



MICHIGAN

Michigan received \$4,457,510 in federal funds for abstinence-only-until-marriage programs in Fiscal Year 2006.¹

Michigan Sexuality Education Law and Policy

Michigan does not require schools to teach sexuality education; however, the state does require schools to provide sexually transmitted disease (STD) and HIV/AIDS education. STD/HIV education must include “the teaching of abstinence from sex as a responsible method for restriction and prevention of these diseases and as a positive lifestyle for unmarried young people.”

Schools may also offer sexuality education classes, which cover family planning, human sexuality, and family life education. As with STD/HIV education, abstinence must be included as “a responsible method of preventing unwanted pregnancy and sexually transmitted disease and as a positive lifestyle for unmarried young people.” Sexuality education classes must be offered as an elective and may not be required for graduation.

All sexuality education and HIV/AIDS classes must be taught by teachers qualified to teach health education. All teachers of STD/HIV education who are not licensed healthcare professionals must be trained in HIV/AIDS education by the Department of Education.

School boards must establish an advisory board to review all materials and curricula. This advisory board must include parents, students, educators, clergy, and health professionals. Each school district must also appoint a sexuality education program supervisor; this person must be approved by the state.

The law further states that all instruction in reproductive health “shall be supervised by a registered physician, a registered nurse, or other person certified by the state board as qualified.” Reproductive health is defined as “the state of an individual’s well-being which involves the reproductive system and its physiological, psychological, and endocrinological functions.” Abortion “shall not be considered a method of family planning, nor shall abortion be taught as a method of reproductive health.” Further, no school official or school board member may dispense any family planning drug or device in school, nor may they make abortion referrals. Districts found in violation of this may face corrective actions, such as being forced to forfeit aid. All curricula must be approved by the local school board and if any changes are made, the local school board must hold at least two public hearings on the revisions.

Most Michigan public schools also follow guidelines from the *Michigan Model for Health*, formerly the *Michigan Model for Comprehensive School Health Education*, which promotes nationally recognized and research-based curricula, including new curricula in HIV/AIDS prevention. In addition, the Michigan Board of Education has adopted the *Policy to Promote Health and Prevent Disease and Pregnancy* which states that sexuality education programs must be age-appropriate, developmentally and culturally appropriate, medically accurate, and based on effective programming.

Parents must receive notification of any sexuality education class and be allowed to review its content. Parents or guardians may remove their children from any part of the STD/HIV instruction if it conflicts with their religious beliefs. This is referred to as an “opt-out” policy.

See Michigan School Code Sections 380.1169, 380.1170, 380.1506, 380.1507, 388.1766, 388.1766a, *Michigan Model for Health*, and Michigan Public Law 165 and 166.

Recent Legislation

SIECUS is not aware of any proposed legislation regarding sexuality education in Michigan.

Events of Note

Debate over Gay-Straight Alliance

November 2006; Okemos, MI

A Gay-Straight Alliance group in Okemos High School has drawn both opposition from parents who believe the group promotes homosexuality and support from parents who believe diversity and tolerance are necessary in Okemos.

A group of parents opposed to the club sent emails to other parents in the district claiming that the GSA promotes an unacceptable lifestyle and urging action against the club. One parent said, “We view this as an undermined attempt to mainstream the homosexual agenda in our public schools.”²

The superintendent said any club is allowed to exist in Okemos School District unless it promotes violence or discrimination. He added that the school district cannot “say no to this club and yes to that one.”³

Forest Hills School Board Refuses to Ban Gay-Straight Alliance

July 2006; Grand Rapids Township, MI

Forest Hills School Board officials refused to ban a Gay-Straight Alliance despite hearing from several parents who objected to the club’s “sexual nature” and “sexual influence.” School officials cited federal law requiring equal access for after-hours student groups, including chess clubs, Bible study groups, and GSAs.

The parents argued that the school district has the authority to ban student groups that promote risky behavior. The Director of American Family Association of Michigan stated, “This issue is an opportunity for concerned parents to educate themselves, their students, their children, and also the public at large about the health hazards, the public health consequences, of homosexual behavior.”⁴ GSA members, however, explained that their club promotes tolerance, not homosexuality.

