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Tiffani Kocsis

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LOYOLA MARYMOUNT UNIVERSITY

A Critical Analysis of Sexuality Education in the United States:
Toward an Inclusive Curriculum for Social Justice

by

Tiffani Kocsis

A dissertation presented to the Faculty of the School of Education,
Loyola Marymount University,
in partial satisfaction of the requirements for the degree
Doctor of Education

2017

A Critical Analysis of Sexuality Education in the United States:
Toward an Inclusive Curriculum for Social Justice

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by

Tiffani Kocsis

Loyola Marymount University
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Los Angeles, CA 90045

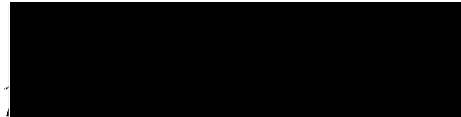
This dissertation written by Tiffani Kocsis, under the direction of the Dissertation Committee, is approved and accepted by all committee members, in partial fulfillment of requirements for the degree of Doctor of Education.

Date 3/1/2017

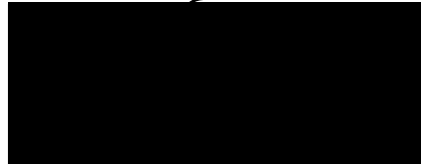
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DEDICATION

To my tribe of strong women who kept pointing me down my path and to the strongest of all, my mom, who carried the weight of the world on her shoulders, so I didn't have to.

To my husband whose personal and professional sacrifices may have gone unnoticed by word but never by heart. You are my safe harbor, and I'm forever grateful you picked me.

And for Kellen and Paige for your missed bedtimes and moments uncaptured, which were met by you with unconditional love. May your days be full, your hearts untroubled, and your joy unmatched. Kindness is what matters—be brave enough to prove that to the world.

TABLE OF CONTENTS

ACKNOWLEDGEMENTS	iii
DEDICATION	iv
LIST OF TABLES	viii
LIST OF FIGURES	ix
ABSTRACT.....	x
CHAPTER 1: INTRODUCTION AND METHODS	1
Background.....	1
Statement of the Problem.....	2
Current Programming	5
Two Distinct Approaches to Sexuality Education Programs.....	6
Abstinence-Only Programs.....	6
Comprehensive Sex Education	10
Parental Support.....	13
Issues of Gender.....	15
Gay and Lesbian Student Educational Experience	20
Bullying and Harassment.....	22
Access to Information.....	26
Research Questions.....	29
Significance of the Study	29
Conceptual Framework.....	30
Critical Feminist Theory.....	31
Queer Theory	36
Critical Pedagogy.....	38
Methodology	40
Social Justice and Leadership	43
Limitations	48
Key Terms.....	49
Summary of Purpose.....	50

CHAPTER 2: TRADITIONAL AND CRITICAL EMPANCIPATORY SEXUALITY THEORY IN CONTRAST	53
Traditional Views of Adolescent Sexuality Development.....	54
Internally Driven Sexuality.....	55
Sexuality as a Socially Learned Behavior	59
Gender, Power, and Sexualities	66
Sexual Oppression	67
Female Sexuality.....	68
Male Sexuality	72
Sexual Orientation	74
Implications for Planning Curricula in Traditional (Behavior Control) Theory Versus Feminist (Sex-Positive) Theory	77
CHAPTER 3: THE FEDERAL POLITICS OF SEXUALITY EDUCATION.....	79
Establishment of the Sexuality Education and Information Council of the United States	80
Conservative Mobilization.....	83
The Obama Administration and the Abstinence-Only Financial Bust	98
National Sexuality Education Standards 2016.....	103
CHAPTER 4: CASE LAW AND LEGAL CHALLENGES TO SEXUALITY EDUCATION	105
Establishing Trends.....	106
Supreme Court Cases.....	109
Board of Education, Island Trees School District v. Pico	109
Edwards v. Aguillard	110
Bowen v. Kendrick	112
Circuit Court Cases.....	115
Brown v. Hot, Sexy, and Safer Productions	115
Leebaert v. Harrington.....	116
Parker v. Hurley	117
District Court Cases	118
Colin v. Orange Unified School District.....	118
Citizens for a Responsible Curriculum v. Montgomery County Public Schools et al.....	119
CF v. Capistrano Unified School District.....	121
Conclusion	122
CHAPTER 5: ANALYSIS AND RECOMMENDATIONS.....	124
Curricular Analysis.....	125
Abstinence-Only Education (Title V Section 10): Problematic Exclusions.....	125
Advocates for Youth 3Rs Curriculum: To Begin the Transformation	126
Rights-Based Sexuality Education: Social Justice Ideals for Sexuality Education	131
IMB Skills Model: Implementing a Social Justice Approach	142

Programmatic Recommendations	148
Considerations for Future Research.....	154
Epilogue	157

APPENDICES

A: Advocates for Youth: 3Rs Sexuality Education Curriculum Scope and Sequence.....	159
B: Recommended Materials and Resources for Sex Educators.....	165

REFERENCES.....	166
------------------------	------------

LIST OF TABLES

Table 1. Federal Funding for Abstinence-Only Programs FY 1982-2007 in Millions..... 95

Table 2. Topics for Inclusion as Content in a Rights-Based Approach to Sexuality Education
..... 134

LIST OF FIGURES

Figure 1. Percentage of LGBT Students Who Feel Unsafe Based on Real or Perceived Characteristics.....	24
Figure 2. Percentage of Students Seeking Information Online.....	28
Figure 3. Canadian Sexual Health Education in the IMB Model.....	145
Figure 4. Canadian Sexual Health Elements.....	146

LOYOLA MARYMOUNT UNIVERSITY

A Critical Analysis of Sexuality Education in the United States:

Toward an Inclusive Curriculum for Social Justice

by

Tiffani Kocsis

Sexuality education in public schools in the United States excludes a large population of students. These exclusions are due to a long history of legal and economic battles, as well as the politicized nature of adolescent sexuality. This critical interpretive inquiry explored the long history of sexuality education through the lens of economics, law, and psychological paradigms and examined the way in which each of these lenses furthered the exclusion of nonheterosexual males in curricula. Using a framework comprised of critical feminist theory, critical pedagogy, and queer theory, this manuscript provides an understanding of the social structures of sexuality education and how they continue to marginalize students labeled as “other.” Using critical discourse analysis, this study reviewed legal and political documents, state and private curricula, and works in the sociology and psychology fields.

The outcomes of interpretive research do not lend themselves to specific answers, but to a greater understanding of the experience of marginalized individuals and the structures in place that keep this experience intact. Through a critical review of current programming initiatives, recommendations are made to continue moving toward a more gender- and identity-inclusive sexuality education curriculum. These recommendations, which are grounded in current legal and economic requirements, include teacher certification requirements, implementation of the Advocates for Youth 3Rs curriculum, utilization of a rights-based approach to program design, and adoption of national sexuality education by the Department of Health and Human Services, rather than by the Department of Education.

CHAPTER 1

INTRODUCTION AND METHODS

Background

The question of appropriate sexuality education has taken so many directions for me in both my personal and professional life. As I worked with a victim of molestation, she chose not to speak about her experience because of the shame and fear she explained she felt over the early introduction into sexuality and the lack of any proper education about whom to turn to in such a situation. It is my belief that, had she been exposed to a human sexuality curriculum—particularly one that met her at her adolescent understanding of sexuality and addressed the real issues students face in their lives—she would have had the understanding, reassurance, and confidence to speak up and receive the support she needed at that pivotal time in her development.

A few years into my professional career, I found myself holding a degree in human physiology and leading a ninth-grade health class with a quarter of the year spent on sexuality education. The curriculum I was handed felt wrong: accusatory, dehumanizing, and incomplete. Cast in the shadows of religious shame and imposing values on students, the curriculum seemed merely to use scare tactics and half-truths to frighten students into abstinence. Hence, I chose to write my own curricular units as we moved through the topic, attempting to be responsive to the questions the students asked and the topics they expressed interest in discussing. The course was different every term based on the students enrolled, but common themes emerged. I found that the more I was open to dialogue with the students, the more they appreciated the course and engaged in honest conversations. The students in each one of my classes grew very close as a

unit, as well as to me as their teacher. Many times, conversations would carry over into my office after class had ended, or students would seek me out to discuss personal issues about which they felt uncomfortable or just needed an ear to help them process. I found this to be the most rewarding thing I had ever done and began finding real interest in what the social landscape of sexuality education looked like, particularly for our female and LGBTQ students. These subgroups of students emerged as groups of particular interest to me, as they often expressed that my health class felt to them to be the safest space on campus.

It is my belief that we are greatly underserving our children by ignoring a very important human side of their individual being: sexuality. In the adolescent phases, students are developing a sense of self, an understanding of the world around them, and expressions of acceptance for those living within it. When we refuse to acknowledge—or worse, undermine—their natural development, we neglect to educate the whole child. Because of this failure to see adolescents as whole persons, there is a desperate need to understand how sexuality education curricula emerged in state education systems, what that curriculum delivers to students—intended and unintended—and how educators can develop a more critically inclusive and emancipatory curriculum that creates the conditions for students to feel safe, informed, empowered, and confident in their identity and sexuality. Moreover, leaders for social justice must respond critically to the needs of the marginalized, the unheard, and those whom the curriculum ignores.

Statement of the Problem

The current problem with sexuality education in U.S. public schools is multilayered. The content and methods of delivery fail to meet the developmental needs of all students, leading to an exclusionary curriculum. Due to the content failure, students lack the knowledge and

understanding to undergo a process of empowerment about their sexuality and to become truly secure in their decision-making about this important aspect of their humanity. Additionally, educators, whether by choice or by chance, seldom have a voice in conversations when discussing sexuality education, as shown throughout the literature reviewed for this dissertation. Because these issues are so deeply intertwined and contribute to the larger issues associated with sexuality education, it would be nearly impossible to discuss this issue in a silo. Therefore, this study will discuss many of the problematic aspects of sexuality education in public schools, all in tandem with important issues that impact its practice.

Looking holistically at adolescent sexuality, we can see that the problem extends well beyond the curriculum. Deeply rooted in social structures and institutional thinking, adolescents are subjected to social control mechanisms that rob them of their rights to sexual expression, empowerment, and ability to make sense of their changing bodies. As further discussed in Chapter 2, two theoretical bases create an ideological tension around adolescent sexuality. This tension forces a hegemonic, patriarchal view of adolescent development that seeks to control and punish students who deviate from the structural norm. Religious ideologies and cultures of exclusion force curriculum to underserve students. Additionally, law and policy become levers for religious principles to undermine justice.

State-mandated sexuality education programs are generally out of sync with the medical, psychological, and sociological fields with respect to adolescent physical and psychological development, given politically driven debates and policies (Constantine, 2008; Kirby, 2002; Kohler, Manhart, & Lafferty, 2008; Landry, Darroch, Singh, & Higgins, 2004). “Despite child development theories that assert that human beings are sexual beings before birth, sexuality as an

ever-present phenomenon is systematically repressed and denied within the four walls of the classroom” (Darder, 2011, p. 335). As such, students are left under-informed or, more often, misinformed, about their bodies and human sexuality.

Washington, DC, became the first and only public school district to include a health section on their standardized yearly assessments. The test was administered to all students in public and charter schools in fifth grade, eighth grade, and high school (the year the health class is taken) in the 2011–2012 and 2012–2013 school years. The exam was suspended in the 2013–2014 school year as a new exam was under development. This exam showed abysmal results in the areas of sexuality education. The results of this assessment were delivered in percent correct, not percentile. Fifth-grade students answered 44% (2011–2012) and 45% (2012–2013) of the questions correctly under the topic of “Human Body and Personal Health” (Office of the State Superintendent of Education, n.d.). In the eighth grade, under the topic of “Human Development and Sexuality,” students scored at 58% (2011–2012) and 59% (2012–2013). After completing their high school health course, students scored at 75% (2011–2012) and 73% (2012–2013) in the topic of “Sexuality and Reproduction.”

While high school numbers are promising regarding the factual data in this topical area, a major concern emerged when high school students were tested on where to access health information and assistance; their scores were 46% (2011–2012) and 49% (2012–2013). Only three-quarters of high school students knew how their bodies worked, and they did not have knowledge of where to get additional information regarding their bodies or assistance with health issues.

Unfortunately, there is a severe lack of educational research in topics surrounding sexuality curricula. The vast majority of information exists in medical, public health, sociological, and psychological academic contexts. Similarly, law and policy reviews are a major source of information on the topic of sexuality education. In stark contrast, very little research is found in the professional circles of education. It is crucial to hear and support the educator's voice on this topic, as they are implementers of curricula and the people dealing directly with students. In addition, there are serious concerns about the type of programming that is federally funded in public schools and lack of discussion around developmentally appropriate topics, such as gender and sexual identity.

Current Programming

In current discourse politics, the debate around sex education most often polarizes arguments for abstinence-only (AO) and comprehensive sexuality education (CSE) programs. As will be discussed in Chapter 3, federal funding hinges on the type of program a public school offers. Since the “age of abstinence” in the early 1990s, funding has been increasing for AO programs. Until the presidency of Barack Obama, increasing funds for sexuality education was tied to an eight-point definition that included concepts like abstaining from sexual activity is the standard for normal relationships, only abstinence protects from sexually transmitted infections (STI) (also known as sexually transmitted disease or STD), and sex before marriage can cause psychological harm. For the purposes of this study, AO programs will refer to those that receive federal money based on adherence to the federal eight-point definition.

Comprehensive sexuality education programs will be defined by those using the Sexuality Education and Information Council of the United States (SIECUS) definition, which

includes concepts like healthy relationship building and emphasis on abstinence, while also preparing students for sexual activity and encouraging familial communication. These two definitions were chosen for various reasons: federal dollars are allocated based on the federal definitions, using federal definitions ensures the definitions are normed by similar processes, and using federal definitions (somewhat) dismantles the lobbyist slant of an organization with a singular, program-promoting purpose.

Two Distinct Approaches to Sexuality Education Programs

Formal sex education in schools provides two distinct approaches to preventing teenage pregnancy and preventing STI acquisition message promotion. In CSE programs, messaging includes abstinence promotion, as well as medically accurate information on birth control methods and protection methods. Abstinence-only programs include messages that indicate sex should be delayed until marriage and “discussion of birth control is typically limited to statements about ineffectiveness” (Kohler et al., 2008, p. 345), whether those statements are grounded in fact or not. The following discussion defines the two approaches.

Abstinence-only programs. Abstinence-only programs deliver messages that enforce heterosexual relationships and require that teenagers who wish to live morally wait to engage in sexual intercourse until marriage. Often these AO programs deliver negative and medically inaccurate messages about contraception and provide little preparation for engagement in sexual activity in adulthood (Constantine, 2008; Kohler et al., 2008; Lamb, 2013; Santelli, Ott, Lyon, Rogers, & Summers, 2006a; Santelli et al., 2006b). The federal definition, often referred to as the “A-H definition,” was established under U.S. Social Security Act, §510(b)(2) and, for this

purpose of this dissertation, is used as the definition for AO programming. The eight points include:

- (A) Has as its exclusive purpose, teaching the social, psychological, and health gains to be realized by abstaining from sexual activity;
- (B) Teaches abstinence from sexual activity outside marriage as the expected standard for all school age children;
- (C) Teaches that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems;
- (D) Teaches that a mutually faithful monogamous relationship in context of marriage is the expected standard of human sexual activity;
- (E) Teaches that sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects;
- (F) Teaches that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child's parents, and society;
- (G) Teaches young people how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances; and
- (H) Teaches the importance of attaining self-sufficiency before engaging in sexual activity. (U.S. Social Security Administration, 2015)

Another characteristic of AO programs, most often seen in Catholic and Evangelical organizations or highly religious communities, is the virginity pledge. Virginity pledging is an oath taken by a teenager to abstain from intercourse until marriage. The efficacy of virginity

pledging has been extensively studied. Some studies claim that virginity pledges are effective at delaying the onset of vaginal intercourse in teens, thereby reducing pregnancy (Bearman & Brückner, 2001; Martino, Elliot, Collins, Kanouse, & Berry, 2008); however, they are often inefficient at reducing the transmission of STIs, because pledgers may replace vaginal intercourse with other sexual activities, such as oral and anal sex (Bearman & Brückner).

Virginity pledging has also been shown to reduce the regular and appropriate use of contraceptives once teens do decide to engage in sex (Bearman & Brückner, 2001, 2005). In a study on the effectiveness of virginity pledging, Bearman and Brückner (2001) found that pledgers were more likely to remain virgins until age 25 than those who did not pledge, and those who become sexually active reported fewer sexual partners. “Although one study found later sexual debut was associated with abstinence-only virginity pledging, the majority of adolescents who made virginity pledges ultimately broke their ‘promise’ and engaged in sexual intercourse before marriage” (Kohler et al., 2008, p. 350).

In the 2002 Cycle 6 of the National Survey of Family Growth, it was noted that opportunity for formal sex education appeared to vary based on socioeconomic status, with non-White, low-income students the least likely to receive any form of sex education. Kohler et al. (2008) have noted:

Generally, individuals receiving no sex education tended to be from low-income non-intact families, black, and from rural areas. Participants reporting abstinence-only education were typically younger and from low-to-moderate-income intact families, whereas adolescents reporting comprehensive sex education were somewhat older, white, and from higher income families and more urban areas. (p. 347)

As seems to be the case with many aspects of public and personal health indicators, the availability of formal sex education appears to be reserved for the more affluent classes, while poor and working-class populations have little access to these resources.

While a standard argument has been made that a CSE program would encourage sexual behaviors, the converse argument has been made for AO programs. Kohler et al. (2008) found that AO education was not significantly associated with an adolescent ever engaging in vaginal intercourse, whereas CSE was marginally associated with reduced reports of engaging in vaginal intercourse. Moreover, they found that

abstinence-only sex education was not significantly associated with reported teen pregnancy when compared with no sex education. However, adolescents who reported having received a comprehensive sex education were significantly less likely to report a teen pregnancy compared with those who received no sex education at all... Finally, when comparing adolescents who reported receiving a comprehensive sex education with those who received abstinence-only education, comprehensive sex education was associated with a 50% lower risk of teen pregnancy. (p. 347)

Time and again, reviews of both AO and CSE have derailed popular myths, in that AO programming does not result in abstinent behaviors in teens, and CSE programs do not increase sexual behaviors. In fact, while the outcomes of AO programs have shown to have no effect, CSE programs have indicated a delay in sexual behaviors. “Systematic reviews suggest that the effects of abstinence-only programs on sexual risk behavior have been minimal, and that initiation of sexual activity is not hastened by receiving instruction about measures for safer sex” (Kohler et al., 2008, p. 345). This, incidentally, has also been the case internationally. For

example, in her writings on a critical pedagogy of the body, Antonia Darder (2011) has noted that, in Sweden:

compulsory sex education has been in place since 1956, given their recognition of sex as a natural human act and the frank acknowledgment that most people become sexually active before they are twenty. Toward this end, students learn at an early age about their sexuality, reinforcing a more open and positive view of sex and the body. Curriculum begins at age six with anatomy, and from age twelve the topics are geared more toward developing tools for taking responsibility for their sexual lives. The outcome is that Sweden's rate of teen pregnancy and sexually transmitted diseases is among the lowest in the world. (p. 337)

As studies about sex education in this country and abroad continue to suggest, AO programs do not delay the initiation of sexual behavior in teens. For this reason, it is crucial that we meet students where they experience the world and provide them with opportunities to make good, healthy choices about their bodies and their lives.

Comprehensive sex education. Comprehensive Sex Education programs encourage abstinence and deliver messages about contraception (SIECUS, 2009). A regular misconception about CSE programs is that they do not include messages of abstinence. However, recommended CSE programs include abstinence as the preferred behavior for teens, recognizing that it is the only method of protection to be fully reliable in the prevention of pregnancy and STI contraction. Unlike AO programs, CSE programs include medically accurate, factually based information on contraceptive methods and messaging about social and emotional outcomes of sexual activity.

Teachings regarding alternate lifestyles, abortion, and adoption services may or may not be included in CSE programs.

These programs typically also cover the emotional and socialized aspects of sexuality. However, simple as this argument may seem, important underlying issues and contentions within this oversimplification are lost when this occurs. Comprehensive sex education provides balanced, accurate information on both abstinence and birth control and is a crucial part of equipping adolescents with the necessary skills to experience healthy sexuality throughout their lives. Lindberg and Maddow-Zimet (2012) asserted:

Receipt of formal sex education before first sex, particularly that including instruction about both delaying sex and birth control methods, was associated with a range of healthier outcomes among adolescents and young adults as compared with not receiving instruction in either topic. (p. 337)

Highly supported by public health experts, CSE programs are respected as the best source of accurate and just information for adolescents. In 2008, at the first-ever Congressional hearing on AO education, social conservatives fought against a wealth of evidence showing that AO programming does not achieve its goals in preventing teenage pregnancy and premarital sex (Boonstra, 2009; Bearman & Bruckner, 2005; Constantine, 2008; Kirby, 2002; Kohler et al., 2008). According to the report delivered at the Congressional hearing, a panel of representatives from the American Public Health Association, the Academy of Pediatrics, and the Institute of Medicine “testified that there is no evidence base to support the current massive federal investment in abstinence-only programs” (Boonstra, 2009, p. 6).

A position paper published by the Society for Adolescent Medicine and endorsed by the American College Health Association noted that abstinence is a behavioral goal not to be confused with AO education. They asserted that providing messages on abstinence only or abstinence until marriage as a sole option for teenagers are flawed from scientific and medical ethics viewpoints, and AO programs are morally problematic. “Conversely, efforts to promote abstinence, when offered as part of comprehensive reproductive health promotion programs that provide information about contraceptive options and protection from STIs have successfully delayed initiation of sexual intercourse” (Santelli et al., 2006a, p. 83). The Society of Adolescent Medicine goes so far to say that AO programs should be abandoned by schools and health care providers in favor of CSE, and that “access to complete and accurate HIV/AIDS and sexual health information is a basic human right and is essential to realizing the human right to the highest attainable standard of health” (p. 85).

The Sexuality Information and Education Council of the United States defines CSE as a program that includes age-appropriate, medically accurate information on a broad set of topics related to sexuality, including human development, relationships, decision making, abstinence, contraception, and disease prevention. This provides students with opportunities for developing skills as well as learning. In contrast to AO programs, the aims of CSE programs are the following:

- Provide young people with the tools to make informed decisions and build healthy relationships;
- Stress the value of abstinence while also preparing young people for when they become sexually active;

- Provide medically accurate information about the health benefits and side effects of all contraceptives, including condoms, as a means to prevent pregnancy and reduce the risk of contracting STIs, including HIV/AIDS;
- Encourage family communication about sexuality between parent and child;
- Teach young people the skills to make responsible decisions about sexuality, including how to avoid unwanted verbal, physical, and sexual advances; and
- Teach young people how alcohol and drug use can affect responsible decision making.

Support for CSE programs is widespread among some of the top health and medical professional organizations. These supporters include the American Medical Association, American Psychological Association, Institute of Medicine, American Nurses Association, American Academy of Pediatrics, American College of Obstetricians and Gynecologists, Society of Adolescent Medicine, and American Public Health Association (SIECUS, 2009). For the purposes of this discussion, the SIECUS definition of CSE will be used.

Parental Support

In 2000, a study conducted by the Henry J. Kaiser Foundation found that nearly two-thirds of parents surveyed “believed that sexuality education courses should be a minimum of one-half a semester,” and “eighty-four percent of the parents surveyed would like schools to cover contraception, including instruction on where to obtain contraceptives and how to use them” (Heumann, 2002, p. 1). Additionally, the vast majority (85%) of those parents surveyed supported discussions of abortion, and 75% supported inclusion of homosexual lifestyles and

discussions about sexual orientation. These numbers reflect strong support by parents for CSE; however, these desires are not currently reflected in federal funding policies.

Ito et al. (2006) conducted another survey of parents to understand their preferences for sexuality education. Conducting phone surveys in North Carolina—a state with mandated AO education—it was found that the state curriculum was severely out of step with parental attitudes toward sexuality education. The majority of respondents (91%) agreed that sexuality education should be taught in North Carolina. The researchers defined CSE for their purposes by naming 20 topics. As respondents answered affirmatively in their support for CSE, they were asked about the importance of the 20 named topics. Regardless of age, gender, race, education, geographic region, or child's grade level, the majority responded in support of all 20.

Mothers were slightly more positive in their support for teaching “how to talk to a partner about not having sex,” effectiveness of birth control, where to get birth control, and the risks of oral sex (Ito et al., 2006, p. 638). Those younger than 35 years old were less likely to oppose the demonstration of condom use, and Black parents were more likely to support teaching abstinence before marriage. The researchers also surveyed parents on who should determine the content of sexuality education courses. Overwhelmingly, parents agreed that politicians should have no role in determining the content (93%). In accordance, parents felt that they themselves (96%), public health professionals (95%), and school administrators (81%) should determine the content. This finding is in direct disagreement with Congress passing bills to fund AO programs written by politicians.

In a similar study, Eisenberg, Bernat, Bearinger, and Resnik (2008) reported that 89% of Minnesota parents, regardless of age, race, ethnicity, religion, education, political ideology, or

income, supported CSE. When split into the aforementioned subgroups, all but the “very conservative” and “nonpublic-school” subgroups were found to support CSE programs in excess of 80%. One of the most distinct findings was that “born-again Christian” groups support CSE programs at 84%. Eisenberg’s findings “were consistent with three previous peer-reviewed published surveys of parents or the general public, nationally” (Constantine, 2008, p. 325).

Beyond the argument of positioning for/against AO or CSE, there are issues within the curricula, regardless of the program, that are psychologically and socially damaging to teenagers, who find themselves in very tenuous and impressionable states of identity development. Those issues surround inclusion of gender and sexual orientation and the acknowledgement of expression of identity.

Issues of Gender

“One is not born, but becomes, a woman,” is the most famous line from Simone de Beauvoir’s (1949) book *The Second Sex*. However controversial, *The Second Sex* bravely illustrates the long history of the oppression of women. Feminist perspectives and activism have long been at the forefront of history. However, within the confines of a patriarchal society, feminists are often disregarded as emotional and irrational. Sociologically, men and “maleness” is traditionally connected to the mind, whereas “femaleness” is connected to the body. This categorizing of gender and separation of mind and body implies that the body is something to be controlled. In terms of the history of Western philosophy, the philosophy of embodiment is relatively recent. The opposition between the mind and the body has also been related to the opposition between male and female, since the female is typically regarded as enmeshed in her

body. “Women are somehow *more* biological, *more* corporeal, and *more* natural than men”

(Grosz, 1994, p. 14). With respect to this separation, Lennon (2010) noted:

The issue of reproduction came to the fore in political philosophies of the right and left. On the political right, following the loss of life in the war, motherhood became a concern of the state and a public duty. Moreover, increasing concerns with eugenics and racial purity led to a desire to control the reproduction of certain groups within society. At the same time, within feminist circles, the Abortion Reform Association was formed and echoed both earlier and later feminist demands for the right of every woman to decide what should happen to her body. But an implicit dualism remained. The body was seen as something owned by, and thereby separate from, the self, something over which the self had rights. (para. 4)

Ideological viewpoints continue to undermine policy and initiative in the federal government. Spawned largely by Betty Freidan’s 1963 work, *The Feminine Mystique*, Heer and Grossbard-Shechtman (1981) contended that the Women’s Liberation Movement was “very much interconnected to the revolution in contraceptive technology” (p. 49). They noted that the significant change in contraceptive technology reduced the traditional gender role of women, thereby causing a shift in focus from domestic duties to work and careers. In 1960, the U.S. Federal Drug Administration approved the first oral contraceptives, and new freedoms for women began. The sexual revolution “represented a divergence of the actual conduct from that stipulated by the norm, particularly for never-married women” (Heer & Grossbard-Shechtman, p. 50).

Among 19-year olds, in a nationwide survey in the United States in 1971, 46.1% of never-married women had engaged in premarital sex. By 1976, the percentage had grown to 55.2%. Heer and Grossbard-Shechtman (1981) argued that the “most plausible reason for this large increase in the incidence of sexual experiences among never-married females in the United States during the 1960 to 1975 period was the advent of new and highly effective methods of birth control” (p. 50). According to national surveys in 1965 and 1975, the percentage of currently married women not using contraception dropped from 36.1% in 1965 to 23.7% in 1975. This increase in contraceptive use resulted in a lower total fertility rate in the United States. Women between the ages of 20 to 29 years, who were or had been married, and who had never bore a child, rose from 24.2 to 42.3%. The first of four presumed causes for the lowered fertility rates was a reduction in the number of unintended pregnancies (Heer & Grossbard-Shechtman). Westoff (1978) contended:

the decline in births that occurred in the 1960s was almost entirely due to a decrease in the number of unplanned births...the accelerated decline since 1970 no doubt continues this trend but includes a reduction in the number of planned births as well. (p. 81)

In accordance, the number of higher education-seeking females rose in correlation with the fall of fertility rates. The percent of enrolled female undergraduate and graduate students saw an increase from 34.5% in 1960 to 44.9% in 1975. “The contraceptive revolution made more attractive for women a life style combining a career with a noncelibate but nonmarried status” (Heer & Grossbard-Shechtman, p. 59). With the rise in females enrolling in higher education and pursuing new career paths, coupled with increased sexual freedoms, the need for sex education programming became apparent to the American public and the federal government.

Unfortunately, the current curriculum is discriminatory and serves to further stereotype acceptable female sexuality.

Reproduction, specifically childbearing, brings its own set of challenges to an inclusive sexuality curriculum for additional subgroups of women, particularly lesbians, non-childbearing women, and women of color. Lesbians see varying issues of exclusion in current sexuality education and accepted norms as they pertain to the delivery of information regarding sexually transmitted disease (condoms being the contraceptive of choice), conception and procreation (in that they are not and/or are viewed as nonreproductive), and breaking stereotypical gender roles in relationship norms. Non-childbearing women are viewed as breaking reproductive norms and failing to assume their biological, feminine responsibilities. “Reproduction has been taken for granted that only women who are not parents are regarded as having made a choice—a choice that is constructed as nontraditional, nonconventional, and for some, non-natural” (Franke, 2001, p. 185). In stark contrast, females who are unable to bear children due to infertility are typically viewed as suffering a tragedy (Callahan & Roberts, 1995), further enforcing the marginalization of women who remain childless by choice.

