

for abstinence-education (which I find quite humorous and which can be read at: <http://www.advocatesfor-youth.org/abonlydefinition.htm>), the federal government does not actually define the word "abstinence."

Consequently, some curricula have been found to effectively delay the age of first penile-vaginal intercourse; however, no research exists to prove that the same is true for oral or anal sex. Many people are under the false impression that oral sex is not as dangerous as intercourse - a recent survey reveals that one in four students who have not had penile-vaginal intercourse have had oral sex. The traditional "penile-vaginal" definition of sex is, of course, usually irrelevant in the context of non-straight relationships, so all same-gender sex could be considered being abstinent by that standard.

Then again, I guess one can't expect too much from a curriculum that neglects gender politics and simple biology. I certainly didn't learn what "intersex" meant in seventh grade, nor did I know that not everyone's body conforms to the scientific standard of "male" and "female". Beyond that, no one ever pointed out that gender is a social construct or that not everyone has to fit into society's standard of "man" or "woman".

These "abstinence-until-marriage" curricula do not just ignore LGBTIQ people - they neglect the concerns of women and biological females by withholding information about contraceptives. If a male impregnates a female, who has to hold the child in their body for nine months? Who is expected to take care of the child after the birth? Who is at a higher risk for sexual assault or rape? Who is at a higher risk for HIV? If you answered women or biological females to all of these questions, give yourself a gold star.

Sex is a greater risk for most women, biologically and socially. While young men are generally praised for their (hetero) sexual exploits, young women are constantly caught in a double bind, being deemed prude if they reject sexual advances and being labeled a slut if they enjoy sex. Withholding information about contraceptives from students facilitates an environment where women are powerless and straight men can be promiscuous with little consequence.

Purposefully denying students information about STDs and contraception has been a practice in North Carolina for years. In 1997, Franklin County school board officials ordered that pages of health textbooks about contraception and sexually transmitted diseases be torn out. Teachers were told to only discuss failure rates if the issue of contraceptives arose and, if asked about HIV, they were instructed to tell students

that the disease was primarily transmitted through contaminated drug needles and illegal homosexual acts.

This action was taken despite polls showing that 80-90% of adults nationwide support comprehensive curricula on sex education that include information on STDs and contraception. Furthermore, on average, only 5% of parents choose to not allow their children to participate in sex education. Opponents of comprehensive curricula cite high STD rates and out-of-wedlock births as proof of the failure of comprehensive sex education programs. The majority of programs still choose abstinence as the main focus of their curriculum, so the affects of comprehensive programs cannot be seen on a wide scale. One study found that a group of teenagers who had been through an abstinence-only program were less likely to report having sex within the following three months than a control group; however, no difference between the two groups was found after six and twelve month follow-up periods.

So why does the "abstinence-until-marriage" rule still persist? This trend is not hard to explain - it keeps "traditional marriage" supporters in power. As long as our government mandates that students not have sex until marriage, they can continue to alienate LGBTIQ youth and keep women barefoot and pregnant (or at least pregnant). Yes, abstinence is the only completely safe sex, and, despite what your teacher, preacher or school board officials tell you, it is possible to be abstinent and LGBTIQ-identified. However, sex should not be relegated to being simply a "perk" that comes with marriage - doing so blatantly ignores the health and social concerns of women and LGBTIQ people.

Sources:

Donovan, Patricia. "School Based Sexuality Education: The Issues and Challenges."

Family Planning Perspectives. Vol 30 Number 4 July/August 1998. <http://www.agi-usa.org/pubs/journals/3018898.pdf>

Stepp, Laura Sessions. "Half of All Teens Have Had Oral Sex." *Washington Post*. 16 sept

5. [http://www.washingtonpost.com/wp-](http://www.washingtonpost.com/wp-dyn/content/article/2005/09/15/AR2005091500915.html)

[dyn/content/article/2005/09/15/AR2005091500915.html](http://www.washingtonpost.com/wp-dyn/content/article/2005/09/15/AR2005091500915.html)