

SIECUS PUBLIC POLICY OFFICE

STATE PROFILE

WISCONSIN

Wisconsin received \$4,080,399 in federal funding for abstinence-only-until-marriage programs in Fiscal Year 2005.

Wisconsin Sexuality Education Law and Policy

Wisconsin state law encourages, but does not require, school boards to provide classes in sexuality education. However, Wisconsin statute does identify educational goals and expectations; one of these goals is personal development. The statute states that school boards shall provide a program to discuss the human body and how to maintain lifelong health. It adds that this should include instruction in sexually transmitted diseases (STDs) and be offered in high schools. According to Wisconsin statute, this instruction may include:

- > Self-esteem, responsible decision-making, and personal responsibility;
- > Interpersonal relationships;
- > Discouragement of adolescent sexual activity;
- > Family life and skills required of a parent;
- > Human sexuality; reproduction; family planning, as defined in [state law] s.243.07, including natural family planning; human immunodeficiency virus and acquired immunodeficiency syndrome; prenatal development; childbirth; adoption; available prenatal and postnatal support; and male and female responsibility.
- > Sex stereotypes and protective behavior.

These classes can occur in kindergarten through twelfth grade and must be age-appropriate. If a school board provides instruction in any of these areas, they must "also provide instruction in marriage and parental responsibility."

The Department of Public Instruction (DPI) is authorized to develop a health education program that includes STDs and AIDS. DPI also has the authority to develop health curriculum guidelines, but is prohibited from requiring local school boards to use a specific curriculum.

Parents and guardians must be given the opportunity to review all materials related to sexuality education classes. If such classes are offered, school boards must also form advisory councils consisting of "parents, teachers, school administrators, pupils, health care professionals, members of the clergy, and other residents of the school district" to review the sexuality education curricula at least every three years.

Parents or guardians can remove their children from sexuality education classes with a written note to the teacher or principal. This is referred to as an "opt-out" policy.

See Wisconsin Statutes 115.35 and 118.019.

Recent Legislation

Bill Has Multiple Focuses Including Sexuality Education and Abstinence-Only Programs Introduced in October 2005 and referred to the Assembly Committee on Health, Assembly Bill 795 requires that rape survivors be able to access emergency contraception in emergency rooms; requires pharmacists to dispense emergency contraception, and fines them if they do not; and requires schools to notify parents and guardians if they do not offer "human growth and development instruction" and/or if they receive federal funding for abstinence-only programs.

Notification about abstinence-only programs must state that abstinence-only programs teach no other methods of pregnancy or STD prevention. The notice must also state that students may be excused from these classes without penalty.

Events of Note

Wisconsin Rules against Objecting Pharmacists February 2005; WI

Wisconsin Administrative Law Judge Collen M. Baird ruled that a pharmacist who refused to fill or transfer a college student's prescription for birth control "fell far short of satisfying the standard of care" required of pharmacists based on the pharmacists' code of ethics. She continued by stating that the pharmacist did not do enough to guarantee that the woman had another way to fill her prescription and recommended that his pharmaceutical license be restricted for at least two years. The judge explicitly stated that the pharmacist's testimony "gave the distinct impression that satisfying his own moral code was his only concern."²

Pharmacists sometimes cite refusal clauses as justification for their decision not to fill prescription for birth control or emergency contraception based on their own moral beliefs. Refusal clauses, called "conscience clauses" by anti-choice groups, debuted in 1973 following the landmark Supreme Court decision of *Roe v. Wade*, which legalized a woman's right to access an abortion. Adopted by the federal government and most U.S. states, refusal clause legislation was intended to allow doctors to refuse to perform abortions. This legislation, however, does not usually apply to pharmacists, as pharmacists do not generally participate in abortion procedures.

