

SUMMARY REPORT

SEX EDUCATION: THE PARENT'S PERSPECTIVE

California Parents' Preferences and Beliefs on School-Based Sex Education Policy

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OVERVIEW

Ongoing and often rancorous policy arguments at the federal, state, and local school-district levels address the relative merits of different types of sex education. The conflicts between proponents of programs that exclusively teach abstinence-only-until-marriage versus programs that include instruction regarding contraception and protection from sexually transmitted diseases (STDs) are often characterized by strong emotional arguments. In this heated environment, it is important to understand where parents, the individuals most directly involved in decision making for their children, stand on this issue. To this end, the Public Health Institute's Center for Research on Adolescent Health and Development conducted the first in-depth statewide poll of California parents on this issue.

Background

Public support for comprehensive sex education has a strong professional grounding—most mainstream American education, health, and medical professional associations have formally endorsed school-based comprehensive sex education, including the American Association of School Administrators, the American Medical Association, the American Nurses Association, the American Psychiatric Association, the American Psychological Association, the American Public Health Association, the American School Health Association, the National School Boards Association, and the Society for Adolescent Medicine [1-6]. What's more, national polls have shown widespread support for including contraception and protection in sex education curricula among American voters, students, teachers, and health professionals [7-12].

Despite this widespread support for comprehensive sex education, much of the sex education provided by American schools is minimal and fragmented, with essential topics often omitted or inaccurately presented, especially those related to methods of contraception and protection for sexually active youth [13-16]. Although most American students receive some type of

COMPREHENSIVE SEX EDUCATION *is commonly used to distinguish approaches that include contraception and protection from those that strategically omit these topics.*

sex education by the time they leave high school [10], less than 10 percent receive complete and high-quality comprehensive sex education [1,17]. Instead, largely due to the federal funding policies of the last ten years, a growing proportion of students is receiving abstinence-only education, which withholds access to medically accurate and developmentally appropriate comprehensive reproductive health information [18,19].

California is the only state that has consistently opted out of the federally funded abstinence-only-until-marriage grant program (Section 510 of the Social Security Act) since its inception in 1996. This controversial program strictly requires teaching abstinence-only until marriage, and the program guidelines prohibit instruction in or promotion of the use of contraceptive methods [20,21]. In contrast, California passed the Comprehensive Sexual Health and HIV/AIDS Prevention Education Act of 2003 (SB 71). This act mandates that in districts choosing to provide sex education, it must commence by 7th grade and be age-appropriate, factual, medically accurate, objective, and cover all contraception and STD-prevention methods approved by the U.S. Food and Drug Administration.

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In spite of this model legislation and high levels of public support for comprehensive sex education, California still does not have comprehensive sex education widely implemented in its schools. A recent school-district survey found that although 94 percent of the middle and high schools sampled reported providing sex education or HIV/STD prevention education, 88 percent violated one or more provisions of California's sex education code, with nearly half (48 percent) of schools not covering all required topics [13]. California Department of Education staff found similar violations during compliance-review visits with individual school districts [22].

The contradiction between California's strong leadership role in supporting comprehensive sex education and the lagging performance of schools is difficult to understand. It has been suggested that superintendents, administrators, and educators at the regional school level have been hesitant to embrace the state-mandated comprehensive sex education programs for fear of parental backlash. Despite voter polls that show statewide support, some district-level administrators apparently believe that their district's parents are the exception.

We wanted to test that assertion. Our analyses provide the first detailed information about the breadth, depth, and motivational determinants of sex education policy preferences and beliefs among California parents — a critical and under-studied population of stakeholders. Because of the size and diversity of California, the study was designed to allow for regional and other subgroup estimates of parents' preferences, beliefs, and feelings.

METHODS



Data collection took place during spring and summer of 2006. We conducted a list-assisted random-digit-dial (RDD) survey of California parents with children aged 18 years or younger. The sample was derived from the population of all households in California, and was classified into five social-geographic strata (regions) consisting of contiguous groups of counties organized by geographic and demographic proximity (North/Mountains, Central Valley, San Francisco Bay Area/Central Coast, Los Angeles County, and South). A total of 1,284 parents completed the interview. An overall household response rate of .53 was calculated using the American Association for Public Opinion Research method RR3 [23]. Margins of sampling error ranged between $\pm .02$ and $\pm .03$ for full statewide-sample proportion estimates, and between $\pm .05$ and $\pm .06$ for full regional strata estimates.

