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Missouri received \$4,918,451 in federal funds for abstinence-only-until-marriage programs in Fiscal Year 2006.¹

Missouri Sexuality Education Law and Policy

Missouri law mandates that all instruction in human sexuality must be medically and factually accurate. It must also:

[P]resent abstinence from sexual activity as the preferred choice of behavior in relation to all sexual activity for unmarried pupils because it is the only method that is one hundred percent effective in preventing pregnancy, sexually transmitted diseases [STDs] and the emotional trauma associated with adolescent sexual activity, and advise students that teenage sexual activity places them at a higher risk of dropping out of school because of the consequences of sexually transmitted diseases and unplanned pregnancy.

Students must be instructed not to make unwanted physical and verbal sexual advances or otherwise exploit another person. Missouri students must also be presented “both the possible side effects and health benefits of all forms of contraception, including the success and failure rates for the prevention of pregnancy and sexually transmitted diseases.”

Although school districts are not required to follow it, the Missouri Department of Elementary and Secondary Education produced the *Missouri Framework for Curriculum Development in Health Education and Physical Education*. The *Framework* includes instructional guidelines for HIV/AIDS- and STD-prevention education starting at the high school level. School boards must determine the specific content of sexuality education classes and make sure that it is age-appropriate.

The school district must also notify parents and guardians about:

- the basic content of the district’s human sexuality instruction to be provided to the student; and
- the parent’s right to remove the student from any part of the district’s human sexuality instruction.

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

See Missouri Revised Statute 170.015, *Missouri School Improvement Program*, Missouri’s *HIV Prevention Education Program*, and *Missouri Framework for Curriculum Development in Health Education and Physical Education*.²

Recent Legislation

Legislation Requires Sexuality Education to Follow Federal Abstinence Education Law

House Bill 63, introduced in January 2007 and referred to the Special Committee on Family Services, would change Missouri's law from explicitly requiring schools to teach "the latest medically factual information" about contraception to requiring that students are presented with "information on contraceptives, pregnancy and abortion, in a manner consistent with the provisions of the Federal Abstinence Education Law." It would also ban from schools outside sexuality educators and any materials produced by a facility or organization that provides or refers for abortion. In addition, the law would create an opt-out policy under which schools would have to receive written permission from parents before their children could attend a course related to human sexuality. Finally, HB 63 would require schools to "present the benefits to individuals, families, and society of a lifelong monogamous marriage between a man and a woman" and present information on fetal development including that "at fertilization an unborn child's life begin" and that the "unborn child has growth and development of various body organs and limbs, fingerprints, and sensory awareness long before birth."

Omnibus Bill Compromises Comprehensive Sexuality Education

Senate Bills 370, 375, and 342, along with House Bills 1055 and 716, all introduced in 2007, would also change the current law requiring schools to teach "the latest medically factual information" about contraception. These bills would allow school districts to either teach comprehensive sexuality education *or* teach information in a manner consistent with the federal "abstinence education" law and guidelines which prohibit information on contraceptives and condoms, except in terms of their failure rates. These bills would also ban from schools outside sexuality educators and any materials produced by a facility or organization that provides or refers for abortion. The Senate bills were placed on an informal calendar in April 2007. HB 716 was voted "Do Pass" in the Rules Committee. HB 1055 passed in the House and is scheduled for a hearing in the Senate in late April.

Legislation Prohibits Any Provider of Abortion Services from Providing Sexuality Education

House Bill 1075 and Senate Bill 776, both introduced in January 2006, would prohibit any person or entity that is "a provider of abortion services" from providing, offering, sponsoring, or furnishing class materials or instruction on human sexuality. The bill provides an exemption, however, if the abortion is necessary to save the "life of the mother." Parents must also be notified about the names and affiliations of all instructors. The Senate Bill extends this legislation and existing regulations to apply to charter schools as well. It would also remove the requirement that such information be factually accurate. The Senate Bill was referred to the Senate Education Committee. The House Bill was passed by the House and is currently awaiting Senate action.