During the 2004 legislative session, however, 13 states introduced legislation that would allow pharmacists to refuse to fill prescriptions for oral contraception. Arkansas, Mississippi, and South Dakota already have similar laws on their books. This type of legislation is criticized by both medical professionals and sexual and reproductive health advocates for permitting a pharmacist to interfere with the patient/physician relationship. A recent article in the *New England Journal of Medicine (NEJM)* stated that such laws frequently fail to address the "potential for abuse by pharmacists."

Wisconsin's Youth: Statistical Information of Note⁴

➤ In 2005, 40% of female high school students and 40% of male high school students in Wisconsin reported ever having had sexual intercourse compared to 46% of female high school students and 48% of male high school students nationwide.

- ➤ In 2005, 3% of female high school students and 5% of male high school students in Wisconsin reported having had sexual intercourse before age 13 compared to 4% of female high school students and 9% of male high school students nationwide.
- ➤ In 2005, 10% of female high school students and 11% of male high school students in Wisconsin reported having had four or more lifetime sexual partners compared to 12% of female high school students and 17% of male high school students nationwide.
- ➤ In 2005, 32% of female high school students and 27% of male high school students in Wisconsin reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey) compared to 35% of female high school students and 33% of male high school students nationwide.
- ➤ In 2005, among those high school students who reported being currently sexually active, 62% of females and 69% of males in Wisconsin reported having used condoms the last time they had sexual intercourse compared to 56% of females and 70% of males nationwide.
- ➤ In 2005, among those high school students who reported being currently sexually active, 26% of females and 20% of males in Wisconsin reported having used birth control pills the last time they had sexual intercourse compared to 21% of females and 15% of males nationwide.
- ➤ In 2005, among those high school students who reported being currently sexually active, 19% of females and 28% of males in Wisconsin reported having used alcohol or drugs the last time they had sexual intercourse compared to 19% of females and 28% of males nationwide.
- ➤ In 2000, Wisconsin's abortion rate was 12 per 1,000 women ages 15–19 compared to a teen abortion rate of 24 per 1,000 nationwide.⁵
- ➤ In 2002, Wisconsin's birth rate was 32 per 1000 women ages 15–19 compared to a teen birth rate of 43 per 1,000 nationwide.

Milwaukee, Wisconsin

- ➤ In 2005, 53% of female high school students and 66% of male high school students in Milwaukee, Wisconsin reported ever having had sexual intercourse compared to 46% of female high school students and 48% of male high school students nationwide.
- ➤ In 2005, 6% of female high school students and 19% of male high school students in Milwaukee, Wisconsin reported having had sexual intercourse before age 13 compared to 4% of female high school students and 9% of male high school students nationwide.

- ➤ In 2005, 15% of female high school students and 31% of male high school students in Milwaukee, Wisconsin reported having had four or more lifetime sexual partners compared to 12% of female high school students and 17% of male high school students nationwide.
- In 2005, 41% of female high school students and 46% of male high school students in Milwaukee, Wisconsin reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey) compared to 35% of female high school students and 33% of male high school students nationwide.
- ➤ In 2005, among those high school students who reported being currently sexually active, 59% of females and 77% of males in Milwaukee, Wisconsin reported having used condoms the last time they had sexual intercourse compared to 56% of females and 70% of males nationwide.
- ➤ In 2005, among those high school students who reported being currently sexually active, 9% of females and 11% of males in Milwaukee, Wisconsin reported having used birth control pills the last time they had sexual intercourse compared to 21% of females and 15% of males nationwide.
- ➤ In 2005, among those high school students who reported being currently sexually active, 10% of females and 19% of males in Milwaukee, Wisconsin reported having used alcohol or drugs the last time they had sexual intercourse compared to 19% of females and 28% of males nationwide.

Title V Abstinence-Only-Until-Marriage Funding

Wisconsin received \$602,958 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. Wisconsin provides the match in-kind using tobacco control funds.

The Wisconsin Department of Health and Family Services (DHFS), Division of Children and Family Services (DCFS), and the Bureau of Community and Family Development (BCFD) coordinate the Wisconsin Abstinence Education Project (WAEP) and distribute funds to six subgrantees: AIDS Resource Center of WI, The Center for Self-Sufficiency, Children's Service Society of WI, Family Resource Center, Rosalie Manor Community and Family Services, and Wise Women Gathering Place.

