



SIECUS

WINTER/SPRING 2015

DEVELOPMENTS

SIECUS Developments is the semiannual newsletter of the Sexuality Information and Education Council of the United States, a national nonprofit organization. Since 1964, SIECUS has been at the forefront of promoting comprehensive sexuality education for people of all ages and protecting the rights of individuals to make informed sexual and reproductive choices.

UPCOMING DATES TO REMEMBER

MARCH IS
WOMEN'S HISTORY MONTH

APRIL IS
MINORITY HEALTH MONTH

APRIL IS
**SEXUALLY TRANSMITTED
INFECTION AWARENESS MONTH**

MAY IS
TEEN PREGNANCY PREVENTION MONTH

JUNE IS
**LESBIAN, GAY, BISEXUAL, AND
TRANSGENDER PRIDE MONTH**



MESSAGE FROM THE PRESIDENT

Monica Rodriguez

As supporters of our work, you know that the Sexuality Information and Education Council of the United States (SIECUS) believes that sexuality education is a cornerstone for healthy sexual development as well as life-long sexual health and well-being.

We work to ensure that all people have access to sexuality education that is based on scientific evidence, is medically accurate, age-appropriate, inclusive of all people, and provides information about a wide range of topics related to sexuality. Research has shown that more comprehensive approaches to sexuality education have been found to be effective in helping young people delay sexual intercourse, increase condom or contraceptive use, and reduce the number of sexual partners. Further, the scientific literature clearly shows that sexuality education programs that promote abstinence as well as the use of condoms and contraception do not increase sexual behavior or STD risks among young people.

In 2015, we anticipate facing several significant obstacles as we work to advance sexual health and well-being, including: continued sexual risk-taking behavior among adolescents leading to growing and stagnant rates of unintended pregnancy, sexually transmitted diseases (STDs), and HIV infection; challenges by right wing

ideologues to sexuality education programs, funding, and policies at the federal, state, and local levels; and the battles brewing in the new Congress controlled by policymakers who have an anti-sexual health agenda.

With your support, this year SIECUS will work to advance the provision of comprehensive sexuality education that supports the attainment of sexual health and well-being throughout the lifespan. We will: focus targeted state and local efforts on adopting and implementing policies and support the delivery of sexuality education programs; protect and advance federal policies on sexuality education; and expand SIECUS' role as a clearinghouse for and publisher of high-quality sexuality education materials. Further, we will: seek high-impact opportunities that allow SIECUS to communicate the organization's vision, mission, and messages through a multi-modal strategy that uses a combination of traditional media and online social media; and highlight the positive impact of SIECUS' work through consistent and compelling communications, including the launch of our new website (we can't wait!).

This is a tall order, but we are up to the challenge. And with your support, we will meet this challenge. Thank you for being part of the SIECUS family and we look forward to your continued partnership. 

Did You Know SIECUS Has Been Tracking Sexuality Education Controversies for 20 Years?

SIECUS is excited to share its new *Sexuality Education Controversy Database*, a never-before-available compendium of data on the nation's key sexuality education controversies from the two decades spanning the school years 1993–2012. SIECUS tracked controversies and analyzed the data from this convenience sample of controversies to review how public discourse on sexuality education in the U.S. has changed over a generation. Access the summary report, *A Cache of Controversy: Two Decades of Data on Sexuality Education Conflicts* at <http://siecus.org/document/docWindow.cfm?fuseaction=document.viewDocument&documentid=464&documentFormatId=527> and discover how the *Controversy Database* can serve you!

