

The Goal of Sex Education

**The Prevention of
Teenage Sexual Activity
as the Standardized Goal of
Sex Education Programs**

by Peter F. Brown

published by
THE WORLD COMMUNITY NETWORK

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Preface

This booklet has been written for parents, community leaders and volunteers, legislators, educators, the media, and any other persons concerned about the issues of sex education. Although it deals with some specific issues in Virginia, I believe that it will also have value for other states.

In my analysis of the merits or demerits of sex education as it now stands, I have decided to take what I hope is a reasoned and balanced approach to the issues. Nothing will be gained by the publication of another polemic that will be ignored by one side or the other. My hope is that leaders and legislators from “both sides of the aisle” will agree that they share one very important common attribute: they either have children themselves or are close to someone who does. In other words, I am seeking with this booklet to make the issues of sex education “personal”, and seek common sense solutions to its controversies. Whatever our position in society, or our involvement in the sex education process, we finally are faced with what we want for our *own* children; thus the personal approach to the questions of sex education can often help clarify our public views.

I believe that it's important to avoid solutions based on extremist views. Instead, we should seek solutions that the great majority of hard working parents would heartily agree with and support. Many parents spend very little time thinking about sex education, yet we cannot and must not ignore the views of those primarily responsible for the well being of the children that we're trying to teach. I believe that legislators agree with this viewpoint, and really do want to represent their constituents as best they can.

Sex education programs belong in the genre of “risk avoidance programs” because today's teenagers need to be trained to “avoid risk”; not just the risks connected with premature sex, but also the risks that come with alcohol, drugs, tobacco and violence.

My hope is that this booklet can be a valuable resource for anyone seeking to implement or modify sex education programs and risk avoidance programs.

Peter F. Brown

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I. The Goal of Sex Education

The Necessity for a Clear and Standardized Goal

As we seek to implement or modify sex education programs for our children, and the children of our fellow parents, it is vital that we try to reach an agreement about the goals of sex education itself. Children too often end up as innocent victims in the middle of political or ideological struggles.

It is unfortunate, however, that the goals that professionals have for sex ed and “Family Life Education” programs are wildly divergent. Parents often have rather simple goals, such as:

- ❖ “My children shouldn’t get pregnant”
- ❖ “They shouldn’t have sex until marriage” and
- ❖ “I want them to have happy marriages and fulfilling sex lives with their future husband or wife.”

Legislators, and other community leaders not directly involved with the formation of sex education programs, often adhere to the above common sense attitudes toward sex education. A rift appears, however, when we examine the views of many sexologists and professional sex educators.

In a paper presented at the Western Regional conference of the Society for the Scientific Study of Sexuality, on April 22, 1999, by Marty Klein, Ph.D, and reprinted in the *Electronic Journal of Human Sexuality, Volume 2, August 10, 1999*, at www.ejhs.org, Dr. Klein states:

Another demographic trend is the enormous push for abstinence education and anti-abuse programs. Some 20 years ago sex education was

mandated in schools throughout the United States, a wonderful, progressive accomplishment of SIECUS [ed. note: Sexuality Information and Education Council of the United States.] The problem is that a lot of schools have twisted this mandate and now provide abstinence education instead of sex education. This is harming these children, and it will undermine their sexuality as adults.

Schools are also getting government money to provide anti-abuse programs, teaching seven-year-olds how to protect themselves from so-called bad touch. While we all want kids to be safe, I think it's a big mistake for kids to learn about all the ways they can be sexually exploited without learning about all the wonderful ways they can be involved in sexuality.

Dr. Klein serves on the editorial board of the *Electronic Journal of Human Sexuality*, which is a publication of the Institute for Advanced Study of Human Sexuality, in San Francisco. One might tend to dismiss such extreme views as non-representative of professional sex educators, except that the Institute for Advanced Study of Human Sexuality (IASHS) is at the heart of training programs for certified sex educators.

A large number of sex educators are certified by AASECT, the American Association of Sex Educators, Counselors, and Therapists (www.aasect.org.) AASECT's *Sex Educator Certification Requirements* read in part:

IV. Attitudes and Values Training Experience.

A. The applicant shall have participated in a minimum of twelve (12) clock hours of structured group experience in which the major focus is on a process-oriented exploration of the applicant's own feelings, attitudes, values and beliefs regarding human sexuality (e.g. SAR).

Such training is not to be construed as personal psychotherapy nor as just an academic experience in which the primary emphasis is on cognitive information.

It is strongly recommended that this experience occur early in the applicant's training.

B. The applicant shall submit a one-page statement on his/her professional philosophy and goals of sexuality education including how the SAR affected that philosophy.

Innocuous sounding enough -- until one examines the content of the “SAR” program. SAR originally stood for “Sexual Attitude Restructuring”, but is now often called “Sexual Attitude Reassessment” due to its less threatening overtone. SAR was founded by the National Sex Forum, a precursor to IASHS. SAR programs include experiential group sessions in which the participant’s “comfort zone” about sex is impacted by a barrage of films and multimedia containing sexual content.

George Leonard, a reporter, attended a SAR at IASHS, and wrote in an article called “The End of Sex”, published in *Esquire*, in Dec. 1982:

“As we lounged on cushions in the darkness, the whole wall lit up with images of human beings -- and sometimes even animals -- engaging in every conceivable sexual act ... some seventeen simultaneous moving pictures ... over a period of forty minutes.

“How did we ... react? ... By the end ... the physical act ... seemed commonplace. Nothing was shocking, but nothing was sacred either.”

SAR’s are now taught by many institutions, and numerous colleges. Participation in them has broadened from sexologists to other disciplines, including students studying to be medical doctors. A common term that is often mentioned by sex ed professionals is the “comfort zone” of teachers, parents or students in relationship to sex.

A primary question, however, is whether or not the boundaries of the so-called “comfort zone” are valid, and are there for a socially valuable reason.

An additional theme that is common to sex educators, and one that is illustrated by Dr. Klein's comments above, is the view that *children are sexual from birth.*

This particular view is of paramount importance when we discuss the goals of sex education. Our common sense logic requires a base or foundation, in order to provide a direction for our logical conclusions. As one example, it would be quite illogical to embark on a voyage around the world if one believed that the world was flat.

Many sex education professionals have the foundational belief that children are not only sexual from birth but that it is their right as children to engage in sexual experimentation without the knowledge or permission of their parents.

Sex education professionals may not admit to these views (and often don't) but their viewpoint that children are sexual from birth is well documented.

Perhaps the best living example of a sex education trainer that adheres to these types of views is Dr. Wardell B. Pomeroy, the Academic Dean Emeritus at IASHS. The IASHS web page, at 'www.iashs.edu', refers to Dr. Pomeroy as "the dean of American sexologists." Dr. Pomeroy lectures at the Institute, and is a proponent of the SAR program. In the *British Journal of Sexual Medicine*, (January, 1982) Pomeroy describes the SAR's this way:

"As part of our intensive courses we project several films onto a series of screens simultaneously. They vary in context from 'hard porn' homosexuality to milder loving themes."

Pomeroy was the co-author of *Sexual Behavior in the Human Male*, with Alfred C. Kinsey, written in 1948. Pomeroy's views about child sexuality are lauded by many sex educators and have found a wide audience in the juvenile section of many public and school libraries across the country, with the distribution of his books *Boys and Sex* and *Girls and Sex*. In *Boys and Sex*, Pomeroy writes:

"By playing with girls sexually before adolescence, trying to understand how they are made and how they react, the chances are increased for a satisfactory sex life when a boy grows up... But it is too much to expect that parents will take that attitude."

"Because it is done secretly, however, doesn't mean it's dirty. Too many parents tend to make their children feel that anything done in secret must be dirty. It isn't. It's simply private."

In a special 1977 issue of *Forum / Variations Magazine* (a Penthouse publication), Pomeroy wrote an article called "A New Look at Incest." In it, he stated:

"...Incest between adults and younger children can also prove to be a satisfying and enriching experience..."

If these views about children and sexuality were restricted to one or two individuals, they could be discounted as inconsequential. The reality is that the view of children as sexual beings is being actively taught to Family Life classroom teachers in local school districts. A text book that is widely distributed to teachers is *Understanding Human Sexuality* by Janet Shibley Hyde (McGraw Hill.)

In this text book, Hyde strongly suggests that parents should encourage their children to masturbate, and states that masturbation for infants is “a normal, natural form of sexual expression.” The text book shows a picture of an infant around ten months of age. The baby is sitting naked, with his hand between his legs. The caption reads, “Infant masturbation.”

In commenting on the practice of adults fondling infants’ genitals to keep them quiet, Hyde writes that it is “a remarkably effective pacifier.” She states that the “child who masturbates at age five is showing autonomy and initiative.”

The view that children are sexual from birth is anathema enough to many parents. The offense is further compounded by the view that children have the right to engage in sexual practices without the knowledge or permission of their parents. Hyde’s views are no exception. She writes:

“For adolescents particularly, sexuality is related to accomplishing important developmental tasks... Among these are:

1. Becoming independent of parents. Sexuality is a way of expressing one's autonomy and one's independence from parents.
2. Establishing a viable moral system of one's own. For many adolescents, some of the most critical moral decisions of their lives made independently of parents are in the area of their own sexual conduct.”

