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NEW FINDINGS: COMPREHENSIVE SEX ED NOT WORKING IN U.S. SCHOOLS

CSE programs show ‘far more evidence of failure than success’

SALT LAKE CITY, UT – September 14, 2017 – The Institute for Research & Evaluation has released the results of a new analysis, entitled **“Re-Examining the Evidence: School-Based Comprehensive Sex Education in the United States,”** which examines the outcome research on sex education, with findings that contradict “effectiveness” claims for Comprehensive Sex Education (CSE) in U.S. schools.

In the report, commissioned by Family Watch International and private donors, the authors present findings from their in-depth review of 60 of the best peer-reviewed studies of CSE in U.S. school classrooms. Using an approach not taken previously, the reviewers evaluated the study results *according to criteria for program effectiveness derived from the field of prevention research*. Specifically, the researchers looked for program effects:

- On most-protective indicators (increased abstinence and/or condom use, decreased pregnancy or STDs),
- Lasting 12 months after the program,
- For the main (intended) teen population,
- Based on the preponderance of research evidence.

Applying these criteria to studies by both independent evaluators (where available) and program developers, they found “there is no scientific justification for the designation of comprehensive sex education in U.S. schools as ‘evidence-based,’ nor for its broad dissemination in school settings.”

Key findings about CSE’s lack of effectiveness in U.S. schools:

Teen Pregnancy: Only one of the 40 school-based CSE programs evaluated by the 60 studies reported a reduction in teen pregnancy, but that effect was short term, and a subsequent study in a different location found the same program actually *increased* pregnancy rates.

STD Prevention: None of the school-based CSE studies demonstrated a reduction in teen STDs, in fact, only two measured it.

Teen Abstinence: Although four of the 60 school-based CSE studies reported 12-month increases in teen abstinence, 12 other studies of the same programs found no such positive effects and one negative effect.

Consistent Condom Use: None of the school-based CSE programs showed effectiveness at increasing consistent condom use by teens. (*Consistent* use is necessary to provide meaningful protection from STDs.) Although there was one program that reported a long-term effect, a subsequent replication study conducted by independent evaluators—not the program’s developer—actually found that the program *increased* teen sexual risk behavior.

CSE's Intended Dual Benefit: None of the school-based CSE programs showed success at achieving the purported dual benefit of the “comprehensive” strategy—increasing both teen abstinence and condom use within the same teen population. No program produced sustained effects on both outcomes.

Negative Effects: Five of the 40 school-based CSE programs evaluated by these 60 studies produced significant negative effects (i.e., increases in sexual initiation, recent sex, oral sex, or pregnancy) for the target population or a substantial subgroup of teens.

These new findings present a different picture than the one typically depicted in policy debates about sex education. According to the authors, claims of CSE effectiveness are often based on one minimal indicator of positive impact (e.g., a short-term effect or a subgroup effect), while overall evidence of ineffectiveness or even harm is ignored. For example, three school-based CSE programs on the U.S. government's *Teen Pregnancy Prevention (TPP) list* (*¡Cuidate!, It's Your Game: Keep It Real, and Teen Outreach Program*) actually showed both null and negative effects in independent replication studies. Yet these programs are still listed as evidence-based programs and remain eligible for federal funding.

The Institute also examined the evidence from 18 abstinence education (AE) studies, the most-often mentioned alternative to CSE. (Like the CSE studies, these had previously been peer reviewed for research quality by HHS, the CDC, or UNESCO). Seven of the 18 AE studies showed 12-month increases in teen abstinence, with five of the seven conducted by independent evaluators. More studies should be done to replicate these initial positive results.

Additionally, there was strong evidence contradicting the claim that AE reduces the use of condoms by sexually active teens. Of the nine rigorous AE studies that measured condom use as an outcome, eight found no negative program effects, and one showed a 12-month *increase* in teen condom use (a positive effect).

Dr. Stan E. Weed, director of the Institute, concluded, “**There is far more evidence of failure than success for U.S. school-based comprehensive sex education programs, including those described by the federal government's TPP website as showing ‘evidence of effectiveness in reducing teen pregnancy, sexually transmitted infections, and associated sexual risk behaviors.’** When using a meaningful definition of effectiveness, the description of school-based CSE as ‘effective’ is simply not supported by this database that contains some of the strongest and most recent outcome studies of U.S. sex education available.”

Based on these critical new findings, the Institute has formally recommended that Secretary Price direct the Department of Health and Human Services to develop more rigorous standards for the designation of TPP program effectiveness, and that all of the programs on the TPP list be re-evaluated according to those criteria.

The detailed report with citations can be found at: institute-research.com/CSEReport

The Institute for Research and Evaluation (IRE) is a nonprofit research organization that has gained national recognition for its work evaluating sex education programs over the past 20 years. IRE has conducted program evaluations for federal Title V, CBAE, and Title XX projects in 30 states, and has evaluated sex education in three foreign countries, collecting data from more than 900,000 teens, and conducting over 100 evaluation studies. IRE staff members have published articles in professional journals and presented at professional conferences and workshops. Dr. Stan E. Weed, Founder and Director of IRE, has served as a national consultant for federal Title XX and CBAE projects, and was a charter member of the National Campaign to Prevent Teen Pregnancy. He has been invited to provide expert testimony about sex education to state legislative bodies, the U.S. Senate, the U.S. House of Representatives (April, 2008), and the White House (June, 2009).