



VIRGINIA

Virginia received \$2,554,842 in federal funding for abstinence-only-until-marriage programs in Fiscal Year 2005.¹

Virginia Sexuality Education Law and Policy

The Virginia Administrative Code states that all curriculum decisions are to be left to local school boards. Virginia gives permission for local school boards to develop sexuality education programs with the “goals of reducing the incidence of pregnancy and sexually transmitted diseases [STDs] and substance abuse among teenagers.” However, the state board of education is also required to develop standards and curriculum guidelines for kindergarten through twelfth grades. Titled, *Guidelines on Family Life Education*, this document set standards for “comprehensive, sequential family life education curriculum” that include age-appropriate instruction in “family living and community relationships, abstinence education, the value of postponing sexual activity, the benefits of adoption as a positive choice in the event of an unwanted pregnancy, human sexuality, human production, steps to take to avoid sexual assault, and availability of counseling, and legal resources.”

Virginia code requires each local school board to establish a school health advisory council of no more than 20 members. This council must have “broad-based community representation including, but not limited to, parents, students, health professionals, educators, and others.” This council shall decide health policies, including sexuality education, for the school district. It must also “place special emphasis on the thorough evaluation of materials related to controversial or sensitive topics such as sex education, moral education, and religion.”

Parents and guardians have the right to review the curriculum. The law states that parents or guardians can remove their students from any class. This is referred to as an “opt-out” policy. Virginia laws also state that “parents should be required to justify their requests.”

See Virginia Administrative Code 8VAC20-131-170; Virginia Administrative Code 8VAC20-170-10; Code of Virginia 22.1-102-7.1, 22.1-207.2 and 22.1-275.1; and Virginia *Guidelines on Family Life Education*.

Recent Legislation

Parental Right to Review Curricula Supported

Virginia House Bill 163, introduced in January 2006 and referred to the House Committee on Education, states that all parents or guardians have the right to review all family life education curricula, regardless of whether the curricula is mandatory or optional. In addition, each school board that offers family life education must develop a summary of the program to be distributed to parents.

Legislation Would Require an Abstinence-Only Focus

Introduced in January 2006, Virginia House Bill 164 would amend the state's existing family life education code to state that any "family life education course including a discussion of sexual intercourse shall emphasize that abstinence is the accepted norm and is the only guarantee against unwanted pregnancy and sexually transmitted diseases."

All family life education courses would also have to include "age appropriate subject matter; an emphasis on honor and respect for monogamous heterosexual marriage; a discussion on the value of postponing sexual activity until marriage including the emotional and psychological consequences of adolescent sexual intercourse and unwanted pregnancy; information on the possible transmission of sexually transmitted diseases through protected and unprotected sexual intercourse; an overview of laws addressing (i) the financial responsibility of parents to children born out of wedlock and (ii) circumstances under which it is unlawful for unmarried persons to have sexual relations; and advice on avoiding unwanted sexual advances and resisting negative peer pressure."

HB164 has passed the House and is assigned to the Senate Committee on Education and Health.

Legislation Would Require Survey of Family Life Education

Introduced in January 2005, Senate Joint Resolution 171 would require the Virginia Board of Education to complete a survey of family life education programs by November 30, 2006. "The survey of Family Life Education programs by the Board of Education shall include all aspects of the program, including but not limited to whether the local school division offers Family Life Education instruction, the curricula used by all school divisions, the content of instruction, the qualifications of Family Life Education teachers and teacher training, the number and percentage of children who opt-out each year, and parental and community involvement in the program." SJR 171 has passed out of the Senate and is currently in the House Committee on Rules.

Events of Note*State Delegate Wants to End Emergency Contraception Availability at Virginia Universities February 2004; VA*

Virginia State Delegate Robert G. Marshall (R) worked to discontinue the availability of emergency contraception on college campuses in Virginia. The anti-choice legislator sent letters to ten state-supported universities in March 2003 asking officials to explain why their schools were distributing emergency contraception, also known as the "morning-after pill," to students. In his letters, Marshall said the pills are a form of abortion because they prevent implantation of a fertilized egg. He further wrote that the distribution of the pills violates state law, which requires that women seeking abortions receive information about the procedure and other alternatives and wait 24 hours before undergoing the procedure.

In response to the letters, the state attorney general sent a memo to the schools in question stating that they were not violating Virginia's informed consent law by dispensing "morning after" birth-control pills to students. For the informed consent law to apply, he explained, "the pregnancy of the woman must first be established."² Because the drug is taken within hours of having unprotected sexual intercourse, this law does not apply. He went on to say that the

decision of whether to dispense emergency contraception is a choice each college's board of trustees would have to resolve for themselves.

In addition to his letters, Marshall filed a Freedom of Information Act request with the University of Virginia to determine whether officials have kept records of students who receive emergency contraception. He has accused the University of giving out the drug before it was approved by the FDA in 1998. Marshall said that the availability of emergency contraceptive pills at state colleges and universities would turn young women into "chemical Love Canals for frat house playboys."³

In January 2004, Marshall introduced Virginia House Bill 1414 to prohibit the distribution of emergency contraception at state-supported colleges and universities. The bill passed the House but died in the Senate.