Hyde is just one of many sex educators promoting the view that children are sexual from birth. SIECUS, the Sexuality Information and Education Council of the United States, distributes the 2nd Edition of the *Guidelines for Comprehensive Sexuality Education: Kindergarten-12th Grade* at its web site at ‘siecus.org’.

The SIECUS web page describes the Guidelines this way:

Developed in 1990, the original Guidelines for Comprehensive Sexuality Education: Kindergarten-12th Grade are the nation's most widely recognized and implemented framework for comprehensive sexuality education programs across the country. The Guidelines were developed by a National Task Force of health, education, and sexuality professionals, including representatives from the U.S. Centers for Disease Control, the National School Boards Association, the National Education Association, and Planned Parenthood Federation of America. The Guidelines are a framework to help communities develop and implement a comprehensive sexuality education program in their schools. More than 20,000 copies of the first edition have been distributed in the United States. The Guidelines were updated in fall 1996. Single copies are \$7.95.

The Guidelines reflect an idealized model of a comprehensive approach to sexuality education. They provide an organizational framework of the knowledge of human sexuality and family living which covers four development levels from kindergarten through senior high school. The six key concepts in a comprehensive sexuality education program represent the most general knowledge about human sexuality and family living. Each key concept has associated life behaviors, topics, sub topics, and age-appropriate developmental messages which encompass the components of the broad definition of sexuality.

One of the sections in the guidelines is:

Guidelines for Preschool Sexuality Education

As children grow, many of the most important lessons they learn have to do with their sense of themselves as sexual beings. This model for preschool sexuality education, developed by a task force of preschool educators and service providers offer parents and early child care providers the information they need to support and encourage a strong foundation for future sexual health and education. Copies are \$7.95.

In the United States, the philosophical underpinnings of professional sex educators were given substantial public validity by the research done by Kinsey and Pomeroy in *Sexual Behavior in the Human Male*. However, Kinsey's research has recently been heavily criticized by proponents of abstinence education because of the methods that he used to obtain his data.

Kinsey's text tried to prove that children were sexual from birth by documenting the frequency of orgasms among young children. In one chart, Kinsey shows an example of a four year old boy having twenty-six orgasms in a twenty-four hour time period.

Rather than prove that children are sexual from birth, it's far more logical to conclude that Kinsey ignored or condoned the sexual abuse of children. Because the orgasms were induced by force, it invalidates the view that children are normally sexual. It is indeed odd that sex education professionals have turned a blind eye to the severe cracks in the foundational research of current sexology opinion. How can anyone ignore Kinsey's own description of his research with young boys? Kinsey wrote, (in describing the boys' behavior during orgasm) that in some cases there was:

"Extreme tension with violent convulsion: ... eyes staring or tightly closed ... mouth distorted, sometimes with tongue protruding violent jerking ... violent cries, sometimes with an abundance of tears (especially among younger children)..."

Kinsey's comments immediately following the above passage reveal his deep callousness to the children's plight:

"After-effects not necessarily more marked than with other types of orgasm, and the individual is often capable of participating in a second or further experience."

As the "Fathers of American Sex Education", Alfred C. Kinsey and Wardell B. Pomeroy have provided a fundamentally flawed foundation for current attitudes about sex education. It is important that today's leaders and educators examine the base of logic for sex education and then determine goals to be achieved that make sense. That examination of sex ed's logical foundation should include a reasonable examination of the nature of children as well as the value of parent-child relationships, the importance of the family and the efficacy of monogamous husband and wife marriages.

Prior to the implementation of "comprehensive sexuality education from K-12", the purpose and goals of sex education should be themselves

comprehensively reviewed and critiqued by a levelheaded process devoid of extremist views stemming from invalid research.

For the sake of our children's future, common sense based upon ethics that are rooted in purity and unselfishness should guide the revision of our sex education policies.

Major Goals in Sex Education

Even the most conservative of parents will probably agree that *some* form of sex education for children is needed in an age when sexual messages are common on prime time television. Few people would recommend that we regress to the Victorian age when extreme repression caused an imbalance of attitudes about what most people would consider "valid sex."

In 1894, Mrs. Ruth Smythers, a minister's wife, published a tract called "*Instructions for the Young Bride on the Conduct and Procedure of the Intimate and Personal Relationships of the Marriage State for the Greater Spiritual Sanctity of this Blessed Sacrament and the Glory of God.*" She wrote:

"To the sensitive young woman who has had the benefits of proper upbringing, the wedding day is, ironically, both the happiest and most terrifying day of her life.

"On the positive side, there is the wedding itself, in which the bride is the central attraction in a beautiful and inspiring ceremony, symbolizing her triumph in securing a male to provide for all her needs for the rest of her life.

"On the negative side, there is the wedding night, during which the bride must pay the piper, so to speak, by facing for the first time the terrible experience of sex. At this point, dear reader, let me concede one shocking truth . . .

". . . Some young women actually anticipate the wedding night ordeal with curiosity and pleasure! Beware such an attitude! A selfish and sensual husband can easily take advantage of such a bride. One cardinal rule of marriage should never be forgotten . . .

"GIVE LITTLE, GIVE SELDOM, AND ABOVE ALL, GIVE GRUDGINGLY."

It is no wonder that many professional sexologists point to attitudes like those of Mrs. Smythers in their explanation of the need for sexuality education. It is *not* the need for sex ed that is in doubt. It is quite simply the content, motivation, direction, goals and *results* of sex education that need to be examined, as well as an analysis of the role of the state in sex ed. What are sex education's major goals?

❖ *Prevention of Teenage Pregnancy and STD's*

The prevention of teenage pregnancies and sexually transmitted diseases is often at the top of the list of many sex education professionals. Parents and other community leaders should have no trouble agreeing with these goals. The two divergent approaches to accomplishing those goals are "safe sex", which is recommended by most sex education professionals, and "abstinence" which is most often recommended by parents. Abstinence, in this case, means abstinence from *all* types of sexual activity; not just intercourse.

Both sides agree that total abstinence will prevent teen pregnancies and STD's. The fundamental disagreement about the accomplishment of this goal is that many sexologists have concluded that:

- a) teenagers are incapable of abstinence, so safe sex should be taught instead, and
- b) nonintercourse sex, such as oral sex, will not cause pregnancies
- c) since teenagers are incapable of total abstinence, they should be directed toward practices such as oral sex and mutual masturbation, so that they can avoid pregnancy and still consider themselves "abstinent"
- d) since pregnancies and STD's are the issue, and since nonintercourse teenage sexual activity is not "immoral", then it is appropriate to recommend nonintercourse sex

Proponents of total abstinence fault professional sex educators for this logic by responding that:

- a) teenagers **can** be totally abstinent, and should be encouraged to be abstinent until marriage

- b) it is spiritually and emotionally healthier for teenagers to remain totally abstinent until they enter a committed monogamous relationship of marriage
- c) sex education programs should not “give up” on teenagers, but instead should encourage them to meet a higher standard of abstinence, maturity and responsibility, rather than assuming that they will fail
- d) it is unrealistic to expect teenagers to abstain from intercourse when they engage in nonintercourse sexual activities
- e) since there is a high failure rate of condoms, and because teenagers can’t be counted on to use condoms, the danger of teenage pregnancies and STD’s is still too great -- and teenage pregnancies are still far too high

The dilemma that total abstinence advocates face is that the message of professional sex educators, combined with sexual messages in the media, offer a seductive and powerful influence over teenagers. Although it has been an uphill battle to find teenagers that would stand up and declare that they prefer total abstinence until marriage, the tide is turning. More and more teenagers are rejecting the notion that they have no power to control their sexual urges, and have opted to wait until marriage to have sex.

❖ *Providing Technical and Moral Information about Sex*

Age-Appropriate Content

The goal to provide teenagers with accurate information about sex is also one that few parents would quarrel with. However, many parents object to the extremely young age level that sexologists recommend for comprehensive sex ed. In addition, technical information by itself, without moral guidance, is very similar to providing young people with technical instructions for the construction of fertilizer bombs without stating that it is wrong to build them.

In fact, information about sexuality is even more potent and more confusing than information about the dangerous art of bomb building. Abstinence advocates consistently express that current FLE programs provide too much information, too early, without strong guidance that sexual activity should be avoided prior to marriage. Even if the message of abstinence is given in a cursory way, it is not enough for curious and impressionable teenagers. It is

similar to the fable about the mother who warned her children to “not put beans in your ears.” As the fable stated, the first thing that the children did, after the mother left the house, was to put beans in their ears.

Many sexologists trumpet the “age appropriateness” of their sex education curricula. Yet, this is often the primary problem that parents have with “family life” programs. Because sexuality is so central to a happy marital life, few people recommend that the best approach toward sex education is a nervous or embarrassed silence. Silence was more the norm a hundred years ago. Even though some parents still struggle to discuss the topic of sex with their children, a large number of parents are quite capable of guiding their children about sexual matters.

The central issue is this: what is age-appropriate and what type of sexuality education content do *parents* want their children to learn? Do the *majority of voters* want their kindergarten age children to be introduced to the topic of sexual touching as is stated in section K.8 of the SOL’s?

