



MASSACHUSETTS

Massachusetts received \$1,561,458 in federal funding for abstinence-only-until-marriage programs in Fiscal Year 2004.¹

Massachusetts Sexuality Education Law

Massachusetts does not require sexuality education and instead allows local school boards to make such decisions.

If a community decides to implement sexuality education, it must develop standards with the guidance of community stakeholders, including parents, students, teachers, counseling professionals, health professionals, representatives of local religious groups, and representatives of local social service and health agencies. In addition, the program must be taught in kindergarten through twelfth grade and must discuss HIV/AIDS, teen pregnancy, family violence, and sound health practices.

The school district must also ensure that parents and/or guardians receive notification about the sexuality education policy. Parents may exempt their children from any or all of this instruction. This is referred to as an “opt-out” policy.

See General Laws of Massachusetts, Title XII, Chapter 71, Section 1 and Section 32A

Recent Legislation

SIECUS is not aware of any recent legislation related to sexuality education in Massachusetts.

Events of Note

Condom Distribution Program Comes Under Fire

October 2004; Holyoke, MA

The Holyoke, Massachusetts school system came under fire from the Roman Catholic Bishop of Springfield for a recent decision to institute a program to distribute condoms to sixth through twelfth grade students.

The school committee decided to adopt the program in an effort to curb the city’s high teen birth rates of 82 births per 1,000 teen girls. This is the highest in the state which has a rate of 23 births per 1,000 teen girls.² In an effort to reduce this, the school committee voted to revise its health education curriculum and give sex education a higher priority. More recently, the school decided to institute the condom distribution program.

The program will be piloted in the high schools and will be extended to sixth through eighth grade if it is deemed successful. Students wishing to receive condoms will need to speak to a nurse who will explain pregnancy, AIDS, abstinence, and that condoms are not 100 % effective.

A letter was sent home to parents, who will have the option of preventing their children from obtaining condoms. A school physician and interim director of health education for the Holyoke schools described the need for the program and said, “we had to do something to combat what we were seeing.”³

Not everyone agrees with the school’s new program, however. Several members of the school committee voiced opposition and voted to limit the program. The latest opposition comes from the Roman Catholic Bishop of Springfield, who argued that that the school system is “an endorser and an enabler of early adolescent sex.”⁴ In a statement, he said, “I am profoundly disappointed and disturbed” and that school officials are reducing sex to “meaningless self-gratification.”⁵ Despite the opposition, the school intends to go forward with the program.

Condom Availability in Massachusetts Schools Found to Have Positive Effect
June 2003

In a study published in the June 2003 issue of the *American Journal of Public Health*, researchers from the George Washington University School of Public Health and Human Service, the Academy for Educational Development, and the Massachusetts Department of Health determined that condom availability programs in schools can have a positive impact on young people’s sexual behaviors.

They found that students who attended schools where condoms were available were less likely to be sexually active and more likely to use condoms if they were sexually active. Approximately 21% of students surveyed attended schools where condoms were available. Researchers concluded that “the strategy of making condoms available, an indication of socio-environmental support for condom use, may improve HIV prevention practices.”

“Condom availability was not associated with greater sexual activity among adolescents, but was associated with greater condom use among those who were already sexually active, a highly positive result,” said lead researcher, Susan M. Blake Ph.D., of the Department of Prevention and Community Health at George Washington University School of Public Health and Health Services. “Concerns expressed by those who think that promoting condom use encourages sexual activity among non-sexually active adolescents were not substantiated by this study.”⁶

There was no difference, however, in pregnancy rates between youth who attended schools with a condom availability program and those who did not. Researchers noted that this may be because youth in schools without condoms were more likely to use other forms of contraception. Twenty-five percent of sexually active youth in schools without condom availability programs used other forms of contraception compared to 13% of youth in schools where condoms were available.

The researchers used the results of the Massachusetts Youth Risk Behavior Surveillance Study (YRBSS) from 1995, which included interviews from 4,166 students. The YRBSS was taken four years after the Massachusetts Department of Health recommended that school districts develop condom availability programs. Massachusetts is the only state with such a policy, according to Ms. Blake.⁷

Massachusetts’ Youth: Statistical Information of Note⁸

- In 2003, 41% of female high school students and 41% of male high school students in Massachusetts reported ever having had sexual intercourse compared to 45% of female high school students and 48% of male high school students nationwide.

