

Findings

A.U.M. or C.S.E.

Which Approach is Most Effective at Protecting Teen Health?

By Alysse ElHage

On a recent episode of “Friday Night Lights” (2/21/07)—the NBC-drama about a high school football coach and his team—“Tami Taylor,” the coach’s wife, angrily confronts her 15-year-old daughter, “Julie,” after she sees Julie’s boyfriend buying condoms at the store. Julie tells her mother that she and her boyfriend are not having sex, but admits they are thinking about it. During their emotional conversation, Tami asks Julie if she thinks condoms make her ready to “make love.” “Making love?” Julie repeats mockingly. “Don’t you do that—don’t you smirk at me right now!” Tami snaps. “I am very upset. You are not allowed to have sex! You’re 15-years-old!” “I just—I don’t see what the big deal is,” Julie responds with a roll of her eyes. “It’s just one body part going into another body part.” “No, it’s not...” Tami replies, tearfully. “Let me tell you what the big deal is...What can happen is that you can be hurt, and you can be degraded, and you can become hard, and you can become cynical. And I don’t want that to happen to you. This is something that’s special—it’s something that’s meant for people who are in love... and you can wait.”

Two opposing messages about adolescent sex are at war in America today. One says to teens “you can wait,” and the other essentially tells them, “you don’t have to wait, and you probably couldn’t wait if you tried.” The first message is a major theme of abstinence until marriage (AUM) education, a relatively young form of sex education that is aimed at helping adolescents avoid early sexual

activity and eliminate the negative consequences associated with it. The second message originates from a condom-based approach known as comprehensive sex education (CSE), which has a long history in the United States and is rooted in an ideology of sexual freedom.

In North Carolina, AUM education is under fire from CSE advocates who claim that it is unrealistic and ineffective,

AUM education is based on the ideology of sexual purpose.

medically inaccurate, and even harmful to the sexual health of young people. But when authentic AUM education and CSE are compared side-by-side, these claims are revealed to be patently false. It also becomes clear that CSE comes at the expense of young people’s physical, mental and emotional health.

What is Abstinence Until Marriage Education?

The 1996 Welfare Reform Act defines abstinence education for the purposes of federal funding as education that “has as its exclusive purpose, teaching the social, psychological, and health gains to be realized by abstaining from sexual activity.”¹

The federal definition of abstinence is modeled after North Carolina’s AUM law, which was enacted by the General Assembly in 1995 and defined AUM education using eight specific characteristics. According to North Carolina’s law, AUM education teaches that:

- “abstinence from sexual activity outside of marriage is the expected standard of behavior for all school-age children;”
- “abstinence from sexual activity is the only certain means of avoiding out-of-wedlock pregnancy, sexually transmitted diseases when transmitted through sexual contact, including HIV/AIDS, and other associated health and emotional problems;” and
- “a mutually faithful monogamous heterosexual relationship in the context of marriage is the best lifelong means of avoiding sexually transmitted diseases, including HIV/AIDS.”²

AUM Ideology: AUM education is based on the ideology of sexual purpose—the principal that sexuality is a wonderful, natural part of being human with a specific purpose (long-term human bonding and procreation), and that it works best within marriage. Its primary objective is to encourage adolescents to abstain from sexual activity outside of marriage, and authentic abstinence programs devote a substantial amount of time to this goal.

According to a 2004 study by The Heritage Foundation, authentic AUM curricula devote 53.7 percent of their page content to abstinence-related material (i.e., encouraging abstinence, risk avoidance; negative consequences of non-marital sexual activity, such as STDs; and promoting abstinence).³

AUM Messages: Authentic AUM programs communicate a number of specific messages about sex and human beings that go way beyond “just say no” and are the direct opposite of what teenagers are hearing from the culture, as well as from CSE programs.

