

Going too Far? Sexual Politics of Abstinence-Only¹

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What if I want to have sex outside of marriage?
I guess you'll just have to be prepared to die.
– *No Second Chance*, Abstinence-only Video

The United States leads the industrialized world in teen pregnancy, abortion, and sexually-transmitted disease rates – and in legislating and funding abstinence-only-until-marriage programs as social policy. It also stands out as the only industrialized country still embroiled in a debate over whether creationism should be taught in public schools. These issues help reveal the dynamic interplay between religion, politics, and health in the United States. In examining the role and power of conservative religious groups in shaping domestic and foreign policy, this paper focuses on the issues of reproductive and sexual health.

In order to illuminate the cultural and political factors that inform debates and social policy concerning sexuality and gender in the United States, this study presents a comparative analysis of Danish and U.S. approaches to reproductive health and sexuality education. This research represents over a year of ethnographic fieldwork in Roskilde, Denmark and Central Pennsylvania.¹ The case of Denmark is informative because the rates of teen pregnancy and attitudes towards sexuality 50 years ago were not so different than those in the United States. Since the 1970s, however, Denmark has taken a much more pragmatic approach to teen sexuality and sexuality education. Although Danish and American teens tend to have similar patterns of sexual debut and activity, Danish teens have much lower rates of teenage pregnancy, abortion and sexually transmitted diseases (STDs). For example, in 1995, there were 61 births per 1,000 females between the ages of 15-19 in the United States, and only 9 in Denmark (Feijoo 2001; Singh and Darroch 2000). Today, the dominant Danish discourse about sexuality and reproductive rights is strikingly different from the dominant discourse in the United States – not because Danes are by nature or nationality “just more open” about sex and Americans “just naturally more prudish” – rather, the debates over sexuality and reproductive rights and responsibility are rooted in different religious, political, economic and community orientations.

Abstinence-Only-Until-Marriage Programs in the U.S.

Since 1996, nearly \$1 billion in state and federal funding has been allocated for abstinence-only education, despite a lack of evidence supporting the effectiveness of this approach (Hauser 2004; Kirby [1997] 2000; Manlove et al. 2004; “New Studies” 2005; “Sex Education” 2002; “Waxman Report” 2004 Santelli et al. 2006; “Evaluation” 2007). Under the Bush administration, abstinence-only programs have expanded rapidly. Even though it was widely believed that the programs would be cut or eliminated by the newly elected Democratic Congress, on June 7, 2007 Congress voted to increase funding for the Community-Based Abstinence Education (CBAE) grants by \$27.8 million in order to avoid a Presidential veto of their Appropriations Bill. While this represents just a ten percent increase in the budget for Title V, it's a 30 percent increase for abstinence-only.

Despite the declining teen pregnancy rates during the 1990s, 34 percent of teenage girls get pregnant at least once before they reach age 20, resulting in more than 850,000 teen pregnancies a year – the vast majority of which are unintended. At this level, the United States has the highest rate of teen pregnancy in the fully industrialized world. The U.S. also has the highest teen birth, abortion, and sexually-transmitted infection (STI) rates in the industrialized world. Each year, teens in the United States contract an estimated 9.1 million sexually transmitted infections and approximately 50 young people a day, an average of two young people every hour of every day, are infected with HIV (Children's Defense Fund 2004; Henshaw 2004; “New Studies” 2005; “We Are not Your Pawns” 2007).

By law, abstinence-only programs must have as their “exclusive purpose, teaching the social, psychological, and health gains to be realized by abstaining from sexual activity.” While this is a desirable

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option for young people, it is also very problematic for many. By promoting abstinence-only education that omits complete, medically accurate information, U.S. policy ignores research, public opinion, and the experience of other countries about what actually works to prevent teenage pregnancy and STIs.

Americans Teaching Fear

In abstinence-only-until-marriage materials, sex is often equated with death, disease, and danger; fear surfaces as the primary message and tactic used to persuade young people to steer clear of sex before or outside of marriage. The abstinence-only video, “No Second Chance,” used for middle-school Sex Respect audiences,² juxtaposes discussions of having sex outside of marriage with images of men dying from AIDS. In “No Second Chance,” an evangelical sex educator compares sex outside of marriage – not to the all-American game of baseball – but to playing Russian Roulette. She tells a classroom of young people that: “Every time you have sex, it’s like pulling the trigger – the only difference is, in Russian Roulette, you only have one in six chances of getting killed.” When one boy asks, “what if I have sex before marriage?” he is told, “Well, I guess you’ll just have to be prepared to die. And you’ll probably take with you your spouse and one or more of your children.” James Dobson’s “Focus on the Family” distributes “No Second Chance” and its companion, “Sex, Lies, and the Truth.” Both have been widely used in public as well as Christian, schools throughout the United States (Kantor 1994; Mast 1983; “Teaching Fear” 1996). According to their website (1999-2005), *Sex Respect* is now being used in 50 states and 23 countries.

Founder and President of the National Abstinence Clearing House in Sioux Falls, South Dakota, Leslie Unruh uses snakes to teach about STDs and the dangers of using condoms. “As she uncoils her nest of rubber vipers: *Herbie Herpes, Wally Wart, Hester Hepatitis, Albert AIDS, Lucy Loss of Reputation* – and don’t forget – *poor Pregnant Peggy Sue*, she tells young people about the risks of sex before marriage.” (Sternberg 2002) “Condoms,” she says, “are overrated. ‘We tell them condoms won’t protect your heart, that latex won’t stop human papilloma virus.’” (See also Brody 2003; quoted in Sternberg 2002)

Leslie Kantor, former director of the SIECUS Community Advocacy Project, conducted an extensive content analysis of Abstinence-Only Sex-Ed Programs produced and promoted by Christian Right groups that are used in public schools. She concluded:

These programs omit the most fundamental information on contraception and disease prevention, perpetuate medical misinformation, and rely on religious doctrine and images of fear and shame in discouraging sexual activity.

