

The Politics of Abstinence Education: From Reagan's Title XX to Welfare Reform's Title V

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Abstract

Title V abstinence education has created intense controversy. The far right sees Title V as a program whose time has come. Many health officials and sexuality educators see the program as a boon-doggle for the far right which may do more harm than good. Health educators need to know the background of this program to better understand the current situation. We provide this background, an overview of Title V activities and suggestions for action.

Introduction

For years controversy has raged over sex education in the public schools. Now the controversy is over abstinence education. It's not just abstinence education - but the right kind of abstinence education. As part of the federal welfare reform legislation, the federal government is block granting \$50 million/year to states for the promotion of abstinence only education. Since the money has a 3/4 matching requirement (for every four dollars in federal funding a state must show a three dollar match) this means that over the five year period \$587 million will be going to states to fund abstinence only education (Block Grant, 1997). All 50 states submitted proposals and received funding for abstinence education programming (States, 1997).

The far right would have you believe that this is legislation whose time has come. It is time we changed from a federal policy of providing hundreds of millions of dollars in condom education programs, which don't work, to a new abstinence education approach which, of course, does work (Dobson, 1998). More liberal groups and many public health officials and sexuality educators characterize the new abstinence program as simply a boon-doggle for the far right; one that is, at best, ineffective, and which may do more harm than good (People, 1997). In some states the fight over abstinence education has indeed been a fight.

How did this situation come about? What kind of programs are being implemented? What can you do to ensure that programs that are funded in your state are positive programs that truly benefit young people, or at the very least are medically accurate programs that do not impose a narrow religious agenda on public school children? The answers to these questions are the substance of this article.

Federal Involvement in Abstinence Education - Title XX

The abstinence education program that is a part of the welfare reform legislation is not the federal government's only one of its kind. In 1981 the Adolescent Family Life Act was signed into law. Popularly known as "The Chastity Act" the Title XX - Adolescent Family Life Demonstration Projects, established within the Office of Adolescent Pregnancy Programs, was the response of a conservative administration to problems associated with adolescent sexuality. A major purpose of this title is "to find effective means, within the context of the family, of reaching adolescents before they become sexually active in order to maximize the guidance and support available to adolescents from parents and other family members and to promote self discipline and other prudent approaches to the problem of adolescent sexual relations, including adolescent pregnancy (Title XX, 1981)."

The legislation authorized the funding of demonstration grants. These funded demonstration projects are to "use such methods as will strengthen the capacity of families to deal with the sexual behavior, pregnancy or parenthood of adolescents and to make use of support systems such as other family members, friends, religious and charitable organizations and voluntary associations," and are required to describe how they will involve such individuals and groups. Counseling and educational services may be funded, but the Act imposes limitations on the use of grant funds for family planning services and forbids grants to projects or programs that advocate, promote or encourage abortion (Title XX, 1981).

The Kendrick Lawsuit

A lawsuit (Kendrick v Heckler) filed by a group of federal taxpayers, members of the clergy and a religious organization, who were represented by the

American Civil Liberties Union, initially sought to have Title XX declared unconstitutional on its face. The concern was that the legislation violated the establishment of religion clause. Secondly the lawsuit sought to have the legislation declared unconstitutional because of the manner in which it was applied, alleging that many Title XX projects were conducted by religious organizations that presented information that was medically inaccurate and promoted their particular religious beliefs. Thus, it was alleged that as applied, the Act had the effect of advancing religion and leading to entanglement of church and state (Kendrick, 1988).

The Federal District Court of Washington, D. C. held that the Adolescent Family Life Act, although having a valid secular purpose, was unconstitutional on its face because it had the direct and immediate effect of advancing religion, insofar as religious organizations were involved in carrying out the programs and purposes of the Act. It was also found unconstitutional as applied, because funds had been provided to “pervasively sectarian” institutions with the effect of directly advancing religion and leading to entanglement of church and state (Bowen, 1990).

On appeal to the United States Supreme Court the Adolescent Family Life Act was “held not facially violative of First Amendment's establishment of religion clause....” but the issue of whether the Act was unconstitutional as applied was remanded to the District Court for further consideration. The Supreme Court acknowledged that there was evidence of specific incidents of impermissible behavior by grantees. However, the District Court had not indicated which grantees it viewed as “pervasively sectarian”, why these organizations warranted such a classification, nor did it design an appropriate remedy for the wrongful approval of grants (Bowen, 1990).