K.8 The student will recognize the elements of good and bad touches by others. Descriptive Statement: Elements of good touches by others are identified as follows: (1) touching that can be done in front of anyone; (2) touching that is not a secret; (3) touching that makes the child feel good and not uncomfortable; (4) touching that is done to provide cleaning or medical care for the child; and (5) touching that is an expression of affection by a family member. Bad touches include the following: (1) touching on private parts of the body; (2) touching to be kept secret; and (3) touching that could produce bad feelings.

K.8’s emphasis on touching is preceded by instruction about touching in K.6 and K.7, creating a very strong impact on five year old children. K.7 states:

K.7 The student will realize that physical affection can be an expression of friendship, of celebration, or of a loving family. Descriptive Statement: It is important for the student to understand that appropriate expressions of affection are healthy for the individual and for the family.

The Family Life Education Standards of Learning Objectives, or SOL’s, are superb examples of vague legalese abounding with loopholes. K.7 and K.8, when examined from a legal viewpoint, do not bar a teacher from suggesting that physical and sexual touching between kindergartners is acceptable.

The student will realize that physical affection can be an expression of friendship, of celebration, ...

Any good lawyer will reveal that simply having a “clause” after the above, about “loving families” does *not* prevent a teacher from ignoring that particular clause and instead focusing on the first part of the sentence. The key legal word freeing the teachers from restricting physical affection *only* to “loving families” is the word “or” as in:

... or of a loving family. (underlined emphasis added)

Unfortunately, the phrase “a loving family” is the phrase that catches the attention of a casual reader, and is the phrase that wily sex educators might highlight in their discussions with parents. Parents and other concerned leaders and legislators (who certainly know this fact) will do well to remember that laws are written in tortured legalese to (hopefully) *avoid* such blatant loopholes.

K.7 and K.8 do not legally bar a teacher from suggesting that a “child who masturbates at age five is showing autonomy and initiative”, as Janet Shibley-Hyde recommends in her teacher training text book.

Instead, K.7 and K.8 create a legal mandate for teachers to cross into an area of sexuality education that many legal guardians (the children’s parents) consider a fundamental violation of parents’ civil rights and under age children’s civil rights.

The Pandora’s box approach of the FLE SOL’s are not restricted to kindergarten. The “comprehensive” approach to sex education becomes more explicit and strident in each subsequent year. This booklet will analyze the remaining FLE SOL’s in Section V. As an overview, the FLE SOL’s have four primary problems:

1. They emphasize sexual topics at non-age-appropriate grade levels
2. They teach sexual topics that many parents don’t want taught to their children
3. They teach sexual topics with a distinct “anything goes” slant. They are not “value free”; they encourage promiscuity as a valid value

4. They are filled with vague and open-ended phrases that allow professional sex educators to teach their own brand of sexuality

Limitations on State Provided Sexuality Content

The Virginia Family Life Education SOL's were adopted in 1988, with the goal of providing sex ed guidelines and requirements. The FLE SOL's are *not* in the same camp as SOL's about Math, English, Science and History. By definition, they impinge on the student's moral education.

Because of that, it is inappropriate for the state to automatically assume that the state is more capable than parents when it comes to sexuality education. Although parents' views about sexuality have not yet been placed in the same class as religious beliefs and religious freedom, sexual mores are fundamental to the institutions of marriage, the family and society, and are often part of parents' religious beliefs. Sexologists themselves often speak about "Sexual Rights", and regard sexual discrimination as a violation of civil rights.

It is a violation of civil rights and First Amendment religious freedom rights to allow professional sexologists, who have a variety of sexual preferences and attitudes, to impose their adult sexual values on underage children, without the consent of the children's parents. The State and Federal Supreme Courts would do well to rule on this issue, in favor of the civil and religious freedom rights of parents in relationship to their own children. It is vital that the Supreme Court balance their ruling in favor of the historical rights of parents to prevent other adults from forcing their values and behavioral ethics on children without the parents' consent.

Sexologists will point to the Family Life Education "opt-out" policy as evidence that children are not being forced to learn about sex without parental approval. The opt-out policy, however, is an unworkable method in today's school system.

The opt-out policy places the burden on parents, and places undue stress on the students. It also ignores the fact that students that opt-out still have access to the contents of FLE classes secondhand, when they talk with other students during recess. The opt-out policy is in direct contravention to

standards set by such examples as “innocent until proven guilty” or new laws regarding Internet spam. It causes an “undue burden” that requires the recipient of unwanted material to opt-out; instead, the burden must be placed on the purveyor of unwanted goods or services.

The legislature should revise the family life education laws to require parents to “opt-in” -- a far more sensible and “customer driven” approach to sex education.

“Customer driven” is a phrase that elected officials recognize. *Appointed* officials, however, in some cases tend to forget that parents are voters -- and, as the constituency they are pledged to serve, are in the position of customers, who, as the saying goes, are “always right.”

Who are the appointed officials who are in charge of our children’s sexuality education? Were they appointed by the parents whose children they teach? Is it accurate to say that a sexologist, sex education teacher and teacher trainer necessarily have more wisdom, a healthier perspective about sex and *more right* than a child’s parents to discuss sexuality with the parents’ child?

It is *not* the right or position of the state to decide whether or not the parents’ views about sexuality are correct or not. Thus, it is a *fundamental and discriminatory violation of civil and religious freedom First Amendment rights* for the state to assume ‘in loco parentis’ in sexual matters.

Instead, the state must only teach about sexuality in a way that will not cross the parental rights boundary line. By assuming in loco parentis in sexual matters, the state is redefining the human family; discarding thousands of years of social foundations that defined physical parents as the final authority over their children’s moral education.

Marxist-Leninist societies attempted to replace the parental role with state-run nurseries that encouraged children to report their parents to the state. That experiment has failed on a grand scale. It is useful to study the parallels between the attitudes expressed in Marxist-Leninist writings and the attitudes of many professional sexologists. It is significant that a common theme between them is the view that the right of parents to exercise authority over their children should be superseded by the state.

❖ ***The Prevention of Teenage Sexual Activity
as the Standardized Goal of Sex Education Programs***

Because parents have such a wide variety of opinions and religious beliefs about sex education, the state should restrict its sex education guidelines and curricula to topics that promote the prevention of teenage sexual activity as the standardized goal of sex education programs.

Just as schools have drawn a line between church and state, schools should not cross the line between total abstinence education and the teaching of sexuality values or preferred practices. State provided sexuality content should be limited to information about STD's, risk avoidance, and abstinence, with the clear and simple message that teenagers should not engage in sexual activity. Information about sexual preferences, sexual values and sexual technique should be left to the domain of parents. The legislature should enact laws that prevent wildcat teachers from injecting their own sexual opinions into the classroom (thus violating the civil rights of the children and their parents), just as they now prevent teachers from indoctrinating students about the teacher's personal religious beliefs.

However, restrictions that prevent teachers from sexually indoctrinating their students should not restrict teachers from teaching about total abstinence. Teaching students about total abstinence should not in any way be considered the teaching of values or religious beliefs. It is in fact the state's way of *avoiding* the illegal practice of teaching their own brand of sexual morality in the classroom and instead deferring to parents as the appropriate teachers of sexual values.

In plain language, the state's position on sex education should be summarized to students in this way:

"Sex can cause pregnancies and STD's; we recommend that you abstain completely from sexual activity as a risk avoidance practice. If you have questions about sexual values, preferences or techniques, we are required to direct you to your parents or legal guardians."

Using the common sense approach outlined above, the Family Life SOL's should be critiqued and reduced in scope. By doing so, the state's job will

become simpler (saving taxpayers even more dollars,) relieving the state of the burden of teaching five year old kindergarten students that “physical affection can be an expression of friendship, of celebration...” and limiting the state’s responsibility to the straightforward and reasonable task of encouraging students to avoid all types of sexual activity as the best “risk avoidance” lifestyle.

II. The Great Divide in Sex Education

The Fundamental Problem: A Conflict of Values

Total abstinence advocates have often been on the defensive, due to the extremely aggressive nature of professional sexologists. Sexologists have also been aided by the steady onslaught of media messages that encourage young people to experiment with premature sexuality.

Parents have expressed frustration with the “comprehensive” and seemingly endless arguments and statistics that sexologists bring to the table. Many parents have expressed that they don’t want their children to be sexually active, and instinctually feel that the message of sex educators is skewed; yet they don’t know how to counter what they consider an insidious message.

Who doesn’t want children to be healthy and disease free? Who doesn’t want teenagers to grow up mature and able to handle sexual issues wisely? It’s hard to object to goals such as these.

Recently, professional sex educators have attacked traditional sexual mores with the weapons of religion and the Bible; attempting to turn religious arguments for abstinence upside down.

In her article, *“The Really Good News: What the Bible says about Sex”*, Debra W. Haffner, M.P.H., SIECUS President and CEO states:

There is no question that certain church traditions have provided justification for sexual oppression. From the writings of Paul to those of Augustine and Aquinas--and through the current work of the Christian Coalition--parts of the Christian church have attempted to control, define, and limit sexual expression. In fact, it is clear that the mind/body dualism that characterizes much of Christian thought is the lens through which both the Bible and church traditions are used to limit people's experience of their sexuality and, indeed, to promote systematic oppression of sexuality.