An aspect of female sexuality not often noted in discussions of gender is the intersectionality of race and sexuality. Franke (2001) has contended, “The official story of reproduction is deeply racialized, as women of color have struggled against social forces that have at times coercively discouraged their reproduction in a number of ways” (p. 186). Most commonly through deeply racialized policies like welfare reform, women, particularly women of color, are vilified for having children, purposefully or unplanned. Historically, the racialization and control of the sexual reproduction of women of color was carried out through forced

sterilization practices driven by the Eugenicist movement of the 1930s and '40s and supported by forced sterilization laws in over 30 states (Darder, 2015). The social hygiene movement of the early 20th century gained popularity by playing into and offering solutions to concerns and anxieties of the White middle class regarding the perceived moral decay taking place in growing urban cities of the United States, particularly among poor and non-White communities (Trudell, 1993). Not unlike child welfare and family support programs from this same period, sexuality education was hailed as a method of saving children whose parents were deemed unfit and incapable of providing them with accepted moral guidance (Trudell). Fields (2008) explained that regardless of the rhetoric surrounding poor and African American female sexuality, the issue of race is pervasive in debates around the use of abstinence only policies. She argued that the societal myth of African American promiscuity dates back to the times of slavery in the United States. Conservatives have perpetuated myths of African American women as abusers of the welfare system, resulting in many U.S. policies that fund governmental assistance programs entangled with abstinence only education funding. Particularly obvious was the rhetoric surrounding “welfare queens” in the 1980s and the subsequent demonization of African American women and proclaimed delinquency of African American girls. Fields continued by positing that liberal advocates responded to this type of racialized discourse with that of their own. In attempts to provoke compassion for African American girls, slogans of “children having children” furthers the White, privileged rhetoric by limiting adolescent sexuality through the disempowerment of young African American women.

As feminist theorists have argued, sexuality education programs have “done a more than adequate job of theorizing the right to say no, but we have left to others the task of understanding

what it might mean to say yes” (Franke, 2001, p. 181). In the development of a new sexuality curriculum, the female sexual experience must be regarded with equal weight and significance as their male counterparts and include discussions of both race and gender.

Gay and Lesbian Student Educational Experience

As issues of sexual orientation have become more prevalent in mainstream media and culture, population identifiers continue to evolve. Throughout the literature—particularly as it moves from past to recent—students with nonheterosexual orientations have been labeled with a range of identifiers. In staying true to the literature, this paper will use, interchangeably, terms such as LGBT, LGBTQ, and LGBTIQ. The following is a list of these acronyms:

LGBT: Lesbian, Gay, Bisexual, and Transgender. An umbrella term that is used to refer to the community, as a whole.

LGBTQ: Lesbian, Gay, Bisexual, Transgender, Queer/Questioning

LGBTIQ: Lesbian, Gay, Bisexual, Transgender, Intersex, Queer/Questioning

LGBTQIA: Lesbian, Gay, Bisexual, Transgender, Intersex, Queer/Questioning, Ally

Additionally, “cisgender” and “non-cisgender,” or “non-cis,” are used to identify those whose sexuality matches their biology (cisgender) and those who have opposing biology and sexuality (non-cis). One would be hard pressed to find a term that is wholly inclusive of all persons and representative of their place on the gender/sexuality spectrum. For the purposes of this study, the term used in cited literature will be kept, recognizing that there are many additional terms and identities not accurately represented by acronyms.

Heteronormativity is a form of privilege similar to the ableism, patriarchy, and White supremacy that dominates American social culture. As such, heteronormativity is dependent

upon oppression and structural violence. At times, physical violence might also be used as a method of enforcing heteronormativity. Wooley (2016) emphasized that schools operates like Jeremy Bentham's 1791 panopticon in that it functions as an "unverifiable yet omnipresent means of surveillance" and "offers a disciplinary mechanism through the conscious and permanent visibility of people" (p. 3). Wooley continued, echoing Foucault in his 1977 work, *Discipline and Punish: The Birth of the Prison*. When individuals feel they are visible and supervised, they often begin to self-regulate behaviors. This self-regulation is often more effective than traditional forms of punishment. The panopticon thus emerges as a form of structural power that instills a fear of being watched and results in individuals monitoring their own behaviors. In a school setting where sexuality and gender identity are heteronormative and binary, expression outside of these norms results in social visibility. The power of the heteronormative discourse enforces the punishment of students living outside of the structural norms. "Gender and sexuality operate as domains or intersecting axes of identification along which power relations are articulated" (Wooley, 2016, p. 4).

In 1998, 2.5% of the student population self-identified as gay, lesbian, or bisexual, and as many as one in 10 teenagers struggled with issues regarding sexual orientation (Santelli et al., 2006a). The number of "out" students grows every year. Sex education curricula is heteronormative and, therefore, exclusionary to some student populations at a pivotal time in their development of identity and self-worth (Doan & Williams, 2008; Kattari, 2013; Linville, Walsh, & Carlson, 2009). Research suggests that early childhood is when awareness of sexual orientation takes place and that homosexual attraction occurs around age nine in males and age

10 in females; similarly, gay and lesbian students self-identify at an average age of 16 (Ryan & Futterman, 1997).

State curricula, unfortunately, does not adequately address issues of sexual orientation and questioning behaviors, and heteronormative policies have detrimental effects on many students labeled as “other” based on gender and aspects of sexual identity (Connell, 2015; Unks, 1995). In schools that approach only topics of teen pregnancy and abstinence (where conversations of sex are even allowed), while eliminating conversations about gender, identity, and connection of body and mind, students who do not fall into the categories of straight male and occasionally straight female are excluded. As Darder (2011) has noted:

Despite the difficulties and hardships that such silence portends for many students— isolation and increasing rates of suicide among many gay youth, for example—schools, much like churches, act as moral leaders, policing and repressing the body’s participation in public life. (p. 336)

As educators, it is neglectful to ignore the needs of any population within public schools and, by so doing, ignore the many societal and legal changes taking place in the greater society.

Bullying and Harassment

As heteronormativity asserts its place of privilege, structural and physical violence becomes more frequent in the non-hetero community. According to Carrera-Fernandez, Lameiras-Fernandez, and Rodriguez-Castro (2016), “Bullying has traditionally been defined as a subtype of violent behavior that involves various types of negative actions directed towards the victim’s physical and psychosocial dimension” and “differs from other situations of conflict or aggression in that it is systematic...and implies a power imbalance between the perpetrator and

the victim of abuse” (p. 1). Bullying is a process that seeks to uphold the socialized gender roles of patriarchal culture through abuse and violence toward those who stray from the norm. In a system in which male and female roles are strictly defined, particularly for adolescents, bullying becomes a way of expressing gender identity: males express their hegemonic masculinity by participating in direct and explicit forms of abuse, whereas girls express their hegemonic femininity through forms of relational and social abuse. When students veer from expected gender norms, bullying is a way to punish and control by the binary heteronormative population. (Carrera-Fernandez et al., 2016)

A disturbing report based on the 2013 National School Climate Survey conducted by the Gay, Lesbian, and Straight Education Network (GLSEN) documented that six out of 10 LGBT youth felt unsafe at school, and 82% of the same group admitted to having been verbally harassed at school because of their sexual identity (see Figure 1). In addition, 71% of students said that they had heard or been on the receiving end of derogatory references such as “fag” or “dyke.” Most students, approximately 68%, had avoided school functions and extracurricular activities because they felt unsafe or uncomfortable. These types of emotions and fears outline the negative and hostile environments that gay- and lesbian-identified students face each day at school. Wooley (2016) explained that “linguistic expressions like ‘that’s so gay’ operate as microaggressions, which are brief everyday exchanges that send denigrating messages about people of color, women, or LGBTQ folk” (p. 6). Where microaggressions or outright verbal harassment of students identifying outside the heteronormative binary identifications exist, the resulting impacts can be catastrophic for a student’s school experience.

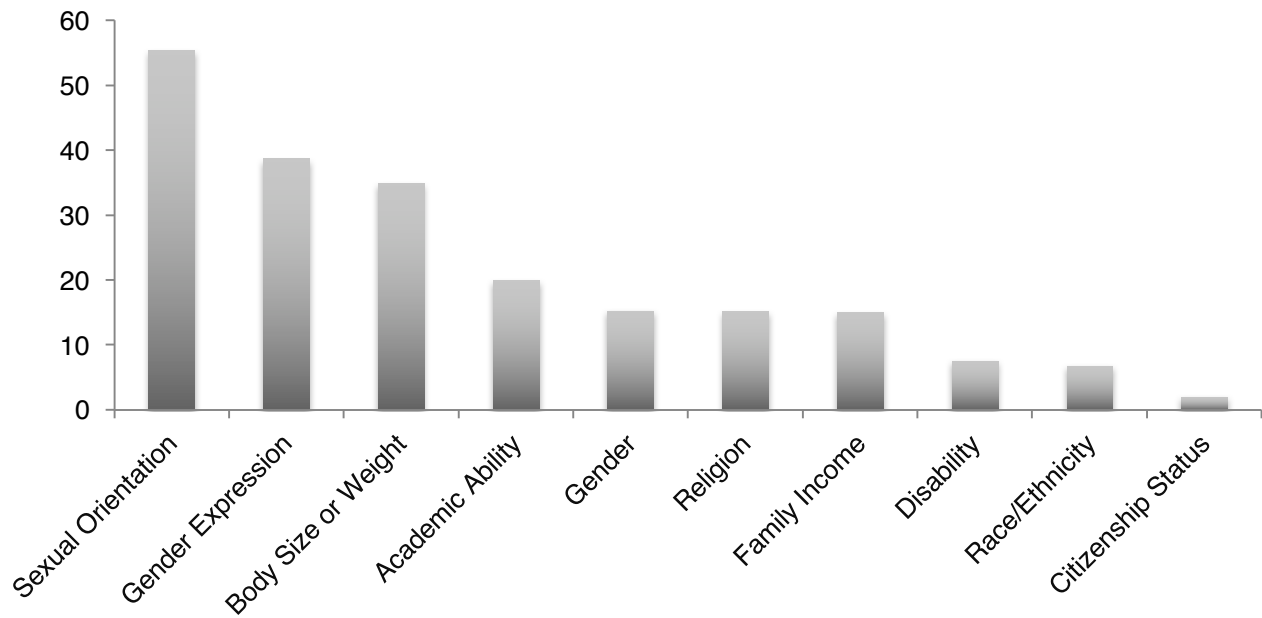


Figure 1. Percentage of LGBT students who feel unsafe based on real or perceived characteristics. Adapted from the “2013 National School Climate Survey,” by the Gay, Lesbian, & Straight Education Network, 2014, GLSEN.org.

Attendance is a secondary concern stemming from the detrimental environment, as “30.3% of LGBT students missed at least one entire day of school in the past month because they felt unsafe or uncomfortable, and over a tenth (10.6%) missed four or more days in the past month” (GLSEN, 2014, p. 4). The negative implications do not simply concern other students. In fact, teachers were almost equally guilty in creating homophobic school environments. From the same 2013 survey, “51.4% of students reported hearing homophobic remarks from their teachers or other school staff and 55.5% of students reported hearing negative remarks about gender expression from teachers or other school staff.”

Physical harassment and intimidation are a system-wide issue for LGBT students. Almost three-quarters of the students surveyed reported verbal harassment, approximately half reported electronic harassment, and nearly one third of LGBT students reported instances of physical violence committed against them on school grounds. The injustice does not stop there. Perhaps the most alarming finding for the field of education is that “61.6% of the students who did report an incident said that school staff did nothing in response” (GLSEN, 2014, p. 4). However, not all intimidation of nonbinary students is apparent to observers. In Wooley’s 2016 study, transgendered and gender nonconforming students reported in interviews feeling under scrutiny when entering gendered bathrooms at school. This scrutiny is another example of the panopticon surveillance effect. Students felt as though they were forced to choose a restroom, thereby being forced to choose one of the two binary genders: male or female. Taking care of bodily needs becomes a confrontation of heteronormative surveillance and subjects students to structural violence and rights violations. Additionally, students reported that the visibility of “safe space” markers in their school resulted in another form of visibility in which hetero-normative classmates were able to dictate what spaces actually *were* safe by the removal and destruction of stickers and flyers promoting LGBTQ rights or GSA activities. Ripping down these markers essentially erases the presence of individuals and communities. Non-binary-hetero students must negotiate whether a space is potentially safe or unsafe, and dominant identities are allowed to reassert themselves as powerful (Wooley, 2016).

Results of bullying and harassment have traumatic effects on teenagers. Victims suffer from a sense of powerlessness and battle depression in much higher percentages than nonvictims and are also less likely to seek assistance. Victims typically have lower GPAs, have higher

nonattendance rates, and are much less likely to pursue postsecondary education. In addition, LGBT students are much more susceptible to alcohol and drug abuse, as well as suicide, due to the continued harassment and hostile environments that they are forced to navigate (GLSEN, 2014).

Access to Information

As with many minority groups, positive representations of LGBTQ persons and resources concerning LGBTQ issues are rarely accessible on school campuses. A majority of LGBTQ youth reported relying on mainstream media to learn what it means to be lesbian or gay. In one study, 80% of LGBTQ youth ages 14 to 17 believed stereotypes that depicted gay men as effeminate and lesbians as masculine. Half of the students surveyed believed that all homosexual people were unhappy (Ryan & Futterman, 1997).

In relation to general curricular representation, only 18.5% of LGBT students were taught positive representations about LGBT people, history, or events in their schools. In contrast, 14.8% had been taught negative content about LGBT topics. Less than half (44.2%) of students reported that they could find information about LGBT-related issues in their school library (GLSEN, 2013). As it stands today, of the states that require sex education, only nine are inclusive with respect to sexual orientation: California, Colorado, Delaware, Iowa, New Jersey, New Mexico, Oregon, Rhode Island, and Washington (Guttmacher Institute, 2015). The wide variation of information and support available to youth in public schools causes a tumultuous and difficult experience for those labeled (and in support of those labeled) as other.

Through an additional study conducted by GLSEN, *OutOnline*, increasingly large numbers of LGBT youth report searching online for information related to sexuality or sexual

attraction, general health, or STIs. These findings point to extreme shortcomings in the experience of LGBT youth in sex education courses. There is a clear need for comprehensive, LGBT-inclusive sexual education programs both in and outside of schools. These are clearly the students being left behind and underserved.

Moreover, major concerns arise when the main source of medically based information is in an online, unguided format (see Figure 2). LGBT youth could acquire incorrect or biased online information. For anyone committed to fair and appropriate education, this is a major injustice. These types of numbers, when related to information-seeking LGBT youth, show that students are not provided with LGBT-relevant health information in their schools, thereby turning to online resources to find information on health and sexuality topics. According to GLSEN (2013):

- LGBT youth were five times as likely to have searched for information online on sexuality or sexual attraction as non-LGBT youth (62% vs. 12%).
- LGBT youth were also more likely to have searched for health and medical information compared to non-LGBT youth (81% vs. 46%).
- LGBT youth were also four times as likely to have searched for information on HIV/AIDS and other STIs (sexually transmitted infections) compared to non-LGBT youth (19% vs. 5%). (p. x)

As education has been shown to improve relations between groups and promote understanding and tolerance, it is crucial that representation of and resources for LGBT students become widespread across school campuses.

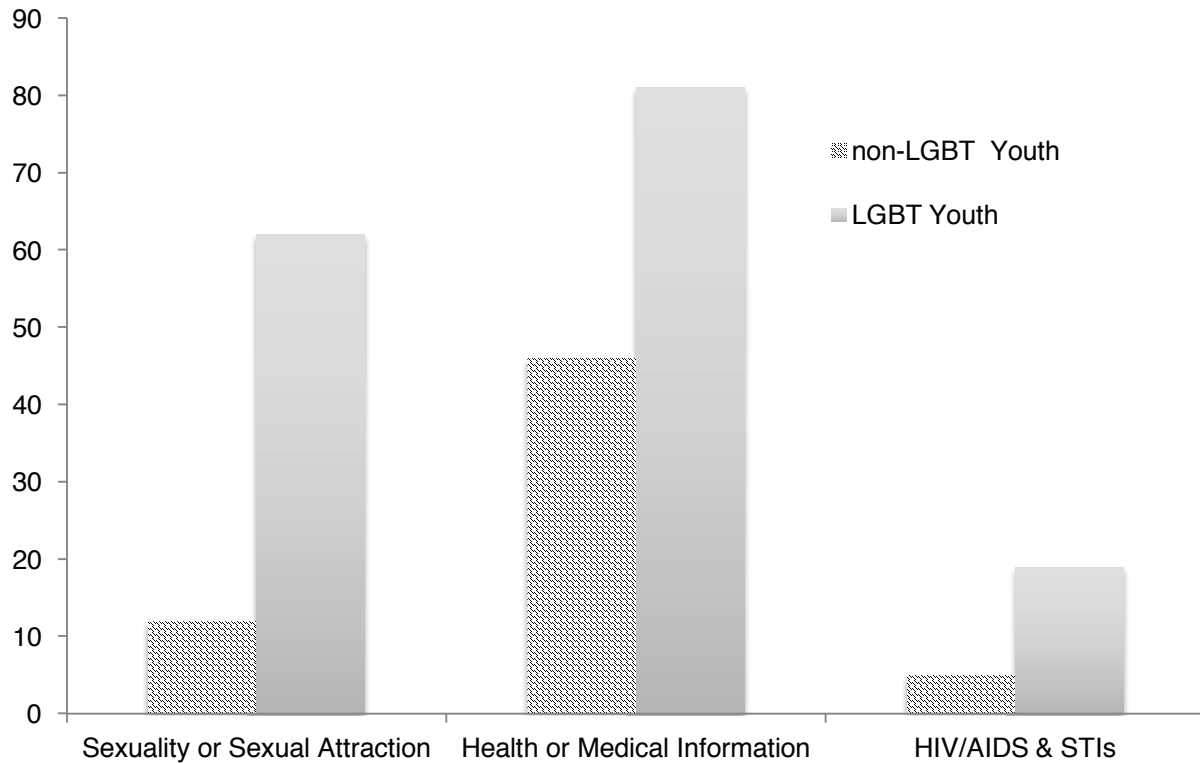


Figure 2. Percentage of students seeking information online. Adapted from the “2013 National School Climate Survey,” by the Gay, Lesbian, & Straight Education Network, 2014, GLSEN.org.

We must ask ourselves how a government with clauses in its formative papers separating it from the religious constructs of the church allows for religious and political morality policies to create funding for ineffective, prejudicial programming within the public schools. It must also be uncovered how these policies participate in a form of social eugenics, as they have repeatedly been shown to have ramifications in oppressed communities. Finally, we must investigate how the seemingly black-and-white argument of sex education programming is actually an issue rooted in feminine inequality and patriarchal oppression. Students are put at emotional and

physical risk due to our inability as educators to support and facilitate open and honest developmentally appropriate conversations.

Research Questions

This compounding of significant issues, as discussed above, has led to the following four questions that will undergird this interpretive research of sex education in the United States:

1. How have legal challenges and policy debates altered the trajectory of sex education in the U.S. public school system?
2. How do players in the political system use sex education as a leveraging point for economic, social, and education policy?
3. How are gender and sexual identities of students marginalized within traditional development theory, which have served as the basis for sex education?
4. What content changes are necessary to provide a sex education program in U.S. public schools that addresses power and access inequities with regard to gender, identity, and orientation?

Significance of the Study

On October 1, 2015, California Governor Jerry Brown signed into law a mandate for CSE in all public middle and high schools. This measure ensures not only that school districts offer sex education, but that they teach a comprehensive curriculum that includes abstinence, a range of contraceptives, issues related to sexuality and gender identity as well as “an objective discussion of all legally available pregnancy outcomes, including, but not limited to, parenting, adoption, and abortion” (Tucker, 2015, para. 4).

Also acknowledged in this new curriculum update is the recognition of gender and identity and alternative lifestyles as socially acceptable. Days later, Governor Brown signed policy for the discussion of rape culture and consent law into the high school–mandated course. This is a major step forward for students to gain access to knowledge and developmentally appropriate curriculum as it is combined with the current curriculum, already in place. However, California is the only state at this time (2017) to include such topics. This study is particularly relevant due to current societal conversations surrounding gender and sexual identity in mainstream culture and the 2016 publication of the first set of National Sexuality Education Standards.

Students are put at emotional and physical risk by a curriculum founded upon heteronormative and patriarchal values rather than a developmentally appropriate design. Similarly, exclusionary sex education leads to further social marginalization of students outside heteronormative expectations, as they are forced into silence due to the purposefully restrictive classroom environment. This research extended beyond a single school’s walls, beyond a small group of students, and looked into policies that affect every child moving through the public school system in the United States to ensure that they are prepared to navigate a highly sexualized world, feeling empowered and confident in their decision making and their identities.

Conceptual Framework

Critical pedagogy (Darder, 2002; Darder, et al, 2008; Freire, 1970), critical feminist theory (Doucet & Mauthner, 2006; Franke, 2001;Lennon, 2010; Martin, 2002; McClain, 2006), and queer theory (Cossman, Danielsen, Halley, & Higgins, 2003; Gamson, 2000; Green, 2007) offer compatible lenses of analysis that allow for engaging the existing state curricula to lead to

recommendations for the design for an inclusive sexuality education program. These theories were selected for their purposes of deconstruction (critical feminist theory, queer theory) and reconstruction (critical pedagogy) of social norms, particularly as they engage with discussions of and studies on human sexuality. It becomes necessary to deconstruct societal framing of sexuality to reconstruct an inclusive curriculum. Critical pedagogy, critical feminist theory, and queer theory work together to ensure that power structures are dismantled, student lived experiences are honored, and all feel safe in their school space.

Critical Feminist Theory

Critical feminist theory (CFT), as Luke (1992) has asserted, explains “how problematizing race, class and gender in the classroom and providing the conceptual tools of emancipatory critique will provide, ...the possibility of political action to enable those structural transformations required to liberate the ‘disenfranchised and dispossessed’” (p. 38). Critical feminist theory is a method of examining power structures and oppressive societal constraints. “Feminist post-structuralists recognize that gender is a social, political, and historical construction by placing it as the central position in their deconstructive and reconceptualist work” (Earles, 2016, p. 3). The strength of CFT as a framework, as de Saxe (2012) has written, allows for “disrupting the canon, questioning hegemonic understandings of oppression, as well as looking at the diverse methods and forms of resistance within each text as a way to ultimately think differently about emancipatory education” (p. 196). Toward this end, the following assumptions undergird CFT:

1. Gender oppression is endemic in our society. It is normal, ordinary, and ingrained into society, making it so it is often difficult to recognize.

2. Traditional claims of gender neutrality and objectivity must be contested in order to reveal the self-interests of the dominant (male) groups.
3. Social justice platforms and practices are the only way to eliminate gender discrimination and other forms of oppression and injustice.
4. The experiential knowledge of women or their “unique voice” is valid, legitimate, and critical for understanding the persistence of gender inequality, and these unique voices are often demonstrated through storytelling and counter-narratives.
5. Women are differentially discriminated against depending on the interests of the dominant group, and depending upon the intersections of their identities.
6. History and historical contexts must be taken into consideration in order to challenge policies and practices that affect women.
7. Critical feminist theory must be interdisciplinary in nature. (Geisinger, 2011, p. 9)

Using critical feminist theory, “two distinct concerns are at play in sex education: how to instruct youths about the place of sexuality in their current lives and how to prepare them for the place of sexuality and reproduction in their adult lives” (McClain, 2006, p. 68). One of the common misconceptions about sex education is that it is solely taught with respect to the teenage years. However, CFT implies that an effective program must be used to educate teens to productively and positively evaluate the developmentally appropriate stages of sexuality in their lives, with the intent of supporting them to develop into responsible and informed adults. Because sexuality is a major part of human nature, all students must be instructed in a way to assess and develop their skills within the topic.

In a culture that engenders children from an early age with prescribed gender roles, providing incessant messages about “female” and “male,” it is crucial that they are armed with the knowledge and skills to navigate their position within the world as sexual human beings.

In *Feminist Theory: From Margin to Center*, bell hooks contended:

Feminism is a struggle to end sexist oppression. Therefore, it is necessarily a struggle to eradicate the ideology of domination that permeates Western culture on various levels as well as a commitment to reorganize society so that the self-development of people can take precedence...Feminism is the struggle to end sexist oppression. Its aim is not to benefit solely any specific group of women, any particularly race or class of women. It does not privilege women over men. It has the power to transform in a meaningful way all our lives. (pp. 24–25)

Unfortunately, federally funded sexuality education programs present enduring stereotypes of “his” sexuality and “her” sexuality, leaving gender roles defined as conqueror and gatekeeper (McClain, 2006), wittingly or unwittingly, reinforcing sexist oppression. With this in mind, CFT asserts that current AO programming enforces that sexuality, particularly female sexuality, is reduced simply to dependency (i.e., mothering, reproduction) or danger (i.e., rape, disease) (Franke, 2001; McClain). Additionally, Impett, Schooler, and Tolman (2006) claimed that girls’ sexuality development is shaped by and responsive to the sociocultural context of patriarchy. Specifically, girls enter the sexual world predisposed by patriarchal oppression to behave in specific ways that include suppressing anger, avoiding conflict, and disregarding needs in favor of a more “feminine” presence. Physically, girls are subjected to societal expectations of beauty and appeal, particularly as they apply to attractiveness in the eyes of the dominant male.

Maleness is traditionally associated with objects of the mind, and femaleness with objects of the body. Sexuality education, when thought of as instruction on the physical body, must consider the messaging of an AO program. As we examine the intent and ideologies behind an AO program, we see that these programs are scripted in accordance with conservative social ideals that are unrealistic and provide a framework for the disregard of female involvement or consideration. Similarly, feminist thought identifies the disregard of male feelings, needs, and ambitions as male sexuality in AO programs, which is to be channeled after marriage into the process of reproduction and monogamy (McClain, 2006).

As women are placed in the role of sexual gatekeeper, the implication is that men, prior to marriage, are unable to control their desire for sexual conquest. This type of view “places upon women the responsibility for men’s behavior and men’s sexuality, even as it insults men’s moral capacity and relieves them of responsibility” (McClain, 2006, p. 67). An investigative report of several federally funded AO programs (Minority Staff Special Investigations Division, 2004) found that stereotypes were presented as fact with regard to the relational needs of men and women, as well as to the representations of male and female sexuality. Essentially, this report supported the notion that women are the gatekeepers of sexuality, owning the responsibility for slowing down the male’s unharnessed desires. Additionally, there is a backlash against women who do not serve the role as gatekeeper but engage in pleasurable intercourse. “Women are faced with a Madonna-whore dichotomy: they are either virginal and pure or promiscuous and easy” (Crawford & Popp, 2003, p. 13). Critical feminist theory rebukes these polarizations of female sexuality and returns power to the woman, affirming her right to seek pleasure and satisfaction through her sexuality, and freeing her from her role of tempering male

sexuality. In the same vein, sexual agency is returned to the male as a nonpassive participant in his sexual urges, but as an active decision maker.

These dominant ideals reinforce the power of certain groups (men and heterosexuals) over others. These “others” (women, homosexuals, transsexuals, those with differently abled bodies or bodies averse to the dominant ideal) are treated as social outsiders and subject to social condemnation. Similarly, given that sexuality education encourages procreation as a sole purpose of female sexuality, heterosexual women who do not bear children are outside the heteronormative group. Franke (2001) suggested it is important to reconceptualize procreation as a cultural preference, rather than a biological normative.

In the same manner, heterosexuality should be noted as a cultural preference instead of a normative behavior. Both of these instances would require a new exploration in understanding ways to lessen the demands to conformity. Implying that the very nature of human sexuality is inappropriate or negative is a clear imposition on healthy development of self-identity and self-worth. Only when the program considers all aspects of sexuality—emotional, social, and physical—can we release the confines of the standard or dominant view of gender and properly educate all students. As Jagose (2009) has explained, feminist theory “seeks less to inaugurate women as a new object of study than to transform existing knowledge formations by establishing the centrality of gender as a fundamental category of historical analysis and understanding,” and queer studies “seeks to establish sexuality as an analytic rubric of broad relevance and importance for a diverse range of disciplinary fields and interests” (p. 167).

Critical feminist theory identifies the practice of CSE as the safest and most effective way to deliver messaging about human sexuality. The theory builds on the belief that relinquishing

the stereotypes and power struggles of sex and the body is the only way to equalize and educate young men and women. As feminist theory supports the development of CSE or even an Abstinence-Plus curriculum, the purpose is to build on “the provision of basic information about sexuality and contraception with clear messages about abstaining from sexual activity and deferring pregnancy and childbearing until one is emotionally, socially, and financially prepared” with the proposal that “treats an emerging sense of sexuality and sexual desire as part of adolescents’ healthy development and helps them develop a sense of themselves as responsible sexual subjects” (McClain, 2001, p. 637). According to McClain, sexuality education stressing themes of capacity, equality, and responsibility helps people form and sustain, as part of their view of a good life, relationships embodying mutual agency, desire, and responsibility. This type of view is precisely the perspective necessary to build an inclusive sexuality curriculum for all students, regardless of gender or sexual identity.

Queer Theory

Born in the late 1980s as a postmodernist, deconstructive theoretical paradigm, queer theory takes apart issues related to sexuality identity, particularly those that favor a “norm.” Queer theory is used primarily to “disrupt normative discourses like those surrounding gender and sexualities” (Earles, 2016, p. 3). Green (2007) identified two “hallmark strains” of queer theory. The first is wholly deconstructive as it seeks to identify and dismantle text renderings of sexual orientation. The second is a subversive strain that seeks to disrupt the heteronormative practices as sites of resistance. Together they seek to “denaturalize” and decenter social norms surrounding human sexual identity. Queer theorists challenge heteronormative discourse and policies, focusing heavily on nonheteronormative sexuality and sexuality practices. Earles (2016)

explained, “For queer theorists, discourse is a complicated network of words, images, and concepts that produce reality and which can generate both emancipatory and/or oppressive power” (p. 3). Referred to as “feminism after,” queer theory enriches feminist perspectives while retaining “a focus on gender as an axis of power” and, in the same breath, seeks alternative “theoretical, social, and political modes of assessing the relationships of power and sex” (Cossman et al., 2003, p. 605). As de Saxe (2012) explained:

Although queer theory can and often does serve as a platform of oppositional resistance regarding sexuality, it can also be considered a way to redefine the concept ‘queer’, thus a rupture in the standard definition of queer theory. This practice, by nature, demonstrates another component of critical feminist theory; reconsidering and reframing hegemonic understandings of concepts, methods, and theories. (p. 193)

It is important that this research include queer theory in conjunction with feminist theory as sexuality and gender are not reducible to each other—nor are lesbian and gay studies and feminist studies (Jagose, 2009, p. 165). Queer theory draws attention to the concept of gender as an act of *doing*, rather than *being*, and highlights the fragile nature of gender identity. This fragility, explained by Carrera-Fernandez et al. (2016), is a result of “the unnatural or constructed nature of gender, the rigidity of gender norms and the difficult task of systematically reproducing such rules effectively” (p. 3). Because of this gender fragility, a unitary stabilized identity is nearly impossible to uphold, mainly because of contradictions inherent in gender; therefore those who are privileged (hetero, binary) need to marginalize others to maintain their position of power. Using structural power behaviors such as bullying, individuals are able to project an illusion of a fixed gender by positioning a hegemonic self versus others beyond the

boundaries of normal. Queer theory asserts that gender norms are constructed through repetition and imitation of expected behaviors, along with the exclusion and aggression towards those identifying outside the norms (Carrera-Fernandez et al., 2016).