Bill Intends to Reduce the Numbers of Abortion

House Bill 1520 and Senate Bill 943 aim to reduce the number of abortions throughout the state. Among other initiatives, the legislation would set up a system for any individual who believes that his/her school district is not providing the required sexuality education to complain to the state auditor and attorney general. The bills would also ensure access to emergency contraception for rape survivors and guarantee access to birth control. Both bills were introduced in January 2006. The Senate Bill was assigned to the Senate Committee on Judiciary, Civil, and Criminal Jurisprudence and the House Bill was assigned to the House Committee on Children and Families.

Events of Note

School Board Task Force Proposes Changes to Sex Ed Curriculum
November 2006; Jackson County, MO

In November 2006, The Human Sexuality Education Task Force of the Independence School District submitted its plan for revisions to the sexuality education curriculum.

The school board put together the task force after community members voiced concern over the district's use of the federally funded abstinence-only-until-marriage program *Choosing the Best*. One community member even wrote an editorial in the local newspaper opposing the program's approach to sexual health. The editorial mentions the program's several flaws, including using inaccurate statistics about contraceptives and instilling unnecessary fear in young people about sexuality.³ The writer urged the task force to review the program carefully before making its final proposal to the school board.⁴

The changes to the curriculum support the task force's major findings: that schools need to devote more time to sexuality education and that this education has to be age-appropriate.⁵ The suggested new curriculum will include information on the reproductive system, starting in the fourth grade, and a discussion of sexually transmitted diseases, including preventative measures, beginning in the sixth grade. Abstinence from drugs, alcohol, and sexual behavior will be advocated starting in kindergarten.

The next step is for the school board to review the proposal. SIECUS will continue to monitor the situation.

ACLU Sues Missouri High School for Censoring Gay Student
November 2004; Webb City, MO

The American Civil Liberties Union (ACLU) filed a lawsuit in federal court on November 23, 2004 against the Webb City School District in Missouri after the school sent a 16-year-old student home for wearing a shirt with a gay pride message. The lawsuit charged that the school violated the student's constitutional right to free expression.

The student's shirt represented the Gay-Straight Alliance at his former high school in Fayetteville, AR. The front of the shirt displayed the group's name. A pink triangle, two male symbols, two female symbols, a male and female symbol, and the slogan "Make a Difference!" all appeared on the back of the shirt. Though the student said he had worn the shirt several times before without incident, he was sent to the principal's office in October 2004 after his homeroom teacher noticed the shirt. The principal said the shirt was inappropriate and might offend other students. He instructed the student to turn the shirt inside out or go home and change. The student instead traded shirts with a friend, who wore the t-shirt the rest of the day without incident.

One week later, a similar incident occurred when the student wore a homemade t-shirt with a rainbow and the words: "I'm Gay and I'm Proud!" Within 10 minutes, the student said, he was approached by school officials and told he must turn his shirt inside out or leave. The student left school and was briefly suspended. The student returned to school several days later after promising not to wear gay-themed t-shirts until the issue had been resolved.

On advice from a teacher at his former school, the student contacted the ACLU. The group sent a letter to school officials in late October asking them to add a provision to the school district's policy that would clarify that students would not be punished for expressing their political views unless doing so would cause a disruption in the classroom. The superintendent said that he was not going to tell the school board to comply with the demands the ACLU put forth at that time. "If disruption comes for whatever reason, you try to bridle that," he said.⁶ He also pointed out that the school dress code includes a line that specifies clothes must not be "disruptive, distracting or inappropriate for the classroom."⁷

MISSOURI

The student explained the lawsuit saying, “Because I’m gay, my school is trying to take away my constitutional right as an American to express myself. . . .The school lets other students wear anti-gay t-shirts, and I understand that they have a right to do that. I just want the same right.”⁸