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- In 2003, 2% of female high school students and 8% of male high school students in Massachusetts reported having had sexual intercourse before age 13 compared to 4% of female high school students and 10% of male high school students nationwide.
- In 2003, 9% of female high school students and 11% of male high school students in Massachusetts reported having had four or more lifetime sexual partners compared to 11% of female high school students and 18% of male high school students nationwide.
- In 2003, 31% of female high school students and 28% of male high school students in Massachusetts reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey) compared to 35% of females and 34% of males nationwide.
- In 2003, among those high school students who reported being currently sexually active, 18% of females and 33% of males in Massachusetts reported having used alcohol or drugs the last time they had sexual intercourse compared to 21% of females and 30% of males nationwide.
- In 2003, among those high school students who reported being currently sexually active, 55% of females and 60% of males in Massachusetts reported having used condoms the last time they had sexual intercourse compared to 57% of females and 69% of males nationwide.
- In 2003, among those high school students who reported being currently sexually active, 26% of females and 20% of males in Massachusetts reported having used birth control pills the last time they had sexual intercourse compared to 21% of females and 13% of males nationwide.
- In 2003, 4% of female high school students and 3% of male high school students in Massachusetts reported ever having been pregnant or gotten someone pregnant compared to 5% of female high school students and 4% of male high school students nationwide.
- In 2003, 92% of high school students in Massachusetts reported having been taught about HIV/AIDS in school compared to 88% of high school students nationwide.
- In 2000, Massachusetts' abortion rate was 26 per 1,000 women ages 15-19 compared to a teen abortion rate of 24 per 1,000 nationwide.⁹
- In 2002, Massachusetts' birth rate was 23 per 1,000 women ages 15-19 compared to a teen birth rate of 43 per 1,000 nationwide.¹⁰

Boston, Massachusetts

- In 2003, 48% of female high school students and 60% of male high school students in Boston reported ever having had sexual intercourse compared to 45% of female high school students and 48% of male high school students nationwide.
- In 2003, 4% of female high school students and 19% of male high school students in Boston reported having had sexual intercourse before age 13 compared to 4% of female high school students and 10% of male high school students nationwide.

- In 2003, 14% of female high school students and 29% of male high school students in Boston reported having had four or more lifetime sexual partners compared to 11% of female high school students and 18% of male high school students nationwide.
- In 2003, 34% of female high school students and 37% of male high school students in Boston reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey) compared to 35% of females and 34% of males nationwide.
- In 2003, among those high school students who reported being currently sexually active, 17% of females and 28% of males in Boston reported having used alcohol or drugs the last time they had sexual intercourse compared to 21% of females and 30% of males nationwide.
- In 2003, among those high school students who reported being currently sexually active, 55% of females and 74% of males in Boston reported having used condoms the last time they had sexual intercourse compared to 57% of females and 69% of males nationwide.
- In 2003, among those high school students who reported being currently sexually active, 20% of females and 12% of males in Boston reported having used birth control pills the last time they had sexual intercourse compared to 21% of females and 13% of males nationwide.
- In 2003, 9% of female high school students and 6% of male high school students in Boston reported ever having been pregnant or gotten someone pregnant compared to 5% of female high school students and 4% of male high school students nationwide.
- In 2003, 85% of high school students in Boston reported having been taught about HIV/AIDS in school compared to 88% of high school students nationwide.

Title V Abstinence-Only-Until-Marriage Funding

Massachusetts received \$739,000 in federal Title V funding in Fiscal Year 2004. 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 can be provided in part or in full by local groups. In Massachusetts, the match is provided by television and radio stations through the donation of air time.

The state does not contract out this money. Instead, the Massachusetts Department of Health uses this money to run a media campaign with the main message of “You don’t have to do it.” This media campaign targets males and females ages 10-14, males ages 15-17, and parents of teenagers. The goals of this campaign are to increase parent-child communication, encourage youth to delay the onset of sexual activity, and educate young men about the risks of early sexual activity. An evaluation of this campaign is ongoing.

Special Projects of Regional and National Significance—Community Based Abstinence Education (SPRANS—CBAE)¹¹ and Adolescent Family Life Act (AFLA) Grantees

There are two SPRANS—CBAE grantees in Massachusetts: Catholic Social Services of Fall River and A Women’s Concern with locations throughout Massachusetts. There is one AFLA grantee in Massachusetts: Boston Medical Center.

A Woman’s Concern runs several crisis pregnancy centers that use misleading information to pressure women into choosing not to have abortions. Before receiving this grant, A Woman’s Concern’s abstinence-only-until-marriage program was privately funded by the Gerard Health Foundation. Ray Neary, director of education for the Gerard Health Foundation and former director of Massachusetts Citizens for Life, told *Massachusetts News* that his job was to introduce abstinence-only-until-marriage programs to Massachusetts schools and “help rid the state of those sex education courses that really promote unbridled sex.”¹²

Although A Woman’s Concern currently offers its abstinence-only-until-marriage program free to schools, few Massachusetts schools have elected to use their program. This program, entitled *Healthy Futures—Boston*, offers free trainings and assemblies based on *A.C. Green’s Game Plan* curriculum.