Rosalie Manor Community and Family Services, an over 95-year-old non-profit, social services agency, started a program called Families United to Prevent Teen Pregnancy (FUPTP), which serves young people ages 12–18 through after school programs in six area schools and through a community-based program during the summer. Approximately 3,000 students also receive classroom presentations on curriculum topics through the program.⁷

Wise Women Gathering Place (WWGP) provides resources for communities regarding the birth process, health, and relationship development. It coordinates the Community-Based Abstinence Culture Project (C-BAC) in collaboration with the Oneida Nation Elementary School (ONES) and the Menominee Tribal School (MTS). The ultimate goal of the C-BAC Project is to

"reduce the incidence of premarital sex among teens while promoting a supporting culture of abstinence."8

Community-Based Abstinence Education (CBAE)⁹ and Adolescent Family Life Act (AFLA) Grantees

There are four CBAE grantees in Wisconsin: AIDS Resource Center of Wisconsin, Center for Self-Sufficiency, Opportunities Industrialization Center of Greater Milwaukee, and Rosalie Manor Community and Family Services. There are two AFLA grantees in Wisconsin: Red Cliff Band of Lake Superior Chippewa Indians and the Wise Women Gathering Place.

Rosalie Manor uses curricula and programs from the Best Friends Foundation, a Washington DC-based abstinence-only-until-marriage organization. For more information on Rosalie Manor, see the Title V section.

Wise Women Gathering Place also works with a variety of populations including lesbians, bisexual women, immigrants, and HIV-positive women. It uses its AFLA funds for "Discovery Dating," a program for eighth grade girls that focuses on assertiveness training, decision-making choices, and mentoring. For more information on Wise Women Gathering Place, see the Title V section

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

Abstinence-Only-Until- Marriage Grantee	Amount of Grant	Type of Grant (includes Title V, CBAE, and AFLA)
Length of Grant		,
Wisconsin Abstinence	\$602,958 federal	Title V
Education Project	\$452,219 state	
http://dhfs.wisconsin.gov		
AIDS Resource Center of	\$211,819	Title V sub-grantee
Wisconsin		
DUAL GRANTEE	\$733,542	СВАЕ
2005–2008		
www.arcw.org		
Center for Self-Sufficiency	\$37,300	Title V sub-grantee
DUAL GRANTEE	\$799,500	СВАЕ
2005–2008		

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Abstinence-Only-Until- Marriage Grantee	Amount of Grant	Type of Grant (includes Title V, CBAE, and AFLA)
Length of Grant		,
Children's Service Society of	\$458,000	Title V sub-grantee
Wisconsin		
www.cssw.org		
Family Resource Center	\$31,000	Title V sub-grantee
www.frc-sc.org		
Rosalie Manor Community and Family Services	\$47,300	Title V sub-grantee
DUAL GRANTEE	\$798,000	СВАЕ
2004–2007		
www.rosaliemanor.org		
Wise Women Gathering Place	\$54,800	Title V sub-grantee
DUAL GRANTEE	\$225,000	AFLA
2005–2006		
www.wisewomengp.org		
Opportunities Industrialization Center of Greater Milwaukee	\$769,399	CBAE
2003–2006		
Red Cliff Band of Lake Superior Chippewa Indians	\$152,000	AFLA
2005–2006		

Title V Abstinence-Only-Until-Marriage Coordinator

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Madison, WI 53708

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Wisconsin Organizations that Support Comprehensive Sexuality Education

ACLU of Wisconsin

207 E. Buffalo St., Suite 325

Milwaukee, WI 53202

Phone: (414) 272-4032

www.aclu-wi.org

Action Wisconsin

122 State St., Suite 309

Madison, WI 53703

Phone: (608) 441-0143

www.actionwisconsin.org

NARAL Pro-Choice Wisconsin Planned Parenthood Advocates of

122 State St., Suite 201 Wisconsin

 Madison, WI 53703
 302 N. Jackson St.