Queer theory is essential to the reconstruction of a new, inclusive curriculum, as it is “deconstructive as it seeks to take apart the view of self defined by something at its core, be it sexual desire, race, gender, nation or class” (Gamson, 2000, p. 348). Queer theory, as it empties the contents of social categories (Green, 2007) also allows for persons to be removed from categories, and seeks to find intersection of identity acknowledging the complexity of the individual. Finally, the queer theory lens facilitates reframing the languages schools use to talk about sexuality to allow for broadened discussions (Linville et al., 2009).

Critical Pedagogy

Critical pedagogy asserts that inequalities related to asymmetrical power relations are central to an analysis of education policies, practices, and curriculum (Darder, Baltodano, & Torres, 2008). Student identities and lived histories are central to the development and implementation of an inclusive curriculum, and its primary intent is to work toward the transformation of educational structures, relationships, and materials that reproduce the marginalization of students viewed as different. Critical pedagogy is fundamentally committed to the establishment of a classroom that supports the empowerment of the culturally marginalized (Darder et al., 2008). As feminist and queer theories deconstruct power hierarchies, critical pedagogy is essential in the reconstruction of an emancipatory classroom. Critical pedagogy speaks directly to the work within sexuality education, because power, relationships, and identities are inherent to both policy and curricular discussions.

With this context, Paulo Freire's (1970) concept of problem-posing is considered an important tool for liberation. This informal educational model allows for the hierarchy between student and teacher to be removed. The student is free to use her or his own knowledge and understanding to think critically and question realities. This is a powerful model in the teaching of human sexuality, as it moves the moral and ethical decision making beyond the teacher, instead opening the way for students to reach their own levels of conscientization through their individual and familial morals and values. This concept aligns with the Information-Motivation-Behavior (IMB) model of education, discussed in Chapter 4, when applied to sexuality education, as Canada's Department of Health has done with other topics in health education.

For Freire (1970), the essence of education is freedom, and within the problem-posing approach, students are free to investigate, discern, and decide based on their interpretation of their values. Using a dialogic approach, the teacher is able to serve as a critical guide and provide factually based information with which to lead topical discussions, while still making an open space for students to discuss their motivations and feelings. Giving students a voice in their development of feelings toward sexuality, rather than engaging in a banking model of delivering what is right and wrong, provides students with the freedom to discover and make grounded decisions about the realities of their world.

This dialogic model leads to the Freirean idea of praxis, or action-reflection-action, where again we see direct correlation with the IMB model. In praxis, theories are translated to doing, and the students are able to begin to find the path toward their liberation. Through a Freirean feminist pedagogy, there is democratic space created where women do not have to fear authority or define themselves by prescribed gender roles. This creates an atmosphere in which

subordination has no role—in contrast to the constructs of the traditional, formal, male-oriented classroom. Additionally, tolerance is not an acceptable outcome of sexuality education, as it leaves the patriarchal acceptance of difference intact, in ways enforcing the heteronormative culture. As critical pedagogy seeks to engage all members, all experiences, and perspectives, moving away from the “superiority of heterosexuality and binary gender unchallenged, and the inferiority or moral marginalization of sexuality and gender differences in place” (Linville et al., 2009, p. 259). In an effort to create a more democratic context, critical pedagogy, in this instance, seeks to align curricula for an inclusive sexuality education.

These Freirean concepts are crucial to understanding the oppressive nature of sex education programming. As one evaluates the politics through which programs were established, examines the developmental needs of adolescents, and deconstructs current courses of policies and practices using critical feminist theory and queer theory, critical pedagogy can serve as the key to reconstructing the curricula and ensuring an inclusive classroom.

Methodology

This study utilized critical interpretive inquiry grounded in a qualitative methodology. The purpose of this work was not to understand a specific participant experience, which makes analyzing the rhetoric and diversity of experiences surrounding sexuality education the necessary form. Through a study on two decades of research on sexual double standards, Crawford and Popp (2003) asserted, “In contrast to experimental methods, qualitative studies more readily lend themselves to contextually sensitive phenomena” (p. 19). As will also be discussed, the questions surrounding sexuality education are open-ended, leading to no definite answers. Crawford and Popp (2003) contended that qualitative design allows researchers to address questions that are

not definitively answered. Understanding experience for marginalized and underrepresented populations is an abstract endeavor with no specific definition of problem or solution, with great contextual considerations. Studying a specific site or district program in a singular moment in time would not serve to answer any of the research questions posed in this work.

Traditionalists argue that interpretive research has too many issues with validity to be considered, thus positivist approaches should be taken (Angen, 2000). However, life is so full of uncertainty and fluidity; it is not static enough and much too relational to ever argue that we have found a lasting truth. “Attitudes about sexuality and sex education, like political attitudes in general, are frequently fluid, changing according to circumstances in local debates” (Irvine, 2002, p. 8). To understand what it means to be human, we must research with attention to everyday, lived experiences and with a desire for deeper understanding (Angen, 2000). Most certainly, what it means to be a sexually active teen in the 1970s is much different than what it means to be a sexually active teenager in 2017. Because of this social fluidity, it is imperative that work is continued and re-analyzed for continuous understanding and inclusion. Critical pedagogy also speaks to this phenomenon through its emphasis on the historicity of knowledge, with respect to its construction, comprehension, and evolution (Darder et al., 2008).

Wodak (2009) explained that critical discourse analysis (CDA) is a method of research design that emerged in the early 1990s with the following general principles:

All approaches are problem-oriented, and thus necessarily interdisciplinary and eclectic. Moreover, CDA is characterized by the common interests in demystifying ideologies and power through the systematic and retroductable investigation of semiotic data (written, spoken or visual). CDA researchers also attempt to make their own positions and interests

explicit while retaining their respective scientific methodologies and while remaining self-reflective of their own research process. (p. 3)

Crawford and Popp (2003) extended and simplified this thought when they posited that language not only reflects but also reinforces social realities. Using CDA, this study reviewed official public and legal documents, conducted a comprehensive content analysis on policy development and debate, and evaluated programmatic initiatives or curricula to see past the explicit language, into the implicit messaging.

As Fairclough (2013) described, “CDA is a theory of and methodology for analysis of discourse understood as an element or ‘moment’ of the political, political-economic and more generally social which is dialectically related to other elements/moments” (p. 178). This is of particular use to this work as sexuality education is not a specific moment in time in need of a descriptor, but rather a series of moments embedded in the political and social contexts this research seeks to explain. Discourse is not limited to language per se, but rather means anything from a historical monument, a policy, a political strategy, narratives in a restricted or broad sense of the term, text, talk, a speech, or topic-related conversations (Wodak, 2009, p. 3). As a social analysis, CDA seeks to explain relations between discourse and other social elements—namely power, ideologies, institutions, and social identities (Fairclough, 2013). Sexuality education originates in the field of education and has been recontextualized in the political, economic, and sociological fields. Critical discourse analysis allows for the recontextualization and appropriation of sexuality education by these external fields to be analyzed through the discursive strategies of the agents and actors in play (Fairclough). Wodak (2009) has continued to describe critical theory as directed at the totality of society in its historicity, “improv[ing] the

understanding of society by integrating major social sciences, including economics, sociology, history, political science, anthropology and psychology” (p. 6), both of which this research seeks to accomplish. Crawford and Popp (2003) also noted that qualitative studies include a much wider, varied, and diverse collection of experience than quantitative studies. In the attempt to provide an analysis inclusive of all genders and identities, this inclusiveness is crucial in deciding on a research methodology best suited for this work.

While interpretive research is exempt from institutional review board procedures, through an extensive critical analysis that employed a combination of critical pedagogical principles, critical feminist theory, and queer theory, I draw conclusions to respond to the research questions that informed this interpretive investigation. What follows are recommendations for suggested curricular changes grounded in a critical pedagogy praxis.

Social Justice and Leadership

Beyond the obvious emancipatory intent that fundamentally undergirds the three major analytical perspectives that inform this study, Linville et al. (2009) contended, “Social justice education inclusive of sexuality and gender variance should strive toward accepting, recognizing, and affirming differences and the value of sexuality and gender expression to human happiness” (p. 259). Heteronormative curriculum excludes and alienates students who self-label as “other.” Exclusionary principles written into curricula serve to further stereotypes, gender roles, and the marginalization of “other” students. “Sexuality justice would disrupt the formal sexuality education mode currently in place that frequently, implicitly or explicitly, positions girls as victims of sexual violence and boys as sexual conquerors” (Linville et al., 2009, p. 258).

As social justice leaders in education, one of our crucial responsibilities is to critically prepare students for the world ahead of them. Preparation of students for the real world requires students to know about—and be comfortable interacting with—others who hold ideas, and have skin color, languages, customs, religions, political beliefs, sexualities, genders, abilities, and appearances that are different than their own (Linville et al., 2009). A socially just approach to sex education, whether in theory or practice, must support the pedagogical conditions by which all students can develop this knowledge about themselves and others in their world.

In *Social Justice, Peace, and Environmental Education*, Linville et al. (2009) discussed social justice as it applies to sexuality. Drawing from Thich Nhat Hanh, a Buddhist scholar and spiritual leader, and the Five Mindfulness Trainings, Linville et al. developed guidelines for gender and sexuality for students, schools, and educators. The following guidelines are an example of how they suggest social justice should be applied to sexuality education:

In schools, K-12 students seeking to support social justice should:

1. Be introduced to the point of view that sexuality is historically contextual, and that what is “natural” has been seen very differently by humans in different time periods and cultures. Sexuality appears in a variety of iterations in other animals;
2. Understand that all people have a right to pleasure in their bodies;
3. Explore the queer social justice issues that appear in the media and in the context of national and international human rights struggles, including LGBTQ persons’ rights to exist and have fully integrated lives in their communities;

4. Critically examine the structures of gender and explore the meanings they have in one's life and the connection to selfhood. Explore the right to live gender as one feels appropriate for oneself;
5. Investigate and understand the connection between gender and sexuality norms and power imbalances between women and men, and between queer and straight persons;
6. Explore the possibilities for relationships between boys, between girls, and between boys and girls without stigma or coercion;
7. Explore and appreciate the lives, abilities, intelligences, uniqueness, personalities, emotions, and the inherent and independent value of people of all sexualities and genders; and
8. Explore the connection between homophobia, sexism, racism, speciesism, ableism, ageism, and other forms of binary structures that portray some persons/beings as deficient or less worthy. Consider how these structures work to systematically privilege one class or group of persons more than others in society.

Schools and higher education institutions striving to structure their practices in accordance with the principles of sexuality justice should:

1. Expose how the hetero/homo binary opposition is insufficient to fully encompassing all dimensions of sexuality, pointing out that this reduction fails to account for sexual desires and practices that may not be tied to the gender of object choice;
2. Consider sexuality in relation to the pressures of other normalizing regimes pertaining to ethnicity, class, gender, citizenship, and social class;

3. Present queer theory as a mode of analysis (among many) and as an oppositional strategy that has the potential to disrupt normative and heteronormative discourses thereby challenging fixed identities as they manifest through various discourses;
4. Promote critical pedagogies that enable present and future educators to critique the reproduction of knowledge that serves the interest of dominant social groups;
5. Include sexuality in the discrimination policies, including granting domestic partnership benefits to LGBTQ couples;
6. Prepare adults with the necessary tools to question, critique, and disrupt identity categories in and across contexts through discourse-analytic approaches that challenge the habitual ways of reading/viewing and producing/designing texts;
7. Provide a safe space where students, faculty, and staff can engage in community with a spirit of friendship, thereby becoming responsible “allies” for others;
8. Include gender and sexuality variance in the university mission statements; and
9. Encourage scholarship that engages and challenges taken-for-granted views of gender and sexuality in the spirit of academic freedom.

Teacher educators, specifically those involved in teacher-education programs striving to teach in accordance with the principles of sexuality justice, should

1. Prepare teachers to discuss sexuality in the public sphere;
2. Prepare teachers to let students use their sexuality and their desires as pedagogical assets rather than liabilities;
3. Prepare teachers to utilize the history of LGBTQ persons and advocacy to empower and inform students in schools;

4. Prepare teachers to prevent bullying and hate-speech from occurring in schools;
5. Prepare teachers to use queer theory to challenge heteronormative practices (gender-sexuality) in schools; giving students the liberty to be who they wish;
6. Prepare teachers to utilize perspectivism to contest taken-for-granted texts, such as the literary canon and content textbooks;
7. Prepare teachers to serve as an ally to LGBTQ students, recognizing that each child has a right to an education, and that discrimination based on a student's sexuality denies a student access to that right;
8. Prepare teachers to understand that love and desire appear in myriad forms, and to use those forms as part of their teaching practices;
9. Prepare teachers that families and communities are not monolithic, but are diverse and plural, yet intricate parts of a child's education;
10. Prepare teachers to provide a safe classroom and school for every student; and
11. Prepare teachers to set aside their personal biases to help educate each student.

These guidelines present an example of a larger discussion that must take place in the American public classroom. Currently, sexuality education curricula violate these guidelines at every turn. Utilizing guidelines such as these and a rights-based approach (Berglas, Angula-Olaiz, Jerman, Desai, & Constantine, 2014a; Berglas, Constantine, & Ozer, 2014b; Dixon-Muller, Germain, Frederick, & Bourne, 2009), coupled with appropriate developmental strategies, this study sought to build a sexuality education program grounded in principles that support social justice in schools and the larger society.

Limitations

Within the research, many of articles and analyses have an obvious author bias. As the topic of sex education and politics is polarizing, the removal of all intent and slant is nearly impossible. Similarly, because this topic is heavily value based, interpretation of a successful outcome is left to one's own value judgment and criticality. Some may consider prevention of teen pregnancy as a successful outcome of a sex education program, while others may consider complete abstinence the goal. As a critical researcher, my own personal agenda of creating a program skewed the reading of the literature and analysis toward emancipatory goals, self-determination, and personal belief structures, which similarly blur the line of neutrality.

Program evaluation is difficult as the assumption is that the mandated program—whether AO or CSE—is being delivered without teacher bias and value judgment and with appropriate training. Often, health programs are embedded in physical education or science classes, and the teacher commissioned to provide the lessons is neither certified nor adequately prepared to deliver sex education programs. Similarly, curricular recommendations are made by public health or medical professionals with generally little or no educational preparation or pedagogical experience in the field.

Program design itself is also a limitation. Some states and districts mandate a health course as a graduation requirement, while others allow for an opt-out seminar style class within a single school day. While many curriculums are purchased through companies, some states commission groups to develop the standards for the program, and the experience and expertise of those commissioned varies widely. For example, Oklahoma appoints a board of nine to develop the state's curriculum. These nine are mandated to include five parents, one religious

representative, one nurse, one counselor, and one teacher. Time available to teachers, seasoned or not, to deliver material is a concern for the fair evaluation of programs. The wide variety of implementation styles and teacher training can often result in weakness in the full evaluation of the programming. Further areas for research would include teacher training, teacher bias in content delivery, and effectiveness of time spent on topics.

Finally, this study addresses a topic that is evolving at a hectic pace in the political and social climates of the United States. While all efforts will be made to include new developments, case law, and policy changes, it is nearly impossible to stay ahead of the rapidly moving current or to discuss facets that impact the execution of sexuality curricula. Hence, given the limitations of the study, the implementation of and teacher understanding and bias toward certain topics is not included in this analysis. To investigate these facets of sexuality curricula would require deeper study and represents an area for further research.

Key Terms

Abstinence-Only: Curricula that adheres to the “A-H definition,” established under the U.S. Social Security Act, §510(b)(2)

Comprehensive Sex Education: Defined by SEICUS as a program that includes age-appropriate, medically accurate information topics related to sexuality, including human development, relationships, abstinence, contraception, and disease prevention.

Critical Feminist Theory: A method to examine power structures and oppressive societal constraints through the lens of gender

Critical Pedagogy: A theory that asserts that inequalities related to asymmetrical power relations are central to an analysis of education policies, practices, and curriculum (Darder et al., 2008).

Human Sexuality: The biological, emotional, and social aspects of human sexual development

Interpretive Methodology: A qualitative research method that allows for the fluidity of social attitudes and relational nature of culture to be examined through individuals and social groups lived experience

LGBTQ Students: K–12 students who identify as lesbian, gay, bisexual, transgender or queer/questioning

Queer Theory: A social theory that challenges heteronormative discourse and policies, focusing heavily on nonheteronormative sexuality and sexuality practices.

Summary of Purpose

As this research has a deeply personal background, and the importance of this work in schools has, in my belief, the ability to reach students in a way unlike any other curricular subject can, this research has been developed in hopes of meeting three main goals:

- To understand the politics of and legal challenges to sexuality education and how they have shaped the current state curriculums;
- To serve as a means for student advocacy; as a voice for those who do not have one because of their age, gender, and sexual identity;
- To recommend critical principles for an inclusive curriculum that engages the gender and sexual identities of all students.

Although the goals may initially feel unrelated, there is a logical and natural progression with them. The most basic necessity for changing any systematic process is to understand the system itself. Context is crucial to the implementation of any change. We must know how we arrived at a specific type of curriculum, how the funding procedures were established and maintained, and who is in support of these out-of-sync principles in order to process how we might better identify and tackle resistance to change. These aspects are so tightly intertwined that it would be nearly impossible to do this work without considering all three as crucial goals of this study. Essentially, I ask, “Where did we come from, where are we now, and where do we go from here?” The politics of sexuality education are discussed thoroughly in Chapter 3, and pertinent legal cases analyzed in Chapter 4. Through these two discussions, the landscape of sexuality education brings all major political players to the table for consideration in the analysis.

The second goal illustrates the “why” of this work. Without a deeply passionate stance for student advocacy, a topic like sexuality education is hard to address for an extended period of time. Student advocacy in this work stems from a developmental need not being met. Chapter 3 provides an overview of traditional and modern adolescent sexuality development. The chapter illustrates that, regardless of religious and conservative beliefs, children and adolescents are sexual beings moving through the process of understanding the realities of the world around them and their place within it.

Finally, the outcome of the study is to offer recommendations for change, or to answer the final question, “Where do we go from here?” Principles for a socially just sexuality education curriculum are evidenced and explained throughout Chapter 5. Using a rights-based approach to

sexuality education and developmentally appropriate pedagogy, I suggest and advocate for change in state and federal curricular principles grounded in developmentally sound practice.

Although this study aimed to develop a gender- and identity-inclusive sexuality education curriculum, it should never be assumed that an accompanying goal is to undermine the primary educator of a child—the parents. Parents, familial ethics, religious values, and personal belief systems should always be honored in the development of a student’s understanding of human sexuality. Schools should serve as partners in this development—supporting students in what experiences they bring to the classroom, what they understand, and what knowledge they seek. As an inclusive curriculum, all viewpoints and experiences are honored, allowing for personal reflection and social location, in order to help adolescents determine their understanding of human sexuality.

CHAPTER 2

TRADITIONAL AND CRITICAL SEXUALITY THEORIES IN CONTRAST

Traditional programming in sexuality education focuses primarily on physical developmental markers (puberty, initiation of intercourse, pregnancy, etc.), rather than taking a psycho/social development approach to teenage sexuality. These programs are grounded in traditional theories of development and follow one of two paradigms: internally driven (biological) or socially shaped (socialization). These types of theories assert that teenage sexuality is something to be controlled and suppressed. In opposition, feminist theories of sexuality development take a more critical, sex-positive approach, recognizing sexuality as a natural human phenomenon that should be understood and nurtured. The purpose of this chapter is to understand the theoretical underpinnings of current sexuality programming offered in K–12 schools and discuss the conceptual lens that will ultimately shape the analysis and recommendations offered in Chapter 5.

Without thorough discussion of sexuality through the lens of power and inclusion, many students are left out of the educational programs, while intense developmental milestones and important knowledge are ignored. As Irvine (2002) stated, with respect to minimizing the expansive and inclusive nature of a developmentally appropriate sexuality education program:

Sex education debates are particularly volatile because they concern children. Indeed, the ideal of what historian Anne Higonnet calls the Romantic child- our modern image of a naturally asexual, pure childhood- is at the heart of a century-long conflict over sex education. By definition, the Romantic child's innocence depends on protection from sexuality- shielded from all information and knowledge. Since the initial calls for sex

education in the public schools at the turn of the twentieth century, the phantasm of the innocent child being dangerously corrupted by sexual talk has provoked controversy... Sexual innocence, they claimed, would best be preserved through basic instruction that would thwart the child's sexual curiosity and dampen the imagination. (p. 13)

As such, and in response to current absences in the curriculum, this chapter seeks to identify critical theories of adolescent development with respect to sexuality and identity development, with an emphasis on feminist thought. It is worth noting here that, although studies are available regarding young adults and sexuality (i.e., engaging in premarital sexual intercourse), for the purpose of this study, the focus is placed on K–12 programming, and, therefore, a review of post–high school sexual behaviors would fall outside the scope of this study. The second half of this chapter identifies emancipatory theories of gender and sexuality development through a critical feminist lens and discusses implications of these developmental stages in contrast to traditional theories of human sexuality.

Traditional Views of Adolescent Sexuality Development

Teenage sexuality challenges both the public and the research community because teen sex is obviously not about reproduction or long-term mating behavior in kin groups—or even about love. Teen sex makes adults admit that sex may be purely about play and pleasure. (Risman & Schwartz, 2002, p. 22)

Miller and Fox (1987) argued that there are two general paradigms from which one can begin to understand and study human sexuality: biological and socialization or nature versus nurture. The first, a biological paradigm, asserts that the appearance and activation of sexual hormones, which stimulate the development of secondary sexual characteristics (breast

development, pubic hair, etc.), should be considered the root of teenage sexuality. This biological paradigm stems largely from the work of Sigmund Freud (1933, 1953) and his psychoanalytic theory, which suggests that sexual urges stem from internal drivers that develop across the stages of life, beginning with newborns and their focus on oral pleasure and ending with genital pleasure. According to his theory, sexual development in this paradigm is an unavoidable, internal process of biology, with urges driven by hormones. Hence, human sexuality is principally a physiologically or internally driven phenomenon. While Freud's work and its focus promoted the social control structures put in place to control adolescent sexuality, it should be noted that his work has been pivotal in changing the conversation. Freud established a conversation around sexuality as a natural part of human nature, arising in childhood and changing throughout the course of a life.

Internally Driven Sexuality

Udry, Billy, Morris, Groff, and Raj (1985) emphasized biological—mainly hormonal—reasons for why teenagers, particularly boys, engage in sexual behavior. This biological view of sexual development also suggests that, as teenagers mature, they must be taught to have greater control over their sexual urges. In separate studies of hormone assays, the researchers asserted that for teenage boys, the “degree of involvement of socially determined patterns of sexual behavior is heavily influenced by serum androgenic hormones” (Udry et al., p. 94). The data showed that teenage boys with a higher level of testosterone, a male sex hormone, were more likely to have engaged in a sexual outlet (masturbation, sexual intercourse, or wet dreams) and had a high level of sexual motivation (Udry, 1988; Udry et al., 1985). However, data for teenage girls were less consistent when studying androgen hormones and their effects on sexual

intercourse, although they did seem to impact sexual motivation and female masturbation (Udry, Talbert, & Morris, 1986). Essentially, the higher the testosterone level, the more difficult it is for a teenager to control his sexual urges. This line concluded with the assertion that females, who have less sexual urges, must control male sexuality. However, in a study conducted by Robert Sapolsky (1997) at Stanford University, his team found the relationship between testosterone and aggression to be different than originally thought. In the traditional paradigm, researchers linked testosterone levels with aggressive, or—for the purposes of this study—sexual behaviors. What Sapolsky found was that the removal of testosterone from the body did not stifle aggressive urges. Similarly, when testosterone was replaced, even at heightened levels, aggressive behaviors did not rise above the pre-experiment levels. Instead, “subsequent behavioral differences drive the hormonal changes, not the other way around” (Sapolsky, p. 2). The study explained that environmental factors trigger behaviors, rather than hormonal causes. The consequence of such assertions regarding the inability of males, due to testosterone, to control their behavior is another example of the systematic gendering of human sexuality, which then has been reflected in traditional developmental theories.

As Miller and Fox (1987) have explained, the view of adolescent sexuality as a biological process of urges and tendencies “entails a corollary that sexuality can be an explosive or disruptive element if left unchanneled or uncontrolled” (p. 270). Essentially then, the issue of teenage sexuality is reduced to a process of inadequate sexual control that teens (particularly males) will eventually outgrow later in life. Hence, this view of teenage sexuality as an uncontrollable phenomenon that “threatens to overwhelm all common and moral sense” (Bay-Cheng, 2003, p. 62) served as the basis for the calls for teen virginity.

Proponents of biological paradigms have tended to applied them to sexuality education to emphasize the role of external social controls for teenage sexual expression (Udry, 1988). They have argued that because sexuality is an internally driven biological process, it must be actively controlled through external forces. As Bay-Cheng (2003) explained, the reduction of teen sexuality to a biological process of deviation and hypersexuality “succeeds in giving inevitable and natural cause for adult intervention and surveillance. It is not predicated on what behaviors teens actually engage in, but rather on the constructed identity of ‘teen’” (p. 63). With the co-opting of the biological paradigm to allude to a necessity to control behavior, teens who do not maintain their virginity have been seen to be misbehaving or deviating from the desired norm.

Using data from a longitudinal study, Jessor and Jessor (1975) reported that students who had engaged in sexual intercourse were more likely to have a lower value of, and lower expectations for, achievement in their schooling. Additionally, “Miller & Sneesby (1987) reported that student grades and plans for future schooling were inversely related to sexual intercourse experience” (Miller & Fox, 1987, p. 273). Substantial research has posited that teens who have substantial future goals, expect to graduate from both high school and college, and involve themselves in school activities, such as athletics and the arts, are less likely to engage in sexual risk-taking behaviors. Additionally, students “who are strongly attached to societal institutions such as family, school, or peer group would be inhibited from engaging in deviant behavior” (Ensminger, 1987, para. 16). These students are also more likely to delay sexual activity or use effective contraceptive methods (Planned Parenthood Federation of America, 1986). Students from higher socioeconomic status neighborhoods have access to schools with more services, support, and opportunities. The research on aspirations and involvement and the

onset of sexuality activity has explained that “parental social class may influence adolescent sexual behavior through its effect on aspirations—adolescents from lower class backgrounds have lower educational aspirations and adolescents with lower education aspirations are more likely to be sexually active” (Ensminger, para. 67). Hogan and Kitagawa (1983) determined that Black, teenage girls living in a Chicago neighborhood with a high poverty rate had a higher rate of initial sexual intercourse than girls living in neighborhoods of higher social class (Ensminger). Additionally, data from the National Longitudinal Survey of Youth indicated that adolescents from lower-class families are more likely to be sexually active than adolescents from middle or upper-class families, particularly for female adolescents. “In fact, 38 percent of teen women who left school prior to graduation had a subsequent pregnancy and birth while still a teen, compared to 11 percent of young women who did not” (Fine & McClelland, 2006, p. 302). Generally speaking, this allows for a direct correlation between race and adolescent sexuality as it becomes a question of access. This line of research about the inverse relationship between sex and achievement goals has fueled the drive of proponents of the biological paradigm to control adolescent sexual behavior.

Social control theory has often been referenced when discussing teenage sexuality. Those who place weight on social control as a model for teenage behavior have stated that “deviance is taken as the normative state; that is, in the absence of constraint, adolescents could be expected to act on deviant motivations and tendencies” (Miller & Fox, 1987, p. 273). Social control theorists have identified conformity to social convention as the theoretically important behavior. Applying social control theory, a line of research has asserted parental control behaviors as specific to the prevention of teenage sexual behavior (Inazu & Fox, 1980; Parsons, 1951).

Parsons stated that the role of parents is to deter teenage sexual behavior (deviant to the norm of virginity) through rules, supervision, and policing. However, Inazu and Fox, and later Fox (1986), found there was no relationship between a parent's supervisory behavior and a teenage child's sexual status. However, Jessor and Jessor (1975) found that parental involvement and supervision did delay sexual debut in teen children. While findings are mixed about parental supervision, Planned Parenthood Federation of America (1986) identified peer pressure as the single most influential factor on teenage sexual behaviors and sexual debut in a national survey of adolescents. This line of research about parental control has emphasized the underlying belief in the need to curb teenage sexual expression, sending the message that the norm for teenagers is to be asexual and to fight against this natural developmental process as human beings.

Sexuality as a Socially Learned Behavior

Considering sexuality as a socially learned behavior is the second paradigm: the shaping of teenage sexuality, acceptable behaviors, and sexual expression is formed by society. The major emphasis in this paradigm is placed upon teenage socialization and social learning, symbolic interaction, and social context (Miller & Fox, 1987; Udry, 1988). As DeLamater (1981) has explained:

Several analysts have stressed the impact of social institutions on sexual behavior.

Institutions control behavior in three ways. First, they provide a specific perspective, a set of assumptions and norms, that defines reality for adherents and thus serves as a basis for self-control. Second, those who occupy institutional roles will utilize the perspective in interactions, as a basis for informal controls. Third, institutions may have sanctioning systems that are activated when norms are violated; fear of sanction is thus an additional

source of conformity by participants. The two major institutions that directly govern sexual activity in contemporary American society are religion and family. (p. 264)

In other words, socialization models assume that conformity to societal expectations does not occur in the absence of social learning. They differ directly from biological paradigm models, which view sexual expression as a naturally occurring, deviant behavior in teenagers, while socialization models argue that nonconforming behaviors (i.e., sexually active behaviors) are instead taught and learned.