Haffner goes on to say:

Without a doubt, there is an urgent need for a new sexual theology that will help people recognize the value of sexuality. Theologian James Nelson has eloquently stated the goals of such a theology:

“It will be strongly sex-affirming, understanding sexual pleasure as a moral good rooted in the sacred value of our sensuality and erotic power, and not needing justification by procreative possibility. It will be grounded in respect for our own and other's bodily integrity and will help us defend against the common sexual violations of that integrity. It will celebrate fidelity in our commitments without legalistic prescription as to the precise forms such fidelity must make. It will be an ethic whose principles apply equally and without double standards to persons of both genders, of all colors, ages, bodily conditions, and sexual orientations.”

J. B. Nelson, *Body Theology*
(Kentucky: Westminster/John Knox Press, 1992), p. 21

Haffner continues:

To that, I add, "Amen." Sexologists need to take a new look at the Bible and its influence on many of the people we serve. We need to understand that the Bible teaches that sexuality is a central part of being human, that bodies are good, that pleasure is good, and that men and women experience a healthy desire of each other.

Traditional religious parents often find it difficult to effectively counter arguments such as these, that seem to be “almost right.” Baby boomer parents who grew up impacted by the free sex culture of the sixties are not about to advocate sex as taught by Mrs. Smythers, or other Victorian writers.

Haffner is correct when she writes, in the above article:

Those of us who are people of faith must spread the gospel, literally the “good news” that the Bible affirms a healthy and positive view of sexuality.

It is truly ironic that Haffner positions herself as a person “of faith”, spreading the gospel, while simultaneously heading up one of the most active sexuality organizations in the country; an organization that was started as an offshoot of the Kinsey Institute.

Although there are undoubtedly religious people who still believe that experiencing pleasure during the sexual relations between a husband and wife is sinful, it’s more reasonable to conclude that the vast majority of religious couples take a more enlightened view of sex.

It is virtually futile to attempt an argument based on Biblical verses: Haffner’s article is laced with quotations from both the Old and New Testaments. Christian denominations can hardly agree on the Biblical rationale for baptismal sprinkling versus immersion -- to get lost in Scriptural verse fights with hard-core liberals such as Haffner makes no sense at all.

Instead, parents, leaders and legislators who oppose comprehensive sexuality education need to couch their arguments in logic that cuts through the tangle of intellectual weeds that professional sexologists so skillfully plant.

I believe that the issues of sexuality, and the virtues of abstinence and monogamy are best addressed by using a concept called “the logic of love” or “heartistic logic.” “Heartistic” is a new word, and simply means “matters related to the heart.”

One example of the logic of love is the universal truth that a small child will feel joy when her parent picks her up and hugs her tight. Children are simple creatures, and respond to love with the core of their beings: their “heart” -- the part of their nature that wishes to “gain joy by giving and receiving love.”

Since Haffner labels herself as a person “of faith”, we can level the playing field and freely contend that a Creator does indeed exist, and created people. If

one then concludes that the Creator also created men and women to function as husband and wife, and then parents, with the heart of love as the central core of their family, one would have to also conclude that love (including parental love and conjugal love) and sex, were created by a parental Creator. It is highly illogical to assume that the invisible force of love evolved randomly from rocks and dust and gas.

It is not sex that traditional religious parents oppose. Many, many religious couples have extremely fulfilling sex lives and are able to express mature and wholesome sexual affection to each other. As Levy Matthew Daugherty, the Executive Director of the Martin Luther King, Jr. Family Life Institute, stated:

As the father of my sixteen year old virgin daughter, who has pledged total abstinence until marriage, I can say that I'm looking forward to having grandchildren. The act of sex in marriage is a very beautiful and sacred act. It is a covenant between a man and a woman. It is my belief that all parents can approve of their children having such beautiful and unselfish sexual relationships within marriage. However, society today forces us to live in denial of that very relationship. Marital relationships, which were meant to be the norm, not the exception, build communities and countries, and are the foundation for peace and harmony.

It is instead the removal of unselfish spiritual values from sex that so disturbs religious parents and couples.

The author, Aldous Huxley, encapsulated this point in his statement:

"The reason we accepted Darwinism even without proof is because we didn't want God to interfere with our sexual mores."

Haffner, and other sexologists like her, represent a viewpoint that is common to the field of sexology. What is this hidden motivation of sexologists? I believe that there are two motives that often drive the sexologist's world view:

1. A sexologist often wants to be his own boss and doesn't want to follow anyone; *especially* not a parental Creator who might hold the sexologist to a strict moral compass. Therefore, many sexologists create world views where a Creator is either nonexistent or unimportant *or* where the Creator is conveniently defined by the sexologist to fit his or her needs.

2. The sexologist doesn't want anyone interfering with his or her sexual practices, whether it be normal heterosexuality, or homosexuality, or lesbianism or promiscuity. This makes point number one extremely important.

The ultimate tactic that professional sexologists employ is to define the Creator to fit their own needs. This is illustrated ad nauseum at the web site of a group calling themselves "Liberated Christians", at "www.libchrist.com". The group promotes "*Positive Intimacy and Sexuality Including Responsible Nonmonogamy, Polyamory or 'Swinging' as a legitimate CHOICE...*" and holds meetings that include "the usual 'orgy' room where lots of [. . . graphic X-rated activities deleted by editor . . .] was going [on]."

❖ ***The Dividing Line in Sex Education: Unselfish Sex or "Free Sex"***

The dividing line in sex education is unselfish sex versus free sex. Unselfish sex is sex centered on absolute spiritual values, and ultimately, as many parents and couples believe, centered on the heartistic relationship of love with an unselfish and parental God. The SIECUS view of Sex and the Bible avoids the hard questions about the consequences of free sex or same sex partners.

Unselfish sex not only acknowledges that sex has a spiritual origin, but takes responsibility for the results of sexual activity. When a teenage boy practices what sexologists call "abstinence", and engages in oral sex with a teenage girl, he may not cause a teenage pregnancy; but what havoc will he wreak with the heart and future of the girl? Having sex with multiple partners as one "explores one's sexuality" ignores the heartistic pain that the abandoned partners feel as they are left in the dust of rejection.

Teenage boys and girls need to be taught that sex is the most intimate part of the lifelong commitment of marriage, not something to be casually used and thrown away like a soiled handkerchief. It is unethical and selfish to cause others pain by engaging in casual sexual relationships, and it is entirely realistic to expect that our children can and must learn to love others unselfishly. If a teenage boy is *truly* thinking of the spiritual and emotional future of a girl, *he* will tell *her* that they should wait to have sex until they are committed to each other forever in marriage.

This attitude of respect toward the opposite sex will prevent violations or abuse in future relationships. The traditional view of men toward women is to respect women and to be concerned for their welfare at all times.

❖ *The Role of Marriage and the Family in Society*

Although legislators and school officials feel reluctant to teach traditional morals and values in the classroom, sex education professionals frequently teach nontraditional values about sexual practices and preferences not commonly supported by mainstream parents.

Under the mandate of “public health” and “risk avoidance”, public officials have the freedom and the obligation to advise students that successful marriages between men and women will help to ensure:

- ❖ a reduction in STD's
- ❖ a reduction in out-of-wedlock pregnancies
- ❖ a reduction in teenage depression and suicide
- ❖ a reduction in divorce
- ❖ a stable economic situation for girls (rather than the almost certain poverty brought about when girls become pregnant before graduating from high school, outside of marriage)
- ❖ the successful implementation of the welfare reform act because successfully married young people usually avoid welfare assistance
- ❖ the guaranteed propagation of the species (as well as the hoped for happiness of the couple in love)

The model of traditional marriage has worked rather well, for all of its struggles, and is therefore a model that should be supported by public officials in their quest to guide teenagers to avoid risk and find sexual stability.

The Role of Parents in Sex Education and the Family

Amidst all the rhetoric about sex education, the public health crises of teenage pregnancies and sexually transmitted diseases, and parents' purported

inability to teach their children about sex, it is easy to lose sight of the long range goals for our society's development.

Or, one might conclude that policy is often made without long range social goals. Professional sex educators, however, have clearly stated long range goals that are publicly accessible. The SIECUS web site states, in one of their fact sheets:

The National Coalition to Support Sexuality Education consists of over 115 national nonprofit organizations which are role models in promoting health, education, and social concerns for the American youth. Coalition members are committed to the mission of assuring that comprehensive sexuality education is provided for all children and youth in the United States by the year 2000.

These organizations represent a broad constituency of child development specialists, educators, health care professionals, parents, physicians, religious leaders, and social workers whose combined work reaches more than 30 million young people.

One of the points of conflict between sexologists and abstinence advocates is the role of parents versus the roles of schools, professionals and teachers in sex education. This point of conflict highlights an "outcome" (if not a secondary goal) of the drive for comprehensive sexuality education.

By co-opting the role of parents in sex education, the state is gradually drifting toward the realization of a society where parents have little relevancy. Combined with the epidemic of divorce and multiple stepparents, the fabric of families is being drastically weakened.

Fifty to one hundred years from now, do we really want to have a society where the role and authority of parents have been relegated to the dustbin, replaced by a state apparatus that will never be able to provide true parental love to children? One might say that the future will be decided by those who shout the loudest. Anti-parent professionals are writing volumes of "scientific" texts explaining why parents are already irrelevant; and professionals are listening.