An attorney for the school district, which has already spent more than \$12,000 in legal fees responding to the parents’ complaints, explained, “If GSA is prohibited, then all student clubs would have to be banned.”⁵

Howell Changes Sexuality Education

June 2006; Livingston County, MI

The Howell Public Schools Board of Education voted to change the sexuality education curriculum for middle and high school grades. The board adapted the curriculum after a majority of parents who responded to a district-wide health education survey said that they wanted their children to learn about risk reduction, contraception, and disease prevention before high school.

School district officials were pleasantly surprised by the number of Howell parents who responded to the web-based *Reproductive Health Survey*, which was developed by the Michigan Department of Education and adapted for Howell School District. The multiple-choice survey asked parents whether certain topics should be taught in grades K–three, four–five, six–eight, nine–twelve,

or not at all. Topics covered on the survey included reproductive anatomy, contraception, communication with family and friends, relationships, STDs, pregnancy and childbirth, sexual assault, sexual orientation, and decision-making.

Almost 250 of 600 responding parents said they wanted contraceptive methods, including abstinence, condoms, and birth control pills and shots, taught in sixth through eighth grades, as opposed to 189 parents who thought contraception belonged in high school sexuality education and 112 who said it should not be taught in schools at all. The school board president said of the survey, “It was easy to do, easy to find. I’m kind of surprised we didn’t get more ‘nevers’ than we did.”⁶

Previously, sexuality and health education was taught at the high school level. Under the new curriculum, seventh graders will now receive pamphlets describing how to use condoms to effectively prevent the spread of sexually transmitted diseases. The new curriculum will stress abstinence, in accordance with state policy, and will be implemented in the 2006–07 school year.

*New Sexuality Education Curriculum to Meet South Redford’s Community Needs
January 2006; South Redford, MI*

The South Redford School District is reviewing a new sexuality education curriculum that would stress abstinence but include medically accurate STD information. The new curriculum would also include parental involvement, and address both personal responsibility and self-discipline with a variety of teaching methods.

The new curriculum was developed by a committee of parents, educators, students, community members, clergy, and healthcare professionals in response to community needs and state standards. According to the committee, 61.2 percent of twelfth graders in Michigan have engaged in sexual intercourse. In order to address community standards, the committee surveyed 2,100 parents and eleventh grade students in South Redford School District to find out what topics the new curriculum should cover, and at what age each topic should be addressed.

Community members were invited to review the materials before a school board hearing and vote on the curriculum.

The district spokeswoman says of the new curriculum, “It meets the needs of the student population, was consistent with community standards, consistent with state law, consistent with research and best practices.”⁷

*Condom Demonstrations Approved for Michigan Town’s Sexuality Education
June 2005; Goodrich, MI*

In late June 2005, the board of education in Goodrich, MI, approved new sexuality education curriculum recommendations in a 6–1 decision. Included in the new program for eighth and ninth graders will be an in-class demonstration of proper condom use by the teacher. Parents will be able to remove their children from the class entirely, or just for the few days that will include the condom demonstration.

Several parents at the board meeting protested the revisions. The senior pastor of Victory World Outreach Center, a local church, expressed his opposition saying, “We are here to oppose condom demonstration, not information. . . . Demonstrations of how to put on a condom to 12- and 13-year-olds contradict the message of abstinence. The curriculum contradicts itself, saying you should not have sex, but. . .let us show you how.”

However, many community members supported the revisions. The minister at Goodrich United Methodist Church said, “The introduction of condom demonstrations. . .is something that students who are making decisions need to have presented to them.” Many students supported the decision as well; one 17-year-old junior who served as a student representative to the board explained, “I know parents think they know [what’s going on]. . .Kids are going to do what they want to do. The demonstration would be better than having them ruin their life.”⁸

*Battle Creek Adopts a More Comprehensive Program**March 2004; Battle Creek, MI*

Almost all Battle Creek High School freshmen will now take a new health class that will discuss preventing teen pregnancy and sexually transmitted diseases. The Battle Creek Board of Education first approved a revised sexuality education curriculum in February 2004 that was to be included in a freshman fitness class and two high school electives, but decided in March to make the health lessons into a new class for freshmen.

