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ON ABSTINENCE EDUCATION

North Carolina currently mandates that all students from kindergarten to 9th grade be taught a "comprehensive school health education program" that includes instruction on abstinence until marriage and preventing HIV/AIDS and other sexually transmitted diseases (STDs) (cf. G.S. § 115C-81). According to state law, "abstinence from sexual activity outside of marriage is the expected standard for all school-age children."

While every Local Education Agency (LEA) is able to choose the specific abstinence curriculum it wants to teach, the course of study must include the following objectives developed by the State Board of Education:

- Abstinence until marriage as the expected standard for all school aged children and the only sure means of avoiding pregnancy and STDs, including HIV/AIDS;
- Provision of accurate biological information regarding the basics of reproduction;
- Reasons and strategies to choose abstinence and how to deal with peer pressure;
- Data regarding the risks of premarital sexual activity, including associated health and emotional problems;
- Provision of information regarding the effectiveness and failure rates of contraception in preventing pregnancy and STDs;
- Facilitation of communication between parents and children;
- Be age appropriate.[1]

State/Federal Comp. Sex-ed Funding
> $3.6 million

Federal Abstinence Funding
$1.248 million

Local Abstinence Funding
$0.936 million

State Abstinence Funding
$0

While the state health education program is technically reserved for students in grades kindergarten through 9th grade, federal abstinence funds target children aged 12 to 18. Beginning in 4th grade, puberty competency goals are incorporated into the Healthful Living curriculum that guides the teaching of health and physical education in N.C. schools.[2]

Funding

North Carolina's abstinence education efforts are jointly funded by the federal government and individual LEAs. For every $4 in federal funding, LEAs contribute $3 (75¢ match per $1). (LEAs, however, may substitute in-kind donations for matching funds.) Federal abstinence funding is authorized by Title V of the 1996 Welfare Reform Act. For FY2008, North Carolina received $1.2 million in Title V abstinence funding. In FY2007, the state also received supplemental funding from the Centers for Disease Control and Prevention, Division of Adolescent and School Health (DASH).

Ninety percent of Title V funding is allocated to each of the state's 115 LEAs, along with approximately 14 charter schools; the remaining 10 percent is dedicated to state administrative costs. Each LEA that teaches at least one grade of 7-12 receives $2,000 in base funding; remaining funds are distributed via grades 7-12 average daily attendance.

If federal abstinence funding ceases, each LEA will be responsible for 100 percent of the costs of abstinence education.

Local Options
Under North Carolina law, every LEA must teach an abstinence-only curriculum (cf. G.S. 115C-81(e1)). Students may opt-out of this curriculum only with parental/guardian consent. That being said, LEAs may "supplement" the abstinence-only course with a comprehensive sex-ed program. In order to do so, the LEA must adhere to the following two requirements:

1) Conduct a public hearing before adopting a comprehensive sex-ed program;

2) Make available for public review – at least 30 days prior to the hearing and 30 days after – program objective and instructional materials.

Abstinence vs. Comprehensive Sex-ed

Under the terms of Title V, North Carolina's abstinence education courses must adhere to an 8-point checklist (A-H) that emphasizes abstinence. Title V does not specifically prohibit teaching about contraception. Some abstinence programs teach kids how to use contraception while others only cover information regarding the effectiveness and failure rates of various birth control methods. The essential difference between abstinence-only sex-ed and "comprehensive" sex-ed programs is one of emphasis. The former focus on the fact that abstinence is the only fail-safe way to avoid pregnancy and sexually transmitted diseases. The latter emphasize contraception as the best means to avoid pregnancy and STDs. The real difference is one of expectations: abstinence-only education challenges kids to be chaste; comprehensive sex-ed starts with the premise that kids are going to be sexually active.

Before the beginning of each school year, each LEA is also required to give parents an opportunity to review any course objectives and materials related to STD prevention, abstinence, or comprehensive sex-ed. Moreover, students may receive information regarding the provision of contraceptives and abortion only in accordance with each LEA's policy regarding parental consent. State law forbids the distribution of contraceptives on school property.