*Virginia University Students Fight Back Against Emergency Contraception Ban
February 2004; Harrisonburg, VA*

In 2003, James Madison University became the first school to end the availability of emergency contraception based on Virginia State Delegate Robert G. Marshall's (R) letter of complaint. After receiving the letter, the University's trustees ordered the campus health center to stop dispensing the pills. The trustees said that they had not been aware of the availability of the pills. The trustees also looked at the issue of whether to prohibit health center physicians from writing prescriptions for the pills to be filled at outside pharmacies, but postponed that decision.

Students, outraged by this decision, worked to pass a Student Senate bill asking the board of trustees to reverse its decision. A petition supporting this bill was signed by over 2,700 students.

As they signed the petition, many young men and women talked about the extreme need for emergency contraception on campus. One senior explained, "freshman, especially, are young and dumb," and said that four years ago she had made a mistake and the health center provided emergency contraception and counseling "without making me feel like an idiot." A sophomore said that she went to the health center after being sexually assaulted by several young men late at night and that getting emergency contraception was a "huge relief."

The school health center nurse agreed with the students. She argued that eliminating the chance of pregnancy early prevented later, more dangerous, alternatives such as abortion. She also pointed out that the FDA classifies emergency contraception pills as contraceptives. In fact, emergency contraception is a higher dosage of the same hormones found in birth control pills.

The Student Senate passed the bill 54-6, with 4 abstentions. In February 2004, the James Madison University Board of Visitors voted to reverse the ban on emergency contraception, after four new members were added to the Board.⁴

Virginia's Youth: Statistical Information of Note

- In 2000, Virginia's abortion rate was 21 per 1,000 women ages 15–19 compared to a teen abortion rate of 24 per 1,000 nationwide.⁵
- In 2002, Virginia's birth rate was 38 per 1,000 women ages 15–19 compared to a teen birth rate of 43 per 1,000 nationwide.⁶

- In 2003, teens ages 13–19 accounted for 3% of the 1,193 total cases of HIV reported in Virginia.⁷
- In 2003, teens ages 15–19 accounted for 37% of the 19,439 total cases of Chlamydia reported in Virginia.⁸
- In 2003, teens ages 15–19 accounted for 28% of the 10,462 total cases of gonorrhea reported in Virginia.⁹

Title V Abstinence-Only-Until-Marriage Funding

Virginia received \$841,329 in federal Title V funding in Fiscal Year 2005. The Title V abstinence-only-until-marriage grant requires states to provide three state-raised dollars or the equivalent in services for every four federal dollars received. The state match may be provided in part or in full by local groups. Virginia matches the federal money with \$375,098 of state funds. This money is controlled by the Virginia Department of Health, Office of Family Health Services' Abstinence Education Initiative.

The Abstinence Education Initiative funds three programs that are currently being evaluated: Alliance for Families & Children (fiscal administrator for two programs) and Horizons Unlimited Ministries. The Abstinence Education Initiative also funds community-based abstinence promotion in the Chesterfield Health District.

The initiative also has two additional components: information dissemination and a social marketing campaign. Approximately \$200,000 is allocated to developing and purchasing pamphlets, posters, and videos that are distributed to schools, teen health facilities, and youth serving agencies. A state-specific social marketing campaign is being developed targeting parents of young people ages 10–14 and approximately \$179,000 has been allocated for social marketing.

Community-Based Abstinence Education (CBAE)¹⁰ and Adolescent Family Life Act (AFLA) Grantees

There are two CBAE grantees in Virginia: Charlottesville Pregnancy Center and Educational Guidance Institute. There are two AFLA grantees in Virginia: the Boat People SOS and James Madison University.

The Educational Guidance Institute was founded and is directed by Onalee McGraw. Ms. McGraw serves on the board of the Abstinence Clearinghouse and is also a contributing editor to Women for Faith and Family's newsletter.¹¹

James Madison University works in collaboration with the Central Shenandoah Valley Office on Youth to run Central Shenandoah Valley Teen Pregnancy Prevention. The program has two components: a media campaign and the "Vision of You" program. This ten session, school-based program targets middle and high school youth using *A.C. Green's Game Plan* and *Navigator*.

