

A Study Guide compiled by
Roberta McNair
for A Place in the World



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Introduction

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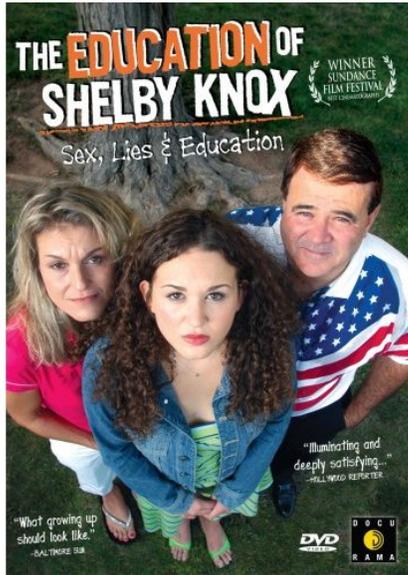
Objective

To provide background information on the differing types of sex education, providing a context for viewing and understanding the issues in *The Education of Shelby Knox*.

By providing a wide variety of reports and opinions on those reports across almost two decades, the student watching the film will better relate to Shelby Knox's development and commitment to getting comprehensive sex education in her school district. Additionally, specific data about Lubbock, Texas, and its struggles with sex education bring the film a personal reference to which students can relate.

The student should also come away with an understanding of the types of sex education in the United States and the disagreements and controversies around sex education in public schools. Whereas the student may not develop a firm opinion about the relative merits of each program and each position, he or she will understand the issues at stake when hearing a discussion or reading a news article about sex education.

About the Film



The Education of Shelby Knox

Directors and Producers Marian Lipschutz, Rose Rosenblatt

Cinematographer Gary Griffin

Editors Rose Rosenblatt, Jeremy Stulberg

Production Company InCite Pictures

Distributors Docurama, ITVS

Lubbock, Texas has some of the highest teen pregnancy and STD rates in the nation. The town's solution? A strict abstinence-only education curriculum in the public schools and a fire-and-brimstone preacher who urges kids to pledge abstinence-until-marriage, telling them that True Love Waits ... or else.

Shelby is a pledger, a politically conservative, deeply religious, 15-year old Southern Baptist who joins the Lubbock Youth Commission, a group of high school students representing a youth voice in city government, because she loves politics. But when the teens confront Lubbock's sexual health crisis and campaign for comprehensive, fact-based sex education, a new world opens up for Shelby. She throws herself into the fight with missionary fervor, struggling to reconcile her newfound political beliefs with her conservative religious views.

When the fight widens to include a group of LGBT students who are trying to start a gay-straight alliance, Shelby must make a choice: Stand by and let others be hurt, or go against her parents, her pastor, and even the other teens on the commission, to help the gay kids in their fight.

By the end of the film Shelby, now 17, has learned a lesson that will guide her to adulthood: "Some people never take their head out of the Bible to see the world around them. And it's sad, but it's understandable, because it's safe. But God wants you to question, and God wants you to do more than just blindly be a follower."

A message board review of the film says:

A wonderful, but totally unknown film about fighting for what you believe in when everyone around you is saying you're wrong. ... The movie was a success and it is a must see for anyone interested in documentaries or in issues that concern every day life. In a world where senators say that you can catch AIDS from sneezing, the issue of sex education is one of the most important issues to future generations. ... I have the utmost respect for Shelby Knox and this movie opens up your eyes on issues that are hardly ever shown in the media.

Some of the awards *The Education of Shelby Knox* has won include:

- Sundance Film Festival – Excellence in Cinematography, Documentary Category
- South by Southwest – Audience Award
- Sonoma Valley Film Festival – Jury Prize
- Miami Gay & Lesbian Film Festival – Jury Prize, Best Documentary
- Full Frame Documentary Festival – Emerging Pictures Audience Award and Women in Leadership Award
- Fresno Reel Pride Film Festival – Audience Award, Best Feature

<http://www.incite-pictures.com/shelbyknox/shelbypress.html>,
<http://www.imdb.com/title/tt0427206/>,
<http://www.imdb.com/title/tt0427206/board/nest/36128287>

About the Filmmakers

Rose Rosenblatt and Marion Lipschutz met while working on *The Human Language*, a series on how language works and what it is. They formed a film-production company in 1991, which produces high-profile television documentaries and educational materials on subjects of social and cultural significance. Cine Qua Non, Inc., their nonprofit corporation, has had 501(c)(3) not-for-profit status since 1995. InCite Pictures is the for-profit arm of Cine Qua Non.

Their last film, *The Education of Shelby Knox* won Best Cinematography at the Sundance Film Festival, as well as a dozen other awards. It launched the 2005 PBS Point of View (POV) season, a series that also featured their *Live Free or Die*, the story of a doctor banned from teaching in his children's schools because he provides abortions. Other work includes *Fatherhood USA*, a series on contemporary fatherhood; *The Abortion Pill*, which follows the history and controversy over the French drug RU486; and *The Trenchcoat Gang*, a Court TV special about the most successful bank robbers in U.S. history.

Programs are designed to function as part of an extensive educational and outreach campaign that includes dedicated Websites, high profile press coverage, and widespread dissemination to the educational market, generating screenings and discussions for years after their original release.



Marion Lipschutz and Rose Rosenblatt

Their work has been called “unique and memorable,” “pure gold,” and “balanced and truthful.” They have been interviewed by every

major U.S. newspaper, on television and radio, and for books. Every major festival in the U.S. has screened their films, and they have been widely distributed internationally.

Lipschutz and Rosenblatt wrote about the development and production of *The Education of Shelby Knox* in a “Dear Viewer” letter published in POV’s Website, a resource to accompany PBS’s broadcast of the film:

Inspiration for a documentary often comes like a bolt from the heavens: significant, awe-inspiring, astounding. You read an article or editorial about some great injustice happening in a corner of the universe or you hear your sibling or child utter some remarkable, fantastic misguided notion, and suddenly you are off on a journey. That is the way it was with *The Education of Shelby Knox*.

"If I don't have an orgasm, I can't get pregnant, right?" "If a girl pees directly after intercourse, she can't get pregnant, right?" "Masturbation causes cancer, doesn't it?" "Abortion can lead to sterility and suicide." These are some of the quotes we heard that were coming out of the mouths of kids when we decided to make a film about sex education.

When we first met Shelby Knox she was pledging in a church ceremony to be chaste until marriage. She had also just joined a group of teens fighting for better sex education in their Lubbock, Texas school district. Through Shelby and the other teens we had a way of making facts come alive, a way of showing how the federal government had gotten into the business of funding abstinence sex education, and how faith-based groups were shaping educational policies. In Lubbock the teens were sure that the abstinence until marriage sex ed was failing; the counties' teen pregnancy and STD rates were soaring.

When Shelby herself was 15, there were three pregnant girls in her math class. When she asked one of them a question about homework, the girl looked at her in shock and said, "I can't believe you talked to me. You're popular. No one's talked to me since I got pregnant." A few

weeks later Shelby joined the sex ed fight. Soon after, we started to follow her story.

Over the next three years we watched a courageous, religious girl struggle to make her notions of tolerance and compassion jive with those of the adults around her. We watched her wrestle with her faith, her politics, her pastor and her family. We often didn't know what Shelby would become, but we had faith that we'd found a remarkable young woman, who was willing to take us along on a turbulent ride through all the ups and downs of adolescence, with her family in tow.

Five years after we began, we finally finished our film. We have been thrilled to find audiences responding to Shelby as a girl in whom the harsh realities and divisions now plaguing the U.S. could be bridged momentarily. We hope that with your help, *The Education of Shelby Knox* will have impact beyond broadcast and will encourage people to question what should be taught in schools, what is the role of government and religion in secular life, and how will religion define our national dialogue.

Thank you again for being our audience,
—Rose Rosenblatt and Marion Lipshutz

<http://www.incite-pictures.com/shelbyknox/filmmakers.html>,
<http://www.incite-pictures.com/about.html>,
<http://www.pbs.org/pov/pov2005/shelbyknox/behind.html>,
http://www.pbs.org/pov/pov2005/shelbyknox/behind_letter.html

About the People

Shelby Knox

Shelby Knox grew up as a conservative Southern Baptist in Texas turned progressive activist and documentary film subject. She graduated from the University of Texas at Austin in 2007 with a degree in Political Science. Throughout her college career, Shelby traveled across the nation to speak to young people about the importance of comprehensive sex education and the power of youth activism, using the film that carries her name, *The Education of Shelby Knox*, as a vehicle for discussion.



Shelby Knox

She currently lives in New York City and is a full-time speaker/activist/organizer working with progressive organizations to promote sex education, women's rights, and youth empowerment. Shelby employs the tools of her generation to promote the causes she believes in: MySpace, Facebook, and blogs.

On Facebook, Shelby has a quote from Matilda Joslyn Gage, a progressive visionary of women's rights and human liberation and an often unacknowledged leader who inspired the passions and organized the political action of the 19th-century woman suffrage movement in the United States:

“A rebel! How glorious the name sounds when applied to woman. Oh, rebellious woman, to you the world looks in hope. Upon you has fallen the glorious task of bringing liberty to the earth and all the inhabitants thereof.”

Shelby describes her work in New York with the Sadie Nash Leadership Project as, “Teaching and learning with young women about activism, politics, and how women can and will take over the world!”

Shelby blogs about politics, women’s issues, and sex education at the blog she named after the movie about her. Her most recent article at Amplify Your Voice in her regular column Breaking the Waves is “How to Get Rich on Your Vagina, or, What I Learned In Women’s Studies.” She has decided that being an activist is a better pursuit for her than politics.

<http://www.shelbyknox.blogspot.com/>,
<http://www.amplifyyourvoice.org/u/BreakingTheWaves/2009/1/27/How-to-Get-Rich-on-Your-Vagina-or-What-I-Learned-In-Womens-Studies> ,
<http://www.myspace.com/educationofshelbyknox>,
<http://www.facebook.com/profile.php?id=7905511&v=info&views=1472686905>

Shelby’s educators

Danny and Paula Knox



Shelby, Paula, and Danny Knox

Danny and Paula Knox are Shelby’s parents. Danny is a Cadillac salesman. Paula is a stay-at-home mom. They have one other child, Shelby’s brother Devon.

The Knoxes are Republicans and Southern Baptists, and they brought Shelby up with the Conservative values each of those affiliations reflect. The family priorities are “God, family, and country.”

While they did not always agree with the opinions and beliefs Shelby developed in her association with the Lubbock Youth Commission and the Lubbock High Gay/Straight Alliance, and from her personal activism, they supported her in their journey, reflecting love and respect for Shelby that sets them apart as parents.

<http://www.ignite-pictures.com/shelbyknox/shelbypress.html>,
<http://www.teenwire.com/infocus/2005/if-20050621p362-sexed.php?print=yes>

Rev. “Sex” Ed Ainsworth

Rev. Ed Ainsworth, known as “Sex Ed,” is a nondenominational pastor and educator who lectures widely using an abstinence-until-marriage approach to sex education, “Love, Sex, and Dating.” He subscribes to the international challenge to teens and college students called “True Love Waits®,” the creation of LifeWay Christian Resources. Ainsworth launched his Generations Church in Lubbock in late 2006.

Ainsworth’s company is Whiteheart Communications, whose mission “for the last fifteen years has been to help students make the choices that will make their lives better.” Ainsworth and his wife, Connie, have found that teens are dealing with the same issues everywhere in the world. They believe that “students will make choices that will make their lives better if they are given the right information and the right motivation.”



Rev. Ed Ainsworth

He told Shelby that her self-description as a “liberal Christian” can make people nervous because “the term liberal and Christian, it’s like oil and water.”

