and is scheduled for publication in September 1997.

For more information: Girls, Inc. National Resource Center, 441 W. Michigan Street, Indianapolis, IN 46202, 317/634-7546

Postponing Sexual Involvement

This program is designed to help young people identify pressures that may lead to sexual involvement and to provide them with skills to resist such pressures. There are two series: one for preteens (grades 5 and 6), and one for young teens (grades 7, 8, 9). It was revised in 1996. (\$149)

For more information: Emory/Grady Teen Services Program, Grady Memorial Hospital, Box 26158, 80 Butler Street, Atlanta, GA 30335-3513, 404/616-3513

Project Taking Charge

For seventh- and eighth-grade students, this program covers interpersonal and family relationships, decision-making, and goal-setting. Abstinence is discussed in the context of avoiding sexually transmitted diseases and early parenthood. The curriculum was first published in 1990.

For more information: American Association of Family and Consumer Sciences, 1555 King Street, Alexandria, VA 22314, 703/706-4600

Removing the Risk:

Abstinence for High School Students

This program for grades 9 through 12 is designed to help young people develop interpersonal and social skills to postpone sexual involvement.

For more information: ETR Associates, P.O. Box 1830, Santa Cruz, CA 95061-1830, 800/435-8433

Sex Can Wait

This program focuses on building students' understanding of abstinence and developing the decision-making, refusal, and negotiation skills to postpone sexual involvement. (\$59.95)

For more information: ETR Associates, P.O. Box 1830, Santa Cruz, CA 95061-1830, 800/435-8433

Will Power/Won't Power

This program was developed to help 12- to 14-year-old girls acquire skills to resist peer pressure. It is scheduled for revision in 1997.

For more information: Girls, Inc. National Resource Center, 441 W. Michigan Street, Indianapolis, IN 46202, 317/634-7546

Smart Moves

This program includes (1) *Start Smart* to help preteens identify and resist peer, social, and media pressures to use drugs and become sexually involved; (2) *Stay Smart* to help teenagers develop social, resistance, assertiveness, problem-solving, and decision-making skills; and (3) *Keep Smart* to augment the sessions and teach parents about adolescent drug use and sexuality. All are scheduled for revision in 1997.

For more information: Boys and Girls Clubs of America, 1230 West Peachtree Street, N.W., Atlanta, GA 30309, 404/815-5700

This information was compiled by Monica Rodriguez, SIECUS school health coordinator.

FEAR-BASED "ABSTINENCE-ONLY" CURRICULA

These fear-based, abstinence-only curricula are currently available. Publishers are in parentheses. SIECUS's *Community Action Kit* contains reviews.

- *Sex Respect for the '90s.* (Respect, Inc.)
- *Sex Respect and Facing Reality.* (Project Reality)
- *Me, My World, My Future.* (Teen-Aid, Inc.)
- *Me, My World, My Future and Sexuality, Commitment and Family.* (Teen-Aid, Inc.)
- *Choosing the Best.* (Choosing the Best, Inc.)

- *Safe Sex.* (Medical Institute for Sexual Health/MISH.)
- *Responsible Sexual Values Program.* (RSVP)
- *Family Accountability: Communicating Teen Sexuality (FACTS).* (Northwest Family Services.)
- *Reasonable Reasons to Wait.* (Teen Choice.)

SIECUS also has reviews of these fear-based, abstinence-only videos:

- *Sex, Lies, & the Truth.* (Focus on the Family)
- *No Second Chance.* (Jeremiah Films.)

A SIECUS Annotated Bibliography of Organizations and Available Materials

Religion can play a significant role in promoting an understanding of sexuality as an affirming expression of equality, mutual respect, caring, and love. Religious groups and spiritual leaders can become more involved in sexuality education and in promoting the sexual health of their constituents, including those who are gay, lesbian, bisexual, young, elderly, ill, or with physical, cognitive, or emotional disabilities.

This bibliography is designed to provide information that they—as well as parents, educators, and the general public—can use to better understand the positive relationship between religion, sexuality, and spirituality.

SIECUS does not sell or distribute any of these publications. They are however, available for use in the Mary S. Calderone Library. For those interested in purchasing any of the following books, each annotation contains contact and price information.

