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Minnesota received \$499,000 in federal funding for abstinence-only-until-marriage programs in Fiscal Year 2005.¹

Minnesota Sexuality Education Law and Policy

In 1988, the Minnesota legislature passed a bill requiring school districts to develop and implement a comprehensive HIV/AIDS-prevention and risk-reduction program. In 1999, the law was amended to include instruction on sexually transmitted diseases (STDs) and “helping students to abstain from sexual activity until marriage.”

While the state has not developed a specific curriculum framework or set of standards, each school district must have “a comprehensive, technically accurate, and updated curriculum that includes helping students to abstain from sexual activity until marriage” and must target “adolescents, especially those who may be at high risk of contracting sexually transmitted infections and diseases, for prevention efforts.”

Minnesota also requires each school district to:

[H]ave a procedure for a parent, guardian, or an adult student, 18 years of age or older, to review the content of the instructional materials to be provided to a minor child or to an adult student and, if the parent, guardian, or adult student objects to the content, to make reasonable arrangements with school personnel for alternative instruction.

This is referred to as an “opt-out” policy.

See Minnesota Statutes 120B.20 and 121A.23.

Recent Legislation

Legislation Would Require Sexuality Education in Later Grades, Encourage It in Earlier Grades
Senate Bill 100A, introduced in July 2005, would encourage school districts to implement age-appropriate, medically accurate sexuality education programs in kindergarten through sixth grade and mandate that they provide such education in seventh through twelfth grade.

This education would be age-appropriate, respect community values and encourage family communication as well as “promot[ing] responsible sexual behavior, including an abstinence-first approach to delaying initiation to sexual activity.” It would include information about contraception. School districts would be required to establish procedures for how parents and guardians could review all related educational materials. Parents and guardians would be able to remove their children from any or all of the sexuality education.

SB 100A is currently in the Senate Committee on Rules and Administration.

Information About Criminal Sexual Conduct Would Be Included in STD Prevention

Introduced in February 2005 and referred to the House Committee on Education Policy and Reform, House Bill 1071 would require that information about criminal sexual conduct be included in STD education in either grade 10, 11, or 12.

Legislation Would Require Sexuality Education in Later Grades, Encourage It in Earlier Grades

House Bill 1301 and Senate Bills 878 and 1262, introduced in February 2005, would encourage school districts to implement age-appropriate, medically accurate sexuality education programs in kindergarten through sixth grade and mandate that they provide such education in seventh through twelfth grades.

This education would promote abstinence, be respectful of marriage and committed relationships, encourage parent-child communication about sexuality, and be appropriate for “use with pupils and family experiences based on race, gender, sexual orientation, ethnic and cultural background, and appropriately accommodate alternative learning based on language or disability.” Parents and guardians would be able to remove their children from any or all of the sexuality education program.

The legislation also charges the Department of Education with providing services to help school districts develop, implement, and maintain these sexuality education programs.

These bills vary slightly from SB 100A, which was introduced in July 2005. HB 1301 is currently in the House Committee on Education Policy and Reform and both Senate bills are in the Senate Committee on Education.

Legislation Would Implement Sexuality Education in Schools, Create Regional Training Sites for Sexuality Education, and Change Abstinence-Only Programs

House Bill 646 and Senate Bill 581, both introduced in January 2005, have numerous goals. The legislation would require school districts to implement comprehensive family life and sexuality education no later than the 2008–09 school year. This education must be medically accurate, age-appropriate, encourage family communication, promote responsible sexual behavior, and include both abstinence and contraception.

HB 646 and SB 581 would also establish eight regional training centers in partnership with school districts to help districts implement the aforementioned education by providing technical assistance, advice on curricula, and training.

In addition, the bills would change Minnesota’s current *ENABL (Education Now and Babies Later)* program by switching its focus from promoting abstinence-until-marriage to providing “comprehensive sexuality education that promotes abstinence and promotes male sexual responsibility.”

The bills would also create a grant program to provide after-school enrichment programs and ensure greater access to family planning services.

HB 646 was referred to the House Committee on Health Policy and Finance. SB 581 has been passed by the Senate Committee on Health and Family Security and the Committee on Education. It currently resides in the Senate Committee on Finance.

Events of Note

SIECUS is not aware of any recent events regarding sexuality education in Minnesota.