1. One of the major themes of AUM education is that sex has a specific purpose

and works best inside marriage. The previously mentioned study by The Heritage Foundation found that authentic AUM programs devote 17.4 percent of their page content to the benefits of healthy relationships and to marriage, compared to CSE programs, which devote zero percent of their page content to this goal.⁴

2. Authentic AUM education teaches that teen sexual activity—even with condoms—is not acceptable behavior and is dangerous to teen health. To reinforce this message, AUM programs focus on the full spectrum of harmful consequences that can result from adolescent sexual activity, including STDs, teen pregnancy, abortion, emotional and psychological harm, and an increased risk of other high-risk behaviors, such as drug and alcohol abuse.⁵

A substantial part of this message is that condoms do not make teen sexual activity acceptable or safe. Instead of promoting condoms, AUM programs emphasize the limitations of contraceptives to fully protect against the harmful effects of early sexual activity. The Centers for Disease Control and Prevention (CDC) states that “condom use cannot guarantee absolute protection against any STD.”⁶ Additionally, a 2001 report by the National Institutes of Health (NIH) found “insufficient evidence” about the effectiveness of condoms to reduce the risk of genital herpes, syphilis and chancroid.⁷

Compared to abstinence from sexual activity, which can eliminate the risk of STDs, condoms can only reduce risk of some STDs. Because human error is likely, especially among teenagers, North Carolina’s AUM law specifies that information on the effectiveness and failure rates of contraceptives must be presented to students in the context of “actual use among adolescent populations.”⁸ Actual-use condom failure rates (or typical use rates) are higher than adult/consistent user rates, which are based on tests performed in clinical settings.⁹ Teenagers deserve to know the actual risks of engaging in early sexual activity, and that is why many AUM programs choose to use typical-use condom failure rates when discussing contraceptives.

3. According to national abstinence educator, Mike Long, one of the most important messages of AUM education is that teens have the ability to wait. “I’ve often heard the argument that teenagers are going to be sexually active anyway,” he says. “What they’re really saying is

that our teenagers are nothing more than animals, [and] that they cannot control themselves. That’s false. They’re human beings, which includes the mental, emotional, moral, and social aspects of human sexuality... And when I talk about that, you would not believe the number of teenagers that come up to me and say, “Mr. Long, I did not realize that my sexual drive was controllable.”¹⁰

Directly tied to the “you can wait” message is the principle that a young

According to SIECUS, among the issues that should be addressed in sex education programs are: masturbation, sexual response, sexual orientation, gender identity, contraception, and abortion.

person’s sexuality is worth preserving. “When we speak to kids we tell them, you will not leave this room today, without hearing this: ‘you are worth waiting for. You are somebody that deserves to be honored and loved and cherished and treasured,” explains Cindy Winter-Hartley, an abstinence educator in Wake County. “It is something they desperately need to hear.”¹¹

Tools of AUM: Providing teens with the whole truth about early sexual activity is a major tool of AUM education. As noted earlier, these programs emphasize the full scope of harmful consequences associated with adolescent sexual activity, including the spiritual, mental and emotional costs that no condom can protect against.

Another tool of authentic AUM programs is character education. According to Mike Long, AUM education “empowers teens to redirect physical energies in order to experience positives in their lives, not negatives. It builds character, discipline, and self-esteem.”¹²

What is Comprehensive Sex Ed?

The Sexuality Information and Education Council of the United States (SIECUS) is one of the architects of CSE, and its *Guidelines for Comprehensive Sexuality Education: Kindergarten-12th Grade* is considered a “national model” for CSE

programs.¹³ According to SIECUS, among the issues that should be addressed in sex education programs are: masturbation, sexual response, sexual orientation, gender identity, contraception, and abortion.¹⁴ The SIECUS *Guidelines* include the following developmental messages for students:

- Ages 5-8: “Both boys and girls have body parts that feel good when touched.”¹⁵
- Ages 9-12: “Many boys and girls begin to masturbate for sexual pleasure during puberty.”¹⁶
- Ages 12-15: “Some sexual behaviors shared by partners include: kissing; touching; talking; caressing; massaging; and oral, vaginal or anal intercourse.”¹⁷

It is important to note that CSE advocates, such as SIECUS, often use the terms “abstinence-plus” or “abstinence based” to describe programs that use their approach to sex education. According to Advocates for Youth, a leading CSE proponent, both “abstinence-plus” and “abstinence-based” are defined as “another term normally used to mean comprehensive sex education.”¹⁸