Lubbock residents are not all supportive of Ainsworth, whose presentations are a staple in Lubbock’s middle and high schools. On the “Lubbock Online” discussion site, one parent noted, “Around here, ‘Sex’ Ed Ainsworth is famous for his fear and misinformation sex ed curriculum.” Another responded, “It is a parent’s responsibility to ensure that our kids have ALL the education because they won’t get it in school.”

<http://forum.lubbockonline.com/index.php/forums/viewthread/3380/P0/>,
<http://www.whiteheartcommunications.com/>,
<http://www.lifeway.com/tlw/>,
<http://www.generationslubbock.com/aboutus.html>

Corey Nichols and the Lubbock Youth Commission

Corey Nichols is the former Mayor of the Lubbock Youth Commission. Corey went on to attend Texas A&M University. He continues to write about sex education.



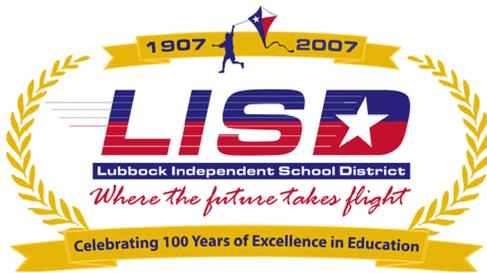
Corey Nichols

While Corey was still president of the Lubbock Youth Commission in 2002, he sought to expand the public perception of the group as a one-issue committee. In addition to the fight for comprehensive sex education in the Lubbock Independent School District, Corey brought in issues such as tobacco use and increased the Commission’s participation in volunteer activities such as the March of Dime, Ronald McDonald House, and Walk for Diabetes.

In 2003, the city of Lubbock considered disbanding the Commission, citing budget cuts. Corey, when asked if this was a punishment for the group's outspokenness publicly and at School Board meetings, responded, "I do think that the city has been uncomfortable with our drive for sex education. I can't say if it's a move to silence us."

http://www.lubbockonline.com/stories/090102/you_0901020122.shtml,
http://www.lubbockonline.com/stories/040402/loc_0404020030.shtml,

Lubbock Independent School District Board



Jack Clemmons, Ed. D., had recently been full-time superintendent of the Lubbock Independent School District only a few months when he wrote an article entitled "LISD offers extended opportunities for success" in the September 17, 2000 edition of the Lubbock Avalanche Journal:

The mission statement of the Lubbock Independent School District states that it is the desire of the district to provide student experiences that will maximize academic and personal success.

- The following are belief statements that have been adopted by the LISD:
- God, the Supreme Being, loves all people;
- It is morally wrong to violate the dignity of any person;
- Every person is responsible for his or her own actions;
- No society can survive without an absolute standard of right and wrong;
- The development of the human spirit is fundamental to the creation of opportunities.



Supervisor Jack Clemmons

These statements and our love for children are factors that cause staff members to continually search for learning opportunities for children. ...

Students will be provided the opportunity to hear about the "Top Ten Ingredients to Make a Successful You" presented by Todd Duncan; "Teens and Abstinence" conducted by Ed Ainsworth, as well as "Teens and Violence" a presentation by Lucio Trevino.

Clemmons set the tone for the upcoming battle between the Lubbock Youth Council and the LISD regarding sex education and the Lubbock High Gay/Straight Alliance and the LISD regarding the group's right to organize and meet at Lubbock High School.

Clemmons received a salary increase from \$178,000 to \$192,500 in December 2001. He was also given "high marks" for his performance in December 2002, although the board of trustees suggested "More involvement in community activities; closer contact with the teachers and teacher associations; [and] greater awareness of events at the campus level."

http://www.lubbockonline.com/stories/091700/edi_024-5707.shtml,
http://www.lubbockonline.com/stories/121301/upd_075-5763.shtml ,
http://www.lubbockonline.com/stories/121302/edu_121302056.shtml

Lubbock High School Gay/Straight Alliance



When the Lubbock Independent School District (LISD) barred students at Lubbock High School from forming the Lubbock High Gay/Straight Alliance in December 2002, the students took their cause public. In July 2003, the students filed a federal lawsuit, naming Superintendent Jack Clemmons and LISD defendants. The case was taken up by the Lambda Legal Defense and Education Fund Inc.

Clemmons had denied the group's request to post flyers on the high school's bulletin boards, citing safety concerns and that anti-gay groups would also request permission to post flyers if the Alliance could. At that time there were 32 extra-curricular clubs at Lubbock High. The lawsuit claims the students were denied their rights under the First and Fourteenth Amendments, the Equal Access Act, and the Civil Rights Act. At that time, Texas schools had 30 Gay/Straight Alliances or similar clubs.

The LISD decided to fight the lawsuit, even though their insurance would cover the costs for settling. In March 2004, Federal Judge Sam Cummings ruled in favor of LISD, stating in his 23-page opinion:

"In summation, this case has nothing to do with a denial of rights to students because of their sexual viewpoints. It is instead an assertion of a school's right not to surrender control of the public school system to students and erode a community's standard of what subject matter is considered obscene and inappropriate.

"At some point, a line must be drawn that considers the proper subject matter allowed in the schools of this country. The effects of exposing minors to sexual material before they are mature enough to understand its

consequences and far-reaching psychological ramifications compels a school district to step in and draw such a line."

On June 25, 2004, The Lubbock Avalanche-Journal reported a follow-up to the group's loss in court, with news of a moral victory for the Lubbock High School Gay/Straight Alliance:

LHS gay alliance chosen to receive courage award

Lubbock High School's Gay Straight Alliance has been selected to receive the 2004 Courage Award from Lambda Legal Defense and Education Fund Inc.

According to Lambda Legal, the annual award recognizes an individual or organization for "outstanding courage in the face of uncertainty, discrimination and hostility in the advancement of civil rights for the lesbian, gay, bisexual, transgendered and HIV/AIDS communities."

Ricky Waite, Lubbock High GSA co-founder, is scheduled to accept the award Saturday during an event at Nasher Sculpture Center in Dallas.

Students at the center of the fight for the Gay/Straight alliance included Ricky Waite, who is now a gay organizer. After graduating from Lubbock High, he attended South Plains College in Levelland, Texas, working on his political science degree. Ricky also became president of the Lubbock chapter of PFLAG (Parents, Families and Friends of Lesbians and Gays).



Rene Caudillo

Rene Caudillo was also part of the attempt to start the Gay/Straight Alliance at Lubbock High. He is now a freelance makeup artist for MAC Cosmetics and relocated to Austin, Texas.

<http://www.incite-pictures.com/shelbyknox/players.html>
http://www.lubbockonline.com/stories/102203/loc_102203036.shtml
http://www.lubbockonline.com/stories/070803/upd_075-1186.shtml
http://www.lubbockonline.com/stories/071503/loc_071503025.shtml
http://www.lubbockonline.com/stories/030404/loc_030404049.shtml

About the Hometown

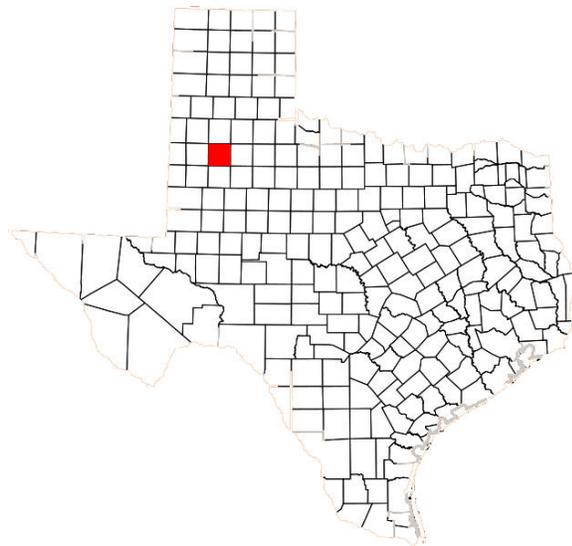
Lubbock, Texas

Demographics

Lubbock is Texas's 10th-largest city, with over 500,000 in its metropolitan area. Fifty-eight-and-a-half percent of its population is "Anglo" (Caucasian), 30 percent is Hispanic, and 8.6 percent is African American. Roughly 55% of Lubbock's residents are Southern Baptist and 30% Catholic. Voters in Lubbock cast their ballots for Republicans about two-and-a-half times more than for Democrats. Lubbock is the United States second-most conservative city, behind Provo, Utah.

The largest employment sector in Lubbock is government employed, unsurprising since state-operated Texas Tech University has over 28,000 students and is Lubbock's largest employer. Lubbock is also the county seat of Lubbock County.

Next largest is the trade sector, at 17.4 percent, followed by education and health services, at 14.3 percent. Covenant Health System and the Lubbock Independent School District are the second- and third-largest employers.



Lubbock County in Texas

Twenty-six percent of the Lubbock-area residents have completed 16 or more years of

education. Each year, about 2,600 high school and almost 6,000 college graduates enter the workforce from Lubbock schools. According to the 2000 census, 52.6 percent of the population was under the age of 24, with nearly half of those under 18. For hourly work, general office clerks earn \$9.37 per hour, on average; customer service representatives earn \$10.07; auto mechanics earn \$15.23; and registered nurses earn \$23.24.

Life in Lubbock, Texas
taught me two things: One
is that God Loves you and
you're going to burn in hell.

The other is that sex is
the most awful, filthy thing
on earth and you should save
it for someone you love.

- Butch Hancock,
The Flatlanders Band



In 2000, the median income for a family was \$41,418. Median income for men was \$30,222 versus \$21,708 for women. Roughly 12 percent of families lived below the poverty line in 2000, which was \$21,027 in 2007. Eighteen point four of Lubbock's entire population lived below the poverty line in 2000, and of that number 21.9 percent were under 18. The poverty line for individuals in 2007 was \$10,787.

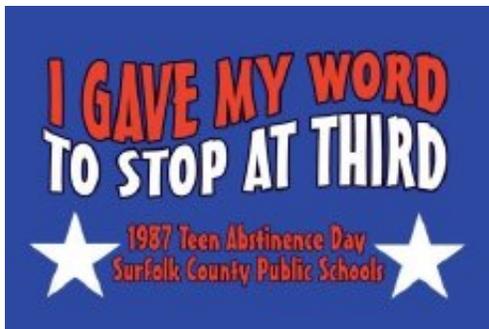
Lubbock's second-largest university is Lubbock Christian University, run by the Church of Christ, with 1,759 undergraduates, followed by Wayland Baptist University's Lubbock satellite. Lubbock also has numerous private Christian schools, including such as Christ the King High School, Trinity Christian High School, Lubbock Christian High School, and All Saints Episcopal School.

Health and sex education

Before the millennium

In 1998, alarmed by the statistics on sexually transmitted diseases in Lubbock, concerned citizens implored the Lubbock Independent School District (LISD) to implement abstinence-only sex education in middle and high schools. A 1999 opinion piece in the Lubbock Avalanche Journal warned that England's liberal policy toward providing contraceptives to teenagers had resulted in a spike in teen pregnancies and that programs such as True Love Waits as part of abstinence-only education could benefit Lubbock.

The LISD took these pleas to heart and instituted abstinence-only education for all the schools in the district. Although Texas Law 28.004, Local School Health Education Advisory Council and Health Education Instruction, states that schools in Texas are required to teach abstinence education in schools as part of a student's health education, it does not require abstinence-only education. Lubbock made its choice within the state law.