Missouri’s Youth: Statistical Information of Note⁹

- In 2005, 47% of female high school students and 46% of male high school students in Missouri 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 8% of male high school students in Missouri 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, 11% of female high school students and 17% of male high school students in Missouri 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, 35% of female high school students and 32% of male high school students in Missouri 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 73% of males in Missouri 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, 24% of females and 12% of males in Missouri 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, 18% of females and 29% of males in Missouri 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 Missouri reported having been taught about HIV/AIDS in school compared to 88% of high school students nationwide.
- In 2000, Missouri’s abortion rate was 14 per 1,000 women ages 15–19 compared to a teen abortion rate of 24 per 1,000 nationwide.¹⁰
- In 2004, Missouri’s birth rate was 43 per 1,000 women ages 15–19 compared to a teen birth rate of 41 per 1,000 nationwide.¹¹

Title V Abstinence-Only-Until-Marriage Funding

Missouri received \$885,593 in federal Title V funding 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. In Missouri, sub-grantees make up the state's required match through funding and in-kind services. The Missouri Department of Health oversees this funding.

There are 16 sub-grantees, including crisis pregnancy centers, county health departments, school districts, and community centers. Each organization uses a variety of curricula including: *Abstinence By Choice*, *A.C. Green's Game Plan*, *Can We Talk*, *Choosing the Best LIFE*, *Choosing the Best PATH*, *Choosing the Best WAY*, *FACTS & Friends*, *Making a Difference*, *Real Care Baby Simulation*, *Removing the Risk*, *Responsible Social Values Program (RSVP)*, *Sex Can Wait*, and *WAIT (Why Am I Tempted) Training*. These programs target youth in grade school through high school.

SIECUS reviewed *Choosing the Best LIFE* and found that it names numerous physical and psychological consequences of premarital sexual activity, suggests that sexually active teens will never have happy futures, and implies that only teens with low self-esteem and poor judgment become sexually active. 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)."¹²

SIECUS reviewed *Choosing the Best PATH* and found that it provides endless information on the negative consequences of premarital sexual activity and utilizes a variety of tactics to suggest that teens should feel guilty, embarrassed, and ashamed of sexual behavior. For example, *Choosing the Best PATH* asks students: "How does being sexually active as a teen affect how a person feels about himself or herself?" The suggested answer is: "Can feel sad about losing virginity, loss of self-respect, blames self for getting pregnant or contracting an STD." It goes on to say, "Sexual activity also can lead to the trashing of a person's reputation, resulting in the loss of friends."¹³

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 may 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."¹⁴

SIECUS reviewed *WAIT Training* and found that it contains little medical or biological information and almost no information about STDs, including HIV/AIDS. Instead, it contains information and statistics about marriage, many of which are outdated and not supported by scientific research. It also contains messages of fear and shame and biased views of gender, sexual orientation, and family type. For example, *WAIT Training* explains that "men sexually are like microwaves and women sexually are like crockpots...A woman is stimulated more by touch and romantic words. She is far more attracted by a man's personality while a man is stimulated by sight. A man is usually less discriminating about those to whom he is physically attracted."¹⁵

The Missouri Department of Health's website lists Youth Life Taney County as a Title V sub-grantee. This appears to be Taney County K-Life, which does business as "Community Abstinence Program, Inc.," and is a chapter of the national K-Life, a constellation of youth ministries in nine states that is headquartered in Missouri and led by Kyle Unruh.¹⁶ K-Life began in 1979 as a follow-up ministry to campers from Kanakuk Kamps, a Christian summer camp in Branson, MO whose

motto is “Exciting Adventure in Christian Athletics.”¹⁷ There is no information about Youth Life of Taney County’s abstinence-only-until-marriage programs on its website nor does the website list staff members. The Missouri Department of Health lists the Children’s Ministries Director at the First Baptist Church in Branson, MO as the contact for this sub-grantee.¹⁸

Taney County K-Life has four chapters in Bradleyville, Branson, Forsyth, and Hollister. The “Why is K-Life here?” section of its website explains:

Our mission is singular. We exist to influence a youth culture through the context of lasting relationships and content of God’s word resulting in transformed lives. We want to influence a youth culture because the world counterfeits the message of hope. We want them to see that the greatest hope, the only true hope is found in Jesus Christ.¹⁹