The school board decided to create the new nine-week health class and to include a human sexuality curriculum package that discusses contraception and abstinence. A local middle-school health teacher explained the change, saying that “the personal fitness class can only accommodate so many lessons on HIV, STDs, and human sexuality. Because the school district has felt so strongly that we offer more information to students, it really required us to look at a different avenue.”⁹

The changes were first initiated because of concerns that many community residents had about the city’s high teen birth rate, which is double the state average.¹⁰ An advisory committee suggested that the new lessons would teach students about avoiding risks associated with sex, including lessons on the use of contraception. The advisory committee also suggested that the school change the rules regarding the existing seventh-grade program and adopt an “opt-out” rather than an “opt-in” policy, so that all students will be automatically enrolled unless their parents choose to take them out of the class.

The board agreed to this change as well. Opt-out policies allow children to be removed from sexuality education upon the request of a parent. Such policies typically provide notification to parents about what will be taught in their child’s sexuality education program, including what curricula will be used and who will be teaching the class. Students are automatically enrolled in class unless parents request otherwise. Opt-out systems ensure that parents are informed about their child’s sexuality education classes and a system is in place to allow them to remove their child from the class without penalty to the young person. The overwhelming majority of states have opt-out policies. Under an opt-in policy, schools need permission from a parent before their child can attend the class.

The president of the school board remarked on the curricula changes, saying, “It’s pretty groundbreaking. This is the first time the curriculum has been modified to the extent that pregnancy prevention is included. What we’re attempting to do is join in the community-wide effort to reduce teenage pregnancy as well as sexually transmitted diseases.”¹¹

Some school officials hope to make the new class a graduation requirement in the future. One school board member said, “I think this is one of those that’s too important to let kids get out of.”¹²

Michigan’s Youth: Statistical Information of Note¹³

- In 2005, 41% of female high school students and 43% of male high school students in Michigan reported ever having had sexual intercourse compared to 46% of female high school students and 48% of male high school students nationwide.
- In 2005, 4% of female high school students and 9% of male high school students in Michigan reported having had sexual intercourse before age 13 compared to 4% of female high school students and 9% of male high school students nationwide.

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- In 2005, 10% of female high school students and 14% of male high school students in Michigan 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, 31% of female high school students and 28% of male high school students in Michigan 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, 60% of females and 64% of males in Michigan 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, 23% of females and 14% of males in Michigan 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 26% of males in Michigan reported having used alcohol or drugs the last time they had sexual intercourse compared to 19% of females and 28% of males nationwide.
- In 2005, 90% of high school students in Michigan reported having been taught about AIDS/HIV in school compared to 88% of high school students nationwide.
- In 2000, Michigan's abortion rate was 24 per 1,000 women ages 15–19 compared to a teen abortion rate of 24 per 1,000 nationwide.¹⁴
- In 2004, Michigan's birth rate was 34 per 1,000 women ages 15–19 compared to a teen birth rate of 41 per 1,000 nationwide.¹⁵

Detroit, Michigan

- In 2005, 44% of female high school students and 68% of male high school students in Detroit, Michigan reported ever having had sexual intercourse compared to 46% of female high school students and 48% of male high school students nationwide.
- In 2005, 5% of female high school students and 29% of male high school students in Detroit, Michigan 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, 12% of female high school students and 34% of male high school students in Detroit, Michigan 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, 33% of female high school students and 47% of male high school students in Detroit, Michigan 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 79% of males in Detroit, Michigan 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, 7% of females and 5% of males in Detroit, Michigan 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, 15% of females and 14% of males in Detroit, Michigan reported having used alcohol or drugs the last time they had sexual intercourse compared to 19% of females and 28% of males nationwide.
- In 2005, 86% of high school students in Detroit, Michigan reported having been taught about AIDS/HIV in school compared to 88% of high school students nationwide.