CSE Messages: As the following examples will show, CSE is based on an ideology that views the sexual freedom of individuals as a key to human happiness, and the primary objective of these programs is to promote sexual freedom while limiting the natural consequences.¹⁹ Some of the hazardous messages communicated by CSE programs are: sex should not be limited to marriage; teen sex is okay; and most forms of sexual expression are normal. For example: The SIECUS *Guidelines* includes this message for adolescents: “Two people who live together without being married can have the same commitment and responsibility toward one another as married people.”²⁰

Although CSE programs may not directly state that it is acceptable for teens to have sex, the underlying message is that contraception makes teen sexual activity okay. For example, *Be Proud! Be Responsible!*, a CSE program that describes itself as “abstinence-plus,” states: “proud and responsible behavior includes protecting yourself by using a condom during sexual intercourse; abstaining from sexual behavior when no condom is available; [and]...abstaining from sex altogether, if that is your choice.”²¹

Furthermore, while CSE programs often claim to be “abstinence-based,” a closer look reveals they have little to do with promoting abstinence. According to

the aforementioned Heritage Foundation study, CSE curricula use 28.6 percent of their page content to describe contraception and encourage teens to use it, and only 4.7 percent of their page content to promote abstinence. Out of the nine CSE curricula reviewed in the study, less than 10 sentences encouraged teens to postpone sexual activity until they were older, and there was only one mention of abstaining from sex through high school.²²

According to SIECUS, “Individuals have the right to accept, acknowledge, and live in accordance with their sexual orientation, be they bisexual, heterosexual, gay or lesbian.”²³ *Be Proud! Be Responsible!* includes this scenario involving a homosexual relationship: “Allan: You know Gerald cares a lot about you, but he just doesn’t get it...Now he’s convinced he’s going to get HIV for choosing a gay lifestyle. You have tried to explain that it’s no more a choice to be gay than it is to be straight, it’s just the way you naturally feel about things.”²⁴

CSE Tools: CSE is dependent upon two primary tools: educating young people about a variety of risky sexual behaviors, and encouraging the use of condoms and other contraceptives, as well as abortion.

In addition to promoting homosexuality and bisexuality, CSE programs promote so-called “safer” sexual activities to teens. For example, the CSE program, Teen Talk, states: “The only method of birth control which is 100 percent effective is abstinence....Although this means not having sexual intercourse, it does not exclude sexual play.”²⁵

Another CSE program, *Focus on Kids*, instructs teachers to ask students to “brainstorm ways to be close,” adding that the “list may include...body massage, bathing together, masturbation, sensuous feeding, fantasizing, watching erotic movies, and reading erotic books and magazines.”²⁶

Contraceptives are indispensable to the ideology of sexual freedom, and CSE programs spend a lot of time promoting condoms and other contraceptives. In fact, CSE curricula devote six times more content to encouraging contraceptive use than to abstinence.²⁷ CSE programs also include detailed information about where to find condoms and how to make using condoms during sex “fun.” For example:

- *Reducing the Risk*, a high school curriculum used in North Carolina, tells students: “Condoms are available at any drugstore or family planning clinic.... Anyone can buy condoms, regardless of

age, and no prescription is needed.”²⁸

- *Be Proud! Be Responsible!* instructs teachers to: “Invite students to brainstorm ways to increase spontaneity and the likelihood that they’ll use condoms.... Examples: Eroticize condom use with a partner....Hide them on your body and ask your partner to find it.... Tease each other manually while putting on the condom.”²⁹

The Consequences of CSE

For 30 years, CSE was the primary form of sex education in the public schools, and it is still taught in the majority of schools today. Despite increased federal funding for AUM education, CSE continues to be funded at substantially higher levels than AUM programs. For example, in 2002, CSE programs received

Providing teens with the whole truth about early sexual activity is a major tool of AUM education.

