

Guttmacher Advisory, July 2007

Review of Comprehensive Sex Education Curricula Commissioned by the Administration for Children and Families

Background

In June 2007, the federal Administration for Children and Families (ACF)* released a report on the content and effectiveness of nine comprehensive sex education curricula† it deemed "some of the most common . . . currently in use." The report was issued in response to a 2005 request from two prominent opponents of comprehensive sex education and supporters of abstinence-only programming, Sen. Tom Coburn (R-OK) and former Sen. Rick Santorum (R-PA). ACF contracted with the conservative Sagamore Institute for Policy Research to conduct the review, and sought additional comments exclusively from the Medical Institute for Sexual Health, which opposes comprehensive sex education and supports abstinence-only programming.

Overall assessment:

- The analysis was **poorly conducted** and would **never pass peer review by an established journal**. Its findings should not be viewed or described as a credible or unbiased assessment of the content of comprehensive sex education curricula.
- Senators Coburn and Santorum had requested an assessment of "comprehensive sex education programs supported with federal dollars" However, neither ACF nor any agency of the federal government supports comprehensive sex education. It is not clear what criteria the Sagamore Institute used to identify comprehensive sex education programs that were funded with federal dollars, given that there is currently no federal funding going to support comprehensive sex education.

Content analysis:

The content analysis was crudely designed and the study's conclusion that contraception is given much greater emphasis than abstinence in these curricula is deeply flawed and should not be taken at face value.

• The study simply counted how often a group of 89 words or phrases were used in each comprehensive sex education curriculum. This rudimentary approach significantly undercounts the extent to which the programs addressed various topics that go beyond the limited word identification used by the authors.

*ACF is the agency within the Department of Health and Human Services that oversees grants to community- and faith-based organizations for abstinence-only-until-marriage programs.
†Comprehensive sex education is defined, both for the purposes of the ACF report and generally, as teaching both abstinence and the use of protective methods for sexually active youth.

- Only one ("abstinence/abstain") of the 89 words or phrases that were counted was used to evaluate abstinence-related content. 1 (p. 10)
- Obvious words or phrases that could be used to describe the concept of "abstinence" (such as "wait" or "delay") were not among the words counted.
- Some words that describe the concept of delaying or not having sex were not properly credited as abstinence messages. For example, the "Reducing the Risks" curriculum includes 90 mentions of "abstinence/abstain," 45 references to "alternatives to sexual intercourse," 20 uses of "avoid/avoiding (behaviors)," eight uses of "not having sex" and 110 references to "refuse, refusal (skills)/delaying sex tactics." This adds up to a total of 273 abstinence messages—but the curriculum is given credit for only 90 abstinence messages (i.e. the 90 instances where "abstinence/abstain" were mentioned explicitly). 1 (p. 13)
- In contrast, the word count included between 16 and 20 words or phrases (depending on definition) that referred to contraception and condoms. The study thus appears to have been designed to catch as many references to condoms and other forms of contraception as possible, while systematically undercounting references to words that describe the concept of waiting to have sex.

Medical inaccuracies:

The ACF study's concluding statements on medical accuracy are not supported by the evidence provided.

- The study's authors attempt to make the case that "the medical accuracy of comprehensive sex education curricula is . . . similar to that of abstinence-only-until-marriage curricula" (p. 9). However, the inaccuracies found in the ACF review of comprehensive sex education programs are minor compared with those found in a report by Rep. Henry Waxman (D-CA) titled "The Content of Federally Funded Abstinence-Only Education Programs."
- Even a casual reading of the two reports reveals that the Waxman report uncovers a
 broad pattern of medical inaccuracy related to abstinence-only programs, many
 of which did not reflect the best scientific evidence available when they were
 published. Inaccuracies identified by the Waxman report include
 - o understating the effectiveness of condoms in preventing STIs, including HIV;
 - o understating the effectiveness of condoms in preventing pregnancy;
 - o overstating the risks of sexual activity;
 - o presenting false and misleading information about the risks of abortion; and
 - o presenting inaccurate information about human genetics, puberty and HIV.

- In contrast, many of the medical inaccuracies in comprehensive sex education curricula identified by the ACF review were minor (for instance, citing one program for referring to a "dental dam" instead of the FDA-approved "rubber dam," $1^{(p.\ 18)}$); others (such as the statistics given on the safety and effectiveness of the spermicide nonoxynol-9) were based on the best-available and most accurate information at the time the curricula were initially published $1^{(p.\ 18)}$.
- Some of the **criticisms of comprehensive sex education curricula are entirely subjective**, for instance the charge that one curriculum does not provide sufficiently "elaborate" details on condom failure ^{1 (p. 18)}. ("Elaborate" criticism of condoms has long been a hallmark of rigid abstinence-only-until-marriage programs that are forbidden from discussing condoms in any context except their failure rates).

Program effectiveness:

- Despite the study's severe limitations, its literature review acknowledges that seven of the eight comprehensive sex education curricula that were evaluated showed positive impacts on delaying sexual debut, increasing condom use among those who were sexually active, or both. 1 (p. 8)
- It is noteworthy that the study's authors saw fit to draw parallels between comprehensive sex education and abstinence-only curricula on the issue of medical accuracy, but refrained from doing so on the issue of effectiveness. Indeed, a significant body of research findings shows that abstinence-only-until-marriage education programs are ineffective.
 - Most recently, a long-awaited evaluation of federally funded abstinence-only-until-marriage education programs has found that they have no beneficial impact on young people's sexual behavior. Students who participated in what the study by Mathematica Policy Research calls "promising" abstinence-only programs were no more likely than nonrecipients to delay sexual initiation, nor were participants more likely to have fewer partners or use condoms when they became sexually active.³
 - o In contrast, comprehensive sex education has been shown in numerous studies by well-respected researchers to delay sex, increase contraceptive use and reduce the number of sexual partners.⁴

¹ Review of Comprehensive Sex Education Curricula, The Administration for Children and Families (ACF), Department of Health and Human Services (HHS), 2007,

< http://www.acf.hhs.gov/programs/fysb/content/abstinence/06122007-153424.PDF>, accessed July 23, 2007.

² Waxman HA, *The Content of Federally Funded Abstinence-Only Education Programs*, Minority Staff Special Investigations Division, U.S. House of Representatives Committee on Government Reform, 2004, http://oversight.house.gov/Documents/20041201102153-50247.pdf, accessed July 23, 2007.

³ Guttmacher Institute, Abstinence-only programs do not work, new study shows, April 18, 2007,

http://www.guttmacher.org/media/inthenews/2007/04/18/index.html, accessed July 23, 2007.

⁴ Kirby D, *Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy*, Washington, DC: National Campaign to Prevent Teen Pregnancy, 2001, http://www.teenpregnancy.org/resources/data/report_summaries/emerging_answers/>, accessed July 23, 2007.