The “Leader” section of its website asks, “Interested in becoming a K-Life Leader? ...Since more than half of the people that make a decision to accept Christ make that decision before they are 18 years old, we target kids from grades 6-12. Our mission is to give every teen an opportunity to become a well-informed, fully devoted follower of Christ.”²⁰

According to its request for funds to the state of Missouri, in May 2003 Youth Life conducted an “After-Prom” event in order “to provide a positive alternative activity to high-risk, unchaperoned behavior” and “to offer and demonstrate activities that encourage abstinent behavior students can participate in with those of the opposite sex.” Youth Life also indicated in its request for funds that it will notify crisis pregnancy centers when it serves schools in their area.

Three of the state’s 16 sub-grantees are crisis pregnancy centers and together they receive approximately one-quarter of Missouri’s Title V money. Two of these, Life Choices of Joplin and The Women’s Clinic of Kansas City also receive over 1.5 million in CBAE funding. Crisis pregnancy centers typically advertise as providing medical services and then use anti-abortion propaganda, misinformation, and fear and shame tactics to dissuade women facing unintended pregnancy from exercising their right to choose. (See the CBAE and AFLA section for more information on the Women’s Clinic of Kansas City and Life Choices of Joplin.)

The Laclede Pregnancy Support Center offers counseling and educational programs in addition to pregnancy tests and referrals. However, the center provides inaccurate and biased information and language regarding abortion procedures. For example, instead of referring to a “physician” “health care provider” or “doctor,” the center refers to “the abortionist.” It also provides misinformation about emergency contraception, suggesting that it is a form of abortion.²¹ 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

The center promotes a strong abstinence-until-marriage message, referring to programs such as *Choosing the Best LIFE*, *Choosing the Best PATH*, and *WAIT Training*. (See the Title V section for more information on these curricula.) It is unclear whether the center teaches any of these programs, or just promotes their use. The center does encourage teens to take a virginity pledge or commit to secondary virginity: “Remind yourself (sic)—sign a pledge card, or buy a promise ring or pendant or

pin.”²³ 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.²⁴

Title V Evaluation

Missouri evaluated its Title V abstinence-only-until-marriage program, *Life's Walk*, during the 1999–2000 academic year. The evaluation involved pre- and post-test surveys and a small comparison group of students. No statistically significant differences were found between the comparison group and the students who participated in *Life's Walk* with respect to reported sexual behavior.²⁵ There was, however, a significant increase in sexual behavior between pre- to post-test among all students. The authors of the evaluation concluded that “these results confirmed previous research that found no evidence that abstinence-only programs change adolescent sexual behavior.”²⁶

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

There are seven CBAE grantees in Missouri: Better Family Life, Inc., Catholic Charities of Kansas City/St. Joseph's Children and Family Services, Future Leaders Outreach Network, LifeChoices of Joplin, Saint Louis County Department of Health, Sparrow Community Development Group, and the Women's Clinic of Kansas City/LifeGuard Youth Development. There are no AFLA grantees in Missouri.

Better Family Life, Inc. collaborates with A New Cornerstone, Inc. and the National Fatherhood Initiative to produce the Abstinence Education Project.²⁷ The Abstinence Education Project uses rallies, presentations, classes, and a marketing campaign to spread the abstinence-only-until-marriage message to public and private schools in St. Louis.²⁸

The Women's Clinic of Kansas City/LifeGuard Youth Development is a crisis pregnancy center that calls itself a “non-profit medical clinic.”²⁹ Its website has a section entitled “Abortion?” that includes a message from the Director of Post-Abortion Ministries, who states, “I can't begin to tell you how empty and numb I felt those first years after I aborted my baby... I had terrible nightmares and was consumed with guilt. I was so ashamed of myself... This pain went on until I received Jesus as my personal Savior.”³⁰ This part of the website also lists “General Postabortive Stress/Syndrome Symptoms” including “anger/rage, low self-esteem, shame/secretcy, alcohol/drug abuse, and suicidal thoughts/attempts.”³¹ There is no sound scientific evidence linking abortion to subsequent mental health problems, termed “post-abortion stress syndrome” by anti-abortion groups.

