

Sex education in school

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Sex Education Sex education in the United States has experienced serious changes over the past three decades. It all started in 1981 the Reagan Administration, with federal funding promoting abstinence-only-until-marriage to sex education programs. The support of this abstinence only until marriage idea has increased exponentially since 1996. Although this approach seen to be beneficial to many in the sense at rates often pregnancy would decrease. Many others see the prohibitive nature of this approach to be controversial.

The public also show the need for sex education programs to include not only abstinence but also to include information about contraceptives as well. This excessive priority on promoting only one sex-education method seems to be at odds with what the high mass of adults and teenagers think is more important. For example in a the national survey published in 2007, out of 1000 adults and 100 teenagers organized by the National Campaign to Prevent teen and Unplanned Pregnancy.

In the survey it was acknowledged that even though most of adults (93%) and teens (90%) believe that providing young teens with information about abstinence is an important message to give out. In the same survey more than the half of adults (73%) and teens (56%) also believed that the young people need way more information about abstinence and contraception than what they are given today, rather than either/or. These results of having teens comprehend sex education are more consistent with the previous survey conducted such as programs that rather only promote abstinence-only-until-marriage.

More surveys have shows the promoting abstinence only has become more ineffective. The medical journal Archives of Pediatrics and Adolescents Medicine in 2005 to 2006 performed a surveys resulting with overwhelming support of 83% for a comprehensive approach and with only 36% supporting only abstinence education. In the January and February 2007 issue of PublicHealthReports announced that premarital sex is not out of the ordinary as many would think it is.

According to the reports by the age 20, 77% of applicants have had sex, 75% have had premarital sex, and 12% had married; by the age 44, 95% of the applicants have had premarital sex. After these results, many people argue that abstinence-only-until-marriage programs are neither practical nor realistic now days. Randy Elder a task force member of the Center for Disease Control and Prevention (CDC) reported in November 2009 Washington Post articles stating that “ There is sufficient evidence that comprehensive risk reduction efforts are effective. He further explains “ As regards abstinence education, after a similar look the task force determined that based on a number of problems with the studies presented to them there was insufficient evidence to determine their effectiveness. ” Author Kat long informs in her March 2008 article for the Gay Gender issues Web site called “ Abstinence Teaching Ignores LSBT’s. ” In her article it reads “ There rules imply that lesbian, gay, bisexual or transgender students will not fit into the ‘ expected standards’ of human sexuality.

They also infer same-sex relationships are less meaningful and legitimate than opposite-sex ones and may cause ‘ harmful’ effects. ” Also according to analysis by the Washington University law Review in an article titled “

Abstinence-only Education Fails African American Youth'. This article states that " Black adolescents' higher rates of sexual activity couple with evidence of their fundamentally different attitudes towards sex relative to Whites adolescents suggest that abstinence-only sex education is bound to be ineffective among Black youth. Some policies changes that are about to happen be President Obama appears to be ready to sign into law the 2010 Omnibus Appropriations Bill passed by the Congress in December 2009. This would be the first time since 1981 that abstinence-only-until-marriage sex education programs will not be receive any funding. Some of the abstinence programs would be replaced by comprehensive programs that target to reduce the number of teen pregnancy. This policy started in 2010. In the study by Margaret J. Blythe is a professor of pediatrics at University School of Medicine and chair for the Committee on Adolescence, American Academy of Pediatrics.

It states that " Comprehensive sexuality education emphasizes abstinence as the best option for adolescents, but also provides age-appropriate, medically accurate discussion and information for the prevention of sexually transmitted infections and unintended pregnancies. " People against comprehensive sexuality education don't understand that when this program also emphasized abstinence while still offering age-appropriate instruction to prevent sexually transmitted diseases (STDs) and to prevent unwanted pregnancies for teens who are having ex. With programs such as abstinence only have proven to delay sexual intercourse and also refuse to inform the youth about condoms and safe sex. Without this information it leaves the young people less prepared to protect themselves. In fact, not only is

abstinence-only programs ineffective but it also can cause harm to the young that may practice it. Abstinence-only provides incomplete and inaccurate information and resulting in participants failure to use safer sex practices once they start have intercourse.

In a national study, sexual health risks of adolescents who received abstinence-only education and those who received comprehensive sex education to those who received none. Teenagers who were reported having received comprehensive sex education programs before coming cross to any sexual intercourse were extremely less likely to report a teenage pregnancy compared to other teenagers that received no sexual education and while there were no effect of abstinence-only education. Some of the problems with abstinence-only education would be schools failure to help students understand and embrace their sexuality.

This has become a problem to particular for kids for color, who represent a big majority in many public schools around the country. Too many of the colored young teens are left to sort through this confusing times and are left with little or even no guidance. Blacks and Latinos account for 83% of teen HIV infections. Black girls are more than four times likely to get gonorrhea as their peers. Also a chronic bacterial disease known as syphilis has increased greatly among the Black teenage boys and slowly starting to increase among the Latino boys.

In late 2006, the federal health monitors announced that teenage pregnancy went up for the first time that year since 15 years. Teenage pregnancies were more common among Black and Native American teenage girls. Since 1997 the federal government had invested more than \$1. 5 billion dollars in <https://assignbuster.com/sex-education-in-school/>

abstinence-only programs, which were proven to be ineffective programs in which blocked and excluded information that could help young people to protect their own health. But the President Barack Obama administration's proposed budgets for Fiscal Year 2010 (FY10) to remove funding for abstinence-only programs.

Instead to create funding for programs that have been proven to be effective at reduce teen pregnancy, delaying sexual activity, or increasing contraceptive use. Not surprisingly, the only program that they found to work was comprehensive sex education programs. Researcher Douglas Kirby for the National Campaign to End Teen and Unplanned Pregnancy examined studies of prevention programs. Two-thirds of the 48 comprehensive sex ed programs studies had positive effects. * 40 percent delayed sexual initiation, reduced the number of sexual partners, or increased condoms or contraceptives use. 30 percent reduced the frequency of sex, including a return to abstinence. * 60 percent reduced unprotected sex. After many research done to determine whether abstinence-only or comprehensive sex education is better for the young teens. It has clearly showed that comprehensive sex education does not encourage teens to start having sexual intercourse, does not increase the frequency with teens have intercourse, and does not increase the number of teenage sexual partners. At the same time, surveys and evaluations have shown repeatedly no positive changes in sexual behaviors over time when it comes to abstinence-only programs.

Even though comprehensive sex education is very beneficial to teenagers it is very important that students takeresponsibilityfor their sexual health.

Caitlin Myers from Southern Methodist University (SMU) class of 2009, involved with the college's newspapers. As a contributing writer to the Daily Campus, wrote an article named "Sexual Health" which emphasizes that all students meaning male and female should have to take responsibility for their sexual behavior. Overall the only strategy that would work most effectively is comprehensive sex education.

Children and adolescents need accurate and comprehensive education about sexuality not only to practice healthy sexual behaviors as adults but also to avoid early risky sexual activity that may lead to health problems. Comprehensive sexuality education is an effective strategy for helping young people delay initiation of sexual intercourse. In several published and well evaluated studies it has shown that sex education is a better choice rather than abstinence-only-until-marriage. Work Cited "Children Have the Right to Comprehensive Sex Education" by Barbara Miner. Do Children Have Rights? Christine Watkins, Ed.

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