In January, 1993 the Plaintiffs and the government reached an out-of-court settlement. Under the terms of the settlement the Office of Adolescent Pregnancy Programs (OAPP) established a stringent review process for educational materials proposed for use in Title XX programs. Materials must be medically accurate, neutral on religion, and cannot encourage or discourage abortion. Materials that do not pass this review, must be revised to meet OAPP standards or they cannot be used in Title XX projects (Kendrick, 1993). The settlement expired in January, 1998, but OAPP has indicated its commitment to

continue the review process (Sheeran, 1998). The review process means that while the programs funded by OAPP continue to be relatively conservative, the information presented is based on fact, not ideology.

Welfare Reform Abstinence Education - Title V

This settlement also meant that many of the previous OAPP grantees could no longer qualify for Title XX funding, unless they made substantial revisions in their educational materials. Rather than revise materials, they persuaded conservative law makers to include a provision for abstinence education in the welfare reform legislation. Unlike the original Title XX legislation however, Title V included a specific “abstinence until marriage only” standard. In fact, the legislation defines abstinence education as 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 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 (Block Grant, 1997).

In addition to applying the A-H definition to welfare reform abstinence education programs, Congress also made the definition applicable to programs funded by OAPP. Beginning in 1997, any new projects funded by OAPP must also meet the A-H abstinence definition. Thus, OAPP has incorporated a review for the A-H definition into their existing review

process.

The term “sexual activity” in the A-H definition can be viewed as a broad, somewhat imprecise term. The four evaluation outcome measures established by the Bureau of Maternal and Child Health (MCH), the federal agency charged with implementing this legislation, however, seem to focus the term primarily on the behavior of sexual intercourse (out-of-wedlock pregnancies, out-of wedlock births, percent of adolescents participating in sexual intercourse, and sexually transmitted disease)(Block Grant, 1998). MCH has also indicated to states that equal emphasis need not be placed on all aspects of the definition, but a project must not be inconsistent with any aspect of the abstinence education definition (Block Grant, 1998). The application used by states to apply for funds from MCH does not address the question of medical accuracy, but officials from MCH have indicated that they want projects funded by states to use educational materials that are medically accurate (Lawler, 1998). Finally, MCH has issued an advisory to states which mentions the lawsuit brought against OAPP and includes materials which OAPP distributes to grantees (Abstinence Advisory, 1997). This material provides guidance to grantees relative to maintaining neutrality on religion and abortion (Guidance to AFL, 1993).

The guidance provided by MCH to states and the Congressional requirement that OAPP projects meet the A-H definition mean that the criteria that OAPP now uses for approving materials for use in their projects are the same criteria that states should be using in approving materials for use in their projects. OAPP already has a stringent review process in place. Thus, while OAPP only has jurisdiction and authority over projects which they fund, it seems that it would only make good sense for states to at least check with OAPP to see what they have approved.

Such action is opposed by the far right (Brandt, 1997, 1998). After all, they want to make sure that only true “abstinence until marriage only” programs are funded. These are the programs that are promoted by groups and organizations that have historically promoted “abstinence until marriage only” materials. These materials are also, in a number of instances, those that were once approved for use in Title XX projects, but because of medical inaccuracies and/or information which promotes religion/discourage abortion, can not pass the current review process.

Groups that have abstinence education materials which meet all the requirements of the legislation (and pass OAPP review) but which do not espouse the right ideological perspective, are naturally the wrong kind of programs.

Groups like the National Coalition for Abstinence Education (NCAE), which operates under the conservative religious group Focus on the Family, are concerned that states are not implementing Title V in the manner they think that it should be done and are attempting to intimidate states and the Bureau of Maternal and Child Health, through public state “report cards” and pressure from certain conservative members of Congress (NCAE, 1998). If your state has received an “F” from NCAE, then, within the limits of the legislation, they must be doing something right. If your state has received an “A” then you should certainly be concerned.

Examples of Activities Conducted By States Under Title V

Initially, all 50 states participated in the Title V abstinence education program. Apparently two (California and New Hampshire) have changed their mind and may be giving the money back (Return, 1998). States are using a number of different approaches. Some states (as Wyoming-which received a grade of F from NCAE) are using media campaigns to encourage young people to postpone sexual involvement. Others (like New Mexico - grade of D) are funding community groups which typically implement school based programming or community after school programs. Some states (as Kentucky - grade of F) are conducting the program totally through the state health department, as they might any other health related federal block grant. In other states (Arkansas, Alabama and Louisiana - all of which received A's) the governor has appointed lay committees consisting of individuals and representatives of groups “who have historically been advocates of abstinence (until marriage) programs.” Oregon (grade of F) is placing all their funds into STARS, which is the implementation of the curriculum Postponing Sexual Involvement. Washington (grade of F) is conducting a media campaign as well as funding community programs and conducting training conferences. Idaho (grade of D) is conducting community coalitions.