Given this introduction to sexuality in increasing numbers of public schools across the United States, how are young Americans conditioned to think about and negotiate their own and others’ sexuality? Once they marry – if they choose to marry – how will they deal with their sexuality and the sexuality of their partner? Even within the context of a heterosexual marriage, how are such negative – even terrifying images – suddenly transformed? And what about those who do not live within the confines of a heterosexual marriage; those who are gay, lesbian or transgendered; or those who find themselves without a partner, be it through death, divorce or never marrying? Where should the lines be drawn between private belief and public policy?

The Religious Right represents some 10 percent of the adult American population. Their concerns about teenage sex and teen pregnancy clearly resonate with a larger public but their solutions do not. Their influence on social policy has been disproportionate to their numbers for the vast majority of the American public is supportive of sex education. A 2004 report on “Public Support for Comprehensive Sexuality Education” indicates that 93 percent of parents of junior high school students and 91 percent of parents of high school students believe it is very or somewhat important to have sexuality education as part of the school curriculum. And young people? Eighty-two percent of adolescents ages 15-17 and 75 percent of young people ages 18-24 want more information on “how to protect yourself from HIV/AIDS and other STDs,” “the different types of birth control that are available,” and “how to bring up sexual health issues such as STDs and birth control with a partner.” (Hoff 2003: Pp. 70-71 and 111-112)

The electorate likewise shows support for comprehensive sexuality education: 63 percent of voters said they were more likely to vote for a candidate who supports comprehensive sexuality education, while only 10 percent of engaged voters supported abstinence-only-until-marriage programs in

public schools (“Mobilizing Support” 2002; *Sex Education in America* 2004:22) Even conservative Christians tend to support comprehensive sexuality education. A 1999 survey showed that eight in ten conservative Christians supported comprehensive sexuality education in high schools and seven in ten supported it in middle schools (Survey of America’s Views 1999).

In spite of over \$1.5 billion being spent since 1982, there are no sound empirical data that indicate that abstinence-only programs are effective; in fact, there have been very few evaluation studies of Abstinence-Only-Until-Marriage programs (Kirby 2001; Manlove 2004; “New State Evaluations” 2004; “Impacts” 2007). Empirical data also suggest that to the degree that an effect of comprehensive sexuality education has been identifiable, it has been found to *postpone* initiation of sexual intercourse; reduce the frequency of intercourse and number of sexual partners; increase the use of contraceptives; and reduce pregnancy rates among teens (Kirby [1997] 2001; Schorr 1998; “Teaching Fear” 1994). Why, then, do abstinence-only approaches appeal to many politicians and policy-makers, even when the majority of Americans support comprehensive sexuality education? What are the consequences of implementing abstinence-only approaches compared with comprehensive sexuality education that includes abstinence as a reasonable and often desirable option? No one is debating whether abstinence should be presented as a viable option and reasonable choice. What critics are questioning is how *abstinence-only- until-marriage* programs came to masquerade as *education* in public schools.

The Sexual Politics of Abstinence-Only

Since the early 1980s, the “family values” movement has been pushing abstinence-only-until marriage programs. In 1981, the U.S. Office of Population Affairs began administering the Adolescent Family Life Act (AFLA), a program designed to prevent teen pregnancy by promoting chastity and self-discipline. Crusaders for teen sexual abstinence then scored another major victory when Congress passed welfare reform in 1996. Overshadowed by the welfare-to-work aspects of the law was a provision to fund programs to teach children that sex before marriage is not only morally wrong but also dangerous to their health. Between 1997 and 2002, over half a billion dollars was spent on abstinence-only programs. At the same time, funds were diverted from comprehensive sexuality education programs, and international family planning assistance (International Family 1997). President Bush increased funding for abstinence-only by 25% for FY2006, while slashing funding for many other social programs in the name of deficit reduction, including funding for local schools, food stamps, child care, and health care for veterans. Many – from the Children’s Defense Fund to the Texas Baptist Standard – are questioning just how compassionate Bush’s policies are (Marus 2005; Children’s Defense Fund 2005).

International Consequences: From Domestic to Foreign Policy

These recent actions to limit reproductive health reveal the ways in which the United States is retreating from both its own previous position and that of its traditional allies around the world (LaFranchi 2004). Imposing the United States’ position on abortion practices of other countries with the “global gag rule,” reflects neither U.S. law nor U.S. public opinion. It also significantly impedes women’s access to family planning and contraceptive services by prohibiting U.S. family planning assistance to hospitals and health clinics in developing countries that also provide abortions or abortion-related information (Cohen 2001).

