

Randall L. Wenger, Esq.
Chief Counsel
Pennsylvania Family Institute

H.B. 1162

H.B. 1163

Testimony before House Education Committee

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Thank you for inviting me before the House Education Committee to express why the Pennsylvania Family Institute believes that House Bill 1162 as currently drafted and House Bill 1163 would be harmful and counterproductive to teen physical and emotional health and to preventing teen pregnancy.

The Pennsylvania Family Institute is a statewide organization representing the interests of families and our tens of thousands of members throughout the state. As an organization representing families, we first want to highlight what parents throughout the state want as far as sex education and the sexual activity of their children. Second, we want to communicate how the overwhelming preference of parents in these areas is in the best interest of their children's sexual and emotional health and in the best interest of preventing teen pregnancy. Finally, while we agree with some of the stated goals of these bills, we believe that H.B. 1162 and H.B. 1163 are not in the best interest of those goals.

If you ask parents if they support some form of sex education, most parents agree. However, the umbrella of sex-education covers the gamut from abstinence-only education, to sex education that ultimately encourages sexual

activity. Most parents are supportive of abstinence-only sex education, but most are not supportive of sex education that in any way promotes sex.¹

Most parents want their children to refrain from sex until marriage or at least until they have graduated and are in a relationship with someone they want to marry.² Frankly, we do not want our children to make the same mistakes that our generation made following the sexual revolution. We know that sex in the midst of the immaturity of youth leads to significant consequences. Some consequences are unaffected by the use of a condom including the emotional trauma of sexual activity in the midst of the instability of the teen years. Additionally, teens get pregnant and sexual diseases continue to spread even when precautions are taken.

While all should agree that the reduction in sexual activity among youth, the reduction in teen pregnancy, and the reduction in STDs is a laudable goal, how do we get there? If H.B. 1163 is passed, abstinence-only education will end and, instead, we will communicate to our children that while abstinence is great if you want to go that direction, you should be fine as long as you use contraceptives. At best, if equal time were given to abstinence and to contraception, we would be sending our children mixed messages. The official message they would be getting through a trusted, responsible source, their schools, would be that abstinence does not really matter. However, it is worse than that. Abstinence tends to be a minor if not forgotten part of the message of the most popular curricula.³

¹ Zogby International Poll of 1,004 parents with children under age 18, December 2003, as set forth in detail in *Comprehensive Sex Education vs. Authentic Abstinence: A Study of Competing Curricula*, Shannan Martin, Robert Rector, and Melissa G. Pardue, The Heritage Foundation, at 85 *et seq.*, available at http://www.heritage.org/Research/Welfare/upload/67539_1.pdf. The relevant pages are attached as an Appendix hereto.

² 47% percent of adults believe that young people should not engage in sex until marriage. Another 32% believe that they should not engage in sex until they have finished high school and are in a relationship with someone they want to marry. *See id.*

³ A Health and Human Services study of the most recommended curricula states that “the curriculum with the most balanced discussion of abstinence and safer-sex still discussed condoms and contraception nearly seven times

We should understand what we mean when we talk about abstinence-only sex education v. curricula promoting the use of contraceptives or “comprehensive” sex education. Abstinence-only education talks about contraceptive use. Rather than demonstrating how to use a condom or assuring our children about the safety of contraceptive use, abstinence-only education points out that condoms and other contraceptives may lessen the chances of pregnancy and disease by given percentages, there are significant fail rates. It is not as if those advocating abstinence turn a blind eye to our children’s wellbeing and knowledge about contraceptives, but the emphasis is on abstinence being the only way to guarantee prevention of disease, pregnancy, and the fallout to our children’s emotional health.