According to the Women's Clinic of Kansas City/LifeGuard Youth Development's fundraising philosophy, “The Women's Clinic operates in faith that God will supply our needs through the contributions of His people, and we pledge to use only methods of fundraising which glorify Him.”³² It has created a video to inform the general public about the clinic and “the abortion crisis facing our community and nation.” According to the video, “The problem is far-reaching and disturbing. Every 24 seconds, a baby is aborted.” The video explains the origins of the clinic: “In 2001, God called Debbie

Stacy to establish The Women’s Clinic of Kansas City right beside Planned Parenthood.” Debbie Stacy, founder and president of The Women’s Clinic, then states, “I wanted to make sure we had one goal, one mission, one purpose, and that was to reach the woman who, unless she came in contact with The Women’s Clinic, she would go and abort her baby and forever make a mistake that she regretted. So I knew that if that’s the need that we were to provide a solution to that need somehow that was Christ-centered.”³³

The narrator explains the purposeful positioning of the crisis pregnancy center next to Planned Parenthood: “We offer women and teenagers and alternative to Planned Parenthood by providing medical services, including free pregnancy testing, free ultrasound, professional medical counseling and medical referrals.” Debbie Stacy clarifies this point: “Whatever Planned Parenthood does, except for obviously contraception and abortions, we need to compete, we need to get in their world, we need to tell them the truth about sex, the truth about drugs, and the truth about abstaining from those practices that would harm them.”³⁴

The Women’s Clinic of Kansas City was able to purchase an ultrasound machine through Focus on the Family’s “Option Ultrasound” project. The clinic routinely gives non-medical ultrasounds. For example, its summer 2005 newsletter explains that clinic staff performed an ultrasound twice in two days on the same woman as a “window to the womb.”³⁵ In fact, the Women’s Clinic of Kansas City uses ultrasound machines as often as possible. In the promotional video, the narrator explains, “The addition of an ultrasound machine has been a crucial tool in proving that the baby is real.” Debbie Stacy emphasizes that use of this technology “allows us to have a woman come in, she receives a free pregnancy test, and after she has the pregnancy test we take her and immediately to get an ultrasound if the test is positive. That enables us to allow her to see that baby’s picture. . . . That is the most cutting edge approach we have to saving the lives of the unborn in centuries.” The American Institute of Ultrasound in Medicine (AIUM), the Society for Diagnostic Medical Sonography (SDMS), the American College of Radiology (ACR) and the U.S. Food and Drug Administration (FDA) all discourage the use of ultrasound machines for the non-medical, non-diagnostic purpose of manipulating a patient’s decision.³⁶

The video also discusses the organization’s abstinence-only-until-marriage program, LifeGuard Youth Development. “We provide abstinence only education in public schools, churches and private organizations throughout the Kasey(Casey) metro, to educate teens before they make mistakes.”³⁷ LifeGuard Youth Development uses the *Choosing the Best* curricula in schools, youth groups, and after-school programs. (See the Title V section for more information on *Choosing the Best*.)

LifeGuard’s website contains misinformation about condoms and STDs. It implies that risk of STDs and pregnancy are high because there is no “super condom,” and tells teens that condoms are likely to break, slip off, and weaken/deteriorate because of cold/heat.³⁸ In fact, when used consistently and correctly, condoms are highly effective in preventing pregnancy and reducing the risk of STDs. The failures mentioned by LifeGuard are all method failures (failure resulting from a defect in the product) and these are very rare. For example, experts estimate that condoms break or slip only two percent of the time. Most condom failure is caused by errors in use—either the failure to use a condom every time or the failure to use the condom correctly—not defects in the product.³⁹