At the U.N. Children’s Summit in May 2002, U.S. Health Secretary Tommy Thompson argued for the teaching of abstinence as the preferred approach to sex education. According to a CBS World News report, “The three-day conference was long on rhetoric about the sanctity of childhood but short on consensus. Delegates at a U.N. session on children haggled... over a final declaration with the United States, the Vatican, and Islamic states in favor of sexual abstinence and against any hint of abortion for adolescents” (Ireland 2002; U.N. Children’s Summit Hits Snag 2002). Susan Cohen, writing for the Guttmacher Institute, reported that: “The United States delegation, siding with the Sudan, Iran, and Iraq both stupefied and angered the European (EU) and Latin American delegations which finally voted against the U.S. position.” Adrienne Germain, president of the International Women’s Health Coalition, bluntly stated:

This alliance shows the depths of perversity of the [U.S.] position. On the one hand, we’re presumably blaming these countries for unspeakable acts of terrorism, and at the same time we are allying ourselves with them in the oppression of women (quoted in Cohen 2002).

In its closing statement at the summit, the EU delivered a strong rejoinder to the United States. "Young people should be empowered to make appropriate and safe choices about their sexual behavior." The Spanish diplomat speaking on the EU's behalf argued: Young people "must be able to access high quality sexual and reproductive health information and services to achieve this, as we all agreed in Cairo and Beijing." Belgium's youth minister, Bert Anciaux, went further in a statement released after the summit. The U.S. approach, he said, reduces sex education to "a woolly discourse on abstinence and fidelity" that "does not fit in with the world of experience of millions of young people throughout the world." Echoing the sentiments of others, Anciaux commented that he was "amazed that, due to the pressure of extremely conservative lobby groups within the United States, the U.S. government has become an ally of all kinds of reactionary regimes." (Cohen 2002).

In January 2006, the Bush administration put out a call for new community and church groups to get involved in HIV prevention and care in 15 target countries, most in sub-Saharan Africa. One-third of the \$15 billion dollars that has been earmarked for AIDs prevention and treatment has been reserved for the promotion of abstinence and fidelity and \$200 million has been reserved specifically for groups with little or no government grant experience. According to State Department estimates, religious organizations accounted for more than 23 percent of all groups that got HIV/AIDS grants in 2005. Among those winning grants were: Samaritan's Purse, which is run by Billy Graham's son, Franklin; World Vision; World Relief, founded by the National Association of Evangelicals (\$9.7 million for abstinence work in four countries); Catholic Relief Services (awarded \$6.2 million to teach abstinence and fidelity in three countries); \$335 million in a consortium providing antiretroviral treatment; and \$9 million to help orphans and children affected by HIV/AIDs. The group offers "complete and correct information about condoms" but will not promote, purchase or distribute them, said Carl Stecker, senior program director for HIV/AIDS (Beamish 2006) Such positions have distanced the United States even further from the worldwide consensus on reproductive and sexual health issues that the United States had once been instrumental in shaping at the 1994 International Conference on Population and Development in Cairo, and the 1995 World Conference on Women in Beijing.

Cross-National Data on Teen Sexual Behavior

The United States leads the industrialized world in its high rates of teenage pregnancies, abortions, and STDs. Although the U.S. *teen pregnancy rate* has decreased during the last decade, it is still nine times higher than that of the Netherlands, nearly five times higher than in Germany, and nearly four times higher than the rate in France. The *teen birth rate* is also much higher in the United States, nearly 11 times higher than in the Netherlands, nearly five times higher than the rate in France, and nearly four times higher than in Germany. The *teen abortion rate* is nearly eight times higher in the United States than in Germany, nearly seven times higher than in the Netherlands, and nearly three times higher than in France (Feijoo 2001). Much higher rates for HIV, syphilis, gonorrhea and chlamydia likewise distinguish the United States (Darroch et al. 2001; Feijoo 2001).

Cross-national studies reveal that differential rates in teen pregnancy are influenced by cultural attitudes towards and education about sexuality, the accessibility of health care and contraception, the relationship between religion and politics, and the degree of economic inequality (Jones et al. 1996). With one of the highest rates of infant mortality, child death, child poverty, and economic inequality between rich and poor in the industrialized world, the U.S. is not faring well (Brouwer 1998; Henshaw 2004; Kids Count 2000; "New Studies" 2005; Shapiro 1992; Singh et al. 2000; *State of America's Children* 2004). Rather than deal with these complex and interrelated issues, however, U.S. policy too often addresses teen pregnancy as an isolated social problem and increasingly advises young girls to "*just say no.*"

Just Say No

Abstinence-only advocates advise young people to not have sex; their aim, however, is to curtail sexual activity for anyone not in a heterosexual marriage. Uneasy about teen sexuality, homosexuality, the increase in out-of-wedlock births, and the erosion of the patriarchal, nuclear family, they emphasize the dangers of sex and the hazards of sexual relationships outside of marriage (see Gallagher 1999). Fear rather than affirmation, rejection rather than acceptance, and denial rather than knowledge about

sexuality tend to dominate abstinence-only materials, and serve as a chilling effect on contemporary American research and social policy.