28.004. Human Sexuality Instruction

(a) Any course materials and instruction relating to human sexuality, sexually transmitted diseases, or human immunodeficiency virus or acquired immune deficiency syndrome shall be selected by the board of trustees of a school district with the advice of the local health education advisory council established under Subsection (e) and must:

(1) present abstinence from sexual activity as the preferred choice of behavior in relationship to all sexual activity for unmarried persons of school age;

(2) devote more attention to abstinence from sexual activity than to any other behavior;

(3) emphasize that abstinence from sexual activity, if used consistently and correctly, is the only method that is 100 percent effective in preventing pregnancy, sexually transmitted diseases, infection with human immunodeficiency virus or acquired immune deficiency syndrome, and the emotional trauma associated with adolescent sexual activity;

(4) direct adolescents to a standard of behavior in which abstinence from sexual activity before marriage is the most effective way to prevent pregnancy, sexually transmitted diseases, and infection with human immunodeficiency virus or acquired immune deficiency syndrome;

(5) teach contraception and condom use in terms of human use reality rates instead of theoretical laboratory rates, **if instruction on contraception and condoms is included in curriculum content.**

(b) A school district may not distribute condoms in connection with instruction relating to human sexuality.

(c) A school district that provides human sexuality instruction may separate students according to sex for instructional purposes.

(d) The board of trustees of a school district shall determine the specific content of the district's instruction in human sexuality, in accordance with Subsections (a), (b), and (c). A change in health curriculum content or instruction may not be made before considering the recommendations of the local health education advisory council.

(e) A school district shall establish a local health education advisory council to assist the district in ensuring that local community values and health issues are reflected in the district's human sexuality instruction.

(f) The council's duties include:

(1) recommending appropriate grade levels for human sexuality instruction;

(2) recommending the methods of instruction to be used by a teacher in human sexuality instruction education;

(3) recommending the number of hours of instruction to be provided in health education.

(g) The council:

(1) must include persons who represent diverse views in the community about human sexuality instruction;

(2) must include parents of students enrolled in the district as a majority of the council;

(3) may include teachers, school administrators, students, health care professionals, members of the business community, law enforcement representatives, senior citizens, clergy, or other interested persons.

(h) A school district shall notify a parent of each student enrolled in the district of:

(1) the basic content of the district's human sexuality instruction to be provided to the student;

(2) the parent's right to remove the student from any part of the district's human sexuality instruction.

(i) A school district shall make all curriculum materials used in the district's human sexuality instruction available for reasonable public inspection.

Added by Acts 1995, 74th Leg., ch. 260, 1, eff. May 30, 1995. 28.005.

LISD opted to include instruction on neither contraception and condoms nor human sexuality. It therefore avoided the requirement to establish a local health-advisory council, which would have had participation in developing the sex-education curriculum.

2001

By 2001, Lubbock's newspapers carried numerous articles about increased rates of sexually transmitted diseases (STD) and debates about the efficacy of abstinence-only sex education.

The Lubbock Avalanche-Journal reported on October 13, 2001,

Lubbock's reported rates for chlamydia and gonorrhea cases were 578 and 354, respectively, in 1999, while the state's rates were 319 and 167, respectively, and the nation's rates were 254 and 133.

[Tigi Ward, public health coordinator-surveillance with the city of Lubbock Health Department] said the number of chlamydia cases

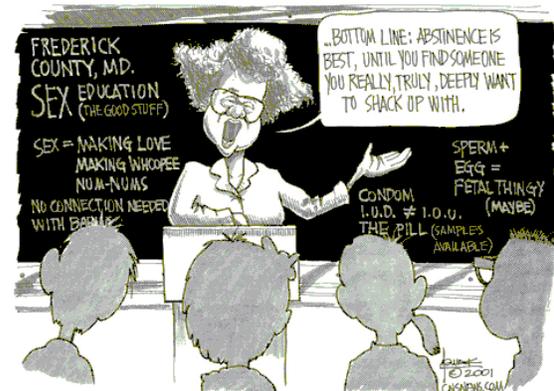
reported in Lubbock County in 2000 — 1,630 — increased 24 percent from the previous year, while the 893 reported cases of gonorrhea represented an 11 percent increase from 1999.

Lubbock County's case rate per 100,000 population for gonorrhea has led the 41 counties of Region 1 and the state for the past four years.

The largest number of cases reported for chlamydia and gonorrhea in Lubbock County in 2000 was among the 15- to 19-year-old group, followed closely by the 20- to 24-year-old group.

2002

From March through May 2002, however, articles reported the LISD's resolve to stay with an abstinence-only sex education program and that "shocking" teens out of having sex was a viable strategy. The Texas Medical Association changed its policy away from education about contraception and prevention to abstinence as the best method to prevent pregnancy and STDs.



In spite of some public concerns, the LISD not only adhered to its abstinence-only policy, it studied ways to enhance it. One option was to have teen-age fathers and mothers talk to students about the consequences of sex. Another was to insist that boys and girls be equally targeted for the "abstinence message."

In March 2002, Dr. Joe McIlhaney, Jr., a 1953 graduate of Lubbock High School who serves as president of the Medical Institute in Austin, Texas, spoke at the ChangeMakers Conference at Covenant Health System's Knipling/Education Conference Center. McIlhaney acknowledged that while abstinence

is the only proven way to avoid sexually transmitted diseases, it is important for teens and young adults to have full information. He said, “We all need support and guidance to make the right choices. I’m totally convinced a community like Lubbock can make that difference. If they don’t, the young people will continue to be hurt.”

The Lubbock Board of Health sent a survey on sex education out to public and private schools, churches, and youth organizations in January 2002 to “to find out what programs are out in our community so that we can develop a resource base.” However, by April, only 27 percent of those sent the survey had responded to the 17 questions. Of those who reported having ongoing programs addressing teen pregnancy and STDs, 66 percent were faith-based programs.

The standardized survey did not feature a method for evaluating the efficacy of the programs, since its intention, according to chair of the Board of Health, was to make “an effort to find out what was out there.”



2002 was the year during which Lubbock’s Youth Commission pushed for comprehensive sex education in Lubbock schools. Although the Texas Commissioner of Health visited Lubbock in February, warning that community groups and local agencies needed to work to combat Lubbock’s high rates of teen pregnancy and STDs, the Youth Commission’s early efforts to augment abstinence-only education failed, causing two of its members—including the mayor—to leave the group abruptly in March. They cited pressure from “adults” to back off on their crusade.

With new mayor Corey Nichols as mayor of the Youth Commission in May 2002, the tone for the group changed, with plans for the group

to provide information on pregnancy and STDs directly to the community. The Lubbock Board of Health pledged its support to the teens to “work with them and mentor them. We want to offer our support and help so that they’re always giving information that is correct.”



*Lubbock Youth Commission,
Mayor Corey Nichols, left*

The National Parent Teachers Association (PTA) held its annual conference in San Antonio in June 2002, reporting that parents want their school-aged children to learn about safe sex, not just abstinence. The survey, conducted by the Henry J. Kaiser Family Foundation, found that while 97 percent of the parent surveyed put abstinence at the top of their list, 85 percent said students should learn more about condoms and 84 percent said they should learn more about other forms of birth control. This is an especially important finding, since, according to Kaiser, half of all high school students are sexually active.

To fill the vacuum in school sex education and to accommodate parents uncomfortable with sex education in schools, KidSmart, a collaborative effort by more than 20 community organizations, including churches, non-profit organizations, the Lubbock Health Department and Planned Parenthood Association of Lubbock, offered “age-appropriate” sex education in early October at Lubbock’s YWCA Stubbs Childhood Development Center. The daylong program was aimed at children from 10 to 13 years of age.

Meanwhile, On October 9, 2002, the LISD publicly urged parents to take a more active role in their children’s sex education. “We still firmly believe that the home has to be the place where the family values are centered,” said Fred

Hardin, LISD assistant superintendent of secondary operations.

Days later, the Lubbock Youth Commission sponsored a youth forum on sexual health, where an expert from the Sexuality Information and Education Council of the United States (SEICUS) and a moderator from MTV fielded questions on sex and sexuality, as well as pregnancy, STDs, and HIV. The Commission had not abandoned its goal of comprehensive sex education in Lubbock schools, however, and the group hoped to present new proposed changes in December or January.

On November 1, the Texas Department of Health reported that the incidence of STDs was down from 2001 numbers, but 2002's figures were still higher than 1992's. On November 14, the Youth Commission sponsored another forum, this one in the City Council chambers and open to the community. The Commission invited City Council members, Lubbock Health Department officials and LISD board members. The forum was documented by filmmakers from InCite Pictures, which had been following the Lubbock teens and the issue since February 2002.

2003

On January 20, 2003, a teen-sexuality expert and abstinence proponent Dr. Joe S. McIlhaney, Jr., spoke to LISD teachers and school nurses about adolescent pregnancy, sexually transmitted diseases, condoms, and abstinence as they related to students and staff of LISD schools. McIlhaney, an obstetrician and gynecologist, founded the Medical Institute for Sexual Health, a nonprofit educational organization that promotes healthy sexual decisions.

On January 23, 2003, the LISD board was briefed on McIlhaney's staff development session the week before and heard the Lubbock Youth Commission's latest recommendations for sex education in Lubbock's schools. Shelby Knox presented the recommendations, which included:

Mandatory visits by certified health professionals to LISD health classes in junior high and high school;

An investigative committee — made up of LISD staff, youth, parents, and medical professionals — to review the curriculum; and

Distribution of a Centers for Disease Control and Prevention Youth Risk Behavioral Survey at schools every other year.

Shelby was quoted as stating, "We believe that sex education is simply what its name implies — an issue of education."

The Commission was supported by Lubbock physician Dr. Chester Golightly, who said, "I feel that public education should be just that. Hear all the facts so students can make educated choices." Shelby, however, felt that their presentation fell on "dead ears," since the board planned to air a tape of McIlhaney's staff development session in LISD-TV and urged community involvement to combat the problems of teen pregnancy and STDs.



March saw a flurry of activity within Lubbock government circles, with the unexpectedly announced retirement of LISD supervisor Jack Clemmons, who cited "family reasons" when he left in April. At the same time, the City Council considered disbanding the Lubbock Youth Commission, citing budget constraints. Corey Nichols vowed to fight for the Commission.

From sex ed to LGBT

By July 2003, sex education issues were on the LISD's back burner, after the Lubbock High Gay/Straight Alliance filed suit against the LISD, Jack Clemmons, and other supervisors for being denied permission to organize and meet on

Lubbock High premises. Although the Gay/Straight Alliance received pro bono legal assistance from Lambda Defense Fund, which had successfully prosecuted similar cases against other school districts, the LISD took an aggressive stance against the lawsuit, promising a “vigorous defense.”



Lubbock High School

That defense turned out to be the claim that, in prohibiting the Gay/Straight Alliance from distributing flyers and meeting at Lubbock High, the LISD was protecting the students. Citing the crime of indecency with a child, LISD invoked the law that The crime prohibits sexual contact with children under 17 unless the conduct is consensual and the actor is no more than three years older than the victim and of the opposite sex.

In August, retired supervisor Jack Clemmons asked Federal Judge Sam Cummings to dismiss the Gay/Straight Alliance’s lawsuit. Later that month, both parties in the case accepted summary judgment—in which a judge decides the case without a trial—for a decision.

On October 28, 2003, Parents, Families and Friends of Lesbians and Gays (PFLAG) and Lambda Defense Fund sponsored a public meeting to provide information about the issues surrounding the lawsuit. Students spoke in support of the Gay/Straight Alliance (GSA) at Lubbock High, arguing that the GSA deserves treatment equal to that of any other student organization. They stated that the goal of GSA is to fight ignorance with education.

On November 10, Judge Sam Cummings granted Jack Clemmons immunity from prosecution in the case against the LISD. The remaining defendants include the LISD; current Supt. Wayne Havens; and Fred Hardin, deputy superintendent for secondary operations.

2004

Judge Cummings ruled in favor of the LISD on March 3, 2004. Gay, straight, and transgender students and adults held a peaceful protest outside the federal courthouse in Lubbock on March 11. Protesters gathered on the west side of the building, waving posters and flags, displaying banners, and applauding speakers.