Copies of this bibliography are available for purchase from the SIECUS Publications Department. Costs are: 1-4 copies, \$2.00 each; 5-49 copies, \$1.75 each; 50-100 copies, \$1.50 each; 100 or more copies, \$1.25 each.

SIECUS is located at 130 West 42nd Street, Suite 350, New York, NY 10036-7802; 212/819-9770; FAX: 212/819-9776; E-mail: <SIECUS@siecus.org>; Web site: <<http://www.siecus.org>>.

This bibliography was written and compiled by Amy Levine, Caroline Kelley, and Emily Lamstein of the SIECUS staff.

GENERAL**Buddhism, Sexuality, and Gender**

Jose Ignacio Cabezón

This book explores diverse social questions as they relate to sexual orientation and feminism in the Buddhist world. Four main topics include: history, contemporary culture, Buddhist symbols, and homosexuality. The contributors explore these issues from the start of Buddhism to the present. 1992; \$21.95; 241 pp; ISBN 0-7914-0758-6; State University of New York Press, c/o CUP Services, P.O. Box 6525, Ithaca, NY 14851; Phone: 800/666-2211; FAX: 800/688-2877.

**Carnal Israel:
Reading Sex in Talmudic Culture**

Daniel Boyarin

This book argues that rabbinic Judaism does not allow for a separation of spirit and body and that human sexuality is a marriage of body and soul. The book includes a general index, an index of texts, and a bibliography. 1993; \$40.00; 272 pp; ISBN 0-520-08012-2; The University of California Press/Princeton Press, Fulfillment Services, P.O. Box 7780-4721, Philadelphia, PA 19182-4721; Phone: 800/822-6657; FAX: 800/999-1958.

Christian Perspectives on Sexuality and Gender

Adrian Thatcher and Elizabeth Stuart, Editors

This collection of articles includes works from influential theologians on contemporary issues of sexuality. Chapters include: "Sexuality and Gender," "Sexuality and Spirituality," "Lesbian and Gay Sexuality," "Sexuality and the Body," and "Sexuality and Singleness." 1996; \$34.00; 478 pp; ISBN 0-8028-4228-3; Wm. B. Eerdmans Publishing Co., 255 Jefferson Avenue, S.E., Grand Rapids, MI 49503; Phone: 900/253-7521; FAX: 616/459-6540.

**Heavenly Sex:
Sexuality in the Jewish Tradition**

Dr. Ruth K. Westheimer and Jonathan Mark

This book explores sexuality in the context of Jewish religion and culture. It makes a connection between sexuality and spirituality in the latter books of the Bible. 1995; \$22.95; 195 pp; ISBN 0-8147-9628-5; New York University Press, 70 Washington Square South, New York, NY 10012; Phone: 800/996-6987; FAX: 212/995-3833; Web site: <<http://www.nyu.edu/pages/nyupress/index.html>>.

**The Holy Letter:
A Study in Jewish Sexual Morality**

Seymour J. Cohen

This book looks at the spiritual insights of Jewish thought. It serves as both a guide for the marital relationship as well as a kabbalistic work illustrating God's relationship to people. Chapters include: "The Nature of Intercourse," "The Time of Intercourse," and "The Intention of Union." 1993; \$25.00; 187 pp; ISBN 1-56821-086-8; Jason Aronson Inc., 400 Keystone Industrial Park, Dunmore, PA 18512; Phone: 800/782-0015; FAX: 717/348-9297.

**Politics, Gender, and the Islamic Past:
the Legacy of 'Aisha bint Abi Bakr**

D. A. Spellberg

This study of 'Aisha bint Abi Bakr, the wife of the Prophet Muhammad, examines the validity of patriarchal interpretations of her life developed by medieval male historians.

1994; \$16.50; 243 pp; ISBN 0-231-07999-0; Columbia University Press, 136 South Broadway, Irvington, NY 10533; Phone: 800/944-8648; FAX: 800/944-1844.

A SIECUS Annotated Bibliography of Organizations and Available Materials**Sexuality and Catholicism***Thomas C. Fox*

This volume addresses the theme of sexuality and sin in the Roman Catholic Church. Chapters range from birth control and abortion to feminism and morality. The author considers papal encyclicals and their impact on the church.

