

Abstinence Moves to the Head of the Class

Topic Gains Favor, And Funding, in Sex Education Courses

By CEGI CONNOLLY
Washington Post Staff Writer

Until they were married last spring, Cynthia Scarpa and her husband remained virgins. At times the temptation was overpowering, she tells middle school students, "but it's worth it."

The alternative, she warns, is a life of medical and emotional trauma. "This is what it looks like," she says, showing the students pictures of genital warts as she describes human papilloma virus (HPV). "This stays in your body forever. It leads to cancer. If you don't want to get this, then don't trust a condom."

Scarpa, 25, is a foot soldier in the burgeoning abstinence-only movement, an approach to sex education that rejects "safe sex" as an oxymoron and touts moral behavior as a medical model.

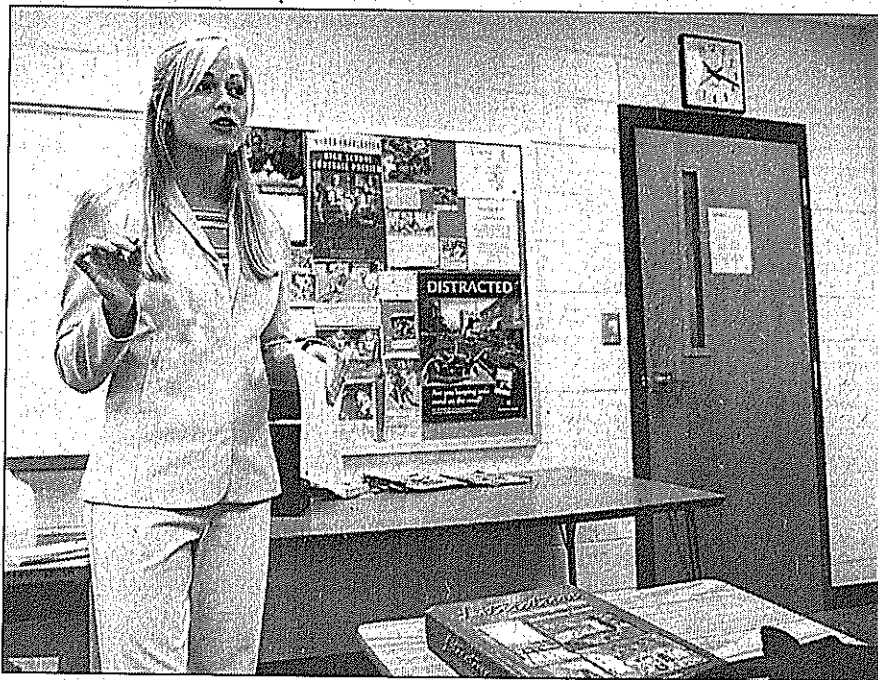
What began as a modest, grass-roots effort in the religious community is emerging this week as a major public policy debate in Washington. The first congressional hearing on funding for such programs was held yesterday as part of the effort to renew the nation's welfare laws.

President Bush, keeping a campaign promise, has proposed nearly doubling federal spending on abstinence programs, to \$138 million next year. On his trip to Sioux Falls, S.D., today, the National Abstinence Clearinghouse was planning to present him with a briefing book titled "Abstinence Programs: Success in the Field."

Opponents say abstinence-only is a largely unproven and possibly irresponsible approach that withholds potentially life-saving information from American youth. Although abstinence is the surest form of protection, proponents of a more comprehensive model argue it is unrealistic to expect all adolescents and young adults to follow that path.

"There is some merit in promoting abstinence," said Belle Sawhill, senior researcher at the Brookings Institution and president of the National Campaign to Prevent Teen Pregnancy. "But it's also the case that there are going to be kids, no matter what adults tell them, who are going to be sexually active, and it doesn't make sense to deny them information about how to protect themselves."

Once the province of parents, sex education has grown into a public health priority. "By the time they graduate from high school, unfortunately, 65 percent of our students have already engaged in intercourse," said Lloyd J. Kolbe, director of the Division of Adolescent and School Health at the Cen-



Cynthia Scarpa talks about abstinence to a high school class in North Charleston, S.C., as part of an effort by the Heritage Community Services to promote abstinence among teenagers.

ters for Disease Control and Prevention.

For lawmakers, the issue has sparked a ferocious battle over money, science and ideology.

The Bush budget would funnel about \$50 million to states as matching grants and would provide about \$88 million more for organizations such as Scarpa's South Carolina-based Heritage Community Services that adhere to eight strict criteria prohibiting any mention of contraception except failure rates.

Administration officials say the dramatic increase is an effort to catch up to federal spending on other forms of sex education.

"There is ample information out there for young people about how to protect themselves in terms of comprehensive sex education," said Claude A. Allen, deputy secretary of health and human services. "We have not made a clear, concise message to them about the benefits of abstinence."

Much of the money Bush and Allen categorize as comprehensive sex education is found in Title X. That federal program enables poor women, regardless of age or marital status, to receive medical services such as breast exams, pap smears, diabetes screening and examinations for sexually transmitted diseases.

"The parity argument is nonsense," said Rep. James C. Greenwood (R-Pa.). "Title X funding is not about school-based educational programs. This is not even a case of apples and oranges; it's apples and marmalade."

The CDC annually spends \$47 million on HIV-prevention programs and about \$9 million on efforts to prevent teen pregnancy.

Greenwood and Rep. Barbara T. Lee (D-Calif.) are sponsoring legislation that would give states \$100 million a year for programs that teach "both abstinence and contraception, from both a values and public health perspective," they wrote to Bush. "Since 1996, Congress has committed over half a billion dollars to abstinence-only education programs and zero dollars to comprehensive sexuality education. . . . It is time for a more balanced approach."