Visit our website to also access *It's Perfectly Traditional: Christian Right Joined By Common Core Opposition*, this year's article documenting themes in sexuality education controversies during the 2013–2014 school year. <http://siecus.org/document/docWindow.cfm?fuseaction=document.viewDocument&documentid=460&documentFormatId=523> 

SIECUS Releases Sexual Health Care Services Report

SIECUS works to define, frame, and support a public discourse on sexual health and well-being and create a sexually healthy America. An individual's ability to access high-quality health care, particularly sexual health care services, is essential to creating a sexually healthy America. Our report, *Ensuring Equitable Access to High-Quality Sexual Health Care Services*, aims to address sexual health care in a comprehensive and integrated fashion by:

- Providing a political and financial overview of sexual health care services, including the federal policies and funding mechanisms that support access to services, as well as the barriers to accessing services.
- Offering a definition of high-quality sexual health care services that integrates the often segregated aspects of care including reproductive health care and STD testing and treatment.
- Examining the unique sexual health care needs of five subpopulations: adolescents; gay men and men who have sex with men; transgender and gender non-conforming people; the incarcerated, including those in the juvenile justice system; and the aging. These subpopulations are disproportionately affected by both negative sexual health outcomes and the lack of access to services.
- Providing specific recommendations for ensuring equitable access to sexual health care services.

This report is the result of a series of interviews with key experts in the field and a comprehensive review of existing materials including standard of care guidelines developed by national and international public health and medical organizations, such as, but not limited to: the American Academy of Pediatrics; the American College of Obstetricians and Gynecologists; the American Medical Association; the Center of Excellence for Transgender Health; the Centers for Disease Control and Prevention; the Guttmacher Institute; the Kaiser Family Foundation; the National Commission on Adolescent Sexuality; the National Commission on Correctional Health Care; the Society for Adolescent Health and Medicine; the United States Department of Health and Human Services; the World Health Organization; and many others.

It is our hope that by researching and summarizing what is currently in place and providing accompanying recommendations of what high-quality sexual health care services can look like in the future, this report will help move our field closer to ensuring accessible, affordable, and confidential sexual health care services for people at different ages and stages of life.

The full report can be found on the SIECUS website at: <http://www.siecus.org/document/docWindow.cfm?fuseaction=document.viewDocument&documentid=465&documentFormatId=528> 

Are you a federal employee?

If so, you can make your donation to SIECUS using the Combined Federal Campaign (CFC).

SIECUS is an approved charity of the Campaign's Health and Medical Research Charities of America.

Our CFC code number is: 11848

Fiscal Year 2015 Appropriations Bill Maintains Federal Funding Levels, Includes Abstinence-Only-Until-Marriage Policy Rider

In December 2014, the negotiated fiscal year (FY) 2015 federal funding package, *Consolidated and Continuing Appropriations Act of 2015* and accompanying report language, was released by appropriations leadership. The bill includes funding through the remainder of the fiscal year for 11 of the 12 appropriations bills, including the Labor, Health and Human Services, Education and Related Agencies (LHHS) funding bill. The 12th funding bill, Homeland Security appropriations, was extended through February 2015.

The funding bill contained level funding for the Teen Pregnancy Prevention Initiative (TPPI) at \$101 million and the Division of Adolescent

and School Health (DASH) at \$31 million. Unfortunately, the bill also maintains \$5 million for the Competitive Abstinence Education (CAE) grant program.

Most concerning, however, is the inclusion of a new abstinence-only-until-marriage (AOUM) policy rider. The new provision changes the Title V AOUM program to reallocate any unused FY 2015 Title V AOUM funds, approximately \$12-\$15 million per year. While in the past these funds had been returned to the U.S. Treasury, they will now be made available to states “that require the implementation of each element described” by the eight points of the federal A-H definition of “Abstinence

Education” and “submit a valid application consistent with the original formula for this funding.”

SIECUS continued to educate Congress as to the harms of AOUM programs and this new policy rider, but given the nature of the closed-room negotiations and quick timeline for passage, there was no opportunity to strip the rider from the final bill. We were very disappointed that in the currently constrained fiscal climate, Congress continued to advance funding for programs that have been proven to be ineffective in addressing the long-term sexual health needs of our nation’s young people. 

Sexual Health Risk Behaviors Among High School Students At a Standstill

On June 12, 2014, the U.S. Centers for Disease Control and Prevention (CDC) released the 2013 National Youth Risk Behavior Survey (YRBS). The YRBS, which is released biennially, tracks a variety of health risk behaviors, including sexual behaviors that contribute to unintended pregnancies and sexually transmitted diseases (STDs), including HIV, among a representative sample of high school students.