On April 5, 2004, attorney Brian Chase from Lambda Defense Fund announced that there would be no appeal of the verdict against the Gay/Straight Alliance. Chase stated, “There is certainly a lot of hope that eventually kids in the Lubbock Independent School District are going to be able to speak their minds and seek the support of their peers just like any other kids.”



Members of the Lubbock High School Gay/Straight Alliance; third from left, Rene Caudillo

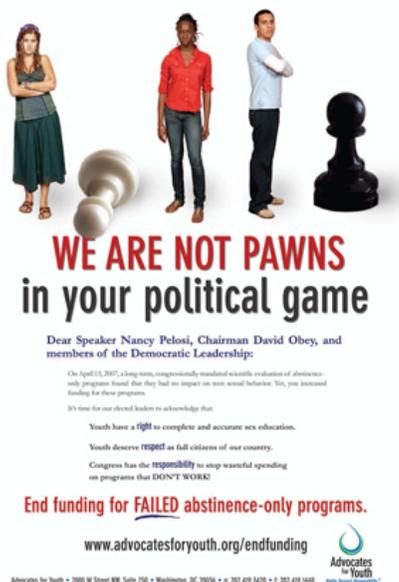
On April 8, a letter to the editor appeared in the Lubbock Avalanche-Journal written by “Cowboy” Fred Ortiz. Ortiz wrote:

Remember the youth commission? The kids chose to address sexually transmitted diseases (STDs) as their focus. The city was against that. I believe they wanted to keep the fact that Lubbock County triples state and national averages in STDs a secret. This continues to be the case and, still, nobody has done anything about it.

Lambda Defense and Education Fund chose the Lubbock High School Gay/Straight Alliance for its 2004 Courage Award. The annual award recognizes an individual or organization for “outstanding courage in the face of uncertainty, discrimination, and hostility in the advancement of civil rights for the lesbian, gay, bisexual, transgendered and HIV/AIDS communities.”

2006 in Lubbock ended with news that a Congressional report compiled by the Committee on Government Reform Minority Staff concluded that sexual-abstinence programs contained “false and misleading” information. The report found that 1 of the 13 most widely used programs contain misinformation, underestimate the effectiveness of condoms in preventing pregnancy and the spread of disease, exaggerate the prevalence of emotional and physical distress following abortion, blur science and religion or get fundamental scientific facts wrong.

2005 to present



On September 21, 2008, the Lubbock Avalanche-Journal reported “Ten things you might not know about Lubbock.” Number seven on the list:

STDs have not gone away.

Lubbock residents reported 1,158 cases of sexually transmitted diseases to the City Health Department in 2007.

That means approximately 1 out of every 183 people in Lubbock reported an STD last year.

In the city of Lubbock, there were 13 reported cases of syphilis, 400 cases of

gonorrhea, 1,157 cases of chlamydia and 10 cases of HIV/AIDS.

In Lubbock County in 2006, there were 15 syphilis, 496 gonorrhea, 1,434 chlamydia and 12 HIV/AIDS cases reported.

Lubbock’s KCBD NewsChannel 11 reported on December 29, 2008, on a study by researchers at Johns Hopkins Bloomberg School of Public Health. The study followed 934 American high school students who had never had sex or had taken a virginity pledge over five years. Students who had taken the virginity pledge were no different from the non-pledging teens “in rates of premarital sex, oral or anal sex, or sexually transmitted diseases.”

Both groups started having sex at the same age. While pledging teens had 0.1 percent fewer sexual partners in the last year of the study, they were also 10 percent less likely to use condoms and birth control than non-pledging teens.

One disturbing bit of data is that “five years after taking a virginity pledge, more than 80 percent of pledgers denied ever making such a promise. ‘This high rate of disaffiliation may imply that nearly all virginity pledgers view pledges as nonbinding,’” researchers noted.

Commenting on the study,

“Bill Albert, chief program officer for The National Campaign to Prevent Teen and Unplanned Pregnancy, said teens need to be encouraged to delay having sex, but they also need to be given the facts about safe sex.

“‘When pledgers fell off the wagon, they fell off hard,’ he said. ‘What have we gained if we encourage young people only to delay sex until they are older, but when they do become sexually active, they don’t protect themselves or their partners?’”

“‘The notion that it has to be either a virginity pledge or encouraging teens to have sex is a false dichotomy,’ Albert added. ‘There is a public consensus in this country to encourage teens to delay sex, but also provide them with information about contraception.’”

<http://www.ttu.edu/facts/>,
http://govpro.com/ar/gov_imp_31439/,
http://en.wikipedia.org/wiki/Lubbock,_Texas,

http://en.wikipedia.org/wiki/Lubbock_Christian_University, http://www.wbu.edu/about_wayland/,
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http://www.lubbockonline.com/stories/081603/loc_081603027.shtml,
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http://www.lubbockonline.com/stories/102903/loc_1029030034.shtml,
http://www.lubbockonline.com/stories/030304/upd_030304075-2605.shtml,
http://www.lubbockonline.com/stories/030404/loc_030404049.shtml,
http://www.lubbockonline.com/stories/031204/loc_031204073.shtml,
http://www.lubbockonline.com/stories/040604/stu_040604063.shtml,
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About the Issues

Abstinence-Only Sex Education

What it is

Authorized under the Social Security Act of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Title V, Section 510 (b)(2)(A-H) of the Social Security Act defines Abstinence Education:

- A. Have as its exclusive purpose teaching the social, psychological, and health gains to be realized by abstaining from sexual activity
- B. Teach abstinence from sexual activity outside marriage as the expected standard for all school-age children
- C. Teach that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems
- D. Teach that a mutually faithful, monogamous relationship in the context of marriage is the expected standard of sexual activity
- E. Teach that sexual activity outside the context of marriage is likely to have harmful psychological and physical effects
- F. Teach that bearing children out of wedlock is likely to have harmful consequences for the child, the child's parents, and society
- G. Teach young people how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances
- H. Teach the importance of attaining self-sufficiency before engaging in sexual activity

The federal and state governments allot \$85 million annually for the Abstinence Education Program. Eligibility for these funds requires that the school curriculum for sex education adhere to Section 510 guidelines.

Who supports it

The Heritage Foundation in 2002 reported on “The Effectiveness of Abstinence Education Programs in Reducing Sexual Activity Among Youth.” Their analysis defined the problem of and solution to teenage sexual activity thus:

Teenage sexual activity is a major problem confronting the nation and has led to a rising incidence of sexually transmitted diseases (STDs), emotional and psychological injuries, and out-of-wedlock childbearing. Abstinence education programs for youth have been proven to be effective in reducing early sexual activity. Abstinence programs also can provide the foundation for personal responsibility and enduring marital commitment. Therefore, they are vitally important to efforts aimed at reducing out-of-wedlock childbearing among young adult women, improving child well-being, and increasing adult happiness over the long term.



*Poster/Website header for the
Abstinence Clearinghouse*

Project Reality, which describes itself as “a national leader in the field of adolescent health, providing abstinence instruction programs to over 50,000 Illinois students annually,” complained about evaluations of the curriculum, and that

[t]he proposed tool for conducting this research is the “Teen Activities and Attitudes Study” questionnaire, which abstinence advocates emphasize is inconsistent with the abstinence law, Title V, Sec. 510(b)(2)(A) (H), because it probes students about personal concerns, plans, attitudes, family life, sexual activity, and contraceptive use. It includes explicit questions about the number of sexual partners students have had, whether or not and how often they use contraceptives, and whether or not they have ever been pregnant.

Much of the support for abstinence-only sex education defends the curriculum against its critics, rather than simply affirming its effectiveness. National Abstinence Education Association (NAEA) Executive Director Valerie Huber praised the Title V curriculum in 2007, in response to a negative evaluation from a Health and Human Services Department-funded report:

The recent March conference on the Evaluation of Abstinence Education, sponsored by the US Department of Health and Human Services featured at least 30 significant evaluation studies that demonstrated positive trends in teen abstinent behavior. Now that federal funding has been made available, quality evaluation of abstinence education programs will continue and help to identify proven practices in abstinence education. Currently, there are several significant studies that demonstrate that abstinence education programs are effective in delaying sexual debut, reducing partners once sexually active, and empowering sexually experienced students to embrace abstinent behavior.

NAEA strongly maintains that the validity of the abstinence message does not change as a result of these findings. Instead, it reinforces the commitment of the abstinence profession to make continuous improvement in the delivery of the optimal sexual health message to youth.

Some of the studies to which the NAEA statement referred include:

“YRBSS [Youth Risk Behavior Surveillance System], Trends in the Prevalence of Sexual Behavior,” CDC 2005

Results: 13% decline reported in the proportion of U.S. teens who have initiated sexual activity from 1991 (54%) to 2005 (47%).

Conclusion: Fewer teens are having sex which means more teens are choosing abstinence.

“Can changes in sexual behaviors among high school students explain the decline in teen pregnancy rates in the 1990s?” Santelli et al., *Journal of Adolescent Health*, August 2004

Study: The national Youth Risk Behavior Survey provided estimates for sexual activity and contraceptive use among teens aged 15-17 years between 1991 and 2001 (n=31,058). This data was combined with other data from the National Survey of Family Growth. Calculations were made to determine relative contributions to the annual change in risk of pregnancy.

Results: 53% of the decline in pregnancy rates can be attributed to decreased sexual experience.

Conclusion: Abstinence has substantially contributed to the decrease in teen pregnancy.

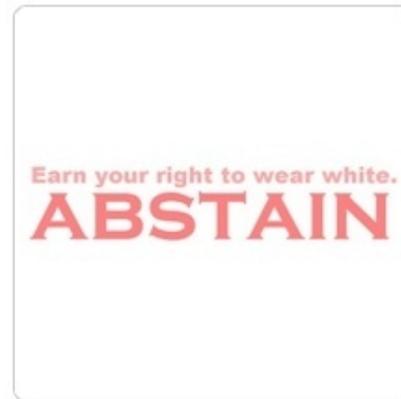
“An Abstinence Program’s Impact on Cognitive Mediators and Sexual Initiation,” *American Journal of Health Behavior*, January 2008

Study: The study was designed to evaluate the impact of an abstinence education program on the delay of sexual initiation and on possible cognitive

mediators of sexual initiation for virgin 7th graders in suburban Virginia. A quasi-experimental design involving 820 7th grade students was used with 3 middle schools receiving the program and 2 middle schools with similar demographics serving as the comparison group.

Results: Adolescent virgins who received the program were approximately one-half as likely as non-participants to initiate sexual activity after one year ($P<.05$).

Conclusion: Abstinence education reduces sexual initiation over a twelve month period.



“Impact evaluation of the ‘Not Me, Not Now’ abstinence-oriented adolescent pregnancy prevention communications program, Monroe County, New York,” Doniger et al., *Journal of Health Communication* 2001, vol. 6

Study: Not Me, Not Now is an abstinence oriented, adolescent pregnancy prevention integrated communications program developed by Monroe County, N.Y. The evaluation utilized a cross-sectional time series approach in the analysis of items from several waves of youth surveys administered to two different age groups of teens. Analysis of pregnancy rates for 15-17 year-olds in the county were compared to reductions found in similar geographic areas.

Results: After a 5-year county-wide mass communications program through Not Me, Not Now there was a 32% reduction in the percent of teens under 16 who had experienced sex ($P<.05$). The adolescent pregnancy rate for Monroe County dropped from 63.4% in 1993 to 49.5% in 1996. By comparison, Monroe’s rate was higher than two surrounding counties in 1993 and lower than both counties in 1996.

