School Stories: Reporting on Education in New York City

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Sex education in the city
By Julie Zeveloff

When she was in seventh grade, Katherine George and a group of her peers were asked to choose an issue of importance to them for a community advocacy project. The 25 girls, all middle schoolers from the South Bronx, chose teen pregnancy.

“We thought teen pregnancy was one of the main issues in seventh grade,” said Katherine, 14, now a freshman at the High School of Economics and Finance in Manhattan. “We all knew girls that were pregnant,” she said.

The girls circulated a petition to bring sex education to the seventh and eighth grades at their school, the Rafael Hernandez Dual Language Magnet School in the Bronx. More than 200 students, teachers and parents signed on. But the idea never came to fruition.

Principal Leticia Rosario said that the school did not implement sex education lessons because the Department of Education only makes the curriculum available to high schools.

“I didn’t have much to say because that wasn’t really in my purview,” she said, explaining that the girls would need to petition the Department of Education to change the policy.

But the students and other advocates of sex education blame what they say is a prevailing notion that “parents won’t approve” as one of the main obstacles to introducing such lessons in health curricula.

“Historically, this has been a real hot-button issue in New York, but when I say historically, I’m talking 20 years ago,” said Nancy Biberman, president of the Women’s Housing and Economic Development Corporation, the Bronx-based community agency that runs the after school program and has fought to bring sex education to the city’s middle and high schools.
Sex education in schools continues to be a hotly contested topic for educators, and with the largest public school system in the United States, New York City is at the center of that debate. It is a city where economic and educational disparities translate to dramatic differences in incidence rates of chronic diseases, STDs and HIV and teen pregnancy. But it is also a city where sex education varies widely.

In September, New York State rejected $3.5 million in federal funding for an abstinence education program, becoming one of 17 states to turn down the federal funds.

"The Bush administration's abstinence-only program is an example of a failed national health care policy directive," said state health commissioner Richard F. Daines in a statement posted on the Health Department's web site. He added that the policy was "based on ideology rather than on sound scientific-based evidence that must be the cornerstone of good public health care policy."

The following month, Schools Chancellor Joel I. Klein announced the formation of an Office of Fitness and Health Education, which would be jointly supported by the city's departments of health and education. Among other tasks, the department recommends sex education curricula to schools, but many advocates complain that these recommendations are not put into practice in any consistent way.

These decisions come at a time when teenage pregnancies have reached an all-time high. In 2005, the pregnancy rate in New York City for women aged 15 to 19 was 94 per 1,000 women, the highest rate since the city's Department of Health and Mental Hygiene began reporting these statistics in 1997. In the South Bronx, that number jumps to 148 pregnancies per 1,000 teenage women.

In a city where high school graduation rates are below 50 percent, the link between teen pregnancy and the dropout rate is an area of major concern. A recent national study by the Bill and Melinda Gates Foundation found that one third of female dropouts said that becoming a mother significantly influenced their decision to leave school.

"That's why this is an education issue," said Biberman. “It’s every bit as important as test scores,” she said, explaining that if teens learn how to prevent pregnancy in school, they will be less likely to have children and drop out.

Across the country, sexually transmitted disease infection rates are soaring as well. One in four teenage girls has a sexually transmitted disease, according to the latest figures from the National Centers for Disease Control and Prevention.

Advocates of abstinence-only education argue that if teens are taught only about the dangers of sexual activity, they will avoid it. But research shows that teens still have sex, regardless of whether they know the consequences. A survey by the New York City Department of Health showed that 48 percent of high schoolers admitted to having had sex.

Last week, researchers at the University of Washington released a study that compared the sexual health risks of teens who received no sex education, abstinence-only instruction and what is referred to as “comprehensive” sex education. This is defined as programs that include “abstinence messages, but also provide information on birth control methods to prevent pregnancy and condoms to prevent STDs.” The study found that teens who learned about contraception were not at any increased risk to have sex or contract an STD. "Adolescents who received comprehensive sex education had a lower risk of pregnancy than adolescents who received abstinence-only or no sex education,” the study concluded.

The state mandates certain standards for general health education, including how long such sessions should last, but does not offer specific guidelines for sex education, aside from a required HIV prevention lesson.
Because the state provides little oversight or regulation for health education, even “mandatory” lessons are ignored in some schools, said Biberman. “Whether or not it is happening is anybody’s guess,” she said. “Nobody comes in and checks, and it’s not on the school report cards.”

The city’s new Office of Fitness and Health recommends certain comprehensive health programs for all grades but does not enforce these curricula, so sex education programs vary widely throughout the city. Though the city could choose to mandate the curricula, so far it has not, instead offering the programs to principals and allowing them to decide whether or not to use them.

Shari Basis, a health and physical education teacher at Townsend Harris High School in Queens, said that she has seen inconsistencies in the teaching styles, and timing and frequency of sex education at other city high schools.

“It would help if someone could … make sure it’s being taught the right way,” she said. At Townsend Harris, tenth graders learn about human sexuality as a three-week component of the semester-long health curriculum.

While in many schools, sex education is taught as part of a more general health education curriculum, at other schools sex education is not taught at all in the classroom but is left to the occasional class lecture by a visiting health official.