The 2013 national YRBS data is based on 13,583 usable questionnaires completed in 148 regular public and private schools with students in at least one of grades 9 through 12 in the 50 states and the District of Columbia. Sexual behavior data reported for 2013 shows relatively little change from 2011. However, disappointingly, the number of youth reporting use of condoms has declined by 4% in the past ten years, from 63% in 2003 to just 59% in 2013. The overall trend of

little movement among the reported sexual behaviors, some of which are highlighted below, demonstrates the continued need for investments in comprehensive sexuality education and access to sexual health care and services. Key results for sexual behavior in the 2013 YRBS included the following:

- 47% of students reported ever having had sexual intercourse (47% in 2011)
- 34% of students reported being currently sexually active, defined as having had sexual intercourse in the three months prior to the survey (34% in 2011)
- 6% of students reported having had sexual intercourse before age 13 (6% in 2011)
- 59% of currently sexually active students reported that either they or their partner had used a condom during last sexual intercourse (60% in 2011)

- 25% of currently sexually active students reported that either they or their partner had used birth control pills; an IUD or implant; or a shot, patch, or birth control ring to prevent pregnancy before last sexual intercourse (23% in 2011)
- 9% of currently sexually active students reported that either they or their partner had used both a condom during last sexual intercourse and birth control pills; an IUD or implant; or a shot, patch, or birth control ring to prevent pregnancy before last sexual intercourse (10% in 2011)
- 14% of currently sexually active students had not used any method to prevent pregnancy during last sexual intercourse (13% in 2011)

The complete 2013 YRBS, including more information on the data above and on many other teen health behaviors, can be found at www.cdc.gov/yrbs. 

President's Fiscal Year 2016 Budget Shows Strong Support for Effective Adolescent Sexual Health Promotion Programs

On February 2, 2015, the president released his fiscal year (FY) 2016 budget which continues to demonstrate his strong commitment to adolescent sexual health promotion programs.

The president's FY 2016 budget request proposes increased investment in both the Teen Pregnancy Prevention Initiative (TPPI) and the Division of Adolescent and School Health (DASH). The \$4 million requested increase for TPPI (\$111.8M total including evaluation) is critical as partners across the country develop their grant applications for evidence-based or innovative approaches to teen pregnancy prevention. The requested \$6 million increase for DASH (\$37M total), meanwhile, represents the first budget authority increase proposed for the program in the president's budget since FY 2013, and reflects the administration's interest in improving school-based HIV prevention efforts. In addition, the budget calls for a five-year reauthorization of the Personal Responsibility Education Program (PREP) at the continued funding level of \$75 million per year.

Similar to last year's budget, the president's FY 2016 budget request is free of funding for harmful abstinence-only-until-marriage (AOUM) programs and does not include funding for the Competitive Abstinence Education (CAE) grant program or the continuation of the Title V "Abstinence Education" program. This represents a savings of up to \$55 million in FY 2016.

The release of the president's budget begins the months-long negotiations process in Congress, which ultimately determines the final budget and funding allocations for the year. SIECUS applauds the administration's commitment to improving the sexual health and well-being of all young people and looks forward to working with Congress to continue these investments. 

Become a Monthly SIECUS Supporter!

Can't make the large donation you'd like to all at once?

Spread it out over the year instead.

Sign up for an automatic donation to be made to SIECUS each month securely charged to the credit card of your choice.

You can sign up for this free service by visiting the SIECUS website at www.siecus.org and clicking on the DONATE button.

Or you can visit www.siecus.org/donate

SIECUS SALUTES!

Gifts made in honor of an individual can commemorate a birthday or anniversary, recognize the work of someone special, memorialize a special person, or celebrate the holidays.

Below are recent gifts to SIECUS for the period of September 2014 – January 2015 from special people to special people.