 Phone: (608) 287-0016
 Milwaukee, WI 53202

 www.naralwi.org
 Phone: (414) 271-8045

www.plannedparenthoodwi.org

Wisconsin Organizations that Oppose Comprehensive Sexuality Education

Family Research Institute of Wisconsin
PO Box 2075
Pro-Life Wisconsin
19270 North Hills Dr.

Madison, WI 53701 PO Box 221

Phone: (608) 256-3228

www.fri-wi.org

Brookfield, WI 53045

Phone: (262) 796-1111

www.prolifewisconsin.org

Newspapers in Wisconsin

The Capital Times

Judy Ettenhofer

The Capital Times

John Nichols

Editorial Page Writer
PO Box 8060
Madison, WI 53708
Editorial Page Editor
1901 Fish Hatchery Rd.
Madison, WI 53713

Phone: (608) 252-6463 Phone: (608) 252-6482

Green Bay Press-Gazette Green Bay Press-Gazette

Terry Anderson Kelly McBride
Community News Reporter Education Reporter
435 E. Walnut St. 435 E. Walnut St.

Green Bay, WI 54301 Green Bay, WI 54301 Phone: (920) 431-8214 Phone: (920) 431-8380

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The Janesville Gazette
Tracy Ndlovu
Medical/Health Editor
1 S. Parker Dr.

Janesville, WI 53545

Phone: (608) 754-3311

The Journal Times

Lee Roberts

Medical/Health Reporter

212 4th St.

Racine, WI 53403 Phone: (262) 631-1721

La Crosse Tribune

Sue Webb

Community News Editor

401 3rd St. N

La Crosse, WI 54601 Phone: (608) 791-8234

Milwaukee Journal Sentinel

Jamaal Abdul-Alim Education Reporter 333 W. State St. Milwaukee, WI 53203

Phone: (414) 224-2275

Milwaukee Journal Sentinel

Kawanza Griffin

Health & Medicine Reporter

PO Box 661

Milwaukee, WI 53201 Phone: (414) 223-5241

Oshkosh Northwestern

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224 State St.

Oshkosh, WI 54901 Phone: (920) 426-6671

The Post-Crescent

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The Journal Times
Brent Killackey

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212 4th St.

Racine, WI 53403 Phone: (262) 631-1717

Kenosha News

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5800 7th Ave.

Kenosha, WI 53140 Phone: (262) 656-6289

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Wisconsin State Journal

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- 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 Stacy Forster, "Reprimand Advised for Pharmacist Beliefs, Duties clash; He Refused to Fill Birth Control Oder," *Milwaukee Journal-Sentinel*, 28 February 2005, accessed 4 March 2005, http://www.jsonline.com/news/state/feb05/305752.asp.
- ³ Julie Cantor and Ken Baum, "The Limits of Conscientious Objection May Pharmacists Refuse to Fill Prescriptions for Emergency Contraception?" *New England Journal of Medicine* 351.19 (4 November 2004): 2010.
- ⁴ Unless otherwise cited, all statistical information comes from: Danice K. Eaton, et. al., "Youth Risk Behavior Surveillance—United States, 2005," *Surveillance Summaries, Morbidity and Mortality Weekly Report*, vol. 55, no. SS-5 (9 June 2006): 1-108, accessed 8 June 2006, http://www.cdc.gov/HealthyYouth/yrbs/index.htm.
- ⁵ 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. ⁶ 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>.

- ⁷ Families United to Prevent Teen Pregnancy, Rosalie Manor Community and Family Services, accessed 9 November 2005, http://www.rosaliemanor.org/families_united.html>.
- ⁸ C-BAC Program, Wise Women Gathering Place, accessed 9 November 2005, http://www.wisewomengp.org/pages/cbac.html>.
- ⁹ 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).