

Responsible Education About Life (REAL) Act

The Responsible Education About Life (REAL) Act, sponsored by Senator Frank Lautenberg (D-NJ) and Representatives Barbara Lee (D-CA) and Christopher Shays (R-CT), would provide federal money to support responsible sex education in schools. This education would include science-based, medically accurate, and age appropriate public health information about both abstinence and contraception.

Background

No dedicated federal funding currently exists for comprehensive sex education in schools. In other words, there is no federal appropriation specifically for comprehensive sex education. From 1996 through federal fiscal year 2007, Congress committed more than \$1.4 billion dollars (through both federal and state matching funds) to abstinence-only-until-marriage programs;¹ meanwhile, zero dollars went to comprehensive sex education.

Three separate federal funding streams support abstinence-only-until-marriage programs:

- ◆ 1996 Welfare Reform Act (Title V);
- ◆ Adolescent Family Life Programs (AFLA); and
- ◆ Community-Based Abstinence Education (CBAE).

Programs receiving federal abstinence-only monies through these three funding streams are prohibited from discussing the health benefits of contraceptives and condoms. Moreover, Congress continues to fund such abstinence-only programs, despite research that shows that programs teaching abstinence plus contraception are far more effective than abstinence-only-until-marriage programs.^{2,3,4,5,6} It is time for a more balanced approach.

What Would the Responsible Education About Life (REAL) Act Do?

The REAL Act would fund programs with important characteristics, including:

- ◆ Being age-appropriate and medically accurate;
- ◆ Not teaching or promoting religion;
- ◆ Teaching that abstinence is the only certain way to avoid pregnancy or sexual transmission of diseases;
- ◆ Stressing the value of abstinence while not ignoring young people who have had or are having sex;
- ◆ Providing accurate information about the health benefits and side effects of all contraceptives and barrier methods as a means to prevent pregnancy;
- ◆ Providing information about the health benefits of condoms and other barrier methods as a means to reduce the risk of sexually transmitted diseases, including HIV;
- ◆ Encouraging family communication about sexuality;
- ◆ Teaching skills for making responsible decisions about sex, including how to avoid unwanted verbal, physical, and sexual advances and how not to make unwanted verbal, physical, and sexual advances; and
- ◆ Teaching that alcohol and drug use can affect the ability to make responsible decisions.

The REAL Act would provide funding for states to implement comprehensive approaches to sex education in the schools—approaches that include information about both abstinence and contraception and condoms, from perspectives of both values and public health.

Why is the REAL Act Needed?

The health and future of every adolescent is shadowed by risk of sexually transmitted infections (STIs), including HIV, as well as by risk of involvement in unintended pregnancy.

- ◆ The rate of STIs is high among young people in the United States. Each year, U.S. teens acquire about four million STIs.⁷
- ◆ Experts estimate that about two young people in the United States are infected with HIV every hour of every day.⁸
- ◆ The Centers for Disease Control and Prevention (CDC) reports that almost 41,000 American adolescents between the ages of 13 and 24 had been diagnosed with AIDS by the end of 2004.⁹
- ◆ African American and Hispanic youth are disproportionately affected by the HIV and AIDS pandemic. Although only 15 percent of the adolescent population in the United States is African

American, these teens accounted for 73 percent of new AIDS cases among teens in 2004. Latinos ages 20 – 24 accounted for 23 percent of new AIDS cases in 2004 but represented 18 percent of U.S. young adults.^{10,11}

- ◆ While U.S. teen pregnancy rates are declining, teenage women in the United States still experience about 800,000 pregnancies each year; 74 to 95 percent of these pregnancies are unintended.^{12,13}
- ◆ A November 2006 study of declining pregnancy rates among teens concluded that the reduction in teen pregnancy between 1995 and 2002 is primarily the result of increased use of contraceptives. As such, it is critically important that teens receive accurate, unbiased information about contraception.¹⁴

Research shows comprehensive sex education to be more effective than abstinence-only-until-marriage programs in assisting young people to make healthy decisions about sex. Teenagers who receive sex education that includes accurate information about contraception and condoms are more likely than those who receive abstinence-only messages to delay sexual activity and to use contraceptives when they do become sexually active.^{2,3,4,5,6} Comprehensive sex education programs do not encourage teens to start having sexual intercourse; do not increase the frequency with which teens have intercourse; and do not increase the number of a teen's sexual partners.^{2,3,4,5,6} At the same time, evaluations of publicly funded abstinence-only programs in at least 13 states have shown no positive changes in sexual behaviors over time.^{15,16}

Public Opinion on Comprehensive Sex Education versus Abstinence-Only

Public opinion polls consistently show that more than 90 percent of Americans support teaching comprehensive sex education in high schools and in middle or junior high schools.^{17,18} In one recent poll, 94 percent believed that teens should be taught about birth control and preventing pregnancy; and seven in 10 believed that government funding should go to more comprehensive programming.¹⁸

Support for the Responsible Education About Life Act

More than 125 national and state organizations support The Responsible Education About Life (REAL) Act, including medical, civil rights, faith-based, family planning, educational, public health, reproductive rights, and HIV and AIDS service organizations.

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