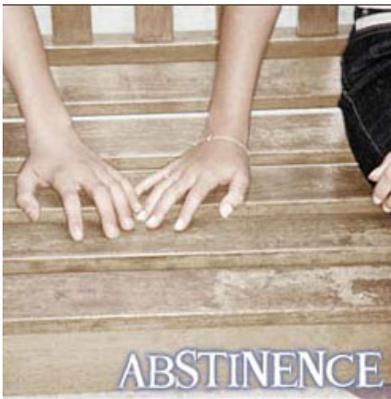
Conclusion: Abstinence education demonstrates statistically significant, consistent changes on measures of program awareness, beliefs and attitudes, self-reported behaviors, and pregnancy rates.

“Effectiveness of Abstinence-only Intervention in Middle School Teens,” Borawski et al., *American Journal of Health Behavior*, September/October 2005

Study: The study population comprised 2069 adolescents in seventh and eighth grades enrolled in 5 urban and 2 suburban middle schools in the Midwest during the 2001-2002 school year. Classrooms were randomly assigned either to program or control group. Program students received For Keeps, a five session abstinence program.

Results: No impact on sexual initiation was demonstrated, however, intervention students who were sexually active were about one-half as likely to be sexually active after 5 months than those who did not receive the program ($P < .05$) and sexually experienced students who received the program demonstrated a reduction in partners.

Conclusion: Abstinence education reduces the prevalence of casual sex among sexually experienced students.



“An Evaluation of the Heritage Keepers Abstinence Education Program,” Weed, Office of Population Affairs, HHS, 2005

Study: An abstinence education program for middle school students in South Carolina was evaluated using a quasi-experimental design with matched comparison groups to determine its impact on the rate of sexual initiation after 12 months for the sexually inactive in the sample.

Results: After one year program participants were about one-half as likely to become sexually initiated as their peers in the comparison group ($P < .001$)

Conclusion: Abstinence education reduces the rate of sexual initiation over a 12 month period.

This recent study supports the effectiveness of virginity pledges, which often accompany abstinence-only sex education.

“Virginity Pledges Among the Willing: Delays in First Intercourse and Consistency of Condom Use,” Martino et al., *Journal of Adolescent Health*,

October 2008.

Purpose: We examine longitudinal relationships between virginity pledging in adolescence and both sexual initiation and condom use. Prior studies have had mixed results and may not adequately control for prepledge differences between pledgers and nonpledgers.

Methods: Data came from a national sample of 12- to 17-year-olds surveyed in 2001 and reinterviewed 1 and 3 years later. Logistic regression models estimated the association between making a pledge and each outcome. Selection bias was reduced through propensity-score weighting and a rich set of demographic and psychosocial covariates.

Results: Pledgers and nonpledgers differed substantially in preexisting characteristics. However, after propensity weighting and statistical controls, pledging was still associated with delayed intercourse. We estimate that in the absence of pledging 42.4% of virgins with characteristics indicating an inclination to pledge initiate intercourse within 3 years; in the presence of the pledge, 33.6% of such youth initiate intercourse. Among those who had sex during this period, pledging was unassociated with condom use. Among those who did not have sex during this period, pledging was unassociated with engagement in noncoital sexual behavior.

Conclusions: Making a virginity pledge appears to be an effective means of delaying sexual intercourse initiation among those inclined to pledge without influencing other sexual behavior; pledging does not appear to affect sexual safety among pledgers who fail to remain abstinent.

<http://www.heritage.org/Research/Abstinence/BG1533.cfm>,

http://www.abstinenceassociation.org/docs/Abstinence_vs_Comprehensive_Sex_Ed.pdf,

<http://www.azabstinence.com/NAEA%20on%20Mathermatics%204-13-07.pdf>,

<http://www.eagleforum.org/educate/2000/june00/nosy.html>,

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<http://heritageservices.accountsupport.com/evaluation.html>

Who challenges it

A researcher cited as scientifically supporting abstinence-only sex education's effectiveness, John Santelli [see "Can changes in sexual behaviors among high school students explain the decline in teen pregnancy rates in the 1990s?" above], reached a different conclusion in 2008.

Santelli is the primary author of the Society for Adolescent Medicine's report "Abstinence and abstinence-only education: A review of U.S. policies and programs," which clearly rejects abstinence sex education without comprehensive information about contraception, sexually transmitted infections (STI), and sexuality:

Abstract: Abstinence from sexual intercourse is an important behavioral strategy for preventing human immunodeficiency virus (HIV), other sexually transmitted infections (STIs), and pregnancy among adolescents. Many adolescents, including most younger adolescents, have not initiated sexual intercourse and many sexually experienced adolescents and young adults are abstinent for varying periods of time. There is broad support for abstinence as a necessary and appropriate part of sexuality education. Controversy arises when abstinence is provided to adolescents as a sole choice and where health information on other choices is restricted or misrepresented. Although abstinence is theoretically fully effective, in actual practice abstinence often fails to protect against pregnancy and STIs. Few Americans remain abstinent until marriage; many do not or cannot marry, and most initiate sexual intercourse and other sexual behaviors as adolescents. Although abstinence is a healthy behavioral option for teens, abstinence as a sole option for adolescents is scientifically and ethically problematic. A recent emphasis on abstinence-only programs and policies appears to be undermining more comprehensive sexuality education and other government-sponsored programs. We believe that abstinence-only education programs, as defined by federal funding requirements, are morally problematic, by withholding information and promoting questionable and inaccurate opinions. Abstinence-only programs threaten fundamental human rights to health, information, and life. © 2006 Society for Adolescent Medicine.

The report asserts that abstinence-only sex education ignores the realities of sexual activity:

Although abstinence until marriage is the goal of many abstinence policies and programs, few Americans wait until marriage to initiate sexual intercourse. Most Americans initiate sexual intercourse during their adolescent years. Recent data indicate that the median age at first intercourse for women was 17.4 years, whereas the median age at first marriage was 25.3 years. In 1970, the time between first intercourse [19.2 years] and first marriage [20.3] was considerably shorter. For men in 2002, the corresponding median age at first intercourse was 17.7 years, whereas the age at first marriage was 27.1 years.

The writers express concern that adolescent vulnerability to pregnancy and STIs is increased without complete and accurate information about sex.

Initiation of sexual intercourse in adolescence is accompanied by considerable risk of STIs and pregnancy. Adolescents have the highest age-specific risk for many STIs, and the highest age-specific proportion of unintended pregnancy in the United States. The United States continues to lead the developed world in adolescent pregnancy rates. Over 800,000 adolescents become pregnant each year, 80% of these pregnancies are unintended, and many of these end in abortion. An estimated 18.1 million STIs occurred in 2000 in the United States; almost half of these in adolescents and young adults under 25. Long-term sequelae of STIs can include infertility, tubal pregnancy, fetal and infant demise, chronic pelvic pain, and cervical cancer.

The researchers also take issue with the scare tactics used in abstinence-only sex education (AOE):

Although federal AOE funding language requires teaching that sexual activity outside of the context of marriage is likely to have harmful psychological effects, there are no scientific data suggesting that consensual sex between adolescents is harmful.

The report also expresses concerns about the restrictions the Section 510 Abstinence Education Program places on information students receive and the greater harm it can cause:

Abstinence-only sex education may have profoundly negative impacts on the well-being of gay, lesbian, bisexual, transgender and questioning (GLBTQ) youth. An estimated 2.5% of high school youth self-identify as gay, lesbian or bisexual, and more may be uncertain of their sexual orientation. However, as many as one in ten adolescents struggle with issues regarding sexual identity. Abstinence-only sex education classes are unlikely to meet the health needs of GLBTQ youth, as they largely ignore issues surrounding homosexuality (except when discussing transmission of HIV/AIDS), and often stigmatize homosexuality as deviant and unnatural behavior. Homophobia contributes to health problems such as suicide, feelings of isolation and loneliness, HIV infection, substance abuse, and violence among GLBTQ youth.

Under Section 510 requirements, emphasis must be placed on heterosexual marriage as the only appropriate context for sexual relationships. Federal law and regulations limit the definition of marriage within the meaning of federally funded abstinence-only programs to exclude same-sex couples. With the exception of Massachusetts, no states offer legal marriage to gay and lesbian couples, and recently, 11 states have passed laws specifically barring same-sex marriage. Lifelong abstinence as an implied alternative holds GLBTQ youth to an unrealistic standard markedly different from that of their heterosexual peers.

A less-scientific analysis of abstinence-only sex education in *Rethinking Schools Online* concludes that ignoring the needs of almost half of adolescents who are sexually active before age 18 does them and the country a disservice:

Despite a decline in adolescent sexual activity, pregnancy, birth, and abortion rates, U.S. teens are still in great need of sexuality education. According to the 2001 Youth Risk Behavior Survey released in October by the U. S. Centers for Disease Control and Prevention, 45.6 percent of high school students nationally reported having had sexual intercourse at least once, compared with 54.1 percent in 1991.

Mathematica Research’s study “Impacts of Four Title V, Section 510 Abstinence Education Programs,” requested by the Department of Health and Human Services in 1997. Mathematica followed four selected Title V, Section 510 abstinence education programs: My

Choice, My Future! in Powhatan, Virginia; ReCapturing the Vision in Miami, Florida; Families United to Prevent Teen Pregnancy (FUPTP) in Milwaukee, Wisconsin; and Teens in Control in Clarksdale, Mississippi.

The study, among other results, found little or no difference between the behavior of adolescents in the four abstinence programs studied and the control group, who participated in no sex-ed programs.

Figure 1. Estimated Impacts on Sexual Abstinence

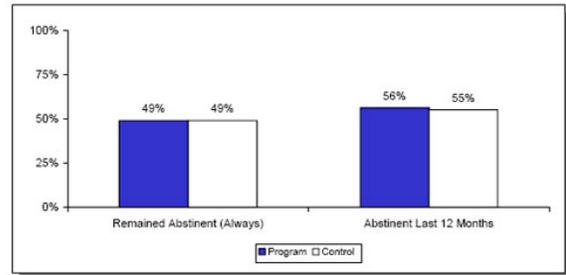


Figure 2. Estimated Impacts on Unprotected Sex, Last 12 Months

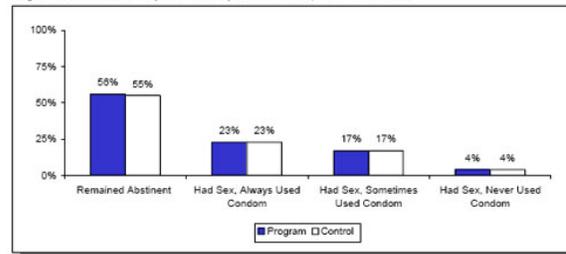
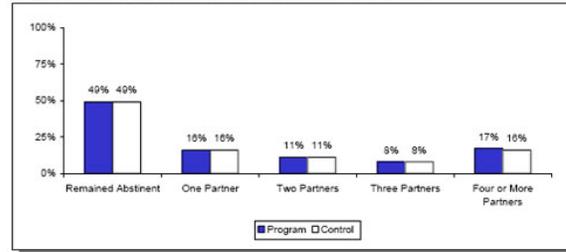


Figure 3. Estimated Impacts on Reported Number of Sexual Partners



Results from Mathematica Research’s study

For varying reasons, from political to ethical to scientific, groups such as Planned Parenthood, the Journal of Adolescent Health, the Sex Information and Education Council of the United States, the Guttmacher Institute, and the Henry J. Kaiser Family Foundation have voiced public criticism of abstinence-only sex education.