The Arkansas Story

We also wanted to share with you Arkansas' Title V story. We are from the University of Arkansas and one of us is a co-author of abstinence education materials. Without trying to sound like a commercial for these products, you should know that the sexuality/abstinence education project from which these materials originated is a five time winner of the US. Dept. of Health & Human Services Award for Outstanding Work in Community Health Promotion. Presentations about the project/curricula have been made at the national conventions of a number of professional organizations (including the Society for the Scientific Study of Sexuality and the American Medical Association's National Congress on Adolescent Health. The materials are featured in the American College of Obstetricians and Gynecologist's recent publication *Pregnancy Prevention Strategies* (1997). Research articles, indicating positive benefits of the curriculum on student outcomes have been published in national professional journals. Of the four curricula that have been produced, three have been approved by OAPP for use in their projects. Remember, OAPP uses the same criteria in approving materials for use in their projects, as states are to use in approving materials for their Title V projects.

In some states (including Arkansas) lay committees have been appointed to review curriculum materials and review proposals submitted by community groups. They have been given the power by their state's governor to decide what materials are used and who receives funding. In Arkansas, Governor Huckabee, who only a few years ago was a full time Baptist preacher, appointed the most conservative committee possible. In addition to conservative legislators - John Brown and Randy Bryant - several committee members are affiliated with national conservative groups such as Eagle Forum and Focus on the Family. This tends to "stack the deck" against materials and organizations that are well-known and respected in public health or sexuality education and in favor of materials and approaches that are negative, judgmental, medically inaccurate and ineffective.

For example, State Representative, Randy Bryant chaired the abstinence committee's subcommittee on grants and curricula review. Representative Bryant told one of us (Young) that he was one of two people reviewing curricula for medical accuracy. He also said

that he had "never seen anything good come out of a university," and argued that statements such as, "you can tell whether a person is a homosexual by looking at them" and "frequent masturbation causes severe emotional harm," were medically accurate. Thus, we had reason to believe that he might be biased against materials and proposals from the University, and that he might not be qualified to review materials for medical accuracy (or anything else).

As we suspected that they might, the Governor's abstinence committee found that these curriculum materials did not meet the A-H abstinence definition. A letter from the health department chief of staff included examples, but "not an exhaustive list", of apparent violations of the definition and an invitation to make revisions and resubmit (Frazier, 1998). One example of a violation was the sentence "however, most people, at some point in their life, enter a relationship that involves sexual intercourse." There was no explanation of why this sentence was considered a violation, or how it should be revised. The sentence immediately before the "violation" emphasized the abstinence was the best choice for young people. The sentence immediately following the violation indicated that the safest choice for those people who did have sex, was to do so only in the context of a non-infected, mutually monogamous marriage relationship (Core-Gebhart, Hart, and Young, 1997).

Communications with the chief of staff indicated that our materials met the A-H criteria and should be approved without revision. We were, however, willing to consider revisions, if the committee would provide us a complete list of "violations" tell us why they thought they were violations and indicate what they wanted us to do about them. The state plan indicates that grant applicants and grantees will be provided assistance in modifying their materials, so we were not asking for a special favor. The chief of staff indicated that she would get this information for us and hoped that our revisions would be done in time to be used in projects which were set to be funded before the end of February. We are still waiting.

Without going into all the details here, we believe, and have let the Governor know, that there is clear evidence that his Committee has committed gross irregularities in carrying out their appointed tasks. There is evidence to indicate that the Committee has committed flagrant Freedom of Information violations

in order to hide the activities of the Committee from public view and scrutiny. It also appears that the Committee has ignored the standard rules governing the work of committees of this type. In addition, it appears that in reviewing grant applications, the Committee has violated its own rules, contained in the state plan for abstinence education and the state request for proposals. The Committee has also disallowed the use of materials which have been approved by OAPP. This is in spite of the fact that these materials are among only a very small number of curricula in the country that actually do meet the A-H definition and other federal guidelines.