LEAs that teach comprehensive sex-ed are still eligible for federal abstinence funding, as long as the abstinence instruction occurs at a separate time and place and as long as the funds are not used to subsidize comprehensive sex-ed programming.

Finally, state law requires that the State Board of Education "shall evaluate abstinence until marriage curricula and their learning materials and shall develop and maintain a recommended list of one or more approved abstinence until marriage curricula." To date, however, the Board of Education has not maintained such a list. Likewise, the Board of Education is also required to make any approved textbooks and other pertinent materials available for review by parents.

Did you know that?

In counties teaching comprehensive sex-ed, the average teen (ages 15-19) pregnancy rate is 53.2 – lower than the state average of 63.1 per 1,000. The teen abortion rate in these counties, however, is more than double the state average: 98.5 compared to a state average of 44 per county.

Who is Responsible?
North Carolina does not exercise direct oversight over how abstinence funds are spent. Rather, the chair of each local board of education must provide signed assurance that their district will abide by the abstinence guidelines enumerated above. Apart from that, each LEA is responsible for choosing its own abstinence curriculum. Individual LEAs are also not required to use any one health education textbook.

Recommendations
• *Keep teaching abstinence until marriage.* North Carolina's abstinence-only curricula is working, as evinced by a 30 percent reduction in the teen pregnancy rate and a 42 percent reduction in the abortion rate. Parents support abstinence, as do voters.

• *Teach parents how to talk to their kids about abstinence.* As schools struggle to meet adequate yearly progress standards, abstinence education has become an afterthought. Along with better teacher training, schools should sponsor annual workshops that teach parents how to talk to their kids about abstinence. Indeed, parents should be encouraged to be the primary educators when it comes to talking to their kids about sex.

• *Provide ongoing education.* Studies have shown that abstinence education – not unlike most other subjects – needs to be taught on an ongoing basis to be effective. According to a June 2007 report by the Institute for Research and Evaluation, abstinence programs "can reduce teen sexual activity by as much as one half for periods of one to two years." This means that every one to two years kids need a refresher course on the benefits of abstinence.[3]

• *Stop sending mixed messages.* Currently, state taxpayers are funding two programs – the Adolescent Pregnancy Prevention Coalition of North Carolina and the Teen Pregnancy Prevention Initiative (TPPI) – that undermine abstinence. This money should instead be dedicated to abstinence-only education.

• *Change the culture.* Just as kids are expected to abstain 100 percent from smoking or drinking alcohol, the state should consistently adopt the same attitude toward premarital sex.

Counties Teaching Comprehensive Sex-ed in North Carolina

A recent study by Duke professor Dr. Rebecca Bach found that 10 school systems within 8 counties are teaching comprehensive sex-ed:

- Buncombe: 54.8 preg. rate
- Caldwell: 71.9 preg. rate
- Durham: 60.4 preg. rate
- Guilford: 56.1 preg. rate
- Jackson: 35.1 preg. rate
- New Hanover: 54.5 preg. rate
- Orange: 20.9 preg. rate
- Person: 72.2 preg. rate

ENDNOTES:

[1]Department of Public Instruction and Department of Health and Human Services, "The Healthy Schools Initiative"; available at www.nchealthyschools.org/abstinence. Much of this report is taken from a June 2008 interview with Denise Pittilo, then abstinence consultant with NC Healthy Schools.

[2]See www.ncpublicschools.org/docs/curriculum/healthfulliving/scos/2006healthfullivingscos.pdf.

[3]S. Weed et al., "'Abstinence' or 'Comprehensive' Sex Education?" Institute for Research and Evaluation, (June 8, 2007); also see Stan Weed, Testimony before the U.S. House of Representatives Committee on Oversight and Government Reform, April 23, 2008; available from http://oversight.house.gov/documents/20080423114651.pdf. Weed likewise found that no comprehensive sex-ed programs resulted in behavior changes after three years; only two courses had any impact after two years.

This fact sheet was written by Dr. Jameson Taylor.