Title V Abstinence-Only-Until-Marriage Funding

Michigan received \$1,417,131 in federal Title V funding for abstinence-only-until-marriage programs in Fiscal Year 2006. 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. Michigan provides matching funds of \$695,000 out of the state's pregnancy-prevention dollars. The remainder of the match is provided by sub-grantees through in-kind services and funds.

The Michigan Abstinence Program (MAP) aims to positively impact adolescent health by promoting abstinence from sexual activity and related risky behaviors such as the use of alcohol, tobacco, and other drugs. MAP offers several posters with abstinence-related messages for purchase by sub-grantees and the community at large.

All MAP grantees are required to conduct pre- and post- program evaluations every year on all youth participating in 14 or more hours of abstinence-only-until-marriage programming. The evaluations measure knowledge, skills, attitudes, and intended behaviors. Results for FY 2006 are not yet available. All funded groups are also required to conduct a youth survey that includes five standard questions for twelve-year-olds and three standard questions for young people ages 9–11. The MAP project reports statistically significant “shifts” based on these surveys, however, the nature of the questions is unknown and it is also unclear whether the questions measured attitudes, intended behavior, or actual behavior.

The Michigan Department of Community Health, through MAP, funds 11 sub-grantees: Alpena-Montmorency-Alcona Educational Service District, Catholic Social Services of Muskegon, District Health Department #10 of Cadillac, Eaton Intermediate School District, Human Aid of Gladwin County, Jackson County, Lakeshore Pregnancy Center, Macomb Family YMCA, St. John Community Health Investment Corp, Tuscola Intermediate School District, and Wedgewood Christian Youth and Family Services. Each local community served by Title V sub-grantees has a youth-focused coalition that provides guidance in the programming and planning of abstinence-only-until-marriage activities for the sub-grantees. These sub-grantees use a variety of curricula including *A.C. Green's Game Plan*, *Removing the Risk*, *SMART Moves*, *Sex Can Wait*, and *Wise Guys*.

SIECUS reviewed *Game Plan* and found that in order to convince high school students to remain abstinent until marriage, the curriculum relies on messages of fear and shame, inaccurate and misleading information, and biased views of marriage, sexual orientation, and family structure. In addition, *Game Plan* fails to provide important information on sexual health including how students can seek testing and treatment if they suspect they have an STD. Finally, the format and underlying biases of the curriculum do not allow for cultural, community, and individual values, and discourage critical thinking and discussions of alternate points of view in the classroom. For example, *Game Plan* states that “even if you’ve been sexually active, it’s never too late to say no. You can’t go back, but you can go forward. You might feel guilty or untrustworthy, but you can start over again.”¹⁶

Human Aid of Gladwin County uses its funding to support the Yes! Coalition. The Yes! Coalition provides abstinence-only-until-marriage programs, called Yes! Clubs, that focus on youth between the ages of 9 and 17 in after-school and summer settings.¹⁷ The Yes! Coalition also provides school-based abstinence-only-until-marriage programming. After a student completes 14 hours of any Yes! Coalition abstinence-only-until-marriage program, he/she participates in a public virginity pledge ceremony in front of parents and loved ones. Research has found that under certain conditions these pledges may help some adolescents delay sexual intercourse. When they work, pledges help this select group of adolescents delay the onset of sexual intercourse for an average of 18 months—far short of marriage. Researchers found that pledges only worked when taken by a small group of students. Pledges taken by a whole class were ineffective. More importantly, the studies also found that those young people who took a pledge were one-third less likely to use contraception when they did become sexually active than their peers who had not pledged. These teens are therefore more vulnerable to the risks of unprotected sexual activity such as unintended pregnancy and STDs, including HIV/AIDS. Further research has confirmed that although some students who take pledges delay intercourse, ultimately they are just as likely to contract an STD as their non-pledging peers. The study also found that the STD rates were higher in communities where a significant proportion (over 20%) of the young people had taken virginity pledges.¹⁸