1995; \$27.50; 381 pp; ISBN 0-8076-1396-7; *George Braziller, Inc.*, 171 Madison Avenue, Suite 1103, New York, NY 10016; Phone: 212/889-0909; FAX: 212/689-5405.

Sexuality and the Sacred: Sources for Theological Reflection*James B. Nelson and Sandra P. Longfellow*

This book of essays addresses the meanings of human sexuality and explores its relationship with spirituality. Contributing authors include Carter Heyward, Lisa Sowle Cahill, L. William Countryman, Margaret Farley, and Audre Lorde.

1994; \$25.00; 406 pp; ISBN 0-664-25529-9; *Westminster John Knox Press, A Division of Presbyterian Publishing Corporation*, 100 Witherspoon Street, Louisville KY 40202-1396; Phone: 800/227-2872; FAX: 800/541-5113.

The Sexuality of Jesus*William E. Phipps*

This book analyzes Western interpretations of Jesus' life and teachings and suggests that Jesus promoted positive attitudes toward women, sexuality, and marriage. It also considers Jesus's life in terms of its relevance to current attitudes toward and discussions about the subjects of sexuality and gender.

1996; \$16.95; 250 pp; ISBN 0-8298-1144-3; *The Pilgrim Press*, 700 Prospect Avenue East, Cleveland, OH 44115-1100; Phone: 800/537-3394; FAX: 216/736-3717; Web site: <<http://www.pilgrimpress.com>>.

Wrestling with Angels: What Genesis Teaches Us About Our Spiritual Identity, Sexuality, and Personal Relationships*Naomi H. Rosenblatt and Joshua Horwitz*

A retelling of the ancient stories of Genesis, this book presents the Bible as a collection of lessons relevant to modern generations and discusses such issues as spiritual identity, human responsibility, gender roles, sexuality, and family.

1995; \$12.95; 195 pp; ISBN 0-385-31333-0; *Delta Trade Paperbacks, A Division of Bantam Doubleday Dell, Distribution Services*, 2451 South Wolf Road, Des Plaines, IL 60018; 800/323-9872; FAX: 847/768-7095.

ETHICS**Arguing About Sex: The Rhetoric Of Christian Sexual Morality***Joseph Monti*

This book analyzes the Christian church's position on sexuality and ethics and builds a comprehensive argument about sexual ethics in late modernity.

1995; \$19.95; 363 pp; ISBN 0-7914-2480-4; *State University of New York Press, c/o CUP Services, P.O. Box 6525, Ithaca, NY 14851*; Phone: 800/666-2211; FAX: 800/688-2877.

Body, Sex, and Pleasure: Reconstructing Christian Sexual Ethics*Christine E. Gudorf*

Drawing on Christian theology, the social sciences, scripture, and natural law, this book proposes a reevaluation of traditional Christian sexual ethics. It focuses on such issues as sexual roles, procreationism, spirituality, and body image.

1994; \$15.95; 276 pp; ISBN 0-8298-1062-5; *The Pilgrim Press*, 700 Prospect Avenue East, Cleveland, OH 44115-1100; Phone: 800/537-3394; FAX: 216/736-3717; Web site: <<http://www.pilgrimpress.com>>.

Body Theology*James B. Nelson*

This book emphasizes the importance of the body and sexuality to the human relationship with God. It focuses on sexual theology, men's issues, and biomedical ethics. 1992; \$15.00; 216 pp; ISBN 0-664-25379-2; *Westminster John Knox Press, A Division of Presbyterian Publishing Corporation*, 100 Witherspoon Street, Louisville KY 40202-1396; Phone: 800/227-2872; FAX: 800/541-5113.

Erotic Justice: A Liberating Ethic of Sexuality*Marvin M. Ellison*

Arguing for social justice, this book explores love as a metaphor for justice. The author, in the process, calls for a merger of erotic desire and the search for social justice. 1996; \$17.00; 142 pp; ISBN 0-664-25646-5; *Westminster John Knox Press, A Division of Presbyterian Publishing Corporation*, 100 Witherspoon Street, Louisville KY 40202-1396; Phone: 800/227-2872; FAX: 800/541-5113.

