

Dear Governor McDonnell

By Jasmine Walker

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Office of the Governor
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Dear Governor McDonnell,

My name is Jasmine Walker, and I am a student currently attending James Madison University. Although I am a New Jersey native, I have lived in Virginia since elementary school and have experienced Virginia's school systems firsthand. When I first had sex education in Fluvanna County Middle School, I was taught comprehensive sex education. I found this program very effective as I now consider myself a well-informed, sexually healthy adult. However, I have recently heard of your request for a \$900,000 federal grant and a \$400,000 state grant to fund abstinence-only education in the State of Virginia (Walker, par. 2). Although I applaud your stern stance in supporting abstinence-based education, I wish to warn you that it has been proven that abstinence-based education is ineffective. Only teaching abstinence-based education is not an adequate use of our time or government funds, and it is dangerous to our youth.

Studies have revealed that kids who are taught sex ed in an abstinence-based school program actually become sexually active at a younger age than those who are taught comprehensive sex education (Darflinger 89). What is most unsettling, however, is that abstinence-based teaching has left children who have chosen to be sexually active uninformed and susceptible to unwanted pregnancies, incurable diseases, and psychological underdevelopment. I understand and respect your concerns, Governor McDonnell, but if you truly care about the safety of our next generation, then please take into consideration my point of view. Through extensive research, I have come to the realization that if our perception of sex education does not change, the situation could be dire.

Some worry that teaching sex education that is comprehensive as opposed to abstinence based will promote sexual activity. I acknowledge the concern that teaching comprehensive sex education will promote sexual activity. However, it has been proven that abstinence-based education is ineffective in preventing sexual activity. The main dilemma is that there are currently no laws regulating what information is taught in sexual education courses. There were laws proposed such as the Prevention First Act (2004) and the Guarantee of Medical Accuracy in Sex Education Act (2006) that required sex-ed programs to "refrain from using inaccurate medical information" (Darflinger 87). Unfortunately, Congress never passed these acts, and as a result, sex education courses may teach any information they want, even if it is not accurate. Since abstinence-only programs strongly advocate no sex before marriage, instructors sometimes choose to give false information, often as scare tactics, to discourage sexual activity. An example of this falsification was a school, whose name was not specified, that informed its students that "condoms were only 60 to 69% effective even though it is generally accepted that, when condoms are used correctly, they are 97% to 99% effective" (Darflinger 87). There are other alarming instances similar to this that have occurred, such as a school curriculum that stated "abortion leads to depression and suicide" and another that claimed "having sex puts women at risk for cervical cancer"

(Darflinger 86). These are both untrue statements. There are no exact statistics on how often false information is given to students, but I believe that one lie in our education system is one too many.

What frightens me the most about this information is the effect it may have on our youth's thought process. Despite the push for abstinence, our teens are still having sex and doing so without the proper knowledge. Since many have been taught, and now inaccurately believe, that condoms are generally ineffective, they may conclude, "Why use condoms at all?" As a society, we must realize that our teens, despite some of our wishes, are having sex. As shown in 2006 alone, "750,000 women younger than 20 become pregnant. The pregnancy rate was 71.5 pregnancies per 1,000 women aged 15-19, and pregnancies occurred among about 7% of women in this age group" ("U.S. Teenage Pregnancies" 2). Statistics like these should open our eyes and make us realize that it is our responsibility to keep our children and teens safe.

On the opposing end of the spectrum, we have European countries teaching comprehensive sex education, which is proven to be more effective in regulating sex in comparison to America, which generally supports abstinence-based education. The World Health Organization (WHO) found that "comprehensive sex education results in delayed sexual activity among minors" and that "abstinence-only programs actually led to earlier sexual activity instead of delaying it" (Darflinger 88-89). In response to this reality, European countries have taken action and there is now "access to contraceptives such as condoms in Europe, consistent comprehensive sex education in European schools, and widespread European public education campaigns" (Darflinger 88). As a result of its efforts, Europe is doing well compared to other countries in regulating teen sex.

The United States, on the other hand, is not doing as well in regulating teen sex because "Both the American teen pregnancy and birth rates range from 4 to 11 times higher than the respective German, French, and Dutch rates.... [Moreover,] the HIV prevalence rate in young men... ranges from one and a half to five times higher than the comparable French, German, and Dutch rates" (Darflinger 83). We are the country that is still in denial about the sexual behavior of our teens; therefore, our teens are the ones who are in the most danger. We are the country wasting valuable time and resources on a program that does not work for all. Our youth are the individuals putting their lives in danger, and we are the country that is not doing enough about it.

Mr. McDonnell, you might be concerned that teaching sex education will hinder the character of teens and create unhealthy individuals. But sex education actually creates healthier individuals both psychologically and physically, hence creating a developed individual. Researchers contend that "the human personality is so profoundly affected by sexuality that it must be considered as one of the factors which give to each individual's life the principal traits that distinguish it" (qtd. in Sliwiak 148). In short, sexuality is a factor that makes us who we are; hence, it should be discussed honestly. If information on sexuality is concealed or falsely stated, then the self could be falsely created, thereby hindering human development. Being truthful about every aspect of the body and sex is not just limited to teaching body parts and physical actions, but must also include feelings and morals. Just talking about the physical aspects of sexuality can cause a "divorce [between] sexual agency and subjectivity [feelings and emotions]" (Fields 126). This divorcing causes the individual to look at the body as an object disconnected from the self. This mindset can cause a lack of self-respect which can lead to a lack of sexual self-worth. If young people do not respect their bodies, then what will stop them from being promiscuous or caring whether or not they contract an STD? Being honest about sex and connecting sex to who we are will create individuals who are well developed and psychologically healthier.

We must also acknowledge that sex education is not all about sex; it is also about sexual health. Sex education courses will teach our youth how to handle bodily functions such as menstruation for females and prostate health for males. For example, my sexual education course taught me how to search for

irregularities in breast tissue through self-examination. If it were not for this education, I would not have been able to identify the irregular lump I found in my breast two years ago. After consulting a doctor, I had surgery to remove the benign cyst. I was fortunate that the cyst was non-cancerous, but what if another woman went through the same predicament I did but had no knowledge about self-examination? She could be at risk for breast cancer and not even be aware. The human body requires a lot of maintenance and attention that people may not know about, and sex education courses can enlighten them. Hence, sex education is important to maintain the physical well-being of our citizens.

Teens, in fact, want their parents to teach them sex education: “89% of [high school students] feel that parents should be responsible for sex education...[but] only 27% of students received such education in their families” (Sliwiak 149). In an email survey that I conducted, I asked my fellow classmates if they had received sex education from their parents. Out of 40 students, over fifty percent of students responded no. Teens want parents to be responsible, and the government feels as if parents should be responsible. But parents are statistically proven not to live up to these responsibilities. Many parents are putting their children at risk by not informing them of the realities of sex. Nevertheless, just because some parents choose to shirk the responsibility of properly educating their children does not mean that the government should too. If the government cannot find a way to help parents be more effective at becoming educators about sex, then the government must take matters into its own hands and teach teens themselves. Either way, this neglected issue must be addressed, for our youth are experiencing unwanted pregnancies, diseases and physical and psychological damage. It is time to make a change.

I hope that my letter has caused a change of heart. The children of Virginia are in danger. If we choose denial and teach abstinence-only education, then we are basically saying we do not care about the well-being of the next generation. Abstinence-only education has been proven to be ineffective and is not doing enough to stop our youth from participating in sexual activity. Teaching comprehensive sex education will create more physically and psychologically healthy individuals and prepare them for life's obstacles.

Thank you for your time,

Jasmine Walker

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