Minnesota's Youth: Statistical Information of Note

- In 2000, Minnesota's abortion rate was 13 per 1,000 women ages 15–19 compared to a teen abortion rate of 24 per 1,000 nationwide.²
- In 2003, women ages 15–19 accounted for 15% of the 14,024 total abortions performed in Minnesota.³
- In 2002, Minnesota's birth rate was 28 per 1,000 women ages 15–19 compared to a teen birth rate of 43 per 1,000 nationwide.⁴
- In 2002, Minnesota's gonorrhea rate was 202 per 100,000 persons ages 15–19, compared to a rate of 476 cases per 100,000 persons ages 15–19 nationwide.⁵
- In 2003, Minnesota's HIV/AIDS prevalence rate was 5.3 per 100,000 persons ages 13–19.⁶

Title V Abstinence-Only-Until-Marriage Funding

Minnesota received \$499,000 in federal Title V funding in Fiscal Year 2005. The Title V abstinence-only-until-marriage grant requires states to provide three state-raised dollars or the equivalent in services for every four federal dollars received. The state match may be provided in part or in full by local groups. In Minnesota, the federal money is matched with \$366,467 in state funds. This funding is controlled by the Minnesota Department of Health. Minnesota's Title V funding is used to fund the state's *ENABL* program, an abstinence-only-until-marriage program that was established prior to Title V funding.

Minnesota's Title V funding for *ENABL* is split among five components:

- *Community Organizing Activities*: This is the only area in which the money is sub-granted. There are 22 sub-grantees including three school districts, six community health organizations, and 14 non-profit organizations. There are no faith-based groups among the sub-grantees. According to the Minnesota Department of Health, these grantees “provide school and community-wide activities to convey and reinforce the message of abstinence as the norm for youth age 14 and under.” Each of the grantees must work in three areas: curriculum, community organizing, and public awareness.
- *Statewide Media Campaign*: This targets youth ages 10–14 and their parents or caregivers.
- *Training for Staff and Community Leaders*: The Minnesota Department of Health provides training and technical assistance.
- *Program Evaluation*: The program evaluation was released in January 2004 and showed that these programs are not effective in delaying sexual activity. (For more information on this evaluation see the *Title V Evaluation* section.)
- *Program Administration*: Funds used to provide staffing, technical assistance, and support for the statewide program.

The *ENABL* program uses four curricula: *Postponing Sexual Involvement*, *Managing Pressures*, *Making A Difference*, and *Worth the Wait*. According to the Minnesota Department of Health, all curricula and supplemental materials must be technically accurate; up to date; use a positive approach; gender-fair; racially, ethnically, and culturally non-biased; and not teach or promote religion.

SIECUS reviewed *Worth the Wait* and found that it covers some important topics related to sexuality such as puberty, anatomy, and sexual abuse, and that the curriculum is based on reliable sources of data. Despite these strengths, *Worth the Wait* relies on messages of fear, discourages contraceptive use, and promotes biased views of gender, marriage, and pregnancy options. For example, the curriculum explains, “teenage sexual activity can create a multitude of medical, legal, and economic problems not only for the individuals having sex but also for society as a whole.”⁷

Minnesota’s *ENABL* program includes a website as part of its media campaign. The website (www.saynotyet.com) displays the slogan “Say Not Yet To Sex,” and has a significant amount of information for teens about refusal strategies and ways to avoid early sexual activity. However, it also includes a set of “fast facts” that use fear and shame to connect premarital sex to high school dropout rates, welfare, STDs, guilt, and embarrassment.⁸

Some of the Minnesota Title V abstinence-only-until-marriage sub-grantees provide more comprehensive or progressive services in addition to the *ENABL* program, yet they still accept the Title V grant money. Itasca County Health and Human Services, for example, mentions that it also provides “comprehensive sexuality info... for the older teen.”⁹ Another sub-grantee, Lutheran Social Services of Minnesota, sponsors a youth group for lesbian, gay, bisexual, and transgender teenagers.¹⁰

Title V Evaluation

Minnesota evaluated its Title V abstinence-only-until-marriage program in 2003 and found that *ENABL* had reached 45,500 junior high students. The evaluation involved pre- and post-test surveys with follow-up surveys one year later. While youth did report that the program made them feel more comfortable talking with their parents about sex, the evaluation explains, “there was little impact of the curriculum on youth’s attitudes, sexual intentions, and behaviors after one year.”¹¹ Evaluators also expressed concern about the “ability of the initiative to reach students and families of color.”¹²

The report found that sexual activity among junior high school participants of the *ENABL* program at three schools doubled between 2001 and 2002 and those participants who said they would “probably” have sex during high school almost doubled as well.¹³ The evaluation, which was conducted by Professional Data Analysts and Professional Evaluations Services, concluded that *ENABL*’s weaknesses were the result of the program constraints rather than the way it was implemented. The evaluators recommend that any further intervention be based on a more comprehensive sexuality education approach.¹⁴

