

# Sex Education



## The Jewish and Social Justice Prospective

## Sex Education in America

### HIGHLIGHTS

- Only **21 states** and the District of Columbia mandate that public schools teach sex education; many states, including several that do not mandate sex education, place requirements on how abstinence and contraception are treated when taught.

- **22 states** require that abstinence be stressed when taught as part of sex education; 12 states require simply that it be covered during instruction.

- Only **15 states** and the District of Columbia require that sex education programs cover contraception; **no state requires that it be stressed.**

- 25 states require that abstinence be stressed when taught as part of STD/HIV education; 12 require that it be covered. Only **17 states** require that STI/HIV programs cover contraception; **no state requires that it be stressed.**

- **35 states** and the District of Columbia allow parents to remove their children from instruction.

## Is the Current Model Effective?

<i>National levels and trends</i>
<ul style="list-style-type: none"><li>• In 2006, 750,000 women younger than 20 became pregnant. The <b>pregnancy rate</b> was 71.5 pregnancies per 1,000 women aged 15–19, and pregnancies occurred among about 7% of women in this age-group.</li></ul>
<ul style="list-style-type: none"><li>• In <b>2005</b>, the U.S. teenage pregnancy rate reached its <b>lowest point in more than 30 years</b> (69.5), <b>down 41% since its peak in 1990</b> (116.9). <b>However</b>, in <b>2006</b>, the rate <b>increased</b> for the first time in more than a decade, rising <b>3%</b>.</li></ul>
<ul style="list-style-type: none"><li>• The pregnancy rate among sexually experienced teenagers (those who had ever had intercourse) was 152.8 pregnancies per 1,000 women aged 15–19, reflecting the fact that the overall teenage pregnancy rate includes a substantial proportion of young people who are not sexually active.</li></ul>
<ul style="list-style-type: none"><li>• The teenage <b>birthrate</b> in 2006 was 41.9 births per 1,000 women. This was 32% lower than the peak rate of 61.8, reached in 1991, but 4% higher than in 2005.</li></ul>
<ul style="list-style-type: none"><li>• The 2006 teenage <b>abortion rate</b> was 19.3 abortions per 1,000 women. This figure was 56% lower than its peak in 1988, but 1% higher than the 2005 rate.</li></ul>
<ul style="list-style-type: none"><li>• From 1986 to 2006, the proportion of teenage pregnancies ending in abortion declined almost one-third, from 46% to 32% of pregnancies among 15–19-year-olds.</li></ul>
<ul style="list-style-type: none"><li>• Youth Under age 25 experience 9 million sexual transmitted infections every year</li></ul>
Conclusion:
From 1990 or 1991 to 2005, the pregnancy rate among teenagers and young women had begun a steady and consistent decline. A decrease in both <b>birth and abortion rates</b> among these women signaled that both <b>intended and unintended pregnancy rates were declining</b> among these age-groups.

# Why Have the Health Indicators Improved, and How Can We Improve Them More?

## Abstinence vs. Contraception

### Abstinence Education

#### **TITLE V, SECTION 510 ABSTINENCE EDUCATION**

The Title V, Section 510 abstinence education program is the foundation for the federal abstinence-only-until-marriage program. Passed as part of welfare reform (P.L. 104-193), this little noticed mandate of \$50 million a year to fund abstinence-only programs requires states to follow a restrictive eight-point definition of abstinence education. This definition (see below) remains at the core of all federal abstinence-only funding streams, including the most controversial Community-Based Abstinence Education (CBAE) programs.

#### **THE FEDERAL DEFINITION OF ABSTINENCE-ONLY EDUCATION**

An eligible abstinence education program is one that:

- 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 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 increase vulnerability to sexual advances; and

**H)** teaches the importance of attaining self-sufficiency before engaging in sexual activity.

## Comprehensive Education

The Responsible Education About Life (REAL) Act (S. 611/H.R.1551) sponsored by Senator Frank Lautenberg (D-NJ) and Representative Barbara Lee (D-CA), would provide federal money to support responsible, comprehensive sex education in schools. This education would include age-appropriate, science-based, and medically accurate information about both abstinence and contraception. **Currently, there are no dedicated federal funds allocated for comprehensive sex education in schools.**

Under the REAL Act, a program of sex education is a program that:

- A)** Is age-appropriate and medically accurate;
- B)** Stresses the value of abstinence while not ignoring young people who have had or are having sex;
- C)** Provides accurate information about the health benefits and side effects of all contraceptives and barrier methods used a) as a means to prevent pregnancy, and b) to reduce the risk of contracting sexually transmitted diseases, including HIV;
- D)** Encourages family communication between parent and child about sexuality;
- E)** Teaches young people the skills to make responsible decisions about sexuality, including how to avoid unwanted verbal, physical, and sexual advances and how to avoid making verbal, physical, and sexual advances that are not wanted by the other party;
- F)** Explores the components of healthy relationships, including the prevention of dating and sexual violence;
- G)** Teaches young people how alcohol and drug use can affect responsible decisionmaking; and
- H)** Does not teach or promote religion.

The following chart shows key ways in which the two types of programs differ.

Comprehensive	Abstinence-Only-Until-Marriage Education
Teaches that sexuality is a natural, normal, healthy part of life.	Teaches that sexual expression outside of marriage will have harmful social, psychological, and physical consequences
Teaches that abstinence from sexual intercourse is the most effective method of preventing unintended pregnancy and sexually transmitted infections, including HIV	Teaches that abstinence from sexual intercourse before marriage is the only acceptable behavior
Provides values-based education and offers students the opportunity to explore and define their individual values as well as the values of their families and communities	Teaches only one set of values as morally correct for all students
Includes a wide variety of sexuality related topics, such as human development, relationships, interpersonal skills, sexual health, and society and culture	Limits topics to abstinence-only-until-marriage and to the negative consequences of pre-marital sexual activity
Includes accurate, factual information on abortion, masturbation, and sexual orientation	Usually omits topics such as abortion, masturbation, and sexual orientation
Provides positive messages about sexuality and sexual expression, including the benefits of abstinence	Often uses fear tactics to promote abstinence and to limit sexual expression
Teaches that proper use of latex condoms, along with water-based lubricants, can greatly reduce, but not eliminate, the risk of unintended pregnancy and of infection with sexually transmitted infections (STIs) including HIV	Discusses condoms only in terms of failure rates; often exaggerates condom failure rates

Teaches that consistent use of modern methods of contraception can greatly reduce a couple's risk for unintended pregnancy	Provides no information on forms of contraception other than failure rates of condoms
Includes accurate medical information about STIs, including HIV; teaches that individuals can avoid STIs	Often includes inaccurate medical information and exaggerated statistics regarding STIs, including HIV; suggests that STIs are an <b>inevitable</b> result of premarital sexual behavior
Teaches that religious values can play an important role in an individual's decisions about sexual expression; offers students the opportunity to explore their own and their family's religious values	Often promotes specific religious values
Teaches that a woman faced with an unintended pregnancy has options: carrying the pregnancy to term and raising the baby, or carrying the pregnancy to term and placing the baby for adoption, or ending the pregnancy with an abortion	Teaches that carrying the pregnancy to term and placing the baby for adoption is the only morally correct option for pregnant teens

## Which Works Better?

“The contraceptive risk index declined 34% overall and 46% among adolescents aged 15 to 17 years. Improvements in contraceptive use included increases in the use of condoms, birth control pills, withdrawal, and multiple methods and a decline in nonuse. The overall pregnancy risk index declined 38%, with 86% of the decline attributable to improved contraceptive use. Among adolescents aged 15 to 17 years, 77% of the decline in pregnancy risk was attributable to improved contraceptive use.”

-Explaining Recent Declines in Adolescent Pregnancy in the United States: The Contribution of Abstinence and Improved Contraceptive Use: John S. Santelli, MD, MPH, Laura Duberstein Lindberg, PhD, Lawrence B. Finer, PhD, and Susheela Singh, PhD

“Abstinence-only programs show little evidence of sustained (long-term)

impact on attitudes and intentions. Worse, they show some negative impacts on youth's willingness to use contraception, including condoms, to prevent negative sexual health outcomes related to sexual intercourse. Importantly, only in one state did any program demonstrate short-term success in delaying the initiation of sex; none of these programs demonstrates evidence of long-term success in delaying sexual initiation among youth exposed to the programs or any evidence of success in reducing other sexual risk-taking behaviors among participants."