For example, in 1987 a number of institutes, including the National Institute of Child Health and Human Development, The Center for Disease Control and Prevention, the National Institute on Aging, and the National Institute of Mental Health supported a proposal by Edward Laumann, et al., to undertake an ambitious study of sexuality in America. Scientists in these agencies “wanted more general studies of sexuality to then examine such issues as teen pregnancy, sexual dysfunction and child abuse.” But soon after the contract was awarded, the researchers noted that (America’s) “national squeamishness about sex” began to emerge (Michael et al. 1994: 27; Nussbaum 1997). Government officials in particular were squeamish about the inclusion of questions about masturbation – evidenced also in the forced resignation of former General Surgeon Jocelyn Elders for using the M-word (masturbation). Political battles followed. Sen. Jesse Helms introduced an amendment to a funding bill that specifically prohibited the government from paying for such a study. As a result, the researchers conducted the study through private money and the sample was reduced from 20,000 to 3,500 adults and no one under the age of 18 was included in the sample (Boonstra 2001; Nussbaum 1997:225). As Martha Nussbaum argued in *Cultivating Humanity*: “Suspiciousness of sex research had triumphed, impeding the progress in inquiry” (1997: 225).³

In May 2002, the House of Representatives passed H.R. 473, the Personal Responsibility, Work and Family Protection Bill, which renewed funding of abstinence-only programs at the level of \$50 million a year for the next five years. While there was opposition to the bill by many, including Rep. Lois Capps (D-Calif.) who argued that “abstinence programs are exaggerating the failure rate of condoms” and using “terror techniques to keep teens from having sex,” the bill passed by a vote of 229-197 with committee Republicans arguing that “it would be impossible to agree on what information is medically accurate.” The Waxman Report (December 2004), which examined school-based sex education curricula, concluded that many young people are receiving medically inaccurate or misleading information, often in direct contradiction to the findings of government scientists. (Connolly 2004; see also “Texas Teens Increased Sex After Abstinence Program” 2005; Waxman 2004). And in 2006, the Society for Adolescent Medicine (SAM) called abstinence-only programs “scientifically and ethically flawed” and found that the “efficacy of abstinence-only interventions may approach zero.” That same year, the Government Accountability Office (GAO) admonished Health and Human Services for its lack of oversight in ensuring that these programs provided “medically accurate information about condom effectiveness.” In 2007, after years of delay in its release, a federally supported evaluation of abstinence-only-until-marriage programs funded under the 1996 federal welfare reform law has proven the programs ineffective in changing teens’ sexual behavior. The report, conducted by Mathematica Policy Research Inc. on behalf of the U.S. Department of Health and Human Services, found no evidence that abstinence-only programs increased rates of sexual abstinence. The 10-year study ordered by Congress found that “Youth in the [abstinence-only] program group were no more likely than control group youth to have abstained from sex and, among those who reported having had sex they had similar numbers of sexual partners and had initiated sex at the same mean age” (“We Are Not Your Pawns” 2007).

In contrast to the current U.S. trends in legislating abstinence-only policies despite evidence that they do not work, Denmark – and many other countries both in the industrialized and developing world – continue to implement more comprehensive research and sexuality education programs, believing that it is important to inform and educate young people about sexuality and contraception. They believe that adolescents have a right to information (Alford 2005).

Attitudes Toward Teen Sexuality in the United States and Denmark

Since the 1960s, Religious Right political groups have waged a campaign against the teaching of comprehensive sexuality education in public schools. During the late 1960s, conservative Christian organizations like the Christian Crusade published booklets with titles like: “Is the Little Red Schoolhouse the Place to Teach Raw Sex?” in which they argued that parents were the only appropriate source for information about sexuality (Kantor 1994; “Teaching Fear” 1994: 11). Phyllis Schafly, head of the conservative Eagle Forum, went as far as to argue that exposing children in public schools to sex-ed may constitute child abuse (1985). Their position was clear: any discussion about sex belonged in the home, not in the schools.

By the 1980s, however, it was clear that the Religious Right was having little success in removing sex-education from the schools. As a result, conservative Christian groups shifted strategies and began

to promote “abstinence-only” programs in the public schools. Rallying grass-roots support against comprehensive sex-education, the Eagle Forum, Concerned Women for America, Focus on the Family, and Citizens for Excellence in Education all devoted major resources to promoting “abstinence only” curricula as a substitute for comprehensive sex-ed programs. Through a range of educational materials, videotapes, and promotional advertising, they have effectively promoted curricula that teach fear and withhold vital information about prevention of AIDS and teen pregnancy. Programs such as “Sex Respect,” “Facing Reality” and curricula developed by Teen Aid (Me, My World, My Future; Sexuality, Commitment, and Family) initially received federal Title XX funding through the Adolescent Family Life Act (AFLA).

Beyond Sex: Teaching Traditional Gender Roles

Central to the sex-ed debate is the Religious Right’s attempt to preserve patriarchy and to privilege men’s rights over women’s rights – and parental rights over children’s rights (Bendroth 1993; Hawley 1994; Howland 1997; Marty and Appleby 1999; Riesebrodt 1993). The idea of equality between men and women is threatening to many advocates of abstinence-only policies for they are working not only to prevent sex before or outside of marriage; they are also fighting to preserve the “traditional,” patriarchal, nuclear family. The pro-marriage movement goes hand-in-hand with this (Gallagher 1999; Stacey 2002) – as does the promotion of old-fashioned gender role norms.

As one reads through the abstinence-only materials, one finds an old and mixed message – it is the story of sex as a story of predators and prey – and women, beware. Men are considered to be sexual beings who beyond a certain point, cannot hold back – and therefore, women must. Such messages are abundantly clear in Patricia Driscoll’s, *Sexual Common Sense: Affirming Adolescent Abstinence*. The turning point, according to the Arousal Time Line found in *Sexual Common Sense: Affirming Adolescent Abstinence* is “the prolonged kiss.” After this point, there is no turning back. While females too have sexual instincts, they take longer to become aroused and, therefore, are given greater responsibility in exercising constraint.

The following excerpt from “Sex Respect” contextualizes the Arousal Time Line. Presented here is a fictitious dialogue between TV host, Jane Bright, and psychologist, Dr. Wise.