LifeGuard’s website also reinforces negative gender stereotypes. For example, in a section called “More U Need 2 Know: Emotions,” the website states, “Guys can be compared to a microwave. They see something enticing and like 30 seconds later, they are ready to go! Because we know they are using only one side of their brain at a time (logic and not emotion) and their testosterone causes their sex drive to always be “ON,” generally they may not connect feelings with the act of having sex. Girls can be compared to a slow cooker. Usually, for a girl to be turned on, a whole lot of time, attention, words, affection, and touch needs to be slowly added before she is aroused. These actions engage her emotions and for her, sex does equal a personal relationship.”⁴⁰ LifeGuard’s website also states, “Being able to have

sex does not make you any different from a rat in a warehouse. They have sex too. Is that what you want to compare yourself with?”⁴¹

LifeGuard’s website also discusses abortion: “Abortion is a surgical procedure which can have complications that will leave your body physically damaged, infertile and possibly dead”; “There is a death every time an abortion is performed”; and “Feelings of mourning, guilt, regret and sadness can overtake both the guy and the girl and can be carried with you for the rest of your life into every relationship, including your future spouse and your future children.”⁴²

LifeGuard partnered with Urban Youth Leadership to produce the multimedia presentation *Blood Money*, which is available for viewing on its website. At the end of *Blood Money*, LifeGuard encourages students to sign abstinence pledge cards.⁴³ (See the Title V section for more information on virginity pledges.)

Catholic Charities of Kansas City/St. Joseph’s Children and Family Services, another grantee, states, “Abstinence allows them [teens] to pursue their dreams and reach their goals whereas being sexually active means these dreams may have to be put on hold indefinitely because of an unplanned pregnancy or STD. The not-so-obvious results can include low self-esteem, lack of self-respect and drug and alcohol use and abuse.”⁴⁴ Catholic Charities of Kansas City/ St. Joseph uses the *Choosing the Best LIFE* curriculum for high school students and the *Choosing the Best PATH* curriculum for middle school students. (See the Title V section for more information on the *Choosing the Best* curricula.)

Future Leaders Outreach Network conducts an abstinence-only-until-marriage program called *I CAN W.A.I.T. (Why Abstinence Is my Testimony)* in schools, community groups, and faith-based settings.⁴⁵ *I CAN W.A.I.T.* uses both *Choosing the Best* and *WAIT Training* curricula. (See the Title V section for more information on these curricula.)

Future Leaders Outreach Network publishes a magazine for youth that contains disparaging messages about condoms such as “With the popular slogan safe sex advocating condom use, STD’s have increased at a phenomenal rate over the last 10 years.”⁴⁶

LifeChoices of Joplin is a crisis pregnancy center that offers services such as “limited obstetrical ultrasound” to be performed “when determined necessary by the LifeChoices staff.” LifeChoices also claims that an abortion causes negative feelings that, left untreated, “can progress into what is called Post-Abortion Syndrome.”⁴⁷ 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.⁴⁸ Despite this, abortion opponents often refer to studies that have been found to have severe methodological flaws or cite anecdotal evidence of this condition in an effort to scare women out of exercising their right to choose.

In addition, LifeChoices provides a false link between abortion and breast cancer, stating, “abortion is the most preventable risk factor for breast cancer.”⁴⁹ 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.⁵⁰

MISSOURI

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)
The Missouri Department of Health and Senior Services www.dhss.mo.gov	\$885,593 federal	Title V
Carr Square Tenant Management Corporation	\$95,523.78	Title V sub-grantee
Cass County Community Health Assessment Resource Team (CHART)	\$101,000	Title V sub-grantee
Clay County Public Health Center www.clayhealth.com	\$74,602.33	Title V sub-grantee
Dent County Health Center	\$8,306	Title V sub-grantee
Jennings School District	\$44,986.50	Title V sub-grantee
Kansas City, MO School District	\$80,190.72	Title V sub-grantee
Laclede Pregnancy Support Center www.psclebanon.org	\$62,442.25	Title V sub-grantee
Life Choices of Joplin DUAL GRANTEE 2003–2006	\$83,348.70 \$800,000	Title V sub-grantee CBAE
Lutheran Family and Children's Services	\$46,412.76	Title V sub-grantee
Northside Community Center	\$33,067	Title V sub-grantee
People's Health Centers	\$99,419.77	Title V sub-grantee
St. Louis Connect Care	\$66,292.87	Title V sub-grantee