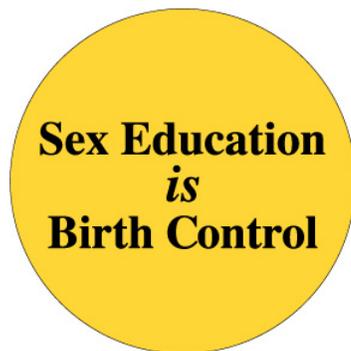
Arguably the most damning analysis of abstinence-only sex education came from United States House Of Representatives Committee on

Government Reform, Minority Staff Special Investigations Division, in December 2004. Their report, entitled “The Content Of Federally Funded Abstinence-Only Education Programs” was prepared for Rep. Henry A. Waxman. Some of its findings conclude:

G. Abstinence-Only Curricula Contain Scientific Errors

In addition to the inaccurate and misleading information discussed above, a number of the abstinence-only curricula contain erroneous information about basic scientific facts. These errors cover a variety of issues:

- **Human Genetics.** One curriculum states: “Twenty-four chromosomes from the mother and twenty-four chromosomes from the father join to create this new individual.” In fact, human cells have 23 chromosomes from each parent, for a total of 46 in each body cell. The same curriculum also teaches: “Girls produce only female ovum, boys, however, have both male and female sperm.” This too is inaccurate. Females produce ova with X chromosomes, and males produce sperm with either X or Y chromosomes. These combine to make an XX combination (female) or an XY combination (male).
- **Infectious Disease.** One curriculum defines “sexually transmitted infections” as “bacterial infections that are acute and usually can be cured” and defines “sexually transmitted diseases” as “infections that are viral in nature, chronic, and usually can not be cured, but rather controlled through treatment.” In fact, these terms are used interchangeably in medicine, and the program’s definitions are not widely accepted.



- **Puberty.** One curriculum tells instructors: “Reassure students that small lumps in breast tissue is common in both boys and girls during puberty. This condition is called gynecomastia and is a normal sign of hormonal changes.” This definition is incorrect. In adolescent medicine, gynecomastia refers to a general increase in breast tissue in boys.

- **HIV.** Another curriculum erroneously includes “tears” and “sweat” in a column titled “At risk” for HIV transmission. In fact, according to the CDC, “[c]ontact with saliva, tears, or sweat has never been shown to result in transmission of HIV.”

IV. CONCLUSION

Under the Bush Administration, federal support for abstinence-only education has risen dramatically. This report finds that over two-thirds of abstinence-only education programs funded by the largest federal abstinence initiative are using curricula with multiple scientific and medical inaccuracies. These curricula contain misinformation about condoms, abortion, and basic scientific facts. They also blur religion and science and present gender stereotypes as fact.

[http://www.jahonline.org/article/S1054-139X\(05\)00467-2/abstract](http://www.jahonline.org/article/S1054-139X(05)00467-2/abstract), www.mathematica-mpr.com/publications/pdfs/impactabstinence.pdf, http://www.rethinkingschools.org/archive/17_02/Abst172.shtml, <http://oversight.house.gov/documents/20041201102153-50247.pdf>

Abstinence-Plus Sex Education

What it is

In abstinence-plus education, participants are given a hierarchy of safe-sex strategies. At the top of the hierarchy is the promotion of sexual abstinence as the safest route to HIV prevention. Recognizing that some participants will not be abstinent, abstinence-plus approaches encourage individuals to also use condoms and to adopt other safer-sex strategies.

Some critics of abstinence-plus programs have suggested that promoting safer sex along with abstinence may undermine abstinence messages or confuse program participants; conversely, others have suggested that promoting abstinence might undermine safer-sex messages.

<http://medicine.plosjournals.org/perlserv/?request=get-document&doi=10.1371/journal.pmed.0040276&ct=1>, <http://medicine.plosjournals.org/perlserv/?request=get-document&doi=10.1371%2Fjournal.pmed.0040275>,

Who supports it

The problem proponents of abstinence-plus sex education see with abstinence-only is the prevalence of the spread of STDs and HIV. Without accurate information about condom use, especially, adolescents are at risk for infections they might have prevented with the right curriculum.

In Washington state, September 2008 saw the debut of the Healthy Youth Act, a state law approved by the Legislature in 2007. It does not require that schools teach sex education, but it sets a standard for those that do. The information must be "medically and scientifically accurate," "age appropriate," and include information about abstinence.

This changed the curriculum from an abstinence-only sex education curriculum to an abstinence-plus sex education curriculum, a development that pleased many teachers. A teacher interviewed by the Yakima Herald-Republic commented, "We have always been an abstinence-based district, but you can hardly talk about (sexually transmitted diseases) without talking about using a condom and other ways to prevent some of these things. I don't think you are doing anybody a service if you are talking about these things and not talking about the benefits of using a condom."

Oxford University researchers had positive results when studying abstinence-plus sex education programs:

In addition to teaching condom skills, abstinence-plus programs commonly teach about safer sex negotiation, communication with partners, and transmission of HIV and other sexually transmitted infections. [A study] found 39 studies involving over 37,000 North American young people. In 23 studies there was a significant increase in protective behavior. None of the studies reported any adverse effects; contrary to criticisms against abstinence-plus programs, participants did not become more sexually active after completing the interventions.

<http://www.medscape.com/viewarticle/565862>,
<http://www.yakima-herald.com/stories/3355>,
<http://www.sciencedaily.com/releases/2008/01/08012203227.htm>,

http://www.poz.com/articles/abstinence_hiv_plus_13195.shtml

Who challenges it

In 2002, the Heritage Foundation raised the alarm about abstinence-plus education, reporting:

In recent years, parental support for real abstinence education has grown. Because of this, many traditional safe-sex programs now take to calling themselves "abstinence plus" or "abstinence-based" education. In reality, there is little abstinence training in "abstinence-based" education. Instead, these programs are thinly disguised efforts to promote condom use. The actual content of most "abstinence plus" curricula would be alarming to most parents. For example, such programs typically have condom use exercises in which middle school students practice unrolling condoms on cucumbers or dildoes.

They noted:

Major programs with this type of activity include "Focus on Kids," "Becoming a Responsible Teen," and "Be Proud! Be Responsible!"



Poster from the National Abstinence Education Association

Heritage also expressed concern about abstinence-plus sex education in 2004, in an article entitled "Facts about Abstinence Education." Their argument said:

Fact: "Comprehensive sex education" or "abstinence plus" programs are merely safe sex programs wrapped in a deceptive label.

In recent years, a new approach, termed "abstinence plus" or "comprehensive sexuality

education,” has played a prominent role in the public debate over sex education. According to proponents, abstinence plus or comprehensive sex ed programs place a strong emphasis on abstinence but also contain information about contraception. This approach is presented as the middle ground between “safe sex” and abstinence.

In reality, comprehensive sex ed programs are nothing more than standard “safe sex” programs wrapped in a new label. These curricula have little meaningful abstinence content. True abstinence curricula devote, on average, 71 percent of their page content to abstinence. In contrast, comprehensive sex ed curricula, on average, allocate only 4.7 percent of their content to abstinence; the overwhelming focus is on encouraging teens to use contraception.

A less-ideological perspective is in “The ethics of abstinence-only and abstinence-plus sexuality education,” published in 2002 in the *Journal of School Health*. By taking an ethical approach to the question of sex education and the type of curriculum used, the author uses articles from the Code of Ethics for the Health Education Profession:

Article II. Responsibility to the Profession

Health Educators are responsible for their professional behavior, for the reputation of their profession, and for promoting ethical conduct among their colleagues.

Section 2. Health Educators model and encourage nondiscriminatory standards of behavior in their interactions with others.

Article III. Responsibility to Employers

Health Educators recognize the boundaries of their professional competence and are accountable for their professional activities and actions.

Section 2. Health Educators use appropriate standards, theories, and guidelines as criteria when carrying out their professional responsibilities.

Section 3. Health Educators accurately represent potential service and program outcomes to employers.

The answers leave open the possibility that even abstinence-based (or abstinence-plus) sex education may not go far enough in ensuring that the ethics of the teaching profession are fulfilled:

Article II raises these questions: With limited data on the effectiveness of abstinence-only curricula, does the professional reputation of health educators suffer when these curricula are used? Should abstinence-only programs be used in schools so they may be adequately evaluated? Should an abstinence-based program shown ineffective continue to be used? Does the assumption that all students are heterosexual and will someday marry create academic discrimination in the classroom?

Article III raises these questions: Does the abstinence-only approach represent an “appropriate standard or theory?” Could the same question be asked of abstinence-based programs? Do health educators have a professional obligation to inform decision-makers (i.e., school boards, administrators, local health education advisory councils, general public, etc) about the research on effectiveness of sexuality education programs?

These and other ethical dilemmas result when teaching sexual overlaps with moral and social judgment.

<http://www.heritage.org/Research/Abstinence/BG1533.cfm#pgfId=1009707>,
<http://www.heritage.org/research/abstinence/wm461.cfm>, http://goliath.ecnext.com/coms2/gi_0199-1673636/The-ethics-of-abstinence-only.html#abstract

Comprehensive Sex Education

What it is

Comprehensive Sex Education teaches about abstinence as the best method for avoiding STIs and unintended pregnancy, but also teaches about condoms and contraception to reduce the risk of unintended pregnancy and of infection with STIs, including HIV. It also teaches interpersonal and communication skills and helps young people explore their own values, goals, and options.

<http://www.advocatesforyouth.org/rrr/definitions.htm>

Who supports it

The American Psychological Association saw the need in 2005 to address the alarming statistics on HIV infection in people under 25 years of age. More than half of all infections occurred in that group, due largely to their lacking the knowledge and skills to protect themselves.

The APA recommended that comprehensive and empirically supported sex education and HIV prevention programs become widely available to teach youth how to abstain from risky sexual behaviors and learn how they can protect themselves against HIV and other sexually transmitted diseases.



Commenting on the conclusion, psychologist Maureen Lyon, Ph.D., Chair of the committee that produced the report, said:

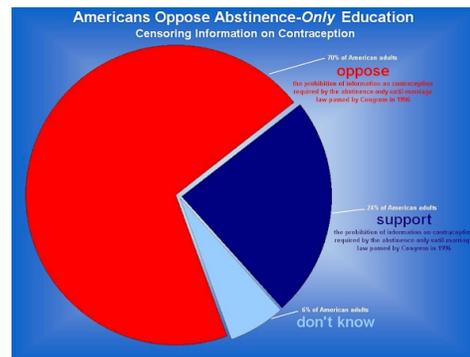
“Both comprehensive sex education and abstinence only programs delay the onset of sexual activity. However, only comprehensive sex education is effective in protecting adolescents from pregnancy and sexually transmitted illnesses at first intercourse and during later sexual activity. In contrast, scientifically sound studies of abstinence only programs show an unintended consequence of unprotected sex at first intercourse and during later sexual activity. In this way, abstinence only programs increase the risk of these adolescents for pregnancy and sexually transmitted illnesses, including HIV/AIDS,” said psychologist Maureen Lyon, Ph.D., Chair of the committee that produced the report.

A 1999 poll of Americans found that the majority of Americans support sexuality education that includes both abstinence and information about contraception and condoms. The results showed:

- Ninety-three percent of Americans support the teaching of sexuality education in high schools, while 84 percent support sexuality education in middle/junior high schools.
- More than eight out of every 10 Americans believe young people should be given

information about protecting themselves from unintended pregnancies and STIs.

- Seven out of 10 Americans oppose the provision of federal funds for education promoting abstinence-only-until-marriage that prohibits teaching about the use of condoms and contraception for the prevention of unintended pregnancy, HIV/AIDS, and STIs. Congress passed such a program as part of welfare reform legislation in 1996.
- More than eight out of every 10 Americans reject the idea that providing such sexuality education encourages sexual activity.
- Adults see a strong distinction between abstinence and abstinence-only-until-marriage education. More than 90 percent of adults support abstinence being included as a topic in sexuality education for high school students. However 70 percent oppose the provision of federal law that allocates over half a billion dollars for abstinence-only-until-marriage education but prohibits use of the funds for information on contraception for the prevention of unintended pregnancy and disease.
- With the average age of puberty at 12 and of marriage at 26, and since 70 percent of 18-year-olds have had sexual intercourse, at least 69 percent of Americans agree that teaching abstinence-only-until-marriage is just not realistic.
- All groups, including conservative Christians, support high school and junior high school sexuality education to prevent disease and unintended pregnancy.
- Eighty-nine percent of Americans believe that it is important for young people to have information about contraception and prevention of STIs and that sexuality education programs should focus on how to avoid unintended pregnancies and STIs, including HIV and AIDS.