The evaluation also found that the majority of parents surveyed by the Minnesota *ENABL* program (77%) wanted their children to learn about both abstinence and contraception. In fact, only 20% of these Minnesota parents wanted abstinence-only-until-marriage programs to be taught to their children. This closely mirrors the findings of numerous national surveys.¹⁵

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Community-Based Abstinence Education (CBAE)¹⁶ and Adolescent Family Life Act (AFLA) Grantees

There are no CBAE or AFLA grantees in Minnesota.

Federal and State Funding for Abstinence-Only-Until-Marriage Programs in FY 2005

Abstinence Only-Until-Marriage Program Grantee Length of Grant	Amount of Grant Money	Type of Grant (includes Title V, CBAE, and AFLA)
Minnesota Department of Health/ ENABL www.saynotyet.com	\$499,000 federal \$366,467 state	Title V
Agape House for Mothers www.agapehouseinc.com	\$31,000	Title V sub-grantee
American Indian Family Center www.aifc.net	\$31,000	Title V sub-grantee
Association for the Advancement of Hmong Women in Minnesota www.aahwm.org	\$31,000	Title V sub-grantee
Cass County/ Leech Lake Reservation Children's Initiative	\$31,000	Title V sub-grantee
Catholic Charities of St. Paul and Minneapolis www.ccsppm.org	\$31,000	Title V sub-grantee
Cottonwood-Jackson County Community Health Services	\$31,000	Title V sub-grantee

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Abstinence Only-Until-Marriage Program Grantee Length of Grant	Amount of Grant Money	Type of Grant (includes Title V, CBAE, and AFLA)
Crookston Public Schools Independent School District #593 www.crookston.k12.mn.us	\$31,000	Title V sub-grantee
Freshwater Education District www.fed.k12.mn.us	\$31,000	Title V sub-grantee
Independent School District #840/St. James (Watonwan County)	\$31,000	Title V sub-grantee
Itasca County Health & Human Services www.co.itasca.mn.us/HHS/index_old.htm	\$31,000	Title V sub-grantee
Kanabec/Pine Community Health Services	\$31,000	Title V sub-grantee
Koochiching County Health Department www.co.koochiching.mn.us/dept/county_health/cohealth_main.htm	\$31,000	Title V sub-grantee
Lao Family Community www.laofamily.org	\$31,000	Title V sub-grantee
Lutheran Social Service www.lssmn.org	\$31,000	Title V sub-grantee
Mid-State Community Health Services	\$31,000	Title V sub-grantee

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Abstinence Only-Until-Marriage Program Grantee Length of Grant	Amount of Grant Money	Type of Grant (includes Title V, CBAE, and AFLA)
Minneapolis Urban League www.mul.org	\$31,000	Title V sub-grantee
Parenting Resource Center www.parentonline.org	\$31,000	Title V sub-grantee
Project SIGHT	\$31,000	Title V sub-grantee
St. Paul Urban League	\$31,000	Title V sub-grantee
University of Minnesota Extension Service – Crow Wing County www.extension.umn.edu/ county/template/index.aspx? countyID=18	\$31,000	Title V sub-grantee
Wadena County Public Health www.health.state.mn.us/divs/ chs/wadena.html	\$31,000	Title V sub-grantee
Youth Values for Life Abstinence Program	\$31,000	Title V sub-grantee

Title V Abstinence-Only-Until-Marriage Coordinator

Jill Briggs
Minnesota Department of Health
85 East Seventh Pl.
PO Box 64882
St. Paul, MN 55164
Phone: (651) 281-9781

Minnesota Organizations that Support Comprehensive Sexuality Education

Minnesota AIDS Project
1400 Park Ave. South
Minneapolis, MN 55404
Phone: (612) 341-2060
www.mnaidsproject.org

Minnesota Organization on Adolescent
Pregnancy, Prevention and Parenting
(MOAPPP)
1619 Dayton Ave., Suite 111
St. Paul, MN 55104
Phone: (651) 644-1447
www.moappp.org

Minnesota Religious Coalition for
Reproductive Choice
122 W. Franklin Ave., Suite 303
Minneapolis, MN 55404
Phone: (612) 870-0974
www.mnrcrc.org

NARAL Pro-Choice Minnesota
550 Rice Street
Saint Paul, MN 55103
Phone: (651) 602-7655
www.mnnaral.org