Jane: We have many teenagers in our “Respecting Sex” audience, Doctor, so I think it would be helpful to them if we talk about how sexual feeling gets stronger as two people become increasingly intimate physically. Let’s call it the stages of sexual arousal.

Dr. Wise: Fine, Jane. As you can see, it shows the stages of sexual arousal.

KNOW the Progression of Sexual Feeling with increased Physical Intimacy **Sexual Arousal**

Being Together	Hand Holding	Simple Good Night Kiss	Prolonged Kiss	Necking	Petting	Heavy Petting	Mutual Sex Play	Sexual Intercourse	End of Relationship in its Present Form
No genital feeling aroused			beginning of danger	Male Genital feeling aroused	Female Genital feeling aroused	Female Genital feeling aroused			

*Chart from Patricia B. Driscoll, *Sexual Common Sense: Affirming Adolescent Abstinence*

Dr. Wise: Males thinking about the opposite sex tend to focus on the sexual organs, their own and those of the imagined partner. Females, when they visualize a sex partner – I should say love partner – think

not of the male's genitals, but rather of his whole body as an instrument for giving warmth, closeness and security. In fact, a male can experience sexual release with a woman he doesn't even like, whereas a woman usually can't do so unless she loves her partner.

Jane: Dr. Wise, do you think this difference is a good thing?

Dr. Wise: Yes, it helps girls cope with the sexual aggressiveness of boys. It helps them be more level-headed about sex.

The Religious Right's concern about sex and sexuality focuses on issues regarding social order and control – especially over women's bodies and desires. The adage that “good girls don't” but “real boys do” continues to engender the double-standard that defines male and female in opposition to one another, although many of the abstinence-only curricula are pushing for abstinence for all pre-marrieds. This framework, however, reveals contradictions. From a conservative Christian perspective, humans are not animals (which is at the crux of the evolution-creation debate), rather they stand only a little lower than the angels. Yet, they are also seen as no different from animals driven by sexual instincts: once aroused, there is no turning back. These distinctions sound very familiar, for they are a part of the “sexual wisdom” of American culture that go well beyond the confines of conservative Christian thinking. Women are considered to be less controlled by their sexuality and therefore more responsible for both their own sexual behavior and that of men. If she is not, then warns T.V. evangelist James Robison, whose book *Sex is Not Love* sold over half a million copies, it is the worst thing that can happen to humanity.

In “God's Angry Man,” William Martin describes evangelist James Robison's tirade against sex, “his prime target, selected at least in part because he rather obviously understands its powerful allure.” In a talk to young people, Robison “spoke in excited, almost lurid tones of the response a girl's body can stir in a young man's loins.”

Man, when you see a girl's legs or breast, it's supposed to bother you. If you can look at her legs and her body and it doesn't bother you, you are a pure queer.... Girls, if your boyfriend walks out of here tonight and looks over at your legs just shining in the breeze and says, your legs don't bother me, you can put it down – you've either got hideous legs or he's a pervert.

– Robison (quoted in Martin 1981: 157)

Robison then goes on to talk about the woman's responsibility in taming the male beast:

Sex before marriage develops sensual drives that can never be satisfied and may cause a man to behave like an animal. Some girls become that way too, but most of them don't. When they do, it's the most awful thing that can happen to humanity.

– Robison (quoted in Martin 1981: 223)

More awful, we must ask, than rape? Than millions of people dying of AIDS? Of having unwanted children who cannot be cared for by their parents, or a society that refuses to pay for adequate health care for all or raise the minimum wage so that people working full-time rise above rather than fall below the poverty line? The renewed efforts to undermine sexuality education are not just about sex; they are part of a broader challenge to public education which centers around parents' vs. children's and states' rights.

Gender and Sexual Politics of the Religious Right

The attempts of the Religious Right in the United States to preserve parental rights over those of children's rights reveal the kind of hostility directed towards women and children. In his critique of the Fourth World Conference on Women, Gary Bauer, president of the Family Research Council, wrote that feminists wanted “to enshrine the ‘rights’ of adolescents to information and medical services where sex and AIDS were concerned, without ‘interference’ from parents” and that although, “parents rights were not completely overruled, they were subordinated to ‘the best interests of the child’.” Moreover, “these radical women are trying to achieve greater equality between women and men in economic and political spheres, so that women can better support their families and children” (Bauer 1995).

In his August 1995 FOF Newsletter, "The Family Under Fire By the U.N.," James Dobson warns that the U.N. Conference on Women represented:

"the most radical, atheistic, anti-family crusade in the history of the world.... The extremists who are... promoting this conference are a million miles outside the American mainstream.... It is a mystery to me how such enormous threats to our spiritual and cultural heritage have slithered into our midst without due notice or alarm."⁴

Dobson goes on to warn his readers, radio audiences and congressmen that while "the Agency for International Development will channel hundreds of millions of dollars to support women's reproductive and sexual rights and family planning services, the only hope for derailing this train is the Christian church."