- More than six out of every 10 Americans (63%) believe that sexual exploration among young people is a natural part of growing up and that the best approach is to provide information and services to help young people act responsibly. These Americans included 44 percent of conservatives who reject the ideas that young people exploring their sexuality is wrong and that the best approach is setting limits on behavior before marriage.

<http://www.apa.org/releases/sexeducation.html>,
<http://www.advocatesforyouth.org/factsfigures/supps/exed.htm>

Who challenges it

The Heritage Foundation is a popular resource for anti-abstinence-plus and anti-comprehensive sex education studies. The Abstinence Clearinghouse, “a non-profit educational organization that promotes the appreciation for and practice of sexual abstinence through distribution of age-appropriate, factual and medically-accurate materials,” posted a Heritage study entitled “Success in Encouraging Teen Abstinence.” While the title suggests a celebration of abstinence-only sex education’s effectiveness, more than half of the article first describes the content of comprehensive sex education programs, then warns of the challenge proponents face to keep abstinence-only education in their schools:

These “comprehensive” programs are often misleadingly labeled “abstinence-plus” and falsely claim to forge a middle ground between abstinence and “safe sex” education. In reality, these programs are virtually all “plus” and no abstinence.

Analysis of “comprehensive” sex-ed programs reveals that these curricula contain little if any meaningful abstinence information. On average, these curricula devote about 4 percent of their content to abstinence and the rest to such enlightening activities as “condom races,” in which teams of teens race to see who can get a condom on a cucumber the fastest.

They explore “alternatives” to intercourse, such as sensual feeding, showering together and other activities that seem highly unlikely to discourage kids from having sex. In fact, out of 942 total pages of curriculum text reviewed from nine

different “comprehensive” sex-ed curricula, not a single sentence was found urging teens to abstain from sexual activity until they had graduated from high school. The overwhelming focus of these curricula (28 percent of the curriculum content) is devoted to promoting contraception among teens.

Sadly, these programs have friends in high places. Opponents in Congress continue to attempt to introduce legislation that would abolish federal abstinence education assistance. A proposal by Sen. Max Baucus (D-Mont.) would take federal funds devoted to teaching abstinence and turn them over to state public health bureaucracies to spend as they wish.

Congress is not alone in being portrayed as the enemy of abstinence-only sex education. The U.S. Department of Health and Human Services, authorized by Congress in 1997, enlisted Mathematica Policy Research to evaluate the effectiveness of programs funded under Title V, Section 510 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. In its report, Mathematica found that the programs had no effect on youth abstinence.

However, the National Abstinence Education Association, Focus of the Family Action, the Institute for Research and Evaluation, and the Medical Institute out of Austin, Texas, found Mathematica’s analysis flawed. One example, they said, was that the programs Mathematica started studying in 1997 had “improved” significantly over the years. Mathematica’s study was designed to be multi-year.



Jesus Sez:

**AbstinenceOnly:
they put the
"attitude"
in "beatitude."**

Many religious groups also oppose anything but abstinence-only sex education on moral grounds. Some believe that sex education has no place at all in school. In *On Teaching the Faith*, author Thomas P. Dolan reminded Catholics that

the Church's position "that children should be given prudent sex education and that this education ought to be given in the heart of the family." He continues:

Despite this wise stand on the part of the Church, some Catholic schools have followed the example of public schools or have bowed to liberal pressure and have put in sex education programs; and some Bishops have been persuaded to permit, and even to recommend, sex education in classrooms.

This is probably due, on the part of the Bishops, to a misunderstanding of what is meant by sex education. The Bishops probably envision instruction in morals as pertaining to sexual matters. This is of course badly needed—but it is not at all what is encompassed in the sex education programs which proliferate today under various names, e.g., family life education, hygiene, personality development. These programs are based on a philosophy of humanism. Their proponents frankly state that they are not intended to teach morals.

Less arcane objections to comprehensive sex education came in 2005 with a lawsuit fighting Montgomery County, Maryland, school system's revised sexuality education program and pilot program that included discussions on homosexuality. An organization called Citizens for Responsible Curriculum formed out of protest meetings.

Citizens for Responsible Curriculum decided to take further action and, together with the Virginia-based group Parents and Friends of Ex-Gays and Gays, brought a federal lawsuit against the school system. The Liberty Counsel, a conservative Florida-based Christian legal group loosely affiliated with Jerry Falwell, filed the lawsuit on behalf of the two groups on May 3. The lawsuit claimed that allowing discussions over homosexuality to take place in the schools and distributing resource materials that included information on gay-positive churches and religious groups gave preference to religions that are tolerant of homosexuality and ignored those churches that teach that homosexuality is wrong. In addition, the lawsuit claims the school board has an "irrational phobia of the ex-gay community" and the two groups asked the court to force the school district to include materials from ex-gay groups.

US District Judge Alexander Williams, in his judgment for the plaintiffs, explained, "the court is extremely troubled by the willingness of the defendants to venture, or perhaps more correctly, bound, into the crossroads of controversy where religion, morality, and homosexuality converge."

<http://www.abstinence.net/blog/index.php?postid=36>,
<http://www.abstinence.net/blog/index.php?postid=36>,
<http://www.azabstinence.com/NAEA%20on%20Mathermatica%204-13-07.pdf>,
<http://www.citizenlink.org/CLNews/A000004428.cfm>,
<http://abstinenceasia.com/blog/?postid=255>,
http://www.abstinenceassociation.org/docs/Abstinence_vs_Comprehensive_Sex_Ed.pdf,
<http://www.abstinence.net/about/>,
http://www.ewtn.com/library/HOMESCHL/SECAT_HSC.HTM,
<http://www.siecus.org/index.cfm?fuseaction=feature.showFeature&FeatureID=1274&varuniqueuserid=72604080480>

Virginity Pledge

What it is

Virginity pledges (or abstinence pledges) are commitments made by teenagers and young adults to refrain from sexual intercourse until marriage. They are especially common among Evangelical Christian denominations.

The first virginity pledge program was True Love Waits, started in 1993 by the Southern Baptist Convention, which now claims over 2.5 million pledgers worldwide in dozens of countries. A torrent of virginity pledge programs followed.

A later, prominent virginity pledge program was the Silver Ring Thing (SRT), which was the subject of a lawsuit by the American Civil Liberties Union (ACLU) in 2005. SRT presented a two-part program, the first part about abstinence; the second about born-again Christianity. The ACLU claimed that federal funding given to this program violated the separation of Church and State. The US Department of Health and Human Services settled the lawsuit by suspending SRT's federal grant until it submitted a "corrective action plan." In 2006, SRT decided not to seek further federal funding so it could continue its message.

Virginity pledge programs take a variety of stances on the role of religion in the pledge: some use religion to motivate the pledge, putting Biblical quotes on the cards, while others use statistics and arguments to motivate the pledge. Advocacy of virginity pledges is often coupled with support for abstinence-only sex education in public schools. Advocates argue that any other type of sexual education would promote sex outside of marriage, which they hold to be immoral and risky.

http://en.wikipedia.org/wiki/Virginity_pledge

Who supports it

In 1998, then-governor of Texas George W. Bush, attending the Baptist General Convention of Texas, received a copy of a report on the program True Love Waits. Started in 1993, the program challenges young people to sign pledge cards committing to sexual abstinence.

Bush said to those attending the convention,

Abstinence is a sure enough way to help solve a major problem facing our state, and that is the number of out-of-wedlock births. Abstinence is a sure enough way to help solve a major health problem we have, which is communicable diseases all across the state of Texas.

The Baptist program is only one of many programs that lauds sexual-abstinence, or virginity, pledges.



True Love Waits purity ring

Worth the Wait (WTW) is dedicated to community-wide efforts to promote abstinence-until-marriage education. They believe their success in establishing early teen sexual involvement as a youth risk behavior and public

health concern has enabled them to enlist medical professionals, social workers, teachers, and the community in the goal of abstinence-until-marriage education. WTW advocates an approach that emphasizes the idea of informed teen decision-making to avoid of all high-risk behaviors. Their main focus is to “educate, equip and empower” Texas Panhandle teens to choose abstinence and make healthy life choices.

From WTW’s Website:

Why You Should Wait

Teen sexuality is associated with many serious social problems including:

- Sexually Transmitted Infections: 1 out of 4 teens have a STI, and 1 out of 2 sexually active teens have a STI.
- Depression: Sexually active teens are more likely to be depressed than virgins.
- Suicide: Sexually active teens are more likely to attempt suicide than those who remain abstinent.
- School Expulsion: Sexually active teens are 3 times more likely to be expelled from school than those who remain abstinent.
- Dropping out of School: Sexually active teens are more likely to drop out of school than virgin teens. Teens who remain virgins through high school are twice as likely to graduate college than non-virgin teens.
- Marital Stability: Girls who became sexually active as teens are less likely to have stable marriages in their 30s than virgin teens.
- Pregnancy: More than half of the girls who begin sexual activity at age 15 will become pregnant out of wedlock.

Consistent with their reports on sex education, the Heritage Foundation in 2004 cited data from the National Longitudinal Study of Adolescent Health:

Adolescents who take a virginity pledge have substantially lower levels of sexual activity and better life outcomes when compared with similar adolescents who do not make such a pledge ...

Teens who make a virginity pledge are far less likely to be sexually active during high school years. Nearly two-thirds of teens who have never taken a pledge are sexually active before age 18; by contrast, only 30 percent of teens who consistently report having made a pledge become sexually active before age 18.

Teens who have made a virginity pledge have almost half as many lifetime sexual partners as non-pledgers have. By the time they reach their early twenties, non-pledgers have had, on average, six different sex partners; pledgers, by contrast, have had three.

In the wake of a 2006 report from Harvard School of Public Health that concluded that adolescents inconsistently report their histories of sexual intercourse and that reports from virginity pledgers were less reliable than non-pledgers, at least one church made a proactive statement to counter any doubts about the commitment made when pledging virginity until marriage:

Dear Virgins:

LifeTime Ministry would like to take this opportunity to address a recent report by a certain godless institution that claims to have found that many of you have failed to fulfill the terms of your Virginity Pledge. Do not fear. We are here to tell you that your purity is still very much intact. You were obviously just mistaken as to the subtle nuances of the pledge. So, to clarify any confusion that might have prompted an inaccurate response to the heathens' survey, we here at LifeTime are pleased to present "Virginity Pledge 2.0," a detailed, "user friendly" version that will purge any lingering uncertainties and confirm that your actions and behavior have, in fact, been fully consistent with your commitment to the purity lifestyle.

A 2008 study on virginity pledges in Pediatrics contradicted many of the findings in the 2004 report, especially about the use of contraception for birth control and protection from STDs.

Even when supporters acknowledge the potential for failure in virginity pledges, they still can see the positive results of upbringing that influences these pledges in on the kind of sex adolescents will try. Bernadine Healy, MD, in her U.S. News and World Report column, pointed to results of the 2008 study missed by other analysts:

In the study, it was only when researchers closely matched the virginity-pledging young people with a subset of nonpledging teens of similar social and attitudinal backgrounds that the two groups' sexual behaviors were similar—and both those groups were more conservative than teens overall. This matchup was important

in that it showed that the greater sexual restraint of the pledging teens, demonstrated here and in most other studies, was not due to the pledge per se but rather other virginity-promoting factors in their backgrounds.

Approximately three quarters of both pledging teens and the matched group of teens who didn't pledge had had sexual intercourse before marriage, but both groups reported less premarital vaginal sex, as well as less oral and anal sex, and fewer of them had had multiple sex partners when compared with the general population of young people.