So called “comprehensive” sex-education goes well beyond the safety of birth control. Instead, a 2007 Health and Human Services study of the most recommended comprehensive sex-education curricula shows a very different emphasis. This study found that most curricula emphasized contraceptive usage to the near exclusion of abstinence.⁴ Moreover, this study pointed out many of the flaws with the most popular curricula. There were some flaws in terms of the medical accuracy of statements in most of the curricula.⁵ However, there were also conceptual flaws. Some curricula actually encouraged erotic behaviors as an alternative to sex or described and encouraged sexual stimulation,⁶ behaviors that we all know ultimately lead to sex. Most parents

more than abstinence.” Review of Comprehensive Sex education Curricula, The Administration for Children and Families, Department of Health and Human Services, May 2007, at 6, (hereinafter “HHS Study”) available at <http://www.acf.hhs.gov/programs/fysb/content/abstinence/06122007-153424.PDF>.

⁴ *See id.*

⁵ *See id.* at 7.

⁶ For instance, the curriculum entitled “Be Proud! Be Responsible” encourages showering together, describes how to create a female orgasm, and suggests other erotic behaviors. *See id.* at 16-17. “Reducing the Risk” encourages the romantic use of condoms and foam. *See id.* at 14. “Teen Talk” encourages masturbation. *See* Comprehensive Sex Education vs. Authentic Abstinence, *supra*, at 43 quoting “Teen Talk” at 6-7. “Get Real About AIDS” and “Focus on

do not want their teen engaging in erotic behaviors or being encouraged in those erotic behaviors by their schools.

Parents don't want this kind of thing taught to their kids. 88% of parents, of course, disapprove of their middle school or high school child being taught: "Use condoms as a method of foreplay. Use different colors and types and textures. Think of a sexual fantasy using condoms. Tell your partner how using a condom can make a man last longer. Hide a condom on your body and ask your partner to find it. Plan a special day when you can experiment."⁷ Of course this sounds extreme, and it's no wonder that parents don't want this. But you can find this taught in one curriculum.⁸

Similarly, 79% of parents disapprove of their 9-15 year olds being taught: "There are many ways to be close. The list may include body massage, bathing together, masturbation, sensuous feeding, fantasizing, watching erotic movies, reading erotic books and magazines."⁹ Again, you will find that in another curriculum.¹⁰

88% of parents disapprove of their high-school aged children being taught that they can use jelly, syrup, or honey as condom lubricants.¹¹ This was found in yet another leading curriculum.¹²

Kids" both encourage mutual masturbation. See *id.* at 40 quoting "Get Real About AIDS" at 79 and "Focus on Kids" at 83.

⁷ Zogby International Poll of 1,245 parents of school-age children, January 2003, as set forth in detail in *Comprehensive Sex Education vs. Authentic Abstinence*, *supra*, at 45.

⁸ See HHS Study, *supra*, at 17 discussing "Be Proud! Be Responsible".

⁹ Zogby International Poll of 1,245 parents of school-age children, January 2003, *supra*.

¹⁰ See *Comprehensive Sex Education vs. Authentic Abstinence*, *supra*, at 43 discussing "Focus on Kids", at 137.

¹¹ Zogby International Poll of 1,245 parents of school-age children, January 2003, *supra*.

¹² See *Comprehensive Sex Education vs. Authentic Abstinence*, *supra*, at 43 discussing "Becoming a Responsible Teen".

71% of parents disapprove of their middle school aged child being asked to unroll a condom and practice putting it on his or her fingers, a banana, or a wooden model of a penis.¹³ 70% of parents disapprove of children obtaining contraceptives or procedures for obtaining contraceptives without their approval.¹⁴ These can be found more commonly in leading curricula.¹⁵

Contrary to these messages, parents want their children to receive an abstinence message. Only 7% of parents believed it was appropriate to communicate that “It’s okay for teens in school to engage in sexual intercourse as long as they use condoms to protect against sexually transmitted diseases and pregnancy.”¹⁶ 91% of parents believe that schools should teach that “The best choice is for sexual intercourse to be linked to love, intimacy, and commitment. These qualities are most likely to occur in a faithful marriage.”¹⁷ 91% of parents believe that “adolescents should be expected to abstain from sexual activity during high school years.”¹⁸ Clearly “comprehensive” sex-education with *de minimus* emphasis on abstinence and which, instead, tends to encourage sexual promiscuity is not what parents want.