\$12 of government money for every \$1 that AUM programs received.³⁰ According to the Guttmacher Institute, 51 percent of school systems teach an “abstinence-plus” program, 35 percent teach “abstinence-only,” and 14 percent have a formal CSE approach.³¹ Considering the long history of CSE in schools and the powerful grip its ideology has on American culture, it is reasonable to ask: what impact has CSE had on the sexual health and attitudes of young people?

STDs: CSE advocates have been preaching condoms to teenagers for 40 years, and studies indicate that many young people have heeded the call. According to the Guttmacher Institute, the proportion of teens who used condoms increased by 28 percent among males and 47 percent among females between 1991 and 2005.³² But while condom use among teens has increased, the STD epidemic has continued to soar. Since the 1960s, when CSE first began in schools nationwide, the number of STDs has grown from two dominant diseases (syphilis and gonorrhea) to over 25 today.³³ Forty years ago, doctors could treat these diseases with penicillin. Today, they are contending with many STDs that are incurable, such as Herpes and human papillomavirus (HPV),

which is the most common viral STD in the U.S. and is the leading cause of cervical cancer worldwide.³⁴

Even more disturbing, sexually active 15 to 19-year-olds experience the highest STD rates of any age group in the nation.³⁵ Each year, about one in four sexually active young people ages 15 to 24 contracts an STD.³⁶ About 67 percent of reported STDs in North Carolina occur in sexually active youth ages 15 to 24.³⁷ The most common STD among young people is HPV, with an estimated 36 percent of 13 to 19 year olds currently infected.³⁸

Sexual Promiscuity: Many young people have embraced the CSE ideology of sexual freedom. Teens today use a variety of alarming terms to describe casual sexual relationships, such as “hooking up” and “friends with benefits.” According to a 2002 survey by the Kaiser Family Foundation and *seventeen* magazine, over one-third of teens reported doing “something sexual” in a “casual relationship,” including 14 percent who reported having sexual intercourse.³⁹ Although teen sexual activity has declined overall in recent years, many young people are experimenting with high-risk sexual behaviors. According to the CDC, 14.3 percent of high school students reported having four or more sexual partners in 2005.⁴⁰ In addition, over half of boys and girls ages 15 to 19 reported engaging in oral sex, 11 percent reported engaging in anal sex with someone of the opposite sex, and three percent of males reported having anal sex with another male, according to the Kaiser Family Foundation.⁴¹

Sexual Confusion: Many young people today are confused about their sexual and gender identities. Increasing numbers of adolescents are “coming out” as gay, lesbian or bisexual, and are doing so at younger ages than before. According to a national survey conducted for the Gay, Lesbian and Straight Education Network (GLSEN), five percent of high school students in 2004 identified as either “lesbian” or “gay.”⁴²

An October 2005 *Time* magazine article noted that young people are identifying as gay or lesbian at younger ages than ever before, with some studies showing as much as a five-year decrease in the average age for “coming out.”⁴³ There is also a trend among some homosexual girls to avoid labeling themselves as lesbian and use more fluid terms such as “bi-queer,” “pan-sexual,” “ambisexual,” and “poly-fide.”⁴⁴

Teen Depression: Young people are

also suffering from the emotional and psychological consequences of early sexual activity. “For the thousands of teens I’ve treated and counseled, one of the major causes of depression is sex,” pediatrician Dr. Meg Meeker writes in her 2002 book, *Epidemic*. “I consider it an STD with effects as devastating, if not more, as HPV, Chlamydia or any other.”⁴⁵

A 2002 study analyzing data from the National Longitudinal Survey of Adolescent Health found that sexually active teenage boys and girls are significantly more likely to be depressed and to have attempted suicide than teens that are not sexually active.⁴⁶

The Benefits of AUM

Negative consequences result when teens buy into the hazardous CSE ideology of sexual freedom, and America’s youth are paying the price. But when young people embrace the AUM ideology of sexual purpose, and postpone sexual activity for as long as possible, they reap a host of positive outcomes.