For example, DeLamater (1981) asserted that the Christian tradition has a major influence on the restriction of teenage sexuality. As religious doctrine embraces a procreation-only view of sexuality, any sexual behaviors with a purpose other than procreation (e.g., unmarried teen sex, homosexuality, masturbation) would, by the Judeo-Christian tradition, be deemed deviant and taboo, rather than developmental and natural. Adolescents with families or close relations who attend Church services regularly are more likely to adhere to religious stipulations regarding appropriate sexual behaviors. DeLamater further explained that the legal system and existing laws in the United States are based on religious doctrine, therefore, “to the extent that legal institutions influence sexual expression, they reinforce the impact of religious ones” (p. 265).

Socialization models lean heavily on parents and peers, although peers are seen to have a much higher impact on teen sexual learning because parent-child communication about sexuality is most frequently minimal or nonexistent (Fox, 1986). When the communication line between parent and child is open about sexual behaviors, for example, daughters receive the most attention from mothers (Kahn, Smith, & Roberts, 1984). An example of socialization models

would be symbolic interaction, which revolves around two central principles tied to concepts at both the individual and social-psychological levels. “General principles from this theory include the ideas that we see things not as they are, but as we are; and that the things which are perceived to be real will be real in their consequences” (Miller & Fox, 1987, p. 277).

Moreover, from this framework, the explanation for teenage sexual behavior is considered crucial for understanding how an individual’s perception of self as the “good girl,” the “initiator,” the “party boy,” or another socially defined role often predicts or precipitates early sexual experiences. These perceptions are often set by interactions with different types of meaningful partners: parental, peer, and romantic. Interpersonal interactions with these meaningful partners are therefore important as adolescents develop shared meaning and understandings (Miller & Fox, 1987). Finally, social context theories such as Reiss’s 1964 sociological theory of premarital sexual permissiveness “views social forces, including primary or immediate relations and secondary group associations, as the major antecedents of adolescent sexuality” (Miller & Fox, 1987, p. 278), rather than the hormonal drive, as asserted in the biological paradigm.

Generally, studies of adolescent sexuality have focused on sexual expression with regard to premarital initiation of intercourse. However, DeLamater (1981) explained:

How a person expresses sexuality is a consequence (a) of the processes of socialization and social influence by which s/he learns a perspective and social norms, and (b) of influence by partners in specific relationships. Sociological research has focused on how sexual expression is influenced by three socializing agencies: religion, family, and peer group. (p. 269)

Using a life-cycle framework while applying the 1973 work of Gagnon and Simon and the 1977 work of Laws and Schwartz, DeLamater (1981) articulated the arc along which gender identity and sexual intimacy are developed in children and adolescents. The sexual identity process begins in the earliest stages of life, as parents label children through sex assignment (male or female), which is typically based on observed genitalia at birth. As the infant ages, adults continue to reinforce this sexual identity based on cultural expectations and gender stereotypes, which in turn creates in the child their own understanding of gender. Additionally, childhood play continues to reinforce these gender identity stereotypes. DeLamater (1981) explained that a child's observation of parental dyads of woman/man and couples engaging in affection also shapes the child's understanding that a member of the opposite gender is to be desired and, thus, considered the appropriate sexual partner.

The media consumed by adolescents also plays a role in defining gender identities and roles. According to the Canadian Pediatric Society (2003), "Teens rank the media as the leading source of information about sex, second only to school sex education programs" (para. 27). Since adolescents' cognitive skills are not developed enough to allow them to think critically about messages in the media, they are particularly vulnerable to the roles and attitudes they portray (Gruber & Grube, 2000). "Adolescents of both sexes who watch and listen to a lot of media are more likely to accept stereotypes of sex roles on television as realistic than are less frequent viewers" (Gruber & Grube, para. 9). A study by Brown, White, and Nikopoulou (1993) found that adolescent girls used sexual content in the media to understand roles and expectations for their behavior in romantic relationships, find examples of the "right look" to attract adolescent boys, and gain direction on how to behave in sexual situations.

In general, media continue to present both women and men in stereotyped ways that limit our perceptions of human possibilities. Typically, men are portrayed as active, adventurous, powerful, sexually aggressive and largely uninvolved in human relationships. Just as' [sic] consistent with cultural views of gender are depictions of women as sex objects who are usually young, thin beautiful, passive, dependent, and often incompetent and dumb. (Wood, 1994, p. 32)

Another function of sexual maturation that appears in early childhood is the desire and willingness to manipulate one's body parts. This, however, is not considered sexual in nature, but more a behavior of discovery and exploration (Gagnon & Simon, 1973). Children often gain interest in not only their own genitalia, but also the genitalia of others. This interest is not sexually driven as it is in adults; rather, it is a clinical examination of "my-versus-their" body. Often, parents express "moral outrage" toward such behaviors and teach that this type of self-exploration is inappropriate. These injunctions (e.g., "Don't touch yourself!"), which frequently are given without explanation, are a type of sexual socialization that affects the child's understanding of their and other's sexuality (DeLamater, 1981). As Inazu and Fox (1980) found, by age 11 only 20% of children had had a conversation with parents about sexual morality and intercourse. This type of negative interjection with no follow-up conversation furthers the sexual shaming of children. During childhood, parents and family are the primary influence on sexual understanding and identity development, DeLamater explained. As they near adolescence, given their minimal conversation with parents about sexuality, youth turn to their peer group as their primary influencers.

Adolescence, the period of development between the onset of puberty and the completion of high school (or age 17), is a time of both physical and social pressures. With regard to sexuality, Feldman (1972) described that, during adolescence, the person transitions from a childhood role of submissiveness, nonresponsibility, and asexuality to an adult role, in which dominance, responsibility, and sexuality are emphasized. Sexual identity, defined by DeLamater (1981) as “knowledge about one's body and sexual functioning, a sense of one's attractiveness to others, and an image of oneself as sexual” (p. 271), is a topic of great consideration in adolescence. Development of a sense of sexual adequacy is crucial for maintenance of self-worth and control of stress regarding relationships. Peplau and Hammen (1977) contended that gender identity affects sexual identity in that, due to social traditions and patterns within society, men are more likely to initiate sexual activity, while it is up to the female to respond and set behavioral limits. This further emphasizes why peers, namely romantic peers, are the primary drivers of information regarding sexuality (DeLamater, 1981).

Gagnon and Simon (1973) asserted that male and female adolescents have different perspectives and motivations for sexual behavior. Males, according to their research, viewed sexual intercourse as primarily recreational and that physical pleasure was the main purpose for pursuing their sexual interests. Additionally, males were identified as having a higher social status if they were engaging in sexual intercourse. In contrast, female adolescents were said to use sexual behaviors as a relational tool, as a means toward falling in love and marriage. Influenced by the power of such perspectives, females were more likely to limit their sexual behaviors and engage when the interest of developing a romantic relationship was prominent. Gagnon and Simon believed that these different personal narratives around sexual intimacy cause

conflict within adolescent couples, and assert that their research that is consistent with findings in similar studies conducted by Ehrmann (1959), DeLamater and MacCorquodale (1979), Jedlicka (1975), and Sorensen (1972).

Fisher and Byrne (1978) used erotic films with either a lust (casual sex) or love (romantic) theme to measure physiological arousal responses in male and females. They were unable to identify any difference based on gender and reported that both genders were more aroused by the lust-themed films. While women were less likely to verbally report a positive reaction to the erotic material, within the lab setting, the data indicated women were just as responsive as men with respect to physiological sexual arousal. These findings contradicted other studies that reported gender differences in sexual arousal; however, it should be noted that the other studies were based on self-reports of arousal activity, rather than physiological measuring.

In both the biological and social paradigms of sexuality development, the issue of control is central. Controlling the inescapable hormonal urges to deviate from the norm is of primary concern in the biological paradigm. In the socially driven paradigm, the goal is to control information to prevent learning from deviating from the desired norm. Regardless of whether they prefer the biological or social paradigm, proponents of information control assert the need for an intense form of control over the teenage sexual development process with the hope that adolescents will conform to the belief that sexual expression is perverse and abnormal. Rooted within these models are programs and curricula provided to schools that rely on the call for control, which takes power and agency away from developing teens and gives it to adults. This lack of power over one's own body results in ill-informed and ill-prepared young adults who are more apt to become involved in unjust and debilitating sexual behaviors, since they lack the

knowledge and skills to navigate the terrain of their sexuality in truly nourishing and empowering ways.

Critical Sexuality Theories: Gender, Power, and Sexualities

The aforementioned theories of human sexuality have traditional viewpoints that have impressed upon generations rigid gender and identity stereotypes, which has led to disempowering feelings of shame and negative reactions related to budding teen sexuality. However, this sense of control has been hegemonic, positioning its viewpoint as commonsensical. The tension in sexuality education has been ideological, which sets up sexuality education as a contentious topic. Critical theory has sought to break through commonsense notions, specifically as they relate to binary gender. This false perception of binary gender is problematic and sets up constructs of oppression; the hard binary is part of traditional, positivist approaches to sexuality education. What the subsequent sections illustrate are critical, emancipatory views of adolescent sexuality with regard to the complex, multifaceted nature of gender and identity development, which are in direct opposition to perpetuating implicit gender norms and expectations in childhood—norms and expectation that predominantly focus on social control of teenage sexual behavior.

Russell (2005) paraphrased Welsh, Rostosky, and Kawaguchi (2000) when he stated, “Adolescent sexuality typically is defined in terms of heterosexual intercourse, which is generally considered to be a problem behavior in adolescents.” He continued by stating, “This narrow, heterosexist, and negative frame has hindered the development of models of positive adolescent sexuality development for use in research, policy, or practice” (p. 8). Social control theory implies that human sexuality is not and then is; the child and adolescent are asexual and

then become sexual as adults. There is no recognition of natural development or evolution in the child, adolescent, or young adult. Human sexuality is a natural process; one does not move from a state of asexuality in youth to a healthy, active sexuality in adulthood. Sexual maturation is a process that critical feminist and queer theorists have acknowledged and emphasized as one that should be nurtured and facilitated as a course of organic human development. As children reach puberty, their bodies mature biologically. Similarly, the adolescent brain matures through defining experiences and natural curiosities about the world around and within it. Through an examination of sex-positive viewpoints and a critical understanding of gender and identity development in childhood and adolescence, new curricula that are both responsible and responsive to the needs of youth can be developed and put forth.

Sexual Oppression

Research on child and adolescent sexuality has been historically understudied due to cultural and political barriers, and research that is available has tended to focus on the individual rather than the culture and social condition in which the individual resides (Herdt, 2004). Largely ignored are the institutions and cultural structures that influence the sexual behaviors and attitudes of the developing individual (Gagnon & Simon, 1973; Herdt). Because of this, sexual desire and behaviors have been viewed as the product of internal drives or moral weakness (Herdt, 2004; Moran, 2000). Consequently, social oppression has been completely left out of the research on adolescent sexuality, until more critical theories emerged and researchers began studying the roots of social oppression and their effects on sexual inequality in the United States.

Herdt (2004) contended that, more recently, scholars examining the forces of structural violence in human life have turned to Paulo Freire's (1970) *Pedagogy of the Oppressed* as a

“general guide to analyze the roots of social difference and social oppression in particular” (p. 40). Farmer (2002) defined “structural violence to include poverty, racism, and inadequate health care as among the host of offenses against human dignity” (p. 8). In both direct and indirect ways, social oppression seeps into all aspects of human life where power differentials exist.

Women often suffer from powerlessness with respect to existing barriers to educational and economic equity, which can indirectly serve as critical factors in the production of sexual inequalities. Similarly, the oppression of children and adolescents manifests in the study of sexuality as they interact with heterosexism and homophobia, sexuality rights, and access to information. In traditional models of sexuality development, girls are generally spoken of merely as a reference to male sexuality, whether as a gatekeeper to men’s natural urges for sex or in comparison to male hormonal development. Intentionally then, the discussion in the following sections begins with female sexuality in an attempt to flip the script and discuss female sexuality as a focal point of its own importance, not as a secondary discussion.

Female Sexuality

As girls learn the demands of femininity in a male-dominated society, they are also attempting to understand their own sexuality. The development of a healthy sexuality occurs most prominently in adolescence, and girls face a distinct dilemma in balancing social control tactics and personal sexual growth. Impett et al. (2006) asserted that a feminist understanding of adolescent female sexuality demands attention to “how girls develop an internalized recognition of themselves as women in their behavior, thoughts, and feelings and through others’ responses to them” (p. 132). In a patriarchal society, girls are expected to behave in distinctly “feminine” ways, such as avoiding conflict, suppressing anger, and having a generally pleasing demeanor, as

well as managing their own bodies to conform to a standard of beauty and appeal. “Adolescent girls come of age in a patriarchal society in which they are under pressure to be seen and not heard” (Impett et al., p. 131).

Similarly, in a culture in which the heterosexual male is considered the dominant gender, girls reported that sexual attention from male peers validates their femininity, even when the attention was borderline or outright harassment (Conroy, 2012). As female adolescents attempt to navigate their sexuality, they are reminded of the confines of hegemonic femininity, in which they should be sexually attractive to men while simultaneously remaining pure or virginal. Labels such as “slut” and “whore” are used as methods to control female sexuality (Armstrong, Hamilton, Armstrong, & Steely, 2014; Rahimi & Liston, 2009). “‘Slut shaming,’ the practice of maligning women for presumed sexual activity” then is strictly about “sexual inequality and reinforces male dominance and female subordination” (Armstrong et al., p. 101). Therefore, harassment is a means used by the dominant male; he “reminds them when they have failed to perform accordingly” (Conroy, p. 347). Adolescent males assert a powerful role over adolescent females in that they socially reward particular femininities. Adolescent girls face a strict double standard against normalized sexual behavior for adolescent boys (Armstrong et al.).

This conflict leads to a suppression of self and limiting of female sexuality, so that the female’s sole importance becomes meeting the demands of the dominant male. In the process, teen female sexuality and desire is often both delimited and maligned. Fine and McClelland (2006) described the use of abstinence-only curricula and the lack of discussion about female sexual desire as having led to a crusade in education that has promoted the value of abstinence, warned of the dangers of sexuality, and approved only marital intercourse. Lodged then within

sexuality education, particularly for female students, is an aura of fear and shame concretely deserting all conversations of pleasure and desire (Fine & McClelland, 2006).

As such, adolescent girls are subject to a type of inauthenticity in relationships (Impett et al., 2006). This tendency, brought on by a girl's desire to maintain relationships, leads to a "loss of voice" (Brown & Gilligan, 1992), "false self-behavior" (Harter, Waters, & Whitesell, 1997), and "silencing the self" (Jack & Dill, 1992). The behaviors, or inauthenticity, emerge particularly when the girl's true ideas, perspectives, or emotions undermine what patriarchal society has deemed "feminine." These self-undermining behaviors carry over to the sexual needs and desires of the female, furthering the belief that sexual needs and desires are grounded in male sexuality, reducing the female's sexual agency. On this subject, Fine (1988) asserted:

Within today's standard sex education curricula and many public school classrooms, we find: (1) the authorized suppression of a discourse of female sexual desire; (2) the promotion of a discourse of female sexual victimization; and (3) the explicit privileging of married heterosexuality over other practices of sexuality. (p. 30)

Females are educated to know themselves as the victim of male sexuality, with no representation of herself or her needs (Fine). This reduction in female sexual agency, and the inability (or unwillingness) to assert needs leads to sacrifice regarding protection (e.g., condoms) and increased participation in risky sexual behaviors (Impett et al.).

Additionally, the feminist developmental perspective explains that girls, as they learn to negotiate their existence in a female body, begin to control their physical and behavioral lives in response to the social objectification of women's bodies. The embodiment of feminine constructs includes both losing awareness of the body's desires and needs and training the body to move in

purely feminine ways. De Beauvoir (1961) asserted that girls perceive and internalize a “male gaze,” which is then turned upon the self to evaluate and assess rather than to feel and experience one’s own body (Impett et al., 2006). When applied to female sexuality, this experience translates to a woman’s inability to assert her needs and desires, focusing solely on her responsibility to conform to a man’s expectations of her sexual expression. Additionally, the self-objectification of one’s body negatively impacts a sense of self-worth, resulting in a willingness to engage in risky behaviors and forego adequate protection for fear of being disliked or abandoned by a desired partner. Both inauthenticity in relationships and self-objectification behaviors result in a lacking self-efficacy in sexual health, as Impett et al. explained in their research:

The negative associations between femininity ideology and sexual experience suggest that girls who internalize norms of traditional femininity may find it difficult to voice their sexual desires and engage in wanted sexual behavior...The finding that sexual self-efficacy mediated associations between femininity ideology and protection behavior points to the specific importance of self-efficacy for adolescent girls’ sexuality. Being able to assert one’s sexual desires and needs may be a critical prerequisite for enacting safer sex practices. Consequently, the extent to which conventional femininity ideology inhibits this ability may present a threat to the sexual health of adolescent girls. (p. 140)

In their 2015 study, Zimmer-Gembeck, See, and O’Sullivan correlated these assertions when they found that “sexually active young women who participated...were more satisfied with their sexual and romantic relationships and reported more positive emotional reactions...when they had elevated sexual self-esteem, felt more entitled to desire and pleasure, and felt more

sexually efficacious” (p. 119). Carrera-Fernandez et al. (2016) asserted that power is found in hegemonic heterosexual femininity and that girls derive prestige and value in controlling not only their own bodies, but also the bodies of other girls through the “virgin/whore binary discourse” (p. 11). Girls who actively portray themselves as sexual are devalued, while girls who do not portray enough of a sexual presence are reduced to a (negatively connoted) virgin label. This sexual double standard makes negotiating female sexuality nearly impossible for adolescents.

Male Sexuality

Researchers in the field of gender identity have found that the opposition of male and female, the behaviors and stereotypical roles that define masculinity and femininity, begins at birth and continues throughout adulthood. Because of these socially constructed and restrictive roles, boys learn to value heteronormative male attributes over perceived female qualities. These attributes are found to be more socially rewarding and acceptable (Theodore & Basow, 2000). During adolescence, males also use their developing sense of understanding of masculinity to project and protect their sense of self. One manner in which they leverage their understanding is through homophobic-toned language to insult and demonize fellow male adolescents. It is important to note that, while this linguistic warfare is not restricted to males, it is most often directed toward and originating from other male students (Burn, 2000; Pascoe, 2005; Plummer, 2001; Poteat & Rivers, 2010), and female groups are much less likely to stigmatize those perceived as lesbian (Burn).

It is important to note that the use of terms such as “fag,” “faggot,” “gay,” and “homo” are not solely linked to sexual behavior; rather, they project onto or illuminate in others a

perceived weakness. Pascoe (2005) explained that adolescent boys use the term “fag” and other associated derogatory terms as discourse or discipline to reveal weakness in another. Feminist scholars frequently document the use of homophobic insults to contradict masculinity, particularly in school-aged boys (Burn, 2000; Kimmel, 2003; Plummer, 2001; Smith, 1998; Wood, 1984). This type of homophobic-toned bullying shapes and enhances a perceived masculinity in adolescent males (Theodore & Basow, 2000). However, to cast it as solely homophobia undermines its use as a tool of masculinity (Pascoe, 2005; Poteat & Rivers, 2010). The use of the word “fag” or similar epithets are a play on power or the way in which one abdicates their power by being less than masculine, not as a direct reference to a set of sexual acts.

Evidence of homophobic language, disproportionately delivered by male students, often targets straight male classmates in an attempt to “shape contemporary heterosexual masculine identities” (Pascoe, 2013, p. 88). Straight male students engage in such harassing of other boys as a way to create a hierarchy of masculinity through gender socialization. Labeling this type of homophobic aggression against other straight males as bullying is not so simple; rather, it is a way in which these socialization strategies build, support, and preserve sexual inequalities (Pascoe). Carrera-Fernandez et al. (2016) explained that the use of homophobic language is “a way of controlling the boundaries of acceptable masculinities” (p. 13). In a 2001 study, Plummer found that these terms were “often used in reference to boys who stood out from their peers because they were slow to develop physically, soft, shy, smart and/or showed insufficient commitment to male peer group structures and values” (p. 19) or that their use “adheres to adult authority in preference to peer group codes and/or who doesn’t participate in team activities” (p.

21). Carrera-Fernandez et al. posited that the playground became a “battlefield...where one must display hegemonic masculinity” to avoid ridicule and harassment (p. 9). Straight male students used jokes and rough play to prove and defend their masculinity.

Plummer (2001) also asserted that even without the sexual connotation, these homophobic-toned insults quickly become the most socially destructible terms available to male youth. The fear of such a label, given the implication of loss of social power, causes a policing of behaviors to avoid it (Burn, 2000). As such, any boy can be deemed a “fag” and, therefore, the threat “infuses the term with regulatory power” (Pascoe, 2005, p. 333). Discourse monopolizing sexualized terminology proves to be a way in which power structures are enacted and stabilized. Through imitation, mockery, and language, adolescent boys prove their own masculinity by calling into question the masculinity of others. These types of interactions position the use of homophobic-toned bullying as central to defining adolescent masculinity (Pascoe, 2005; Theodore & Basow, 2000).

Sexual Orientation

Sexual orientation, defined by the Human Rights Campaign (2017), is “an inherent or immutable enduring emotional, romantic or sexual attraction to other people” (para. 1). Orientation differs from gender identity, an inner concept of personal gender identity that may or may not align with biological sex. In school, adolescents who find themselves attracted to members of the same sex (homosexual) or either sexes (bisexual) or questioning (exploring their orientation) most often also find themselves on the margins. “Same-sex romantic attraction during adolescence is strongly linked with some of the most serious health challenges in the lives of adolescents, including victimization, compromised emotional health, and suicide” (Russell,

2005, p. 6). Understanding how sexual orientation affects adolescents is crucial to providing recommendations for an inclusive sexuality education program, but more so in starting a conversation to change the security these students feel, or do not feel, at school.

Burn (2000) contended that lesbianism is somewhat “invisible” due to the lower social status of women and the more frequent media portrayals of male homosexuality. Additionally, females do not feel threatened by lesbianism, as women do not “fear being preyed upon by lesbians as much as they do by heterosexual men” (p. 3). Russell (2005) explained: “Strict rules of heterosexuality permit young men to be more sexual in the context of heterosexuality (and indeed create expectations for their heterosexual expression and aggression) while at the same time fully restrict them from any same-sex expression. (p. 7) Thus, while the heterosexual double standard is alive and well for young women (Risman & Schwartz, 2002), the homosexual single standard is, ironically, perhaps more limiting for adolescent men than for women (Koch, 1993). It is worth noting that there is a significant research gap regarding homophobia in adolescent girls. While the research used for this work suggests that homophobia is alive and well in adolescent male circles, the effect in the female social structure is understudied and is an area for further research. The lack of discussion in this dissertation should not signal that it is assumed to be nonexistent.

True homophobic bullying, differentiated from the aforementioned use of homophobic terms as a tool of masculine structure, has devastating effects on the adolescent sense of self and worth. The defaming effect of homophobia causes inescapable destruction on the psyche of an LGBTQ+ youth, regardless of their “out” status. This content is internalized (Burn, 2000) and can cause feelings of self-contempt (Thurlow, 2001). Additionally, the use of homophobic

pejoratives creates feelings of isolation from both the larger community and one's own community (Burn). "The threat is therefore one of profound social and psychological alienation, rendering the 'invisibility' two-fold as these young people cease also to exist even within, and for, themselves" (Thurlow, p. 26). The acute and lasting consequences of homophobic bullying are well documented, alerting advocates to a unique need for intervention and prevention efforts for marginalized youth (Poteat & Rivers, 2010). According to Fine and McClelland (2006), sexuality education curricula, when rooted in abstinence-only principles, not only fails to address the needs of LGBTQ youth, but also perpetuates the atmosphere of harassment. The failure to address the heteronormativity in AO curricula "not only denies LGBTQ youth legitimacy, but it also asks them to hold aside significant pieces of their identities in order to participate in the moral community of students" (Fine & McClelland, p. 311).

Combatting this psychological warfare on the marginalized LGBTQ+ population is the implementation of school-based safe spaces, affinity groups, and clubs. The most national of these clubs, the Gay-Straight Alliance (GSA), seeks to provide an environment of welcome, solidarity, and knowledge for LGBTQ+ youth and their allies.

School-based Gay Straight Alliances (GSAs) are an example of the intersections of the youth movement with the sexual, gay, and women's movements... Youth in these organizations tell about becoming empowered in terms of both their individual sexuality and sexual expression and their experiences of creating positive change in their communities. (Russell, 2005, p. 9)

Kosciw, Palmer, Kull, and Greytak (2013) found that schools with a GSA have been associated with lower rates of LGBTQ student victimization and a greater sense of belonging to the school

community. Similarly, they found that GSAs are directly related to the improved mental health of LGBTQ students and safeguard against the effects of gender- and identity-derived bullying. It should be noted that most GSAs now refer to themselves as Genders and Sexuality Alliance.

Implications

In this chapter, I have sought to contrast traditional theories that are founded in models of social control and behavior prevention with sex-positive, critical theories of gender, identity, and sexuality. What these traditional theories do not honor is the natural, developmental process in which children and adolescents make meaning and understand their own gender and sexuality. Rather, they merely explain away social and cultural stereotypes as developmental fact. In stark contrast, critical sociological and feminist theories of gender and sexuality offer a sex-positive perspective—one in which childhood, adolescent, and adult sexuality are inherently linked across a continuum, and sexuality is understood as part of the natural and healthy development of human beings across the lifespan.

In the concluding chapter of this work, dichotomous theories of sexuality are linked to major curricular movements in U.S. sexuality education and their ties to federal policy and funding in the hope of solidifying counter-recommendations for gender- and identity-inclusive programming. Progressing sexuality education to a more sex-positive and social-emotional development-driven curricula is crucial, as Russell (2005) illustrated:

It is clear that while adolescents in the United States are identifying and enacting their sexual desires in their lived lives, the most important settings in which they grow up—their families, schools, and faith communities—are failing to provide them with the skills

and resources they need to maintain health and to make healthy choices about sexuality.

(p. 6)

The next two chapters of this work analyze political and legal discourse surrounding sexuality education. These analyses are conducted to show the effects of social control theory on lawmakers and their actions in enacting policies to further religious and conservative ideologies. In stark contrast, the courts, likely with lessened influence of political constituencies, uphold and occasionally increase student access to information and programming that is meant to support their development. As the final chapter shows, it is possible under current law, policy, and funding to adequately serve American youth and support their natural development into healthy, self-efficacious young adults who make confident, safe choices.

CHAPTER 3

THE FEDERAL POLITICS OF SEXUALITY EDUCATION

Any thorough analysis of the current state of sexuality education must include a clear understanding of how the curricula arrived and the politics that cleared their path. No other public school curriculum content incites argument and includes so many people in discussion as sexuality education. As such, this chapter serves as a review of the political and economic maneuverings that have shaped the sexuality education curricula of today, with the legal (case law) discussion to follow in Chapter 4. The discussion here begins with the establishment of the Sexuality Education and Information Council of the United States (SIECUS) in 1964 and continues to the Obama Administration. As with any condensed version of political history, this study seeks to set up a conversation crucial to understanding the environment in which sex education lives without presuming to be an all-inclusive history of sexuality education in the United States.

An interesting dichotomy exists in sexuality education in that one cannot discuss state curriculum without understanding federal economic and curricular policies, even though each state ultimately selects its curriculum. These two entities are completely separate yet interconnected. In this chapter, I illustrate this dichotomy and how conservative and religious agendas of politicians often get in the way of medically accurate and publicly supported comprehensive sexuality education (CSE). To explore these agendas and the subsequent politics, it is necessary to analyze the public discourse surrounding sexuality education. Samuel R. Delany has stated, “To explore discourse is inevitably to tell a story: at such and such a time, people did this and that; thus they thought and felt one thing and another” (as cited in Irvine,

2002, p. 3). The following is the political story of sexuality education, as part of a long-standing history of efforts to control sexual morality through control of the sexual terms and debate.

Establishment of the Sexuality Education and Information Council of the United States

Initial calls for school-based sexuality education came out of a group of “moral reformers including suffragists, clergy, temperance workers, and physicians dedicated to eliminating venereal disease” (Irvine, 2002, p. 6). This effort resulted in arguments about whether to restrict or expand sexual speech in the public arena. Spawned by an effort to combat prostitution and concerns of “out of control” male lust, evangelicals continually called for parents to instill in their children a devout social purity. This continued into the early twentieth century, when contemporary debates were waged between the activists on either side of public hygiene and moral purity debates. In the early 1960s, educators, parents, and medical professionals constructed a movement to open discussion in public forums, such as schools, to allow for conversations about sexuality education to take place. It is important to note that, included in calls to acknowledge and adjust to the changing social morality with regard to sexuality, a renewed mainstream Christian thinking was also echoed. For example, “The Quakers issued a document criticizing traditional teachings that condemned premarital and extramarital sex and homosexuality” (Irvine, p. 23).

In 1964, SIECUS was founded and led by Dr. Mary Calderone, who since has served as the voice of this coalition for comprehensive sexuality education. Co-founded by Wallace Fulton, Rev. William Genne, Lester Kirkendall, Dr. Harold Lief, and Clark Vincent, SIECUS sought to establish sexuality as a natural and healthy part of life. Rev. William Genne, a minister with the National Council of Churches, challenged restrictive aspects of religion with respect to

sexuality and its intent to induce guilt through restrictions (Irvine, 2002). Publishing books for teacher training, serving as a resource for critical sexuality issues, and developing curricula for medical schools and college students, SIECUS emerged as a recognized leader in the field of sexuality education whose aim was to break from the social hygiene perspective of sexuality education and imposed moralism of the religious right.

Lamb (2013) noted, “In the many materials developed by SIECUS, few explicit moral messages were presented. The purpose of SIECUS materials was simply to provide information so that young people could make their own moral decisions” (p. 445). The following provides a list of position statements issued by SIECUS on the issue:

- **Human Sexuality:** Human sexuality encompasses the sexual knowledge, beliefs, attitudes, values, and behaviors of individuals. Its various dimensions involve the anatomy, physiology, and biochemistry of the sexual response system; identity, orientation, roles, and personality; and thoughts, feelings, and relationships. Sexuality is influenced by ethical, spiritual, cultural, and moral concerns. All persons are sexual, in the broadest sense of the word.
- **Sexual Rights:** Sexual rights are human rights, and they are based on the inherent freedom, dignity, and equality of all human beings. Sexual rights include the right to bodily integrity, sexual safety, sexual privacy, sexual pleasure, and sexual healthcare; the right to make free and informed sexual and reproductive choices; and the right to have access to sexual information based on sound scientific evidence.
- **Sexual Health:** All people have a right to healthcare services that promote, maintain, and—if needed—restore sexual and reproductive health. Healthcare providers should

assess sexual and reproductive health needs and concerns as integral parts of each individual's health and wellness care and make appropriate resources available.

