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Sex Education: A Multifaceted Solution

When asked the question, “what is the purpose of sex education?” most would likely answer that it is to prevent teenage pregnancies and the spread of STIs (sexually transmitted infections). This is undeniably true; teen pregnancies are devastating and the cause of so many unfortunate situations, and STIs are not only incredibly dangerous and painful, but also, in some cases, permanent. Nearly everyone can agree that these issues are important and should be prevented as much as possible. The way in which they should be handled, however, is a fairly controversial subject of debate. Currently, public schools in the United States primarily function on the basis of abstinence-only education, which encourages students to avoid sex altogether. The abstinence-only argument states that if you don’t have sex, the chance of getting pregnant and getting an STI is 0%: a statement that is appealing due to its simplicity and ease. There are many who vouch for this style of teaching due to religious reasons as well, with various faiths emphasizing that sex should only happen after marriage and for the purpose of starting a family. Changing the way sex ed is taught has the potential to be messy and controversial, because parents often feel that they should have full control over what their children are taught about such intimate topics, especially when they conflict with important and sacred beliefs. However, there is a strong case stating that this change is imperative and fully worth the controversy that would come along with it.

Those who advocate against abstinence-only education argue that although abstaining from sex guarantees no teen pregnancies or STIs, teaching only abstinence in public schools is ineffective against these problems due to the nature of adolescents and human beings in general. This case asserts that providing thorough and comprehensive information on safety practices and contraceptives is the best way to prevent the obstacles that come with sex. Usually, there is an emphasis on teen pregnancies and STIs when discussing this debate because these are the issues most people typically assume sex education is trying to solve. What many fail to consider is the plethora of additional problems that could be prevented if we reframed the way sex education is taught. When it comes down to it, sex is far more than just STIs and teenage pregnancies—it can be a fundamental part of most adolescents' lives and can have life-changing effects on them, for better or for worse. If done properly, real, comprehensive sex education could help millions of young people protect themselves against sexual assault, form a better understanding of their personal identity, develop stronger empathy and respect for other people, and navigate the world of sex and love in a far safer, healthier, and more deliberate way.

Currently, the abstinence-only style of education is what the majority of students in the United States receive. One might think that sex education would be progressing more over recent years, but in actuality:

. . . between 2002 and 2014, the percentage of schools in the U.S. that require students to learn about human sexuality fell from 67 percent to 48 percent, and requirements for HIV prevention declined from 64 percent to 41 percent. In 1995, 81 percent of adolescent males and 87 percent of adolescent females reported receiving formal instruction about birth control methods; by 2011-2013, only 55 percent of young men and 60 percent of

young women said the same. (Kirby et al.)

These statistics show that education about STI protection and contraceptives is not only lacking, but actually declining over the past decade or so.

Discussing personal experiences with some of my peers and listening to their stories has been very eye-opening as well; not one classmate or friend I have talked to about this topic has reported receiving genuinely helpful and informative sex education in public schools. At my middle school, during one lesson the boys and girls were separated into different rooms, and the girls were taught about the menstrual cycle, lectured on why we should wait until marriage to have sex, and shown one disturbingly graphic video about sex trafficking and STIs. In high school, we had about a week of health class during which we were told, once again, to wait until marriage to have sex, and shown horrifying images of STIs on the projector to be permanently burned into our minds. In both middle and high school, I left those brief courses feeling uneasy and disturbed, but eventually moved on with my life generally unaffected by them with no new knowledge or valuable lessons gained. Furthermore, I have not met a single person who chooses to stay abstinent because of what they learned in their middle or high school sex education class.

My personal experience is one example of the ineffectiveness of abstinence-only programs, but there are far more instances that display it even more clearly, including various studies used for research around the world. In 2012, a study was conducted by the U.S. Centers for Disease Control and Prevention that investigated 66 comprehensive sex ed programs and 23 abstinence-only programs (Kirby et al.). The study's results showed that "comprehensive risk reduction programs had favorable effects on self-reported current sexual activity, number of sex partners, frequency of sexual activity, use of protection (condoms and/or hormonal contraception), frequency of unprotected sexual activity, STIs, and pregnancy" (Santelli et al. 4).

In contrast, the programs investigated that used AOUM (Abstinence Only Until Marriage) showed “insufficient evidence of a change in adolescent abstinence, other sexual behaviors, or other sexual health outcomes” (Santelli et al. 4). This is just one of multiple analyses that show similar results. There was another evaluation of U.S. based abstinence-only programs conducted for the USG that found that “youth in AOUM programs were no more likely than participants in control groups to abstain from sex, and if they were sexually active, the two groups had similar sexual behaviors including the number of partners and the age at initiation” (Santelli et al. 5). There is overwhelming evidence that abstinence-only simply isn’t the solution to reducing the spread of STIs and teenage pregnancies, and the reason for this is likely just that adolescents, by nature, are bound to engage in sexual activities no matter what. While abstinence until marriage is a perfectly valid and respectable path to take out of one’s own volition, it is illogical to assume that every single student being taught abstinence will actually listen and refrain from sex. Not only that, but these programs are exclusionary to those who may not plan on ever getting married, as well as disrespectful and isolating to those who may have already had sexual experiences or been sexually assaulted. Though there is still debate on the best way to go about reframing sex education, it is abundantly clear through statistical evidence, personal experiences, and basic reasoning that our current system is not working and abstinence-only education is ineffective.