One of the strongest benefits of postponing sexual activity is that it reduces the number of sexual partners a young person will have during his or her life. According to one 2003 study, girls who begin sexual activity at age 13 or 14 will have an average of 13 voluntary non-marital sexual partners in their lifetime, compared to girls who postpone sexual activity until their 20s, who will have an average of 2.7 sexual partners.⁴⁷

Having fewer lifetime sexual partners greatly reduces an individual’s risk of contracting an STD. “I cannot stress this enough,” writes Dr. Meeker. “The longer a teen can wait to begin sexual activity, the less likely it is that he or she will contract a sexually transmitted disease.”⁴⁸

Delaying sexual activity also protects women from out-of-wedlock pregnancies and abortions. According to an analysis of the National Survey of Family Growth by The Heritage Foundation, women who become sexually active at ages 13 or 14 are more than three times as likely to become single mothers than women who wait until their early 20s. Girls who become sexually active at an early age are also more likely to have abortions.⁴⁹

In addition to protecting the physical health of young people, postponing sexual activity until marriage protects the mental, emotional, and spiritual well being of teens. Early sexual activity has been linked to higher levels of depression

and thoughts of suicide, especially among women.⁵⁰ Teens who postpone sexual activity as long as possible are guarding themselves against lifelong mental and emotional baggage.

Delaying sexual activity may also have academic benefits for teens. An analysis of data from the National Longitudinal Study of Adolescent Health by The Heritage Foundation found that teens that abstain from sex during high school are significantly less likely to be expelled from school and drop out of high school, and more likely to graduate from college.⁵¹

Finally, postponing sexual activity can have a positive impact on a young person’s ability to form a stable marriage as an adult. Compared to women who become sexually active in their 20s, girls who initiate sexual activity at ages 13 or 14 are less than half as likely to be in a stable marriage in their 30s.⁵²

Can AUM Education Work?

Despite the obvious physical, mental and emotional benefits of sexual abstinence until marriage for young people, questions continue to be raised about whether AUM education actually works. Although AUM education is young compared to CSE, there are encouraging signs that many teens are embracing the AUM message. There is also scientific evidence that AUM programs are effective at reducing teen sexual activity.

According to the CDC, the percentage of sexually active teens has declined from 54.1 percent in 1991 to 46.8 percent in 2004.⁵³ Teen pregnancy rates have also dropped to their lowest level in 30 years, down 28 percent nationwide since peaking in 1990.⁵⁴ In North Carolina, the adolescent pregnancy rate has dropped over 40 percent since 1990.⁵⁵

In addition to these positive trends, over 10 scientific evaluations show that authentic AUM programs are effective at reducing sexual activity among teenagers, as well as other high-risk behaviors.⁵⁶ Three studies in particular are worth noting. A study of the AUM program, Best Friends, which was published in the peer-reviewed journal, *Adolescent & Family Health* in April 2005, found that junior high and middle school-aged girls who participated in the program were: six-and-a-half times more likely to remain sexually abstinent; almost two times more likely to abstain from drinking alcohol; eight times more likely to abstain from using drugs;

and over two times more likely to refrain from smoking, than their peers who did not participate in the program.⁵⁷

According to The Heritage Foundation, studies of virginity pledge programs show that young people who have taken virginity pledges are *less likely* to: “have children out of wedlock; experience teen pregnancy; give birth as teens or young adults; have sex before age 18; and engage in non-marital sex as young adults,” when compared to non-pledgers with similar backgrounds.”⁵⁸

The goal of sex education should not be to promote sexual freedom among adolescents but to protect their physical, mental and emotional health. CSE sexualizes adolescents into dangerous behaviors that put them at risk for serious harm, and then attempts to control the damage with contraception. After 40-plus years in schools, this failed approach is still wreaking havoc on generations of young people.

AUM education began in response to the disastrous effects of CSE, and it is aimed at fully protecting the health of adolescents by helping them avoid behaviors that will put them at risk. It builds character in young people, and provides them with a sexual ethic that helps them achieve the healthiest future possible. Every child in North Carolina deserves the prospect of a future that is free from the threat of unwed pregnancy, STDs, and emotional, mental and spiritual damage. AUM education is the best possible means of giving them that chance.

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Endnotes

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