- Dr. Michael Carrera *in honor of* Monica Rodriguez
- Dr. Michael Carrera *in honor of* Susie Wilson
- Stuart Chen-Hayes *in honor of* Kurt Conklin, MPH
- Abby and Steve Gorlick *in honor of* Jason Osher and Rick Schubel
- Dr. Linda A. Hawkins *in memory of* Raymond J. Hawkins
- Alice Hirschfeld *in memory of* Don Hirschfeld
- Emily S. Kerley *in memory of* Mattie Rodgers
- Luanne Koskinen *in memory of* Kari Ann Koskinen
- Dr. Darrel Lang *in honor of* Lynn Hammond
- Anne Lenzini *in honor of* Adrienne and Trey Farmer
- Dr. Konstance McCaffree *in memory of* Elizabeth Edmonds
- Ellen More, Ph.D. *in honor of* Peggy Brick
- Linda Rae *in honor of* Ernie Green
- Marion Siu *in honor of* Flo Griffen
- Margie and Mort Steinberg *in honor of* Jason Osher
- Bryan and Christine White *in honor of* Mary P. Lefkarites
- David Wiley *in honor of* Dr. Darrel Lang

Please consider honoring someone special in your life with a gift to SIECUS.

SIECUS Board Members Making Strides for LGBT Adolescent Health

The Children’s Hospital of Philadelphia (CHOP) was recently acknowledged by the Human Rights Campaign (HRC) as a 2014 LGBT Healthcare Equality Leader. According to HRC, CHOP earned top scores in nondiscrimination and training criteria that illustrate the hospital’s dedication to inclusive care for lesbian, gay, bisexual, and transgender (LGBT) patients and their families.

Nadia Dowshen, M.D., a pediatrician and adolescent-medicine specialist, has been working at CHOP for almost 15 years. Dowshen is also the director of the Adolescent HIV Clinic and co-founder of the new Gender and Sexuality Development Clinic. “A big part of what I do is educate various care providers and trainees at different levels — nurses, doctors, social workers, med students — about how to provide the best care for all adolescents,” Dowshen said. “A big part is understanding psychosocially what’s going on with them and the appropriate health care they need, and

teaching folks to talk to all adolescents in a way that supports people of all genders, sexes, races, and ethnicities.”

Another major player in the momentum of CHOP as an LGBT health-care leader is Linda Hawkins, Ph.D., a family-services specialist focusing on LGBT competency throughout the hospital, who has been working at CHOP for nearly 17 years.

Hawkins and Dowshen strive for excellence in their daily work, and both women are committed to creating equitable, inclusive care for all LGBT adolescents.

“I believe we need to move from a world of being LGBT-friendly to a world of being LGBT-competent,” Hawkins said.

CHOP certainly knows what they’re doing for LGBT health care: in January 2014, CHOP opened the Gender and Sexuality Development Clinic, which aims to help transgender, gender-variant, and gender-nonconforming youth up to 21. “I think there’s been an impact in that there’s more awareness that there

is a team that will help and treat these young people, whereas before people may have not known what to do,” said Hawkins. The opening of the Gender and Sexuality Development Clinic and the recognition from HRC in the past year is exciting and important for CHOP, Hawkins said, noting it caps years of CHOP’s work for LGBT health-care equality. The most important impact from that work, Dowshen said, has been on LGBT youth.

“I’ve dedicated my career to working with marginalized youth, many of whom are LGBT, and unfortunately they face many challenges to their health because of stigma in society and often not having the support of their family and communities,” she said. “We’re now in a place at CHOP where we’re able to start to address these issues. This is a really exciting time.”

SIECUS is proud to have Dr. Dowshen and Dr. Hawkins as members of our Board of Directors.



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NOTES FROM THE RESEARCH

'Get Real,' Gets Results: Data from a Middle School Study Shows Promise

Researchers followed more than 2,400 middle school students in 24 Boston-area schools over three years, to compare the behavioral impact of the sexual health education program *Get Real: Comprehensive Sex Education That Works* with the impact of attending the routine sexual health education programming already available in those schools. *Get Real* is a 27-session program (9 sessions per year in grades 6, 7, and 8) intended to delay vaginal intercourse among middle school students.