Finding Your Way: A Book About Sexual Ethics*Susan Neiburg Terkel*

Intended for adolescents, this book explains the importance of making educated decisions about sexual behavior, and of appreciating others' sexual standards.

1993; \$22.70; 159 pp; ISBN 0-531-11234-9; *Franklin Watts, A Division of Grolier Publishing, Sherman Turnpike, Danbury, CT 06813*; Phone: 800/621-1115; FAX: 800/374-4329; Web site: <<http://www.grolier.com>>.

Living in Sin: A Bishop Rethinks Human Sexuality*John Shelby Spong*

Raising questions about the traditional tenets of the church regarding sexuality, this book calls for inclusive teachings and encourages healthy, nonexploitative relationships.

A SIECUS Annotated Bibliography of Organizations and Available Materials

Issues include divorce, celibacy, homosexuality, and feminism.
1988; \$13.00; 256 pp; ISBN 0-06-067507-1;
HarperSanFrancisco, A Division of HarperCollins Publishers, P.O. Box 588, Scranton, PA 18512; Phone: 800/331-3761; FAX: 800/822-4090; Web site:<<http://www.harpercollins.com>>.

**Love Does No Harm:
Sexual Ethics for the Rest of Us***Marie M. Fortune*

With a foreword by former Surgeon General M. Jocelyn Elders, this book looks at ethical sexual decision-making for people of all ages.
1995; \$16.95; 155 pp; ISBN 0-8264-0820-6;
Continuum c/o Publisher Resources Inc., 1224 Heil Quaker Boulevard, P.O. Box 7017, La Vergne, TN 37086; Phone: 800/937-5557; FAX: 800/774-6733; Web site:<<http://www.continuum-books.com>>.

Sex in the Parish*Karen Lebacqz and Ronald G. Barton*

This book explores the sexual dynamics between pastor and parishioner. Topics include the pastoral role in the church; women in ministry; gay, lesbian, and bisexual pastors; and appropriate limits between pastor and parishioner.

1991; \$20.00; 279 pp; ISBN 0-664-25087-4;
Westminster John Knox Press, A Division of Presbyterian Publishing Corporation, 100 Witherspoon Street, Louisville KY 40202-1396; Phone: 800/227-2872; FAX: 800/541-5113.

**Sexual Morality
in the World's Religions***Geoffrey Parrinder*

This book explores sexual morality within the historical and contemporary framework of today's world religions. Chapters include: "Sacred Sex In India," "Buddhist Renunciation," "Chinese Yin and Yang," "Traditional Africa," "Islamic Customs," "Hebrew Affirmations," "Christian Diversity."

1996; \$14.95; 276 pp; ISBN 1-85168-108-6;
Penguin USA, 120 Woodbine Street, Bergenfield,

NJ 07621; Phone: 800/253-6476; FAX: 800/227-9604; Web site: <<http://www.penguin.com>>.

**Survivor Prayers:
Talking With God About
Childhood Sexual Abuse***Catherine J. Foote*

Written for survivors of sexual abuse, this book provides an opportunity to explore their relationship with God. The author offers prayers and meditations as an invitation to heal.

1994; \$9.00; 93 pp; ISBN 0-664-25435-7;
Westminster John Knox Press, A Division of Presbyterian Publishing Corporation, 100 Witherspoon Street, Louisville KY 40202-1396; Phone: 800/227-2872; FAX: 800/541-5113.

PARENTS**Before They Ask: Talking About
Sex from a Christian Perspective***Don and Rhoda Preston**Illustrated by Dennis Jones*

This book encourages parents to build the self-esteem as well as the communication and decision-making skills of children. In addition, it discusses children's sexuality and provides sample questions and answers about sexuality issues and contemporary issues in today's society.

1989; \$3.50; 112 pp; United Methodist Publishing House/Cokesbury, 201 Eighth Avenue South, P.O. Box 801, Nashville, TN 37202-0801; Phone: 800/672-1789; FAX: 800/445-8189.