- **Sexuality Education:** Sexuality education is a lifelong process that begins at birth. Parents/caregivers, family, peers, partners, schools, religious organizations, and the media influence the messages people receive about sexuality at all stages of life. All people have the right to accurate information and age- and developmentally appropriate education about sexuality. Sexuality education should address the biological, sociocultural, psychological, and spiritual dimensions of sexuality within the cognitive learning domain (information), the affective learning domain (feelings, values, and attitudes), and the behavioral learning domain (communication, decision-making, and other skills).
- **Culture and Society:** Sexuality is an intrinsic component of human identity. The variety of cultural beliefs, values, and customs related to sexuality has profound influence on both society and individuals. Cultural beliefs and norms are influenced and expressed through many institutions including families, communities, schools, faith-based organizations, and mass media. These institutions have an obligation to affirm sexuality in ways that support the sexual health and rights of all members of any society.

The Sexuality Information and Education Council of the United States became a target of moralists, as it framed the organization as a set of radicals in an era of right-wing revitalization. As the organization entered the conversation of sexuality in a time of political instability, it became a focus of highly public backlash campaigns and was spotlighted by religious

conservatives in emerging political discourse, despite SIECUS's position that all sexuality education should be values based (Irvine, 2002). Still, because SIECUS "supported sexual tolerances and a nonabsolutist approach to values" (Irvine, p. 28), the organization and its founder, Dr. Mary Calderone, became talking points of right-wing rhetoric. As Irvine explained:

The birth of SIECUS was to the sixties what *Roe v. Wade* was to the seventies: a symbol of change amid deep resistance. SIECUS made visible an increasingly sexualized society at a moment in which a new right-wing movement was gathering steam... By 1968, it became clearer that sex education would occupy a prominent role in cultural politics of the emerging Christian Right. (p. 34)

Throughout the 1960s, as the right wing used sexual politics to mobilize its base, SIECUS continued to its their efforts, and the requests for support in the public schools grew, fueled by changing social viewpoints. As sex educators attempted to respond to a rapidly changing world, Calderone and Esther Schulz, SIECUS's first education director, helped communities implement sexuality education curricula. Their efforts were supported through resolutions for comprehensive sexuality education from professional organizations such as the American Medical Association, the National Education Association, and the American Association of School Administrators and funding efforts through the United States Office of Education (Irvine).

Conservative Mobilization

By 1968, the new conservative movement, which had previously been considered dormant, was building a much more forceful public rhetoric on singular issues—sex education being one of the most prominent. This new powerful discourse brought discussions of the

morality of sexuality to the forefront of political battles and paved the way for what would be called the New Right of the 1970s (Irvine, 2002). Local battles built upon sex education unsettled the previously liberal-dominated political environment and propelled a convergence of oppositional movements. These loudening movements were appealing to conservatives who felt challenged or threatened by the increasingly sexualized culture and viewed it as a sign of a cultural decline of values. Outraged by the U.S. Supreme Court's decision to ban Bible reading and prayer in schools, conservative activists threw themselves behind the movement against sex education and its supporters.

Two national groups took the lead against sex education, Christian Crusade and the John Birch Society. Their endorsement of each other signaled a new era of unified conservative politics centered on a religious agenda. This movement utilized fear and the anxiety of the times to structure their arguments, relying on a growing, hyped fear of communism. A booklet written by Gordon Drake, Christian Crusade's education director, *Is the School House the Proper Place to Teach Raw Sex?* was the "most widely circulated propaganda of the organization. It hinted at a Communist agenda warning that 'if the new morality is affirmed, our children will become easy targets for Marxism and other amoral, nihilistic philosophies—as well as V.D.!'” (Irvine, 2002, p. 51).

Though the establishment of SIECUS was not the start of the sex education battle in the United States, it did propel the conversation to a national level and provide leverage for conservative politics to take a front seat in the following decade. The battle lines for sex education in public schools were drawn, and everyone from parents to politicians, doctors to

students were choosing sides. Sex education was now highly visible and a rallying point for many controversies to follow.

By the mid-1970s, the previous local oppositions to sexuality education had progressed to a national movement within the New Right. This New Right was merely a facelift on the Old Right—one that still supported conservative morality while distancing itself from the blatant racism and anticommunist rhetoric of the past. The New Right celebrated itself as champions of morality, which caused a swelling of membership. Their “pro-family” discourse proved “rhetorically powerful in that it linked opposition to a range of social justice issues and couched them as a defense of the American family against the incursions of feminism, gay rights, and sex education” (Irvine, 2002, p. 66). As a direct result of this growing political power, in 1975 20 states voted to abolish or restrict sex education in the public schools, favoring a conservative approach to the issue.

Two largely symbolic events established an arena in which the battle for sexuality and sex education intensified, and essentially propelled the Pro-Family Movement into prominence. The New Right vehemently opposed the work done at both of these meetings and utilized scare tactics and half-truths to mobilize their base. The International Women’s Year conference of 1977 and the White House Conference on Families in 1978 demonstrated the power yielded by the New Right through formation of a nucleus of sexuality-based issues. New Right moralists and the Christian Right set their sights clearly on sex education, abortion, gay rights, feminism, and other emerging facets of social change. The Pro-Family Movement grew abruptly through the 1980s and 1990s, with comprehensive sex education as its target.

As the New Right's prominence grew, so did the voices of opponents of sex education. The conservative opposition to comprehensive sex education not only outnumbered but also out-financed its supporters. Throughout the 1990s, SIECUS remained the only national organization dedicated to promoting comprehensive sex education. The operating budget for SIECUS in 1999 did not reach \$2 million. Conversely, over 20 national organizations worked to undermine and remove comprehensive sex education in the public schools. The following is a list of actively engaged opponents of comprehensive sex education:

- American Center for Law and Justice (Virginia)
- American Family Association (Mississippi)
- Campus Crusade for Christ International (Florida)
- Christian Coalition (Virginia)
- Christian Womanity Educational Fund (California)
- Committee on the Status of Women (Illinois)
- Concerned Women for America (Washington, D.C.)
- Eagle Forum (Illinois)
- Educational Guidance Institute (Virginia)
- Educational Research Analysts (Texas)
- Family Research Council (Washington, D.C.)
- Focus on the Family (Colorado)
- Free Teens USA (New Jersey)
- Heritage Foundation (Washington, D.C.)
- Human Life International (Virginia)

- Institute for the Scientific Investigation of Sexuality/Family Research Institute (Wisconsin)
- John Birch Society (Wisconsin)
- Josh McDowell Ministry (Texas)
- Medical Institute for Sexual Health (Texas)
- National Abstinence Clearinghouse (South Dakota)
- National Association for Abstinence Education (Virginia)
- National Association of Christian Educators/Citizens for Excellence in Education (California)
- National Coalition for Abstinence Education (Colorado)
- Research Council on Ethnopsychology (California)
- Rutherford Institute (Virginia)
- STOP Planned Parenthood (Virginia)
- Traditional Values Coalition (California)
- Unification Movement (New York) (Irvine, 2002, p. 207)

While SIECUS retained its national status and elected professionals in large cities, the organizations opposed to comprehensive sex education chose to take their movements into local elections and school districts. Working to elect as many Christian fundamentalists as possible, these organizations threw endorsements, funding, and man hours into the campaigns of candidates, seating many in locally influential positions. These elections provided an even more widening base of support for the Pro-Family Movement. Because of this vast local presence, when advocates for comprehensive sex education spoke, their opponents had the structure and resources to fire back.

Again utilizing fear tactics and countering a grand moment of social change for women and homosexuals, the New Right deemed feminism, gay rights, and organizations like SIECUS and Planned Parenthood as the source of society's moral decline. Using words and language as a weapon, opponents of comprehensive sex education developed strategies to discredit sex educators, the curricula, and the effects of the program. This was done because throughout the previous decades, parents and educators had generally been supportive of sexuality education. Debates about sexuality also took on a new life with the Old Right in place (but really as code for race.) When their messages were tied to sexuality, Conservatives were able to hide their racialized agendas behind welfare, teen pregnancy, public funding of abortion, and rock (and later rap) music, as each had a unique way of blending race and sexuality together. This blend allowed for the Old and New Right to tap into White America's racial fears and push back at the changing social culture with a unified front (Irvine, 2002).

With the election of Ronald Reagan in 1980, Republicans also took control of the Senate for the first time in 26 years. In doing so, the Christian Right positioned itself to pass the Adolescent Family Life Act (AFLA), after organizing heavily around issues of teenage pregnancy, sexual explicitness, opposition to feminism and gay rights, AIDS, and abortion (Irvine, 2002). As a procedure that is important to women's sexual autonomy, abortion is a "vital target for right-wing efforts to control sexuality, reproductive rights, and the family" (Irvine, p. 89). After *Roe v. Wade* (1973), which affirmed a woman's right to abortion, the Catholic Church, evangelicals, and fundamentalists began organizing. These "right-to-life" committees gained formidable political power and influenced significant changes in women's access to abortion. Particularly affected were low-income women—typically of color—for whom Medicaid no

longer funded abortions. The American Family Life Act, nicknamed “the chastity act,” emerged during this antiabortion fervor, restricting any discussion or education for young women on the procedure.

With the passage of AFLA, federal financial support of sex education programs began with a limited pool of funding. The American Family Life Act was signed into law in 1981 as Title XX of the Public Health Service Act under President Ronald Regan. Without hearings or floor votes in Congress, the law was passed as part of the Omnibus Budget Reconciliation Act of 1981. In addition to providing comprehensive support services to pregnant and parenting teens and their families, AFLA was introduced by Sen. Orrin Hatch (R-Utah) and Sen. Jeremiah Denton (R-Alabama) to promote “chastity” and “self-discipline.”

Initially, two-thirds of the \$10 million allocated under AFLA were to be spent on support services, with the other third allocated to abstinence-only (AO) programs. However, in 1997 the two-thirds/one-third requirement was waived, freeing up millions of dollars for AO programs. The Christian Right, empowered throughout Reagan’s administration by appointments and social programs, pushed to pass amendments banning abortion and allowing school prayer. Although both of them failed, the passage of AFLA was considered a stunning success given the amount of funds provided by the federal government to essentially support the conservative sexuality ideology of the Right.

Janet Bishoof, an American Civil Liberties Union lead attorney who filed a suit against AFLA, explained:

The Right Wing completely took over this branch of [Health and Human Services] and used the AFLA program as the vehicle for right-wing funding. The discovery in the case

on AFLA showed just horrible, horrible abuses of government power and violations of the constitution.” (qtd. in Irvine, 2002, p. 92)

One of the most significant characteristics and violations of constitutional law was that, in order to qualify for AFLA funding, a program had to involve religious groups that were strictly antiabortion. By and large, AFLA served as a turning point in sexuality education. No longer did the argument focus on whether it should be taught; rather, it morphed into a conversation about *what* would be taught (Irvine).

Shortly after the passage of AFLA, in a lawsuit filed on behalf of opposing religious clergy, the ACLU began a 10-year course of action that claimed AFLA’s implementation severely violated the establishment clause, greatly entangling church and state. Eventually settled under the incoming Clinton administration, the fallout from the case, known as *Kendrick v. Heckler* (1985), was that religiously affiliated groups began publishing curricula that mirrored their secular programs, simply omitting the word God. In doing so, conversations about topics such as masturbation, homosexuality, birth control, and abortion were left out of the classrooms, and heteronormative gender roles were further enforced by the patriarchal values of Western religion. This trend persisted through the 1980s and into the 1990s by way of curricula and funding provided by the federal government to further Right Wing, fear-based, religious curricular programs focused primarily on antisex and antiabortion rhetoric. This development fueled a major battle between the conservative AO supporters and supporters of CSE.

The 1980s saw political and social issues arise in the larger public arena and public education, moving the debate into uncharted territory. The AIDS epidemic, sexual references in highly accessible pop culture, and a gay youth movement created tension and confusion in the

debates over sexuality education that was unseen until the 1980s and 1990s. “Two tragic figures in particular lurked in the national and local arguments about sex education: the pregnant teenager and the suicidal gay youth” (Irvine, 2002, p. 109). With the changing atmosphere, rising teen pregnancy rate, and close attention being paid to the AIDS crisis, calls began to ring out for more education, training, advocacy, resources, and policy changes (Future of Sex Education Initiative, 2012). United States Surgeon General C. Everett Koop issued a report in 1986 calling for comprehensive sexuality education in public schools, which was to specifically include AIDS. His recommendation stated that sexuality education should begin as early as the third grade and include information on heterosexual and homosexual relationships. Koop recognized the critical need of addressing such topics comprehensively and inclusively. By 1989, 23 states had passed mandates for sexuality education, an additional 23 states strongly encouraged sex education, 33 mandated AIDS education, and 17 additional states recommended it (Haffner, 1990).

However, as with all other public support for CSE, this turn propelled the Religious Right into a new form of oppositional strategies. As it became more difficult to justify complete opposition to sexuality curriculum, the conservative base turned its support to fear-based, abstinence-only sexuality education (Bridges & Hauser, 2014a; Pardini, 2016). The resulting religiously rooted curricula typically rely “on negative messages that suggest that premarital sex is inevitably harmful, provide distorted and inaccurate information about STDs, HIV and prevention methods, and promote stereotypes and biases based on gender, family structure and sexual orientation” (Future of Sex Education Initiative, 2012, para. 5). Conservative groups such as Focus on the Family and Concerned Women for America focused their attention on local

school boards, often finding success in packaging the message of AO education as the only moral curriculum for school boards to choose.

A prime example of the social war over sexuality and sex education came in 1994, with the forced resignation of Surgeon General Dr. Jocelyn Elders. An outward advocate of sexuality education for children starting at an early age, Dr. Elders was appointed by then-President Bill Clinton after serving as the head of Arkansas's Health Department during his tenure as governor of the state. Dr. Elders' views on sexuality had made her a target of the conservative right and antiabortion advocates (Jehl, 1994). At a United Nations conference on AIDS, which was still an emerging epidemic, Dr. Elders was asked by an audience member about teaching masturbation in sexuality education programs, which she supported as a means of avoiding spreading the AIDS virus. Her support outraged conservative members of Congress as well as some moderate Democrats. These congressional officials, along with social conservative groups and antiabortion advocates, called for her immediate termination. Following a Republican landslide in the November 1994 election, President Bill Clinton acted upon these calls, even though they were opposed by groups such as Planned Parenthood, gay rights organizations, and prochoice advocates. Dr. Elders submitted her resignation less than a week after making the remark. She later clarified to the Associated Press that she had intended to relate that masturbation is a natural part of human sexuality—not that schoolchildren should be taught how to masturbate (Jehl). The intense scrutiny and subsequent political backlash that Dr. Elders faced for educated commentary on disease prevention and adolescent sexuality illustrates the politicizing of sexuality education of the early 1990s. Fueled by political agendas and yielding new power postelection, the

conservative right removed a sexuality education advocate—a woman, no less—from office with no regard for developmentally appropriate education.

In 1996, the Temporary Assistance for Needy Families (TANF) Act was passed. It fundamentally changed how low-income families received federal assistance (Future of Sex Education Initiative, 2012). Signed into law by President Bill Clinton in 1996, Section 510(b) of Title V of the Social Security Act allocated federal monies for state initiatives promoting AO programs and defined the purpose of abstinence education as to “teach the social, psychological, and health gains to be realized by abstaining from sexual activity” (U.S. Social Security Administration, 2015). This piece of legislation was passed as an attachment to a must-pass bill for welfare reform. It was a law that amended the existing Maternal and Child Health Block Grant and found “great state level support for the singular sexual morality of abstinence-only education” (Irvine, 2002, p. 102).

A part of this legislation allocated \$50 million per year over a five-year period to states for abstinence-only-until-marriage programs. These programs were governed by a very strict definition of abstinence, known as the A-H definition, in which states could choose to focus on some sections of the definition over others. The A-H definition states that any sexuality education program, in order to receive funds, must:

- (A) Have as its exclusive purpose, teaching the social, psychological, and health gains to be realized by abstaining from sexual activity;
- (B) Teach abstinence from sexual activity outside marriage as the expected standard for all school age children;

- (C) Teach that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems;
 - (D) Teach that a mutually faithful monogamous relationship in context of marriage is the expected standard of human sexual activity;
 - (E) Teach that sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects;
 - (F) Teach that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child's parents, and society;
 - (G) Teach young people how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances; and
 - (H) Teach the importance of attaining self-sufficiency before engaging in sexual activity.
- (U.S. Social Security Administration, 2015, para. 6-13)

In addition, states were required to provide a \$3 match for every \$4 received from the federal government for abstinence-only-until-marriage programs. Essentially, these programs are to teach “abstinence from sexual activity outside of marriage is the expected standard for all school-age children and the only certain way to avoid out-of-wedlock pregnancy and STDs” (Kohler et al., 2008). At the time, every state, with the exception of California, accepted Title V funding for sexuality education programs.

Some states began using Title V funds for media campaigns, youth development, and after-school programs that lawmakers felt were not sufficiently focused on abstinence (Bridges & Hauser, 2014a). Therefore, in 2000, conservative lawmakers who were upset by what they saw

as states' dilution of the abstinence-until-marriage message, as an attempt to reign in their messages, created an additional \$20 million federal funding stream, the Special Projects of Regional and National Significance – Community-Based Abstinence Education (SPRANS-CBAE). According to Kohler et al. (2008), from 2003 to 2008

U.S. fiscal policy has allocated increasing amounts of funding to abstinence-only prevention programs. In 2001, abstinence-only programs received \$80 million in federal funds, and by 2005 federal funding had doubled to \$167 million. The 2008 fiscal year proposes \$204 million for abstinence education. (p. 345)

Federal government funding for AO education in the United States has grown rapidly since 1998, as shown in Table 1, despite a lack of scientific evidence in support of these programs and concerns about their informational content and ethical acceptability (Santelli et al., 2006a).

Table 1

Federal Funding for Abstinence-Only Programs FY 1982–2007 in Millions

FY	1982– 1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
SSA	X	X	50	50	50	50	50	50	50	50	50	50
§510 CBAE	X	X	X	X	X	20	40	55	75	104	113	113
AFLA	4	9	9	10	10	10	12	12	12	13	13	13
Total	4	9	59	60	60	80	102	117	137	167	176	176

Under SPRANS–CBAE, the federal government awarded money directly to AO programs, bypassing state-level allocation. After 2005, the measure was known as the

Community-Based Abstinence Education (CBAE) program. Unlike Title V, through which funding was ultimately decided by the states, all decisions regarding CBAE funding bypassed the state approval process entirely. The Department of Health and Human Services awarded grants directly to community-based organizations for the purpose of AO program promotion (Future of Sex Education Initiative, 2012). From the initiation of this measure, programs funded under CBAE were required to teach all eight points in the federal definition of abstinence education, the A-H definition. The intensely restrictive standards were seen as an attempt by partisan lawmakers to attain greater control of funding. Some conservative lawmakers attempted to prevent money from supporting media campaigns, youth development, and after-school programs, making arguments that these types of programs undermined the AO message.

On December 1, 2004, California Representative Henry Waxman released a report, commissioned by the U.S. House of Representatives Committee on Government Reform, criticizing the content of the AO sexuality education curricula being used by over two-thirds of the recipients of SPRANS-CBAE federal funds. According to SIECUS (2004), “The report showed that 11 out of 13 of the most commonly used abstinence-only-until-marriage curricula contain medical misinformation, use fear and shame, blur religion and science, and perpetuate stereotypes about gender roles” (para. 1). Misconceptions found in the curricula by report investigators included:

- a 43-day-old fetus was a “thinking person,”
- HIV could be spread via sweat and tears,
- condoms fail to prevent HIV transmission 31% of the time,
- women who have abortions are more prone to suicide,

- women who have abortions become sterile 10% of the time,
- chlamydia is linked to heart failure,
- men need sexual fulfillment and admiration in relationships, and
- women need to find financial support in a relationship.

Although the report gained national attention and was featured on news and media outlets, President George W. Bush added \$170 million to AO education programs through Title V in the same year the report was released; in 2006, the guidelines for allocation of monies tightened, stating that recipients could not provide program participants with positive information about contraception or safer-sex practices, even in other settings and with non-CBAE funds. The new guidelines also broadened the definition of abstinence from avoiding sexual intercourse to abstaining from all sexual activities that “refer to any type of genital contact or sexual stimulation between two persons, including, but not limited to sexual intercourse” (U.S. Department of Health and Human Services, as cited in SIECUS, n.d. a, para. 21). In 2007, nearly half of the money allocated by the federal government was funding programs in 17 Southern states, with Texas receiving the most federal money, as the recipient of over \$18 million (Nader, 2009).

However, in direct conflict with President Bush’s additional funding for AO programs was a study mandated by Congress and conducted by Mathematica Policy Research in 2007. The study, which closely examined four AO programs, alongside a similar study conducted by Douglas Kirby of the National Campaign to Prevent Teen and Unplanned Pregnancy, concluded that there was no statistical evidence that students who participated in AO programs were any less likely to engage in sexual activity and that AO programs are most frequently medically

inaccurate (Boonstra, 2009). That AO federal funding programs continued to be supported by conservative lawmakers in the face of nonpartisan research that outlined the failure of these programs to deliver results as promised was a glaring example of morality politics and religious pressures getting in the way of protecting the rights and meeting the sexuality education needs of students across the country.

In late 2008, a hearing was held for the first time on the Congressional floor to examine the effectiveness of AO education programs. The debate was heated, and conservatives were forced to defend their programs against evidence presented by a panel of public health experts, which included representatives from the American Public Health Association, the Academy of Pediatrics, and the Institute of Medicine, which asserted that there was no basis for the continued financial support and investment in AO programs (Boonstra, 2009). At the end of the George W. Bush presidency, the tide for support of fear-based sexuality education seemed to be turning, especially as Congress rejected a request from President Bush for additional money for the AO federal funding program.

The Obama Administration and the Abstinence-Only Financial Bust

Throughout the course of his first election cycle, President Barack Obama announced strong support for the addition of federal funding for CSE as a replacement for the existing funding stream of AO programming. However, the issue of teenage sexuality, or the candidates' views on sex education, did not come to the forefront of the campaign cycle until the teenage daughter of vice presidential candidate Sarah Palin was reported to be pregnant (Nader, 2009). It was with the announcement of her unplanned pregnancy that teen sexuality became a topic of national discussion. Obama's support of CSE was polarizing in the heated political environment

of the 2008 presidential election. Senator John McCain, the Republican candidate, stirred up a controversy after airing a campaign advertisement accusing Obama of promoting “sex education for kindergartners” (Natbony, 2010). The advertisement was a distortion of a 2003 Illinois legislature bill that was backed by then–Senator Obama, as it featured age-appropriate discussions in the classroom around topics of sex. For kindergartners, this included having discussions on how to avoid and report a sexual predator (Nader).

However, even with divisive political strategies controlling the political campaign rhetoric, Obama had the support of the American public. The results from a national survey conducted in 2005–2006 and published in the *Archives of Pediatrics and Adolescent Medicine* showed that 82% of respondents supported a comprehensive approach to sexuality education, regardless of their political or religious identity, and over 20 states were no longer accepting Title V funds for sexuality education programs (Boonstra, 2009; Nader, 2009; Percival & Sharpe, 2012). After his election, President Obama made clear his support for abortion rights and pregnancy prevention, and the first federal measure to allocate money for CSE programs was passed in 2010 as part of the Affordable Healthcare Act (AHA).

As a portion of AHA, Congress authorized the Personal Responsibility Education Program (PREP) in support of school curricula that teaches both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections. Programs receiving PREP funding must cover at least three adult preparation subjects, such as healthy relationships, adolescent development, financial literacy, educational and career success, and healthy life skills in addition to the sexuality education messages. Personal Responsibility Education Programs must also be “effective or proven on the basis of rigorous scientific research to change behavior,

be medically accurate, age-appropriate, and culturally sensitive, as well as teach both abstinence and contraception” (Percival & Sharpe, 2012, p. 5). A total of \$75 million was authorized for each of the five years (2010–2014) for programming, strategy development, tribal communities, communication, and support. The PREP portion of the AHA went largely unnoticed by the public as partisan debates focused more intensely on insurance mandates and medication coverage (Lashof-Sullivan, 2015; Percival & Sharpe, 2012).

Simultaneously, in 2010, the Consolidated Appropriations Act of 2010 eliminated funding for AO programs under CBAE and the AO requirements of AFLA. Title V funds expired in 2009 but were resurrected under the AHA authorizing funds from 2010-2015. In 2010, 20 states did not accept any federal AO monies, the highest number since its inception in 1981. The Obama Administration and U.S. Congress created two sources of federal funding for evidence-based approaches to teen pregnancy prevention and CSE programs. Under the same Consolidated Appropriations Act of 2010, the Teen Pregnancy Prevention Initiative (TPPI) was created alongside PREP to fund medically accurate and age-appropriate programs to reduce teen pregnancy. Funds were granted to organizations managing evidence-based programs and ones attempting to develop new programming aimed at reducing teen pregnancy. In total, nearly \$190 million was allocated to TPPI and PREP initiatives, and 45 states and the District of Columbia were participants (Lashof-Sullivan, 2015).

Up for re-election in 2012, President Obama again faced a Republican party with inherently conservative views on teenage sexuality education. Republican presidential candidates continued to emphasize their “pro-life” stance, and many continued to show open support of AO education, even with the release of research showing the programs were ineffective and

inaccurate. This was in contrast to John McCain's campaign in 2008, which supported abstinence-plus (abstinence-only education with inclusion of contraceptive information.) In precampaign interviews, Republican presidential candidates Rick Perry, then the governor of Texas, and Rick Santorum, a former U.S. Senator from Pennsylvania, both actively supported continuing funding for AO education, and both failed to cite any research to back their claims that AO programs were successful. Additionally, many of the conservative candidates for the presidency signed the Susan B. Anthony List 2012 Pro-Life Presidential Leadership Pledge, which asked declared presidential candidates to commit to key prolife goals if elected to the presidency in 2012. While the pledge does not explicitly endorse AO education, it may be viewed as a barometer for candidates' views on sexual education (Lashof-Sullivan, 2015; Percival & Sharpe, 2012).

Title X, which was created in 1970 with bipartisan support, is the backbone of affordable contraceptive care in the United States (Hasstedt, 2013). Although the passage of the AHA in 2010 made vast improvements to women's health care coverage and access to contraceptives, low-income or uninsured individuals still needed a place to go for family planning services, for which providers receive funding under Title X. Title X has proved to be one of the federal government's most successful and cost-effective public health programs, saving \$5.68 per \$1 spent. The grantees include state and local health departments, federally qualified health centers, Planned Parenthood affiliates, and other independent agencies that provide contraceptive and family planning care, sexually transmitted disease screenings, women's well-care, breast exams, and education programs. They are often individuals' entry-point to the healthcare system (Hasstedt).

However, as the AHA of 2010 became a sticking point for the conservative political rhetoric of the 2012 election cycle, Title X drew ire as conservatives, unfoundedly, connecting it inextricably to sexuality education. Former speaker of the house Newt Gingrich voted while in office to eliminate Title X, which includes sexual education, and Buddy Roemer, the former governor of Louisiana, said he would strive to defund Title X entirely. While Title X and sexuality education are not immediately related, these political moves set the tone for the 2012 presidential campaign to circle around sexuality and access to information for women, teenagers, and low-income individuals. After two rounds of hearings to defund Title X, led by the social conservatives of the House of Representatives in 2011 and 2012, the Obama Administration continued voicing support of the program, including an increase in Title X funds in fiscal year 2014, upon which the Senate agreed (Hasstedt, 2013).

Although the Obama administration seemed to have pushed federal support behind CSE through funding and public acknowledgement, the divide between conservative rhetoric and support for comprehensive programming remains wide, with little give on either side. Some more moderate social conservatives—in the face of existing research and studies of curriculum—have conceded that AO education is better positioned to be effective with the inclusion of contraceptive education, but the moral majority and religious Right currently have a stronger hold on the Republican base. With the election in 2016 of Donald Trump, the AHA and funding for TPPI and PREP is inherently at risk. As an illustration of the contemptuous political and economic impact of sexuality education, most recently, President Obama announced in his proposed budget for 2017 the elimination of all funding for AO education and an increase in

spending for CSE. Immediately, the conservative Right vowed to veto the budget, without having seen the full proposal.

The leaders for the Republican nomination at the time of this study, Donald Trump, Marco Rubio, and Ted Cruz, all shared similar views on Planned Parenthood (defund), the AHA (abolish), education (defund the U.S. Department of Education), abortion (prolife), gay marriage (against), and religion (not separate from government.) In contrast, the Democratic candidates, Bernie Sanders and Hillary Clinton, had polar opposite views on the same topics: Planned Parenthood (support), AHA (support), education (support), abortion (prochoice), gay marriage (support), and religion (separate from government) (Ontheissues.org, 2016). The political standings of the Republican party threaten CSE as it stands as of the time of this study—2017. With the legislative branch of the U.S. government returned to Republican leadership, its primary goal is to reverse many of the actions of the Obama Administration, regardless of their positive impacts. At the time of this study, the AHA is surrounded by loud rhetoric of Congressional and Legislative repeal, the Mexico City policy (gag rule) has been reinstated, the Obama Administration’s protections of transgender students have been reversed, and the new secretary of education has yet to come out in support of enforcing Title IX protections for victims of sexual harassment. This discourse suggests intensification of an upcoming struggle for gender and sexuality rights in the United States.

National Sexuality Education Standards 2016

For the first time, sexuality education, under new funding policies of President Barack Obama that defunded AO education, saw its first set of national standards. In a cooperative effort by the American School Health Association, the American Association for Health Education, the

National Education Association Health Information Network, and the Society of State Leaders of Health and Physical Education, in coordination with the Future of Sex Education Initiative (FoSE), content experts, medical and public health officials, educators, and youth developed a set of national standards that provide guidance on the essential minimum core content for sexuality education in public schools over a two-year period. The standards address age-appropriate and developmentally appropriate topics in K–12 classrooms and focus on seven topics: anatomy/physiology, puberty and adolescent development, identity, reproduction, STDs and HIV, healthy relationships, and personal safety. These topics are presented and assessed using indicators of performance. The standards were developed to address an identified inconsistency of sexuality education and limited time allotted in public schools to health and sexuality education. However, the standards are not currently mandated in public schools, serving only as a guide for implementation, teacher preparation, and baseline curriculum (Advocates for Youth, 2016).