The National Teen Pregnancy Prevention
Research Center
Division of General Pediatrics and Adolescent
Health
McNamara Alumni Center
University Gateway Building
200 Oak St. SE, Suite 260
Minneapolis, MN 55455
Phone: (612) 626-2820
www.allaboutkids.umn.edu/cfahad/index.htm

Outfront MN
310 38th St. East #204
Minneapolis, MN 55409
Phone: (612) 822-0127
www.outfront.org

Planned Parenthood of Minnesota, North
Dakota, and South Dakota
1965 Ford Pkwy.
St. Paul, MN 55116
Phone: (651) 698-2401
www.ppmsd.org

Minnesota Organizations that Oppose Comprehensive Sexuality Education

Center of the American Experiment
1024 Plymouth Building
12 South 6th St.
Minneapolis, MN 55402
Phone: (612) 338-3605
www.amexp.org

Minnesota Citizens Concerned for Life
4249 Nicollet Ave.
Minneapolis, MN 55409
Phone: (612) 825-6831
www.mccl-inc.org

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Minnesota Family Council
2855 Anthony Lane South
Minneapolis, MN 55418
Phone: (612) 789-8811
www.mfc.org

Newspapers in Minnesota

The Brainerd Daily Dispatch

Nancy Vogt
Health & Medicine Editor
506 James St.
Brainerd, MN 56401
Phone: (218) 829-4705

City Pages

Education Editor
401 N. 3rd St.
Minneapolis, MN 55401
Phone: (612) 375-1015

Daily Globe

Beth Rickers
Medical/Health Editor
300 11th St.
Worthington, MN 56187
Phone: (507) 376-9711

Daily Globe

Doug Wolter
Education Editor
300 11th St.
Worthington, MN 56187
Phone: (507) 376-9711

Duluth News-Tribune

Holly Gruber
Community News Editor
424 W. 1st St.
Duluth, MN 55802
Phone: (218) 720-4106

Duluth News-Tribune

Jake Weyer
Education Reporter
424 W. 1st St.
Duluth, MN 55802
Phone: (218) 723-5342

The Free Press

Brian Ojanpa
Community News Reporter
418 S. 2nd St.
Mankato, MN 56001
Phone: (507) 344-6316

The Free Press

Kathy Vos
Health & Medicine Editor
418 S. 2nd St.
Mankato, MN 56001
Phone: (507) 344-6357

The Mesabi Daily News

Jesse White
Community News Reporter
704 S. 7th Ave.
Virginia, MN 55792
Phone: (218) 741-5544

The Mesabi Daily News

Linda Tyssen Williams
Health & Medicine Editor
704 S. 7th Ave.
Virginia, MN 55792
Phone: (218) 741-5544

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Post-Bulletin
Edie Grossfield
Education Reporter
18 1st Ave. SE
Rochester, MN 55904
Phone: (507) 285-7635

St. Cloud Times
Rene Kaluza
Education Editor
3000 7th St. N
Saint Cloud, MN 56303
Phone: (320) 255-8761

St. Paul Pioneer Press
Susan Campbell
Health & Medicine Editor
345 Cedar St.
St. Paul, MN 55101
Phone: (651) 228-5326

St. Paul Pioneer Press
Maria Douglas Reeve
Education Editor
345 Cedar St.
St. Paul, MN 55101
Phone: (651) 228-5562

Star Tribune
Steve Brandt
Education Reporter
425 Portland Ave.
Minneapolis, MN 55488
Phone: (612) 673-4438

Star Tribune
Greg Gordon
Politics Reporter
420 National Press Bldg.
Washington, DC 20045
Phone: (202) 383-0005

Post-Bulletin
Dawn Schuett
Community News Reporter
18 1st Ave. SE
Rochester, MN 55904
Phone: (507) 281-7487

St. Cloud Times
Kate Kompas
Medical/Health Writer
3000 7th St. N
Saint Cloud, MN 56303
Phone: (320) 255-8745

St. Paul Pioneer Press
Tom Majeski
Health & Medicine Reporter
345 Cedar St.
St. Paul, MN 55101
Phone: (651) 228-5583

Star Tribune
Maria Baca
Family & Parenting Reporter
425 Portland Ave.
Minneapolis, MN 55488
Phone: (612) 673-4409

Star Tribune
H.J. Cummins
Family & Parenting Reporter
425 Portland Ave.
Minneapolis, MN 55488
Phone: (612) 673-4671