**Sex Is Not a Four-Letter Word!
Talking Sex With Your Children
Made Easier***Patricia Martens Miller*

This book encourages Christian parents to develop honest, open communication with their children about sexuality and morality. Chapters include: "Are You Comfortable With Your Own Sexuality," "Self-Esteem: The Essential Ingredient,"

"Loving Your Gay or Lesbian Child," and "The Reality of Sexual Abuse"
1994; \$14.95; 206pp; ISBN 0-8245-1437-8;
The Crossroad Publishing Company, 370 Lexington Avenue, 26th Floor, New York, NY 10017; Phone: 800/395-0690; FAX: 800/395-2860.

**Talking With Your Child
About...AIDS***Barbara J. Prince*

This pamphlet offers guidance to Christian parents talking to their child about HIV/AIDS. It provides definitions of HIV/AIDS, guidelines for age-appropriate information, and faith messages to accompany information.

1993; \$2.25; 24 pp; ISBN 0-8298-0865-5;
United Church Press, 700 Prospect Avenue East, Cleveland, OH 44115-1100; Phone: 800/537-3394; FAX: 216/736-3717; Web site: <<http://www.pilgrimpress.com>>.

**Talking With Your Child
About...Sexuality***R. Kenneth Ostermiller*

This pamphlet offers guidance to parents when talking to their children about sexuality. It is aimed at parents with children under the age of 12.

1990; \$2.25; 32 pp; ISBN 0-8298-0863-9;
United Church Press, 700 Prospect Avenue East, Cleveland, OH 44115-1100; Phone: 800/537-3394; FAX: 216/736-3717; Web site: <<http://www.pilgrimpress.com>>.

YOUTH**Drugs, Sex, and Integrity:
What Does Judaism Say?**

*Daniel F. Polish, Daniel B. Syme,
and Bernard M. Zlotowitz
Illustrated by Jose Diaz*

This book is an illustrated guide to Jewish law and values. It offers Biblical or Talmudic responses to sexuality, drugs, and alcohol and includes historical and modern perspectives.

A SIECUS Annotated Bibliography of Organizations and Available Materials

1991; \$10.00; 68 pp; ISBN 0-8074-0459-4; UAHC Press, 838 Fifth Avenue, New York, NY 10021; Phone: 212/249-0100; FAX: 212/650-4119; E-mail: <press@uahc.org>.

Love in Your Life: A Jewish View of Teenage Sexuality

Roland B. Gittelsohn

This book provides examples from rabbinic literature, social scientific surveys, and first-hand experiences of young Jewish adults on love, premarital sexual relations, birth control, HIV/AIDS, abortion, homosexuality, and spiritual aspects of sexuality. 1991; \$9.95; 110 pp; ISBN 0-8074-0460-8; UAHC Press, 838 Fifth Avenue, New York, NY 10021; Phone: 212/249-0100; FAX: 212/650-4119; E-mail: <press@uahc.org>.

SEXUAL ORIENTATION

Biblical Ethics & Homosexuality Listening to Scripture

Robert L. Brawley, Editor

The essays in this volume were written in response to the recommendations of the Presbyterian Church on human sexual behavior. The essays encourage readers to understand the Bible as it relates to contemporary society and to use it to persuade others to appreciate diverse perspectives. 1996; \$17.00; 162 pp; ISBN 0-664-25638-4; Westminster John Knox Press, A Division of Presbyterian Publishing Corporation, 100 Witherspoon Street, Louisville KY 40202-1396; Phone: 800/227-2872; FAX: 800/541-5113.

Building Bridges: Gay and Lesbian Reality and the Catholic Church

Robert Nugent and Jeannine Gramick

The authors of this book examine the lesbian and gay reality from four perspectives: educational and social concerns; counseling and pastoral issues; religious and clerical life; and evolving theological perspectives. The main theme is the promotion

of respect and dignity for gays and lesbians. 1992; \$9.95; 218 pp; ISBN 0-89622-503-8; Twenty-Third Publications, 185 Willow Street, Mystic, CT 06355; Phone: 800/321-0411; FAX: 800/572-0788; E-mail: <tpubs@aol.com>.

Coming Out As Parents: You and Your Homosexual Child

David K. Switzer

Written for Christian parents of gay, lesbian, or bisexual children, this book will help children understand the struggle their parents' face. Switzer clarifies the meaning of gay, lesbian, and bisexual, and helps these parents understand their feelings and reactions.