In the following chapter, analysis of judicial actions surrounding sexuality education will be discussed. The importance of separating the political actions of sex education policy and the resulting legal proceedings is clear, as not only are they two separate systems, but also they establish cause and effect of the political landscape, which would be muddled should the two remain combined.

CHAPTER 4

CASE LAW AND LEGAL CHALLENGES TO SEXUALITY EDUCATION

In discussing a topic that involves children, politics, sexuality, and money, it would be naïve to assume that significant legal action would not follow. However, with the exception of only a few cases, the Supreme Court of the United States (SCOTUS) has not been involved in discussions around sexuality curricula and programs. Nearly all of the cases have been circuit, district, and local court cases. Another consideration in the analysis of case law is the cost of legal actions and willingness of parents to bring suit. In this vein, it is much more common to see parents file suit against curricula that is comprehensive in nature, as they are challenging what is in the program rather than what is not. Since legal action has associated financial costs, parents who are unhappy with an abstinence-only (AO) curriculum are most likely to simply supplement the information by teaching their children at home, whereas parents who are unhappy with information their child is learning at school are more likely to choose a legal challenge to prevent their child from receiving the information. Simply put, it is easier to add to a lacking curriculum at home than it is to “un-teach” what a child has already learned (Ou, 2008; Percival & Sharpe, 2012; Rigsby, 2006; Steib, 2007; Surgan, 2004; Varley, 2005).

Additionally, it is worth understanding *de facto* and *de jure* law in terms of the number of suits that have been brought to the higher courts. Legally defined, *de jure* refers to something that is an actual law or results from an authoritative legal action. Conversely, *de facto* is something that is accepted by the community or proceeds by right instead of by law. These terms are important to discussing sexuality curricula, in that the community served most often determines its content. In highly conservative communities, it is unlikely that a religious-based,

conservative sexuality curriculum would be challenged, as the community accepts and supports the content, whereas the same curriculum in a highly liberal community would likely be challenged at the school board or local level, and vice versa.

Similarly, as each state has control of establishing its standards for sexuality education curricula and often delegates this responsibility to school districts, sexuality education programs trend toward meeting the needs of a particular community. Varley (2005) explained, “sexuality-education statutes are structured in such a way as to permit comprehensive sex education programs and allow each community and school system to make determinations on what form sex education should take in their particular school system” (p. 5). Noting that curricular programming technically only violates the law if someone brings suit, it is unreasonable to claim that any body of cases analyzed fully represents the legal landscape of sexuality education as a whole. This chapter serves to illustrate the types of cases that have been brought forth and the trends in legal decision-making in the United States with respect to public school sexuality curricula.

Establishing Trends

Many curricular challenges have been decided based on the standing of the individual who brings suit. As with any case in the U.S. legal system, an individual must prove *locus standi* in order to pursue legal action. *Locus standi* is determined by three causes:

1. a person has been subject to harm or adverse effect by the statute or action in question, and harm will continue without legal action;
2. a person is not directly harmed, but they have reasonable relation to or the action may adversely affect others unable to bring suit themselves; and

3. some states allow courts to grant standing on environmental or obscenity violations without direct harm being caused to an individual.

Essentially, current doctrine in the United States contends that a person cannot bring a suit challenging the constitutionality of a law unless that person can demonstrate that the law will harm them. In cases in which these three requirements cannot be shown and the person is not shown to incur harm by a law, the court will typically rule that the individual lacks standing to bring the suit, resulting in dismissal of the case.

This failure to meet *locus standi* provisions was seen in *Elk Grove Unified School District v. Newdow*, which was dismissed because the parent who brought suit against the constitutionality of the Pledge of Allegiance did not have custody of the child and, therefore, did not have legal standing to bring suit. Again, in *Bergstrand v. Rock Island Board of Education, School District, No. 41*, the Illinois Court of Appeals ruled the sex-education opt-out provision could not be enacted by a father without sole custody of his daughter (Nader, 2009; Ou, 2008; Rigsby, 2006; Steib, 2007). It has also been held that teachers do not have standing to challenge policies on students' behalf (Lashof-Sullivan, 2015).

Thirty-three states and the District of Columbia have specific provisions that either permit parents to opt their children out of sex education classes for religious, moral, or family-oriented reasons, as well as general written objections, and four states have provisions that require parental consent before children can participate, namely opt-in requirements (Lashof-Sullivan, 2015). This trend was put in place so that parents who do not want their children to participate may opt-out without having to file a lawsuit. However, in the early 2000s, 23 states required schools to educate students on HIV/AIDS and transmission of STDs (Surgan, 2004;

Varley, 2005), with the number rising to 35 by 2008 (Ou, 2008). Because of these opt-out provisions, the majority of cases challenging sex education programs have been unsuccessful (Rigsby, 2006). Sorgan explained, “The trend in the law is that although parents do have a fundamental right to direct their children's education, they do not have a fundamental right to direct the curriculum that will be taught to all children in the public schools” (p. 3).

When cases that challenge the validity or constitutionality of sex-education programs are litigated, courts generally find for the defendant school system, ruling that it is the right and responsibility of the school system to determine curricula and that the rights to privacy and parental control are too narrow to overcome the rights of the school systems (Ou, 2008; Rigsby, 2006; Steib, 2007; Varley, 2005). The trend in the law seems to imply that the main course of action for parents who find the topics of sexuality education in violation of their religious or moral standing is to remove their child from the public school and enroll in a private institution that aligns more with their personal belief system (Nader, 2009; Ou; Percival & Sharpe, 2012; Rigsby; Varley).

The following cases do not purport to address the totality of case law with regard to sexuality education. The subsequent cases were chosen as highlights of the breadth of legal actions involving sexuality education. These cases range from curricular complaints to religious doctrine, from funding legalities to the right to privacy and equal access. Additionally, these cases represent decisions on three major levels of the judicial branch of the U.S. government. While most cases do not make it to the U.S. Supreme Court, actions at the district and circuit court levels hold much weight. Finally, most of the cases examined in the following sections

represent cases that set legal precedent and are therefore considered landmark cases in the fight for access to public school sexuality education.

Supreme Court Cases

Board of Education, Island Trees School District v. Pico. While not specifically addressing sexuality education, *Island Trees School District v. Pico* (1982) did establish that schools may not use, remove, or censor curriculum and educational materials for students if the desire is to suppress particular viewpoints or controversial ideas (McCarthy, Cambron-McCabe, & Eckes, 2014). In this case, the school district removed books from library shelves, even though the removal was contrary to recommendations by the committee appointed to review library materials. The court upheld the remand for trial because the motivation of the board was unclear, and the process by which the books were removed was unconventional for the district. States have used *Island Trees School District v. Pico* to rely on dicta to protect opt-out provisions. As Surgan (2004) explained:

Pico could be applied to a challenge of a restriction to sex education by discussing how a restriction on sex curriculum is not based on educational concerns, but is instead based on the political, religious, and partisan viewpoints of the school board and is therefore an unconstitutional restriction on free speech. (p. 1)

However, in *Island Trees School District v. Pico*, the materials at play were library books, electively selected by students, unlike mandated school curriculum for which the courts have upheld that school boards have broad discretion in determining curriculum. Therefore, as Surgan stated, “The actions of the school board would probably have to have clear political or religious motivations in order to be successfully challenged” (p. 4).

Edwards v. Aguillard. In the early 1980s, there were several attempts at the state level to introduce creationism into science curriculums as an alternative to the theory of evolution. In Louisiana, the legislature approved a bill entitled “Balanced Treatment for Creation-Science and Evolution-Science Act,” which was authored by State Senator Bill P. Keith of Caddo Parish. The law was not an either/or, but rather required that, if one theory were taught, the other must be in conjunction. The act stated its purpose as protecting “academic freedom” and was lobbied for aggressively by supporters of creationism. Governor David Treen signed it into law in 1981.

Don Aguillard, an advanced biology high school teacher in Louisiana, brought suit against sitting governor Edwin Edwards in District Court. The District Court and Fifth Circuit Court of Appeals ruled against Louisiana. Both courts found that the purpose of the law was to promote religious doctrine, citing a previous decision from Arkansas (*McLean v. Arkansas*, 1981) that also addressed a similar “balanced” approach to science curriculum. The Court of Appeals wrote “the Louisiana Creationism Act advances a religious doctrine by requiring either the banishment of the theory of evolution from public school classrooms or the presentation of a religious viewpoint that rejects evolution in its entirety.” The State of Louisiana appealed to the U.S. Supreme Court, which heard the case on December 10, 1986. The U.S. Supreme Court upheld the previous rulings that found the law unconstitutional, as it violated the establishment clause of the First Amendment, utilizing the three-pronged test from *Lemon v. Kurtzman* (1971).

The court found that the law did not have a clear secular purpose, nor did it protect academic freedom, as it was said to have done by its author. Rather, it acted as a limitation on teachers in choosing what to teach, allowed for evolutionary science to be included in a curriculum only if creationism was as well. This undermined comprehensive scientific education

and did not give teachers a flexibility that they did not already possess. The Balanced Treatment for Creation-Science and Evolution-Science Act was also found to have a discriminatory preference for creationism against evolution, in that it required curricular materials be developed for creation science; however, it did not require the same types of materials developed for evolution theory. The court held that there could be no valid secular reason for prohibiting the teaching of evolution, a theory historically opposed by and in direct conflict with teachings of some religious denominations. The court also found that this act undoubtedly promoted and endorsed religion, violating the First Amendment. Legislative history operationally defined “creation science” as a strictly religious teaching; therefore, including it within a public school curriculum was a clear violation.

Similarly, this act proved to not only promote religious doctrine, but also served to undermine science theory in direct disagreement with religious teachings. As students in elementary and secondary schools are seen by the court as highly impressionable and, under compulsory attendance laws, the U.S. Supreme Court is particularly protective of the establishment clause in these schools and vigilant in ensuring classrooms are protected from requirements that could promote religious views in direct conflict with a family’s private views. Justice Brennan wrote the majority opinion, with which Justices Marshall, Blackmun, Powell, and Stevens concurred. Powell filed a concurring opinion with which O’Conner joined; White filed an opinion concurring with the judgment. Justice Scalia filed the dissenting opinion, with which Rehnquist joined. An *amicus curiae* brief of 72 Nobel laureates, 17 state academies of science, and seven other scientific organizations was submitted in support of Aguillard and removal of creation science from school curricula.

This case held particular significance in that it affirmed the court's commitment to protect First Amendment rights from efforts to promote religion in public schools. The case essentially ended the debate to teach creation science in state curricula. However, the court did not imply that states could not require that critiques of evolutionary theories or other prevailing theories be taught, rather that the legislature must show a clear, secular purpose for introducing such a variety of theories to schoolchildren. The court also expressed its disapproval of the idea of eliminating both evolutionary theory and creation science from classrooms, as Senator Keith had suggested was his preference when writing the law. The Edwards decision, coupled with the *Epperson v. Arkansas* (1968) decision, created a framework for presenting an alternate origins education legally in two distinct options. Following the Edwards ruling, many creationists began restructuring their movement to avoid explicit references to the Bible, God, or the beliefs of a particular religious sect. This version of creationism then re-emerged as part of the "intelligent design" movement of the 1990s.

Bowen v. Kendrick. Senators Jeremiah Denton (R-AL) and Orrin Hatch (R-UT), both opponents of the Title X family planning program, sponsored the Adolescent Family Life Act (AFLA) and quietly ushered it through Congress, without hearing, into committee, and as part of the Omnibus Budget Reconciliation Act of 1981. It became known as Title XX, which was administered by the Office of Adolescent Pregnancy Prevention of the Department of Health and Human Services. The Adolescent Family Life Act provided funding for organizations offering services and research on teenage sexuality, whose primary goal was to prevent premarital teen pregnancy by establishing "family-centered" programs "to promote chastity and self-discipline." Recipients of AFLA funds were required to involve religious agencies and eventually were

funding many organizations with direct ties to religious groups and denominations. Funding was disbursed almost exclusively to conservative and religious organizations, as intended by the sponsors. Chan Kendrick of the American Civil Liberties Union's Reproductive Freedom Project, on behalf of taxpayers and clergy members, challenged AFLA's constitutionality under the argument that it served to advance religion and violated the separation of church and state.

In 1985, AFLA was found to be unconstitutional under *Lemon v. Kurtzman* (1971) for violation of the establishment clause by the United States District Court for the District of Columbia (*Sullivan v. Kendrick*, 1992). In the District Court, the plaintiffs proved, in the court's opinion, that the majority of ALFA monies was used by churches and parochial schools to teach family life and morality. The District Court's finding was in response to AFLA requirements, which included explicit prohibition of abortion and contraceptive counseling, direct disbursement of money to religious organizations, parental notification in all circumstances unless it appeared that the parents' views might contradict abstinence-only messaging, and the exclusion of certain religious denominations from eligibility for funding.

Upon appeal by Health and Human Services Secretary Otis R. Bowen, the U.S. Supreme Court granted *certiorari*, and the case was argued on March 30, 1988 to the Rehnquist Court. The court, in a 5 to 4 majority, held that the AFLA did not violate the establishment clause of the First Amendment under the three-pronged test in *Lemon v. Kurtzman* (1971). In the first factor, AFLA was found to have a valid secular purpose. Intended for reducing teenage premarital pregnancy, the involvement of religious organizations did not promote an establishment of religion, but rather community involvement in reducing economic effects of teen parenthood. Under factor two, it was found that the AFLA did not have a principal purpose of advancing

religion, as funding recipients were not mandated to be religious organizations, nor were services provided religious in character.

The court upheld that while AFLA's approach to dealing with teenage sexuality might align with that of certain religions, AFLA itself was not fundamentally religious. They found that AFLA outlines one of the major combatants to teenage pregnancy to be improved family life and connection. As the court acknowledged, religious organizations might aid in that purpose, the promotion of religion is then "incidental and remote." In accord, the fact that there was no requirement that a recipient of funding be a religious organization and there was no preference was shown in promoting a religious purpose meant that the application for grant monies was deemed neutral in the eyes of the court.

With respect to the third factor of the Lemon test, the court found that there was no excessive entanglement of church and state with AFLA. It required applicants for funding to reveal what they intended to provide and how they would provide services so the federal government could protect against the misuse of funds. Rehnquist wrote the majority opinion with concurrence from White. In a concurring opinion, Kennedy, with which Scalia joined, wrote that the district court should have never considered the religious background of grant recipients. The minority opinion was written by Blackmun and was joined by Marshall, Stevens, and Brennan. While upholding AFLA as facially constitutional, the court did remand the case to District Court to see whether AFLA violated the establishment clause "as applied."

Upon further review by attorneys, many constitutional violations were found to have occurred with regard to AFLA in the Reagan and Bush administrations. In January 1993, AFLA challengers and the U.S. Department of Health and Human Services came to a five-year

settlement, which placed certain conditions on oversight of the grants and recipients. One requirement of recipients of AFLA funding was to submit materials for review to the U.S. Department of Health and Human Services, which would determine whether the curriculum was promoting a religious agenda and examine materials for medical accuracy. The impact of the settlement of *Bowen v. Kendrick* (1988) became evident on new recipients of AFLA grants. Northern Michigan Planned Parenthood received an AFLA grant in 1997, marking the first time a Planned Parenthood affiliate had been funded through the program.

Beginning in the 1997 fiscal year, however, the prevention funds within AFLA were explicitly tied to the more stringent, eight-point definition of “abstinence education” found in the Title V abstinence-only-until-marriage program, which was passed as part of Welfare reform legislation. Part of the Temporary Assistance for Needy Families program, this program required a strict review of what must be taught and, therefore, which organizations could receive AFLA funding. Religious-based organizations continued to be eligible to receive AFLA funds as long as their programs aligned with the new requirements. From FY 2005 through FY 2009, AFLA received more than \$13 million in funding; however, with the passage of the Consolidated Appropriations Act of 2010, funds were eliminated and AFLA has remained unfunded.

Circuit Court Cases

Brown v. Hot, Sexy, and Safer Productions. In 1995, the U.S. Court of Appeals for the First Circuit rejected an argument that a sex education program presented to students at a special assembly violated the students' right to privacy and due process. The program was presented as an AIDS awareness assembly to the student population at Chelmsford Public High School in Massachusetts. The plaintiffs, two students and their parents, brought action against the school

and the presenter, who was also the owner of the production corporation. The plaintiffs argued that the production was “lewd, graphic, containing sexually explicit monologues and skits.” As such, they claimed it violated the students’ right to privacy under the Fourteenth Amendment, which protects personal decisions from significant government intrusions, as well as causing a sexually hostile environment under Title IX of the Educational Amendments Act of 1972. The plaintiffs also charged continued harm after students at the school continued discussing the assembly for weeks after it occurred.

The fundamental right to rear children, which has never been decided by the Supreme Court, was the argument at the crux of the case; the First Circuit chose not to issue a ruling on the topic. However, the court did rule that the plaintiffs failed to demonstrate a violation of constitutional rights, and subsequently it ruled that parents do not have the right to dictate curricula to the school systems based on what an individual family considers moral (Nader, 2009; Ou, 2008; Percival & Sharpe, 2012; Rigsby, 2006; Steib, 2007). The court did note that the school’s failure to provide an opt-out provision for the assembly was irresponsible; however, they did not deem this an egregious violation of constitutional rights. Varley (2005) asserted, to grant this right would impose too great of a burden on the school systems to cater a curriculum for every child whose parent had a moral objection to the school's choice of subject matter” (p. 4).

Leebaert v. Harrington. In June of 2003, the Second Circuit Court of Appeals ruled against a parent of a seventh-grade public school student who objected to his student’s participation in a quarter-long health and hygiene course that included a section on sexual health and was required by the school. While the class was required, discussion of sexual health did

have an opt-out provision for students. The parent challenged the entire requirement on First Amendment and Fourteenth Amendment grounds, citing religious objections and family privacy concerns. The parent requested that the court use a strict scrutiny test in its analysis on the grounds that it is the fundamental privacy right of parents to direct their children's education.

The court applied a rational basis test after it was decided that parents have no such fundamental right to direct their child's education under privacy laws or at least not one that would be protected with a strict scrutiny analysis. Once applied, the quarter-long health and hygiene course passed the rational basis test because it was determined that the school had a legitimate purpose in promoting the health and welfare of children and that using a health and hygiene course acted in that purpose. The decision indicated that First Amendment religious objections and Fourteenth Amendment family privacy objections would not be successful in challenging sex education requirements when parents are presented with an opt-out provision (Nader, 2009; Ou, 2008; Percival & Sharpe, 2012; Rigsby 2006; Steib, 2007; Surgan, 2004; Varley, 2005).

Parker v. Hurley. Submitted to the First Circuit Court of Appeals, this case was dismissed after the judge found that the exposure of children to ideas inconsistent with their religious faith did not constitute a burden on the child's (or parents') free exercise rights. In their filing, two parents asserted that reading a story book about a prince who marries another prince and the access to books that stressed respect for different familial compositions amounted to state-sponsored proselytization in violation of their right to free exercise and that of their children.

However, the court found that the materials used by the school were utilized to promote tolerance and that no person has the right to be free from any and all reference to homosexual lifestyles. While the court highlighted *Brown v. Hot, Sexy, and Safer Productions (1995)* and *Leebaert v. Harrington (2003)*, mentioning that parents may choose an educational environment for their students but may not direct the curriculum, the court went even further with a nod to the Massachusetts State Constitution and the progressive direction of the state, under which the public school aligned and where gay marriage was, in fact, legal (Nader, 2009; Ou, 2008; Percival & Sharpe, 2012).

District Court Cases

Colin v. Orange Unified School District. After the widespread media coverage of the death of Matthew Shepherd, a young gay man brutally killed for his sexuality, students at El Modena High School responded by proposing a Gay-Straight Alliance (GSA) club to promote awareness and develop support for sexuality issues. The students secured the proper paperwork, secured a faculty advisor, and requested meetings at the same time and in the same facilities as the other 38 student-initiated clubs on campus. Upon receipt of the official proposal, outlined by and compliant with school policy, the school principal passed the application on to the school board, which delayed voting on approval. Eventually, the club was denied. The principal suggested that the group rename its club and make multiple changes to the group's proposed constitution, which included the statement, "Sex, sexuality, and sex education will not be discussed at the group's meetings," knowing that the topics surrounding sexuality would, by nature of the club, be discussed, and remove any language referencing "gay," "straight," or "sexual orientation."

El Modena High School had 38 student-initiated, noncurricular clubs meeting on campus at the time of the suit. Because of this and the school's failure to provide the GSA with the same opportunities as the existing clubs, the court held that the school had violated the Equal Access Act by denying the club official recognition because the school had created a limited public forum and the proposed club was considered noncurricular under the act (*Colin v. Orange Unified School District*, 1999; Ou, 2008; Rigsby, 2006; Steib, 2007). Subsequent suits filed under the Equal Access Act have relied heavily on *Colin v. Orange Unified School District* (1999) for support of establishment of Gay-Straight Alliance groups (Lashof-Sullivan, 2015).

Citizens for a Responsible Curriculum v. Montgomery County Public Schools et al.

Conservatives, both locally and nationally, waged a campaign against the Montgomery County school system after a revision to their sexuality education program included discussions of homosexuality. The sexuality education program was to be implemented in the eighth and 10th grades, after being approved by Montgomery County's Board of Education in November 2004. The program component that drew the most ire was discussion of homosexuality in the 10th-grade family life curriculum (SIECUS, 2005).

After forming an advocacy group called the Citizens for Responsible Curriculum, they campaigned against the curriculum and hosted a parent meeting. Representatives from national conservative organizations such as Concerned Women for America and Family Research Council also spoke at the meeting. The group then, with Virginia-based group Parents and Friends of Ex-Gays and Gays, brought a federal lawsuit against Montgomery County Public Schools. The lawsuit, filed by The Liberty Council, made claims that encouraging discussions about homosexuality in the public school curriculum showed favor to religions that are tolerant

of homosexuality. In doing so, the program violates the Establishment Clause, in that it failed to address religions in which homosexuality is not tolerated (Ou, 2008; SIECUS, 2005; Steib, 2007).

In hearings, the federal judge sided with the plaintiff in *Citizens for a Responsible Curriculum v. Montgomery County Public Schools et al.* (2005) and ordered a 10-day restraining order on the program. Although the program did include an opt-out provision, the order prevented the schools from implementing the new program. In late May 2005, the Montgomery County Board of Education, in lieu of further legal action, voted seven to one to find and implement a new sexuality education program (Ou, 2008; SIECUS 2005).

In *Citizens for a Responsible Curriculum v. Montgomery County Public Schools et al.* (2005), the plaintiffs utilized the Establishment Clause to argue that the school's program, in its inclusion of discussions on homosexuality, favored specific religions. Steib (2007) explained, "The opinion in *Citizens* promotes an interpretation of the First Amendment that would bar schools from making statements that affirm homosexuality as a healthy lifestyle" (p. 6). In contrast, challenges brought in *Brown v. Hot, Sexy, and Safer Productions* (1995) and *Leebaert v. Harrington* (2003) were based on religious objections under the Free Exercise Clause of the First Amendment. Because of the difference in these two arguments, the decisions in *Brown v. Hot, Sexy, and Safer Productions* and *Leebaert v. Harrington* imply that future challenges to sexuality education programs will not be successful if they are grounded in the Free Exercise Clause of the First Amendment and Fourteenth Amendment objections, particularly when a school provides an opt-out provision (Nader, 2009; Natbony, 2010; Ou, 2008; Percival & Sharpe, 2012; Steib, 2007).

CF v. Capistrano Unified School District. The U.S. District Court examined the issue of the Establishment Clause's role in sex education suits when the student brought action against the school district and teacher, alleging the teacher's in-class comments were hostile to religion, thus violating the Establishment Clause. During the course of a discussion in an Advanced Placement European History course, the plaintiff alleged that his teacher's commentary regarding the availability of contraception at school health centers demonstrated hostility toward religion. The court disagreed that the teacher's comments were hostile toward religion, in that the teacher's statements suggested that he neither agreed with nor believed that abstinence-only policies worked; the statements did not rise to the level of violation of the Establishment Clause as they did not mention, let alone criticize, religion (Natbony, 2010).

Additionally, on appeal, the Circuit Court vacated the District Court decision holding that the teacher's actions did not make the case to deny qualified immunity and, given that the plaintiff had already graduated from Capistrano High School and was admitted to college, it was unnecessary to render judgment on the First Amendment question (Lashof-Sullivan, 2015; Percival & Sharpe, 2012). Although the *Citizens for a Responsible Curriculum v. Montgomery County Public Schools et al.* (2005) case promoted an interpretation of the First Amendment that would suggest a school program may not affirm homosexuality with a religious overtone, the court's statement in *CF v. Capistrano* (2009) suggested that the *Citizens for a Responsible Curriculum v. Montgomery County Public Schools et al.* holding cannot be applied every time a student feels a statement is anti-Christian (Lashof-Sullivan, 2015; Natbony, 2010).

Conclusion

As the legal landscape continues to shape and define access for students to appropriate sexuality education programs, further developments are sure to explore topics focused on inclusion of sexual identity, provision of medically accurate information, and equal access. As Rigsby (2006) explained:

Challengers to programs that limit sex education by excluding discussions of sexuality might rely on Justice Sandra Day O'Connor's equal protection analysis from her concurring opinion in *Lawrence v. Texas*. Under her analysis, even with no constitutional right at issue, all laws must meet at least a rational basis test under equal protection analysis. Challengers to abstinence-only sex education programs could argue that, since such programs are public health interventions designed to exclude gay and lesbian students, they do not meet a rational basis standard of review. If federal or state governments excluded another minority group from the protection of another public health intervention, it would be in violation of that group's right to equal treatment. Sex education programs are designed to protect youths from serious health risks. A program that advocates abstinence only and excludes any discussion of sexuality might be found in violation of equal protection. (p. 5)

All students, regardless of gender, sexual identity, or race have the right to information, so long as the information does not establish a religious or political preference, as has been upheld by the higher courts. In a topic as polarizing as sexuality education, it is unlikely that the number of cases brought before the court will subside, particularly in a time when the United States is seeing a drop in funding for AO programs and a rise in social acceptance of

“alternative” lifestyles. Advocates for CSE can only hope that the trends currently established by the courts for favoring opt-out provisions over censorship of material will continue.

Chapter 2 contrasts traditional and critical theories of adolescent sexual development milestones as a foundation for a paradigm shift from sex-negative to sex-positive viewpoints. Chapter 3 and Chapter 4 provided an understanding of where sexuality education came from and where it stands today by examining the political and economic histories of sexuality education and the legal cases that have shaped the current landscape. Chapter 5 analyzes various curricula and frameworks and concludes with general recommendations to address critical principles central to the development of a socially just, inclusive sexuality education program.

CHAPTER 5

ANALYSIS AND RECOMMENDATIONS

Sexuality education in the United States historically has been characterized by the social control of sexuality (Moran, 2000). As educators work toward a new gender- and identity-inclusive curriculum, we must seek to move away from programs rooted solely in control and fact delivery to a dialogic, emancipatory model. When the adult-adolescent power structure is dismantled, thereby returning sexual agency and autonomy to the student, their understandings of themselves and one another are allowed to evolve. Human beings are sexual beings, and this sexuality does not begin at adulthood. Programming in K–12 schools should honor and acknowledge the individual and collective experiences of sexuality, as well as continually adapt to the social and cultural times. Additionally, programming cannot revolve around a heterosexual male sexuality. Curricula must be gender and identity inclusive, relatable by the individual student, and pertain to adolescent culture as a whole.

This final chapter provides an analysis of prominent curricular movements and available programming. However, it would not be possible to provide an analysis for every available program in the United States. The choices of the programs reviewed in this chapter reflect past federal standards (abstinence only), an independent curriculum written to adhere to the national standards (Advocates for Youth 3Rs), an alternative approach applauded by international advocates (rights-based, sexual ethics framework), and a design model (IMB). These choices, while limited, seek to provide a widespread basis for recommendations made in the conclusion of this chapter.

Curricular Analysis

Abstinence-Only Education (Title V Section 10): Problematic Exclusions

In Chapter 1, programmatic aspects of abstinence only (AO) sexuality education were discussed. At the time of this study (2017), the federal government has defunded AO programs. With the removal of AO programs from the federal budget, implementation of these programs is now solely left to the state. Although extensive research cited in Chapter 1 contends that AO programming has no effect or a negative effect on students, some states continue to fund AO programs. However, many states are now moving away from AO programs, as funding is no longer tied to an adherence to the strict, eight-point definition of AO programs, as previously described.

As shown in Chapter 1, AO programming is disempowering in that it is grounded in behavior control and fear mongering. Abstinence-only programs, which stem from the agenda of the religious Right, have no place in schools, which should serve as institutions of truth and inclusivity. Conservative politics pushed these programs into schools, despite the fact the complete lack of data showing that they work or promote teen health in any manner. Students subjected to AO programming have their rights taken away, as they are fed false information about contraception, sexual activity, and gender relationships. Students who participate in AO programming more frequently engage in risky behaviors after becoming sexually active, of which there is little to no delay, because they have incorrect information or are misinformed about how to protect themselves.

Hence, AO programming has no place in public schools, which should promote principles of democratic life. It is a violation of students' right to information, it is an

underserving of the adolescent population, and it intertwines church and state in an unethical and unconstitutional manner. For proponents of religious expectations and adolescent sexuality, conversations should take place in houses of worship or individual family homes. However, public schools, which are supposed to remain independent of religion and should never impose belief and value systems on students, should stick to programs that are grounded in scientific truth rather than religious control and fanaticism.

Advocates for Youth 3Rs Curriculum: To Begin the Transformation

Advocates for Youth is one of the largest adolescent advocacy groups in the United States. Their vision states:

Advocates for Youth partners with youth leaders, adult allies, and youth-serving organizations to advocate for policies and champion programs that recognize young people's rights to honest sexual health information; accessible, confidential, and affordable sexual health services; and the resources and opportunities necessary to create sexual health equity for all youth. (Advocates for Youth, 2008, para. 1)

The core values of Advocates for Youth are “rights, respect, and responsibility,” which they believe underline all the actions and programs they promote. The organization works in the United States and internationally to enhance adolescent reproductive and sexual health.