Lakeshore Pregnancy Center (LPC), a crisis pregnancy center, “is a Christ-centered ministry responding to those in our community experiencing an unplanned pregnancy, emphasizing the eternal value of all human life, and teaching Biblical sexuality.”¹⁹ LPC lists the following statement about contraception as one of its principles: “LPC does not recommend, [sic] provide or refer single women for contraceptives. (Married women seeking contraceptive information should be urged to seek counsel, along with their husbands, from their pastor or physician.)”²⁰

On its website LPC makes many biased and misleading claims about abortion. For example, it states that “emergency contraception is a form of abortion.”²¹ In fact, emergency contraception (EC), also referred to as “the morning-after pill,” is a high dose of regular birth control pills that can reduce a woman’s chance of becoming pregnant by 75 to 89 percent if taken within 72 hours of unprotected intercourse. Many people confuse EC with RU-486 or mifepristone, often called the “abortion pill.” EC is not the same thing and cannot end a pregnancy. EC works by delaying or inhibiting ovulation or inhibiting implantation. If an egg has already implanted in a woman’s uterus, EC will not terminate the pregnancy nor will it harm the developing fetus. In fact, research suggests that the availability of EC has led to a decrease in abortions. According to the Guttmacher Institute, emergency contraceptives accounted for up to 43% of the decrease in total abortions between 1994 and 2000, and an estimated 51,000 abortions were averted by women’s use of emergency contraceptives in 2000 alone.²²

LPC goes on to say that “abortion can cause infertility and breast cancer.”²³ Abortion is a generally safe procedure, and medically sound research has shown that first trimester abortions cause almost no long-term fertility problems.²⁴ In February 2003, the National Cancer Institute convened a group of 100 experts on pregnancy and breast cancer risk who reviewed “existing population-based,

clinical, and animal studies on the relationship between pregnancy and breast cancer risk, including studies of induced and spontaneous abortion” and concluded that induced abortion is not linked to an increase in the risk of breast cancer.²⁵

The website also includes biased information designed to manipulate women rather than inform them. For example, it explains: “Having an abortion may affect more than just your body and your emotions—it may have an impact on your spiritual beliefs.” After this statement, they ask, “How does God see your unborn child?”²⁶

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

There are five CBAE grantees: Bethany Christian Services, New Genesis, Inc., Providence-St. John Health, St. Joseph Health System, and Wedgwood Christian Services. There are two AFLA grantees: Ingham County Health Department and Planned Parenthood of Northern Michigan.

Kalamazoo Community-Based Abstinence Initiative is a program of New Genesis, Inc. The website for Kalamazoo includes a “Stats” section with a paragraph entitled “Benefits of Abstinence.” The benefits listed include freedom from “guilt, worry, doubt, STDs, pregnancy and the pressure to marry early.”²⁷ Kalamazoo sponsored an abstinence conference in 2006 entitled *Proclaiming Purity: The Revolution* which featured speakers Pam Stenzel and Lakita Garth. Ms. Stenzel speaks to thousands of youth “about the consequences—both physical and emotional—of sex outside of marriage.”²⁸ She also produces books, curricula, CDs, jewelry, and videos with the abstinence-only-until-marriage message. Ms. Stenzel relies on a message of fear and shame regarding sexuality instead of giving young people accurate information. For example, during her video *Sex-Ed—No Screwin’ Around*, Ms. Stenzel states, “If you have sex outside of one permanent monogamous—that means one partner who has only been with you—if you have sex outside of that context, then you will pay.”²⁹