The June, 1999 issue of the American Psychologist (the only APA journal sent to every member of the American Psychological Association), contained

an article titled “Deconstructing the Essential Father”, by Louise B. Silverstein and Carl F. Auerbach, both of Yeshiva University.

The article stated:

“...the empirical literature does not support the idea that fathers make a unique and essential contribution to child development.”

The state must reassess its long range goals about families and the role of parents. Ten years ago, the Richmond Times Dispatch reported that the next decade (today) would see a dramatic increase in teenage violence because of the rise in broken homes. The recent rash of teen shootings, such as the one at Columbine High School, illustrate very clearly that today’s ‘future’ was created years ago.

The New “Abstinence”

In contrast to a traditional view of abstinence, commonly defined as abstaining from any kind of sexual activity, the new “abstinence”, as defined by sex education professionals, has been distorted beyond recognition.

A magazine widely read by Sex Ed teachers is *FLEducator* (Family Life Educator), published by Network Publications. Network Publications is managed by ETR Associates (Education, Training, Research), and is a source of reference books for sex education teacher training workshops. In the Spring 1988 issue of *FLEducator*, Robert A. Hatcher, a contraceptive specialist, writes:

“A number of other ways of being sexually intimate remain available to the person choosing abstinence.”

In a 1989 phone conversation, Hatcher clarified that, “Abstinence as it’s usually stated implies saying ‘no’” He added that “saying no” is impractical, because people have sexual urges until late in life. Sexual intimacy could be achieved by many other methods besides intercourse, and still be defined as abstinence.

Hatcher recommended his book, *Contraceptive Technology*, as a resource for those wishing to find out more about the new version of abstinence. In the

chapter entitled, “*Abstinence and the Range of Sexual Expression*”, Hatcher defines abstinence as “refraining from penis-in-vagina intercourse.”

Methods of sexual expression, which Hatcher considers “abstinence” are:

- ❖ Mutual masturbation
- ❖ Oral-genital sex
- ❖ Fantasy
- ❖ Anal-genital sex
- ❖ Racy VCR movies

In his book, he refers to people who:

“... achieved orgasm without intercourse with some regularity during periods of abstinence.”

Hatcher’s “groundbreaking” work in redefining abstinence has been thoroughly adopted in the last ten years. Sexologists consistently talk or write about “abstaining from sexual intercourse” as the definition of abstinence. They can, therefore, with a completely straight face, look a parent in the eye and say, “we teach children to be abstinent.”

Simultaneously, sexologists promote nonintercourse sexual activity as a healthy activity for teenagers. This recommendation ignores the emotional and spiritual harm that stems from premature sexual activity.

III. The New Federal Abstinence Legislation

Sections III and IV are reference sections, detailing the text of the new Federal and Virginia legislation regarding abstinence education.

“Title V” - Maternal and Child Health Services Block Grant Separate Program for Abstinence Education

TITLE 42 - THE PUBLIC HEALTH AND WELFARE
CHAPTER 7 - SOCIAL SECURITY
SUBCHAPTER V - MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT
42 USC Sec. 710 (b) (2)

Congress passed welfare reform legislation in 1996, establishing an abstinence-only education entitlement program. The legislation is administered through the Maternal and Child Health Block Grant (MCHBG) program. It allocates federal funds for programs that have abstinence education as their “exclusive purpose.” The program provides \$50 million in grant money each

year for five years, beginning in fiscal year 1998. Each participating state must match every four dollars of federal grant money with three dollars of nonfederal funds. The code reads:

Sec. 710. Separate program for abstinence education

(skipping to ... (b) (2) ...)

- (2) For purposes of this section, the term “abstinence education” means an educational or motivational program which--
- (A) has as its exclusive purpose, teaching the social, psychological, and health gains to be realized by abstaining from sexual activity;
 - (B) teaches abstinence from sexual activity outside marriage as the expected standard for all school age children;
 - (C) teaches 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) teaches that a mutually faithful monogamous relationship in context of marriage is the expected standard of human sexual activity;
 - (E) teaches that sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects;
 - (F) teaches that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child's parents, and society;
 - (G) teaches young people how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances; and
 - (H) teaches the importance of attaining self-sufficiency before engaging in sexual activity.

Responses from Non-Abstinence Sexologists

The response to “Title V” by professional sexologists has been vociferous and slightly panicked. The SIECUS “Policy Watch” Report (vol. 24, no. 3), *“Obstinence or Abstinence? The Choice Between Ideology and Public Health”*, contains the subtitle *“Harbingers of Dark Times Ahead.”* It proceeds to list actions taken by various states in their efforts to comply with the Title V legislation.

Debra W. Haffner, the SIECUS President, in a Public Policy Article (vol. 24, no. 4), called "*What's Wrong With Abstinence-Only Sexuality Education Programs?*" objects:

The welfare reform legislation never even defines "sexual activity." Since the definition includes the word "activity" rather than "intercourse," one must assume that the definition is broader and includes a prohibition against other activities besides sexual intercourse. This is, however, never defined. For clarification, the conservative Medical Institute for Sexual Health defines abstinence as "avoiding sexual intercourse as well as any genital contact or genital stimulation." Other fear-based curricula define it as any behaviors beyond hand holding and light kissing.

The term "fear-based" is used again and again in describing programs that teach young people that it is better to preserve their sexual love for one lifelong partner, in order to create a happy marriage. It reveals sexologists fundamental inability to understand the spiritual issues revolving around sex, true love, fidelity and monogamous heterosexual marriage. One might classify their attitudes as a spiritual blindness stemming from their personal attitudes about sexuality, as Aldous Huxley so eloquently stated.

I would recommend that legislators recognize the need to expunge personal baggage brought to the table by sexologists; and instead focus on a common sense approach based on unselfish ethics and the "logic of love."

IV. The New Abstinence Legislation in Virginia

SB 1047 - Patron: Senator Randy Forbes (R)

❖ ***The Version that Passed the Senate:
(changes marked in italic)***

CHAPTER 422

An Act to amend and reenact § 22.1-207.1 of the Code of Virginia, relating to family life education in the public schools.

[S 1047]

Approved March 25, 1999

Be it enacted by the General Assembly of Virginia:

1. That §22.1-207.1 of the Code of Virginia is amended and reenacted as follows:

§22.1-207.1. Family life education.

The Board of Education shall develop by December 1, 1987, standards of learning and curriculum guidelines for a comprehensive, sequential family life education curriculum in grades K through 12. Such curriculum guidelines shall include instruction as appropriate for the age of the student in family living and community relationships, *abstinence education*, the value of postponing sexual activity, human sexuality, human reproduction, and the etiology, prevention and effects of sexually transmitted diseases. All such instruction shall be designed to promote parental involvement, foster positive self concepts and provide mechanisms for coping with peer pressure and the stresses of modern living according to the students' developmental stages and abilities. The Board shall also establish by December 1, 1987, requirements for appropriate training for teachers of family life education.

By December 1, 1987, the Board of Education shall provide the House Committee on Appropriations and the Senate Committee on Finance an analysis of the state and local fiscal impact of implementing a mandatory statewide family life education program and a recommended apportionment of state and local funding for such programs if not otherwise determined by law.

For the purposes of this section, "abstinence education" means an educational or motivational component which has as its exclusive purpose teaching the social, psychological, and health gains to be realized by teenagers' abstaining from sexual activity before marriage.

❖ **Senator Forbe's Original Bill**
(this is the original text , in place of the italic paragraph listed above)

For the purposes of this section, "abstinence education" means an educational or motivational program which has as its exclusive purpose teaching the social, psychological, and health gains to be realized by teenagers abstaining from sexual activity and teaches:

1. *That abstinence from sexual activity outside marriage is the expected standard for all school-age children;*
2. *That abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems;*
3. *That a mutually faithful monogamous relationship in the context of marriage is the expected standard of human sexuality;*
4. *That sexual activity outside the context of marriage is likely to have harmful psychological and physical effects; and*
5. *How to reject sexual advances and how alcohol and drug use increase vulnerability to such advances.*

Next Steps for Virginia's Abstinence Initiative

Although SB1047 passed, important elements were rejected (see above.) Possible next steps include:

- ❖ Creation of the **Office of Abstinence Education** within the Department of Education
- ❖ Provision of **technical assistance** to county school boards and community groups seeking to implement abstinence provisions
- ❖ Direction to the **Secretary of Health and Human Resources**, in conjunction with the Virginia Department of Education, **to conduct an assessment of county school board policies and programs related to abstinence education.** The study should include a comparison of county school abstinence education standards to the Title V abstinence standards. A report should be issued by the Secretary to the General Assembly.
- ❖ Modification of the current FLE legislation, bringing the SOL's into harmony with the Title V abstinence legislation, on a line item basis, as proposed by this document
- ❖ An assessment of the sex education teacher training and resource repositories used by county school boards; with direction to the **Secretary of Health and Human Resources**, in conjunction with the Virginia Department of Education, to restrict its resource and training recommendations to include only professionals and programs that follow the Title V abstinence standards.