1996; \$12.00; 101 pp; ISBN 0-664-25636-8; Westminster John Knox Press, A Division of Presbyterian Publishing Corporation, 100 Witherspoon Street, Louisville KY 40202-1396; Phone: 800/227-2872; FAX: 800/541-5113.

Freedom, Glorious Freedom: The Spiritual Journey to the Fullness of Life For Gays, Lesbians, and Everybody Else

John J. McNeill

This book is devoted to a discussion of achieving spiritual maturity and self-acceptance. Issues include exercising freedom of conscience, coming out, and forming intimate relationships.

1995; \$14.00; 232 pp; ISBN 0-8070-7937-5; Beacon Press, 25 Beacon Street, Boston, MA 02108-2892; Phone: 617/742-2110; FAX: 617/723-3097; Web site: <<http://www.beacon.org>>.

Homosexuality and Christian Community

Choon-Leong Seow, Editor

Written by members of the Princeton Theological Seminary faculty, this book addresses the diverse issues relating to the issue of homosexuality. It is divided into three parts: "What Do the Scriptures Say?"; "How Do the Scriptures Inform Our

Theological Reflection?"; and "How Do We Live Faithfully?"

1996; \$15.00; 159 pp; ISBN 0-664-25664-3; Westminster John Knox Press, A Division of Presbyterian Publishing Corporation, 100 Witherspoon Street, Louisville KY 40202-1396; Phone: 800/227-2872; FAX: 800/541-5113.

CURRICULA FOR RELIGIOUS SETTINGS

About Sexual Abuse: a Program For Teens And Young Adults

Fred and Betty Ward

This program is designed to help individuals become aware of sexual abuse, to develop an understanding of abusive behaviors, and to explore individual attitudes and feelings about such abuse.

1990; \$5.00; 85 pp; ISBN 1-55896-175-5; Unitarian Universalist Association, UUA Bookstore, 25 Beacon Street, Boston, MA 02108; Phone: 800/215-9076; FAX: 617/367-3237; E-mail: <bookstore@uua.org>; Web site: <www.uua.org>.

Affirming Persons— Saving Lives: AIDS Awareness and Prevention Education

Cynthia A. Bouman and Rev. Bill Johnson, Ed.D.

This curriculum integrates Christian values, Bible study, theological reflection and prayer, into a comprehensive HIV-prevention program. It includes eight learning series, one each for these age groups: Preschool/Kindergarten, Grades 1-2, Grades 3-4, Grades 5-6, Youth, Adults, Parents, and Intergenerational. Also included are a teacher's booklet, handouts, teacher's support resources, and two videos.

1993, \$130.00 UCC churches, agencies, institutions or organizations, \$175.00 other churches and organizations, \$195.00 individuals; UCBHM/AIDS Ministry Program, 700 Prospect Avenue, Cleveland, OH 44115-1100; Phone: 800/537-3394; FAX: 216/736-3713.

A SIECUS Annotated Bibliography of Organizations and Available Materials

Beyond Pink and Blue: Exploring Our Stereotypes of Sexuality and Gender A Program for Ages 13 to 15

Tracey Robinson-Harris and
Ritch C. Savin-Williams

This curriculum is designed to increase adolescents' awareness of their attitudes, behaviors, emotional reactions, and understanding of gender identity, gender roles, and sexual orientation. Sessions include: "Religious Myths and Media" and "Society's Treatment of Lesbians, Gay Men, and Bisexuals." 1994; \$20.00; 76 pp; ISBN 1-55896-322-7; Unitarian Universalist Association, UUA Bookstore, 25 Beacon Street, Boston, MA 02108; Phone: 800/215-9076; FAX: 617/367-3237; E-mail: <bookstore@uua.org>; Web site: <www.uua.org>.

Bridging the Gap Between Youth and Community Services: A Life Skills Education Program

The Salvation Army

This program covers three major aspects of adolescent experience in preparation for adulthood. It discusses self-respect as well as physical and emotional development (including sexuality). 1996, \$20.00; The Salvation Army, Social Services Department, 440 West Nyack Road, West Nyack, NY 10994-1739; Phone: 914/620-7383; FAX: 914/620-7759.