Different Discourses: The Danish Approach

The dominant Danish discourse about sexuality and reproductive and teens' rights is strikingly different from the dominant discourse in the United States (Adolescent Sexual Health 2001; see also Heins 2001; "Sexuality Rights" 1995). In Denmark, the rights of adolescents to sexual and reproductive information and choice are framed within the context of a *social democracy* and have been embedded in Danish legislation since 1966. As Nell Rasmussen, Director of the Danish Family Planning Association, described in an interview in 1998:

Denmark became the first country in the world to grant young people, regardless of age, access to contraception and contraception counseling... It's about human rights. In order for you to act responsibly, you have to have choices – government or parents or whoever the decision makers are cannot demand responsible behavior of teenagers or of the population if they don't give them an opportunity to make their own choices based on sufficient information.... We have developed an enabling environment for young people to support themselves in the process of making their sexual identity and realizing themselves as becoming adults – and sexuality is an important part of becoming an adult.... Young people have the right to ask and they have a right to be met with respect.... they shouldn't be let down, they should be supported.

Rasmussen also argued that progressive social policies recognizing adolescent sexuality have not promoted promiscuity.

From the outside, (it seems that) we in Denmark have the most liberal system of adolescent sexual and reproductive health and rights. Seen from the inside, however, we don't tend to think that we have a very liberal system. We tend to think that we have a very practical and pragmatic approach to the fact that young people do start having sexual relations somewhere in their teens. In Denmark actually rather late: around 16.7 for boys and even 16.9 for girls, and it really hasn't changed very much over time. And 80% of young people use contraception at first intercourse. That may not be enough but it's a very favorable situation. (See also Knudsen 1999.)

Historically, dominant Danish attitudes towards sexuality were not so different from mainstream American ones (Centerwall 1995; "Sexual Rights 1995). Within the past three decades, however, we find Danes much more open about sexuality and contraceptive use than Americans (David et al. 1990). The Danish government has mandated the teaching of comprehensive sexuality education as part of the general school curriculum. Their sex education programs tend to be quite pragmatic and straightforward, without being graphic, which is hard for many Americans with whom I've talked to envision.

One of the sex ed videos used in elementary schools, "Where Do Babies Come From," is a cartoon animated video that presents four children talking, laughing and giggling with one another as they share questions and information about where babies come from. Covering female and male anatomy, menstruation, intercourse and birthing, the video presents a lot of information in a very funny yet direct way. When I showed this to my college class, students said that it was the best - the most informative and the funniest - "documentary" they had ever seen on sexuality education. The video demystifies sex and invites the audience to laugh with the children and couple, who are loving, affectionate – and yes – sexual

with one another. The message reflects the reality that kids are curious and have lots of questions, and that talking about sex can be both embarrassing and fun – and that it's as much about feelings, caring, and love, as it is about biology.

Young People's Perspectives

Individual interviews and co-ed classroom and small-group discussions (both same sex and co-ed) with approximately 100 Danish and 300 American teens revealed significant differences in how they spoke about sexuality and relationships. The Danish teens tended to talk about sex in terms of mutual pleasure and responsibility, whereas the American teens tended to speak in terms of performance and achievement (as in “feeling inadequate if they didn't *achieve* orgasm”). When asked when “no means no,” both Danish boys and girls were quite clear: “when someone says no, that means no.” Their language did not assume that the male was the predator and the female the prey who was the one pressured into having sex. For example, one 15-year-old boy in the presence of his male and female classmates said:

If I don't feel like it, then I want that to be OK. If my girlfriend doesn't like something, well then we try something else. If one of us doesn't want to, then we find another way. Or we go for a walk.

A 15-year-old girl in the same class commented:

If a girl says no and she really means yes, well then she's the one who misses out – she could have said yes if she wanted to.

In discussions with American teenagers, there was much less consensus. Deciding when “no meant no” was seen as a very confusing judgment call, and there was greater tolerance for – or at least more willingness to not speak out against – sexually aggressive behavior. In the American classrooms, those who came right out and said “if someone says no, that means no” were in a definite minority. Typically there would be a prolonged conversation about whether a person (always assumed to be a female) was clear in her own mind, whether she really meant no when she said no, how forcefully or frequently she said no, whether she was giving double-messages either verbally or non-verbally, what the girl was wearing, and how she was acting when she said no. The same ambivalence or confusion was expressed in small-group discussions and individual interviews as well.

The discourse among American teenagers also was gendered in ways that the Danish discourse about sexual responsibility and responsiveness was not. In the American context, only females were referred to as saying “no” or being ambivalent about having sex; not once was the male pronoun used to speak of someone saying “no.” When it came to talking about women's ambivalence, the discussion often led to girls and women being untrustworthy rather than confused or conflicted about what they wanted, or their being unclear in their expression of what they did and did not want. The blame for *miscommunication* was placed, as much by other women as by men, on the female. Often the conversation in the American classroom would fall back on: “I have known girls who tease men;” “who say no when they mean yes;” “you can't blame the guys.” “If the girl teases a guy, then she has to be ready to get what she gets.” “After a certain point, you can't expect a guy to just stop.” In the Danish context, both male and female teenagers put responsibility on the individual to say what he or she meant and they held the individual responsible for *his or her* actions (including contraceptive choices). In the American context, more responsibility and blame was placed on the female, especially if something went wrong. One 16-year-old American girl told me:

I think sometimes girls are afraid to say “no.” They're afraid of what their boyfriends might think. Or, if they do say no, and then the guy goes ahead anyway, they don't want to admit they said no because that would mean that the guy didn't care about them. I know I've done that. I don't like that about myself, but I've done it. And I have friends who have too.