V. Proposed Modifications to the Virginia Family Life Education SOL's

Overview

When I started this booklet, I naturally went to the Internet to obtain a copy of the Virginia FLE SOL's. As a web programmer, I'm familiar with searching for documents on the web. Imagine my frustration and *wonder* when I couldn't find the FLE SOL's anywhere, *after five solid hours of searching*. The SOL's for English, Math, History and Science were posted at the Department of Education's web site. The FLE SOL's, however, were nowhere to be seen. They were mentioned a few times, but the content was missing. My conclusion was that it was *extremely inappropriate* for the DOE to fail to place such a critical

document where parents could download it for review. It honestly made me wonder: do they not want parents to access it?

After reviewing the printed document in detail, it was clear that it was indeed a controversial document that many parents would find difficult to approve of as a guide for their children's sexuality education. You be the judge.

FLE SOL's That Violate Title V

This section lists the specific SOL's that I believe parents will find objectionable, to one degree or another. **Please note:** without a line item critique, some of the SOL's problems are not particularly obvious. Based on evidence that many sexologists have an extremist activist agenda (detailed in Parts I and II above), I strongly recommend that the SOL's be modified, using specific legal language that closes any loopholes that would allow inappropriate content to be taught.

Points to remember, in reviewing the SOL's below, are 1) if loopholes exist, someone will use them, and 2) when the SOL's discourage "sexual intercourse" and encourage "abstinence", remember that "abstinence" has been re-defined to include oral sex and other activities. (See Part II above.) For an example of a loophole in the SOL's, refer to the analysis of K.7, in Part I.

I have selected SOL's that violate the common sense approach to total abstinence -- and therefore violate, to some degree or another, Title V and the civil rights of parents and their underage children. *I recommend that the new abstinence language in SB 1047 (see above) be placed at the top of each grade's SOL's, as a guide for teachers.* I also recommend that some of the individual SOL's listed here be stricken from the FLE Standards of Learning, or in some cases modified so that they meet the federally mandated requirements contained in the A through H directives in Title V, *as adopted by the Virginia Department of Health in its administration of abstinence until marriage.*

❖ Kindergarten

K.6 The student will develop an awareness of positive ways in which family members show love, affection, respect and appreciation for each other. Descriptive Statement: The focus is on the positive words and actions which convey care, protection and guidance. This includes touching, listening, hugging, praising, encouraging, supporting, helping and

playing. It also includes helping the child understand that rules are made for safety and protection.

K.7 The student will realize that physical affection can be an expression of friendship, of celebration, or of a loving family.

Descriptive Statement: It is important for the student to understand that appropriate expressions of affection are healthy for the individual and for the family.

K.8 The student will recognize the elements of good and bad touching by others. Descriptive Statement:

Elements of good touches by others are identified as follows: (1) touching that can be done in front of anyone; (2) touching that is not a secret; (3) touching that makes the child feel good and not uncomfortable; (4) touching that is done to provide cleaning and medical care for the child; and (5) touching that is an expression of affection by a family member. Bad touches by others include the following: (1) touching on private parts of the body; (2) touching to be kept secret; and (3) touching that could produce bad feelings.

❖ **First Grade**

1.4 The student will develop an understanding of the importance of a family and different family patterns.

Descriptive Statement: The emphasis is on the need for loving parents, or other responsible adult(s) in the family, regardless of the type of family. The student advances from awareness of family forms at the kindergarten level to understanding the importance of the family its various forms at the first grade level. The following family patterns are included: two-parent families, extended families -- relatives other than the immediate family living in the home, single-parent families, adoptive families, foster families, families with step-parents, and blended families -- new families formed by the marriage of a man and woman with children from previous marriages.

1.6 The student will realize that human beings and other mammals have babies and that babies can be breast-fed.

Descriptive Statement: Content associated with this objective can be found in books, magazines, films, videos, and other materials. Pets may be used to demonstrate mammalian behavior. Parents are encouraged to assist with this objective during the course of normal family activities.

1.7 The student will use correct terminology when talking about body parts and functions.

Descriptive Statement: Terms included in this approach are urinate, bowel movement, penis, and vulva to substitute for colloquial or slang terminology. These terms are introduced as they occur in daily activities and are not taught directly. Parents are encouraged to reinforce correct terminology at home.

1.9 The student will become aware of appropriate behavior to use in dealing with his or her feelings.

Descriptive Statement: The focus is on helping the child understand that feelings are different from behavior. The teacher helps the child understand that while feelings do influence behavior, each person can control his or her own behavior and the ways feelings are expressed. It is important for the teacher to help the child know that all feelings are valid. Appropriate strategies for expressing feelings include exercise, games, direct verbalization, art, music, dance, play, story telling, and creative drama.

1.11 The student will realize that physical affection can be an expression of friendship, of celebration, or of a loving family.

Descriptive Statement: The child is reminded that appropriate expressions of affection are important for individual and family well-being and that physical affection from family members and friends represents good touching.

❖ ***Second Grade***

2.2 The student will realize that adults other than parents also provide care and support for children.

Descriptive Statement: Adults, other than parents, who provide care and support for children include foster parents; child-care providers; day-care teachers, extended family members; neighbors, family friends, and personnel of community support agencies, civic organizations, and religious organizations.

2.3 The student will become aware that babies grow inside the mother's body in a special place called the uterus.

Descriptive Statement: The purpose of this objective is to provide basic, age-appropriate information; to demonstrate ease or comfort in talking about reproduction-related topics; and to correct misinformation.

2.6 The student will realize that physical affection can be an expression of friendship, of celebration, or of a loving family.

Descriptive Statement: The teacher continues to reinforce the concept that appropriate expressions of affection are healthy for the individual and for the family.

2.7 The student will advance in readiness to say “no” and to tell a trusted adult, such as a parent, teacher, minister, grandparent or guardian in private about inappropriate approaches from family members, neighbors, strangers and others.

Descriptive Statement: This is a review of the elements of good and bad touching including how to handle inappropriate approaches.

❖ *Third Grade*

3.3 The student will become aware of the changes occurring in family life that affect daily living and produce strong feelings.

Descriptive Statement: Changes which occur include moving, the addition or birth of a sibling, the birth of a handicapped child, death, illness, separation, divorce, remarriage, and children leaving home. Children are assisted in adjusting to such changes on an individual basis through the teacher-parent approach to problem-solving.

3.5 The student will identify external body parts associated with reproduction and elimination, using correct terms.

Descriptive Statement: External genitalia are explained, including such terms as penis, scrotum, vaginal opening, opening of the urethra, and anus.

3.7 The student will become aware that both a male and a female are necessary to have a baby.

Descriptive Statement: The focus is on the concept that babies begin with a sperm and an egg, with the male providing the sperm and the female providing the egg. This is an age-appropriate introduction to reproduction and not intended to be an explicit explanation of the sexual process.

3.8 The student will comprehend that the baby grows inside the mother’s body for nine months and then is born.

Descriptive Statement: The umbilical cord and placenta are introduced. Students also learn that at the end of nine months of development, the baby leaves the mother’s body through the vagina or through a surgical process known as Caesarean section. The extent of the discussion of the birth process at this point is dependent upon the students and topics that arise.

3.11 The student will demonstrate to others how to respond appropriately to good touches and how to handle inappropriate approaches from relatives, neighbors, strangers and others.

Descriptive Statement: This is a continuing review of the elements of good and bad touches including responding appropriately both to good and to bad touches. When a good touch is welcomed by the child, he or she can respond by smiling, by returning a similar gesture, or by saying, "thank you." Children also need continuing encouragement to tell a trusted adult in private about inappropriate approaches. Other responses to inappropriate approaches include saying "no," getting away from the person quickly, or telling the person he or she does not like the touch.

❖ **Fourth Grade**

4.1 The student will be able to identify the human reproductive organs.

Descriptive Statement: Emphasis is placed on the male reproductive organs: penis, testicles, scrotum, and on the female reproductive organs: uterus, ovaries, vagina and fallopian tubes.

4.2 The student will identify physical changes that begin to occur during puberty.

Descriptive Statement: The individual differences in growth patterns associated with male and female sexual changes are presented. Male characteristics presented include: increased width of shoulders, increased length of arms and legs, the pituitary gland that controls physical growth through hormones, the appearance of pubic and auxiliary hair, and changes in the voice. Female characteristics presented include: increased width and roundness of hips, development of breasts, the pituitary gland that controls physical growth through hormones, the appearance of pubic and auxiliary hair and the onset of the menstrual cycle. Emphasis is placed on the fact that the onset of sexual changes and growth patterns varies with individuals and that this is natural. Students are helped on an individual basis to avoid being fearful if they are slower to develop than their peers. The harmful effects of teenage pregnancy are discussed along with the importance of avoiding premarital sexual activity. In addition, the importance of cleanliness in relation to these body changes is discussed. When

problems arise, teachers and parents are encouraged to continue working together in a team approach to problem solving.

4.3 The student will develop an awareness of human fertilization and prenatal development.

Descriptive Statement: Instruction includes the uniting of the sperm and the egg and the development of the fetus inside the uterus.

4.7 The student will describe the factors surrounding child abuse and child neglect.

Descriptive Statement: The terms child abuse and child neglect (including sexual abuse) are explained, as well as how to protect oneself and the importance of confiding in a trusted adult such as a parent, teacher, minister, grandparent or guardian.