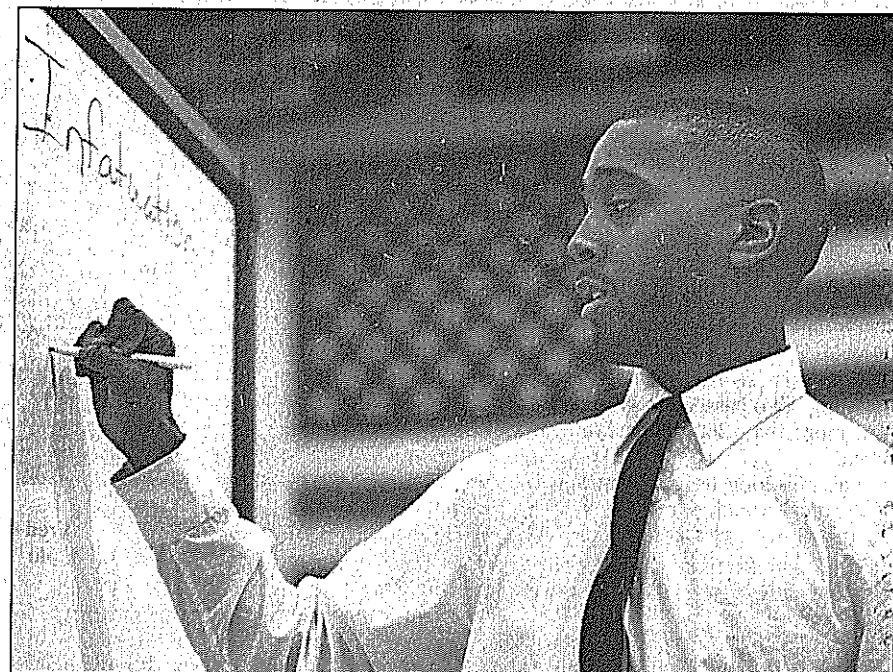
With largely inconclusive data and strong emotions on both sides, finding the best approach has been difficult.

Robert Rector, a Heritage Foundation researcher who drafted the criteria for abstinence-only funding, recently released a report highlighting 10 promising evaluations of abstinence-only programs. However, several of the studies were conducted over short periods of time with small groups of teens, and none has been published in a peer-reviewed scientific journal.

The most compelling cases in Rector's report focused on virginity pledge programs. In several instances, teens who signed such pledges delayed sexual activity by about 18 months. "Early sexual activity correlates with many partners, and that is a major factor in venereal disease and marital failure," Rector said in an interview.

Peter S. Bearman, chairman of the sociology department at Columbia University, found that abstinence pledging was most successful when no more than a third of the youngsters participated. Those who pledged then felt they represented an elite "moral community."

More significant, he found that teens



PHOTOS BY PAULA ILLINGWORTH FOR THE WASHINGTON POST

At a class on abstinence at Fort Dorchester High School in North Charleston, teacher Robert Knight asks the students if they can explain the difference between love and infatuation.

who broke the pledge were less likely to use contraception during intercourse, putting them at higher risk for pregnancy and sexually transmitted diseases. "Therefore, it seems obvious to me that all adolescents should learn how to protect themselves," he wrote.

To many in the abstinence movement, the scientific studies mean far less than their personal encounters with young people each day.

Dallas physician Hal Wallis said he became active in the abstinence movement after seeing patients who mistakenly thought condoms provided fail-safe protection. In addition to unwanted pregnancies, Wallis said, he has treated many young women for HPV, which can lead to cervical cancer.

With an infusion of \$3 million in federal money, Scarpa and her co-workers at Heritage are carrying the say-no-to-sex message to 24,000 teenagers across South Carolina. As she traveled to schools in the Charleston area recently, Scarpa told students, "I'm living proof this works. I believe in you, that you can do this, too."

After reviewing six dozen studies, researcher Douglas Kirby concluded that "the jury is still out" on the question of how well abstinence-only programs prevent teen pregnancy and disease. "The evidence is not conclusive about the impact of abstinence-only programs," he wrote in "Emerging Answers," a study published by the National Campaign to Prevent Teen Pregnancy.

By contrast, he said in an interview, "there is very strong evidence that some, but not all, comprehensive sex education programs can delay sex, reduce frequency

of sex, reduce the number of partners, increase condom use and increase contraceptive use."

The Institute of Medicine's report in late 2000 concluded that abstinence-only programs constitute "poor fiscal and public health policy" because of the lack of scientific data. Instead, the institute advocated comprehensive, age-appropriate sex education programs. The American Academy of Pediatrics, the American Nurses Association and the American Medical Association have endorsed broad sex education.

At the CDC, independent researchers have evaluated hundreds of sex education programs and identified which ones "have credible, scientific evidence," Kolbe said. The programs listed in the CDC's "Programs That Work" must publish data in scientific journals indicating they have reduced sexually risky behavior.

"Three [programs] have delayed sexual intercourse, two have decreased the number of sexual partners and seven have increased condom use," he said. Overall, sexual activity among students in grades 9 through 12 dropped from 54 percent to 50 percent, and teen pregnancies fell from 8 percent to 6.4 percent, Kolbe added.

The answer, said Greenwood and other lawmakers, may lie in simple common sense.

"When you do both of them, you get a greater benefit," said Rep. W.J. "Billy" Tauzin (R-La.), chairman of the House Committee on Energy and Commerce, which opened the debate yesterday. "If we know abstinence works and these other programs work, why not do both?"