It may be easier for some of these girls to disregard their own desires and voices than to believe they were forced to have unwanted sex from those whom they thought they loved or who they thought loved them. This seemed to be much less of a quandary for the Danish girls with whom I spoke. While some of them had sex that was not particularly pleasurable, they were less likely to have experienced

unwanted or forced sex – and much more likely to know what they wanted and didn't want. They also were much less likely to conflate love and sexual desire. For the Danish young people and their parents, it was ok to have sex with someone once you turned 16 or 17 – validation did not depend on how much you were “in love” with the other person, but how responsible you were in making decisions. Becoming sexual was considered a part of normal development, of growing up.

Love is such a strong word. I have a boyfriend and I care about him. We're having sex and that's OK with my parents. They know. They just want us to be protected. He can sleep over at my house. But, I can't say I love him. Love and hate are such strong words. My parents, and my sisters and my brother – I love them. I've known them all my life. But my boyfriend, I've only known him a few months. We need to know each other more. It should be really deep when you say that.

– 17-year-old Danish girl

I really love my boyfriend. So I think it's OK I'm having sex with him. But if my parents caught me, they would kill me!

– 17-year-old American girl

Lene, the Danish girl, takes love quite seriously. It is not a word to be thrown about easily. Sex, on the other hand, is not a big deal. It's fun, but you need to take care to use protection so you don't get AIDS or an infection. Elena, the American girl emphasizes love. Because she's in love, it's OK to have sex. Elena is both sincere and adamant when she says, “I really love my boyfriend,” but then she leans forward and whispers, “But if my parents caught me, they would kill me. If they knew, it would be all over. I don't know why they can't understand how much we love each other.”

Another striking contrast between the Danish and American teenagers was their attitude towards alcohol and sex. While the American teenagers reported that they or their friends often drink in order to lower their inhibitions to have sex, the Danish teenagers believed that alcohol and sex were not a good match. A small group of 15- to 17-year-old Danish girls commented:

It ruins it if you're drunk I think.

If the boy's very drunk he can't get it up. He can't get [an] erection and that ruins it a lot. So I think you shouldn't do it if you're drunk. And you forget the condom if you're drunk. It's easier to have good sex if you're not drunk.

A fifteen year-old boy concurred,

If you're drunk, you can't do it very well and it doesn't feel as good. If I really like a girl, I don't drink before we have sex.

What both Danish and American young people emphasized was their desire for more information and discussion about feelings, emotions, and relationships. They wanted more communication with their parents and teachers. Many of them faced problems at home: a parent's alcoholism, abuse, depression that often made that communication difficult.

For example, Laura, an American 14-year-old girl shared her story just after attending an abstinence-only assembly at her rural school in Central Pennsylvania. Unlike previous years when Planned Parenthood had given the assembly, Laura listened to Molly Kelly, a self-identified and nationally well-known “chastity educator” who gave the presentation for Heartbeat Community Services. Mrs. Kelly's public relations materials indicated that she had talked with over 100,000 young people, drawing from the “Postponing Sexual Involvement” and “Managing Pressures Before Marriage” curricula, both of which use “Sex, Lies, and the Truth” and “No Apologies” as video resources in their training “in order to reinforce the risks of sexual involvement.”

Mrs. Kelly criticized the contraceptive industry as a multi-million dollar business that's “ripping off young people.”

Someone's making lots of money off of other people's sex. People talk about safe sex – but the contraceptive industry offers no guarantee for their product. Condoms have a 10-17% of failure rate. But you can't take the condom or pill back if it fails. What if there was an airline crash and

the airlines responded, "well, we get there 83% of the time?" (Lots of laughter). The stakes are high. With sex, you either gain a life or lose a life. AIDS is a lose-a-life kind of situation.

Mrs. Kelly argued that it was adults who were irresponsible in giving young people more and more devices that only made matters worse.

They're giving you the tools that give you the problems in the first place – and then they tell you it is 'safe sex.' There's no such thing as safe sex. There is a risk. We can't call it safe or safer. There's only saved sex.

After the assembly, I had the opportunity to talk with Laura in a small group of 8th grade girls. While the others were laughing that it was "a little too little and much too late," Laura quietly but passionately began talking:

My Mom got pregnant when she was 16 and had to really struggle. Then when my older sister got pregnant at 16, my Mom was really angry. She wouldn't talk to her about sex or getting pregnant; and she doesn't talk to me. She just yells and tells me "not to do it." You can't have a reasonable conversation with her about it. And now it's really crazy at home with my sister's baby, and everyone crying and screaming. It's nuts. I think we need to know more about sex not less.

Laura felt left in the lurch both at home and at school when it came to sex education. The school counselor who sat in with us agreed: "They deserve more – better." Both American and Danish teenagers wanted parents and teachers to trust them more, respect them more, and teach them more. They believed they needed more, rather than less, information but it was the American teenagers who pointed to the number of their friends, sisters, or school mates who had gotten pregnant as proof.

Rather than being sheltered from the world, children live in families which are embedded in the world. Young people have to deal with the problems that the adults who raise them face (Males 1996; 1998), and yet legislation like the Family Protection Acts strive to protect parents' rights over children's rights and potential interference in family life (Rose 1986; 1993). In the case of sexuality education, rather than recognizing the realities of young people's lives and their right to information, many advocates of the Religious Right are trying to impose a gag order that will keep children isolated, ignorant, and therefore, more vulnerable.

Bjarne Rasmussen, AIDs-Secretariat at the Frederiksberg Hospital and principal investigator for and author of "Young People's Sexual Behavior" ([1989] 1998) explained in a 1998 interview:

It's important not to cheat young people... to be honest in sexual education, especially in the schools because if the young people find out that you are cheating them, they won't believe you later on. It's very, very important to get a discussion going.... to make young people understand that they must make an active choice and say 'I want to use contraception' or 'I don't want to use contraception.'