4.9 The student will recognize the dangers of substance abuse.

Descriptive Statement: The focus is on the misuse of tobacco, alcohol and other drugs. Content includes the adverse affects of substance abuse on the individual and on the functioning of family members as a unit, including how substance abuse can be one of many contributing factors to family violence and child abuse.

❖ ***Fifth Grade***

5.2 The student will identify the human reproductive organs in relation to the total anatomy.

Descriptive Statement: Emphasis is placed on the male reproductive organs; penis, testicles, scrotum, and urethra; and on the female reproductive organs: uterus, ovaries, vagina and fallopian tubes. The reproductive organs are explained in relation to total human anatomy.

5.3 The student will explain how human beings reproduce.

Descriptive Statement: Instruction includes the uniting of the sperm and the egg and the development of the unborn child inside the uterus. The development of the baby at different stages is illustrated. Emphasis is placed on the need to avoid premarital sexual activity. The importance of prenatal care is discussed also, as well as the profound effects of drugs on the mother and developing child.

5.4 The student will recognize the relationship between the physical changes that occur during puberty and the developing capacity for reproduction.

Descriptive Statement: Physical changes that occur during puberty are summarized. Topics included are nocturnal emissions and erections, menstruation, instability of emotions, such as mood swings during puberty; development of a positive attitude toward one's sexuality; and the relationship between changes during puberty and one's ability to conceive and bear children.

5.6 The student will identify reasons for avoiding sexual activity prior to marriage.

Descriptive Statement: The psychological, social, and physical consequences of premarital sexual relations are discussed, as well as the benefits of postponing sexual intercourse until one is physically and emotionally mature and has a positive, committed marital relationship. The detrimental effects of premarital sex, including teenage pregnancy, infant mortality and sexually transmitted diseases, are emphasized, as well as the impact on one's reputation and self-esteem.

5.7 The student will describe the effects of personal hygiene on one's self concept.

Descriptive Statement: Discussion focuses on those bodily changes in puberty that require special attention to cleanliness and their relationship to a positive self-concept and acceptance from peers. Toxic shock syndrome and its relation to cleanliness are included.

5.10 The student will examine the messages from mass media related to sexuality.

Descriptive Statement: Printed materials, advertising, television, wearing apparel, movies and music are discussed in relation to gender stereotyping and to the avoidance of sexual exploitation.

5.11 The student will develop skill in saying "no" to any social behavior or activity that he or she perceives as wrong for himself or herself.

Descriptive Statement: Discussion focuses on alternatives to situations such as rude behavior, smoking, alcohol or drug use, theft, vandalism, and premarital sexual relationships.

5.12 The student will recognize threatening or uncomfortable situations and how to react to them.

Descriptive Statement: These situations may include walking alone, opening doors for strangers, experiencing sexual abuse or incest, receiving obscene telephone calls, and facing dangers found in shopping malls. Ways of protecting oneself and recognizing and reporting such threats are

stressed. The point is made, however, that most life situations are not threatening.

5.13 The student will explain the effects of substance abuse on the body.

Descriptive Statement: Emphasis is placed on the adverse effects of alcohol, drugs and tobacco on the body. This information is related to physical and emotional growth during adolescence, including sexual development; to fetal development; and to any adverse effects upon the family unit.

5.14 The student will become aware of the existence of sexually transmitted diseases.

Descriptive Statement: The nature and myths regarding sexually transmitted diseases, including acquired immune deficiency syndrome (AIDS) is introduced. AIDS is explained as a deadly disease. Other diseases referred to include syphilis, gonorrhea, chlamydia, and genital herpes.

❖ ***Sixth Grade***

6.1 The student will relate personal hygiene to the physical changes that occur during puberty.

Descriptive Statement: Changes during puberty are discussed in relation to the increased need for personal hygiene, for proper dental care, for frequent showering and shampooing, for the use of deodorants, for the use and disposal of pads and tampons and for clean clothing.

6.2 The student will explain the effects of growth on development, attitudes and interests.

Descriptive Statement: The teacher provides opportunities for discussion of physical changes during puberty, group and non group relationships (cliques and loners), peer pressure, and boy/girl relationships. Emphasis is on the positive and normal aspects of differences among individuals.

6.3 The student will continue to identify physical and emotional changes that occur during puberty and their effects on growth and development.

Descriptive Statement: The following topics are discussed in relation to male and female changes during puberty: nocturnal emissions and erections; menstruation, masturbation; instability of emotions and ways of expressing these emotions and ways of expressing these emotions appropriately; and approaches to developing a positive attitude towards one's sexuality.

6.4 The student will recall basic facts about sexually transmitted diseases.

Descriptive Statement: Factual information is presented regarding sexually transmitted diseases, including syphilis, gonorrhea, chlamydia, and genital herpes. Diseases of the genitalia common to adolescence which are not sexually transmitted are described so as to allay unnecessary fears (such as vaginitis, urethritis, etc.)

6.5 The student will be able to describe the etiology, effects and transmission of the AIDS virus.

Descriptive Statement: Instruction included factual information regarding the AIDS virus and its transmission. The medical profession should be involved in teaching this objective (and other health-related topics) to include the most up-to-date facts.

6.6 The student will summarize the process of human reproduction and the benefits of postponing premarital sexual activity.

Descriptive Statement: This is a review of the reproductive process and the advantages of delaying sexual involvement. The possible detrimental effects of premarital sexual activity for both males and females are emphasized. They include sexually transmitted diseases, unwanted pregnancy, infant mortality, and psychological (reputation, self-esteem, etc.), social, economic, and physical consequences.

6.8 The student will demonstrate increased understanding of child abuse and neglect, including emotional and sexual abuse.

Descriptive Statement: This is accomplished by defining the types of abuse and explaining the need to report such situations to a trusted adult such as a parent, teacher, minister, grandparent or guardian. The teacher helps students identify resources for the reporting and treatment of child abuse and family violence.

6.9 The student will become aware of community health-care and safety agencies and their functions.

Descriptive Statement: Instruction includes the availability of community agencies providing the following services: child abuse prevention; treatment of abuse victims; mental health counseling; teenage pregnancy prevention and counseling; family planning counseling; prenatal care; substance abuse prevention and treatment and support groups; suicide prevention; prevention and treatment of sexually transmitted diseases, including AIDS; other general and specialized medical services, including

the role of the family physician or local health department; police department, fire department, and other safety services; and community services provided by religious organizations. Parents are encouraged to learn about these agencies and to use their services when needed.

6.10 The student will explain the effects of substance abuse on the individual, family, school and society.

Descriptive Statement: The effects of alcohol, tobacco and other drugs on the individual, family, school, and society are presented with emphasis on genetic risks and fetal development, the nature of addictive personalities, drunken driving, physical and sexual abuse, family violence, and hazards of “second hand” smoking. Information on local community resources for obtaining help with these problems is included.

6.11 The student will evaluate the messages from mass media related to sexuality and gender stereotyping.

Descriptive Statement: Students progress from examining media messages in the fifth grade to evaluating messages from mass media related to sexuality and gender stereotyping in the sixth grade. The avoidance of sexual exploitation and stereotyping is stressed.

❖ ***Seventh Grade***

7.2 The student will recognize the physical development of his or her sex characteristics and how they affect emotional and social growth.

Descriptive Statement: Emphasis is placed on the biological and physiological changes of early adolescence. Attention is given to such secondary sex characteristics as body growth, genital changes, hormonal secretions, the onset of menstruation, and sex-response feelings. Instruction promotes self-awareness and alleviates anxiety through factual information regarding spontaneous erections, nocturnal emissions, masturbation, and differences in growth rates and development.

7.3 The student will realize that physical affection is not all sexual, but that it also can be an expression of friendship , of celebration, or of a loving family.

Descriptive Statement: The student learns that appropriate expressions of affection for emotional, physical and psychological health. Factual information about homosexuality is included. The student also is instructed in modes of handling personal anxieties encountered frequently by

adolescents. Such anxiety has led to increased dropout and teen suicide problems.

7.4 The student will recognize that sexual behaviors are conscious decisions; that it is important to say “no” to premarital and inappropriate sexual relationships; and that appropriate relationships are based on mutual respect, trust and caring.

Descriptive Statement: Sexual feelings are interpreted as normal and to be expected, but not always manifested in behavior. Instruction includes explanation of the differences between needs and desires, assertive skills, problem solving or conflict resolution, and alternatives. Ways to say “no” to premarital sexual relations and ways that students can support each other in saying “no” are presented. In addition, the detrimental effects of teenage pregnancy, the nature of sexually transmitted diseases and the benefits of delaying sexual activity until marriage are reviewed.

7.5 The student will identify messages in society related to sexuality.

Descriptive Statement: The teacher guides the student in discovering and analyzing messages about sexuality found in advertising media, music and videos, television, films, printed materials and graffiti. Messages conveyed by adults also are addressed. Students learn to recognize gender stereotyping and sexual exploitation. They are encouraged to evaluate and counteract any negative effects identified and to engage in a variety of positive activities, rather than spending too much time viewing media programs containing negative components.