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.”¹²

SIECUS reviewed *Navigator* and found that it relies on messages of fear and shame, inaccurate and misleading information, and biased views of marriage, sexual orientation, and pregnancy options. *Navigator* fails to provide important information on sexual health, and the format and underlying biases of the curriculum dictate specific values and discourage critical thinking. For example, the authors explain, “*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.”¹³

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

Abstinence-Only-Until-Marriage Grantee Length of Grant	Amount of Grant	Type of Grant (includes Title V, CBAE, and AFLA)
Virginia Department of Health/Virginia Abstinence Education Initiative www.vahealth.org/abstinence	\$841,329 federal \$375,098 state	Title V
Alliance for Families & Children ¹⁴ <i>Individuals Abstaining ‘Til Marriage</i> DUAL GRANTEE <i>Reasons of the Heart</i> www.alliancecva.org/IAM.html	\$289,000* \$289,000*	Title V sub-grantee Title V sub-grantee
American Institute of Research	\$179,350	Title V sub-grantee
Chesterfield Health Department	\$65,000	Title V sub-grantee
Horizons Unlimited Ministries	\$125,000	Title V sub-grantee
Virginia Commonwealth University	\$160,000	Title V sub-grantee

VIRGINIA

Abstinence-Only-Until-Marriage Grantee Length of Grant	Amount of Grant	Type of Grant (includes Title V, CBAE, and AFLA)
Charlottesville Pregnancy Center 2005–2008 www.virginiapregnancy.org/cville.html	\$645,642	CBAE
Educational Guidance Institute 2005–2008 www.educationalguidance.org	\$698,840	CBAE
The Boat People SOS 2005–2006 www.bpsos.org/family.html	\$100,000	AFLA
James Madison University 2005–2006 www.jmu.edu	\$269,031	AFLA

Title V Abstinence-Only-Until-Marriage Coordinator

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Office of Family Health Services
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PO Box 2448
Richmond, VA 23218

Virginia Organizations that Support Comprehensive Sexuality Education

Equality Virginia
421 E. Franklin St., Suite 310
Richmond, VA 23219
Phone: (804) 643-4816
www.equalityvirginia.org

Planned Parenthood Advocates of Virginia
PO Box 1046
Charlottesville, VA 22902
Phone: (434) 971-5700
www.ppav.org

Virginia Organizations that Oppose Comprehensive Sexuality Education

American Life League
PO Box 1350
Stafford, VA 22555
Phone: (540) 659- 4171
www.all.org

The Family Foundation
830 E. Main St.
One Capital Sq., Suite 1201
Richmond, VA 23219
Phone: (804) 343-0010
www.familyfoundation.org

Newspapers in Virginia

Daily Press
Alison Freehling
Health & Medicine Reporter
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Newport News, VA 23607
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Daily Press
Beverly Williams
Education Reporter
7505 Warwick Blvd.
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The Free Lance-Star
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616 Amelia St.
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VIRGINIA

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

² B. Lewis, "Colleges Don't Break Informed Consent Law With 'Morning-After' Pills," *Associated Press*, 9 May 2003.

³ Katha Pollitt, "Toothpaste, Cough Drops, Aspirin, Contraception," *The Nation*, 15 March 2004, accessed 1 April 2006 <<http://www.thenation.com/doc/20040315/pollitt>>.

⁴ L. Sessions Stepp, "Ban On Morning-After Pill Spurs Protest," *Chicago Tribune*, 7 May 2003, 3A.

⁵ *U.S. Teenage Pregnancy Statistics: Overall Trends, Trends by Race and Ethnicity and State-by-State Information* (New York: Guttmacher Institute, February 2004), accessed 28 January 2005, <http://www.guttmacher.org/pubs/state_pregnancy_trends.pdf>.

⁶ *National Vital Statistics Reports 52.10* (Hyattsville, MD: National Center for Health Statistics, 2003), 48, accessed 4 February 2005, <<http://www.cdc.gov/nchs/births.htm#stat%20tables>>.

⁷ *Division of HIV, STD, and Pharmacy Services Surveillance Quarterly* (Richmond, VA: Virginia Department of Health, March 2004), 6, accessed 7 February 2005, <http://www.vdh.state.va.us/std/Qtr1_04.pdf>.

⁸ *Ibid.*, 29.

⁹ *Ibid.*, 23.

¹⁰ In Fiscal Year 2004 SPRANS-CBAE was administered within the U.S. Department of Health and Human Services (HHS) by the Maternal and Child Health Bureau. In Fiscal Year 2005 this funding stream was moved to HHS' Administration for Children and Families and is now referred to simply as Community-Based Abstinence Education (CBAE).

¹¹ *Onalee McGraw*, Women for Faith and Family, accessed 3 February 2006, <<http://www.wf-f.org/bd-omcgraw.html>>.

¹² Scott Phelps and Libby Gray, *A.C. Green's Game Plan* (Golf, IL: Project Reality, 2001). For more information, see SIECUS' review of *A.C. Green's Game Plan* at <http://www.communityactionkit.org/curricula_reviews.html>.

¹³ Scott Phelps and Libby Gray, *Navigator: Finding Your Way to A Healthy and Successful Future* (Golf, IL: Project Reality, 2003). For more information, see SIECUS' review of *Navigator* at <http://www.communityactionkit.org/curricula_reviews.html>.

¹⁴ Alliance for Children and Families receives two grants of approximately \$289,000, which are used to run *Individuals Abstaining 'Til Marriage* and *Reasons of the Heart*.