Measurement and Analysis

The primary survey question asked a respondent's preference for one of three sex education policy options:

What do you think teenagers should be taught in sex education classes?

- (a) *ONLY about abstinence, that is, not having sex until marriage*
- (b) *ONLY about how to prevent pregnancies and the spread of sexually transmitted infections if they do decide to have sex*
- (c) *BOTH about abstinence AND about how to prevent pregnancies and the spread of sexually transmitted infections if they do decide to have sex*

We refer to the three options offered as abstinence-only, protection-only, and abstinence-plus. For most of the analyses reported, we combined the protection-only and abstinence-plus categories into a new category of protection-included, referred to subsequently by the commonly used label of comprehensive sex education.

Sample Characteristics

A majority of the 1,284 sampled parents was female (75%) and aged between 30 and 49 years (67%). The largest racial/ethnic subgroups were Hispanic (46%) and non-Hispanic White (38%). Twenty-eight percent of parents had earned a high school diploma or GED, and 37% had earned a college degree or higher. Household income varied, with 35% reporting a household income below \$40,000 and 38% reporting a household income above \$60,000. A majority of the parents was born in the United States (54%). Of foreign-born parents, the greatest proportion was born in Mexico (30%). Catholics represented the largest religious denomination in the sample (45%), and 19% of parents identified as born-again or evangelical Christians. A quarter of the parents reported attending religious services more than once a week, and another quarter reported

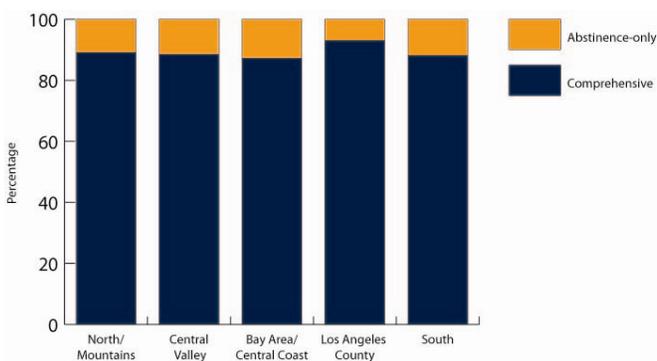
attending rarely or never. Thirty-seven percent of parents self-identified as very or somewhat conservative, 27% as middle of the road, and 24% as very or somewhat liberal.

RESULTS

Overall, 82% of the sample reported a policy preference for abstinence-plus-protection sex education, 7% for protection-only and 11% for abstinence-only. This yields a combined level of 89% support for the combined protection-included category, referred to here as comprehensive sex education, as compared with 11% support for the abstinence-only (protection-excluded) category.

Breadth of Support for Comprehensive Sex Education

Uniformly high levels of support for comprehensive sex education were found across all five regions (from 93% in Los Angeles County to 89% in the North/Mountains and Central Valley regions, 88% in the South region, and 87% in the San Francisco Bay Area/Central Coast region). In addition, large proportions of respondents from all race/ethnic groups preferred comprehensive sex education, ranging from 92% among Whites, 90% among Hispanics, and 89% among African Americans, to 82% for Asian Americans and 79% for “other.”



Parents across all age groups also showed high levels of preference for comprehensive sex education, with those under age 30 significantly more likely to prefer comprehensive sex education over abstinence-only education (94%). Similarly, parents of all education levels preferred comprehensive sex education, although the level of support differed slightly between education levels. The lowest level of support for comprehensive sex education was found among those with less than a high school education (84%). Support for comprehensive sex education did not vary significantly across income levels.

No significant difference was found in preferences for comprehensive sex education between those who self-identified as evangelical Christians (86%) and those who did not (91%). In addition, only small variations in support were found across levels of frequency of attendance at religious services. As compared with other groups, respondents who never or rarely attended religious services (96%) and those who attended 1-3 times a month (95%) were significantly more likely to prefer comprehensive sex education. Conversely, respondents who attended religious services once a week (84%) and those who attended more than once a week (69%) were significantly less likely to prefer comprehensive sex education, although all groups were still predominately supportive of comprehensive sex education.