7.6 The student will be aware of the consequences of preteen and teenage sexual intercourse.

Descriptive Statement: Instruction focuses on updated, factual information regarding sexually transmitted diseases, including AIDS; pelvic inflammatory disease (PID); cervical cancer; unwanted pregnancy; and discussion about reputation, guilt, and anxiety. Discussion includes also the emotional and financial implications of sexual activity and parenting before marriage. Students are guided in identifying positive aspects about themselves as reasons for avoiding risk-taking behavior. They learn also about the positive results and freedoms associated with abstinence during the preteen and teenage years.

7.9 The student will develop an understanding of and responsibility for family planning.

Descriptive Statement: Content includes reasons for family planning, factors to be considered when planning a family, the role of the family physician, community resources, and methods of contraception.

7.11 The student will identify causes, symptoms, treatment, prevention and transmission of sexually transmitted diseases, including AIDS.

Descriptive Statement Topics include the nature, symptoms, treatment, transmission, and diagnosis of the following diseases in addition to AIDS: syphilis, gonorrhea, chlamydia, and genital herpes. In addition, myths are dispelled; for example students learn that they cannot contract a sexually transmitted disease from dirty dishes or clothing. High risk activities such as needle-sharing, intravenous drug abuse, are discussed. Community resources for the testing and treatment of sexually transmitted diseases are identified.

7.13 The student will realize the role of peers and the peer group during adolescence, and the nature and purpose of dating.

Descriptive Statement: Discussion focuses on the qualities of friendship, the importance of participating in peer groups that encourage the development of positive personal traits, and the nature of dating. Group dating is presented as a positive first step in developing romantic relationships, demonstrating appropriate dating behavior and fulfilling dating responsibilities.

7.15 The student will increase his or her ability to listen to different points of view and to accept the rights of others to a differing point of view.

Descriptive Statement: Positive communication skills are developed to enhance relationships and to increase recognition of various points of view existing within families and society.

❖ ***Eighth Grade***

8.2 The student will recognize the development of sexuality as an aspect of the total personality.

Descriptive Statement: The primary factor to be presented is the development of one's own sexual identity.

8.5 The student will recognize the nature of dating during adolescence.

Descriptive Statement: Content includes the need for belonging, love and affection, and the search for one's own identity. In addition, students examine the difference between love and infatuation and become aware that one learns about oneself from every relationship.

8.7 The student will describe strategies for saying “no” to premarital relations.

Descriptive Statement: The emphasis is on strengthening self-confidence and reinforcing assertive skills and decision-making skills. Students learn why and how to say “no” to premarital sexual relations and to situations that challenge their own values, how to manage peer pressure, and how to manage their own sexual feelings.

8.11 The student will review facts about pregnancy prevention and disease control.

Descriptive Statement: Methods of contraception are analyzed in terms of their effectiveness in preventing pregnancy and the spread of disease. Abstinence is emphasized as the only method that is 100% effective in preventing pregnancy and the most effective method of minimizing the possibility of contracting sexually transmitted diseases.

8.13 The student will identify the effects and prevention of sexual assault, rape (including “date rape”), incestuous behavior, and molestation.

Descriptive Statement: Content includes developing assertive skills, resolving conflict, avoiding risk situations and provocative behavior and dress, saying “no”, and identifying other alternatives. Information on referral services also is provided.

8.14 The student will recall the ways in which the AIDS virus is transmitted, and techniques for preventing this disease.

Descriptive Statement: This involves describing behaviors, including homosexuality, that put one at risk; dispelling myths regarding the transmission of the disease; and stressing abstinence and rejection of the use of illegal, intravenous drugs. The use of condoms in preventing the spread of AIDS is discussed.

❖ ***Ninth Grade***

9.3 The student will recognize the development of sexuality as an aspect of total personality.

Descriptive Statement: Discussion focuses on the development of one's sexual identity. Internal and external conflicts associated with problems of sexual identity are addressed.

9.5 The student will review the nature and purposes of dating.

Descriptive Statement: Topics include understanding family guidelines, the functions of dating, and coping with the pressures experienced in dating situations. Discussion also focuses on the importance of group dating, rather than dating as a couple, in early adolescence.

9.7 The student will interpret the effects and prevention of sexual assault, rape (including "date rape"), incestuous behavior, and molestation.

Descriptive Statement: This is a review of the use of assertive skills, conflict resolution, avoidance of risk situations, and referral services in the community. In addition to identifying such factors, the student explains or interprets them to others.

9.11 The student will demonstrate knowledge of pregnancy prevention and disease control.

Descriptive Statement: Topics include planning for adult relationships, a review of factors to consider in planning for a family, misconceptions about contraception, a review of methods of contraception in relation to effectiveness in pregnancy prevention and disease control, and the decisions associated with contraception. Abortion is not presented as a method of birth control, but spontaneous abortion or miscarriage is explained and the risks of induced abortion are analyzed.

9.12 The student will explain the transmission and prevention of the AIDS virus.

Descriptive Statement: This is a review of the ways in which the AIDS virus is transmitted, and the techniques for preventing this disease.

❖ **Tenth Grade**

10.4 The student will use the steps in the decision-making process to solve specific problems.

Descriptive Statement: Instruction deals with the six steps of the decision-making process as they relate to personal, social, and peer pressures and to media messages. These steps include: identifying the problem; listing all possible alternatives; evaluating the alternatives and their consequences based on personal and familial beliefs as well as societal values; choosing

an alternative that promotes the good in self, others, and society; acting on the decision; and evaluating the results. Resources in the community that can assist in evaluating alternatives are identified.

10.5 The student will recognize the need to abstain from premarital sexual intercourse.

Descriptive Statement: Content focuses on the need to consider lifelong goals in relation to pressures for present sexual activity. Topics include readiness for parenthood, the consequences of non-marital pregnancy, the effects of sexually transmitted diseases, the impact on reputation and on present and future goals, the importance of adhering to family values, the need to complete educational plans, the burdens of financial responsibilities, and interference with future goals and job opportunities. The positive benefits of postponing sexual activity until marriage are emphasized, especially the opportunities available to young men and women who concentrate on attaining their personal educational and career goals. In addition, abstinence continues to be emphasized as the only method that is 100% effective in preventing pregnancy.

10.6 The student will recognize alternatives to premarital intercourse for expressing feelings and affection.

Descriptive Statement: Students are guided toward communicating feelings and affection through talking; through expressing ideas, values, and goals; through social and recreational contacts and community service; and through positive body language and caring gestures, rather than through premarital sexual intercourse.

10.7 The student will explain the factors to be considered in preparing for dating and marriage.

Descriptive Statement: Steps involved in relationships are identified, including friendships; dating (casual, double/group, single, blind, steady, and leading to marriage); and mate selection.

10.8 The student will examine factors to be considered in life-goal planning.

Descriptive Statement: Discussion includes lifelong career goals in relation to economic and continuing education, considering the possibilities of marriage and preparing for a family, and/or career development plans. Family planning, including methods of contraception are identified.

❖ ***Eleventh Grade***

11.2 The student will relate major theories of human development to his or her own situation and/or developmental level.

Descriptive Statement: A review of the major theories of personal developmental stages is followed by analysis of each stage as it relates to the student's own development. Students are made aware that these are theories that they are not all inclusive and that they may or may not relate to the student's individual life.

11.15 The student will analyze community resources to meet specific needs.

Descriptive Statement: This analysis focuses on community health-care resources, employee benefits and programs, support agencies and services, sources of educational information about child care and parenting and family planning resources.

VI. Long Range Issues for Sex Education

Ultimately, sexologists, teachers, legislators, leaders and parents, who are all concerned with the efficacy of sex education for teenagers and children, are all faced with the sobering conclusion that their decisions will affect their charges for many years to come. Reckless experimentation is not a viable option.

“Sexual health” is a term often used by sexologists as a rationale for their comprehensive sexuality programs. Yet, can “sexual health” be considered apart from the emotional, spiritual or behavioral health of a teenager? Because sex is so intrinsically tied to emotion and spirit, it is wiser and more “comprehensive” to provide holistic character education that is rooted in ethical virtue.

Myra D. Stanecki, the National President of the Martin Luther King, Jr. Family Life Institute, addressed this issue, when she said:

Modern education has focused on intellectual development and neglected the importance of character formation. As a result, recent scientific and technological progress has been accompanied by many social problems. Thus, we need to restore the balance by revitalizing the spiritual and moral content of education. Character education can be defined as the conscious and deliberate effort to guide our youth into living moral and meaningful lives; to cultivate within them good human qualities-- good for the development and well-being of the individual and good for the whole human community.

Since the family is the school of love and it is primarily within the family that people's character is formed, the centrality of the family should be at the core of character education. Character education should support the spiritual and moral development of our youth so that they become mature individuals, faithful spouses, loving parents, and responsible citizens who make a contribution to their society. When character education is centered upon these universal values, taught both at home and in school, we connect the two most powerful institutions in which values are formed with a *common* purpose and direction, bringing about a revolution of values that will impact our society and world profoundly in the 21st century.

It is important to provide ethically based character education to teenagers that goes beyond "risk reduction." Instead, we should work to help young people *avoid* risk altogether, and thus grow into mature, ethically sound, unselfish and loving individuals.

Part of that task is to protect vulnerable teenagers from influences that will lead them toward drugs, violence, alcohol, tobacco and premature sex.

My hope is that this booklet can help other leaders and legislators in their efforts to successfully protect and guide and educate our young people about risk avoidance.

Here's to the success of our youth!