Star Tribune
Maura Lerner
Health & Medicine Reporter
425 Portland Ave.
Minneapolis, MN 55488
Phone: (612) 673-7384

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Star Tribune

David Shaffer
Health & Medicine Team Leader
425 Portland Ave.
Minneapolis, MN 55488
Phone: (612) 673-7090

West Central Tribune

Anne Polta
Medical/Health Reporter
2208 Trott Ave. SW
Willmar, MN 56201
Phone: (320) 235-1150

West Central Tribune

Linda Vanderwerf
Education Reporter
2208 Trott Ave. SW
Willmar, MN 56201
Phone: (320) 235-1150

¹ This refers to the fiscal year for the Federal Government, which begins on October 1 and ends on September 30. The fiscal year is designated by the calendar year in which it ends; for example, Fiscal Year 2005 begins on October 1, 2004 and ends on September 30, 2005.

² *U.S. Teenage Pregnancy Statistics: Overall Trends, Trends by Race and Ethnicity and State-by-State Information* (New York: Guttmacher Institute, February 2004), accessed 28 January 2005, <http://www.guttmacher.org/pubs/state_pregnancy_trends.pdf>.

³ *Induced Abortions in Minnesota, January–December 2003: Report to the Legislature* (St. Paul, MN: Minnesota Department of Health, Center for Health Statistics, July 2004), Table 4, accessed 8 February 2005, <<http://www.health.state.mn.us/divs/chs/abrpt/2003abrpt.pdf>>.

⁴ *National Vital Statistics Reports 52.10* (Hyattsville, MD: National Center for Health Statistics, 2003), 48, accessed 4 February 2005, <<http://www.cdc.gov/nchs/births.htm#stat%20tables>>.

⁵ *2002 Minnesota Sexually Transmitted Disease Statistics* (St. Paul, MN: Minnesota Department of Health, STD and HIV Section), Table 2, accessed 3 February 2005, <<http://www.health.state.mn.us/divs/idepc/dtopics/stds/stdreport2002.pdf>>; *Sexually Transmitted Disease Surveillance, 2002* (Atlanta, GA: Centers for Disease Control and Prevention, September 2003), 51-57, accessed 3 February 2004, <<http://www.cdc.gov/std/stats/toc2002.htm>>.

⁶ *HIV/AIDS Prevalence and Mortality Tables*, Minnesota Department of Health (2004), Table 1, accessed 3 February 2005, <<http://www.health.state.mn.us/divs/idepc/diseases/hiv/pmtables.html#table1>>.

⁷ Patricia Sulak, *Worth the Wait* (Temple, TX: Scott & White Memorial Hospital, 2003). For more information, see SIECUS' review of *Worth the Wait* at <http://www.communityactionkit.org/curricula_reviews.html>.

⁸ *Fast Facts*, Minnesota Education Now and Babies Later (2003), accessed 17 November 2005, <<http://www.saynotyet.com/fastfacts.htm>>.

⁹ Kate Lavalier, *Teen Pregnancy Prevention*, Itasca County Health and Human Services Itasca Resource Center (20 September 2004), accessed 17 November 2005, <<http://www.co.itasca.mn.us/HHS/health/teenpreg.htm>>.

¹⁰ *Together For Youth*, Lutheran Social Services of Minnesota (2004), accessed 17 November 2005, <http://www.lssmn.org/together_for_youth.htm>.

¹¹ Professional Data Analysts and Professional Evaluation Services, *Minnesota Education Now and Babies Later: Evaluation Report 1998-2002* (St. Paul, MN: Minnesota Dept. of Health, Division of Family Health, Maternal and Child Health Section, 2003).

¹² *Ibid.*, 10.

¹³ *Minnesota Education Now and Babies Later (MN ENABL), Evaluation Report 1998-2002* (St. Paul, MN: Minnesota Department of Health, Division of Family Health, Maternal and Child Health Section), accessed 28 January 2005, <<http://saynotyet.com/report.htm>>.

¹⁴ *Ibid.*

¹⁵ *Fact Sheet: Public Support for Comprehensive Sexuality Education* (Washington, D.C.: SIECUS, 2005), accessed 8 February 2005, <http://www.siecus.org/policy/public_support.pdf>.

¹⁶ In Fiscal Year 2004 SPRANS–CBAE was administered within the U.S. Department of Health and Human Services (HHS) by the Maternal and Child Health Bureau. In Fiscal Year 2005 this funding stream was moved to HHS' Administration for Children and Families and is now referred to simply as Community-Based Abstinence Education (CBAE).