- Conclusion of 5 year study across 10 states using abstinence only programming Debra Hauser, MPH

### Leviticus Chapter 18

"You shall not approach a woman in her time of *niddah*, to uncover her nakedness"

### Babylonian Talmud Sanhedrin 74a

R. Johanan said in the name of R. Simeon b. Jehozadak: By a majority vote, it was resolved in the upper chambers of the house of Nithza in Lydda<sup>18</sup> that in every [other] law of the Torah, if a man is commanded: 'Transgress and suffer not death' he may transgress and not suffer death, excepting idolatry, incest, [which includes adultery] and murder.<sup>19</sup>

### יח ויקרא פרק

יטוּאָל אַשֶׁה בְּנִדַּת טְמֵאָתָה לֹא תִקְרַב עֲרוֹתָהּ לְגִלוֹת

### תלמוד בבלי מסכת סנהדרין דף עד

#### עמוד א

אמר רבי יוחנן משום רבי שמעון בן נימנו וגמרו בעלית בית נתזה: יהוצדק כל עבירות שבתורה אם אומרין: בלוד, יעבור ואל יהרג - לאדם עבור ואל תהרג, חוץ מעבודה זרה וגילוי עריות ושפיכות דמים

### Babylonian Talmud Berachot 62a

R. Kahana once went in and hid under Rab's bed. He heard him chatting [with his wife] and joking and doing what he required. He said to him: One would think that Abba's mouth had never sipped the dish before! He said to him: Kahana, are you here? Go out, because it is rude.<sup>1</sup> He replied: It is a matter of Torah, and I require to learn.

### תלמוד בבלי מסכת ברכות דף סב

#### א עמוד

על גנא תותיה פורייה דרב, רב כהנא אמר, שמעיה דשח ושחק ועשה צרכיו דמי פומיה דאבא כדלא שריף: ליה פוק? הכא את, כהנא: אמר לו! תבשילא תורה היא: אמר לו. דלאו ארח ארעא וללמוד אני צריך

### Babylonian Talmud Chagigah 11b

What is the reason, It is a logical conclusion: when two sit before their master, one engages in discussion with his master and

### תלמוד בבלי מסכת חגיגה דף יא

#### ב עמוד

בי תרי כי יתבי: סברא הוא - מאי טעמא, חד שקיל וטרי בהדי רביה, קמי רבייהו

the other inclines his ear to the instruction; but three, one engages in discussion with his master and the other two engage in discussion with one another and do not know what their master is saying, and may come to permit that which is prohibited in the matter of the forbidden relations.

חד, תלתא. ואידך מצלי אודניה לגמרא שקלו - והנך תרי, שקיל וטרי בהדי רביה ולא ידעי מאי קאמר, וטרו בהדי הדדי ואתו למישרי איסורא בעריות, רבייהו

"Proponents of abstinence-only policies argue that providing information about contraception or providing condoms to adolescents sends a mixed message to youth and may promote sexual activity." However, "expert panels that have studied this issue, have concluded that comprehensive sex and HIV/AIDS education programs and condom availability programs can be effective in reducing high-risk sexual behaviors among adolescents. In addition, these reviews and expert panels conclude that school-based sex education and condom availability programs do not increase sexual activity among adolescents."

*The Institute of Medicine, October 2000*

A new curriculum, currently being piloted in grades four through seven in two New York area schools by Tzelem, a division of Yeshiva University's Center for the Jewish Future, wants to bring the topic of sexuality out of the corner of people's minds, where it has sat like a punished child for years, and out into the open where it can be discussed in a safe, educational environment...The aim of the curriculum, a mission shared by Tzelem founders Jennie Rosenfeld and Koby Frances, is to bring "religiously sensitive information about sexuality" to a community with a "tremendous need" to discuss it, Rosenfeld said.

"Tzelem elohim [being created in God's image] should guide all personal and interpersonal actions," Rosenfeld said, noting that this is the guideline by which the curriculum runs. The curriculum brings together "sex education in a Jewish context and in a broader interpersonal context."...Laws of modesty are discussed, as well as marriage, dealing with desires and differentiating among like, lust and love. In higher grades, more controversial issues are discussed. The lessons on contraception include an overview of available methods and how they work, and sexually transmitted diseases are taught in a medical and halachic context. Students are encouraged to consult rabbinic authorities as well. In the discussion of abortion, moral, halachic and emotional issues are raised, with the curriculum including Web site testimonials from women who have undergone the procedure and articles on abortion and Jewish law.

- Jewish Week