Planned Parenthood of New York City offers two of these outside workshops, a teen advocate program and an adult role-model program to train parents to talk to their children about sex. Though both series are offered widely throughout the city, most are offered through community organizations where attendance is voluntary for teens.

“I think that the outside-of-school programs are great, but they don’t necessarily reach every student, so we definitely think it should be taught in all the schools,” said Samantha Levine, director of communications at Planned Parenthood.

This school year, the Department of Education updated its recommendations for sex education in all grades. For high schools, this means the addition to the basic health curriculum of a program called “Reducing the Risk: Building Skills to Prevent Pregnancy, HIV and STD.” Reducing the Risk emphasizes “refusals, delaying tactics and alternative actions students can use to abstain or use protection,” according to the program’s overview. It also includes lessons on condom usage and other safe-sex practices.

Reducing the Risk ranked as an “effective school-based sex education program” in a recent study comparing 16 such programs by Advocates for Youth, a Washington, D.C.-based non-profit that promotes comprehensive sex education.

Reducing the Risk “is a great first step,” said Levine, who added that in order for the program to be effective, teachers need to be properly trained and the Department of Education must follow up to ensure that schools carry out the program.

“We think that sex education should be a part of standard education, the same way that math or reading is taught,” said Levine. “We are trying to work with the city to ensure that every student gets sex education in every grade.”

Planned Parenthood of New York City recently launched an online letter-writing campaign, asking people to write letters to Chancellor Klein asking for mandatory sex education.

Advocates like Biberman say it’s not just the high schoolers who need particular attention.
“The kids who are most vulnerable are the middle schoolers,” said Biberman. “As it stands now, the only curriculum that’s being offered – on a discretionary basis – doesn’t teach how to prevent unwanted pregnancies, other than abstinence.”

Currently the health curriculum of the middle grades in New York City does not cover pregnancy or sexually transmitted diseases, and only mentions abstinence, in the context of maintaining a healthy body.

Levine says that sex education is possible for every age, and that the most effective curricula start as early as kindergarten. The youngest students should learn the names of body parts and “good touching and bad touching,” she said.

At a City Council hearing in November, Biberman urged the council members to enforce the newly adapted sex education curricula in all middle and high schools.

She says that in most suburban towns surrounding New York City, where parents control boards of education, mandatory sex education programs were implemented long ago. In Westchester County and Nassau County for example, students learn about reproduction, sexually transmitted diseases and modes of infection as early as sixth grade.

In New York City, parents are often blamed for keeping sex education out of the schools. However, Basis, the health teacher from Townsend Harris, said that in her 30-year career teaching sex education, only a handful of parents have ever pulled their children from the class. Nearly all of those parents, Basis said, did so for religious reasons.

At LaGuardia High School, where learning about human sexuality is a component of health classes, parents heard an overview of the curriculum at a Parents’ Association meeting last year.

“It didn’t stick much in my mind; there wasn’t anything objectionable in it for me,” said Sydnie Grosberg Ronga, the LaGuardia Parents’ Association co-president and the mother of an eleventh grade girl. “I just think it’s important that it is talked about when they are not with their parents,” she added.

Ronga said she thought sex education should begin in middle school, because that is when teens become sexually active. “Especially in New York, we are just being stupid to wait,” she said.

Biberman’s organization started advocating for sex education two years ago, when Katherine and her friends started their public service project.

Though the Rafael Hernandez School never added a sex education component, the girls who began the effort have continued to advocate for sex education in other ways. Several of them spoke at the City Council hearing with Biberman in November. Though the girls headed to high schools scattered throughout the city, five of them still meet at the Rafael Hernandez School on Thursday afternoons to learn about contraception, sexually transmitted infections and pregnancy. They plan to become peer educators for students in local afterschool programs.

Katherine’s mother encouraged her participation in the advocacy project. “She feels like it’s a program that will help many,” Katherine wrote in an email.

“There is a vast misconception that parents don’t want their kids to learn these things,” said Sara Stumbar, a student at Columbia University’s School of Public Health and a volunteer for the student advocacy project. In high schools, parents are asked to return a form if they don’t want their children to receive condoms from the school nurse. At her high school, just a few parents sent the form in, Katherine said.
Stumbar, who is training the girls to be peer educators, generally chooses a specific topic each week to review with the group. Last week, a discussion of the virus known as HPV included modes of protection and long-term effects.

Stumbar said she is often surprised by how little the girls know. “Most of them have not received any form of sex education although they are advocating it,” she said. Katherine said that among her peers, misconceptions about sex loomed large, and that they often had nowhere to turn for answers.

By the time students reach middle school they have often been exposed to sex on television and in movies, Katherine said. She says sex education should start at age 11 or 12 because that is when she thinks peer pressure begins and students become conscious of sex.

Katherine, who remained in the public school system, said that the health curriculum for freshmen at her high school included two weeks of comprehensive sex education. The teacher showed videos for many of the lessons, including a tape of a live birth. “It was nasty!” Katherine exclaimed. “Overall, it was really good.”

But experts say that until such lessons get into the classroom in a more formalized way, they won’t make an impact on students in terms of safer-sex practices.

“The problem is, afterschool programs are not mandatory,” Biberman said. “The people you are reaching with your afterschool programs are the ones you are least worried about anyway. It’s the ones who just walk out the door that we are most worried about.”

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