We met with the Committee in February to discuss our concerns. Some of these concerns, including those related to the biases and qualifications of Representative Bryant had been voiced in a letter to state legislators that had been distributed that morning. As to the meeting with the Committee, we have never been treated as poorly as we were by these Committee members. We (and especially Young) were subjected to a prolonged scathing verbal attack from several members of the Committee at once. The Committee members' manners improved slightly when a reporter walked in the room, but the questioning was still very "intense." Then Representative Bryant interrupted. He had come into the meeting late, someone had given him a copy of the letter to legislators. He took his seat directly across the table from us. He read the letter and blew his stack, yelling at Young, with a reporter - tape recorder going - in the room "I'll tell you what, I'm about ready to come over there and knock the crap out of you." We made front page the next day, and have since been in the papers on a number of other occasions. In addition, we have testified before a legislative oversight committee concerning Title V activities in the state and have been able to make many people aware of some of the problems. Keep in mind, this is not an issue of whether a particular curriculum is approved or not. It is an issue of a small group of people using public money to impose a right wing political and moral agenda on public school children. These materials clearly meet the legislative requirements, but not the Committee's ideological requirements.

A Call For Action

We continue to be active in Title V activities both in Arkansas and on a national basis and believe that this is an issue for all of those interested in sexuality

education and/or adolescent health issues to address as well. Title V represents a call for you to take action.

What can you do? You can work within the limits set by the Title V legislation, to be sure that the programs children in your state receive are medically accurate, positive, skills based and have some potential for producing positive benefits. Contact your state abstinence education coordinator and find out how the Title V abstinence education funds are being spent in your state. We have some information on most states, that we will be glad to share with you, but your state people need to hear from you. If your state is awarding grants for educational programming, find out what curricula are being funded. Review these curricula yourself, or obtain reviews from SIECUS or other published sources. Apply for a grant yourself. Lodge complaints regarding medically inaccurate curricula that are ideologically driven. If your state has a review committee, ask to be appointed to the committee. Contact your state affiliate of the ACLU and ask them to get involved.

You may also choose to work to overturn Title V abstinence education legislation. Educate the members of your state's congressional delegation. They should understand the A-H definition, and recognize that even the definition has components that are not medically accurate, as well as other components that are problematic. Help them understand that this definition is really an attempt to impose a narrow set of religious/moral values upon the public school children of our nation. Finally, help legislators understand that one can advocate abstinence as the best choice for young people and still be opposed to Title V.

References

Abstinence Advisory #1 (1997). Maternal and Child Health Bureau, May 12.

Block Grant Application Guidance (1997) for The Abstinence Education Provision of the 1996 Welfare Law, Public Law 104-103, New Section 510 of Title V of the Social Security Act, Maternal and Child Health Bureau, Department of Health and Human Services.

Bowen v Kendrick (1990). U. S. Supreme Court Reports, Lawyer's Edition, GPs. 520-568, October term, 1987, Lawyer's Cooperative Publishing.

Brandt, P. (1997, 1998). Director, National Coalition for Abstinence Education, Personal Communications.

Core-Gebhart, P., Hart, S. and Young, M. Sex Can Wait - a curriculum for middle school classrooms

- OAPP Approved Edition (1997), ETR Associates, Santa Cruz.

Dobson, J. (1998). *The ten most encouraging developments of 1997* (on-line). Available: <http://www.smithville.com/encourage.html>

Frazier, D. (1998). Chief-of Staff, Arkansas Department of Health, Personal Communication.

Guidance to AFL Grantees (1993). Office of Adolescent Pregnancy Programs, U. S. Department of Health and Human Services, Washington, D. C.

Kendrick v Heckler (1983). A complaint for declaratory and injunctive relief, filed in United States District Court for the District of Columbia.

Kendrick v Sullivan (1993). Settlement agreement (civil action 83-3175), filed in United States District Court for the District of Columbia.

Lawler, M. (1998). Office of State and Community Health, Maternal and Child Health Bureau, Personal Communication.

NCAE Title V Report Card (1998). National Coalition for Abstinence Education, Colorado Springs.

People for the American Way (1997). *Teaching Fear: The religious right's campaign against sexuality education* (on-line). Available: <http://www.pfaw.org/abtr/fear.html>

Pregnancy Prevention Strategies (1997). American College of Obstetricians and Gynecologists, Washington, D. C.

Return to sender: Restrictive abstinence-only-until marriage program funds (1998). SIECUS Public Policy Update, May 18.

Sheeran, P. (1998). Acting Director-Office of Adolescent Pregnancy Programs, Personal Communication.

States set to spend millions on abstinence education (1997). Great News for Abstinence Education, Dow Jones News Service via Dow Jones, Lochrie & Associates, Inc., July 23.

Title XX (1981). Adolescent Family Life Act, US. Public Health Service.

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