Creating Compassion: Activities for Understanding HIV/AIDS

Phyllis Vos Wezeman

This program explores HIV/AIDS and compassion in the "World," "Nation," "State," "Community," "Neighborhood," "School," "Congregation," "Family," and "Self." The curricula utilize diverse art forms, including dance, photography, and music. 1994; \$15.95; 167 pp; ISBN 0-8298-0996-1; United Church Press, 700 Prospect Avenue

East, Cleveland, OH 44115-1100; Phone: 800/537-3394; FAX: 216/736-3717; Web site: <<http://www.pilgrimpress.com>>.

Created by God: About Human Sexuality for Older Girls and Boys

Doris Brown Glass with James H. Ritchie, Jr.
Illustrated by Doug Jones
and Tom Armstrong

This program addresses questions that older elementary school children have about their physical development and their growing awareness of sexuality.

1989; Leader's Guide \$4.50; 81 pp; Student Book \$3.25; 112 pp; United Methodist Publishing House/Cokesbury, 201 Eighth Avenue South, P.O. Box 801, Nashville, TN 37202-0801; Phone: 800/672-1789; FAX: 800/445-8189.

Family Sexuality Education: A Course for Parents

Joe H. Leonard

Recommended by the American Baptist Churches, this program is for parents with children between the ages of three and 12. It consists of five units: "Exploring and Understanding Our Own Sexuality," "Sexuality through Childhood," "Sexuality in the Home," "Values," and "Communication Skills."

1995; \$15.00; 101 pp; Judson Publishing, P.O. Box 851, Valley Forge, PA 19482-0851; Phone: 800/458-3766; FAX: 610/768-2107; Web site: <<http://www.judsonpress.com>>.

KULANU (All of Us): A Program for Congregations Implementing Gay and Lesbian Inclusion

For Union of American Hebrew Congregations

This manual offers practical suggestions in the areas of synagogue programming, curriculum content, and Jewish source material in the hopes of encouraging gay and lesbian inclusion in the Jewish commu-

nity. Chapters include: "History and Texts," "Steps to Inclusion," "Leadership Training and Education," and "(Re)Defining Family and Temple Membership."

1996; \$12.00; 147 pp; ISBN 0-8074-0612-0; UAHC Press, 838 Fifth Avenue, New York, NY 10021; 212/249-0100; FAX: 212/650-4119; E-mail: <press@uahc.org>.

Preventing Child Sexual Abuse Ages 5-8 and Ages 9-12

Kathryn Goering Reid

These two curricula are intended to provide information about sexual abuse and its prevention within the context of a religious education program. Organized into 10 sessions, the topics include: "God Wants Me to Be Safe," "Good Touch/Bad Touch/Confusing Touch," and "No More Secrets." Each lesson includes objectives, theological and biblical concepts, and teacher preparation. The curricula also include resource lists.

1994; \$11.95; 120 pp; ISBN 0-8298-1016-1; United Church Press, 700 Prospect Avenue East, Cleveland, OH 44115-1100; Phone: 800/537-3394; FAX: 216/736-3717; Web site: <<http://www.pilgrimpress.com>>.

ORGANIZATIONS/WEB SITES

AIDS National Interfaith Network

This site links people of faith, mobilizes religious leadership, promotes quality pastoral care, and fosters compassionate, services to people with or affected by AIDS. 1400 I Street, Suite 1220

Washington, DC 20005
Phone: 202/842-0010 FAX: 202/842-3323
E-mail: <anin@charitiesusa.com>
Web site: <<http://www.thebody.com>>

Catholics for a Free Choice

This social justice organization shapes and advances sexual and reproductive ethics based on justice, a commitment to women's well-being, and respect for the moral capacity of women and men to make sound decisions about their lives.

RELIGION, SPIRITUALITY, AND SEXUALITY

A SIECUS Annotated Bibliography of Organizations and Available Materials

1436 U Street, N.W., Suite 301
Washington, DC 20009-3397
Phone: 202/986-6093 FAX: 202/332-7995
E-mail: <cffc@igc.apc.org>
Web site: <<http://www.igc.org/catholicvote>>

Center for the Prevention of Sexual and Domestic Violence

This interreligious ministry addresses issues of sexual and domestic violence and serves as a bridge between religious and secular communities.