So, if teaching abstinence doesn’t work, then what does? The aforementioned analysis by the U.S. Centers for Disease Control and Prevention observed that risk *reduction* is more successful than risk *avoidance*, and that risk reduction is a necessary component in creating a more effective sex ed program. Rather than assuming that students will avoid sex altogether, it would be beneficial to give them the resources and support they need to navigate the obstacles

and protect themselves. In addition to STIs and unwanted pregnancies, there are many more risks that come with sexual activity that need to be addressed as well. Negative sexual experiences can cause severe trauma and psychological damage, which can be seen by some as yet another reason to encourage abstinence. Robert Rector advocates for AOUM education making the case that “young people who become sexually active are vulnerable to emotional and psychological injury as well as to physical diseases. Many young women report experiencing regret or guilt after their initial sexual experience” (Rector 2). This statement is true; a lot of pressure can be put on women to engage in sexual activity from a young age, sometimes resulting in damaging and self-destructive behaviors. Rector’s method of solving this issue, however, is risk avoidance. He is making this claim under the assumption that abstinence-only education is actually effective at achieving its goals. An alternative solution to this problem that is more centered around risk *reduction* would be to thoroughly educate students on the strength of the emotional impact that sex can have on a person, in both positive and negative ways. Students should be shown complete information and be made fully aware of all the risks, physical and psychological, with a strong emphasis on self respect and careful deliberation in making sexual choices. There is a common misconception that straying from abstinence-only education means encouraging all students to have sex, when really, comprehensive sex education should exist to offer more options in *addition* to abstinence and ensure that everyone has the knowledge and resources they need to make educated decisions for themselves.

Another important matter to consider is that taking only a negative approach to sex can cause teens to form an unhealthy relationship with it. When sexual activities are only portrayed as dangerous and disgraceful, adolescents often feel guilty or ashamed for enjoying them which can result in destructive behaviors (sometimes even addiction). This is why it is so important to

take a positive approach to sex education along with describing the risks. Proper sex education:

not only provides children and young people with age-appropriate and phased education on human rights, gender equality, relationships, reproduction, sexual behaviours risks and prevention of ill health, but also provides an opportunity to present sexuality with a positive approach, emphasizing values such as respect, inclusion, non-discrimination, equality, empathy, responsibility and reciprocity. (UNESCO)

It is imperative to acknowledge that sex *can* be a good thing if done with proper safety precautions, well-aligned intentions, full consent, and thorough knowledge of all possible consequences.

When discussing sex education, typically the focus is assumed to be sexual intercourse and high school-aged students. However, the category “sex education” can cover a wide array of topics such as human anatomy, puberty, self discovery, and sexuality. These topics don’t just become important in high school—they affect us all starting from childhood. Saskia de Melker discusses the ways that schools in the Netherlands teach children about these topics, starting in elementary school. Melker reports that lessons in the Netherlands are “designed to get kids thinking and talking about the kind of intimacy that feels good and the kind that doesn’t,” and “focus on body awareness.” The Netherlands’ sex education program is based on teaching children to stand up for themselves, trust their instincts, and pay attention to their emotions and body cues. They are also required to learn all of their body parts, including genitals. The Netherlands have set a great example of how sex education should be implemented, and it is crushing to think of how many horrific circumstances around the world could have been prevented if more countries made it a priority. Children must be given proper education on how to defend themselves, or at the very least, know when and how to speak up about something that

has happened to them. It should be universally agreed upon that elementary school-aged children absolutely need to be provided with these lessons about themselves and their bodies and their protection, but when people hear “sex education in kindergarten,” the usual immediate reaction is outrage. This is why it could be very beneficial to change the name of sex education in its early stages, when it isn’t directly related to intercourse, to something else that sounds less drastic. A name change could possibly resolve a lot of controversy surrounding this topic and bring us one step closer to getting programs similar to the Netherlands’ implemented in more places.

Sex education may not always be regarded as the most important or pressing topic of discussion, but considering the amount of extreme trauma, sexual assault, and psychological damage children of all ages go through due to a lack of comprehensive sex education, it seems almost morally reprehensible to withhold it from students. Students of all ages, kindergarten through high school, deserve thorough and complete education that offers objective information, emphasizes freedom of choice, encourages personal discovery, stresses the importance of consent, and gives people the resources and support that they need to protect themselves and form a healthy, positive relationship with sex. While refraining from sexual activity until marriage is a completely valid way to live that should not be discouraged whatsoever, teaching only abstinence isn’t enough to fully cover the urgent topics that should be addressed when discussing sex education. Implementing thorough and comprehensive sex education into public schools that starts in elementary school and focuses on a wide array of topics such as sexuality, anatomy, personal safety, and consent is absolutely imperative and the most ethical way to raise children.

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