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 (Sexually Transmitted Disease). 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 “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.”¹³

Federal and State Funding for Abstinence-Only-Until-Marriage Programs in FY 2004

Abstinence-Only-Until-Marriage Program Grantee Length of Grant	Amount of Grant	Type of Grant (includes SPRANS–CBAE, Title V, and AFLA)
Massachusetts Department of Health www.mass.gov/dph/fch/abstinence.htm	\$739,000 federal	Title V
Catholic Social Services of Fall River 2003 – 2006	\$124,198	SPRANS–CBAE (Implementation Grant)
A Women’s Concern, Inc. www.awomansconcern.org 2003 - 2006	\$488,434	SPRANS–CBAE (Implementation Grant)
Boston Medical Center 2004-2005	\$209,826	AFLA

Title V Abstinence-Only-Until-Marriage Coordinator

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Massachusetts Organizations that Support Comprehensive Sexuality Education

AIDS Action Committee of
Massachusetts
294 Washington St., 5th Floor
Boston, MA 02108
Phone: (617) 437-6200
www.aac.org

Greater Boston NOW
14 Linden St., Suite 220
Allston, MA 02134
Phone: (617) 254-9130
bostonnow.site.yahoo.net

Massachusetts Alliance on Teen
Pregnancy
105 Chauncy St., 8th Floor
Boston, MA 02111
Phone: (617) 482-9122

Massachusetts Gay and Lesbian
Political Caucus
PO Box 246
State House
Boston, MA 02133
Phone: (617) 262-1565
www.mglpc.org

NARAL Pro-Choice Massachusetts
41 Winter St., Suite 65
Boston, MA 02108
Phone: (617) 556-8800
www.prochoicemass.org

Planned Parenthood League of Massachusetts
1055 Commonwealth Ave.
Boston, MA 02215
Phone: (617) 616-1660
www.pplm.org

The Political Alliance
PO Box 1244
Northampton, MA 01060
www.wmassalliance.org

Religious Coalition for Reproductive Choice
of Massachusetts
PO Box 1129
Brookline, MA 02446
Phone: (617) 522-2964
www.rcrcofma.org

Massachusetts Organizations that Oppose Comprehensive Sexuality Education

MA Family Institute
381 Elliot St.
Newton, MA 02464
Phone: (617) 928-0800
www.mafamily.org

Operation Rescue Boston
PO Box 870037
Milton Village, MA 02187
Phone: (781) 849-6026
www.orboston.org

MA Citizens for Life
The Schrafft Center
529 Main St.
Boston, MA 02129
Phone: (617) 242-4199

Newspapers in Massachusetts

Boston Globe
Beth Daley
Health & Medicine Reporter
PO Box 55819
Boston, MA 02205
Phone: (617) 929-3043

Boston Globe
Gideon Gil
Health & Medicine Editor
PO Box 55819
Boston, MA 02205
Phone: (617) 929-3242

Boston Globe
Anne Kornblut
White House Reporter
1130 Connecticut Ave. NW
Washington, DC 20036
Phone: (202) 857-5112

Boston Globe
Susan Milligan
Congress Reporter
1130 Connecticut Ave. NW
Washington, DC 20036
Phone: (202) 857-5143

Boston Herald
Michael Lasalandra
Medical/Health Writer
300 Harrison Ave.
Boston, MA 02118
Phone: (617) 619-6613

Boston Globe
Judy Foreman
Health & Medicine Columnist
4 Brattle St., Suite 301
Cambridge, MA 21388
Phone: (617) 234-4433

Boston Globe
Carey Goldberg
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PO Box 55819
Boston, MA 02205
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Boston Globe
Barbara Meltz
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PO Box 55819
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Boston Globe
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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 2004 begins on October 1, 2003 and ends on September 30, 2004.

² "N.E. Editorial Roundup," *The Associated Press*, 9 October 2004, accessed on Lexis-Nexis, on 26 November 2004.

³ David Abel, "Bishop Attacks School Condom Plan," *Boston Globe*, 26 October 2004, accessed 26 November 2004, <http://www.boston.com/news/local/articles/2004/10/26/bishop_attacks_school_condom_plan/>.

⁴ Ibid.

⁵ Ibid.

⁶ Susan M. Blake et al, "Condom Availability Programs in Massachusetts High Schools: Relationships With Condom Use and Sexual Behavior" *American Journal of Public Health* 93:6 (June 2003): 955-962, accessed 18 February 2005, <<http://www.ajph.org/cgi/content/abstract/93/6/955>>.

⁷ Ibid.

⁸ Unless otherwise cited, all statistical information comes from: Jo Anne Grunbaum, et. al., "Youth Risk Behavior Surveillance—United States, 2003," *Surveillance Summaries, Morbidity and Mortality Weekly Report* 53.SS-2 (21 May 2004): 1-95, accessed 28 January 2005, <<http://www.cdc.gov/nccdphp/dash/yrbs/>>.

⁹ *U.S. Teenage Pregnancy Statistics: Overall Trends, Trends by Race and Ethnicity and State-by-State Information* (New York: Alan Guttmacher Institute, February, 2004), accessed 28 January 2005, <www.guttmacher.org>.

¹⁰ *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>>.

¹¹ In FY 2004 SPRANS—CBAE was administered within the U.S. Department of Health and Human Services (HHS) by the Maternal and Child Health Bureau. In FY 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).

¹² "Ray Neary Hired to Fight for Abstinence Education," *Massachusetts News*, 10 October 2003, accessed 9 February 2005, <http://www.massnews.com/2002_editions/Print_editions/10_Oct/1002_mn_sightings.shtml#3>.

¹³ Scott Phelps and Libby Gray, *A.C. Green's Game Plan* (Golf, IL: Project Reality, 2001), 45.