

Rationale for Sexuality Education in Public Schools

From National Sexuality Education Standards¹

For years, research has highlighted the need to provide effective, comprehensive sexuality education to young people. The US has one of the highest teen pregnancy rates in the industrialized world.² Each year in the US, more than 750,000 women ages 15–19 become pregnant,³ with more than 80 percent of these pregnancies unintended.⁴ Furthermore, while young people in the US ages 15–25 make up only one-quarter of the sexually active population, they contract about half of the 19 million sexually transmitted diseases (STDs) annually. This equates to one in four sexually active teenagers contracting a sexually transmitted disease each year.⁵ And young people ages 13–29 account for about one-third of the estimated 50,000 new HIV infections each year, the largest share of any age group.⁶

There is also a pressing need to address harassment, bullying and relationship violence in our schools, which have a significant impact on a student's emotional and physical well-being as well as on academic success. According to the 2009 National School Climate Survey, nearly 9 out of 10 lesbian, gay, bisexual or transgender (LGBT) students reported being harassed in the previous year. Two-thirds of LGBT students reported feeling unsafe and nearly one-third skipped at least one day of school because of concerns about their personal safety. LGBT students who reported frequent harassment also suffered from lower grade point averages.⁷

Similarly, teen relationship violence continues to be a pressing problem. Although frequently underreported, ten percent of teens are physically harmed by their boyfriend or girlfriend in a given year.⁸

Studies have repeatedly found that health programs in school can help young people succeed academically. The most effective strategy is a strategic and coordinated approach to health that includes family and community involvement, school health services, a healthy school environment and health education, which includes sexuality education. In fact, an extensive review of school health initiatives found that **programs that included health education had a positive effect on overall academic outcomes, including reading and math scores.**

Evaluations of comprehensive sexuality education programs show that many of these programs can help youth delay the onset of sexual activity, reduce the frequency of sexual activity, reduce the number of sexual partners, and increase condom and contraceptive use. Researchers recently examined the National Survey of Family Growth to determine the impact of sexuality education on sexual risk-taking for young people ages 15-19, and found that teens who received comprehensive sexuality education were 50 percent less likely to report a pregnancy than those who received abstinence-only education. 4

The CDC has also repeatedly found that student health behaviors and good grades are related, stating: "...students who do not engage in health-risk behaviors receive higher grades than their classmates who do engage in health-risk behaviors." ¹⁵

Further, studies show that physical and emotional health-related problems may inhibit young people from learning by reducing their motivation to learn; diminishing their feelings of connectedness to school; and contributing to absenteeism and drop out.^{9 16}

An example related to sexuality education is teen pregnancy. Teen pregnancy often takes a particular toll on school connectedness for both partners, representing a major disruption in many teens' lives and making it difficult to remain in and/or engaged in school. Many pregnant and parenting teens experience lower grades and higher dropout rates than their non-parenting peers. In fact, research shows that only 51 percent of pregnant and parenting teens graduate from high school as compared to 89 percent of their non-pregnant and parenting peers.¹⁷

Given the evidence that connects lower risk behaviors to academic success, schools clearly have as vested an interest in keeping students healthy as do parents and other community members. In providing comprehensive sexuality education programs, schools support student health and as such further foster young people's academic achievement.

Parents overwhelmingly favor comprehensive sexuality education in public school at the national and state levels. ^{18 19 20 21} In 2004, National Public Radio (NPR), the Kaiser Family Foundation and the Kennedy School of Government released a poll that indicated:

- Ninety-three percent of parents of junior high school students and 91 percent of parents of high school students believe it is very or somewhat important to have sexuality education as part of the school curriculum.
- Ninety-five percent of parents of junior high school students and 93 percent of parents of high school students believe that birth control and other methods of preventing pregnancy are appropriate topics for sexuality education programs in schools.
- Approximately 75 percent of parents believed that the topic of sexual orientation should be included in sexuality education programs and "discussed in a way that provides a fair and balanced presentation of the facts and different views in society."
- Eighty-eight percent of parents of junior high school students and 85 percent of parents of high school students believe information on how to use and where to get contraceptives is an appropriate topic for sexuality education programs in schools.²²

The *National Sexuality Education Standards* set forth minimum, essential sexuality education core content and skills responsive to the needs of students and in service to their overall academic achievement and sexual health. They fulfill a key recommendation of the White House Office of National AIDS Policy's *National HIV and AIDS Strategy for the United States*, which calls for educating all Americans about the threat of HIV and how to prevent it. This recommendation includes the goal of educating young people about HIV and emphasizes the important role schools can play in providing access to current and accurate information. The strategy notes that it is important to provide access to a baseline of information that is grounded in the benefits of abstinence and delaying or limiting sexual activity, while ensuring that youth who make the decision to be sexually active have the information they need to take steps to protect themselves.²³

In addition, the *National Sexuality Education Standards* satisfy a key recommendation of the Office of the Surgeon General's *National Prevention and Health Promotion Strategy*, which calls for the provision of effective sexual health education, especially for adolescents. This strategy notes that medically accurate, developmentally appropriate, and evidence-based sexual health education provides students with the skills and resources that help them make informed and responsible decisions.²⁴

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