936 N. 34th Street, Suite 200
Seattle, WA 98103
Phone: 206/634-1903 FAX: 206/634-0115
E-mail: <cpsdv@cpsdv.seanet.com>
Web site: <<http://www.cpsdv.org>>

Center for Sexuality and Religion

This organization provides a forum for international and intercultural dialogue to help health care professionals understand the significance of religious beliefs and practices on sexual health, to foster the competence and integrity of religious leaders in matters of sexuality, to advance religious practices that are sexually positive, and to promote sexual health and justice.

P.O. Box 945
South Orange, NJ 07079-0945
Phone: 612/625-1500 or 201/763-0952

Common Ground Network for Life and Choice

This project helps people on opposite sides of the abortion issue understand and talk with each other.

Search for Common Ground
1601 Connecticut Ave., N.W.
Washington, DC 20009
Phone: 202/265-4300 FAX: 202/232-6718
E-mail: <cgnetwork@igc.apc.org>
Web site: <<http://www.searchforcommon-ground.org>>

Dignity/USA

This national organization of gay, lesbian, bisexual, and transgendered Catholics, their families and friends, works to promote

spiritual development, social reform, and feminist issues.

1500 Massachusetts Avenue, N.W., Suite 11
Washington, DC 20005
Phone: 800/877-8797 FAX: 202/429-9808
E-mail: <dignity@aol.com>
Web site: <<http://www.liscom.com/dignity/default.html>>

Interfaith Sexual Trauma Institute

This institute promotes the prevention of sexual abuse, exploitation, and harassment through research, education, and publications.

Reverend Roman Paur, OSB
St. John's Abbey and University
Collegeville, MN 56321
Phone: 320/363-3931 FAX: 320/363-2115
E-mail: <isti@csbsju.edu>
Web site: <<http://www.csbsju.edu/isti/index.html>>

Interfaith Working Group

This group's mission is to inform the public of the diversity of religious opinion on social issues by providing a forum for religious organizations, congregations, and clergy that support gay rights, reproductive freedom, and the separation of church and state.

P.O. Box 11706
Philadelphia, PA 19101
Phone: 215/235-3050
E-mail: <iwg@libertynet.org>
Web site: <<http://www.libertynet.org/~iwg/iwg.html>>

The National Committee for Public Education & Religious Liberty (PEARL)

This group advocates for the separation of church and state in public schools. It fights to keep sexuality education programs free from religious control and censorship.

165 East 56th Street
New York, NY 10022
Phone: 212/750-6461 FAX: 212/319-0975

Parkridge Center, Project on Religion, Sexuality, and Public Policy

This project is designed to help governmental and nongovernmental decision-makers understand issues related to sexuality and

policy and to work with religious leaders and communities.

211 E. Ontario Street, Suite 800
Chicago, IL 60611
Phone: 312/266-2222 FAX: 312/266-6086

Religious Coalition for Reproductive Choice

This coalition is designed to ensure that every woman is free to make decisions about having children according to her conscience and religious beliefs.

1025 Vermont Avenue N.W., Suite 1130
Washington, DC 20005
Phone: 202/628-7700 FAX: 202/628-7716
E-mail: <info@rcrc.org>
Web site: <<http://www.rcrc.org>>

Religious Consultation on Population, Reproductive Health and Ethics

This international, multifaith organization of scholars addresses issues of population, consumption, ecology, and reproductive health.

2717 E. Hampshire Avenue
Milwaukee, WI 53211
Phone: 414/962-3166 FAX: 414/962-9248
E-mail: <consultation@igc.apc.org>
Web site: <<http://www.igc.apc.org/consultation/>>

Women's Alliance for Theology, Ethics and Ritual (WATER)

This feminist educational center responds to the need for theological, ethical, and liturgical development for and by women.

8035 13th Street
Silver Spring, MD 20910
Phone: 301/589-2509 FAX: 301/589-3150
E-mail: <mary.hunt@hers.com>
Web site: <<http://www.hers.com/water>>

Working Group Family Ministries and Human Sexuality

This group raises consciousness in churches and society on sexuality issues.

National Council of Churches
475 Riverside Drive, Room 848
New York, NY 10115-0050
Phone: 212/870-2673 FAX: 212/870-2030