Developed by Planned Parenthood League of Massachusetts, *Get Real* is a school-based program that recognizes parents as the primary sexuality educators of their children and incorporates 8 family activities in each grade to strengthen parent/guardian involvement in their child's sexuality education. Family activities include answering true/false questions about HIV/AIDS, talking about images of sexuality in popular media, practicing how to say "no" and set boundaries, and discussing what makes relationships healthy or unhealthy.

Research findings include:

- 11% of males and 4% of females reported having had vaginal intercourse by the start of 6th grade, prior to the start of the program.
- In schools where *Get Real* was taught, 16% fewer males and 15% fewer females reported having vaginal intercourse by the end of 8th grade in contrast with males and females at comparison schools.

- Completing the family involvement activities had the most effect in delaying age of first sexual intercourse for males.

This study provides evidence that a middle-school sexuality education program, with 9 lessons per year (and more comprehensive than what many schools provide), can delay the age of first vaginal intercourse among students of all genders. The results of the three-year study indicate that for boys in particular, the family activities increase the effect of the program – perhaps because they encourage parents and guardians to talk as much with sons as they typically do, by default, with daughters.

In addition, in early February 2015, *Get Real* was added to the Health and Human Services (HHS) Teen Pregnancy Prevention Evidence Review and evidence-based programs list and is now one of the 37 programs meeting the review criteria for evidence of effectiveness as determined by the Office of the Assistant Secretary for Planning and Evaluation (ASPE).

Source: Jennifer M. Grossman, Allison J. Tracy, Linda Charmaraman, Ineke Ceder, and Sumru Erkut, "Protective Effects of Middle School Comprehensive Sex Education with Family Involvement," *Journal of School Health* (November 2014).

U.S. Department of Health and Human Services Teen Pregnancy Prevention Evidence Review, <http://tppevidencereview.aspe.hhs.gov>

Federal Funding Available for Adolescent Sexual Health Promotion

The Office of Adolescent Health (OAH) and the Centers for Disease Control and Prevention (CDC), under the U.S. Department of Health and Human Services (HHS) recently released multiple funding opportunities to advance adolescent sexual health promotion. SIECUS has compiled several resources to assist national, state, and local partners in these federal funding opportunities which include:

1. Replicating Evidence-Based Teen Pregnancy Prevention Programs to Scale in Communities with the Greatest Need
2. Capacity Building to Support Implementation of Evidence-Based Teen Pregnancy Prevention Programs
3. Supporting and Enabling Early Innovation to Advance Adolescent Health and Prevent Teen Pregnancy
4. Rigorous Evaluation of New or Innovative Approaches to Prevent Teen Pregnancy
5. Effectiveness of Teen Pregnancy Prevention Programs Designed Specifically for Young Males

For assistance or to view the resources SIECUS has developed, please visit www.siecus.org 

NOTES FROM THE FIELD

Pennsylvania: School District Encounters Parent Push-Back on Abstinence-Only-Until-Marriage Speaker

The Warwick School District in south central Pennsylvania was the scene of a controversy this Fall over abstinence-only-until-marriage speaker Pam Stenzel, whom the district had invited to address middle- and high-school students at two in-school daytime assemblies and a mixed teen- and-parent audience at a third event in the evening.

District parents were not uniform in welcoming this news. While the district stood fast in support of the divisive performer, it canceled the daytime assemblies in response to some parents' objections about Stenzel's factual credibility and her theatrical style.

At a school board meeting that preceded Stenzel's appearance, four of seven speakers opposed Warwick's sponsorship of the event.