Conclusion

Who then is going too far? The Danes in providing information or the Americans in withholding information? While the onset of sexual activity for Danes is similar to that of Americans, both averaging around 16.7 years, Danish teenagers are more likely to use contraception and are much less likely to get pregnant, have an abortion or contract a sexually transmitted infection. There are also proportionately fewer Danish 11- to 14 year olds who have been engaged in sexual activity (B. Rasmussen [1997] 1998). This is an important finding. Using 1988 data from the United States NSFG and the Guttmacher Institute, Gleit estimated that among U.S. girls who were mothers by the age of 15, 39 percent of the fathers were ages 20-29; for girls who had given birth to a child by age 17, the comparable figure was 53 percent (Gleit cited in Brown and Eisenberg 1995:205; see also Moore 1995). While these data say nothing about whether any of these relationships involved sexual coercion or violence, the significant age difference at this point in the life cycle suggests an imbalance of power. A number of studies have also revealed that a history of childhood sexual abuse among teen mothers is common (Boyer and Fine 1992). Flemming Balvig, a leading criminologist and statistician in Denmark, has attributed the Danish decline in the rate of

reported rapes to two primary movements: the women's movement and sexuality education which focused on sex equity, mutual responsibility and respect, and bodily integrity (Balvig 1997; Interview with B. Rasmussen 1998).

In the American context, special interest groups vie for power and often have disproportionate influence. In response to the efforts by the Religious Right, a plethora of professional organizations, including medical, government, and religious agencies, have given their support to comprehensive sexuality education and challenged abstinence-only policies on ethical, medical, and civil liberties grounds (see for example, policy statements by the American Public Health Association, the American Medical Association, the American Academy of Pediatrics). Many groups signed a letter to President Bush stating that they "are committed to responsible sexuality education for young people that includes age-appropriate, medically accurate information about both abstinence and contraception, [and] urge [him] to reconsider increasing funding for unproven abstinence-only-until-marriage programs."⁵ In January 2006, a group of physicians wrote in their review article for the *Journal of Adolescent Health* that:

We believe that current federal abstinence-only-until-marriage policy is ethically problematic, as it excludes accurate information about contraception, misinforms by overemphasizing or misstating the risks of contraception, and fails to require the use of scientifically accurate information while promoting approaches of questionable value (Santelli et al. 2006).

Abstinence-only proponents not only provide medical misinformation and promote fear and ignorance, they also fail to plan, fund, and implement effective social policy that could more effectively curb teen pregnancy and the spread of STIs – and provide better economic, educational, and health opportunities for all young people. Experts on teen pregnancy and child welfare such as Marianne Wright Edelman and Kristin Luker (1997) convincingly argue that teen pregnancy is less about young girls and their sex lives than about restricted horizons and the boundaries of hope. Yet, the Religious Right continues to blame the "fallen girl/woman," the feminization of men, the decline of two-parent families, homosexuality, and the media for the ills of our society rather than economic and structural forces that perpetuate inequality between men and women, and between the enriched and impoverished classes. In the battle over sexuality and choice, it's girls' and women's bodies, lives, and livelihoods that are all too often sacrificed – blamed, marginalized and held accountable for creating the problem of teen pregnancy.

The Religious Right has not achieved its agenda, but it has produced a chilling effect on comprehensive sexuality education. A 1998 study by researchers at The Alan Guttmacher Institute found that among the seven in ten public school districts that have a district-wide policy to teach sexuality education, the vast majority (86 percent) require that abstinence be promoted, either as the preferred option for teenagers (51 percent have such an *abstinence-plus* policy) or as the only option outside of marriage (35 percent have such an *abstinence-only* policy). Only 14 percent have a *comprehensive* policy that addresses abstinence as one option in a broader education program to prepare adolescents to become sexually healthy adults. In almost two-thirds of district policies across the nation – those with comprehensive and abstinence-plus policies – discussion about the benefits of contraception is permitted. However, in the one-third of districts with an abstinence-only policy, information about contraception is either prohibited entirely or limited to discussion of its ineffectiveness in protecting against unplanned pregnancy and sexually transmitted diseases (Dailard 2000). Yet, by 2007, nine states have turned down federal abstinence money in order to teach comprehensive sexuality education.

In February 2005, President Bush proposed a \$2.57 trillion federal budget for fiscal year 2006 that would substantially cut or eliminate many domestic social programs, while creating or boosting funding for a handful of others that would promote "traditional family values." Even the Texas Baptists are questioning just how compassionate this is (Marus 2005). In *God's Politics: Why the Right Gets It Wrong and the Left Doesn't Get It*, Reverend Jim Wallis, editor of the progressive evangelical magazine, *Sojourners*, argues that "the religious and political Right gets the public meaning of religion mostly wrong – preferring to focus only on sexual and cultural issues while ignoring the weightier matters of justice. He believes the secular Left doesn't seem to get the meaning and promise of faith for politics either – mistakenly dismissing spirituality as irrelevant to social change." In the interest of all children, as well as family well-being, we need to take seriously a broad-based approach to both social problems and social policy that is based on empirical evidence and a recognition of the pluralistic society in which we live. This is what democracy is all about. In the final analysis, rather than having gone too far, the United States has not gone nearly far enough in providing reliable information, education and health care to our children.