Lakita Garth also speaks to students about abstinence-until-marriage and, according to her website, is “one of the country’s leading abstinence advocates.”³⁰ Ms. Garth encourages visitors to her website to “link up” with friends who share her mission, including Club Varsity, which promotes the use of *Abstinence ‘Til Marriage (ATM) Cards*, a type of virginity pledge.³¹ Research has found that under certain conditions such pledges, most commonly called virginity pledges, may help some adolescents delay sexual intercourse. When they work, pledges help this select group of adolescents delay the onset of sexual intercourse for an average of 18 months—far short of marriage. Researchers found that pledges only worked when taken by a small group of students. Pledges taken by a whole class were ineffective. More importantly, the studies also found that those young people who took a pledge were one-third less likely to use contraception when they did become sexually active than their peers who had not pledged. These teens are therefore more vulnerable to the risks of unprotected sexual activity, such as unintended pregnancy and STDs, including HIV/AIDS. Further research has confirmed that although some students who take pledges delay intercourse, ultimately they are just as likely to contract an STD as their non-pledging peers. The study also found that the STD rates were higher in communities where a significant proportion (over 20%) of the young people had taken virginity pledges.³²

Kalamazoo places peer educators trained in the *Choosing the Best* abstinence-only-until-marriage curriculum in Michigan schools and community centers.³³ SIECUS reviewed two of the curricula produced by Choosing the Best, Inc.: *Choosing the Best LIFE* (for high school students) and *Choosing the Best Path* (for middle school students). These reviews found that the curricula name numerous negative consequences of premarital sexuality activity and suggest that teens should feel guilty, embarrassed, and ashamed of sexual behavior. For example, *Choosing the Best LIFE* states that “relationships often lower the self-respect of both partners—one feeling used, the other feeling like the user. Emotional pain can cause a

downward spiral leading to intense feelings of lack of worthlessness (sic).” *Choosing the Best PATH* says, “Sexual activity also can lead to the trashing of a person’s reputation, resulting in the loss of friends.”³⁴

Another CBAE grantee, Bethany Christian Services, describes itself as “a pro-life adoption and family service agency.”³⁵ Bethany Christian Services’ national office is in Michigan and it has over 75 affiliate crisis pregnancy offices throughout the United States. Bethany Christian Services lists “Differences of Adoption and Abortion” under the “Abortion” section of its website. For abortion, the list includes, “your pregnancy ends in death”; “you may feel guilt and shame about your choice”; “you will remember taking a life”; and “you will never know or treasure your baby.”³⁶ In the same section of its website, Bethany Christian Services attempts to scare women into not choosing abortion by incorrectly suggesting that it leads to post-abortion stress syndrome and an increased risk of breast cancer. There is no sound scientific evidence linking abortion to subsequent mental health problems, termed “post-abortion stress syndrome” by anti-abortion groups. Neither the American Psychological Association nor the American Psychiatric Association recognize “post-abortion stress syndrome” as a legitimate medical condition.³⁷ Research has also found no link between abortion and breast cancer. (See the Title V section for more information on the alleged link between abortion and breast cancer.)

Bethany Christian Services provides funding to Project Reality to train teachers in Michigan schools and agencies to use the abstinence-only-until-marriage curricula *A.C. Green’s Game Plan* and *Navigator*. SIECUS reviewed *Navigator* and found that it too relies on messages of fear and shame, inaccurate and misleading information, and biased views of marriage, sexual orientation, and pregnancy options in order to convince high school students to remain abstinent until marriage. *Navigator* incorrectly claims, “Any kind of sexual activity can spread STDs from one person to another.” It also states, “*Navigator* does not promote the use of contraceptives for teens. No contraceptive device is guaranteed to prevent pregnancy. Besides, students who do not exercise self-control to remain abstinent are not likely to exercise self-control in the use of a contraceptive device.”³⁸ (See the Title V section for more information on *Game Plan*.)

According to its website, Wedgwood Christian Services “is a distinctively Christian, professionally excellent community of caring, dedicated to helping young people live productive and fulfilling lives. For more than 46 years, we’ve been extending God’s love to children, adults, and families through professional services that promote healing and wholeness.”³⁹ Wedgwood conducts abstinence-only-until-marriage programs with support from the Coalition on Adolescent Choices and Health (COACH).⁴⁰

More recently, Wedgwood Christian Services hosted a “trendy, yet modest” fashion show of prom and spring clothing modeled by high school students.⁴¹ This event also featured a talk from abstinence-only-until-marriage proponent Pam Stenzel.⁴²