The Rights, Respect, and Responsibility K–12 curriculum was written by Elizabeth Schroeder, Ed.D., M.S.W, Eva S. Goldfarb, Ph.D., and Nora Gelperin, M.Ed., all of whom are experienced sex educators and have extensive preparation in the field of sexuality education. The program does not claim a “values-free” approach. The following is a list of what the authors felt

to be widely accepted societal values that should be implicitly and, when appropriate, explicitly communicated to students, parents, teachers, administrators, and community members:

- Parents/caregivers are the primary sexuality educators of their children. School districts and community-based organizations should function as partners with parents/caregivers in providing sexuality education. Together, these institutions have the responsibility to provide young people with honest, age-appropriate sexuality education.
- Sexuality is a natural and healthy part of being human.
- At every stage of their development, children have the right to age-appropriate information about health, sexuality and relationships.
- Every person has dignity and worth and deserves respect. Diversity in gender, identity, race, religion, culture, and sexual orientation should be celebrated.
- It is wrong to use psychological pressure, fear, or physical force to make people do things without their consent.
- People are responsible for their own behaviors and the consequences of those behaviors.
- Cisgender boys and men are often demonized or simply ignored when it comes to sexuality education. But boys aren't the bad guys. *In fact, no one is.* Normalizing everyone's right and ability to make positive choices about sexuality, sex, and relationships, regardless of what their peers are doing—regardless of their gender or the gender of their partners—can send a powerful message to all students.

- Open communication is an important part of maintaining healthy relationships.
- It is good for young people to be able to talk openly and comfortably about sexuality issues with their parents/caregivers, peers, trusted adults and, in the future, romantic partners.
- Relationships should never be coercive or exploitative, but instead should be based on mutual respect.
- It's normal to have sexual feelings; however, feelings should not always be acted upon.
- Until teens are old enough to act responsibly and protect themselves and their partner, it is healthiest to seek ways other than vaginal, oral, or anal sexual intercourse to express their romantic and sexual feelings.
- Young people have the responsibility to prevent unwanted pregnancies and sexually transmitted disease by abstaining from risky behavior or using effective contraception and/or condoms. (Advocates for Youth, 2008, para. 2–13)

While many of these assumptions are important, still some reinforce a sex-averse or sex-negative model of understanding. Particularly alarming is the stated concern about cisgendered males. Rather than confirming that females do have the right to retain power in a relationship, the authors felt the need to defend male behavior, even claiming male sexuality is ignored. In fact, heterosexual males are at the center of most programs, with the exception of pregnancy prevention, which falls to the responsibility of the female partner. Additionally, the assumptions remove sexual agency from adolescents by allowing an adult to dictate when an adolescent should engage in sexual behaviors. The authors describe their program as rooted in

social control theory. As described in Chapter 2, social control theory is grounded in a sex-negative ideology and does not promote a healthy or empowered understanding of sexuality.

In reading through the defense of the curriculum, it would seem that the 3Rs K-12 curriculum is a middle-ground compromise that would meet the widest audience. On the *Future of Sex Education* website, Bridges and Hauser (2014b) stated, “Sex education should be informed by evidence of what works best to prevent unintended pregnancy and sexually transmitted infections, but it should also respect young people’s right to complete and honest information” (para. 4). The curriculum moves beyond the factual, but stops short of emphasizing legitimate conversations around gender roles and stereotypes, power structures, and identity development that are more than surface-level conversations about tolerance. It also persists in employing rhetoric that defines when it is appropriate for adolescents to engage in sexual activity and promotes pregnancy and disease prevention as a signpost for the program.

Some of the major benefits of this program are that it is superior to existing programs, as it is grounded in extensive research, underwent a comprehensive Sexual Health Education Curriculum Analysis curriculum review by the Centers for Disease Control and Prevention in 2012, and approaches topics, even if superficially, about gender, orientation, and identity. Additionally, the curriculum is provided to schools, free for download, from the *Advocates for Youth* website. In terms of sequencing, the authors acknowledge the minimal amount of time most districts are providing teachers for sexuality education instruction. Lessons, when used sequentially, meet all of the National Sexuality Education Standards but can be used incrementally as time allows. Additionally, there is a version for use in California that aligns with the California Healthy Youth Act and covers all 16 topics recommended by the Centers for

Disease Control and Prevention as essential components of a sexuality education program. Conversely, a 2014 study conducted by the Centers for Disease Control and Prevention found that less than one-fifth of middle schools and less than 50% of high schools were teaching sexuality education that met the 16 components (CDC, 2014).

Lessons in the 3Rs curriculum are 40 minutes long in the grades K–5 series and 50 minutes in the grades six through 12 series (sequence provided in Appendix A). These details suggest that this is a program written with the constraints and difficulties of public schools in mind. Additionally, while this program does seem to be more of a compromise than a true dive into a rights-based program, that is not necessarily a negative. In a political environment that can be incredibly divisive, particularly on such a sensitive issue as adolescent sexuality education, a program that disarms the conservative right and meets the demands of the liberal left can only be applauded. The curriculum, unlike most, includes activities for students in grades nine through 12 to complete with parents and family to gain better understanding for personal family values and belief systems. Opening the door to parental conversation in a facilitated manner encourages conversations and allows for each family to discuss its personal sexuality education preferences for adolescents without imposing those preferences on the children of others.

Preparation in how to implement this program is provided in a workshop format, and generally participant districts are charged only the travel costs and supply costs of the trainers. While the workshop is recommended, it is not required, making this program immediately accessible to anyone able to download it. This curriculum moves programming closer to a more inclusive, rights-based approach and, given the current landscape, should be implemented wherever possible.

Rights-Based Sexuality Education: Social Justice Ideals for Sexuality Education

As previously discussed, data generally show a lack of support for AO sexuality education programs. Additionally, data are mixed about abstinence-plus and comprehensive programming. Although the data are more supportive of the latter programs, they are evaluated based on programmatic goals of reducing the physical risks of teenage sexual behavior, such as unplanned pregnancy and sexually transmitted infections (STI). Leaders in the field of sex education suggest a shift in purpose from risk reduction to a more holistic, sex-positive emphasis that aligns with teenage development (Berglas et al., 2014b).

The rights-based approach is rooted in the 1948 Universal Declaration of Human Rights and international treaties and pacts that reaffirm human rights, as well as the United Nations' work in the 1990s, which focused on human rights, sexual and reproductive health, HIV and AIDS, and gender equality (Berglas et al., 2014b; Dixon-Mueller et al., 2009). In 2006, in response to well-documented patterns of abuse, a distinguished group of international human rights experts met in Yogyakarta, Indonesia, to outline a set of international principles relating to sexual orientation and gender identity. The result was the Yogyakarta Principles, a “guide to human rights which affirm binding international legal standards with which all States must comply” (International Commission of Jurists, 2007, para. 1). These principles help guide a rights-based approach to sexuality education, summarized in part here:

1. ensuring equal access to education and equal treatment regardless of sexual orientation or gender identity;
2. ensuring that students are nurtured in their sexuality and gender expression;

3. ensuring that students are educated about human rights including respect for diverse sexualities and gender identities;
4. ensuring that students are not isolated or marginalized in the name of protecting them from bullying;
5. ensuring that disciplinary measures in school respect human dignity and do not penalize students on the basis of their sexuality or gender identity; and
6. ensuring that adults who have suffered a loss of education due to discrimination have access to adult educational resources without discrimination. (International Commission of Jurists, 2007)

More recently, in 2012, the United Nations Commission on Population and Development reaffirmed the principles of sexual rights and gender equality for adolescents, voicing support for adolescents' right to comprehensive sexuality education and calling upon governments to provide “evidence-based comprehensive education on human sexuality, sexual and reproductive health, human rights and gender equality to enable [youth] to deal in a positive and responsible way with their sexuality” (Berglas et al., 2014b, p. 64). This paradigm shift in the international community has yet to take hold in the United States, whereas references to the rights-based approach have been utilized to write international guidelines and educational standards for sexuality education. The rights-based approach aims to make the Yogyakarta principles and the work of the United Nations actionable and central to programming, “underscored by a common belief that issues of sexuality, sexual health, sexual rights and gender need to be addressed together to prepare youth to make positive, informed and responsible choices throughout their sexual lives” (Berglas et al., p. 64).

Essential to this approach is the acknowledgement that social and cultural expectations engrain in children and adolescents expectations about gender and sexuality, as well as families, communities, and institutions dictating their appropriate role in society. Programs, working from this understanding of development, address power dynamics, gender norms, and how internalized attitudes can shape sexual behavior (Berglas et al., 2014b). Through interviews with leaders in the field of sexuality education, Berglas et al. (2014b) were able to identify concrete topics that a rights-based curriculum would include, as outlined in Table 2.

Table 2

Topics for Inclusion as Content in a Rights-Based Approach to Sexuality Education

Topic	Description or rationale
Gender equality and norms	“A [rights-based program includes] clear recognition of the role that gender norms play ...emphasizing and really establishing more egalitarian gender norms, not only in terms of gender equality for girls, but in norms and roles that are less rigid for boys...as well.”
Race, ethnicity and class	“[It gets] people to look at the intersections between messages about sexuality and messages about race and messages about ethnicity. They’re very potent in [U.S.] culture.”
Sexual orientation and diversity	“Not only does [leaving gay, lesbian, bisexual and transgender students out of the curriculum] impact the individual, but it also really impacts the campus climate. If you are just talking about heterosexuality, then you are reinforcing this heteronormative climate that can be really harmful and hurtful for [these] students.”
Violence	“It includes gender-based violence...but also [looks] at the way violence plays out around homophobia, gang-related violence, the everyday school bullying and such that’s part of the majority of young men’s lives at some moment or another.”
Relationship rights and responsibilities	“It’s not like some international treaty, some arcane civil rights. It’s about equality, and it’s about dignity and freedom from harm, but bringing it down to a very practical, personal, interpersonal level.”
Sexual expression and pleasure	“Of course we can’t demand sexual pleasure. You can’t just say ‘I have a right to sexual pleasure!’ But you can insist that this is part of sexual being and of the whole realm of being able to experience something in a pleasurable way.”
Citizenship and advocacy	“A [rights-based program gives] kids the space to see, to look critically [at what the norms and messages are], and to say... that I am better than this and I can make a difference. I can change things. It doesn’t have to be this way.”

Note. Adapted from “A rights-based approach to sexuality education: Conceptualization, clarification and challenge,” by N. F. Berglas, N. A. Constantine, and E. J. Ozer, 2014, *Perspectives on Sexual and Reproductive Health*, 46, p. 67.

One of the most critical elements of a rights-based approach is the way it facilitates a change in how sexuality education is taught, in that “it requires moving from a didactic model to one that is participatory, interactive and youth-centered” (Berglas et al., 2014b, p. 66). It is notable that many programs currently in use engage students in activities, but these activities are merely a method of content delivery from teacher to the students. The teacher focuses on providing information directly to the student, rather than engaging the student in the process of learning. A rights-based approach moves from this banking model of education (Freire, 1970) and, instead, seeks to integrate student life experience and understanding and cultivate students’ social agency and empowerment with respect to their sexuality. This approach requires a commitment to the principles of critical pedagogy, which advocate for a participatory experience that focuses on social justice and an understanding of not only the individual rights of students, but also the structural conditions that allow, or do not allow, students to exercise those rights as sexual beings.

The major issues with implementing a rights-based sexuality education program is that there is little empirical evidence at this time to put forth in support of the approach (Berglas et al., 2014b), and many leaders in the field consider the idea of student rights to conflict with the ideation of parental rights (Berglas et al.,). Because federal funding for sex education programs was, until recently, limited to abstinence-only approaches and the rights-based approach lies outside any established sex education guidelines, there are few examples of implementation of it in the United States. Although supporters of the rights-based approach have described positive results from it, further research is necessary to build a case for a complete curricular shift.

With regard to parents, many feel it is the duty of the parent to protect their child and, in doing so, feel it more appropriate to withhold information and prevent certain experiences. This type of belief is counterintuitive to a rights-based approach. Additionally, in order to facilitate a rights-based approach and create a classroom environment suitable to rights-based programming, a teacher would need to have specialized skill sets and be comfortable with difficult conversations about sexuality, power, gender, and rights, along with the typical content knowledge of a classroom. Given that very few teachers are adequately (or at all) prepared to teach in current sexuality education programs, the necessity of additional teacher preparation presents a particular implementation problem.

Dixon-Mueller et al. (2009) proposed a framework out of the rights-based approach pertaining to five dimensions of sexual behavior. These five dimensions include:

- 1) sexual relationships and the right to choose one's partner,
- 2) sexual expression and the right to seek pleasure,
- 3) sexual consequences and the right to cooperation from one's partner,
- 4) sexual harm and the right to protection, and
- 5) sexual health and the right to information, education, and health services.

Similar to the general rights-based approach, Dixon-Mueller et al. were hesitant to give an exact definition of "responsible sexual expression." One reason for this is the conservative political climate surrounding teenage sexuality, in which "sexual freedom is equated with sexual irresponsibility and carries strong moral and legal condemnation" (p. 112). However, these guidelines are not meant to be merely hopeful interpretations either. Rather, this framework is written as "logical extensions or applications of broader human rights principles" (p. 112). With

this in mind, the following sections outline each of the five dimensions of Dixon-Mueller et al.'s sexual ethics framework.

Sexual relationships and the right to choose one's partner. Formal United Nations agreements such as the 1966 International Covenant on Civil and Political Rights and the 1979 Convention on the Elimination of All Forms of Discrimination Against Women delineated that men and women have the right to choose their spouse, enter into marriage freely, and form a family. Informally, these freedoms also pertain to nonmarital relationships, in which women and men may enter (and exit) freely, and these freedoms should be guaranteed regardless of gender, sexual orientation, or sexual identity. The implication within the sexual ethics framework is that because all individuals have the freedom to enter and exit relationships by their own will, it is the responsibility of each individual to respect and honor the rights of people to do so. No one may be coerced or forced into a sexual relationship with another person. Additionally, each individual has the responsibility to respect the freedom of choice of their partner to engage or not engage in sexual relations as well as freely leave the relationship when they no longer consent to it. Finally, as an ethical obligation, everyone has the responsibility to neither promote nor condone a situation in which two people are forced into or forced to remain in a non-consensual marriage or sexual relationship.

Sexual expression and the right to seek pleasure. The pursuit of a satisfying, pleasurable, and safe sexual life is one granted to all—elderly, adults, adolescents, and children. This right is one that assures sexual expression free from coercion, discrimination, and violence; while it gives the basis for the right to seek pleasure, it also distinguishes from the right to demand or receive sexual pleasure from another without their consent.

The freedom to choose whether, when, with whom, and how to have sexual relations or exchanges, and to initiate and respond to expressions of sexual desire, carries a corresponding responsibility to respect the other person's integrity, privacy and freedom to choose—including their right to say no—regardless of the nature of the relationship.

(Dixon-Mueller et al., 2009, p. 113)

Additionally, the right to give consent does not implicate that consent is given for each encounter with the same individual, or for each sexual act within the relationship or independent encounter. There is no blanket consent, and consent must be sought with each interaction and during each progression of sexual intimacy. In other words, a person may consent to oral sex within a relationship, however, not to vaginal or to anal sex in the same relationship, and the person would need to gain consent each time they engaged with their partner in each given act.

Sexual consequences and the right to cooperation from one's partner. When discussing consequences to sexual behavior, it is important to situate that there are both positive and negative consequences to be had, and it is the individual's responsibility, in conjunction with their partner, to cultivate positive consequences and prevent negative consequences. Positive consequences of sexual behaviors can include strengthened bonds between partners, a wanted pregnancy, or physical bodily pleasure. In turn, negative consequences can include pain and humiliation, an unwanted or harmful pregnancy, or an STI. Every individual has the right to cooperation from their partner to prevent said negative consequences, as well as to promote positive ones. In direct relation to the prevention of an unwanted pregnancy and transmission of STI and HIV, this framework suggests that all individuals have the right to attain and use effective contraception as well as be provided with information about contraception. Along with

information about contraception, every person has a right to know the sexual health status of a partner, specifically, whether or not an individual is infected with a sexual disease or HIV. In conjunction, everyone has the responsibility to inform their partner of their own status and disclose any risks associated with engaging in sexual behaviors with them. Finally, it is engrained within this dimension of the framework that governments not only provide access to confidential health care and education, but also work to destigmatize marginalized or underserved populations due to gender, sexual identity, sexual orientation, or health status.

Sexual harm and the right to protection. Using affirmations from the 1948 Universal Declaration of Human Rights, the United Nations Vienna Declaration of the 1993 World Conference on Human Rights, and the 1993 Declaration on the Elimination of Violence Against Women, Dixon-Mueller et al. (2009) contended that every person has the freedom to live a life without cruelty, degradation, or torture. These freedoms extend specifically to include rape, sexual violence, sexual slavery, forced pregnancy, and other forms of sexual abuse. More specifically applied to the educational context, this dimension ensures that every person has “the right to liberty and security of the person [that] encompasses both the freedom to make responsible sexual choices and the right to protection from bodily harm” (Dixon-Mueller et al., p. 115). In terms of personal responsibility, “everyone has an ethical responsibility to not engage in or tolerate practices that cause harm to their sexual partners or others in their families and communities, or that violate their rights to safety and security with respect to their sexuality” (Dixon-Mueller et al., p. 115).

Sexual health and the right to information, education, and health services.

Adolescent access to sexual information is the key to this fifth dimension of the sexual ethics framework. The entitlement to information is engrained within nearly all United Nations documents in which sexual health is referenced. Because of this, it should follow that no one has the right to censor, withhold, or block access to education about personal health, reproductive health, and sexual intimacy. As a personal responsibility, every person should seek education to become informed and educated to advance their own sexual health and to protect the health of whomever they choose to engage with sexually. Additionally, the access to health services should encompass both male and female needs, as well as particular needs due to a person's sexual identity or orientation. Finally, any legal or political barriers in place that prevent access to information, education, or services should be removed so that all, including children and adolescents, have adequate and attainable access to services.

A key element to the five dimensions of the sexual ethics framework is that within each dimension, there is a key right of the individual as well as a personal responsibility to others. Essentially, there is a *to* and *from* of sexuality rights that are acknowledged, and each individual is afforded their own agency to make responsible decisions within their own personal circumstances and expectations. As Dixon-Mueller et al. (2009) explained, one of the most problematic issues with implementation of the sexual ethics framework in schools are the “conservative forces for whom the idea of sexual rights is deeply threatening, and for whom the concept of responsibility means that individuals must strictly conform to conservative and often punitive moral codes” (p. 116). However, it continues to be affirmed by international work in human rights that state governments should be held responsible for ensuring access to, protection

of, and equity in sexuality rights regardless of a person's gender, age, marital status, orientation, identity, race, or any other social identifiers.

A movement away from current fact- (and fear-) based programming to an empowering and just sexual ethics framework would take a marked transformation in attitudes and belief systems, as well a shift in the heteronormative, authoritarian, patriarchal social norms of the United States. A new curriculum, rooted in goals to empower adolescents, is crucial for the development of the individual. Fitz and Zucker (2014) found that female empowerment related to positive sexual health outcomes and attitudes. They concluded that critical feminist beliefs through reducing the effect of sexism within a society have a positive impact on female sexual well-being, particularly, female sexual self-efficacy. Similarly, Grose, Grabe, and Kohlfeldt (2014) found that sex education programs that do not promote traditional masculine and feminine archetypes lead to greater knowledge about sexual health and access to sexual health resources. McCracken, Unterhalter, Marquez, and Chelstowska (2015) asserted:

By encouraging girls to use their own voices and ideas about human rights in a safe and supportive environment, they are able to develop their own sense of safety and dignity, despite living in conditions where their human rights may be compromised through patriarchal constraints. (p. 50)

Curricula that places emphasis on empowerment, whether implicitly or explicitly, encompasses critical feminist theory. These programs allow for students to understand and acknowledge how gender is a socially constructed concept and reflect on gender norms. This is healthy for both adolescent boys and girls in that students can better interpret their peers' world understanding and think critically about their place in society. Empowerment programs also draw from Freirian

concepts in that students are pushed to think about social inequity and how it plays out in their lives. These types of programs allow for adolescent boys to break free of constraints framing masculinity as a position of power and as equals in sexual rights (Haberland & Rogow, 2015). “Boys and men need particularly to understand their responsibilities to respect the rights to freedom of choice, pleasure and protection of their sexual partners; girls and women need particularly to understand and exercise their own rights” (Dixon-Mueller et al., 2009, p. 117). Programs of this sort emphasize classrooms that push students to question societal norms and think critically about attitudes, beliefs, and heteronormative, patriarchal structure. In order to make such an immense shift in mindset, the sexual rights and responsibilities enveloped within the sexual ethics framework should be treated as “normative expectations” rather than ambitious goals of academic and advocate communities.

IMB Skills Model: Implementing a Social Justice Approach

The Public Health Agency of Canada uses the Information-Motivation-Behavioral Skills (IMB) model to ground sexual health education programs in three essential elements:

- *Information* – helps individuals to become better informed and to understand information that is relevant to their sexual health promotion needs and is easily translated into action.
- *Motivation* – motivates individuals to use their knowledge and understanding to avoid negative risk behaviors and maintain consistent, healthy practices and confidences.
- *Behavioral skills* – assists individuals to acquire the relevant behavioral skills that will contribute to the reduction of negative outcomes and, in turn, enhance sexual health.

The IMB model can help individuals to reduce risk behaviors, prevent negative sexual health outcomes, and guide individuals in enhancing sexual health. “Evidence of the IMB model’s effectiveness in the area of sexual risk reduction has been demonstrated in a number of diverse populations including young adult men, low income women, and minority youth in high school settings” (Public Health Agency of Canada, 2008, para. 29). Programs based on the three elements of the model provide theory-based learning experiences that can be readily translated into behaviors pertinent to sexual and reproductive health. Acknowledging that neither a focus solely on factual information nor a desire to simply control the sexual behavior of adolescents are sufficient to reduce negative sexual behaviors, it is important to incorporate personal goals and intrinsic motivational factors to help elicit change in individual behaviors and develop a sense of agency over their sexual selves.

In the IMB model, classroom teachers and school resources would provide sexual and reproductive health information that is based in fact and medically accurate. The information disseminated must be easily translated into an action to modify undesirable behaviors, directly linked to the desired behavior outcome, age/gender/developmentally appropriate, and practical/adaptable/culturally competent and socially inclusive. In the case of sex education, information must be provided to inform the risk-taking behavior of sexually active teenagers. The second component, motivation, becomes a factor when students are deciding what to do with the information they have acquired. According to Kirby (2002), “Plans to attend college are also related to initiation of sex, use of condoms, use of contraception, pregnancy, and childbearing” (p. 27). Once a student has been provided the information needed to understand the consequences of risk-taking behaviors, they can then combine that with future goals and

aspirations, which then can motivate the student intrinsically to avoid or alter their sexual behaviors. Kirby also illustrated that, multiple studies

all suggest that if schools can implement programs that keep youth in schools, make them feel more attached to school, help them succeed, and help them develop plans for higher education and future careers, they may delay their students' onset of sex, increase their contraceptive use, and decrease their pregnancy and childbearing. (p. 28)

Working within a school environment, a classroom teacher has the ability to use multiple resources in enhancing motivational factors for students, including college counseling, advisory/homeroom programs, guidance counselors, coaches, and administrators.

Canada has used the IMB model in its efforts to educate student and adults in schools, medical practices, health clinics, and the country's health departments. It has been shown to be effective in altering behaviors in varied socioeconomic groups, between genders, and across all races. Canada's use of the IMB model in sex education and STI-aversion education has made significant decreases in teen pregnancy and STI contractions.

As we compare the IMB model and Freire's notion of praxis (1970), we can apply both approaches to sex education in a pragmatic and theoretical way. Problem-posing education affirms men and women as beings in the process of becoming. Similarly, Freire said, "Leaders who do not act dialogically, but insist on imposing their decisions, do not organize the people—they manipulate them. They do not liberate, nor are they liberated: they oppress" (p. 178). Both of these quotes speak directly to the IMB model of sex education. The model requires the teacher to inform students of factual information, and from here move to critical dialogue. Critical dialogue seeks to create the conditions for empowerment, in which students can find their

intrinsic motivation to identify and change behaviors as they fit within their own moral constructs. In complete opposition to this idea, AO programming works on a banking method of education. The teacher delivers information, rooted in opinion and one-dimensional morality, to students, and they are not encouraged to question the construct. Students are told they are to act one way, and if they do not, then they are outside the acceptable societal norms. In accordance, the teacher often engages in manipulative banking practices, giving inaccurate or completely incorrect information in an effort to further enforce the hegemonic system and ideals, namely utilizing the social control paradigm to solidify the authoritarian power structure of adult over adolescent.

When looking at the simplified model of Canadian Sexual Health Education utilizing the IMB model it appears as such, as shown in figure 3 and in expanded form in figure 4:

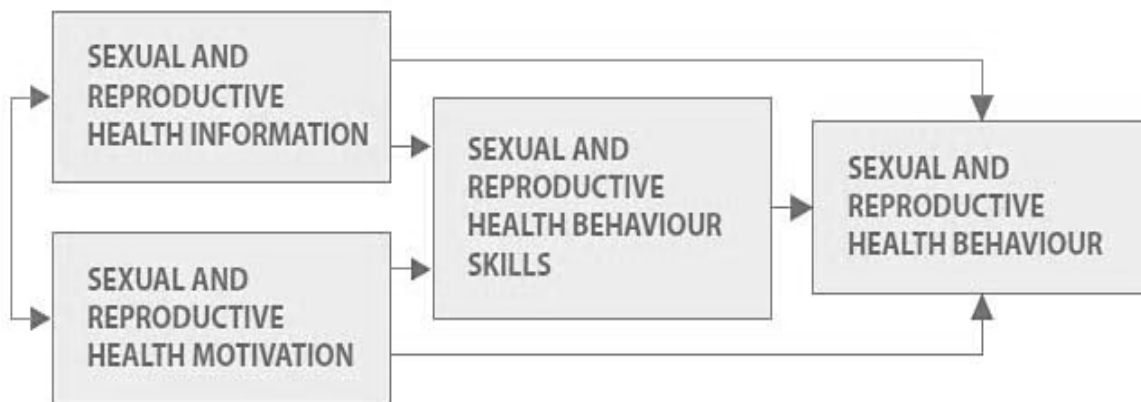


Figure 3. Canadian Sexual Health Education in the IMB Model. Public Health Agency of Canada. (2008). Retrieved from: <http://www.phac-aspc.gc.ca/publicat/cgshe-ldnemss/theory-eng.php>

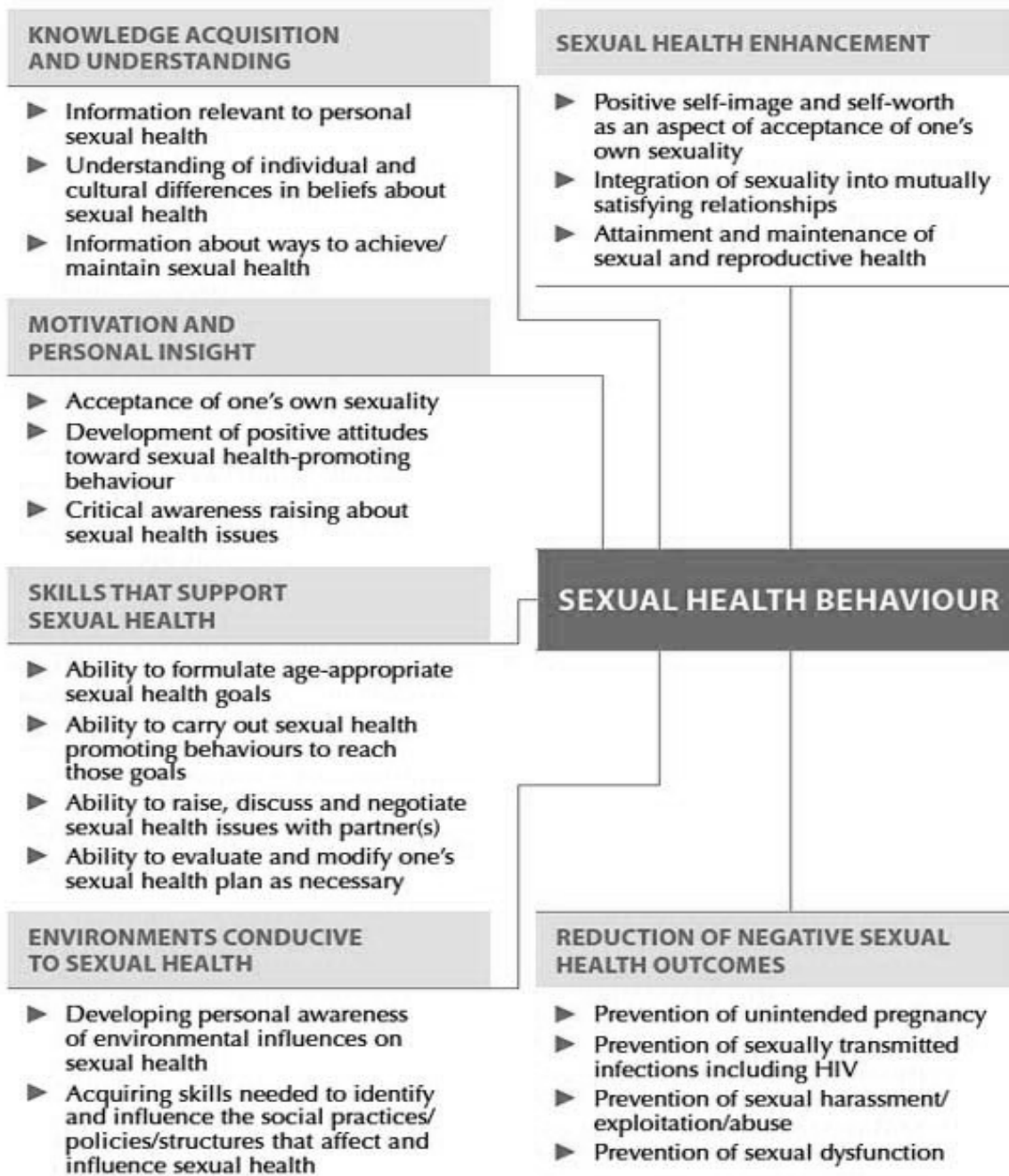


Figure 4. Canadian Sexual Health Elements. Public Health Agency of Canada. (2008). Retrieved from: <http://www.phac-aspc.gc.ca/publicat/cgshe-ldnemss/theory-eng.php>

Both of these charts outline how the Department of Health in Canada has applied sex education to the IMB model, removing ideological perspectives and placing the student at the center of the curriculum.