MISSOURI

Abstinence-Only-Until-Marriage Grantee Length of Grant	Amount of Grant	Type of Grant (includes Title V, CBAE, AFLA, and other funds)
St. Louis County Department of Health DUAL GRANTEE 2005–2008	\$89,505 \$424,279	Title V sub-grantee CBAE
The Women’s Clinic of Kansas City/ LifeGuard Youth Development DUAL GRANTEE 2005–2008 www.thewomensclinic.net	\$101,250 \$746,823	Title V sub-grantee CBAE
Thomas Business Enterprises, Inc.	\$63,348.77	Title V sub-grantee
Youth Life—Taney County	\$147,999.42	Title V sub-grantee
Better Family Life, Inc. 2005–2008	\$799,500	CBAE
Catholic Charities of Kansas City/ St. Joseph Children and Family Services 2005–2008 www.catholiccharities-kcsj.org	\$315,482	CBAE
Future Leaders Outreach Network 2004–2007	\$711,604	CBAE
Sparrow Community Development Group 2004–2007	\$235,170	CBAE

MISSOURI

Title V Abstinence-Only-Until-Marriage Coordinator

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Missouri Organizations that Support Comprehensive Sexuality Education

ACLU of Eastern Missouri
454 Whittier St.
St. Louis, MO 63108
Phone: (314) 652-3111
www.aclu-em.org

ACLU of Kansas and Western Missouri
3601 Main St.
Kansas City, MO 64111
Phone: (816) 756-3113
www.aclukswmo.org

The Lesbian and Gay Community Center
207 Westport Rd., Suite 218
Kansas City, MO 64111
Phone: (816) 931-4420
www.lgcc-kc.org

Missouri Religious Coalition for
Reproductive Choice
5000 Washington Pl.
St. Louis, MO 63108
Phone: (314) 361-9600
www.morcrc.org

NARAL Pro-Choice Missouri
4144 Lindell Blvd., Suite 505
St. Louis, MO 63108
Phone: (314) 531-8616
www.prochoicemissouri.org

Planned Parenthood of Kansas and
Mid-Missouri
4401 West 109th St., Suite 200
Overland Park, KS 66211
Phone: (913) 312-5100
www.ppkm.org

Planned Parenthood of the St. Louis
Region
4251 Forest Park Ave.
St. Louis, MO 63108
Phone: (314) 531-7526
www.plannedparenthood.org/stlouis/

Personal Rights of Missourians (PROMO)
438 North Skinker Blvd.
Saint Louis, MO 63130
Phone: (314) 862-4900
www.promoonline.org

Missouri Organizations that Oppose Comprehensive Sexuality Education

Eagle Forum Council
7800 Bonhomme Ave.
St. Louis, MO 63105
Phone: (314) 721-1213
www.eagleforum.org/events/Council/

Life's Silver Linings
3298 Huckleberry Dr.
Florissant, MO 63033
Phone: (314) 921-7762
www.lifessilverlinings.com

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Missouri Right to Life
P.O. Box 651
Jefferson City, MO 65102
Phone: (573) 635-5110
www.missourilife.org

The Women's Clinic of Kansas City
815 North Noland Rd., Suites 4 & 5
Independence, MO 64050
Phone: (816) 836-9000
www.thewomensclinic.net

Newspapers in Missouri

The Branson Tri-Lakes Daily News
Brandon Cone
Community News Reporter
200 Industrial Park Dr.
Hollister, MO 65672
Phone: (417) 334-3161

Columbia Daily Tribune
Janese Heavin
Education Reporter
101 N. 4th St.
Columbia, MO 65201
Phone: (573) 815-1705

Columbia Daily Tribune
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Daily American Republic
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Poplar Bluff, MO 63901
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Jefferson City Post-Tribune
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The Joplin Globe
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Medical/Health Staff Writer
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Joplin, MO 64801
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MISSOURI

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