A similar pattern was found for ideological leaning. Respondents who identified as very conservative were less likely to prefer comprehensive sex education, although they were still

largely supportive (71%). Conversely, both moderate (95%) and somewhat liberal (96%) respondents were significantly more likely to prefer comprehensive sex education.

When to Provide Sex Education

Respondents also indicated the earliest school level at which they thought selected topics should be taught, or that they felt the topics should not be taught at all. Although support for the teaching of various sex education topics depended on school level, the percentage of complete opposition (i.e., not supported at any school level) for all but one topic ranged from only 0.5% to 4% of the full sample of parents. Although 11 percent of surveyed parents had reported a preference for the abstinence-only approach, support for abstinence-only education decreased substantially when respondents were asked about the earliest school level at which “information about birth control pills, condoms, and other types of protection, and their role in preventing pregnancy and sexually transmitted infections” should be taught. Only 4% of parents preferred that this topic not be taught at any school level. An equivalent small minority (3%) objected to teaching abstinence as part of the curriculum at one or more school levels.

DISCUSSION

Consistent with previous national and state-level studies on this topic [7-12], a substantial majority of California parents prefer approaches to sex education that include instruction on how to prevent pregnancies and the spread of STDs for students who do decide to have sex. This support was consistently high across all regions of the state, and across all subgroups examined. Furthermore, when preferences were assessed in regard to specific sex education topics and grade levels, support for approaches that include information about birth control pills, condoms, and other types of protection for high school students increased to an astonishing 96% of the sample.

These findings show that California parents overwhelmingly support sex education approaches that are consistent with California's education code on the provision of sex education. A key provision of the code is that all sex education in California presented in grades seven and above must provide information about the value of abstinence, while also providing information about the effectiveness and safety of all methods of preventing pregnancy and reducing the risk of contracting STDs that have been approved by the U.S. Food and Drug Administration. At the same time, California parents are nearly unanimous (96%) in opposition to key requirements of Section 510, the federal abstinence-only-until-marriage funding program that requires teaching abstinence only until marriage and prohibits, at any grade level, the instruction in or promotion of the use of contraceptive methods [20,21].

California parents are nearly unanimous (96%) in opposition to abstinence-only program requirements that prohibit instruction in the use of contraceptive methods, regardless of grade level.

One notable finding of this survey was the uniformity of preference levels across the five socio-geographic regions by which the survey was stratified. While these regions exhibit considerable political and demographic variability, the levels of support found were surprisingly consistent. This finding, combined with the strong feelings and voting-behavior considerations reported,

contradicts fears that have been expressed by some education-code non-compliant school districts [22], which have argued that high levels of support for sex education were limited to the larger metropolitan areas of the state. The findings of uniformity of support across all five regions, along with the consistency of support found across categories of race/ethnicity, age, income, religious attendance, self-identification as evangelical Christian, and ideological leaning, demonstrate the remarkable breadth of support for comprehensive sex education in California.

A common belief that is reinforced by the popular sociological literature is that the sex education debates largely involve a clash between conservatives and liberals. High levels of support for comprehensive sex education among parents who self-identified as very conservative (71%) and evangelical Christian (84%) demonstrate limitations in this view.

Our results have important policy implications. The breadth and depth of support for comprehensive sex education found among California parents will inform future discourse on relevant policy initiatives in California. These include the state's legislated comprehensive sex education standards, its investment of state funds to support teen pregnancy prevention programs that include comprehensive sex education, and its decision to sacrifice millions of dollars each year of federal funding available through the Title V abstinence-only-until-marriage program. These findings also should be illuminating to school board members and administrators who are responsible for local school-district compliance with California's comprehensive sex education code.

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Full report: a complete peer-reviewed report of this study will be published in the journal *Perspectives on Sexual and Reproductive Health* later in 2007. For a pre-publication copy of this article, please email the author at nconstantine@berkeley.edu.

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