A parent of two Warwick students expressed her opposition and told the Board she had viewed one of Stenzel's presentations on DVD. This parent, who has a master's degree with an emphasis in human sexuality and has taught abstinence-based programs in schools and churches, described Stenzel's tone as "harsh and abrasive" and said that Stenzel relied on fear to make the case for abstinence: "(I) actually felt battered by her constant yelling [the parent said]...But most significantly I am concerned that she distorts, exaggerates and manipulates facts to make her case."

In contrast, another parent told the Board he was "truly perplexed" by such complaints

about Stenzel and that "... the fact remains that there is a difference between right and wrong, between good and evil [and] I support the value our children receive when there is clarity and a sharp divide between right and wrong."

The regional news source *Lancaster Online* provided coverage of the debate, and weighed in with its own editorial statement praising the parents who spoke out to oppose Stenzel. In the words of its editorial board, "Stenzel's rhetoric undermines the bond between parents and teens —mothers and daughters, especially...In her talk online, she declares that when a mother takes her daughter to get birth control, the mother has made that girl '10 times more likely to contract a disease...This girl could end up sterile or dead,' she says, sneering, 'Thanks, mom. Glad you cared.' This is an appalling and irresponsible message, and the very opposite of pro-family values."

Assigning blame to the opposition, the district announced that the two daytime assemblies were

canceled, and that Stenzel would appear for just one event, to be held in the evening at the Warwick High School Performing Arts Center, and would be supported with private funds.

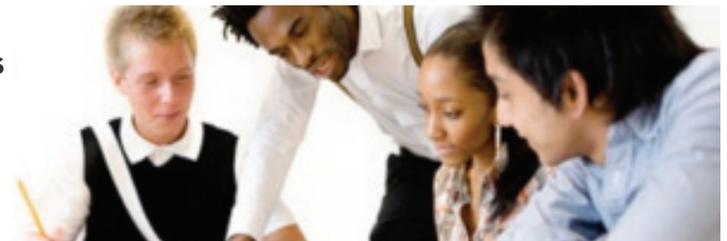
The night of the rescheduled assembly, nearly 500 students and parents turned out for Stenzel's 75-minute talk. According to one observer, "...the crowd in the auditorium was solidly in Stenzel's court."

Invoking (and reinforcing) long-cherished stereotypes of 'boy' and 'girl' sexual expectations, Stenzel advised males to, "Keep your pants on. And zipped, boys... If you've done that, you're fine. If not, you have to get tested. It's that simple." To the females, she said, "Girls, you have forgotten who you are," and instructed them conclude every date with the following pronouncement: "You had the privilege of being with me for 5 hours. You don't need anything else, I am a princess!"

As one parent said, "This is about providing students with the best education we can — not simply doing 'whatever it takes to keep kids from having sex.'"

Information is everything.

And that's a fact of life.



SIECUS

Sexuality Information and Education Council of the United States

REMEMBER TO VISIT THE SIECUS WEBSITE:
www.SIECUS.org



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WINTER/SPRING 2015

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Jason I. Osher, Chief Operating Officer

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SIECUS Developments is a semiannual publication of the Sexuality Information and Education Council of the United States. Founded in 1964, SIECUS affirms that sexuality is a fundamental part of being human, one that is worthy of dignity and respect. We advocate for the right of all people to accurate information, comprehensive education about sexuality, and sexual health services. SIECUS works to create a world that ensures social justice and sexual rights.

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Plan It!

Planned gifts are a sensible way to have a lasting social impact through the organizations you care about most. There are many personal benefits to making a planned gift to SIECUS, including making a larger charitable gift than you thought possible; providing inheritances for your heirs at a reduced tax cost; reducing your income tax and/or avoiding capital gains tax; diversifying your investment portfolio; and leaving a charitable legacy for future generations.

There are several planned giving opportunities that would help secure the critical work of SIECUS for years to come.

Bequests • Life Insurance

Retirement Plan Assets • Trusts

Your lawyer or financial advisor can help you take the next step toward making a planned gift to SIECUS and investing in a sexually healthy future for all.

If you need any additional information or assistance, please don't hesitate to call Jason Osher, chief operating officer at SIECUS, at 212.819.9770, extension 319.