Federal and State Funding for Abstinence-Only-Until-Marriage Programs in FY 2006

Abstinence-Only-Until-Marriage Grantee Length of Grant	Amount of Grant	Type of Grant (includes Title V, CBAE, AFLA, and other funds)
Michigan Department of Community Health www.michigan.gov/mdch	\$1,417,131 federal \$695,000 state	Title V

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Abstinence-Only-Until-Marriage Grantee Length of Grant	Amount of Grant	Type of Grant (includes Title V, CBAE, AFLA, and other funds)
Alpena-Montmorency-Alcona Educational Service District www.amaesd.k12.mi.us	\$158,886	Title V sub-grantee
Catholic Social Services of Muskegon www.dioceseofgrandrapids.org	\$121,890	Title V sub-grantee
District Health Department #10 of Cadillac www.malph.org/page.cfm/79	\$170,000	Title V sub-grantee
Eaton Intermediate School District www.eaton.k12.mi.us	\$170,000	Title V sub-grantee
Human Aid of Gladwin County (Fiduciary of the Yes! Coalition) http://yescoalition.org	\$170,000	Title V sub-grantee
Jackson County www.co.jackson.mi.us	\$157,385	Title V sub-grantee
Lakeshore Pregnancy Center www.lakeshorepregnancycenter.com	\$123,250	Title V sub-grantee
Macomb Family YMCA www.ymcametrodetroit.org/branches/macomb.asp	\$170,000	Title V sub-grantee
St. John Community Health Investment Corp. www.stjohn.org	\$85,000	Title V sub-grantee

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Abstinence-Only-Until-Marriage Grantee Length of Grant	Amount of Grant	Type of Grant (includes Title V, CBAE, AFLA, and other funds)
Tuscola Intermediate School District www.tisd.k12.mi.us	\$127,500	Title V sub-grantee
Wedgwood Christian Services DUAL GRANTEE 2005–2008 www.wedgwood.org	\$403,061	Title V sub-grantee CBAE
Bethany Christian Services 2006–2011	\$600,000	CBAE
New Genesis, Inc. 2004–2007 www.newgenesisinc.org	\$737,925	CBAE
Providence-St. John Health 2004–2007	\$252,516	CBAE
St. Joseph Health System 2005–2008 www.sjhysy.org	\$642,825	CBAE
Ingham County Health Department 2004–2009 www.ingham.org/hd/health.htm	\$276,826	AFLA

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Abstinence-Only-Until-Marriage Grantee Length of Grant	Amount of Grant	Type of Grant (includes Title V, CBAE, AFLA, and other funds)
Planned Parenthood of Northern Michigan 2002–2007 http://www.plannedparenthood.org/northern-michigan/	\$127,226	AFLA

Title V Abstinence-Only-Until-Marriage Coordinator

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Michigan Organizations that Support Comprehensive Sexuality Education

AIDS Partnership Michigan
 2751 East Jefferson, Suite 301
 Detroit, MI 48207
 Phone: (313) 446-9800
www.aidspartnership.org

Michigan National Organization for Women
 P.O. Box 860
 East Lansing, MI 48826
 Phone: (517) 485-9687

Michigan Religious Coalition for Reproductive Choice
 P.O. Box 739
 East Lansing, MI 48826
www.mircrc.org

Planned Parenthood of South Central Michigan
 4201 West Michigan Ave.
 Kalamazoo, MI 49006
 Phone: (269) 372-1200
www.ppscm.org

Triangle Foundation
 19641 West Seven Mile Rd.
 Detroit, MI 48219
 Phone: (313) 537-3323
www.tri.org

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Michigan Organizations that Oppose Comprehensive Sexuality Education

Michigan Family Forum
P.O. Box 15216
Lansing, MI 48901
Phone: (517) 374-1171
www.michiganfamily.org

Right to Life of MI
2340 Porter St. SW
P.O. Box 901
Grand Rapids, MI 49519
Phone: (616) 532-2300
www.rtl.org

Newspapers in Michigan

The Ann Arbor News
Cindy Heflin
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340 E. Huron St.
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