Parents’ wishes should be respected, not simply because they are your constituency, but because their position is consistent with the best interest of children, their emotional and physical health, and in avoiding teen pregnancy. As the Health and Human Services Study pointed out, “The fact that both the stated purposes and the actual content of these curricula emphasize ways to lessen risks associated with sexual activity—and not necessarily avoiding sexual activity—may explain why research shows them to be more effective at increasing condom use than at delaying sexual debut.”¹⁹ Even then, the study

¹³ Zogby International Poll of 1,245 parents of school-age children, January 2003, *supra*.

¹⁴ *Id.*

¹⁵ *See generally*, HHS Study, *supra*.

¹⁶ Zogby International Poll of 1,004 parents with children under age 18, December 2003, *supra*.

¹⁷ *Id.*

¹⁸ *Id.*

¹⁹ HHS Study, *supra*, at 9.

pointed out that the impacts on condom use were “small” and that “effect most often disappear over time”.²⁰ Based on the negligible positive effect of “comprehensive” sex-education and the confused messages that are sent to our children, the effect of these programs is negative. As long as we encourage erotic activity in our youth, we will be undermining the message from their parents. And only the message of abstinence will protect our children from the emotional trauma of teen sex, let alone completely protect them from pregnancy and disease.

Parental desires should also be honored because we have long respected parental rights in education. Probably the most significant reminder of those rights is the landmark decision of *Wisconsin v. Yoder*, 406 U.S. 205, 92 S.Ct. 1526 (1972), in which the United States Supreme Court upheld the right of Amish parents to direct the education of their children, including pulling them from school at an early age, as is their religious custom. Likewise, parental rights in education should be recognized in the area of sex-education. Parents are in the best position to guide their children regarding sexual activity. What parents are trying to teach their children at home should not be undermined through what is being taught in the schools.

While H.B. 1163 has an opt-out mechanism, this does not vindicate parental rights. There is nothing in the bill that requires that parents be informed that sex-education is going to be taught. If that basic information is not passed along, parents cannot effectively opt-out their children. Even if parents were made aware that sex-education is being taught at a particular time, there is not adequate notice unless the contents of the curriculum are passed along to the parents. Without this information, parents could easily believe that the “comprehensive” sex-education does not contain the objectionable elements of many of the popular curricula.

There is a way to make an opt-out contain an appropriate notice. In fact, H.B. 1162 does a fairly comprehensive job of giving notice, as far as abstinence only education. In H.B. 1162, a principal is required to notify all parents of their ability to withdraw their child. Parents are also given some details regarding the contents. If H.B. 1163 is to in any way respect parental rights, it must, at a minimum, give this kind of detail to parents so that they can knowledgably opt-out their child.

²⁰ See *id.* at 8-9.

While H.B. 1162 has a robust opt-out, our problem with that particular bill is that it is aimed only at abstinence-only sex education. As can be seen by the polling, many parents are concerned about the contents of common “comprehensive” sex-education curricula. H.B. 1162 could be a very acceptable bill if it were not limited to abstinence-only education but applied to all sex education. As it is, it doesn’t provide protections that parents need in the most common sex education contexts. Additionally, the bill is problematic because it does not accurately explain the contents of abstinence only education. Abstinence only education does include statistics on contraceptive use. Finally, the bill, as currently drafted, sends the wrong message to parents as if abstinence-only education is dangerous. In reality, comprehensive sex-education contains the elements that most parents are concerned about.

In summary, the Pennsylvania Family Institute requests on behalf of the thousands of families that we represent that you oppose H.B. 1162 and H.B. 1163. H.B. 1162 should be amended to include opt-out for all forms of sex-education. H.B. 1163 is worse as it undermines the instruction of parents and the best interest of our children, an expectation of abstinence. Only abstinence prevents the emotional and physical consequences of sex, including teen pregnancy.