<http://www.lubbockonline.com/stories/041598/AST-3032.shtml>,

<http://www.medicinenet.com/script/main/art.asp?articlekey=95313>,

<http://www.worthwait.org/cms/index.php?page=about>, <http://www.worthwait.org/cms/>,

<http://www.hsph.harvard.edu/news/press-releases/2006-releases/press05022006.html>,

http://www.themorningnews.org/archives/spoofs_sati_re/virginity_pledge_20.php,

<http://www.usnews.com/blogs/heart-to-heart/2008/12/30/7-factors-that-foster-teen-virginity-pledge-or-no-pledge.html>,

Who challenges it

A wide spectrum of individuals and groups have come out against virginity pledges, mostly due to reports that assert that not only do the pledges not work, they can put pledgers at greater risk for pregnancy and STDs than adolescents who do not take a pledge.



Testimonials

"I am committed to purity because I don't want to give my husband a "hand-me-down" on our wedding night."

*Mock virginity-pledge bumper sticker from
Hollywood Youth Group*

Opinions came out strongly against virginity pledges late in 2008 after research results in the January 2009 issue of Pediatrics reported that teenagers who take virginity pledges are no less sexually active than other teens. Moreover, their behavior when they become sexually active is more likely to be risky than for adolescents that do not take pledges.

Sources as diverse as WebMD, the Progressive blog Corrente, the humanistic

Website Epiphenom, the Media Research Center's CNSNews.com, the Guttmacher Institute, and Christianity Today weighed in on the discussion spurred by the report. Comments rang with vindication, while others were more measured.

Christianity Today examined the methodology used in the study, attempting to understand the discrepancies in studies in recent years:

By using the propensity score matching method, Rosenbaum was able to test whether taking a virginity pledge actually changes a person's sexual behavior, which is why her research is important. Previous research by professors Hannah Bruckner of Yale University and Peter Bearman of Columbia University used the same Add Health data in their 2001 article in the *American Journal of Sociology* (see also their research on STDs in 2005). They found that those who took a virginity pledge may (or may not) be less likely to have intercourse. If they did have sex, they were more likely to wait longer to do so. These studies also found that pledgers were less likely to use condoms and other birth control methods. In contrast, Rosenbaum's research provides a more rigorous test of the effects of taking a virginity pledge.

More recently, researchers from the RAND Corporation published a report in the October 2008 issue *Journal of Adolescent Health*, which found that virginity pledges delayed sexual intercourse and did not decrease the use of condom use when sex occurred. Like Rosenbaum, these researchers used propensity score matching. The differences in results are likely due to the use of a different data set. There are three differences that may be responsible for the different findings. The RAND survey includes adolescents as young as 12, while Add Health survey did not ask questions about views toward sex to adolescents under the age of 15. Rosenbaum's study asked about sexual relations five years after asking if the adolescent had taken a virginity pledge. Thus, the age of those in the study were 21 to 23 years of age when asked about their sexual behavior. The RAND study asked about sexual behavior one and three years later, which means the survey participants were 15 to 20 when asked about sexual behavior. This is an important difference, because Rosenbaum finds that the pledgers and their matched peers

who did have sex did not do so until about age 21.

Whether a study or anecdotal evidence casts doubt on virginity pledges, the controversy is unlikely to die down. Each side of the debate—for sex education, in addition to virginity pledges—is too tied up in ideology and politics to back down easily.

<http://www.medicinenet.com/script/main/art.asp?articlekey=95313>,

http://www.correntewire.com/new_pediatrics_study_virginity_pledges_dont_work_and_teens_deny_taking_them_even_when_they_did,

<http://bhascience.blogspot.com/2008/12/virginity-pledges-are-worse-than.html>,

<http://www.cnsnews.com/public/Content/article.aspx?RsrcID=41356>,

<http://www.guttmacher.org/media/inthenews/2008/12/30/index.html>,

<http://www.christianitytoday.com/ct/2009/januaryweb-only/101-31.0.html>

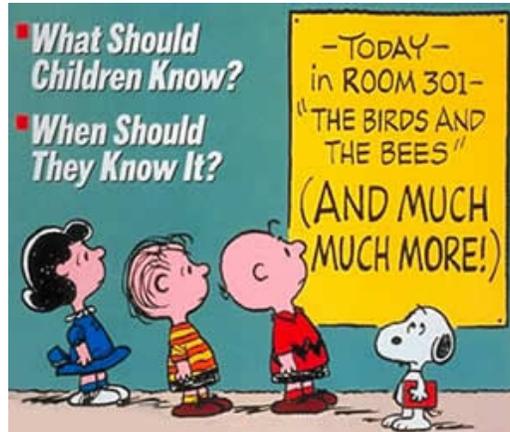
Questions for Research and Discussion

1. Although abstinence-only advocates warn about the physical, emotional, spiritual, and financial consequences of premarital sex, many studies have found no evidence to support this claim.

Have you received these kinds of warnings? When and from whom?

If so, did you ask for proof of the claims?

Emotional and spiritual consequences cannot be quantified, so how persuasive is it that studies—that generally conclude abstinence-only sex education is either no better than or more harmful than comprehensive sex education—have reached this conclusion?



2. Shelby's upbringing was conservative, both politically and spiritually, and yet she has developed into an activist that fights for what are termed "liberal" causes. Did the film trace that development sufficiently?
Do you know teens or young adults whose beliefs and actions have run counter to their upbringing? If so, do you see this as a positive or a negative outcome?
3. The stated goal of the Lubbock Youth Commission was to bring information beyond abstinence-only sex education into Lubbock schools. Shelby supported and worked toward this goal. Yet Shelby took on the cause of the Gay/Straight Alliance, which may have undermined the success of the Youth Commission's work.
Are the two goals compatible? Why or why not?
Was Shelby wrong to advocate for the Gay/Straight Alliance as a member of the Lubbock Youth Commission?
4. The American stereotype of religious people is that they are conservative politically, socially, and sexually. The stereotype for nonreligious people, especially if they disavow organized religion, is that they are liberal politically, socially, and sexually.
Do you see validity to these stereotypes? Why or why not? Give personal examples, if possible.
Did *The Education of Shelby Knox* lend credence to the stereotypes, or did it shatter them? Give reasons for your answer.
5. Rev. Ed Ainsworth is the pastor of a church and devotes himself to youth outreach. Yet Lubbock's public schools have regularly called Ainsworth in to lecture students on sexuality. Is there a conflict in this? Why or why not?
Do you feel that the "separation of church and state" applies to public schools? Why or why not?

6. What kind of sex education have you received in school and when? Do you believe it is the school's job to teach about sex, or do you believe that sex education should be a family matter? Explain your answer.
Since 1990, sex education has moved away from the comprehensive approach generally adopted in the 1960s and 1970s to an abstinence-based or abstinence-only approach. During that same period, the political climate of the United States has, according to many observers, become more conservative than it was in the previous decades. Now that the country has elected a Democratic president and has Democratic majorities in the House and Senate, do you think that there will be a shift back toward comprehensive sex education, modifying the Title V requirements for abstinence as the primary factor in the curriculum? Why or why not?
7. Although Shelby was committed to her work with the Lubbock Youth Commission, her mother felt that her health suffered during the time she was a member. Do you think that Shelby balanced her activities appropriately at that time? Why or why not?
During that same period, Shelby was the subject of a documentary film, putting her life—public and private—on camera. Could this also have had an effect on her health?
Now that Shelby has graduated from college, she is pursuing political and social activism as a career, and she speaks regularly to groups about sex education and women's issues. Yet, by looking at the pictures she has posted on Facebook, Shelby looks healthy. If maturity is a factor in how well Shelby handles the stress of her activism, is there a place for organizations like the Youth Commission, which could have a detrimental effect on a young member's health? Explain your opinion.
8. Look at the articles from the Lubbock newspapers in References and Resources: Lubbock news coverage of sex education and sexuality issues. The Lubbock Independent School District board maintained its stance on abstinence-only sex education in spite of numerous articles reporting on higher-than-average teen pregnancies and the incidence of sexually transmitted diseases.
Do you think that Lubbock's school administrators have a greater responsibility to the community that employs them or to developing a curriculum that reflects pedagogical studies, even if those studies contradict the desires of the community? Explain your answer.
Is abstinence-only sex education the will of the people of Lubbock in general, or is it a reflection of a vocal minority? Explain your answer.

References and Resources

Advocates for comprehensive sex education

Planned Parenthood of New York's resource for age-appropriate sex education, <http://www.getthefacts.org/>

Sex Information and Education Council of the United States, <http://www.siecus.org/>

Guttmacher Institute, whose goal is to advance sexual and reproductive health in the United States and worldwide, <http://www.guttmacher.org/>

Advocates for Youth's research and documentation about abstinence-only sex education, <http://www.advocatesforyouth.org/abstinenceonly/index.htm>

ETR Associates is a nonprofit publisher of health education and health promotion resources, including materials on abstinence, birth control, and HIV and safer sex, <http://pub.etr.org/>

Henry J. Kaiser Family Foundation portal to reports on sex education, sexually transmitted diseases, contraception, and sexual health communication, <http://www.kff.org/youthhivstds/sexeducation.cfm>

Planned Parenthood's portal site for locating Planned Parenthood offices and birth control, abortion, sexually transmitted diseases and safer sex, pregnancy, and emergency contraception information, <http://www.plannedparenthood.org/>

Sex, Etc. calls itself "Sex education by teens, for teens," with links to chat and forums discussing sexuality, pregnancy, STDs, birth control, and other sex issues facing teens, <http://www.sexetc.org/>

The Journal of Adolescent Health on the correlation between virginity pledges and risky behavior, [http://www.jahonline.org/article/S1054-139X\(05\)00055-8/fulltext](http://www.jahonline.org/article/S1054-139X(05)00055-8/fulltext)

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Advocates for abstinence-only sex education

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The text of Title 5, Sec. 510, which describes the US Government's policy on abstinence education through 2008, http://www.ssa.gov/OP_Home/ssact/title05/0510.htm

Concerned Women for America's library of materials on sex education, <http://www.cwfa.org/library.asp?category=education>

Abstinence Clearinghouse's portal to sites and materials on abstinence until marriage, <http://abstinence.net/>

Abstinence & Marriage Education Partnership portal to resources on abstinence education, research, and curriculum; teen abstinence; virginity pledges; and information for parents, <http://www.ampartnership.org/index.asp>

The Medical Institute's portal to articles, products, resources, and press reports about "Sexual Health for Life," <http://www.medinstitute.org/>

Project Reality's resources for abstinence information, <http://projectreality.org/reality/index.php>

Parents for Truth portal to information about teen pregnancy and STDs, as well as ways to fight comprehensive sex education in schools, <http://www.parentsfortruth.org/>

Silver Ring Thing is a ministry and performance group that promotes abstinence until marriage centered in a relationship with Jesus Christ, <http://www.silverringthing.com/>

Scott and White Memorial Hospital, TX, program “Worth the Wait,” a sex education program “to help empower teens to make healthy decisions,” <http://worththewait.org/>

The Heritage Foundation debunks the *Journal of Adolescent Health*’s report on the correlation between virginity pledges and risky behavior, <http://www.heritage.org/research/abstinence/whitepaper06142005-2.cfm>

“Barack Obama Won't Support Abstinence-Only Education, Wants Sex Ed,” <http://www.lifenews.com/nat3858.html>

Sex information without advocacy

The National Campaign to Prevent Teen Pregnancy presents practical information for teens and/or sexually active people, including statistics on teen pregnancy and descriptions of sex education programs, <http://www.thenationalcampaign.org/>

American Psychological Association’s study and determination that comprehensive sex education is more effective at stopping the spread of HIV infection, <http://www.apa.org/releases/sexeducation.html>

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