The Department of Health in Canada emphasized three key points as the foundation for their program:

- *Inclusivity* – sexual health education must be inclusive of the population it is targeting. The target population will rarely be a homogeneous group. Account for intragroup diversity and differing health needs.
- *Evidence-based* – Sexual health education should be grounded in a theoretical model that is applicable to the subject and target population being served. The most appropriate model will need to be used in order to meet the needs of the target population.
- *Evaluation* – Ensure that an evaluation mechanism is included into program planning and curriculum development. Check to ensure that this mechanism is able to evaluate the intended goals and identifies areas that need to be addressed and changed to achieve the desired results. Continual evaluation, reflection and modification are the hallmarks of a successful health education program. (Public Health Agency of Canada, 2008, para. 4–6)

This critical model of learning provides for a dialogic classroom in which students are provided information and are allowed to make personal decisions, while discovering their own intrinsic motivation (moral, ethical, logical), social agency, and sense of empowerment as developing sexual beings.

Programmatic Recommendations

In the United States, there is no shared standard for sexuality, and programs in use tend to rely on an imposed Western standard of adolescent sexuality that persistently reproduces heteronormativity and gender inequities. In the pursuit of sexuality justice, we must seek a program that is flexible, contextual, and speaks to the needs of many communities. “Positive sexuality development for adolescents will include relational and sexual self-efficacy, skills, judgment, and behavior. It will also include knowledge about the many layered realities of contemporary intimacy and sexuality, from the personal to the cultural” (Russell, 2005, p. 10). We must seek a programmatic shift that focuses on the personal development and empowerment of students, as well as supporting greater understanding of the world in which they live. Such an approach empowers students to be informed citizens and advocates for such rights for others in their global community.

As Russell (2005) posited:

Young people themselves need additional positively oriented programs and policies that will support them in creating their own positive sexual development. With very few exceptions, contemporary young people in the United States do not have access to spaces where the critical discussion of sexuality among other young people and with caring adults is encouraged. Today’s youth will benefit from opportunities to examine sexuality in the world around them in order to best understand their own sexuality development. (p. 10)

Program structure should be dialogic and grounded in critical pedagogy to allow students to use their own experience and knowledge to create a critical discussion about sexual health and sexual

rights of individuals and communities. As we attempt to develop a curriculum that is dialogic, represents a self-reflective experience, and is personally not publicly moralistic (students consider morality, not curriculum) but collectively just, it is imperative to remember that communication must be a central focus of the program. It is crucial to understand that the communication must move from “conversation about” to “conversation with” and that the program does not seek to find a pre-established or “right” ending. The teacher must be prepared in the implementation of a critical praxis, in order to better understand that the outcomes for all students will be different and their experiences varied. What matters is not the end, but the process—not the conclusions, but the experience in arriving to conclusions about such a significant aspect of their development from children to adulthood—namely their sexuality.

Freire’s (1970) definition of liberatory praxis entails the regenerating combination of reflection, speaking the word, and action (Darder, 2015). As Freire pointed out, reflection without action is verbalism (communication that never evolves into communication *with*), and action without reflection is activism (communication with that is not preceded by reflection). Using these critical principles, we can apply them pedagogically to models such as the IMB model of Canada to establish a dialogic, comprehensive program. Part of the curriculum should create the conditions whereby young people can come to recognize and name how societal norms as well as long standing stereotypes construct misconceptions about gender roles, sexual orientation, body image, racial and ethnic diversity, and healthy attitudes (McClain, 2001).

As the earlier discussion of critical feminist theory suggests, dismantling gender is a necessity for a fully inclusive program. Although current programs attempt to discuss stereotypes, they actually serve to reinforce stereotypes by pushing fear-based curriculum and

reproducing the notion that teenage boys cannot control their sexual urges and teenage girls' sexuality revolves around male sexuality. As McClain (2001) stated:

Education about gender issues would help illuminate how gender role expectations shape and constrain adolescents' understandings of sexuality and responsibility. Such gender education could be an important resource for young people by helping them better develop their capacities for responsible sexual agency. (p. 69)

A program inclusive of sexual identity and sexual orientation is a much-needed shift from the current available programs. McClain (2001) continued:

A curriculum that does not exclude gay and lesbian adolescents, and adolescents sorting out their sexual identity could help all students reflect on what values they believe are important to personal relationships... support of a role for school in encouraging reflection on values as part of sex education should not obscure that parents, families, and other institutions of civil society play an important role in shaping children's and adolescents' values and in developing their capacities. (p. 78)

We must interrupt assumptions about who belongs in a category and deconstruct the view that every person can be essentialized and defined by something as singular as whom they choose to love. That is not to argue that acknowledgement of differences should be ignored, but rather an understanding that someone is more than just gay, lesbian, or straight. Any student who falls outside heteronormative assumptions of sexuality is nevertheless a whole person, who experiences feelings in the same way as those within the heteronormative mainstream. Dialogical relationships, rooted in *a pedagogy of love* that builds understanding and solidarity across communities of difference (Darder, 2002, 2015), are the basis for developing and nurturing

acceptance of a more expansive view of human sexuality. The more students engage in critical dialogue with classmates and those they view as “other,” the more they can improve relationships, understanding, and acceptance of differences. As Linville et al. (2009) stated,

Focusing education on the importance of human relations and love, on the ability to interact with others in peace without the need for conquest or domination, may help create greater possibilities for all students, and open spaces for non-heterosexual love and sexuality to enter. (p. 253)

In a truly socially just sexuality education program, students must be able to name their sexuality in schools without fear of marginalization, participate in public dialogue about sexuality, seek knowledge and information about sexuality, be free to pursue sexual relationships without fear of abuse, force, or violence, and express themselves as their true sexual and gendered self. The rights-based approach, particularly the sexual ethics framework, is the most inclusive, safe, and adolescent-centered program approach currently available and is the only one addressing the comprehensive rights of adolescents. Through this approach, educators could implement a program grounded in sexuality justice that would dismantle the structures that most often position heterosexual males as aggressive conquerors of sexuality and heterosexual females as asexual victims or whores if they pursue sexual gratification. It also allows for those of non-hetero orientations to engage in the conversations as more than an afterthought or side note. Recommended resources for the study and implementation of a socially just sexuality education program are provided in Appendix B.

Finally, this rights-based approach, as it moves toward sexuality justice, prepares students for the real world as they learn about and how to be comfortable interacting with others with

ideas, religions, political beliefs, sexualities, identities, and genders that are different than their own. A skilled teacher will be able to facilitate difficult conversations as students work through and across their sexual and gender differences. Finding common understanding is crucial, as a goal of tolerance is not enough. Tolerance does not dismantle structures; rather, tolerance “leaves the superiority of heterosexuality and binary gender unchallenged, and the inferiority or moral marginalization of sexuality and gender differences in place” (Linville et al., 2009, p. 259).

Sexuality education rooted in social justice movements and inclusive of sexuality and gender variances should mark as its primary endeavor to work with students toward accepting, recognizing, and affirming differences—an endeavor that supports their empowerment as sexual beings. Linville et al. (2009) stated:

In the end, it must be remembered that people around the world are losing their lives because of the sexual pleasures that they seek, because of the sexual desires they feel, and/or because of the person with whom they choose to act. This is where the social justice claim resides.

With all this in mind, below is an actionable list of recommendations with rationale for development of a gender and identity inclusive sexuality education in schools today.

- Sexuality education should begin in late elementary school and continue, yearly, through graduation. As discussed in chapter 2, children begin to grapple with issues of sexuality and gender in early childhood. To reduce elements of shame, confusion, and misunderstanding, it would be proactive to begin sex-positive, empowerment work in primary school and respond yearly to the difference challenges students face as they mature.

- Utilizing the sexual ethics framework, district materials should be analyzed for their inclusion of discussions of gender, identity, and orientation and their reinforcement of behavior control and violations of adolescent rights. Schools that are responsive and inclusive promote positive communities and provide safe environments to all the children they serve.
- Materials that deliver medically-accurate, factual information should be made readily available to students, but coursework should not be centered on the information. The IMB model illustrates the power of not simply providing information, but in working with students to make meaning, to process, and to develop their own understanding of their sexuality and the effects of their interaction with that sexuality in relationships and with the greater society.
- Until a new program is developed, the Advocates for Youth 3Rs K-12 curriculum should be implemented in public schools (Appendix A). While the Rights-Based Approach is the preferred model, implementation would be difficult and require extensive curricular design work by schools, re-training of faculty, and would likely face many challenges as it is not a middle ground program like the 3Rs curriculum. Until the lens in which we view adolescent sexuality is readjusted, the Rights-Based Approach would be incredibly difficult to implement in public schools. Independent schools may be able to lead the way in this realm by implementing a Rights-Based program.
- Universities should develop degree programs that allow for individuals passionate about adolescent development to major in a field that trains future teachers in a

multidisciplinary study of education, psychology, health promotion, and human physiology, resulting in a specialty certification for health educators. Shown in this work, adolescent sexuality is multidisciplinary. Teachers are ill-equipped to guide students through the examination of their sexuality without specialty training.

Teachers and administrators interested in adolescent development should be provided with training that provides tools to promote and assess student learning through the work in disciplines that contribute to the understanding of adolescent development.

- As information about healthy sexuality is a human right, national standards should be adopted as a core function of the U.S. Department of Health and Human Services, as the U.S. Department of Education has no purview in state education systems.

Through implementing these recommendations, educators would be better trained, move away from the constraints of ideological and political arguments, and provide students with a curriculum centered on empowerment. Students currently left out of the conversation around adolescent sexuality would be brought back in, given a voice, and have those voices heard.

Educators would be allowed to recognize adolescents as emerging adults with the same rights to information as their adult counterparts, instead of a side-note to heteronormative, patriarchal policy.

The Role of Parents

Crucial to the implementation of any critical recommendations, the role of parents cannot be over-emphasized. Parents through conversation with their children, have a unique opportunity to change a child's understanding and meaning of their emerging sexuality. Regardless of what curriculum is in place in a school, the child is rooted at home. Without parental support of

changing the conversation, true transformation cannot take place. Debilitating attitudes around adolescent sexuality live in societal structures, the most concrete being family and religion. Public attitudes, particularly those of parents, towards adolescent sexuality have been called “restrictive” and “non-accepting” (Schalet, 2000, p. 76).

The opposite can be said of parental viewpoints in European countries such as the Netherlands. Researchers have argued that the sharp difference between cultural attitudes about adolescent sexuality can be attributed to the stark contrast between the much higher teen pregnancy rate in the U.S., the lessening of antagonistic gender relationships in the Netherlands, and a more positive view of sexuality in general. For the Dutch, sexuality occupies a place of “normality” and “pleasant togetherness” for individuals whereas American parents dissociate sex and love and believe that their adolescent is incapable of making responsible decisions with regards to teenage relationships (Schalet, 2000).

Essentially, as Schalet (2000) explained, “American parents emphasize how teenage sexuality is disruptive, the Dutch parents describe teenage sexuality as something that does not and should not present many problems” (p. 84). This alternate way of thinking allows for more open, honest, and empowered relationships between parents and adolescent, and between adolescents themselves. Parents hold a position in the child’s life to empower through love, support, and mutual respect. Without acknowledgement of their child’s sexuality, a core of their humanness, the divide between parent and child can grow until the child seeks support and understanding outside of the home. The work done in schools is nothing, if the work is not being done in homes and communities as well.

Considerations for Future Research

Additional subtopics omitted from this study include the prevalence of rape culture, sexual assault and harassment on school campuses, and school cultures that emphasize gender bias such as uniform policies, teaching methods, and behavior policies. It is acknowledged that these all have implications for a comprehensive and inclusive sexuality education curriculum; however, the limits of this work preclude their inclusion. A substantive review of these pervasive issues is recommended for future research. The intersectionality of race, class, and adolescent sexuality was frequently intertwined in the research for this work, however the breadth of this work could not adequately address the micro- and macro-issues in play. It is acknowledged that race and class play a major role in adolescent sexuality in a social context, and should be studied at length to better serve all children.

Within this study, only programs geared toward public K–12 schools are discussed. In the national arena (the public arena), other entities such as private independent, parochial, and Catholic schools are overshadowed in curricular argument because of their non-adherence to federal funding and state curricular requirements. While the student needs in these private schools are no different developmentally, the mission and visions of these private schools drive their curricular decision-making. Additional work in sexuality education and how it fits in the more conservative religious institutions is recommended.

Finally, it should be noted that curricular recommendations made in the final chapter are formulated under current law, with extreme reservation over the perceived policy and funding changes forthcoming by the newly elected President Trump and his Alt-right team of political advisors who have openly stated their intentions to alter Title IX, dismantle the Department of

Education, and defund Planned Parenthood. His consistent use and promotion of misogynistic and sexist language does not bode well for gender equity, and his advocacy against equality for non-hetero and non-cisgender Americans brings great concern for the social rights of those outside hetero-norms.

Epilogue

This work has been a fiercely personal and intense journey. Irrelevant is the amount of physical time spent in a chair with a laptop when your understanding of the world has been changed forever. In discussing this work with friends and colleagues, often the motives were questioned. “You’re not gay, right?” or “You’re going to be labeled a crazy feminist, you know?” Statements like these only further fueled my passion for this work. The idea that we can only fight for something that personally affects us or for a group that we align with ourselves is precisely why K–12 curriculum must change. We see only White, heterosexual males and think that this is the group that sets the norms for us all. This is not the worldview I want my children growing up with, nor is it the one I want to spend time in.

The 2016 U.S. presidential election was particularly difficult for many people. It was hateful and hurtful, it destroyed relationships, and it turned social media into a dangerous warzone. The constant hate aimed at Hillary Clinton forced many individuals to confront the rampant sexism in America and for some to deny its existence. Donald Trump’s comment about his ability to “grab them by the pussy” went viral, but still he won the electoral college magic number of 270 votes to take the presidency. This type of blatant misogyny solidified my belief that our only chance for change in this country lives in our young people. As educators, we have a unique opportunity to build the next generation, and we must take this seriously through the

conversations we provoke, the acceptance that we model, and the curriculum that we build to support one of the most precious dimensions of our students' humanity—their capacity to experience and share pleasure through physical intimacy and connection with themselves and others.

Appendix A

Advocates for Youth: 3Rs Sexuality Education Curriculum Scope and Sequence

Taken with permission from <http://www.advocatesforyouth.org/3rs-curric-lessonplans>

Lesson Number	Lesson Title	NSES Indicator	Grade Level	NSES Strand	NHES Strand
K.1	Different Kinds of Families	HR.2.CC.1	2	HR	CC
K.1	Different Kinds of Families	HR.2.IC.1	1	HR	IC
K.2	Understanding Our Bodies - The Basics	AP.2.CC.1	2	AP	CC
K.3	My Space, Your Space	PS.2.CC.1	2	PS	CC
K.3	My Space, Your Space	PS.2.IC.1	2	PS	IC
K.S1	Star of the Week	NA			
K.S2	Paper People	NA			
1.1	Friendships	HR.2.CC.2	2	HR	CC
1.1	Friendships	HR.2.IC.2	2	HR	IC
1.2	Gender Roles	ID.2.CC.1	2	ID	CC
1.2	Gender Roles	ID.2.INF.1	2	ID	INF
1.3	The Circle of Life	PR.2.CC.1	2	PR	CC
2.1	Understandings Our Bodies	AP.2.CC.1	2	AP	CC
2.2	Bullying is Never OK	PS.2.CC.2	2	PS	CC
2.2	Bullying is Never OK	PS.2.CC.3	2	PS	CC
2.3	Cut it Out! Making Teasing and Bullying Stop	PS.2.AI.1	2	PS	AI
2.3	Cut it Out! Making Teasing and Bullying Stop	PS.2.AI.2	2	PS	AI
2.3	Cut it Out! Making Teasing and Bullying Stop	PS.2.IC.2	2	PS	IC
2.3	Cut it Out! Making Teasing and Bullying Stop	PS.2.SM.1	2	PS	IC
2.4	Seeking Help	PS.2.AI.1	2	PS	AI
2.4	Seeking Help	PS.2.SM.1	2	PS	SM
3.1	Respect for All	HR.5.SM.1	5	HR	SM
3.1	Respect for All	ID.5.ADV.1	5	ID	ADV
3.1	Respect for All	ID.5.SM.1	5	ID	SM
3.2	Teasing, Harassment and Bullying	PS.5.AI.1	5	PS	AI
3.2	Teasing, Harassment and Bullying	PS.5.CC.1	5	PS	CC
3.2	Teasing, Harassment and	PS.5.IC.1	5	PS	IC

	Bullying				
3.2	Teasing, Harassment and Bullying	PS.5.INF.1	5	PS	INF
3.3	Feeling SAFE!	PS.5.AI.1	5	PS	AI
3.4	Personal Timeline	NA			
4.1	Making Sense of Puberty	PD.5.AI.1	5	PD	AI
4.1	Making Sense of Puberty	PD.5.AI.2	5	PD	AI
4.1	Making Sense of Puberty	PD.5.CC.1	5	PD	CC
4.1	Making Sense of Puberty	PD.5.CC.2	5	PD	CC
4.1	Making Sense of Puberty	PD.5.INF.1	5	PD	INF
4.1	Making Sense of Puberty	PD.5.SM.1	5	PD	SM
4.2	Figuring Out Friendships	HR.5.AI.1	5	HR	AI
4.2	Figuring Out Friendships	HR.5.CC.1	5	HR	CC
4.2	Figuring Out Friendships	HR.5.INF.1	5	HR	INF
4.3	Your Body, Your Rights	PS.5.AI.2	5	PS	AI
4.3	Your Body, Your Rights	PS.5.CC.2	5	PS	CC
4.4	Taking a Stand Against Bullying	PS.5.SM.1	5	PS	SM
5.1	Sexual and Reproductive Anatomy	AP.5.AI.1	5	AP	AI
5.1	Sexual and Reproductive Anatomy	AP.5.CC.1	5	AP	CC
5.2	Puberty and Reproduction	PD.5.CC.1	5	PD	CC
5.2	Puberty and Reproduction	PD.5.CC.1	5	PD	CC
5.2	Puberty and Reproduction	PD.5.CC.3	5	PD	CC
5.3	Learning about HIV	SH.5.CC.1	5	SH	CC
5.4	What is Love Anyway?	ID.5.AI.1	5	ID	AI
5.4	What is Love Anyway?	ID.5.CC.1	5	ID	CC
5.5	Being Clear with Your Friends	HR.5.IC.1	5	HR	IC
5.5	Being Clear with Your Friends	PS.5.IC.2	5	PS	IC
6.1	Change is Good	PD.8.AI.1	8	PD	AI
6.1	Change is Good	PD.8.CC.1	8	PD	CC
6.2	Gender Roles, Gender Expectations	ID.8.CC.2	8	ID	CC
6.3	Understanding Boundaries	HR.8.IC.2	8	HR	IC
6.3	Understanding Boundaries	PS.8.CC.3	8	PS	CC
6.3	Understanding Boundaries	PS.8.CC.4	8	PS	CC
6.4	Communicating about a Sensitive Topic	PR.8.IC.1	8	PR	IC
6.5	More Than Friends: Understanding Romantic Relationships	HR.8.CC.3	8	HR	CC
6.6	Liking and Loving: Now and	HR.8.CC.4	8	HR	CC

	When I'm Older				
6.6	Liking and Loving: Now and When I'm Older	PR.8.CC.1	8	PR	CC
6.6	Liking and Loving: Now and When I'm Older	PR.8.CC.2	8	PR	CC
6.7	Being A Sex Ed Sleuth	AP.8.AI.1	8	AP	AI
6.7	Being A Sex Ed Sleuth	PR.8.AI.1	8	PR	AI
6.7	Being A Sex Ed Sleuth	PR.8.AI.3	8	PR	AI
6.7	Being A Sex Ed Sleuth	SH.8.AI.1	8	SH	AI
7.1	Everyone's Got Body Parts - Part One	AP.8.CC.1	8	AP	CC
7.10	Being the Change You Want to See in the World	PS.8.ADV.1	8	PS	ADV
7.10	Being the Change You Want to See in the World	PS.8.SM.1	8	PS	SM
7.11	Being Smart, Staying Safe Online	HR.8.GS.1	8	HR	GS
7.11	Being Smart, Staying Safe Online	HR.8.SM.2	8	HR	SM
7.2	Everyone's Got Body Parts - Part Two	AP.8.CC.1	8	AP	CC
7.3	Reproduction Basics	PR.8.CC.1	8	PR	CC
7.4	Great Expectations: Signs and Symptoms of Pregnancy	PR.8.CC.5	8	PR	CC
7.4	Great Expectations: Signs and Symptoms of Pregnancy	PR.8.CC.6	8	PR	CC
7.5	Protecting Your Health: Understanding and Preventing STDs	SH.8.CC.1	8	SH	CC
7.5	Protecting Your Health: Understanding and Preventing STDs	SH.8.CC.2	8	SH	CC
7.5	Protecting Your Health: Understanding and Preventing STDs	SH.8.CC.3	8	SH	CC
7.6	I Am Who I Am	ID.8.CC.1	8	ID	CC
7.6	I Am Who I Am	ID.8.IC.1	8	ID	IC
7.7	Blue is for Boys, Pink is for Girls...Or Are They?	ID.8.INF.1	8	ID	INF
7.8	Making SMART Choices	PD.8.DM.1	8	PD	DM
7.8	Making SMART Choices	PR.8.DM.1	8	PR	DM
7.9	Let's Talk about Sex	PR.8.IC.2	8	PR	IC
7.9	Let's Talk about Sex	SH.8.IC.1	8	SH	IC
8.1	Creating a Safe School: Celebrating All	ID.8.ADV.1	8	ID	ADV

8.1	Creating a Safe School: Celebrating All	ID.8.AI.1	8	ID	AI
8.1	Creating a Safe School: Celebrating All	PS.8.SM.2	8	PS	SM
8.10	STD Basics: Reducing Your Risks	SH.8.AI.2	8	SH	AI
8.10	STD Basics: Reducing Your Risks	SH.8.GS.1	8	SH	GS
8.2	The World Around Me	HR.8.INF.1	8	HR	INF
8.2	The World Around Me	PD.8.INF.1	8	PD	INF
8.2	The World Around Me	PR.8.INF.1	8	PR	INF
8.2	The World Around Me	SH.8.INF.1	8	SH	INF
8.3	Healthy or Unhealthy Relationships?	HR.8.CC.1	8	HR	CC
8.3	Healthy or Unhealthy Relationships?	HR.8.CC.2	8	HR	CC
8.3	Healthy or Unhealthy Relationships?	HR.8.SM.1	8	HR	SM
8.4	Choose Your Words Carefully	HR.8.IC.1	8	HR	IC
8.4	Choose Your Words Carefully	HR.8.IC.3	8	HR	IC
8.5	We Need to Talk	PR.8.IC.2	8	PR	IC
8.5	We Need to Talk	SH.8.IC.1	8	SH	IC
8.6	Talking without Speaking: The Role of Texting In Relationships	HR.8.CC.5	8	HR	CC
8.6	Talking without Speaking: The Role of Texting In Relationships	HR.8.INF.2	8	HR	INF
8.7	Warning Signs: Understanding Sexual Abuse and Assault	PS.8.AI.1	8	PS	AI
8.7	Warning Signs: Understanding Sexual Abuse and Assault	PS.8.CC.1	8	PS	CC
8.7	Warning Signs: Understanding Sexual Abuse and Assault	PS.8.CC.2	8	PS	CC
8.7	Warning Signs: Understanding Sexual Abuse and Assault	PS.8.IC.1	8	PS	IC
8.8	Birth Control Basics	PR.8.AI.2	8	PR	AI
8.8	Birth Control Basics	PR.8.CC.3	8	PR	CC
8.8	Birth Control Basics	PR.8.CC.4	8	PR	CC
8.9	Using Condoms Effectively	PR.8.SM.1	8	PR	SM
8.9	Using Condoms Effectively	SH.8.SM.1	8	SH	SM
9.1	They Love Me . . . They Love Me Not . . .	HR.12.CC.1	12	HR	CC
9.1	They Love Me . . . They Love Me Not . . .	PS.12.INF.1	12	PS	INF

9.10	STD Smarts	SH.12.AI.2	12	SH	AI
9.10	STD Smarts	SH.12.CC.1	12	SH	CC
9.10	STD Smarts	SH.12.CC.2	12	SH	CC
9.11	Creating Condom Confidence	PR.12.SM.1	12	PR	SM
9.11	Creating Condom Confidence	SH.12.SM.2	12	SH	SM
9.2	How Well Do I Communicate with Others?	PR.12.IC.1	12	PR	IC
9.3	It Wasn't My Fault	PS.12.AI.1	12	PS	AI
9.3	It Wasn't My Fault	PS.12.AI.2	12	PS	AI
9.3	It Wasn't My Fault	PS.12.CC.4	12	PS	CC
9.3	It Wasn't My Fault	PS.12.IC.1	12	PS	IC
9.4	Sexual Orientation, Behavior & Identity: How I Feel, What I Do and Who I Am	ID.12.CC.2	12	ID	CC
9.5	Understanding Gender	ID.12.CC.1	12	ID	CC
9.6	Decisions, Decisions	PD.12.DM.1	12	PD	DM
9.6	Decisions, Decisions	PR.12.DM.1	12	PR	DM
9.6	Decisions, Decisions	SH.12.DM.1	12	SH	DM
9.7	Sexual Decision Making	HR.12.CC.2	12	HR	CC
9.7	Sexual Decision Making	HR.12.IC.2	12	HR	IC
9.7	Sexual Decision Making	HR.12.SM.1	12	HR	SM
9.7	Sexual Decision Making	PR.12.INF.1	12	PR	INF
9.8	Planning and Protection: Avoiding or Managing STDs	SH.12.GS.1	12	SH	GS
9.8	Planning and Protection: Avoiding or Managing STDs	SH.12.INF.1	12	SH	INF
9.9	What If . . . ?	PR.12.AI.3	12	PR	AI
9.9	What If . . . ?	PR.12.AI.4	12	PR	AI
9.9	What If . . . ?	PR.12.CC.4	12	PR	CC
9.9	What If . . . ?	PR.12.CC.5	12	PR	CC
9.9	What If . . . ?	PR.12.INF.2	12	PR	INF
9.9	What If . . . ?	PR.12.INF.3	12	PR	INF
10.1	Rights Respect Responsibility	HR.12.CC.3	12	HR	CC
10.1	Rights Respect Responsibility	HR.12.INF.2	12	HR	INF
10.1	Rights Respect Responsibility	PS.12.CC.3	12	PS	CC
10.2	Know Your Options	PR.12.CC.1	12	PR	CC
10.2	Know Your Options	PR.12.CC.2	12	PR	CC
10.3	We All Have Rights	PR.12.CC.3	12	PR	CC
10.3	We All Have Rights	SH.12.CC.3	12	SH	CC
10.4	Let Me Tell You	SH.12.IC.1	12	SH	IC
10.4	Let Me Tell You	SH.12.INF.1	12	SH	INF
10.5	Using Technology Respectfully	HR.12.CC.4	12	HR	CC

	and Responsibly				
10.5	Using Technology Respectfully and Responsibly	HR.12.SM.2	12	HR	SM
10.6	Our Space, Safe Space	ID.12.ADV.1	12	ID	ADV
10.6	Our Space, Safe Space	ID.12.SM.1	12	ID	SM
10.6	Our Space, Safe Space	PS.12.ADV.1	12	PS	ADV
10.7	Trust It or Trash It? Finding Accurate Sex Ed Info	PR.12.AI.1	12	PR	AI
10.7	Trust It or Trash It? Finding Accurate Sex Ed Info	PR.12.AI.2	12	PR	AI
11.1	How Do You See Me?	PD.12.INF.1	12	PD	INF
11.2	My Boundaries	HR.12.IC.2	12	HR	IC
11.2	My Boundaries	HR.12.SM.1	12	HR	SM
11.3	Is It Abuse If?	HR.12.IC.1	12	HR	IC
11.3	Is It Abuse If?	PS.12.CC.1	12	PS	CC
11.3	Is It Abuse If?	PS.12.IC.2	12	PS	IC
11.4	Wanted Qualified Parent	PR.12.DM.2	12	PR	DM
11.5	Gender and Sexual Orientation: Understanding the Difference	ID.12.CC.1	12	ID	CC
11.5	Gender and Sexual Orientation: Understanding the Difference	ID.12.INF.1	12	ID	INF
12.1	What are My Reproductive Rights?	PR.12.CC.6	12	PR	CC
12.2	My Life, My Decisions	PD.12.CC.1	12	PD	CC
12.2	My Life, My Decisions	PR.12.INF.1	12	PR	INF
12.3	Sexual Rights: Who Decides?	PS.12.CC.2	12	PS	CC
12.3	Sexual Rights: Who Decides?	PS.12.INF.2	12	PS	INF
12.4	Getting Savvy about STD Testing	SH.12.ADV.1	12	SH	ADC
12.4	Getting Savvy about STD Testing	SH.12.SM.1	12	SH	SM
12.5	The Pleasure Principle	AP.12.CC.1	12	AP	CC
12.5	Fantasy or Reality: How Sexually Explicit Media Affects How We See Relationships IRL	HR.12.AI.1	12	HR	AI
12.5	Fantasy or Reality: How Sexually Explicit Media Affects How We See Relationships IRL	HR.12.INF.1	12	HR	INF

Appendix B

Recommended Materials and Resources for Sex Educators

Programs:

- Advocates for Youth *3Rs*
- Unitarian Universalist Association *Our Whole Lives*
- The National Campaign to Prevent Teen and Unplanned Pregnancy Effective Programs Database: <https://thenationalcampaign.org/featured-topics/sex-education-and-effective-programs>
- Beyond Bullying Project: <http://beyondbullyingproject.com/>
- Hulu original cartoon: *Rosaline*

Organizations:

- Advocates for Youth – www.advocatesforyouth.org
- Answer – answer.rutgers.edu
- GLSEN – www.glsen.org
- ETR Associates – www.etr.org
- Guttmacher Institute – www.guttmacher.org
- Sexuality Education and Information Council of the U.S. – www.seicus.org
- Scarleteen – www.scarleteen.com
- Center for Research & Education on Gender and Sexuality – cregs.sfsu.edu

Conferences:

- American Association of Sex Educators, Counselors, and Therapists (AASECT)
- American School Health Association (ASHA)
- Center for Sex Education (CSE) National Sex Ed Conference

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